1. *Introduction*
   1. **Purpose**

This Policy serves as an essential framework that guides our efforts to minimise the risk of infections. It forms part of our Risk Management system that supports Busy Home Solutions to comply with the Risk Management and Safe Environment NDIS Practice Standards.

* 1. **Scope**

This Policy is applicable to all Workers affiliated with Busy Home Solutions. It is the responsibility of every individual, regardless of their employment status, to fully comprehend and comply with the commitments outlined in this policy. All Workers must acknowledge that they have read, understood and will comply with the contents of this Policy.

* 1. **NDIS Indicators (Objectives)**

**Risk Management**

Outcome: Risks to participants, workers and the provider are identified and managed.

To achieve this outcome, the following indicators should be demonstrated:

1. A documented risk management system that effectively manages work health and safety risks is in place, and is relevant and proportionate to the size and scale of the provider and the scope and complexity of supports.
2. Appropriate insurance is in place, including professional indemnity, public liability and accident insurance.
3. The risk management system includes emergency and disaster planning.
4. Risk assessments are regularly undertaken, and include the following:
   * 1. consideration of the degree to which participants rely on the provider’s services to meet their daily living needs;
     2. the extent to which their health and safety would be affected if those services were disrupted.
5. Infection prevention and control standard precautions are implemented throughout all settings.
6. *Policy Statement*
7. At Busy Home Solutions, the health and safety of our participants, Workers, and the broader community are of paramount importance. We acknowledge that individuals with disabilities might be at a heightened risk of contracting infectious diseases due to factors such as pre-existing health conditions and potential barriers in implementing necessary preventive measures.
8. We strive to uphold the highest standard of cleanliness, hygiene, and disease control to provide a secure and healthy environment for everyone involved in our service.
9. This policy emphasises the need for proactive and reactive measures to identify, prevent, control, and manage potential infections within our service areas. It outlines the procedures for effective hand hygiene, respiratory etiquette, appropriate usage of personal protective equipment (PPE), regular cleaning, and disinfection of shared spaces and objects.
10. Moreover, the Policy emphasises the importance of ongoing education and training for our Workers to keep them abreast of the latest infection control practices. We believe that a well-informed team is vital for successful infection prevention and control.
11. In the event of suspected or confirmed infections, we pledge to act swiftly and responsibly, adhering to local health regulations and best practices. This includes the immediate isolation of the affected individuals, prompt notification to health authorities, and comprehensive tracking and investigation to prevent the recurrence of such incidents.
12. Lastly, we commit to the regular review and updating of this policy in accordance with the evolving scientific knowledge and health guidelines to ensure its continued relevance and effectiveness. Our goal is to contribute to a healthier and safer community by actively mitigating the risk of infections in our service environment.
    1. **Relevant legislation**

All relevant legislation to this Policy is outlined in the Legislation Register.

* 1. **Related documents**

1. Risk Management Policy
2. Risk Management Register
3. Work Health and Safety Policy
4. WHS Risk Management Matrix
5. *Responsibilities and Roles*
6. Ally McPhee is responsible for the development and review of this policy. It is expected that Ally McPhee ensures this Policy remains compliant with all applicable laws, regulations and standards.
7. Key Management Personnel play a vital role in ensuring the effective implementation of this Policy throughout Busy Home Solutions. It is the responsibility of all Key Management Personnel to not only assist Workers in understanding and complying with this policy but also to comply with it themselves. By leading by example, they demonstrate the importance of adherence to the policy and foster a culture of compliance within the organisation.
8. Workers are responsible for understanding the contents of this policy and complying with all procedures applicable to them.
9. *Definitions*

**Busy Home Solutions** means Busy Home Solutions Pty Ltd ABN 30 676 258 478.

**Direct transmission** means when infectious agents are transferred from one person to another—for example, a patient’s blood entering a healthcare worker’s body through an unprotected cut in the skin.

**Indirect transmission** means the transfer of an infectious agent through a contaminated intermediate object or person—for example, a healthcare worker’s hands transmitting infectious agents after touching an infected body site on one patient and not performing proper hand hygiene before touching another patient.

**Key Management Personnel** means Ally McPhee and other key management personnel involved in Busy Home Solutions from time to time.

**Multi Resistant Organism (MRO)** means bacteria that have become resistant to the antibiotics normally used in their treatment

**Director** means Ally McPhee.

**Standard Precautions** means the minimum infection prevention practices that apply to all patient care, regardless of suspected or confirmed infection status of the patient, in any setting where healthcare is delivered.

**Worker** means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Busy Home Solutions and includes the Director.

1. *Procedures*
   1. **Infection Control System**
2. **Risk Identification**
   * 1. Regularly assess all areas of operation for potential infection risks. This may include participant interactions, communal spaces, equipment, and materials used, waste disposal.
     2. Document all identified risks in the Risk Management Register.
3. **Risk Assessment**
   * 1. Evaluate each identified risk based on the likelihood of occurrence and the potential severity of consequences.
     2. Prioritise risks according to their potential impact on health and safety.
4. **Risk Control Measures**:
   * 1. Develop and implement appropriate control measures to minimise each identified risk.
     2. This may include Workers training on hygiene and infection control practices, use of appropriate personal protective equipment (PPE), proper cleaning and disinfection procedures and immunisation programs.
5. **Monitoring and Review**:
   * 1. Regularly monitor the effectiveness of control measures. This may involve audits, Worker feedback, infection rates, and reviewing incident reports.
     2. Review and update the risk management procedure and control measures as needed, particularly following changes in operations, health information, or after an infection outbreak.
6. **Communication and Documentation**:
   * 1. Inform all Workers about the identified risks and the measures taken to control them.
     2. Document all steps of the risk management process, including risk identification, risk assessment, control measures, and monitoring results.
     3. Store all documentation securely, maintain its accuracy, and ensure its accessibility to Workers as required.
7. **Continuous Improvement**:
   * 1. Continually improve infection control risk management based on feedback, new information or guidelines, and findings from monitoring and review activities.
8. **Training**

All Workers will receive training in relation to infection prevention and control. Training will include but not limited to:

* + - * 1. An Online COVID-19 Infection Control/PPE Training Module such as:

[Supporting People to Stay Infection Free (teamdsc.com.au)](https://teamdsc.com.au/learning/supporting-people-to-stay-infection-free)

[Maintaining safe and effective infection control in disability settings (nds.org.au)](https://www.nds.org.au/resources/all-resources/maintaining-safe-and-effective-infection-control-in-disability-settings)

[Infection Prevention and Control eLearning Modules | Australian Commission on Safety and Quality in Health Care](https://www.safetyandquality.gov.au/our-work/infection-prevention-and-control/national-hand-hygiene-initiative/national-hand-hygiene-initiative-nhhi-learning-management-system-lms/infection-prevention-and-control-elearning-modules)

* + - * 1. Training in relation to Busy Home Solutions' Infection Control processes and precautions as outlined in this Policy.
        2. Information regarding the importance of Infection Control and the core principles of Infection Control.
  1. **Standard Precautions**

1. **Hand hygiene**: Effective hand hygiene is the single most important strategy in preventing healthcare associated infections.
   * 1. When to Perform Hand Hygiene:
        + 1. Before and after every interaction with a participant.
          2. Before and after using gloves.
          3. After contact with body fluids, mucous membranes, non-intact skin, or wound dressings.
          4. After using the restroom.
          5. Before preparing, handling, serving or eating food.
          6. After touching or handling waste materials.
     2. Hand Washing Procedure:
        + 1. Wet your hands with clean, running water (warm or cold) and apply soap.
          2. Rub your hands together to create a lather. Do this away from running water, so the lather is not washed away.
          3. Scrub all surfaces of your hands, including the palms, backs, fingers, between your fingers, and under your nails. Keep scrubbing for at least 20 seconds.
          4. Rinse your hands thoroughly under clean, running water.
          5. Dry your hands using a clean towel.
     3. Hand Sanitizing Procedure:
        + 1. If soap and water are not readily available, use a hand sanitizer with at least 60% alcohol.
          2. Apply the hand sanitizer on one palm, covering all surfaces of your hands and rub them together until they feel dry.
          3. Note that hand sanitizers are not effective when the hands are visibly dirty or greasy. In such cases, hand washing with soap and water should be performed.
     4. Skin Care:
        + 1. Regularly apply a moisturising lotion to prevent dryness and cracking of skin, as damaged skin can harbour bacteria.
     5. Fingernails:
        + 1. Keep fingernails short and clean. Long fingernails can harbour bacteria and make thorough hand washing more difficult.
          2. Avoid artificial nails or nail extensions as they can harbour bacteria and cause infections.
     6. Glove Usage:
        + 1. Always perform hand hygiene before putting on and after removing gloves.
          2. Use gloves when there is potential for contact with body fluids, mucous membranes, non-intact skin, or contaminated equipment. Do not use the same pair of gloves for more than one task.
          3. Remove gloves immediately after use, before touching non-contaminated items and surfaces, and before going to another participant.
2. **Personal Protective Equipment**
   * 1. Protective barriers (eye shields, gloves, gowns and masks) are to be used whenever there is a potential for exposure to blood and body substances.
     2. General purpose utility gloves should be worn for housekeeping tasks including cleaning clinical instruments and handling chemical disinfectants.
     3. Utility gloves are to be discarded if they are peeled, torn or punctured or have other evidence of deterioration.
3. **Use and management of sharps**
   * 1. Proper Use of Sharps:
        + 1. Sharps should only be used by trained personnel.
          2. Use safety devices where appropriate to minimise the risk of injury.
          3. Avoid hand-to-hand passing of sharp instruments.
          4. Do not attempt to re-cap, bend, break, or hand-manipulate used needles or sharps.
          5. Always plan for the safe handling and immediate disposal of sharps at the point-of-use.
     2. Immediate After-Use Procedure:
        + 1. Immediately discard used sharps into an approved, puncture-resistant sharps container located at the point-of-use.
          2. Do not overfill sharps containers. They should be replaced when they are two-thirds full.
     3. Handling Sharps Containers:
        + 1. Sharps containers should never be opened, emptied, or manually cleaned.
          2. Full sharps containers should be locked or securely sealed to prevent spillage during transport.
     4. Disposal of Sharps Containers:
        + 1. Follow local regulations and guidelines for the disposal of sharps containers.
          2. Only a licensed waste disposal contractor should handle the final disposal of sharps containers.
     5. In Case of Sharps Injury:
        + 1. If a sharps injury occurs, wash the affected area immediately with soap and warm water. Do not scrub the area or apply bleach or disinfectants.
          2. Report the injury promptly to the appropriate person, such as a Key Personnel or Ally McPhee.
          3. Ensure that you receive appropriate follow-up care.
4. **Management of the physical environment**
   * 1. Frequently touched surfaces are to be cleaned at least daily, when visibly soiled and after every known contamination. The following products are to be used to clean frequently touched surfaces:
        + 1. Detergent solution if no known MRO or infectious agent present.
          2. Detergent solution combined with a disinfectant if MRO or infectious agent present.
     2. General surfaces and fittings are to be cleaned when visibly soiled and immediately after spillage. The following products are to be used to clean general surfaces:
        + 1. Detergent solution if no known MRO or infectious agent present.
          2. Detergent solution combined with a disinfectant if MRO or infectious agent present.
     3. When conducting routine cleaning a detergent solution is to be used followed by rinsing and drying the surface.
     4. Spills are to be handled in accordance with the Waste Management Policy.
5. **Respiratory hygiene and cough etiquette**:
   * 1. Anyone with signs and symptoms of a respiratory infection, regardless of the cause, should follow or be instructed to follow respiratory hygiene and cough etiquette as follows:
        + 1. Cover the nose/mouth with disposable single-use tissues when coughing, sneezing, wiping and blowing noses.
          2. Use tissues to contain respiratory secretions.
          3. Dispose of tissues in the nearest waste receptacle or bin after use.
          4. If no tissues are available, cough or sneeze into the inner elbow rather than the hand.
          5. Practice hand hygiene after contact with respiratory secretions and contaminated objects/materials.
          6. Keep contaminated hands away from the mucous membranes of the mouth, eyes and nose.
6. **Vaccination:** All Workers must show proof of vaccination for:
   * 1. Covid-19.
     2. Influenza (Busy Home Solutions assists workers to access Influenza vaccinations).
   1. **Covid-19**

Busy Home Solutions is committed to protecting the health and safety of our Participants, Workers, and the community from COVID-19. We aim to reduce the risk of COVID-19 transmission and ensure the continuity of our essential services by following the latest guidance from health authorities.

1. **Prevention and Control Measures:**
   * 1. Regularly clean and disinfect high-touch surfaces and communal areas.
     2. Workers must use appropriate PPE, including masks and gloves, according to local health guidelines.
     3. Promote regular hand hygiene by making hand sanitizers available throughout facilities. Encourage good respiratory etiquette such as covering mouth and nose with a tissue or elbow when coughing or sneezing.
     4. Implement social distancing measures where possible and limit group activities and close contact between individuals.
2. **Isolation protocols:** 
   * 1. A Worker must notify Busy Home Solutions and stay home from work if:
        + 1. They display symptoms of Covid-19;
          2. They are a close contact of someone with Covid-19; or
          3. They test positive for Covid-19.
3. **Testing:** 
   * 1. Any symptomatic individual will be encouraged to get a COVID-19 test. Workers can assist participants in scheduling and accessing testing, as necessary.
4. **Return to Work or Service:** 
   * 1. A symptomatic Worker or Participant can return to work or service only after meeting the criteria set out by public health authorities. This generally includes a period of isolation, being symptom-free, and a negative COVID-19 test result.
5. **Communication and Training:**
   * 1. Keep all Workers updated on the latest information regarding COVID-19, including symptoms, prevention methods, and what to do if they or someone they are supporting becomes ill.
     2. Train Workers on the use of PPE, cleaning protocols, and other preventive measures.
6. **Service Continuity Planning:**
   * 1. Ensure a plan is in place for service continuity in the event of a COVID-19 outbreak. This may include contingencies for Worker shortages or changes in service delivery methods.
7. **Notification:**
   * 1. Busy Home Solutions should notify the NDIS Commission using the [notification-event-form-covid-19-registered-providers form](https://www.ndiscommission.gov.au/resources/covid-19-resources-and-information/notification-event-form-covid-19-registered-providers), if one of the following events occurs:
     2. A Worker or Participant is confirmed with the COVID-19 infection.
     3. A decision of a registered NDIS provider to not accept, on a temporary or permanent basis, new participants for supports or services that the provider is registered to provide.
     4. A significant adverse change in wait times for the provision of supports or services to participants that the provider is registered to provide.
     5. A significant shortfall in available workers of the registered NDIS provider to provide the supports or services the provider is registered to provide.
     6. The cessation, on a temporary or permanent basis, of the provision of supports or services that the provider is registered to provide.
     7. A significant increase or decrease in the number of participants being provided with a support or service as a result of Workers losses due to infection or participant cancellations due to infection.
     8. A decrease in Workers that is unexpected and/or to an extent that the provider is unable to provide continuity of services or supports to the NDIS participants who currently receive such services or supports from the provider.
8. *Policy review and updates*

This Policy is to be amended and updated according to the requirements to comply with the applicable law.

**Approval Authority:** Ally McPhee

**Version:** 1

**Approval Date:** June 2024

**Review Date:** June 2026