# WATCH DISABILITY SERVICES PANDEMIC RESPONSE PLAN



#### Purpose of this Plan

This plan is to provide service and business continuity, protection and reassurance to clients and staff of WATCH Disability Services in the event of a pandemic or pandemic like event. The activation of this plan is to be made by the CEO in conjunction with the Committee of Management or in their absence through the management delegation process.

This document is intended to act as a guide only and should be tailored to meet the unique circumstances of the pandemic threat, advice issued by the Chief Medical Officer for Australia, NDIS Commissioner department, DHHS, Victorian Government and common sense, guided by the WATCH management team.

#### Objectives

- Provide timely and accurate information to our clients and staff
- To reduce the risk of serious illness and death
- To reduce the emergence/spread of a potential pandemic outbreak at WATCH, to the extent that this is possible.
- Maintain continuity of WATCH client support during a pandemic for as long as possible

#### Context

WATCH is a small service provider of approximately 30 staff. Services provided are primarily Day Service with a small percentage of In Home and Social Participation programs. The majority of our clients are not reliant on daily staff for life essential tasks.

### **Response Overview**

Phases	What It Looks Like	Trigger Points	Relevant Documents
One	Planning, updating records, pandemic education, increased hygiene awareness, keeping people informed and monitoring risk.	<ul> <li>Evidence of pandemic</li> <li>Victorian Government directive</li> <li>DHHS Health department</li> <li>NDIS Commissioner</li> </ul>	<ul> <li>Phase one operational plan</li> <li>Emergency equipment list</li> <li>Vulnerable client list</li> <li>Phase one info sent to clients/ families/carers</li> <li>Information session with all staff</li> </ul>
Two	Limiting environmental opportunities for exposure, significant hygiene focus, avoiding unnecessary close contact, degrees of self isolating based on risk factors.	<ul> <li>Increase in local community transmission</li> <li>Government directive</li> <li>Industry best practice recommendations</li> <li>Concern from WATCH management team that rapid es-</li> </ul>	<ul> <li>Update to clients, families/ carers</li> <li>Update to staff</li> </ul>

calation is likely

Phases	What It Looks Like	Trigger Points	Relevant Documents
Three	Quarantines, enforced lockdowns, significant changes in how the community does business	<ul> <li>Government directive</li> <li>Breakout within WATCH community</li> </ul>	<ul> <li>FAQ for staff</li> <li>Update to clients, families/ carers</li> </ul>
		<ul> <li>Significant spread within similar community groups in Victoria</li> </ul>	
		Clients choosing to self	

isolate

Phase One Operational Plan

# Triggers

- Evidence of pandemic
- Victorian Government
- DHHS Health Department
- NDIS Commissioner

### **Business Functions**

Action		Elements	Who will do it?
Review pandemic plan and related documents.	•	Pandemic Plan	CEO
Update to reflect nature of current threat.		Emergency Management Policy	Program Manager
	•	Related Government Documents	
Nominate pandemic coordinator	•	Identification of management team	CEO
		person	Program Manager
Review essential supply needs and place order	•	Use essential items list	Program Manager
Communicate with clients and staff re: expectations and potential service changes	•	Reassurance email/letter outlaying what to expect next	Program Manager
Cash flow analysis to allow for annual and Long Service Leave payouts	•	Presume all leave will be expended and no revenue coming in	CEO
		Bring all billing up to date	
		Consider requesting payment arrangements for payroll tax or BAS	
	•	Consider client sick leave may counteract or exceed staffing demand reducing the need for staffing cover	

#### **Client Support**

- Review high risk activities (large group gatherings).
- Display Easy English directions re: the virus, what to do and good hygiene

### **Staffing Functions**

Provide staff with information about • the pandemic, including virus, what to do and good hygiene practices

Source equipment needed to protect • staff

- Risk access timetabled pro- Program Manager grams
- Look for pre-existing templates Program Manager (NDIS website, Vic Health)
- Look for pre-existing templates CEO
   from NDIS, Vic Government
   Program Manager
- Guide staff on how to respond to concerns or questions raised by clients
- Monitor for any undue anxiety or concern in staffing team
- Consider stock availability and Program Manager government advice regarding technique and need.
- Hand sanitisers at this level recommended, and gloves

#### **Infection Control**

Identification of any training or upskilling to • deal with pandemic i.e. Infection control review

Sterilisation program increased

- On line Infection Control video from Program Manager NDIS
- Response to be based on relevant Program Manager health information given regarding virus i.e.; Office, workrooms sterilisation (daily for common touch surfaces)
- Move to single use paper towels, no fabric cloths
- Physical contact review (no hugging, handshakes or closed spaces meetings)

## Phase Two Operational Plan

### Triggers

- Increase in local community transmission
- Government directive
- Industry Best practice recommendations
- Concern from WATCH management team that rapid escalation is likely

#### **Business Functions**

Key business roles identified and training of back up staff in essential duties

Limiting Business Growth

 Avoid venues such as Cafes, Public Program Manager Swimming Pools, Movies, Public Transport, or any crowded space

- Move to phone meetings wherever possible
- Clients and staff given alternative Program manager contacts
- No new clients to be accepted in this CEO period unless critical to the clients safety and wellbeing
   Program Manager
- No new staff to be employed in this period unless critical to maintaining client support or business continuity.

#### **Client Support**

Cancelation of group events

Individual social participation

- Support to activities in spaces of over 100 Program Manager people to cease immediately
- social groups (Saturday, Thursday) to be modified to parks etc.
- Identify high risk areas (gyms, movie Program Manager cinemas, bowling swimming, shopping centres) and recommend limiting time, finding safer alternatives.
- In home support to be negotiated on a client to client basis depending on circumstances. (Staff availability, risk to client, risk to staff)

#### Staffing

Staff notified of employment arrangements • if impacted by pandemic

Base Retainer

- Permanent part time and full time CEO staff will be asked to use their sick leave, annual leave/long service leave in the event of suspicion of illness, illness or mandatory shut down periods.
- If staff (including casuals) have no annual leave etc. to use, they will be offered a base retainer to meet their personal financial requirements in the event of illness or mandatory shut down periods. This will be reviewed at 8 weeks closure mark.
- No medical certificates will be required for mandatory shut down.
- The base retainer will be repaid by CEO staff over time by an instalment plan once pandemic ceases. Staff will need to sign an agreement form to repay WATCH

#### **Infection Control**

Increase infection control program

- Increase disinfecting of high touch surfaces in the Centre and in clients homes after each activity
- All visitors to office/programs asked to use hand steriliser upon arrival
- Blue Sky asked to increase cleaning of hard surfaces each night with high grade cleaning products which are recommended for virus control

# **Phase Three Operational Plan**

### Triggers

- Government directive
- Break out within WATCH community
- Significant spread within similar community groups within Victoria
- Clients choosing to self-isolate

#### **Business Functions**

Mandatory shutdown, breakout at WATCH

- Staff, clients, families and carers informed of shutdown
   Program Manager
- CEO's and Program Managers' email and phone number given to all of WATCH community for ongoing communication as necessary
- Taxi service and other services impacted by WATCH closing are notified
- Committee of Management and NDIS
   notified

#### **Client Function**

In home support option

#### Staffing

In home option

Staff to stay at home

### **Infection Control**

Best practice in home hygiene processes

- Depending on whether WATCH shuts CEO Program manager down because of an outbreak of the virus or mandatory shutdown, some clients may need in home support.
- Staff will have the option of working 1:1 CEO
   in home if allowed
   Program Manager
- Staff (FT/PT) to use sick leave, annual leave and long service leave. Once this is exhausted given the option of accessing a retainer for the extent of the closure (to be re-evaluated at 8 weeks) which will be paid back to WATCH at a later date.
- Casual staff given the option of accessing a retainer. (as above)
- Individuals reminded to maintain good Individuals home health and hygiene.
- Follow any Government directives

#### Recovery

The aim of recovery phase is to restore all business and support functions to pre-pandemic level. Considerations to be made in transitioning back to this will include:

- Official advice regarding the pandemic having ended and permission for a return to business as usual
- Evaluating the risk and nay additional vigilance required around a second wave of the virus
- Considering the transition of clients and staff who may be fearful, fatigued or emotionally fragile after isolation periods, potential sickness and the loss of loved ones
- Considering emotional support needs of the team if loss of clients lives has occurred through the period
- Any practical support for clients that may be required immediately
- Ensure thorough clean of all shared spaces before people return
- Conducting a post pandemic review to make any improvements or changes to the WATCH pandemic plan.