

# Acute respiratory infection advice for staff in high-risk community and/or private settings

This document provides general advice about managing the risk of acute respiratory infections (ARI) for staff who provide health care or patient support in community and/or private high-risk settings. ARI can include COVID-19, influenza, respiratory syncytial virus (RSV) and other viral respiratory infections. Community and/or private high-risk settings include, but are not limited to, healthcare, aged care and disability care facilities and practices.

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## Resources for high-risk settings

Individual services should plan ahead to determine how they will manage staff, patients, clients and residents with ARI, including those who test positive for COVID-19, influenza or RSV. They should also develop their own [COVID-19 Occupational Health and Safety Plans](#) to ensure they meet their workplace health and safety obligations. The following resources may assist:

- **For healthcare workers:**

- [COVID-19 and other acute respiratory infections - Managing health worker exposures and return to work in a healthcare setting](#)

- [Infection Prevention and Control Manual - COVID-19 and other Acute Respiratory Infections](#)
  - [Infection Prevention and Control \(IPAC\) and Healthcare Associated Infections \(HAI\) Program](#)

- **For residential aged care facilities (RACFs):**

- [Advice to residential aged care facilities](#)

- [Guidance for residential aged care facilities on the public health management of acute respiratory infections](#)

- **For residential disability care facilities (RDCF):**

- [Advice to residential disability care facilities](#)

- [Guidance for disability care facilities on the public health management of acute respiratory infections](#)

- **For home care service providers:**

- [Advice to home care service providers](#)

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## Recommended risk mitigation measures

**Employers in high-risk settings are responsible for ensuring that appropriate mitigation strategies are in place to reduce the risk of ARI for patients, clients and staff.** These mitigation strategies include conducting risk assessments for staff who have recently had an ARI or have been exposed to a person with an ARI and following any relevant return to work guidelines.

Employers should conduct a risk assessment to identify appropriate risk mitigation measures before a workplace exposure to ARI occurs, and in response to increased community or facility risk of ARI<sup>1</sup>.

The recommendations below can help reduce the risk of transmission of ARI in high-risk settings.

## 1. Eliminate risk

Reduce the opportunity for an ARI to enter the facility. For example:

- Provide appropriate furlough advice for staff who have an ARI or have been exposed to an ARI
- Facilitate **work from home** arrangements for affected staff members where possible
- Do not allow staff, visitors and clients who have ARI symptoms to enter the facility while infectious or until their symptoms have resolved. Encourage them to get tested for COVID-19, influenza or RSV
- Review staff **COVID-19 and influenza vaccination** status and facilitate access to vaccination for those who are due.

## 2. Substitute risk

Identify ways to reduce risk of ARI transmission in the workplace. For example:

- **Adjust rosters** so that staff are working in a single site / area and with a defined group of patients, clients and residents as much as possible
- **Limit staff gatherings** in shared areas
- Provide staff with alternative times to access tea rooms and other break areas where possible, particularly if they are coming to work after being exposed to someone with an ARI.

## 3. Engineering controls

Consider how barriers and other forms of physical hazard reduction can be used to reduce risk. For example:

- Encourage **physical distancing of 1.5 metres** where possible, by implementing e.g. floor markings and barriers to create space at counters, seated areas, etc.
- Encourage **staff to take their breaks outside** where possible
- Ensure that environmental control measures, such as effective [ventilation systems](#), are in place to reduce the risk of infection transmission
- Implement separation and [Infection Prevention and Control Manual - COVID-19 and other Acute Respiratory Infections \(IPAC manual\)](#) precautions for patients or clients with ARI.

## 4. Administrative controls

Implement effective and consistent policies and protocols. For example:

- Ensure contingency plans for maintaining care and services are documented ahead of time in a facility's Outbreak Management Plan
- Review workplace IPAC measures in accordance with best practice guidance (See [Resources for high-risk settings](#))
- Undertake regular and thorough **cleaning and disinfection**, particularly in high-touch areas
- Check all staff are up to date with **education and training**, including donning (putting on) and doffing (removing) personal protective equipment (PPE), mask fit checking and fit-testing, where appropriate
- Provide **signage** with appropriate infection prevention and control messages, including mask wearing.

## 5. Personal protective equipment (PPE)

Use PPE appropriately to protect staff, patients and visitors. For example:

- Develop standard operating procedures that clearly define the type of PPE staff should wear, including how and when to wear PPE
- Ensure staff education, training and competency assessments are in place for donning and doffing PPE
- Ensure staff use appropriate PPE while interacting with other staff, patients, clients or residents
- Encourage visitors to wear a face mask during their visit when community transmission of ARI is increased. Facilities may consider reviewing the [NSW Health guide to healthcare visitation](#) for further guidance.

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<sup>1</sup> Resources to help understand the current status of COVID-19 and other ARI in NSW communities include: NSW Health [Respiratory Surveillance Report - COVID-19 and influenza](#), the [NSW IPAC Response and Escalation Framework](#), and the Agency for Clinical Innovation – [COVID-19 Risk Monitoring Dashboard](#).