Supplementary information when COVID-19 exposure occurs in the workplace

Safe Work Australia provides guidance to workplaces on what actions should be taken if there has been an exposure within its operations. This is summarised within the infographic below and can be accessed on-line via clicking on the image or here.

The Australian Institute of Health & Safety (AIHS) is providing further supplementary information to its members and associated organisations to ensure that risk of workplace transmission can be reduced to so far as reasonably practicable. This includes acknowledging that the Public Health system can face periods where demand for its services outstrips its ability to respond in a timely manner.

In a context of persons conducting a business or undertaking (PCBUs) in workplaces operating in areas where there is elevated or high levels of COVID-19 community transmission, the AIHS recommends a precautionary approach in setting workplace risk tolerance levels. This includes not waiting until the Public Health system conducts Contact Tracing of direct close contacts of affected workers and directs them to self-quarantine but rather workplaces conducting their own workplace follow-up actions and inquiries to complement the Public Health response.

Not promoting workplaces ability to compliment contact tracing processes is akin to leaving a fire extinguisher on the wall and waiting for the fire services to arrive.

Duties of Organisations and Officers

Under work health and safety (WHS) laws in Australia, employers (PCBUs) owe a primary duty of care to workers and other persons who may be affected to ensure their health and safety while at work so far as is reasonably practicable. The duty extends to providing and maintaining a safe working environment and safe systems of work, even during the current pandemic. Determining what is reasonably practicable and discharging that duty of care requires workplaces to adopt a proactive risk management approach.

This may well be above current Public Health Directions depending on factors affecting what is deemed ‘reasonably practicable’.

Officers must exercise due diligence in risk management and employees and employee representative groups should not accept any delay between a workplace being able to investigate and identify these likely close contacts, and prevent potential transmission remove them from the workplace and when contact tracing teams speak to each individual.

It is on this basis that AIHS advocates that PCBUs and workplaces be proactive in acting on their WHS duties and obligations to reduce risk to as low as reasonably practicable. This includes the cleaning recommended by SafeWork Australia as well as PCBUs in workplaces conducting inquiries and case management of confirmed and close contacts to support employees and complement existing State and Territory Health Department operations.

Officers should lead this discussion on risk tolerance levels within their workplaces as they have additional responsibilities in relation to WHS in their workplace, including in relation to COVID-19. An Officer is generally:

- the owner or operator of a small business
Supplementary steps to ‘Identify & Inform’ stage

The AIHS is advocating that its members and associated organisations undertake the following steps should a confirmed COVID-19 case have entered a workplace:

1. Workplaces should nominate an occupational health and safety professional or other suitably qualified allied health professional to undertake preliminary investigation to identify likely close contacts as per the current definition of close contacts defined in the COVID-19 National guideline for public health units issued by the Federal Department of Health. This may need to be a manager of small or medium sized businesses without access to these resources.

2. This nominated person should contact and conduct a ‘care’ conversation with the affected employee identifying:
   a. How the support services of the organisation can be leveraged by the affected employee whilst away from the workplace and a communication schedule when the team will check in on the employee, and;
   b. Identify the period in which the employee was within the workplace during the period extending from 48 hours before the onset of symptoms, and;
   c. Using prompts, and open questions to help identify those employees within the workplace that the affected employee may have had contact with which would deem them a close contact.

These discussions should occur in well ventilated spaces (ideally outside) and both individuals should be wearing masks.

3. The nominated individual should facilitate the collection of information which may support the close contact identification process such as: rosters, break scheduling, site access card data, proximity recording technology, site entry records, CCTV and visitors’ registers to identify who may meet the definition of a close contact.

4. This workplace information should then be reviewed against the affected employee’s statements from the care conversation and a list of employees or others who likely meet the definition of a close contact should be created.

5. For quality purposes, a separate employee should then review the list of likely close contacts against the full suite of information to validate the robustness of the process. This could also be a Health and Safety Representative.

6. Once this list has been identified a private discussion should occur with each employee outlining that they have likely been exposed to the requisite degree to meet the definition of a close contact. It should be made clear to the employee that a workplace cannot determine an employee to be a close contact as only a State or Territory Health Department can do this. A workplace PCBU should then support these likely close contacts to remain away from the workplace until such time that they are contacted by the State/Territory Health Department Contact Tracing Units with further information. They should be provided the local fact sheet which provides guidelines and FAQs for close contacts. The NSW example of the fact sheet can be located online here. For further information associated with leave provisions and directing employee to work away from the workplace can be found on the Fair Work Ombudsman website here.

7. In relation to ensuring that employees have transport to their home or to a medical facility, workplaces should provide a face mask should an employee not have one to use. They should also encourage an employee who plans on using a rideshare or taxi service that they sit in the back seat and request that the windows are wound down or, in the case of rain, elevated levels of non-recirculated air conditioning are put in place by the driver.

8. The nominated individual should then contact the State or Territory Health Department and when requested outline to the contact tracing unit the names and contact details of likely close contacts who have been identified and supported to remain away from the workplace.

Throughout the above process there should be a focus on workplaces to not to generate or perpetuate stigma associated with contracting or being exposed to the virus. Recovery from an illness can be elongated if employees feel they will not be supported in their return to work journey. Additionally, employees may not come forward to their employer if they have symptoms or were exposed to the virus should they not feel psychologically safe.
Workplaces have a duty to their employees and the communities in which they operate in to support and compliment the Public Health response to COVID-19. Through the implementation of robust, risk assessed, and evidence-based measures Officers of these workplaces can help build back better our economy and the communities in which they operate in.

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