Covid-19 Response in Prisons

Description
This documents includes:

*Custodial Operations Policy and Procedures*
Corrective Services NSW (CSNSW) is committed to the prevention and control of infectious and communicable diseases in its facilities and areas of operation.

This can be achieved by implementing a range of measures including governance, awareness and assessment, standard and additional precautions, treatment and vaccination, reporting, cleanliness, and food safety.

Standard precautions must be followed to reduce risk of transmission of infectious or communicable diseases.

*Posters*

*Factsheet – 6 March 2020*

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**Point of Contact**
Corrective Services New South Wales

Policy summary

Corrective Services NSW (CSNSW) is committed to the prevention and control of infectious and communicable diseases in its facilities and areas of operation.

This can be achieved by implementing a range of measures including governance, awareness and assessment, standard and additional precautions, treatment and vaccination, reporting, cleanliness, and food safety.

Standard precautions must be followed to reduce risk of transmission of infectious or communicable diseases.

Management of Public Correctional Centres Service Specifications

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<td></td>
<td>Health services</td>
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<tr>
<td></td>
<td>Safety and security</td>
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</table>

Scope

This section applies to all correctional centres and other facilities administered by or on behalf of CSNSW.

It also applies to all CSNSW employees, and where relevant to other personnel such as Justice Health & Forensic Mental Health Network (JH&FMHN), contractors, subcontractors, and visitors.

For Security & Intelligence (S&I) staff, this policy must be read in conjunction with S&I Local Operating Procedures (LOPs). In the event of any inconsistency between this policy and S&I LOPs, the LOPs prevail.
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1 Infectious and communicable diseases

1.1 Policy

CSNSW is committed to the prevention and control of infectious and communicable diseases in correctional centres, during transport, and in other areas under its control.

The spread of infectious and communicable diseases can be prevented or controlled by implementing a multi-modal strategy that includes:

- governance (all managers and officers must understand and implement their responsibilities as described in this policy)
- awareness and assessment (inmates should be assisted and encouraged to undergo assessment if an infectious/communicable disease is suspected; staff should also be mindful that they can also be a source of infections/communicable diseases)
- reporting within CSNSW and with the JH&FMHN
- implementing standard precautions
- implementing additional precautions, where required
- cleanliness
- treatment and vaccination.

1.2 Standard precautions

Staff are required to work safely and use standard precautions at all times to reduce risks of transmitting infectious/communicable diseases from recognised and unrecognised sources, including respiratory, blood-borne viruses, gastroenteritis, and blood-borne illness. This requires that staff assume everyone may be infectious, including inmates, visitors, contractors, and other staff.

Standard precautions must also be used to avoid contact with blood, all body fluids (including secretions and excretions (except sweat) regardless of whether or not they contain visible blood), non-intact skin, and mucous membranes.

Standard precautions involve safe work practices, and protective barriers, including:

- maintaining distance from splashes and sprays of blood and body fluids;
- wearing a mask and protective eyewear if contact with blood and bodily fluids is anticipated;
- not touching your eyes, nose, mouth with uncleaned hands or used gloves;
- protecting the body and clothing from contact with blood or body fluids, or wearing protective disposable overalls if contact with blood or body fluids is anticipated;
- wearing disposable gloves if contact with blood or body substances is anticipated, and disposing of the gloves as soon as task is completed. A clean pair of gloves must be used for each inmate during body searches;
wearing clean uniforms and providing inmates with clean and dry clothes that meet the Australian/New Zealand Standard for Laundry Practice;

- maintaining clean and dry workplaces and transport vehicles, and providing resources to inmates to clean their cells;

- cleaning equipment such as handcuffs, and other restraints after each use with Fincol;

- ensuring safe handling and disposal of sharps (refer to COPP section 15.1 Safe work practices).

1.3 Vaccinations

Many infectious/communicable diseases can be prevented by vaccination. All staff are encouraged to consult their General Practitioner about immunisation and vaccination against diseases, such as influenza and Hepatitis B.

CSNSW is responsible for the cost of vaccines if any kitchen worker has been identified by JH&FMHN staff as being recommended for Hepatitis A vaccine.

Governors must ensure inmates have access to the Health Centre to participate in vaccination programs.

Governors should also develop a plan with the Nurse Unit Manager (NUM) of the Health Centre to ensure inmates have access to the annual Winter Immunisation Program.

1.4 Additional precautions

Additional precautions are used in addition to standard precautions to help prevent the transmission of infection.

JH&FMHN clinical staff are responsible for advising CSNSW staff about any inmates under their care who may have infectious/communicable disease-related health problems.

The confidentiality of the inmate’s health must be protected under the duty of care for JH&FMHN and only the necessary information should be made available, unless the inmate(s) have given their informed documented consent (refer to COPP section 22.4 Medical records and health information).

All advice from JH&FMHN must be provided to CSNSW through a Health Problem Notification Form (HPNF), which will advise of any additional precautions and actions that should be implemented to reduce the risk of staff or an inmate being exposed to an infection risk (refer to COPP section 6.1 JH&FMHN notifications). These actions may include some or all of the following:
• use of certain types of Personal Protective Equipment (PPE), such as face masks or impervious, long sleeved gowns;
• assisting JH&FMHN to have access to other inmates to assess the risk of infection;
• restricting movement of inmates with an infectious/communicable disease;
• restricting movement of inmates who have been assessed as susceptible to, or who have been exposed to, that particular infectious/communicable disease;
• transfer of inmates to hospital;
• assisting JH&FMHN to implement a mass vaccination program for susceptible inmates, when required;
• liaising with JH&FMHN and other authorities for the mass vaccination of susceptible staff, when required;
• ensuring staff and inmates have access to appropriate hand washing facilities; (liquid soap (communal bars are not to be used), warm water and paper towels) at all times;
• increasing the frequency of cleaning in the accommodation areas;
• regular communication between CSNSW and JH&FMHN senior managers to share current information and coordinate appropriate management;
• establishing communication strategies for inmates, staff and visitors.

1.5 Health survival tips

The Health Survival Tips (HST) session is delivered by Offender Services and Programs (OS&P) within each correctional centre to assist inmates with information to maintain their health and reduce risks of contracting infections.

Inmates in NSW correctional centres must attend a HST session, and if required the Responsivity Provision Offender Services & Programs (RPOSP) Health Strategies course (see Offender Services & Programs CSNSW: Policy for Delivery in Custody of the Health Survival Tips Session and RPOSP Health Strategies Course).

1.6 Procedure for transfer of information between CSNSW and JH&FMHN

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Advise governor or Officer in Charge (OIC) of the correctional centre if an inmate reports a possible exposure to an infectious/communicable disease</td>
<td>JH&amp;FMHN staff</td>
</tr>
<tr>
<td>2. Refer inmate to the Health Centre for assessment of the reported risk. If this occurs after hours, the JH&amp;FMHN After Hours Nurse Manager (AHNM) should be contacted by telephone on 1300 076 267 (13000 ROAMS) (refer to COPP section 6.1 JH&amp;FMHN notifications)</td>
<td>Governor/OIC</td>
</tr>
<tr>
<td>3. Notify the JH&amp;FMHN Clinical Nurse Consultant, Infection Prevention &amp; Communicable Diseases during</td>
<td>Senior JH&amp;FMHN staff</td>
</tr>
<tr>
<td>Procedure</td>
<td>Responsibility</td>
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<tr>
<td>---------------------------------------------------------------------------</td>
<td>----------------------------------</td>
</tr>
<tr>
<td>business hours, or the AHNM if an inmate is suspected or confirmed to have any sickness that presents a threat to the welfare of any person. Follow advice provided regarding patient management</td>
<td></td>
</tr>
<tr>
<td>4. Provide a report and issue a HPNF including advice and precautions for the management of the inmate to the governor or OIC</td>
<td>Senior JH&amp;FMHN staff</td>
</tr>
<tr>
<td>5. Implement advice and additional precautions that are consistent with the recommendations provided by JH&amp;FMHN, and are to be used to protect staff, other inmates and visitors while one or more inmates are infectious. Note that additional precautions must be implemented where advice has been received that inmate(s) have an infectious/communicable disease</td>
<td>Governor/OIC</td>
</tr>
<tr>
<td>6. Report the incident in line with COPP section 13.2 Medical emergencies</td>
<td>Governor</td>
</tr>
<tr>
<td>7. Issue a new HPNF after inmate(s) have been assessed as no longer being infectious.</td>
<td>JH&amp;FMHN staff</td>
</tr>
</tbody>
</table>

## 2 Cleaning and hygiene

### 2.1 Policy

Cleanliness requires a high level of hygiene in both workplace and accommodation areas, including general hygiene practices, cleaning standards, and clean clothing, food, water, equipment.

JH&FMHN employ a Senior Environmental Health Officer (SEHO) who works with CSNSW governors to assess and address environmental health issues such as:

- clean water, air and food
- infestations of pests
- incidents with sewers
- barbershops and hairdressers ([refer to COPP section 8.12 Hairdressing and hygiene](#))
- food safety
- microbiological testing of air-conditioner cooling towers and warm water systems.
2.2 Fincol

Within the correctional centre environment there are general cleaning products available for everyday use, however, Fincol is the only disinfectant approved by CSNSW. Fincol should be used for and not limited to cleaning:

- Blood and bodily fluid spills;
- handcuffs, anklets, helmets and other restraints;
- cells, toilets and shower areas;
- barbering and hairdressing equipment;
- injecting drug use equipment and tattooing equipment;
- any other situation which may prevent the spread of blood-borne infections.

Note: Dishwashing liquid is not suitable and must not be substituted for Fincol for these cleaning purposes.

Fincol must be used at the correct concentration from the dispensers provided and must not be poured directly from the container as it is dangerous. Inmates are not to be issued with undiluted Fincol or other concentrated caustic products to clean their cells.

Fincol must be available to inmates at all times. Staff and inmates must have ready access to it:

- during out of cell hours: dispensers in wings, yards and work locations etc.;
- during in cell hours: inmates are permitted to take a cup or other container of Fincol to their cell.

Undiluted Fincol containers must not be placed in any location other than inside a locked dispenser.

Inmate workers (Sweepers) are not permitted to keep containers of undiluted Fincol or other cleaning supplies/equipment in their cells. Access to undiluted Fincol containers and other cleaning supplies/equipment will be issued to inmate workers (Sweepers) by officers and locked away until required. The keys to these locks must be kept by correctional officers and must not be provided to inmates.

Management and supervising staff must be familiar with safe work practices generally required under the work health and safety legislation. Information on these practices can be found on CSNSW WHS intranet.

Reference should also be made to Hazardous chemical information – WHS procedure.

Local Operating Procedures (LOP) must be implemented to ensure management of Fincol conforms with this policy.

2.3 Procedures for using Fincol

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Governor/Authorised</td>
</tr>
</tbody>
</table>
2. Display Safety Data Sheet and posters describing the use of Fincol and safety precautions next to dispensers. Obtain these posters from the Fincol supplier Jasol

3. Supervise inmate cleaners (Sweepers) to ensure the appropriate amount of Fincol is dispensed from approved dispensers into buckets and containers, for the immediate job at hand

4. Monitor and ensure cleaning procedures are performed regularly:
   - cells must be cleaned and disinfected by inmates weekly
   - common areas must be cleaned and disinfected weekly
   - cells must be thoroughly cleaned and disinfected by inmates when they move cells
   - all showers and toilets must be cleaned and disinfected daily

5. Monitor and ensure availability of Fincol (ensure controls are in place which must include Local Operating Procedures (LOPs)).

2.4 Procedure for distributing and collecting disposable razors

Officers are accountable for the safe collection and disposal of razors within their area of responsibility. The following procedures must be implemented:

1. Issue gloves and sharps containers to inmates employed as hygiene workers in correctional centres when they are required to clean showers and toilet blocks.

   This will ensure the inmates’ safety and allow for safe disposal of used razors left in these areas.

   Sharps containers must be deposited by an authorised officer in a sharps bin located at the Health Centre

2. Ensure that educational material (posters and pamphlets) on infection control, safe use and disposal are displayed and made available to all inmates.
2.5 Procedures for respiratory hygiene

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Responsibility</th>
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</thead>
<tbody>
<tr>
<td>1.  Cover a cough or sneeze with a tissue. If a tissue is not available, cough or sneeze into the elbow so that the hands do not become contaminated. One metre distance, at least, should be maintained from people who are coughing, sneezing or spitting, where possible</td>
<td>All staff and inmates</td>
</tr>
<tr>
<td>2.  Discard the tissue and wash hands thoroughly before touching the eyes, nose or mouth.</td>
<td>All staff and inmates</td>
</tr>
</tbody>
</table>

3 Management of blood and body substance spills

3.1 Policy

The Emergency Response Kit (ERK) is essential equipment for officers responding to incidents involving blood or body substance spills to reduce the risk of staff being exposed to communicable diseases or risk of injury.

Stocks for the ERK must be adequately maintained. All equipment should be ordered through ‘NSWBuy’ in accordance with NSW Procurement requirements. The governor should identify an authorised officer to access stock lists and order the equipment (refer to COPP section 15.1 Safe work practices).

Further information about what should be contained in an ERK can be accessed in Emergency response kit (ERK) and other protective work equipment.

Note that first aid must be performed immediately if any exposed skin becomes contaminated with blood or body substances by washing the area thoroughly with liquid soap and water (after removing gloves) (refer to COPP section 13.2 Medical emergencies).

3.2 Procedure for blood and body substance spills

Whenever there are spills of blood or body substances, all staff involved in the management of spills should immediately:

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.  Use the ERK to manage the spill</td>
<td>Staff involved</td>
</tr>
<tr>
<td>2.  Put on protective clothing, including eyewear, mask, overalls, booties and three pairs of disposable gloves</td>
<td>Staff involved</td>
</tr>
</tbody>
</table>
### Procedure

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Sprinkle granules over the spill (leave for 2 minutes to set)</td>
<td>Staff involved</td>
</tr>
<tr>
<td>4. Assemble scoop and scraper</td>
<td>Staff involved</td>
</tr>
<tr>
<td>5. Scoop up solidified spill, place into clinical waste bag</td>
<td>Staff involved</td>
</tr>
<tr>
<td>6. Mop floor with Fincol (use mop with red head, and a red bucket)</td>
<td>Staff involved</td>
</tr>
<tr>
<td>7. Empty the bucket and refill with Fincol. Remove gloves and place in</td>
<td>Staff involved</td>
</tr>
<tr>
<td>general rubbish unless visibly contaminated with blood or body</td>
<td></td>
</tr>
<tr>
<td>substances then dispose in clinical waste bag</td>
<td></td>
</tr>
<tr>
<td>8. Wash hands thoroughly and put on disposable gloves again</td>
<td>Staff involved</td>
</tr>
<tr>
<td>9. Empty the bucket, refill with Fincol and mop the floor again</td>
<td>Staff involved</td>
</tr>
<tr>
<td>10. Remove one pair of gloves and place in the clinical waste bag</td>
<td>Staff involved</td>
</tr>
<tr>
<td>11. Disinfect the mop and bucket. Mop heads must be removed and sent to</td>
<td>Staff involved</td>
</tr>
<tr>
<td>the laundry for cleaning</td>
<td></td>
</tr>
<tr>
<td>12. Secure the neck of the clinical waste bag and place it into another</td>
<td>Staff involved</td>
</tr>
<tr>
<td>clinical waste bag</td>
<td></td>
</tr>
<tr>
<td>13. Place the clinical waste bag in a yellow clinical waste bin</td>
<td>Staff involved</td>
</tr>
<tr>
<td>14. Remove gloves, mask, overalls and booties and place in a clinical</td>
<td>Staff involved</td>
</tr>
<tr>
<td>waste bag and place in a yellow clinical waste bin</td>
<td></td>
</tr>
<tr>
<td>15. Wash hands thoroughly and dry.</td>
<td>Staff involved</td>
</tr>
</tbody>
</table>

### 4 Catering hygiene and kitchen safety

CSNSW is required to comply with the NSW *Food Act 2003* and *Food Regulation 2015*.

#### 4.1 Responsibilities of governor

Governors of correctional centres are responsible for ensuring that:

- all staff and inmates involved in any part of the food preparation chain follow all safety and hygiene standards as set out in the Corrective Services Industries (CSI) Policy Manual section 1.6 *Offender food services*;
- all staff and inmates have access to hand basins, liquid soap, and paper towels so that they can comply with the requirement to wash and dry their hands;
• all long-term kitchen workers have been screened for Hepatitis A through the JH&FMHN Health Centre;
• all staff and inmates meet uniform requirements, including that they wear clean uniforms, consisting of:
  o long white trousers
  o a clean white T-shirt
  o a clean white apron every day
  o footwear that consists of a rigid sole with leather uppers (gym boots, thongs or athletic shoes are not acceptable).

4.2 Staff and inmates working in food preparation areas

OICs of accommodation or work areas must:
• ensure that both staff and inmates working under their supervision practice proper infection prevention and control procedures and are maintaining safe, hygienic work habits during the course of their duties;
• ensure all staff and inmates meet uniform requirements;
• monitor supplies and access to hand basins, liquid soap, and paper towels.

Staff working in food preparation areas must ensure that they and inmates:
• wash their hands whenever there is any risk that they might contaminate food;
• do everything they can to ensure they do not contaminate food, for example, they must not cough, sneeze or eat over unprotected food;
• tell their supervisor if they believe food has been contaminated.

Inmates working in food preparation areas, such as food handlers, are required to declare to the OIC or supervisor if they have:
• been diagnosed with an illness that can be transmitted through food;
• any infected skin lesions on their hands or arms or discharges from their ears, nose or eyes, as these could contaminate food. Any cuts, abrasions or skin lesions must be covered with a waterproof occlusive covering. Any cuts or wounds on hands must be covered with a suitable dressing. Any bandages or dressings must be completely covered by clothing;
• any of the following symptoms: diarrhoea, nausea, abdominal pain, vomiting, sore throat, cough, fever, or jaundice.

4.3 Procedures for inmates temporarily declared unfit to work

Inmates must notify the OIC or supervisor if they have been declared temporarily unfit for work in the kitchen.

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Responsibility</th>
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</thead>
<tbody>
<tr>
<td>1. Issue a medical or nursing certificate if an inmate has a temporary medical condition that affects their ability to attend to their work duties (refer to COPP section 6.1 JH&amp;MHN notifications)</td>
<td>JH&amp;FMHN staff</td>
</tr>
<tr>
<td>Procedure</td>
<td>Responsibility</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>2. Manage and monitor the health condition of any inmate declared temporarily unfit for work</td>
<td>JH&amp;FMHN staff</td>
</tr>
<tr>
<td>3. Provide certificate of clearance to return to work, if assessed as appropriate</td>
<td>JH&amp;FMHN staff</td>
</tr>
<tr>
<td>4. Sight the certificate of clearance from JH&amp;FMHN if an inmate is returning to work. Only allow inmates to return to work if they have been assessed and declared fit for work by JH&amp;FMHN.</td>
<td>OIC/Wing officer</td>
</tr>
</tbody>
</table>
5  Forms and annexures

No forms and annexures

6  Related COPP

6.1 JH&FMHN notifications
8.12 Hairdressing and hygiene
15.1 Safe work practices
13.2 Medical emergencies

7  Related documents

Corrective Services Industries (CSI) Policy Manual section 1.6 Offender food services
Crimes (Administration of Sentences) Act 1999
Crimes (Administration of Sentences) Regulation 2014
WHS: Emergency Response Kit (ERK) and other protective work equipment
Food Act 2003 (NSW)
Food Regulation 2015 (NSW)
WHS: Hazardous chemical information – WHS procedure
Justice Health & Forensic Mental Health Network Policy: 1.231 Health Problem Notification Form
Offender Services & Programs CSNSW: Policy for delivery in custody of the health survival tips session and RPOSP health strategies course
Protection of the Environment Operations (Waste) Regulation 2014
Public Health Act 2010
Public Health Regulation 2012
Security & Intelligence Local Operating Procedures
Work Health and Safety Act 2011
Work Health and Safety Regulation 2017
## 8 Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional precautions</td>
<td>Additional work practices in situations where standard precautions alone may be insufficient to prevent transmission of infection. For example, these may be used in addition to standard precautions when dealing with people suspected or known to have an infectious condition, and may vary depending on the condition and control necessary.</td>
</tr>
<tr>
<td>AHNM</td>
<td>After Hours Nurse Manager</td>
</tr>
<tr>
<td>Authorised Officer</td>
<td>The officer authorised by the governor to perform the functions set out in this part of the Custodial Operations Policy and Procedures.</td>
</tr>
<tr>
<td>COPP</td>
<td>Custodial Operations Policy and Procedures</td>
</tr>
<tr>
<td>CSI</td>
<td>Corrective Services Industries</td>
</tr>
</tbody>
</table>
| Communicable disease | A disease that spreads from one person to another through direct or indirect transmission of the infectious agent in a variety of ways including:  
  - contact with blood or bodily fluids  
  - breathing in an airborne virus  
  - being bitten by an insect |
<p>| CSNSW | Corrective Services NSW |
| ERK | Emergency Response Kit |
| Hand washing | The practice of using liquid soap (not a communal bar of soap) and warm water, washing all surfaces of both hands thoroughly, rinsing and then drying with paper towels, when required. |
| HPNF | Health Problem Notification Form |
| HST | Health Survival Tips |
| Infectious Disease | Any disease produced by the action of a microorganism in the body, which may or may not be communicable. |
| JH&amp;FMHN | Justice Health &amp; Forensic Mental Health Network |
| LOP | Local Operating Procedure |
| NUM | Nurse Unit Manager |
| OIC | Officer In Charge |
| OS&amp;P | Offender Services &amp; Programs |
| PPE | Personal Protective Equipment |
| RPOSP | Responsivity Provision Offender Services &amp; Programs |</p>
<table>
<thead>
<tr>
<th>SEHO</th>
<th>Senior Environmental Health Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>S&amp;I</td>
<td>Security and Intelligence, a branch of CSNSW</td>
</tr>
<tr>
<td><strong>Standard precautions</strong></td>
<td>Represent the minimum infection prevention measures, such as wearing non-porous protective equipment as barriers, which apply to all people, regardless of the suspected or confirmed infection status of the person. In this, it is to assume that everyone may be infectious.</td>
</tr>
</tbody>
</table>
9  Document information

<table>
<thead>
<tr>
<th>Business centre:</th>
<th>Custodial Operations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approver:</td>
<td>Kevin Corcoran</td>
</tr>
<tr>
<td>Date of effect:</td>
<td>04 October 2018</td>
</tr>
<tr>
<td>File reference:</td>
<td>D19/0292389</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Reason for amendment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Initial publication *(Replaces section 7.5, 12.1.7.2 of the superseded Operations Procedures Manual)*</td>
<td></td>
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<tr>
<td>1.1</td>
<td>April 2019</td>
<td>Additional requirement for mandatory LOP for the management of Fincol supplies at 2.2 and 2.3</td>
</tr>
</tbody>
</table>
Help keep (2019-nCoV) Novel Coronavirus out of prison.

If you have come from China, Iran, Italy or South Korea or had contact with a person with confirmed Coronavirus in the last 14 days, you are not permitted to enter a correctional centre.

Have you been overseas in the past 14 days or been in contact with someone who has?

Do you have a fever, cough, sore throat, or shortness of breath?

If yes to either of these, speak to the officer.

For more information, visit the NSW Health website: health.nsw.gov.au
Justice Health and Forensic Mental Health Network (the Network) is working closely with staff and partner agencies to prevent, identify and control the spread of COVID-19 (coronavirus) in our settings.

If you have been in an affected country or had contact with a person with confirmed COVID-19 in the past two weeks, you will not be allowed to enter any Network health care setting or facility.

WHO DOES THIS APPLY TO?
This applies to all visitors including:
- family and friends
- legal professionals
- service providers
- contractors.

WHY IS THIS HAPPENING?
This will help stop the spread of the COVID-19 in our health care settings. It protects our patients, staff, and the community.

WHEN CAN I RETURN?
You can resume visiting after 14 days if:
- you are well
- you have not had contact with a person with confirmed COVID-19 in the last two weeks.

MORE INFORMATION

NSW Health
www.health.nsw.gov.au

Australian Government Department of Health

Smart Traveller
www.smartraveller.gov.au

HealthDirect Helpline
1800 022 222

Contact your local GP or hospital emergency department

OUR CONTACTS

Justice Health and Forensic Mental Health Network

PO Box 150
MATRAVILLE NSW 2036

T: (+612) 9700 3000
E: JHFMHN-admin@health.nsw.gov.au
W: www.justicehealth.nsw.gov.au

HELP STOP THE SPREAD OF COVID-19
WHAT IS CORONAVIRUS?
Coronaviruses cause respiratory illnesses similar to the common cold through to more serious illness. The virus originating in Hubei province, China (COVID-19), had not been detected before this outbreak.

SHOULD I WEAR A FACE MASK?
Face masks are not recommended for healthy people unless you are caring for a suspected COVID-19 case. Symptomatic people can use masks to prevent transmission.

WHAT TO DO IF YOU GET SICK
If you develop a fever, cough, sore throat or shortness of breath within 14 days of travel to an affected area or contact with a confirmed COVID-19 case, isolate yourself and contact your GP.

WHAT TO DO IF YOU’VE BEEN IN OVERSEAS
If you’ve been in an affected country in the past two weeks, you must isolate yourself from other people for 14 days. This means you should not attend public places such as work, shops, school, university or public transport.

IS IT SAFE TO TRAVEL OVERSEAS?
Visit the Smartraveller website for advice on safe travel and whether or not you should cancel your trip. People at increased risk of infection should also seek medical advice.

HELP STOP THE SPREAD OF INFECTION

1. WASH YOUR HANDS REGULARLY
Wash your hands regularly and thoroughly with soap and water or an alcohol-based hand rub.

2. COVER YOUR MOUTH AND NOSE WHEN COUGHING OR SNEEZING
Practice good hygiene by covering your coughs and sneezes with a tissue or your elbow.

3. STAY HOME IF UNWELL
Avoid close contact if you or others show symptoms such as coughing and sneezing.

4. TELL THE DOCTOR IF YOU GET SICK
Call the GP or hospital ED if you develop symptoms and have returned from an affected country, or had contact with a person with confirmed COVID-19.
What is the coronavirus (COVID-19)?

Novel coronavirus (COVID-19) was first reported in Wuhan City in China in December 2019. Cases have now been confirmed in multiple countries around the world.

While there is still much to be learned about infection with COVID-19, it appears that the illness is much less severe than SARS or MERS, and some people with the infection may have only a mild illness.

The virus can cause a variety of symptoms, from ranging from mild illness to pneumonia. People may experience:

- fever, cough, sore throat, nausea/vomiting, and difficulty breathing and/or;
- difficulty breathing which is sign of possible pneumonia and requires immediate medical attention.

*It can take up to 14 days for symptoms to show after a person has been infected.*

Should an employee who has been in mainland China, South Korea or Iran come to work?

As at 6 March 2020, advice issued by NSW Health is that if an employee has travelled through mainland China within the past 14 days (not including Hong Kong, Macau or Taiwan) or has been in or transited through Iran on or after 1 March 2020 or South Korea on or after 5 March 2020 they must isolate themselves for 14 days after leaving mainland China, South Korea or Iran.

If you are required to isolate, speak to your manager about working from home options. If working from home is not feasible, paid special leave will apply.

COVID-19 advice for people returning from high risk countries

In line with national advice, as of 28 February 2020, NSW Health have urged people returning from Cambodia, Hong Kong, Indonesia, Italy, Japan, Singapore, and Thailand to be vigilant in monitoring themselves for respiratory symptoms or fever. If you are returning from these countries, you need to monitor your health for the next 14 days.

A person must also isolate themselves if they have been in contact with any confirmed coronavirus case for 14 days following exposure contact. They must stay at home in isolation, except when seeking medical care. As per Health NSW advice, when seeking medical, advise the medical provider that you have been in mainland China, South Korea or Iran. Wear a surgical mask (if available) when attending a GP clinic or hospital facility, otherwise request for a mask on your arrival at treatment location.

What should workers who come into contact with those under self-isolation do?

Casual Contact constitutes: face to face for less than 15 minutes, or being in the same closed space for less than 2 hours

Close Contact constitutes: face to face for at least 15 minutes, or being in the same closed space for at least 2 hours

If a staff member has been in close or casual contact with a client who is in self isolation you should consider the following:

- if you have had close contact discuss with your manager working from home options. If working from home is not feasible, paid special leave will apply.
- if the contact was casual contact, there is no need to revise your working arrangements unless you become unwell; and
- if you consult a medical practitioner and are being tested for COVID-19, do not attend the workplace.

In my role I come into contact with members of the public. Should I ask whether they have travelled to mainland China, South Korea, Iran or anywhere else?

NSW Public Health has advised DCJ that staff can consider ringing ahead to clients to check whether they are in self isolation.

As it may not be appropriate in all circumstances to ring ahead use the risk assessment template in your business stream to assess the risk and to set mitigating controls.
Mitigating controls could include making the contact other than face to face (where appropriate) for example speaking over the telephone, wearing Personal Protective Equipment (PPE), limiting contact or avoiding contact until the 14 day isolation period has expired.

NSW Health has advised those who are in self isolation to wear a mask when needing to liaise with others. Unnecessary use of masks should be avoided, the NSW Health website should be consulted for further information www.health.nsw.gov.au. DCJ is currently reviewing availability of Personal Protective Equipment (PPE) including masks.

Where concerns are held about self isolation arrangements for members of the public, such as a client not following the advice of NSW Health, please contact your local Public Health Unit on 1300 066 055 for advice.

Home Self-Isolation

If you have been identified as being in close contact with someone who is confirmed to have COVID-19 infection you must:

- isolate yourself at home until 14 days after you were last exposed to the infectious person. You should not leave the house, except for seeking medical care.

- you should stay in a different room to other people in the household as much as possible, and wear a surgical mask when you are in the same room as another person and when seeking medical care.

- use a separate bathroom if available.

- do not attend work, school, or public areas, and do not use public transportation or taxi services; and

- watch for signs and symptoms such as:
  - fever, cough, shortness of breath; and
  - other early symptoms to watch for are chills, body aches, sore throat, headache and runny nose, muscle pain or diarrhoea.

- paid special leave applies during isolation periods, unless you become unwell in which case sick leave applies.

What to do if you feel unwell?

If you develop any of the above symptoms please consider the following;

- If you are seriously unwell and it is an emergency, call 000 immediately.

- Continue to keep yourself apart from other people as much as possible (e.g. in a different room)

- Wear a surgical mask if you have one

- Call your GP, local public health unit on 1300 066 055 or the National Coronavirus Health Information line 1800 020 080 so that a clinician can assess your risk and whether you are likely to require testing for COVID-19

- Phone the emergency department of the hospital before attending so they can make arrangements for when you arrive to prevent the possible spread of infection to others

- Do not travel on public transport, use taxis or ride-shares and do not attend any public places, schools, parks, shopping centres etc.

- Sick leave applies to periods of illness as per usual arrangements.

How can the coronavirus be prevented?

The practice of hygiene and self-protection measures for acute respiratory infections, such as washing hands and covering your mouth while coughing or sneezing. While you are travelling it is important to:

- cover coughs and sneezes. You should cover your mouth and nose with a tissue or cough or sneeze into your sleeve/elbow. Used tissues should be placed in a bin, and hands immediately washed with soap and water for at least 20 seconds.

- regularly wash your hands, avoid touching your face and mouth after touching surfaces eg toilet doors

- Wash your hands often and thoroughly with soap and water for at least 20 seconds. You can use an alcohol-based hand sanitiser if your hands are not visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

For more information

Health NSW - www.health.nsw.gov.au

National Coronavirus Health Information line 1800 020 080.

- Norvel coronavirus (COVID-19) FAQ
- Novel coronavirus (2019-n-CoV) information for a suspected case