

**COVID-19 Outbreak Management Preparedness Self-Assessment Tool for Alpine Resorts Accommodation**

## Version 1.0, 19 June 2020

## Background

This tool has been developed to assist Alpine Resorts accommodation facilities to assess their preparedness to actively plan for and respond to COVID-19 outbreaks and must be completed prior to visitation by the Department of Health and Human Services (DHHS) Infection Prevention and Control (IPC) Team.

The self-assessment tool comprises a checklist of topic areas that each Alpine Resorts accommodation facility provider should address based on local conditions. This tool is not intended to be a comprehensive set of mandated instructions nor an audit tool.

Alpine Resorts facility providers should seek assistance from DHHS and Resort Management Board (RMB) for advice and support in the event of COVID-19 outbreaks at their facility(s).

## OBJECTIVES

This self-assessment tool establishes requirements for organisational preparedness in relation to:

* Adherence to infection prevention and control strategies
* Capacity to care for patrons/ staff\*\*
* Internal and external communications
* Surge capacity
* Post-COVID-19 recovery phase

All Alpine Resorts facilities must prepare a COVID-19 Outbreak Management Plan that identifies measures to be taken in order to:

* Prevent the spread of COVID-19
* Identify and isolate persons with COVID-19 and report to key internal and external stakeholders including the relevant government public health authority (e.g. DHHS)
* Care for persons with confirmed or suspected COVID-19 in exceptional circumstances where transport home or alternate accommodation cannot be arranged
* Care for persons with confirmed or suspected COVID-19 as part of broader surge management
* Communicate action plan requirements internally (e.g. to the staff) and externally (e.g. service providers who come onsite on a regular basis, DHHS, local health service provider(s), volunteer organisations) and ensure compliance
* Monitor and manage staff with potential for exposure to COVID-19
* Monitor and manage the impact on patrons, staff and business continuity.

\* Staff – inclusive of volunteers and service providers, contractors, trades who come to site.

## Index

Key component 1: [Control and Command](file:///E%3A%5Cmelissa%5CInfection%20control%20consulting%5CDHHS%5CPre-assessment%20tool%5CDH-Influenza-Pandemic-Planning-Desktop-Scenario-Testing-Kit-v3.0.pdf)

Key component 2: [Communication](#_key_component_2:)

Key component 3: Logistics and supply Management

Key component 4: Infection prevention and control

Key component 5: Continuity of essential services

Key component 6: Surge capacity

Key component 7: Human resource capabilities

Key component 8: Symptom screening and alert process

Key component 9: Essential support services

Key component 10: Case management

Key component 11: [Recovery](#_Key_component_9:) post COVD-19

**If you suspect you may have a patron or staff member with COVID-19 call the dedicated coronavirus hotline on 1800 675 398.**

## Description of Alpine resort facility

|  |
| --- |
| **Facility/Building name:** |
| **Address:** |
| **Type of accommodation****: Resort hotel accommodation  Ski lodge  Apartment block other, specify** |
| **Services provided on site: Accommodation Meals Restaurant Bar and beverages area Café Laundry Cleaning  Pool/spa  Gymnasium  Retail shop Ski hire  other, specify** |
| **Key contact name:**  | **Role:** |
| **Email:**  | **Tel:** |
| **Maximum occupancy:**  | **Total No. of rooms:** |
| **No. of self-contained rooms/units (i.e. private kitchen and bathrooms:** | **No. of rooms with private bathrooms only:** |
| **No. of rooms with private kitchen only:** | **No. shared kitchens:** |
| **No. shared bathrooms** | **No. shared living areas (dining rooms/lounge rooms/ common rooms:** |
| **No: Pool or spas:** | **Other, specify:** |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe****If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key component 1: Command and Control***A comprehensive COVID-Safe Operating Plan is essential for effective ALPINE facility COVID-19 outbreak management response. It clearly defines roles and responsibilities of all functional staff and authorities in advance of an event. All ALPINE facilities should review and adapt existing emergency management plans to include specific COVID-19 responses based on Department of Environment, Land, Water, and Planning (DEWLP) Commonwealth and DHHS guidance based on their setting. Consider taking the following actions.*   |
| 1.1 | Consider the roles and responsibilities to address COVID-19 preparedness planning. Your local outbreak management team could include:  | *The outbreak management team is a structure established to identify and promptly respond to the COVID-19 pandemic and local outbreaks. The team should activate the ALPINE facilities responses and direct business operations as appropriate.* |
| * administration (perhaps ALPINE facility manager)
 |  |  |  |
| * reservations coordinator / reception staff
 |  |  |  |
| * local health service staff
 |  |  |  |
| * ancillary services - maintenance
 |  |  |  |
| * ancillary staff - catering (head chef, restaurant manager)
 |  |  |  |
| * ancillary services – retail manager/staff
 |  |  |  |
| * ancillary services – bar and beverage services
 |  |  |  |
| * ancillary - laundry, cleaning and waste management (housekeeping supervisor)
 |  |  |  |
| * external ancillary services providers - cleaning services (housekeeper supervisor)
 |  |  |  |
| 1.2 | Ensure local healthcare service are briefed about the ALPINE facility COVID-19 outbreak management plan and involve them in the planning process if possible. |  |  |  |
| 1.3 | A person has been assigned responsibility for coordinating the ALPINE facility COVID-Safe operations plan response and activities, including a COVID-19 emergency management team leader (with back-up, if available). Insert name(s), title(s) and contact information: Team leader (Name, Title, Contact information): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Backup (Name, Title, Contact information): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 1.4 | A person (could be the same person as 1.3) has been assigned responsibility for monitoring DHHS, Department of Health (DOH) and DEWLP advice and updating the COVID-19 team leader and members. (See recommended resources below). (Insert name, title and contact information of person responsible.) Primary (Name, Title, Contact information):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Backup (Name, Title, Contact information):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 1.5 | Consider a list of backup staff for members in the key areas is identified and up to date (i.e., in case someone is unwell or absent from work). |  |  |  |
| 1.6 | Outbreak plan is in place and roles and responsibilities of the outbreak management plan team are established and clearly defined. |  |  |  |
| 1.7 | Ensure systems (e.g. fact sheets, what are the symptoms, how to identify a case, isolation requirements, testing, reporting) are in place for staff to access most up to date DHHS, DOH and DEWLP guidance.  |  |  |  |
| 1.8 | Daily briefing meetings to review status (e.g. staff or patrons become unwell, visitor and changes to physical distancing restrictions). |  |  |  |
| 1.9 | Key/useful contacts list completed and up to date (including DHHS COVID-19 hotline 1800 675 398, local health service).  |  |  |  |
| 1.10 | Engage with other ALPINE facility providers and Alpine Management Board to consider how they could respond and support each other. (e.g. potential alternative accommodation / isolation locations). |  |  |  |
| 1.11 | Backup strategy for internal communications systems established (e.g. landlines, mobile devices, pagers, internet, generator, batteries for charging). |  |  |  |

**Recommended resources**

* [Commonwealth DHS: Coronavirus (COVID-19) resources for health professionals, including pathology providers and healthcare managers](https://www.health.gov.au/resources/collections/coronavirus-covid-19-resources-for-health-professionals-including-pathology-providers-and-healthcare-managers) <https://www.health.gov.au/resources/collections/coronavirus-covid-19-resources-for-health-professionals-including-pathology-providers-and-healthcare-managers>
* [Notifications procedures for infectious diseases](https://www2.health.vic.gov.au/public-health/infectious-diseases/notification-procedures) <https://www2.health.vic.gov.au/public-health/infectious-diseases/notification-procedures> or call: 1300 651 160
* [Australian Infection Prevention and Control guidelines](https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/national-infection-control-guidelines) <https://www.safetyandquality.gov.au/our-work/healthcare-associated-infection/national-infection-control-guidelines>
* [State health emergency response arrangement](https://www2.health.vic.gov.au/emergencies/shera) <https://www2.health.vic.gov.au/emergencies/shera>

**For more information**

Call DHHS on to discuss any questions you have. If you need a translator first call 131 450, then request the hotline on 1300 651 160.

**For Victorian updates to the current incident, go to:**

DHHS, Victoria – Coronavirus disease (COVID-19)

<https://www.dhhs.vic.gov.au/novelcoronavirus>

**For national updates:**

Department of Health (Australian Government) Coronavirus Alert

<https://www.health.gov.au/news/latest-information-about-novel-coronavirus>

Royal Australian College of General Practice (RACGP): <https://www.racgp.org.au/coronavirus>

Australian Health Practitioner Regulation Agency (AHPRA):    [https://www.ahpra.gov.au/News/COVID-19.aspx](https://urldefense.proofpoint.com/v2/url?u=https-3A__www.ahpra.gov.au_News_COVID-2D19.aspx&d=DwMFaQ&c=JnBkUqWXzx2bz-3a05d47Q&r=z8EYNMRxzow8vs2FTTd71zHaSeYjF0t3RxVwqwNWuNY&m=Qgam61KtKCgR8xQ4d3K7rQpIkD110TNdFMlEVckYHMA&s=1wBHbog0h8LSEvHJ4iMttMUCBW-me7QQfMVlEstg6pw&e=)

**For international updates:**

WHO Western Pacific Coronavirus disease (COVID-19) outbreak

<https://www.who.int/westernpacific/emergencies/novel-coronavirus>

WHO Coronavirus resources  <https://www.who.int/health-topics/coronavirus>

Coronavirus Disease 2019 (COVID-19) CDNA National Guidelines for Public Health Units (COVID-19 SoNG):   [https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm](https://urldefense.proofpoint.com/v2/url?u=https-3A__www1.health.gov.au_internet_main_publishing.nsf_Content_cdna-2Dsong-2Dnovel-2Dcoronavirus.htm&d=DwMFaQ&c=JnBkUqWXzx2bz-3a05d47Q&r=z8EYNMRxzow8vs2FTTd71zHaSeYjF0t3RxVwqwNWuNY&m=Qgam61KtKCgR8xQ4d3K7rQpIkD110TNdFMlEVckYHMA&s=BiGRB3wRue4njp60QZjOVbwlNRjFUcvMlAH1359fCZY&e=)

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA**  |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 2: Communications***Clear, accurate and timely communication is necessary to ensure informed decision-making, effective collaboration and cooperation, and visitor and staff awareness and trust. It is important that all ALPINE facilities appoint a spokesperson to coordinate communication with patrons, visitors, the DHHS / DEWLP. Consider taking the following actions.* |
| 2.1 | Record contact details for communicating with staff, patrons (current and bookings), volunteers and other external service providers (e.g. cleaner, maintenance, contractors, trades, delivery company, transport service) during an outbreak. |  |  |  |
| 2.2 | INTERNAL COMMUNICATIONS: A person has been assigned responsibility for communicating with staff, patrons and visitors regarding the status and impact of COVID-19 in the facility (e.g. changes to physical distancing, cases, opening of services). Having one voice that speaks for the facility during an outbreak will help ensure the delivery of timely and accurate information.Primary (Name, Title, Contact information): Backup (Name, Title, Contact information): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 2.3 | The communication plan identifies communications techniques such as signs, posters, fact sheets, emails and other methods of communication and how these will be used to inform staff, patrons, visitors, and other persons coming into the facility (e.g., health service, maintenance contractors, delivery people) about the status of COVID-19 in the facility and restrictions in place (if any). |  |  |  |
| 2.4 | Place signage in locations where they are visible to all patrons, staff and visitors including: *(See recommended resources for translation material sources)* |  |
| 1. Hand washing (posters showing the proper hand washing technique) should be posted by all sinks
 |  |  |  |
| 1. Hand hygiene (posters showing sanitizing hands with alcohol based sanitiser) should be located in key staff areas (e.g. staff office, laundry, kitchen, and room)
 |  |  |  |
| 1. Visitation restrictions (if any) and entry prerequisites (e.g. perform hand hygiene immediately upon entry)
 |  |  |  |
| 1. Posters in the reception, communal areas, (e.g. retail, bar and beverage area, dining room, restaurant, bathrooms) and entrance points that encourage behaviours that can prevent person-to-person transmission (e.g. cover your cough, wash your hands)
 |  |  |  |
| 1. Posters to familiarise staff and patrons with the symptoms of COVID-19.
 |  |  |  |
| 2.5 | Information (e.g., brochures, fact sheets, posters, web based resources) for staff / patrons on COVID-19 symptoms and information on where to seek help should symptoms develop: (see recommended resources below) |  |  |  |
| 1. Have been identified or sourced for patrons / staff
 |  |  |  |
| 1. These materials are easy to understand and available in multiple languages
 |  |  |  |
| 1. A plan is in place to display and distribute these materials in advance of cases being detected within the facility.
 |  |  |  |
| 2.6 | EXTERNAL COMMUNICATIONS: A staff member is responsible for communications with DHHS and DEWLP (e.g. reporting a suspected/confirmed case) during a COVID-19 outbreak. (Insert names, titles and contact information of primary and backup persons, if available). Primary (Name, Title, Contact information): Backup (Name, Title, Contact information): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 2.7 | Regular timely communications with staff, visitors and volunteers (infection prevention and control, visitor restrictions, physical distancing)  |  |  |  |
| 2.8 | A list has been created of other agencies and key contact details (e.g., local council, third party providers, health service, local hospitals and hospital emergency departments, relevant community organisations, transport services) with whom it will be necessary to maintain communication during an outbreak.  |  |  |  |
| 2.10 | Notification of third party provider visitation restrictions (i.e. those providing essential service and operations (e.g. healthcare services, catering deliveries, maintenance) |  |  |  |
| 2.11 | Ensure isolated or quarantined persons will be supported in accessing care through their usual general practitioner or other health professional via telehealth arrangements or virtual technology where possible. |  |  |  |

**Recommended resources**

[COVID-19 related posters](https://www.dhhs.vic.gov.au/victorian-public-coronavirus-disease-covid-19): <https://www.dhhs.vic.gov.au/victorian-public-coronavirus-disease-covid-19>

[Factsheets for confirmed and suspected cases, close and casual contacts](https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19): <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19>

[Chief Health Officer Alert](https://www2.health.vic.gov.au/about/news-and-events/healthalerts/2019-Coronavirus-disease--COVID-19): <https://www2.health.vic.gov.au/about/news-and-events/healthalerts/2019-Coronavirus-disease--COVID-19>

COVID-19 translated information for people from culturally and linguistically diverse backgrounds, health professionals and industry. Information includes factsheets and promotional materials. DHHS translated resources – coronavirus disease (COVID-19) <https://www.dhhs.vic.gov.au/translated-resources-coronavirus-disease-covid-19>

Safe Work Victoria information about coronavirus (COVID-19) and preventing exposure in the workplace <https://www.worksafe.vic.gov.au/coronavirus-covid-19>

World Health guidance on accommodation - Operational considerations for COVID-19 management in the accommodation sector. <https://www.satsa.com/wp-content/uploads/WHO-2019-nCoV-Hotels-2020.1-eng.pdf>

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA**  |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 3: Logistics and supply management***Continuity of the ALPINE facility supply and delivery chain is often a challenge during a pandemic requiring attentive contingency planning and response. A critical component to infectious disease prevention is ensuring that ALPINE facility have the necessary supplies in stock to maintain a disease-free environment. Consider taking the following actions.* |
| 3.1 | Create checklists to ensure the ALPINE facility can organise and store enough supplies to respond to outbreaks (see example in Appendix 1). |  |  |  |
| 3.2 | Establish an internal stock/supplies shortage-alert mechanism. |  |  |  |
| 3.3 | Estimate the *average normal consumption* of essential materials, equipment and supplies amount used, for example:* Catering supplies
* Patron hygiene products
* Personal Protective Equipment (PPE)
* Linen
* Waste bags
* Cleaning products (dishwashers, laundry, environment)
* Cleaning equipment
* Sharps bins
* Hand hygiene (liquid soap and hand sanitiser)
* Pharmacy supplies (first aid dressings, antiseptics, lotions, medications)
 |  |  |  |
| 3.4 | Estimate the quantities of essential materials, equipment and supplies that would be needed during at least a four-week outbreak. |  |  |  |
| 3.5 | Estimates have been shared with local suppliers to better understand your requirements. |  |  |  |
| 3.6 | Location for safe storage of additional supplies agreed identified. For example, always ensure items requiring refrigeration remain 4 – 8 oC and determine the need of backup power if required. |  |  |  |
| 3.7 | *In the absence of COVID-19 at the ALPINE facility, based on the average normal patron / staff requirements*, a plan has been developed to address likely infection prevention and control stock shortages, including strategies for using regular suppliers and alternative ways for obtaining supplies: |  |  |
| 1. Masks
 |  |  |  |
| 1. Protective eyewear (disposable or reusable)
 |  |  |  |
| 1. Goggles (for staff with glasses)
 |  |  |  |
| 1. Gowns (single use)
 |  |  |  |
| 1. Gloves (single use)
 |  |  |  |
| 1. Plastic aprons
 |  |  |  |
| 1. Detergent for cleaning (neutral detergent)
 |  |  |  |
| 1. Disinfectant (TGA approved virucidal disinfectant e.g. household bleach).
 |  |  |  |
| 3.11 | Communications targeting staff, visitors and patrons describe who should be wearing PPE and when, for example:* Managing or assessing a new patron who is unwell
* Managing / come in contact with a suspected or confirmedCOVID-19 cases
* Mask on ill patrons when outside their own room or in communal spaces
* Mask on unwell staff awaiting to leave facility.
 |  |  |  |
| 3.12 | A process is in place to ensure that the ALPINE facility provides supplies and materials necessary to adhere to recommended DHHS infection prevention and control practices including:  |  |
| 1. Sinks (patron bathrooms, restrooms and communal areas) are well-stocked with soap, disposable paper towels and guidance for hand washing.
 |  |  |  |
| 1. No-touch bins are located near sinks for disposal of paper towels and tissues if available.
 |  |  |  |
| 1. Provide access to tissues and plastic bags / lined non-touch rubbish bins for the proper disposal of used tissues and other contaminated items like masks.
 |  |  |  |
| 1. Where possible, provide disposable face masks for ill patrons and staff.
 |  |  |  |
| 1. *If ALPINE RESORT has suspected or confirmed COVID-19 patron*: PPE (masks, gloves, gowns/aprons) is available immediately outside of the patron’s / staff’s room and in other areas where care is provided.
 |  |  |  |
| 1. *If ALPINE facility has suspected or confirmed COVID-19 patron*: rubbish bins are positioned immediately inside and outside the patron’s / staff’s room for PPE disposal.
 |  |  |  |
| 1. Provide hand sanitiser (60% alcohol min.) at key locations around the facility (by entrance / exits, registration desks, elevators, eating areas, communal areas, staff rooms etc.)
2. TGA approved hospital-grade virucidal disinfectant (e.g. household bleach) to allow for frequent cleaning and disinfection of high-touch surfaces and shared equipment.
 |  |  |  |
| 3.13 | Emergency first aid kit stocked with supplies assembled and staff know of its location. |  |  |  |
| 3.14 | Emergency rapid response COVID-19 kit assembled with supplies and staff aware of its location (see Appendix 2) |  |  |  |
| 3.15 | Backup planning for waste management supplies address: |  |
| 1. Demand fluctuations communicated to normal suppliers (increase demand)
 |  |  |  |
| 1. Alternative suppliers identified
 |  |  |  |
| 3.16 | Contingency planning for outsourced linen/laundry supplies (e.g. additional linen, alginate bags) address: |  |
| 1. Demand fluctuations communicated to normal suppliers (increase demand)
 |  |  |  |
| 1. Alternative suppliers identified
 |  |  |  |

**Recommended resources**

[WHO guidance on rational use of PPE for COVID-19:](https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE_use-2020.1-eng.pdf) <https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE\_use-2020.1-eng.pdf>

Australian and New Zeeland Standards for PPE:

* Masks: Surgical masks must comply with AS4381:2015. P2 respirator or N95 respirator must comply with AS1715:2009.
* Gloves: Single use examination gloves must comply with AS/NZ 4011:2014. Single use sterile rubber gloves must comply with AS/NZ 4179:2014.
* Eye protection must comply with AS/NZ 2014

Emergency food supply for health and community services fact sheet. Updated 14 April 2020https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key component 4: Infection prevention and control***An operational infection prevention and control (IPC) program is essential to minimise the risk of transmission of COVID-19 infection to patrons, staff, and visitors. All ALPINE RESORT COVID-19 policies, protocols and local guidance should be up to date and reflect Commonwealth, DHHS and DEWLP guidelines. Consider the taking the following actions.* |
| 4.1 | The ALPINE facility has plans to provide education and training to staff to help them understand the implications of, and basic prevention and control measures for, COVID-19.  |  |  |  |
| 4.2 | A staff member has been designated with responsibility for coordinating education and training on COVID-19 (e.g., identifies and facilitates access to online COVID-19 education, maintains a record of personnel training). (Insert name(s), title(s), and contact information(Name, Title, Contact information):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 4.3 | Language and reading-level appropriate materials have been identified to supplement and support education and training programs to staff (see recommended translated resources below) and a plan is in place for obtaining these materials (e.g. fact sheets). |  |  |  |
| 4.4 | Job specific training is made available to staff on recommended infection control measures to prevent the spread of COVID-19 including: |  |  |
| 1. Cough and sneeze hygiene
 |  |  |  |
| 1. Hand hygiene
 |  |  |  |
| 1. Physical distancing in an ALPINE facility setting
 |  |  |  |
| 1. Indication for use of personal protective equipment (PPE)
 |  |  |  |
| 1. Staying in your home (accommodation) when ill
 |  |  |  |
| 1. Signs and symptoms of COVID-19
 |  |  |  |
| 1. How to monitor patrons or visitors for signs and symptoms of COVID-19.
 |  |  |  |
| 1. How to properly clean and disinfect environmental surfaces and shared equipment
 |  |  |  |
| 1. Waste handling and management
 |  |  |  |
| 1. Linen handling and management
 |  |  |  |
| 1. Food delivery
 |  |  |  |
| 1. How and to whom COVID-19 cases should be reported – internal and externally (DHHS)
 |  |  |  |
| 4.5 | A written checklist been developed for responding to situations where patrons or staff advise they have tested positive to COVID–19 |  |  |  |
| 4.6 | A checklist is in place following identification of a *confirmed COVID-19 case to* include:  |  |
| 1. Immediate notification of ALPINE facility manager or Resort Management Board key contact member
 |  |  |  |
| 1. Isolate case (i.e. into separate rooms with closed doors, and provide a separate bathroom, if possible, otherwise designate a room and bathroom (if available) and develop a plan for cleaning the room daily
 |  |  |  |
| 1. Prompt activation of infection control precautions, case isolation and signage (i.e. place a mask on the patron / staff, post signage posted outside persons’ room and ALPINE facility entry)
 |  |  |  |
| 1. Notification to local healthcare service.
 |  |  |  |
| 1. Notification to Department of Human Services *(DHHS requires notification of all confirmed cases)*
 |  |  |  |
| 1. Arrange for case to travel home to self-isolate.
 |  |  |  |
| 1. Arrange for suitable accommodation (if required) if case cannot travel home or residing in unsuitable premises.
 |  |  |  |
| 1. Notification nominated significant family, kin or guardian
 |  |  |  |
| 1. A method to specifically record staff and visitor contact with COVID-19 patrons (e.g. log sheet).
 |  |  |  |
| 4.7 | A checklist in place following the identification of a staff member, or patron with mild symptoms (*a suspected COVID-19 case awaiting test results)* to include: | *(Note: DHHS does not require notification of a suspected case)* |
| 1. Immediate notification of ALPINE facility manager or Alpine Management Board key contact
 |  |  |  |
| 1. Staff or patron to telephone the Alpine healthcare service, usual health clinic or DHHS Hotline to check if they meet the current criteria for testing.
 |  |  |  |
| 1. Prompt activation of infection control precautions, self-isolation and signage
 |  |  |  |
| 1. Arrange for case to travel home to self-isolate.
 |  |  |  |
| 1. Arrange for suitable accommodation (if required) if case cannot travel home or residing in unsuitable premises.
 |  |  |  |
| 1. Notification to local Alpine healthcare service
 |  |  |  |
| 1. Notification to significant family, kin or guardian
 |  |  |  |
| 1. If testing is recommended, services assistance for staff or patron to safely organise testing
 |  |  |  |
| 4.8 | Information about the safe use and disposal of single-use PPE in place addresses:* Correct disposal
* PPE not to be re-used
* Replacement of masks when wet or damp
* External products not to be used in the workplace (e.g. home-made cloth masks or gowns)
 |  |  |  |
| **Isolation and quarantine systems and procedures**In the exceptional event where a visitor or staff cannot return home to self-isolate or cannot book alternative accommodation, the ALPINE facility may, with the support of DHHS, be required to provide isolation or quarantine accommodation for a suspected or confirmed COVID19 case.  |
| 4.9 | Designated areas in the ALPINE facility have been identified for isolation, quarantine and cohorting (grouping) of suspected or known COVID-19 patrons have been identified and communicated to staff. For example, vacant rooms, or rooms located in one wing of the building, separate from other rooms preferably with ensuite facilities (if possible, a kitchen).*Note:* *Isolation is used to separate ill persons who have an infectious disease from those who are healthy). People who have tested positive for COVID-19 in Australia are required to stay in isolation (i.e. in a single room if possible) until clearance by a medical officer.**Quarantine is used to separate and restrict the movement of well persons who may have been exposed to an infectious disease to see if they become ill. Quarantine is for people who are defined as having a close contact with a confirmed case of COVID-19 but are not experiencing symptoms.*  |  |  |  |
| 4.10 | Protocols in place to limit isolation, quarantine area access to only those essential for individual support in place (i.e. healthcare, laundry, delivery of food, delivery of pharmacy supplies). |  |  |  |
| 4.11 | Ensure record maintenance of staff and visitor contact with confirmed COVID-19 individual (e.g. log all persons entering the individual’s room and ALPINE facility). |  |  |  |
| 4.12 | Protocols for cleaning and decontamination of COVID-19 Individual’s direct food service items in place (e.g. tray, crockery, cutlery, cups are to be processed in dishwasher or washed in warm water and detergent). *(Note: disposables are not required)* |  |  |  |
| 4.13 | Linen and patron laundry policies in place (e.g. double bagging linen prior to transport, laundering of all COVID-19 individual’s items in hottest wash cycle tolerated with regular detergent and thoroughly dried prior to re-use). |  |  |  |
| 4.14 | COVID-19 waste management procedures in place. (*Note: all waste from the room should be considered potentially infectious but can be safely contained by staff wearing appropriate personal protective equipment by placing into a plastic bag hen disposed of in the routine waste).* |  |  |  |
| 4.15 | Processes to minimize spread of, or exposure to, contaminants by maintenance staff or trades when conducting urgent repairs or works in COVID-19 areas, for example:* Place a mask on the unwell individual, removal of COVID-19 case from area/room if possible
* If cannot remove unwell individual, place a mask on individual and maintain physical distancing of 1.5m
* Staff in room to supervise (if compliance with physical distancing may be an issue)
* Maintenance staff to wear PPE (i.e. face mask, protective eyewear, gloves and gowns)
* All re-usable tools are cleaned and disinfected prior to re-use or return to storage
 |  |  |  |
| **Staff infection prevention and control** |
| 4.16 | Protocols for staff with confirmed COVID-19 including for example* Not attending workplace
* Accommodation assessment and relocation (if required)
* Transportation home (if possible) for self-isolation
* Notification requirements (internally and externally)
* Clearance requirements for to return to work.
 |  |  |  |
| 4.17 | Protocols to monitor and manage staff suspected or confirmed of having COVID-19 or who have had exposure to COVID-19 address: * Internal and external notification requirements (i.e. resort manager and DHHS)
* Prompt assessment of staffs’ accommodation setting suitability and relocation if required arranged (i.e. self-contained accommodation required)
* Staff sick leave policies and recommended actions after exposure to a suspected or confirmed COVID-19 case:
	+ Providing a mask whilst awaiting to leave facility
	+ Advice on modes of transport to get home (i.e. put on mask)
	+ Who to contact for advice for home isolation, self-monitoring instructions, testing and medical support (local healthcare service, GP or DHHS Hotline).
 |  |  | *Note: Self-contained accommodation is defined: where only people you share a bathroom, kitchen or living area with are those you ordinarily live with (e.g. family), or your partner. Physical distancing of 1.5m must be maintained (including while asleep) between individual and the rest of the household. For staff in dormitory-style accommodation where their sleeping space or amenities (e.g. bathroom, kitchen, living area) are shared with others, will need to self-isolate in accommodation provided by employer.* |
| 4.18 | Consider reassigning staff at high-risk for complications of COVID-19 infection (e.g. over the age of 65, heart diseases, renal disease, pregnancy, diabetes, hypertension, chronic lung disorders). For example:* Remove vulnerable staff from face to face roles and reallocate them into roles in which they can work from home.
* Reallocate staff who are not considered particularly vulnerable into face to face roles.
* Adapt service delivery to allow vulnerable staff to work with via phone, videoconferencing or email.
 |  |  |  |
| **Winter influenza immunisation promotion** |
| 4.19 | Facility has an annual organisational-wide influenza vaccination program encouraging staff to be immunised. |  |  |  |
| **Visitor infection control education and access**Plans for visitor access and movement within the facility have been reviewed and updated in accordance with DHHS, Work Safe Victoria or Commonwealth guidance |
| 4.23 | The ALPINE facility has plans and materials developed to post signs at the entrances to the facility instructing visitors (staff) not to enter if they are unwell. |  |  |  |
| 4.24 | The ALPINE facility has criteria and protocol for when visitors will be limited or restricted from the facility, communal/share spaces or into rooms of patrons. |  |  |  |
| 4.25 | If visitors are allowed to enter the room of a confirmed or suspected COVID-19 individual, the Alpine facility will:  |  |
| 1. Enact a policy defining what PPE should be used by visitors.
 |  |  |  |
| 1. Provide instruction to visitors before they enter the isolation room/area, on hand hygiene, limiting surfaces touched, and use of PPE according to current DHHS guidance.
 |  |  |  |
| 1. Maintain a record (e.g., a log with contact information) of all visitors and staff who enter and exit the room.
 |  |  |  |
| 1. Ensure that visitors limit their movement within facility as advised by DHHS (e.g. avoid the cafeteria or communal areas).
 |  |  |  |
| **Cleaning and disinfection** |
| 4.26 | High-touch surfaces / areas (e.g. bathrooms, door handles, elevator buttons, remote controls, keyboards, tables, menus) are disinfected and cleaned with a higher frequency in accordance with DHHS COVID-19 environmental cleaning and disinfection guidance. |  |  |  |
| 4.27 | Checklists and procedures on cleaning and disinfection for suspected and confirmed COVID-19 patron rooms in place including: |  |
| 1. Frequency of cleaning isolation and quarantine areas (daily and discharge/terminal) *Note: the frequency of cleaning of rooms may be able to be reduced or even deferred until the end of the isolation/quarantine period.*
 |  |  |  |
| 1. Isolation room / area terminal cleaning procedures.
 |  |  |  |
| 1. Daily isolation cleaning procedures (Note: Some cleaning tasks may be able to be undertaken by the guest in quarantine isolation if provided with appropriate cleaning equipment.
 |  |  |  |
| 1. Procedures for decontaminating hard and soft surfaces (i.e. furniture, upholstery, drapes, carpets)
 |  |  |  |
| 1. Chemical use and dilution requirements
 |  |  |  |
| 1. Equipment to be used
 |  |  |  |
| 1. The use of specific cleaning equipment for COVID-19 areas only
 |  |  |  |
| 1. Waste transportation and disposal
 |  |  |  |
| 1. Laundry and linen handling, transport and washing
 |  |  |  |
| 1. Catering equipment handling and decontamination (e.g. food trays, utensils, cups etc.)
 |  |  |  |
| 1. Decontamination of cleaning equipment
 |  |  |  |
| 1. PPE requirements for cleaning staff
 |  |  |  |
| 1. Requirement for cleaning staff training for donning and doffing PPE
 |  |  |  |
| 4.28 | Ensure ALL shared equipment (if in use for COVID-19 cases) are properly decontaminated (cleaned and disinfected) between use.  |  |  |  |
| 4.29 | Ensure shared bathroom (if in use for COVID-19 cases) is properly decontaminated (cleaned and disinfected) after use.  |  |  |  |
| **Transmission-Based Precautions** (use Standard, Contact, Droplet Precautions plus eye protection for individuals with confirmed or suspected COVID-19) |
| 4.30 | Ensure infection prevention and control advice is promptly sought from DHHS, and guidance implemented, for all suspected or confirmed COVID-19 cases and signage posted. |  |  |  |
| 4.31 | Protocols for cardio-pulmonary resuscitation for suspected or confirmed COVID-19 patron instruct staff to don PPE before responding or entering room. |  |  |  |
| 4.32 | Designate trained staff to provide services exclusively for suspected or confirmed cases each shift to reduce the risk of transmission. Including both room service catering, laundry and cleaning (if possible).  |  |  |  |
| 4.33 | Protocol for food services that advises staff to only deliver food and drink orders outside the isolated person's room door to minimise direct exposure to the contact person. |  |  |  |
| 4.34 | Ensure loose items such as pens, note pads and information material are removed from rooms and meeting rooms |  |  |  |
| 4.35 | Provision should be made for both off-site and in-person welfare check and telehealth consultations for persons in isolation/quarantine |  |  |  |
| 4.36 | Requests for welfare assistance from quarantined / isolated individuals should be actioned in keeping with the urgency and significance of the issue (usually within 24 hours). |  |  |  |
| **Hand hygiene**  |
| 4.37 | Encourage hand hygiene for all visitors and workers upon entering the lobby and leaving premises. |  |  |  |
| 4.38 | Hand hygiene supplies, including (liquid) soap and water and alcohol-based hand sanitiser (if available) or wipes are readily accessible in all restrooms, bathrooms and communal areas. |  |  |  |
| 4.39 | Installation of additional hand hygiene stations (alcohol-based hand sanitiser) and waste bins at key locations across the facility (e.g. hand hygiene trolley at the entry and exit, communal areas, lobby, restaurant, baby change room, staff rooms/offices). |  |  |  |
| **Patron physical distancing** |
| 4.40 | Encourage physical distancing in communal areas (e.g. bar and beverage, retail, restaurant, living areas, bathrooms, dining area, gymnasium, pool and spa). Consider for example:***Restrict capacity**** Identify and enforcing maximum capacity limits for premises
* Displaying signage at entrances indicating maximum number of visitors allowed in premises resort areas (i.e. restaurants, communal areas, pool, gym, rental accommodation, ski hire shops and retail outlets)
* Discourage the congregation of staff and visitors in common areas
* Restrict elevator capacity (one or two people depending on size with floor markers)
* Patron record maintenance (i,e. collect the name and phone number of visitors to their premises) in accordance with DHHS guidance. Maintain records for a minimum of 28 days

***Transportation**** Ensure compliance with tourism and transport industry guidelines, including appropriate hygiene and physical distancing requirements
* Collect and maintain traveller information to assist in contact tracing

***Reception / retail / hire shop**** Perspex screens and floor markers at reception or in retail or hire shops
* Electronic earlier check in and later check out times to eliminate queuing at reception
* Encourage credit & debit card payment.

***Meals delivery**** Deliver meals to rooms or apartments, where feasible
* If not feasible, consider:
	+ Staggering mealtimes to reduce crowding in shared eating facilities
	+ Staggering the schedule for use of a common / shared kitchen
	+ Moving from self-serve to staff-provided food (e.g. a la Carte breakfast only to remove self-service buffets and bookable times at breakfast)
	+ Providing packed lunches.

***Restaurant / beverage services / communal spaces***Shops and retail businesses at alpine resorts must adhere to the same rules and physical distancing restrictions as every other business in Victoria.* Create a schedule for using common spaces
* Identifying and enforcing maximum capacity limits for communal areas.
* Display signage at entrances indicating the maximum number of people allowed on the premises and ensure these limits are complied with
* Limit seating or entry in accordance with DHHS guidance (4 square metres requirement)
* Place distancing floor markers in receptions, by elevators, in restaurants and signage to remind patrons to keep a distance
* Table service only in restaurants
* Collecting contact information where personal services such as hairdressing are provided.

***Equipment rental*** To limit the potential transfer of infection, consider only the following snow sport items be approved for rental:* Skiing skis, boots and poles
* Snowboarding boards and boots
* Clothing and footwear
* Jackets, pants, boots and helmets
* Safety and protective equipment.
* **No** gloves, goggles or other face wear will be available for rent.

***Rental equipment note****: Visitors should seek to complete rental forms online or prior to arrival. Businesses providing rental services should operate in compliance with industry guidelines, including extensive cleaning regimes and hygiene practices*.***Servicing non-COVID-19 rooms**** Removal of non-single use or disposable items in the bedroom such as note pads, pens & guest directories
* Introduction of new ‘select service’ procedures to minimize and even eliminate the need for housekeeping staff to enter a patron’s room during their stay should they wish.
* Windows open to allow for air flow during cleaning

**Spa and sauna areas*** These must remain closed (refer to DHHS guidance)

**Pool areas*** Pre-booked, distanced pool loungers which are sanitised after use
* Outdoor and indoor pools can meet, with up to 20 people per pool (subject to capacity assessments)
* Maximum numbers in change rooms according to DHHS physical distancing guidance (i.e. max 3 people)

***Gymnasium and sporting facilities**** Maximum 20 people allowed per space, subject to the four square metre rule.
* Participants must remain at least 1.5 metres apart.
 |  |  | *Note: Accommodation providers will be subject to tourism industry guidelines to ensure COVID-safe operations, including hygiene and sanitation practices. The maximum number of guests allowed will vary according to their COVID-safe operating plans.* *Cleaning regimes must be consistent with industry and DHHS guidelines and compliant with public health directions.* |
| **Dormitory accommodation physical distancing**  |
| 4.41 | Re-arrange all bedrooms to reflect current physical guidance: For example:* Where possible, space all beds at least 2 metres apart to support the need for 4sqm distance between each person (the more distance between people the lower the risk of spreading COVID-19 to others)
* Arrange beds so that individuals lay head-to-toe (or toe-to toe), or use neutral barriers (storage baskets, curtains) to create barriers between beds
* If space allows, put fewer patrons within a dorm / unit
 |  |  |  |
| 4.42 | Protocols for dormitory physical distancing provide advice on: * Promoting fresh airflow indoor and maximising use of outdoor dining / recreational areas
* Staggering meal times to reduce numbers and cleaning between sessions
* Staggering bathroom/shower access via a roster system
* Allocation of persons to specific bathrooms
* Spacing for activities
* Encourage non-contact sports
* Allocating persons to specific recreational areas
* Restricting numbers in activities
* Revised sleeping arrangements
	+ Use of single room accommodation where possible
	+ Reduction of dormitory accommodation occupancy to 25% of its usual level
* Use of drink bottles and cessation of shared water stations
 |  |  |  |
| **Staff physical distancing** |
| 4.43 | Protocols for staff physical distancing provide advice for maintaining a distance of 1.5 metres (where possible) for example:* Staggering or rostering breaks / physical spaces or food preparation areas
* Using own drink bottles
* Spacing in office/desks and break rooms / transport vehicles
 |  |  |  |

**Recommended resources**

Victorian DHHS guidelines and a range of other resources for health services and general practitioners can be found at the department’s novel coronavirus website: <https://www.dhhs.vic.gov.au/novelcoronavirus>

Australian Government Department of Health Coronavirus (COVID-19) resources for health professionals, including pathology providers and healthcare managers <https://www.health.gov.au/resources/collections/coronavirus-covid-19-resources-for-health-professionals-including-pathology-providers-and-healthcare-managers>

For environmental cleaning and disinfection principles for COVID-19, visit Australian Department of Health website <https://www.health.gov.au/resources/publications/environmental-cleaning-and-disinfection-principles-for-covid-19>

Hand Hygiene Australia <https://www.hha.org.au/>

<https://www.dhhs.vic.gov.au/sites/default/files/documents/202004/COVID-19_How%20to%20put%20on%20and%20take%20off%20your%20PPE.pdf>

[WHO Infection Prevention and Control for COVID-19 online course\*:](file:///E%3A%5Cmelissa%5CInfection%20control%20consulting%5CDHHS%5CCommunity%20housing%20sector%5CWHO%20Infection%20Prevention%20and%20Control%20for%20COVID-19%20online%20course%2A%3A) <https://openwho.org/courses/COVID-19-IPC-EN>

[DHHS: How to put on your PPE:](https://www.dhhs.vic.gov.au/sites/default/files/documents/202002/How%20to%20put%20on%20your%20PPE%20%28donning%29.PDF) <https://www.dhhs.vic.gov.au/sites/default/files/documents/202002/How%20to%20put%20on%20your%20PPE%20%28donning%29.PDF>

[DHHS: How to take off your PPE:](https://www.dhhs.vic.gov.au/sites/default/files/documents/202002/How%20to%20take%20off%20your%20PPE%20%28doffing%29.PDF) <https://www.dhhs.vic.gov.au/sites/default/files/documents/202002/How%20to%20take%20off%20your%20PPE%20%28doffing%29.PDF>

PPE donning and doffing. <https://www1.health.gov.au/internet/main/publishing.nsf/Content/how-to-fit-and-remove-personal-protective-equipment-in-the-correct-order>

[Worksafe guide](https://www.worksafe.vic.gov.au/resources/preparing-pandemic-guide-employers)

<https://www.worksafe.vic.gov.au/resources/preparing-pandemic-guide-employers>

Translated coronavirus (COVID-19) resources <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/translated-coronavirus-covid-19-resources>

Victorian DHHS guidelines on restaurants and cafes. <https://www.dhhs.vic.gov.au/restaurants-and-cafes-covid19>

Victorian DHHS guidelines on Snow skiing and snow activity on public land. <https://www2.delwp.vic.gov.au/coronaviruspubliclanduse/home/snow-skiing-and-snow-activity-on-public-land>

Victorian DHHS guidelines on sport and exercise (including gymnasium and group activities) <https://www.dhhs.vic.gov.au/sport-and-exercise-restrictions-covid-19#can-i-go-to-the-gym>

Victorian DHHS guidelines on indoor and outdoor pool use and information about easing of restrictions for sport and exercise from <https://www.dhhs.vic.gov.au/sport-and-exercise-restrictions-covid-19>

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 5: Continuity of essential patron services and care***An outbreak of COVID-19 will impact on essential Alpine resort facilities core services hence, it may be necessary to scale down non-essential services to ensure essential services can continue to be delivered during this time. Consider taking the following actions.* |
| 5.1 | List all core services ranking them in order of priority for example:* Food/catering services
* Cleaning
* Patron / visitor interface / reception services
* Linen/laundry services
* Waste management, transportation and disposal
* Property maintenance
 |  |  |  |
| 5.2 | Identify and plan how to maintain the core services that your ALPINE facility must provide during COVID-19 outbreak and pandemic. |   |  |  |
| 5.3 | Identify alternative supply of emergency accommodation, and how to limit the occupancy of current ALPINE facility accommodation, for example:* Identify if non-COVID-19 staff / visitors have safe and healthy alternative accommodation that they could access temporarily e.g. with friends or family, other resort’s, in order to open some beds for people with no options
* Make use of empty hotel / motel / other ALPINE resorts’ rooms if possible:
 |  |  |  |
| 5.4 | Identify the resources (staff and supplies) needed to ensure essential services can continue to be delivered safely during COVID-19 outbreak or pandemic (i.e. minimum number of staff ALPINE facility can safely operate with). |  |  |   |
| 5.5 | Identify the maximum number of suspected or confirmed cases the ALPINE facility can accommodate without compromising essential services. |  |  |  |
| 5.6 | Coordinate with DHHS, healthcare service, neighbouring hospitals and GPs on defining the roles and responsibilities of each member of to ensure the continuous provision of essential services for your community.  |  |  |  |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 6: Surge capacity***The ability of an ALPINE facility to expand beyond its normal capacity to meet an increased community spread or local COVID-19 cases. COVID-19 cases may cause rapid increase in demand for staffing and supplies over a prolonged period of time. Consider taking the following actions* |
| 6.1 | Calculate maximum COVID-19 case capacity.(*Determined not only by the total number of beds/rooms but also by the availability of staff, the adaptability of ALPINE facility space, isolation, cohort (grouping patrons) capabilities and the availability of other resources (i.e. how many suspected or confirmed COVID-19 individuals the ALPINE facility can care for safely*). |  |  |  |
| 6.2 | Criteria have been developed for determining when to put a hold on any new visitor bookings and non-essential activities (i.e. non-urgent maintenance, gardening, outings). |  |  |  |
| 6.3 | The surge plan includes consideration for shifting suspected or known COVID-19 visitors / staff away from the ALPINE facility, (e.g., to home or pre-designated alternative accommodation or healthcare facilities under the guidance of DHHS).  |  |  |  |
| 6.4 | A surge contingency staffing plan has been developed that identifies the minimum staffing needs and prioritises essential and non-essential services based on visitor capacity limits, staffing numbers and essential facility operations.  |  |  |  |
| 6.5 | Logistics and supply plan identifies methods of expanding storage capacity for essential supplies.  |  |  |  |
| 6.6 | The surge plan identifies strategies to cohort (group) known COVID-19 cases (e.g. sharing the same room or area). |  |  |  |
| 6.7 | Identify additional areas within the facility that may be converted to visitor isolation/quarantine areas  |  |  |  |
| 6.8 | Verify the availability of vehicles and resources required for visitor / staff transportation. This should include vehicles required by management staff. |  |  |  |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 7: Staffing** *Flexible staff management is required to ensure adequate capacity and continuity of operations in response to an increased demand for staff, while maintaining the identified essential services. Consider the following actions.* |
| 7.1 | A staff member has been assigned responsibility for conducting a daily assessment of staffing status and needs during a COVID-19 outbreak. Insert name, title and contact information. (Name, Title, Contact information): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| 7.2 | Ensure staff contact list up to date. |  |  |  |
| 7.3 | Estimate staff absenteeism in advance and monitor it continuously. |  |  |  |
| 7.4 | Prioritise staffing requirements service (administration, foodservices, cleaning, maintenance etc.) and distribute personnel accordingly. |  |  |  |
| 7.5 | For each service (catering, cleaning, laundry etc.), determine minimum staffing levels sufficient to safely maintain services. |  |  |  |
| 7.6 | Prepare staffing contingency plans in case 20-30% of staff fall ill and are excluded from work for 14 days. |  |  |  |
| 7.7 | Identify staff to backfill shortages for example:* Identify part time/casual/agency staff who can work additional hours.
* Identify staff who have recently left the organisation and who might be temporarily re-engaged.
* Identify staff who can perform planning, communication and resource management, as well as the training and orientation of surge staff
* Develop or modify flexible attendance and sick leave policies (e.g. when a doctor’s certificate is required).
* Extend working hours or schedule additional shifts, within award conditions.
* Identify critical job functions and cross-train current employees or hire temporary employees for coverage.
* Cease non-essential functions and redirect those staff to essential functions.
 |  |  |  |
| 7.8 | Provide ongoing training and skills exercises relevant to areas of need, including infection prevention and control, to ensure staff and patron safety. |  |  |  |
| 7.9 | Ensure there are policies and resources in place to manage volunteer workers (e.g. vetting, accepting, rejecting, education). |  |  |  |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 8: Symptom screening and alert process***Process for rapidly identifying and isolating visitors or staff with confirmed or suspected COVID-19. Consider the following actions.* |
| 8.1 | Processes in place for patrons, staff and volunteers to immediately inform management if they have fever, cough or respiratory symptoms consistent with COVID-19. For example:* Ensure facilities key contact details are circulated, (subject to consent)
* Signage posted reminding staff and patrons to self-screen and report symptoms
* Confirm COVID-19 symptom reporting requirements at the time of patrons’ reservation and again at check-in
* Ensure a staff member is always allocated to reviewing emails and messages from patrons, staff and volunteers
 |  |  |  |
| 8.2 | Monitor who is entering and leaving the premises via sign in sheets if necessary. This practice will aide in the communication of COVID-19 updates if a patron or staff tests positive |  |  |  |
| 8.3 | Screening measures comply with recommended levels of surveillance as per DHHS guidance (i.e. encouraging daily health checks by staff and patrons).  |  |  |  |
| **Monitoring and managing staff** |
| 8.4 | Protocol to exclude all staff who have travelled overseas until 14-day at home or hotel based quarantine measures have been completed. |  |  |  |
| 8.5 | Protocol to provide masks to ill staff to contain respiratory secretions or place in a separate are from patrons/staff until they are able to leave workplace (for medical evaluation/care or return home). |  |  |  |
| 8.6 | Protocol to exclude all unwell staff from working at the ALPINE facility. |  |  |  |
| 8.7 | A protocol for out of hours staff workplace exposures to COVID-19 in place. |  |  |  |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 9: Essential support services***To optimise patron care during the COVID-19 outbreak, it is necessary to identify and maintain essential support services, such as those for laundry, cleaning, waste management and food services. Consider the following actions.* |
| 9.1 | Estimate the additional supplies required by support services and introduce a system to ensure the continuous availability of these supplies (i.e. detergents for cleaning, disinfection chemical supplies, cleaning equipment, waste bags, signage, waste bins for isolated individuals see Appendix 1). |  |  |  |
| 9.2 | Anticipate the impact on services and ability for staff to multi-task to increase flexibility to cope with increased demand. |  |  |  |
| 9.3 | Prepare for additional cleaning requirements e.g. roster additional cleaning hours or hire extra ancillary staff or educate back up staff (cleaners) as required. |  |  |  |
| 9.4 | Mechanism for the prompt maintenance and repair of the essential equipment in place and alternative service providers identified. Postpone non-essential maintenance and repair. |  |  |  |
| 9.5 | Ensure the availability of appropriate back-up arrangements for essential utility services (e.g. generator, petrol, LPG gas). |   |  |  |
| 9.6 | Anticipate the impact on supplies of food. Take action to ensure the availability of adequate supplies including discussing with other APINE facilities or local government or local restaurants regarding alternative food source. |  |  |  |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 10: Case management***An efficient and accurate assessment system and an organised patron management strategy are required to ensure adequate treatment of COVID-19 infection in a patron. Consider taking the following actions.* |
| **Assessment for new bookings and check-in** |
| 10.1 | The ALPINE facility has a reception process for all new patrons that includes the following:  |  |
| 1. Information packages providing instruction on hand hygiene, respiratory hygiene, and cough etiquette.
 |  |  |  |
| 1. Supplies will be made available (tissues, bins, alcohol-based hand sanitiser).
 |  |  |  |
| 1. Screening tool for all new unwell patrons (see 10.1)
 |  |  |  |
| 1. Training of personnel on appropriate patron screening processes (e.g., questions to ask and actions to take, contact information to document) to rapidly identify and isolate suspect COVID-19 cases).
 |  |  |  |
| 1. Remote (telephone or electronic based) screening of patrons prior to arrival and in-person screen at time of arrival.
 |  |  |  |
| **Management of suspected / confirmed COVID-19** |
| 10.2 | Facility has procedures in place for patrons, staff and volunteers who present with symptoms of COVID-19. For example:* Individuals are to stop what they are doing immediately and apply a surgical mask
* Isolate individuals in previously identified isolation spaces and determine if severely unwell and if emergency care is required
* Inform supervisor or facility manager
* Seek healthcare advice to determine if person requires coronavirus testing (e.g. DHHS Hotline or local ALPINE healthcare service)
* Supervisor to speak immediately with staff and patrons who may be impacted / affected
* Staff contact DHHS Hotline for advice.
 |  |  |  |
| 10.3 | Facility has protocols for release of suspected or confirmed COVID-19 individuals from isolation in consultation with DHHS guidance. |  |  |  |
| 10.4 | Facility has protocols to contact DHHS Hotline when there’s ‘refusal’ from an individual who had tested positive to the virus to self-isolate.  |  |  |  |
| 10.5 | Facility has protocols to minimise patron / individual movement outside of the isolation room in place. Persons in isolation ARE NOT permitted to access any common areas for the duration of isolation.  |  |  |  |
| **Medical check-in and communication instructions** |
| 10.6 | Ensure protocol to check in on patron / staff every few hours in place (using a non-contact method, where possible) to determine if their health status is getting worse. For example:* Call the patron by mobile / room-based telephone
* Check in through the window
* Speak through the door
 |  |  |  |
| 10.7 | Fact sheet detailing instructions for:* Quarantined / isolated individuals on how to contact healthcare service or other key Alpine resort facility staff
* Staff on duty:
	+ Healthcare service contact details (inside and out of hours) for first point of contact
	+ Actions to be taken in response to acute physical and mental health emergencies
 |  |  |  |
| 10.8 | Activate escalation procedures if an unwell person develops severe symptoms, call emergency response units |  |  |  |
| **Access to quarantine/isolation room / area** |
| 10.9 | Protocol to reduce cleaning frequency of isolation rooms to rooms to ‘As Needed’ (e.g. soiled items and surfaces) to avoid unnecessary contact including:* Provide isolated patron / staff with personal cleaning supplies including tissues, paper towels, cleaners and TGA-registered disinfectants
 |  |  |  |
| 10.10 | Ensure when delivering essential supplies to a person in self-isolation, staff members should employ “no contact” protocols for example:* Leave items in a paper (disposable) bag at the front door of the isolation room
* Leave meal service, linen items at the door
* Do not assist with handling luggage
* Ensure a safe 1.5 metre distance between the staff member and patron door before it is opened.
 |  |  |  |
| 10.11 | Ensure when removing items from outside isolation / quarantine rooms, staff members should employ the use of recommended PPE and IPC measures, for example:* Request COVID-19 case to leave waste, catering equipment or laundry / linen double bagged outside door for collection
* Staff don new disposable gloves to handle and transport items promptly to laundry for washing or regular waste bins for disposal
* Staff are instructed to hold items away from their body
* Staff perform hand hygiene after removal of gloves
 |  |  |  |
| 10.12 | Facility has procedures to minimise the number of staff who enter the suspected or confirmed COVID-19 patrons’ room. (i.e. only essential personnel enter the isolation area) |  |  |  |
| 10.13 | Facility has policies for dedicating (where possible) equipment to the patron (e.g. electronic thermometer, tray, cup and plate, cleaning equipment) |  |  |  |
| **Movement of patrons with confirmed or suspected COVID-19 within or outside the facility** |
| 10.14 | Protocol for patron / staff movement outside isolation room is asked to wear a facemask (e.g. for fresh air break or smoking) |  |  |  |
| 10.15 | Protocol to not transfer suspected or confirmed COVID-19 patron to another ALPINE facility unless absolutely necessary.  |  |  |  |
| 10.16 | Facility has implemented alternate modes of communication for suspected or confirmed COVID-19 patrons’ or staffs’ appointments and communication (e.g. Telehealth or Remote healthcare via telephone or tablet).  |  |  |  |
| 10.17 | Protocol to ensure communication with emergency transportation of patrons positive COVID-19 status prior to transportation  |  |  |  |

| **Recommended preparedness action:** | **Status** | **If an action is required, please detail owners and timeframe** **If not applicable specify NA** |
| --- | --- | --- |
| **Pending** | **Complete** |
| **Key Component 11: Post-COVID-19 recovery phase***Previous pandemics have been associated with subsequent “waves” of new cases after an initial wave resolves. After an initial pandemic outbreak, subsequent outbreaks are likely. Consider the following actions.* |
| 11.1 | Maintain heightened awareness and observations for ill health or symptoms of COVID-19 in patrons and staff (to detect subsequent waves of COVID-19). |  |  |  |
| 11.2 | Maintain requirement for ill staff not to come to work |  |  |  |
| 11.3 | Maintain requirement for ill patrons, visitors or volunteers not to enter the facility |  |  |  |
| 11.4 | Continue to screen all new patrons for signs of COVID-19 or ill health. |  |  |  |
| 11.5 | Continue to deliver infection prevention and control training. |  |  |  |
| 11.6 | Continue to promote staff to undertake daily health checks. |  |  |  |
| 11.7 | Evaluate the effectiveness of infection-control measures and what worked well and what measures did not work. Update plan accordingly. |  |  |  |
| 11.8 | Evaluate the stock levels of infection control supplies and the need for restocking. |  |  |  |
| **Health care delivery** |
| 11.9 | Evaluate delivery of core services (i.e. cleaning, catering, laundry etc.) during pandemic COVID-19. What worked well and what did not. Modify plans and procedures accordingly. |  |  |  |
| 11.10 | Prepare for secondary / tertiary waves of pandemic COVID-19. |  |  |  |
| 11.11 | Return to normal staffing schedules/rostering. Provide additional time off, if possible. |  |  |  |

Resources

In addition to the resource list detailed below, a number of example templates have been provided for your reference including:

1. Sample essential supply check list
2. Sample COVID-19 emergency response kit
3. Sample cleaning guidance

***Victorian COVID-19 Pandemic Plan***

COVID-19 Pandemic plan for the Victorian Health Sector (2020) is available on the DHHS website at: <https://www2.health.vic.gov.au/about/publications/ResearchAndReports/covid-19-pandemic-plan-for-vic>

***Daily update in of the COVID\_19 in Australia***

This site provides a quick view of the current coronavirus (COVID-19) situation in Australia. Information is updated every afternoon based on the data the Commonwealth receives from states and territories.

<https://www.health.gov.au/resources/publications/coronavirus-covid-19-at-a-glance>

***COVID-19 web resources (Australia and international)***

In Australia and across the global community, organisations have gathered evidence and/or developed advice on the management of COVID-19. A list of links to COVID-19 guidance is presented here and will be updated regularly. This list is prepared to support the delivery of safe and quality care during the COVID-19 pandemic. <https://www.safetyandquality.gov.au/publications-and-resources/resource-library/covid-19-web-resources>

***Health checker***

Health checker -healthdirect Coronavirus (COVID-19) Symptom Checker Answer questions about your symptoms to see if you need to seek medical help or get tested. This tool is available online at any time. To find out if you meet the Australian Government guidelines for coronavirus (COVID-19) testing, answer a series of questions. These include information about:

* your age and gender
* any emergency symptoms you may be experiencing
* your state or territory
* whether you're a healthcare worker
* any recent foreign travel
* whether you've been in contact with someone who has been diagnosed with COVID-19

<https://www.health.gov.au/resources/apps-and-tools/healthdirect-coronavirus-covid-19-symptom-checker>

***Hand hygiene***

*World Health Organisation (WHO)* WHO has launched a new online course on Standard precautions: Hand hygiene (<https://openwho.org/courses/IPC-HH-en>). The module has been prepared to help summarize the WHO guidelines on hand hygiene, associated tools, and ideas for effective implementation.

In addition, the World Health Organization has developed the following videos and posters on how to how to use alcohol-based hand-rub and how to wash your hands:

* How to hand rub (video) https://www.youtube.com/watch?v=ZnSjFr6J9HI
* How to hand rub (poster) https://www.who.int/gpsc/5may/How\_To\_HandRub\_Poster.pdf?ua=1
* How to wash hands (video) https://www.youtube.com/watch?v=3PmVJQUCm4E
* How to wash hands (poster) https://www.who.int/gpsc/5may/How\_To\_HandWash\_Poster.pdf?ua=1

***COVID-19 infection control training***

This 30-minute online training module is for health care workers in all settings. It covers the fundamentals of infection prevention and control for COVID-19.

https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training

***Comparing cold with COVID-19***

Commonwealth Department of Health and Aging DOH poster describing the common symptoms of cold and COVID-19. https://www.health.gov.au/sites/default/files/documents/2020/03/coronavirus-covid-19-identifying-the-symptoms.pdf

***Break the chain of infection poster***

This poster illustrates the chain of transmission of infection, in the context of COVID-19, and highlights measures that can be implemented to interrupt the spread of this infection. <https://www.safetyandquality.gov.au/publications-and-resources/resource-library/break-chain-poster-a3>

***Personal protective equipment***

Coronavirus (COVID-19) guidance on use of personal protective equipment (PPE) in non-inpatient health care settings, during the COVID-19 outbreak. An information sheet with advice on the use of personal protective equipment (PPE) in non-inpatient health care settings, during the COVID-19 outbreak.

<https://www.health.gov.au/resources/publications/coronavirus-covid-19-guidance-on-use-of-personal-protective-equipment-ppe-in-non-inpatient-health-care-settings-during-the-covid-19-outbreak>

To reduce the risk of transmission of infectious agents, personal protective equipment must be used appropriately. The following table outlines sequences and procedures for putting on and removing PPE.

<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/sequence-putting-and-removing-ppe>

Coronavirus (COVID-19) information on the use of surgical masks. An information sheet that answers questions about the use of surgical masks and coronavirus (COVID-19).

https://www.health.gov.au/resources/publications/coronavirus-covid-19-information-on-the-use-of-surgical-masks

***Environmental cleaning and disinfection principles for COVID-19***

The Commonwealth Department of Health and Aging guidance for COVID-19 cleaning and disinfection. https://www.health.gov.au/resources/publications/coronavirus-covid-19-environmental-cleaning-and-disinfection-principles-for-health-and-residential-care-facilities

The US Centres for Disease Control (CDC) guidance for COVID-19 cleaning in community settings provides an overview on cleaning of electronics, soft and hard surfaces. <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

***Posters and COVID-19 promotional materials***

Department of Health and Human Services promotional material for coronavirus disease (COVID-19). <https://www.dhhs.vic.gov.au/promotional-material-coronavirus-disease-covid-19>

The following DHHS resources are available at for print:

* Wash your hands regularly poster
* Cover your cough and sneeze poster
* Wash your hands regularly poster - Simplified Chinese
* Cover your cough and sneeze poster - Simplified Chinese
* (COVID19) Novel Coronavirus GP Poster
* (COVID19) Novel Coronavirus GP Poster - Simplified Chinese
* Reduce your risk of coronavirus (PDF)

Department of Health and Aging resources: <https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources>

***Translated coronavirus (COVID-19) resources***

A list of resources about COVID-19 in other languages. The resources include fact sheets, guidelines and other publications. https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/translated-coronavirus-covid-19-resources

***COVID-19: Screening Checklist for Visitors and Employees***

Download COVID-19 screening checklist. https://public-library.safetyculture.io/products/covid-19-screening-checklist-for-visitors-and-employees?src=sc&amp\_dev=3241873c-b21b-4079-9ae7-6374eb7c90b0R

***Information for support workers and carers on coronavirus (COVID-19) testing for people with disability***

Advice on who should be tested, where testing can be done, and how to explain the testing process to a person with disability.

<https://www.health.gov.au/resources/publications/information-for-support-workers-and-carers-on-coronavirus-covid-19-testing-for-people-with-disability>

***Coronavirus (COVID-19) information for in-home care workers***

An information sheet for in-home care workers about coronavirus (COVID-19).

<https://www.health.gov.au/resources/publications/coronavirus-covid-19-information-for-in-home-care-workers>

Appendix 1 Sample supply checklist

A critical component to infectious disease prevention is ensuring that ALPINE RESORT accommodation have the necessary supplies in stock to maintain a disease-free environment. To appropriately mitigate and respond to outbreaks, develop a checklist of items.

The table below provides a sample list of recommended supplies to keep available at the facility. This table includes check boxes and space to include the number of each item required. It can be edited and used by service providers.

**Category Description**

*Personal Protective Equipment (PPE)*

☐ Gloves

☐ Surgical masks

☐ Goggles

☐ Gowns

☐ Aprons

*Cleaning Supplies*

☐ Large garbage bags

☐ Small garbage bags

☐ Other waste disposal supplies \_\_\_\_\_\_\_\_\_\_\_

*Hand Hygiene Products*

☐ Soap (liquid or foaming)

☐Paper Towels

☐Hand sanitiser

☐Hand wipes

☐Tissues

*Thermometers & Thermometer covers*

☐Thermometers

☐Thermometer covers

Note: Approx. one thermometer for every 10 infected patrons is adequate; clean between use per product instructions

*Medications*

☐ Anti-fever medications e.g. Panadol

*Bags*

☐ Resealable zip-top plastic bags

*Disinfectant*

☐*Bleach*

☐ Other household disinfectants \_\_\_\_\_\_\_\_\_\_\_

*Linens*

☐ Extra lines

☐ Towels

☐ Blankets

☐ Sheets

☐Robes

*Dividers*

☐Disposable screens

☐Twine & Nails (to rig up barriers)

Note: If you can’t source disposable dividers the following might be used:

☐Sheets

☐Curtains

☐Plastic Shower Curtains

*Extra Fluids and Foods*

☐Juice

☐Hydrolyte

☐Tea

☐Instant Soup

**Appendix 2 Sample COVID-19 emergency response kit**

In the event of an unwell patron being identified at the SRS, an emergency response kit should be pre-assembled and assessable for staff use. The suggested contents should include:

* Large bucket with lid to store kit contents and act as rubbish receptacle
* 1 box of disposable gloves
* 1 box masks
* 15 disposable gowns
* Large rubbish bags
* 1 bottle of household bleach
* 1 large bottle of alcohol based hand rub
* Log sheet to document all persons entering and exiting the facility
* Contact and droplet precautions posters
* Stop poster for the SRS entry point
* Personal protective equipment poster (how to put on and remove)
* Instruction sheet for staff

Appendix 3 Sample cleaning and disinfection guidance

The sample below provides an example of cleaning and disinfection approach for COVID-19. Each ALPINE facility should develop their own cleaning and disinfection local protocols that reflect DHHS cleaning and disinfection guidance.

For the purpose of this example it is assumed that the isolated person occupying the room to be cleaned is not in the same room during while it is being cleaned. They can be asked to wait in an ensuite bathroom or balcony, if available. If these options are not possible, the isolated person may stay in the room being cleaned provided they are wearing a surgical mask and maintaining a distance of 1.5 metres or more from the person performing the cleaning.

**Disinfectants for cleaning**

Coronaviruses are killed by a number of chemical disinfectants readily available from consumer and commercial sources, and likely to be used already by hotels. Examples of appropriate disinfectant solutions are listed in the table below.

***Table 1:*** *Disinfectants and recommended use*

|  |  |  |
| --- | --- | --- |
| **Disinfectants** | **Recommended use** | **Precautions** |
| **Sodium hypochlorite (household bleach)**1000 parts per million of available chlorine, usually achieved by a 1 in 50 dilution of 5% liquid bleach | Disinfection of material potentially contaminated with blood and body fluids(Recommended contact time with surfaces is 10 minutes). | * Should be used in well-ventilated areas
* Protective clothing required while handling and using undiluted bleach
* Do not mix with strong acids to avoid release of chlorine gas
* Corrosive to metals
 |
| **Granular chlorine**e.g. Det-Sol 5000 or Diversol, to be diluted as per manufacturer's instructions | May be used in place of liquid bleach if this is unavailable | * Should be used in well-ventilated areas
* Protective clothing required while handling and using undiluted bleach
* Do not mix with strong acids to avoid release of chlorine gas
* Corrosive to metals​
 |
| **Alcohol**e.g. Isopropyl 70%, ethyl alcohol 70-80% | Smooth metal surfaces, tabletops and other surfaces on which bleach cannot be used | * Flammable, toxic, to be used in well-ventilated area, avoid inhalation
* Keep away from heat sources, electrical equipment, flames, hot surfaces
* Allow to dry completely
 |

Chlorine dilutions calculator

Household bleach comes in a variety of strengths. The concentration of active ingredient - hypochlorous acid - can be found on the product label.

**Table 2**: Recipes to achieve a 1000 ppm (0.1%) bleach solution

|  |  |  |
| --- | --- | --- |
| **Original strength of bleach** | **Disinfectant recipe** | **Volume in standard 10L bucket** |
| **%** | **Parts per million** | **Parts of bleach** | **Parts of water** |  |
| 1 | 10,000 | 1 | 9 | 1000 mL |
| 2 | 20,000 | 1 | 19 | 500 mL |
| 3 | 30,000 | 1 | 29 | 333 mL |
| 4 | 40,000 | 1 | 39 | 250 mL |
| 5 | 50,000 | 1 | 49 | 200 mL |

For other concentrations of chlorine-based sanitisers not listed in the table above, a dilutions calculator can be found on the <https://www2.health.vic.gov.au/public-health/infectious-diseases/infection-control-guidelines/chlorine-dilutions-calculator>.

**Table 3:** Recommended cleaning procedure by surface type (adapted from SafeWork Australia – COVID 19 - Recommended cleaning: Supplementary information, 26 May 2020).

|  |
| --- |
| **Following suspected or confirmed case**  |
| **Any Surface**  | **Method**  | **Frequently touched surfaces**  |
| Soft plastics  | Clean and disinfect  | Detergent + Disinfectant  |
| Hard plastics  | Clean and disinfect  | Detergent + Disinfectant  |
| Metal surfaces (stainless steel, uncoated steel, zinc coated steel, aluminium)  | Clean and disinfect  | Detergent + Disinfectant\* \*uncoated steel is more susceptible to rust when disinfected with bleach. After contact time is complete, there is a need to wipe off the disinfected metal surface with water.  |
| Painted metal surfaces  | Clean and disinfect  | Detergent + Disinfectant  |
| Wood  | Clean and disinfect  | Detergent + Disinfectant  |
| Laminate  | Clean and disinfect  | Detergent + Disinfectant  |
| Glass  | Clean and disinfect  | Detergent + Disinfectant  |
| Concrete (polished)  | Clean and disinfect  | Detergent + Disinfectant  |
| Concrete (rough)  | Clean and disinfect  | Detergent + Disinfectant  |
| Leather  | Clean and disinfect  | Clean and disinfect according to manufacturer’s recommendations  |
| Fabric (for confirmed COVID-19 cases and transiting passenger hotel rooms – mattresses, carpet, window and room furnishings) | Clean and disinfect with steam when guest exits quarantine | Remove dirt or soil with warm water and detergent then steam clean If launderable, wash on warmest possible setting according to manufacturer’s recommendations with laundry detergent  |
| Fabric – common areas1(e.g. for confirmed cases access to exercise, medical treatment, evacuation, rooms and includes carpet, window and chairs in hallways, lifts, common areas and PPE change rooms) | Clean daily | Vacuum with a vacuum cleaner that contains a HEPA filter Damp dust + Detergent  |

1It is recommend that all hotels should remove all soft furnishings (chairs, desks, tables, lamps) in hallways used by confirmed cases for access to exercise, medical treatment, evacuation and place these in storage.

**Personal protective equipment (PPE) for cleaning**

* Disposable gloves should always be worn while cleaning the room, toilets and other common areas, and when handling cleaning and disinfecting solutions. Dispose of gloves if they become damaged or soiled or when cleaning is completed, never wash or reuse the gloves.
* Wearing a simple surgical face mask is recommended if close contact (within 1.5 metres) with the contact person is unavoidable when the cleaning is conducted.
* Eye protection, such as goggles, and a surgical mask may be required if splashing cannot be avoided.
* Avoid touching the face with gloved or unwashed hands

**Routine cleaning**

* The use of disposable equipment, especially disposable cloths, is strongly recommended, with a fresh cloth used for each room. If other cloths are used they should be laundered in hot water wash before re-use.
* Clean surfaces as usual with a neutral detergent and water.

**Disinfection of special areas**

* In addition to routine cleaning, the following surfaces in the room which are commonly touched should be disinfected:
	+ door handles and light switches
	+ tables and counters
	+ armrests of chairs (if not fabric)
	+ TV buttons and remote controls, telephones, air conditioner (A/C) buttons and remote controls, kettle handles, fridge door handles
	+ bathroom including door handle, door lock, toilet seat and buttons, taps, wash-basins, counters, shower and/or bath
* Clean the surface first with a neutral detergent and water, and then apply the disinfectant as instructed on the disinfectant manufacturer's label. Ensure the recommended contact time occurs. Allow to dry completely.
* Adhere to any safety precautions or other label recommendations as directed (e.g. allowing adequate ventilation in confined areas such as toilets).
* Avoid using application methods that cause splashing.
* Standard disinfectants cannot be used on some surfaces, e.g. television remote controls and telephones. For these surfaces alcohol solutions are recommended.
* Consider using impermeable and cleanable zip-lock plastic bags to hold TV and A/C remote controls as these items are likely to be handled frequently.
* If contacts are permitted to leave their room or are suspected to have left their room, clean and disinfect any other areas outside the room that may have been used such as elevators (buttons and hand-rails), sauna, spa and pool areas, public telephones and vending machines.

**Waste disposal, including personal protective equipment (PPE)**

* Dispose of all soiled material, including any masks or other PPE worn by the guest, in a sturdy, leak-proof plastic bag that is tied shut and not reopened.
* Local health authorities should be consulted for appropriate disposal decisions.
* The waste can be disposed of normally.

**Food Trays, Dishes, and Cutlery**

* Disposable gloves should be worn when handling a contact's used trays, dishes and utensils
* Any disposable utensils should be discarded with other general waste.
* Wash reusable dishes and cutlery in a dishwasher with detergent and hot water as usual

**Upholstery and Carpets**

* Special cleaning procedures for upholstery, carpets and storage areas are not necessary unless obviously soiled.

**Laundry**

* Laundry staff should also wear gloves when handling laundry from the guest's room
* Linen should not be shaken as this might contaminate the surrounding area
* If linen and towels require laundering they should be collected in a laundry bag
* Linen should be emptied directly from the laundry bag into the washing machine without handling and laundered on a normal hot cycle then air or tumble dried
* Do not use compressed air and/or water under pressure for cleaning, or any other methods that can cause splashing. Vacuum cleaners should be used only after proper disinfection of other surfaces has taken place.

**Hand Washing after Room Cleaning**

* When cleaning is completed all PPE should be removed and safely disposed of in a sturdy, leak-proof plastic bag that is tied shut and not reopened
* Immediately wash hands with soap and water for 20 seconds before drying with a paper towel. Be careful not to touch the face before washing hands.