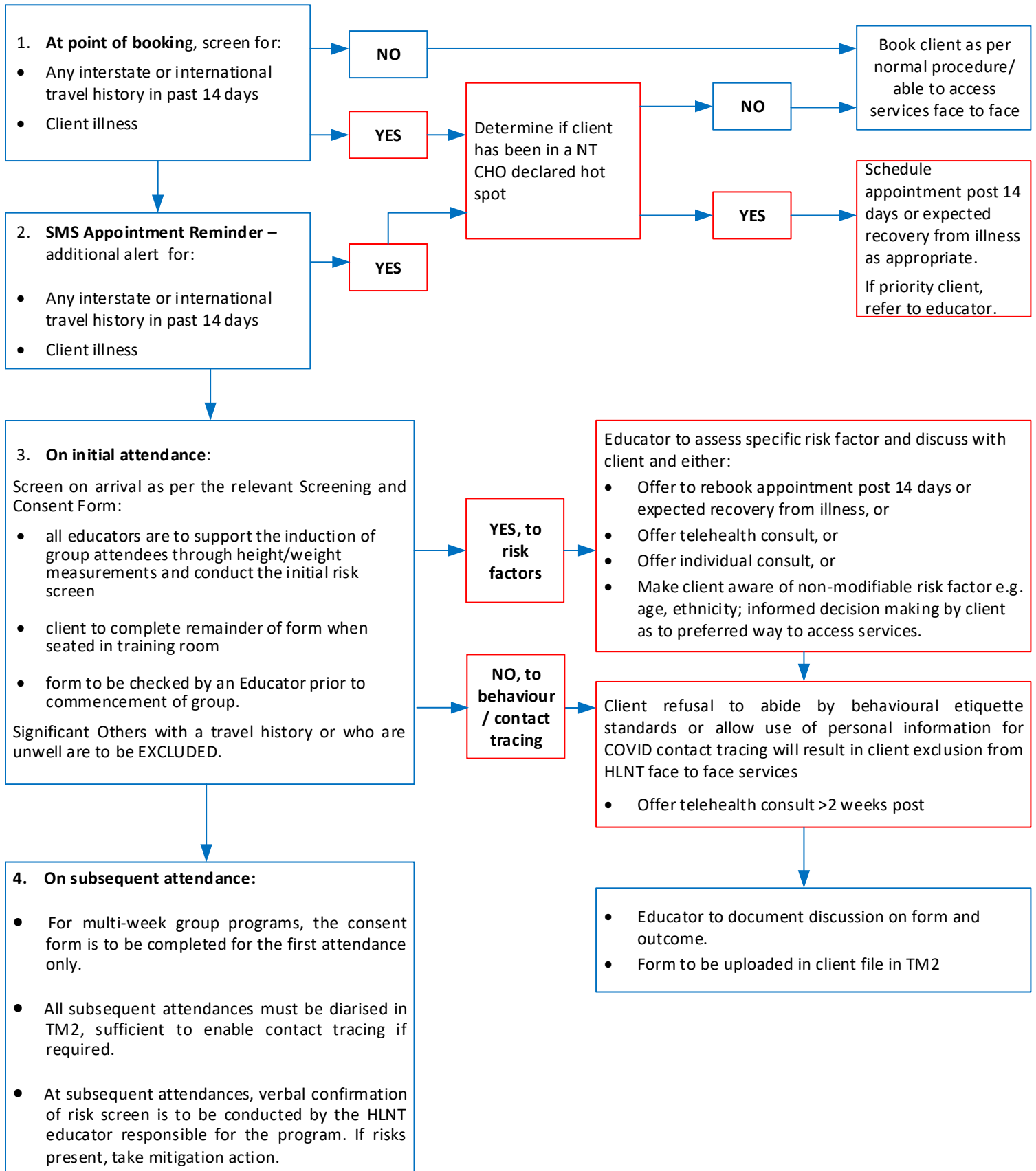


Action

Risk Mitigation



1. **At point of booking**, screen for:

- Any interstate or international travel history in past 14 days
- Client illness

NO

Book client as per normal procedure/ able to access services face to face

YES

Determine if client has been in a NT CHO declared hot spot

NO

Schedule appointment post 14 days or expected recovery from illness as appropriate.
If priority client, refer to educator.

YES

2. **SMS Appointment Reminder – additional alert** for:

- Any interstate or international travel history in past 14 days
- Client illness

YES

3. **On initial attendance:**

Screen on arrival as per the relevant Screening and Consent Form:

- all educators are to support the induction of group attendees through height/weight measurements and conduct the initial risk screen
- client to complete remainder of form when seated in training room
- form to be checked by an Educator prior to commencement of group.

Significant Others with a travel history or who are unwell are to be EXCLUDED.

YES, to risk factors

Educator to assess specific risk factor and discuss with client and either:

- Offer to rebook appointment post 14 days or expected recovery from illness, or
- Offer telehealth consult, or
- Offer individual consult, or
- Make client aware of non-modifiable risk factor e.g. age, ethnicity; informed decision making by client as to preferred way to access services.

NO, to behaviour / contact tracing

Client refusal to abide by behavioural etiquette standards or allow use of personal information for COVID contact tracing will result in client exclusion from HLNT face to face services

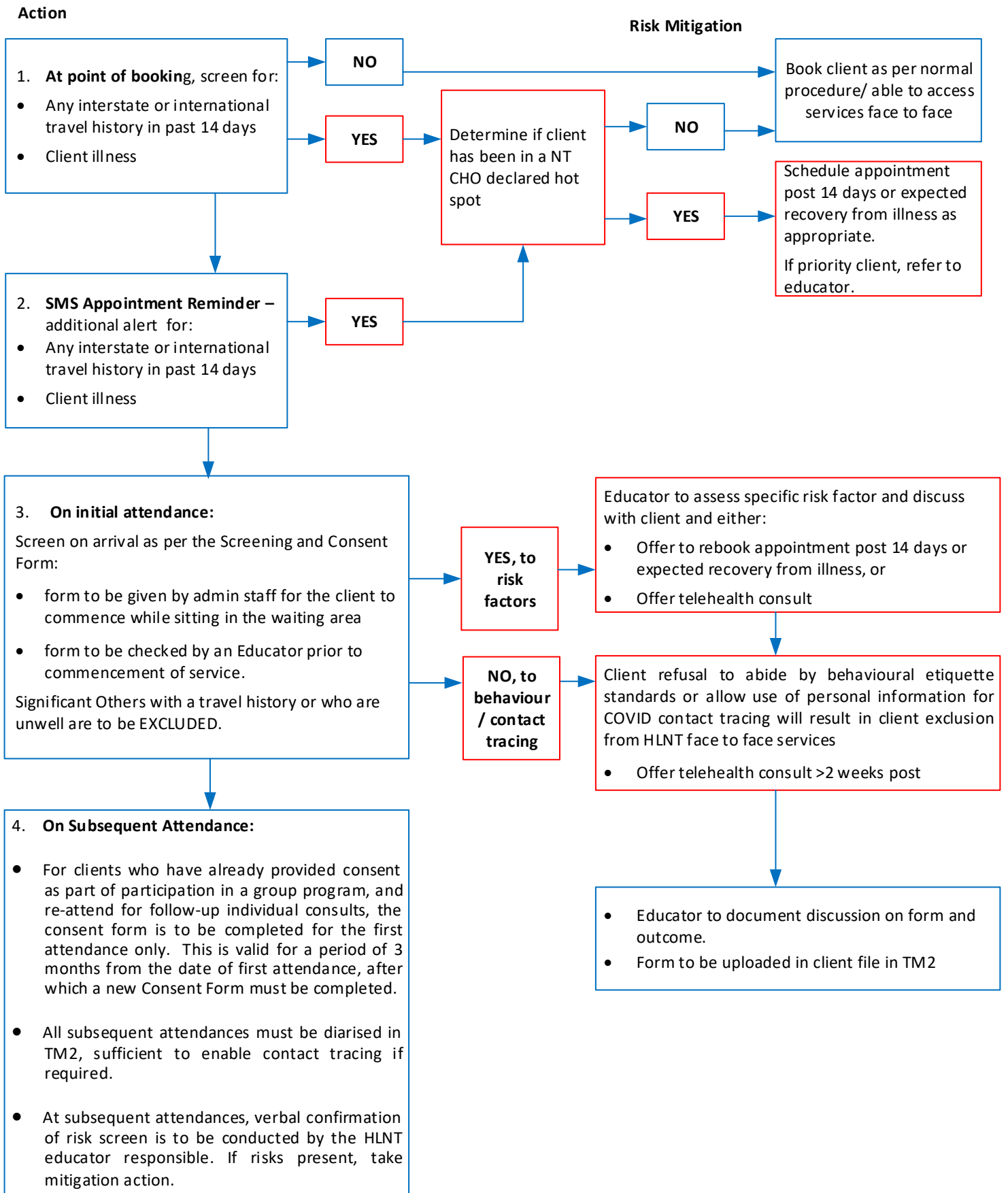
- Offer telehealth consult >2 weeks post

4. **On subsequent attendance:**

- For multi-week group programs, the consent form is to be completed for the first attendance only.
- All subsequent attendances must be diarised in TM2, sufficient to enable contact tracing if required.
- At subsequent attendances, verbal confirmation of risk screen is to be conducted by the HLNT educator responsible for the program. If risks present, take mitigation action.

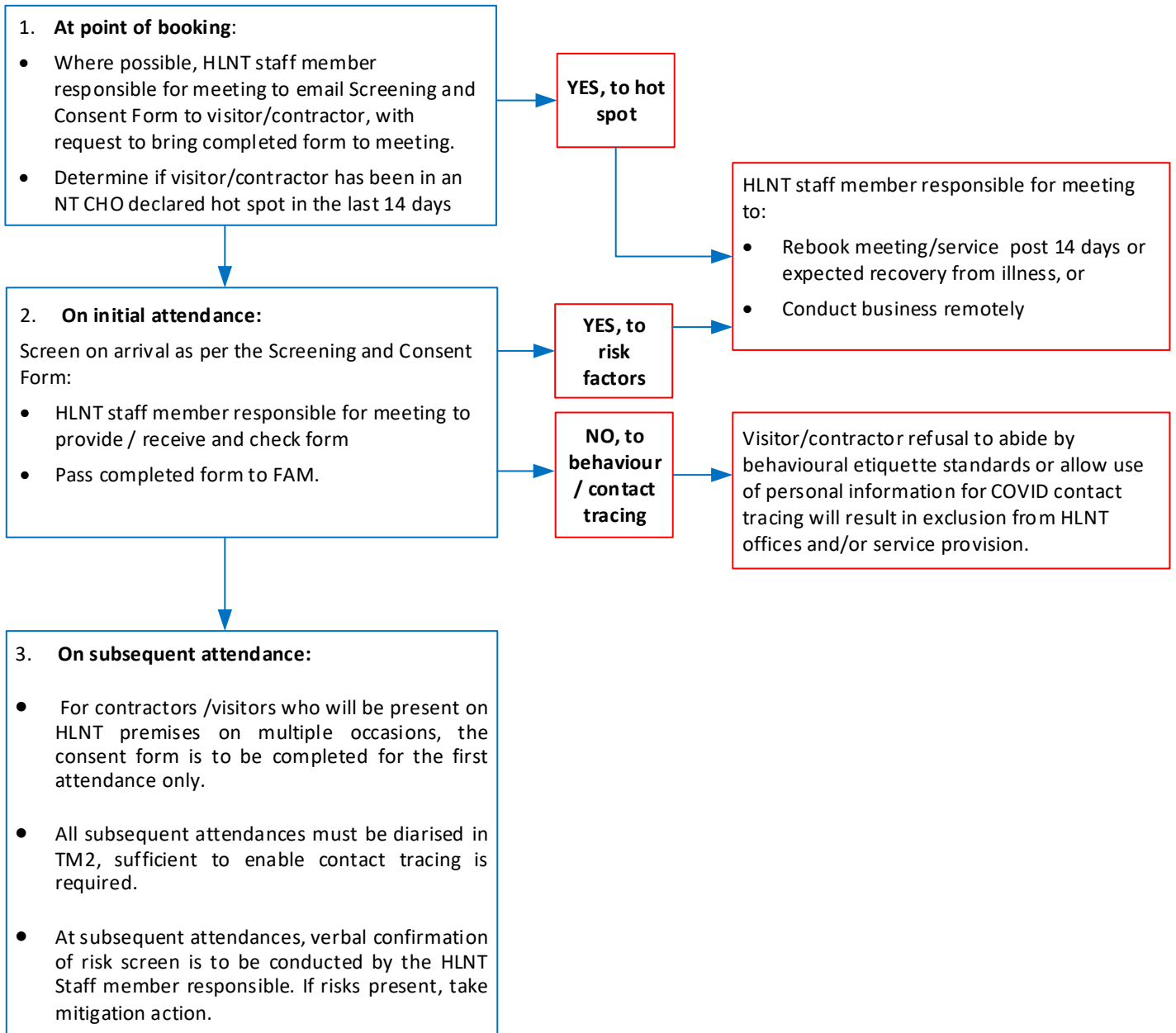
Educator to document discussion on form and outcome.

Form to be uploaded in client file in TM2



Action

Risk Mitigation



Key Concepts:

1. HLNT Risk Mitigation: Seeks to ensure that HLNT, its staff and clients have a reduced chance of compromise due to COVID-19.

In view of the COVID-19 high risk client group that HLNT services i.e. people with chronic disease and the amount of services provided to people in remote Indigenous communities, who have a higher risk profile, Healthy Living NT has determined that its staff, especially its clinicians, fall under the CDC definition of people working in hospitals or aged/residential facilities who have patient contact.

HLNT acknowledges that it may impose a higher standard of requirement than may be imposed by the NT Government; this is based on the higher risk posed by COVID-19 to HLNT's client group.

All staff must:

- continue to follow all COVID social etiquette and physical distancing precautions.
- stay home if they are unwell. If unwell / symptomatic, staff should have a COVID test and follow the directions of the NT CDC
- report if they have been in contact with a suspected or confirmed COVID-19 case or are sharing accommodation with a person currently in isolation.

2. Close Contact: Is defined as greater than 15 minutes face to face contact in any setting.

3. Community Transmission: Describes the situation where a person is infected by COVID-19 but they have not been overseas or interstate recently or been in recent contact with other confirmed cases. The term basically means authorities are unable to trace the source of the infection.

4. Location (with/without demonstrated COVID-19 community transmission):

For access (staff/client/visitor/contractor) to HLNT offices, HLNT will be following the NT Governments advice regarding declared hot spots by the NT CHO. For service contracts where we have additional requirements i.e. Land Council permits, then HLNT staff are required to abide by those restrictions.

5. Work from Home:

The assessment of whether a staff member can work from home (when excluded from HLNT offices due to potential COVID exposure) is based on a number of factors including (but not limited to):

- a) the nature of the person's position and in particular whether it is a client-facing position
- b) the status of HLNT's mode of service delivery at that particular point in time
- c) the overall impact on HLNT services, staff and clients
- d) the likely impact on any service being provided by staff member as a result of exclusion period on return,
- e) the value and quantum of the work that can be conducted from home with regard to meeting KPIs and HLNT objectives.

Any request to work from home during an exclusion period (either NTG or HLNT mandated) must be supported by a detailed work plan. If work from home is not possible, this will be at your own cost and utilising either recreation or long service leave or leave without pay.

6. Highly changeable environment:

These continue to be very difficult times and the situation is constantly changing. It is important to understand that the COVID-19 environment is highly changeable. The situational status when a trip is planned or in progress may change before a person has returned. This may include outbreaks of community transmission in particular areas, changes in NT Government mandated action and changes in ability to travel e.g. flight cancellations. Where a person's role involves a higher level of time away from a service contract post travel (eg remote trips under MOICD), non essential/non emergency travel may not be approved if not forward planned in scheduling and able to be rostered around.

7. Guidelines:

These guidelines serve as a base point of reference and may change according to circumstances at any time. They will be reviewed at the end of January 2021.

Scenario 1

HLNT Staff travel external to the NT for business purposes

Action

No business travel allowed for the period. Special exemption may be approved by the CEO/President in extreme circumstances.

Risk Mitigation on Return (+/- possible NTG mandated action)

See risk mitigation on return to the NT outlined in Scenarios 3 and 4.

Scenario 2

HLNT staff with household members

Action

Nil

Risk Mitigation (+/- possible NTG mandated action)

Staff member must:

- Proactively monitor the health status of themselves and their household members, and
- If any household member develops symptoms, have a COVID test, and
- Exclude themselves from HLNT offices and contact with HLNT staff pending test results, and
- Follow the directions of the CDC if test results are positive, and
- Advise HLNT.

Scenario 3

Action

Risk Mitigation on Return (+/- possible NTG mandated action)

Unscheduled/emergency/medical HLNT staff travel external to the NT for personal purposes

Travelling staff member must:

- Advise HLNT management at the earliest opportunity of need to travel,
- Provide a detailed travel itinerary to HLNT including locations, durations and stopovers, and
- Anticipated date of return (if known)

Before return to office-

- Determine if staff member has been in a NT CHO declared hot spot in the last 14 days

YES

If travel to or through locations declared a hot spot by the NT CHO:

- Exclude themselves from HLNT offices, staff and programs for a period of 14 days from return
- Monitor their health status and have COVID test if symptomatic; Follow the directions of the CDC if test results are positive. Advise HLNT.
- Discuss with HLNT whether work from home is possible during the period of exclusion from the office

Delay their return to the office if they are unwell

NO

Returning staff member must advise HLNT management at the earliest opportunity :

- of their health status (both current and during travel),
- whether they have been in contact with a suspected or confirmed COVID-19 case or a person in isolation for COVID-19
- Any variations in their travel itinerary

HLNT to review and approve appropriate course of action.

If travel to and through locations which are not declared hot spots according to the NT CHO, staff member are to:

- Monitor their health status and have COVID test if symptomatic; Follow the directions of the CDC if test results are positive. Advise HLNT.
- Delay their return to the office if they are unwell

