

- Case = Any confirmed positive case of COVID-19 (co-worker, patient, or other)
- NB: All exposure category decisions are based on a local risk assessment
- NB: The use of protective eyewear for contact tracing is applied for droplet precautions when within 1.5m of a positive case (where a mask is not being worn by the case). The absence of eyewear outside of this setting will not increase risk.
- Health agencies are to ensure that appropriate space is provided for staff to observe break entitlements in accordance with Award provisions

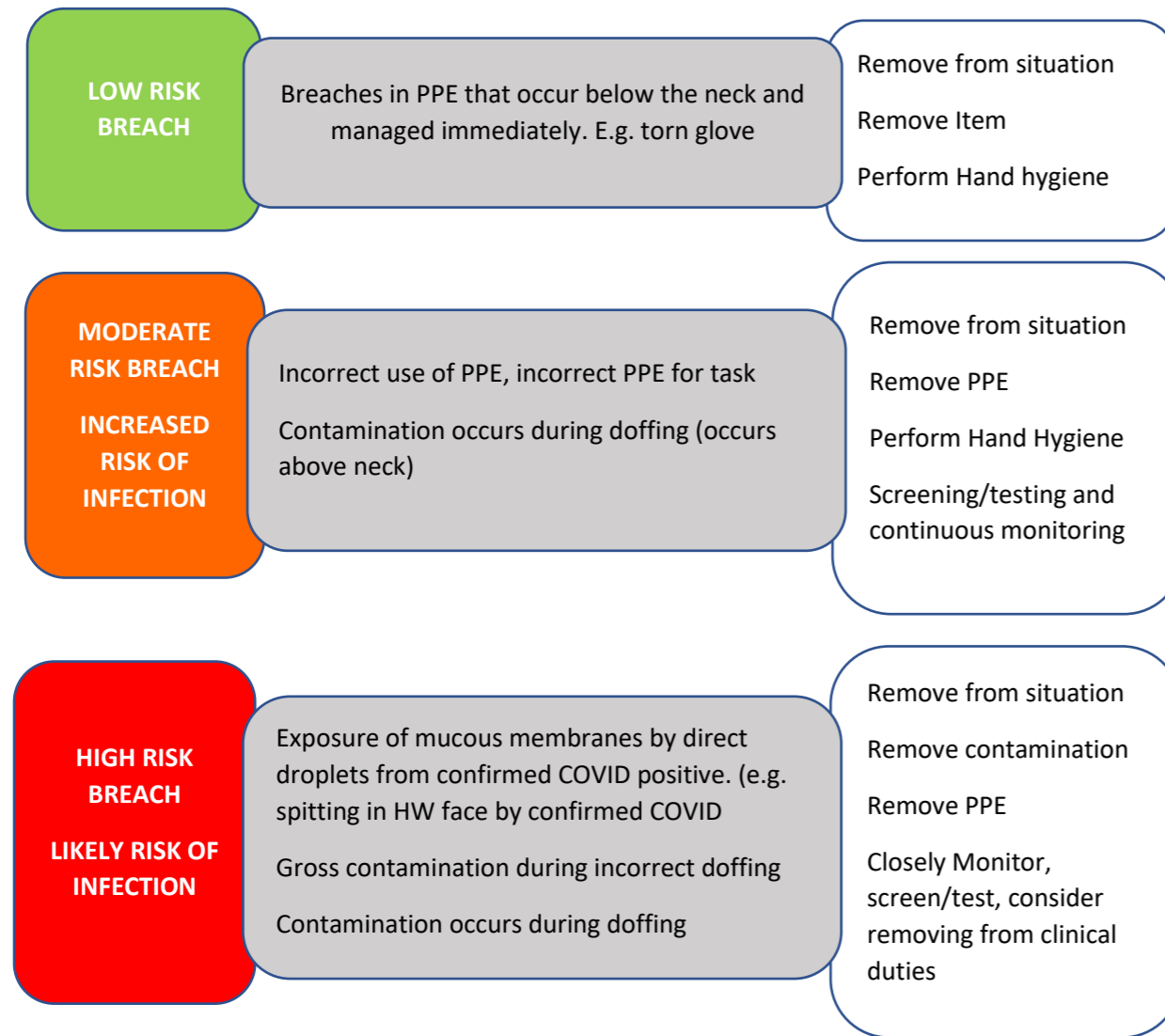
		CONTACT TYPE – See page 2 for more detailed assessment of a breach			
		Transient Contact – Low Risk Transient, not face-to-face, limited contact that does not meet the definition of face-to-face contact	Medium Risk Scenarios Any face-to-face contact within 1.5 metres and less than 15 minutes OR In general, greater than 30 mins in a closed space OR Based on agreed documented risk assessment including assessments of occupational exposures and of the physical environment	Highest Risk Scenarios Prolonged face-to-face contact within 1.5 metres and greater than 15 minutes OR Aerosol generating behaviours (AGBs e.g. coughing) OR Aerosol generating procedures (AGPs)	
<b>PPE worn during contact between health worker and case</b>	1. No effective PPE worn by staff member or case e.g. no PPE or PPE with major breaches such as mask below nose	Moderate Risk	Moderate Risk	High Risk	
	2. Surgical mask only worn by staff member i.e. no eye protection ➤ Case no PPE	Low Risk	Moderate Risk	High Risk	
	3. Surgical mask only worn by staff member ➤ Case wearing surgical mask	Low Risk	Low Risk	Moderate Risk Depending on risk assessment	High Risk Depending on risk assessment
	4. Staff member in surgical mask and eye protection* with no concerns or breaches ➤ Case no PPE *Use of gown/apron and gloves should be risk assessed based on individual incident, exposure to body substance and chances of environmental contamination	Low Risk	Low Risk	Moderate Risk Depending on risk assessment	High Risk Depending on risk assessment
	5. Staff member in surgical mask and eye protection* with no concerns or breaches ➤ Case wearing surgical mask * See note in Category 4 box	Low Risk	Low Risk	Low Risk if no AGP/AGB	Moderate Risk
	6. Staff member in P2/N95 mask and eye protection* with no concerns or breaches ➤ Case either with or without PPE * See note in Category 4 box	Low Risk	Low Risk	Low Risk	

This Risk matrix does not replace the CEC Application of PPE Guide [https://www.cec.health.nsw.gov.au/data/assets/pdf\\_file/0018/644004/COVID-19-IPAC-manual.pdf](https://www.cec.health.nsw.gov.au/data/assets/pdf_file/0018/644004/COVID-19-IPAC-manual.pdf)

<b>LOW RISK</b>	Continue to work HCW alert to mild symptoms Test (RAT or PCR) if symptomatic	<b>MODERATE RISK</b>	Continue to attend work with risk management plan RAT test not earlier than day 2 post exposure. For 14 days after exposure: Consider redeploying to lower patient risk area if possible Mask wearing at all times - surgical or N95 as per CEC guidance Do not enter shared spaces such as tearooms and do not participate in any staff gatherings Careful monitoring for symptoms	<b>HIGH RISK</b>	Do not attend the workplace for 7 days post exposure. If significant risk to safe service delivery, senior manager to review. May return without symptoms as well as a minimum: Daily RAT for 7 days after exposure; OR PCR test on day 2&6 after exposure (where feasible). For 14 days after exposure, also consider: - Redeploying to lower patient risk area if possible - Mask wearing at all times - surgical or N95 as per CEC guidance - Do not enter shared spaces such as tearooms and do not participate in any staff gatherings - Careful monitoring for symptoms
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**\* PPE Breach Risk Assessment key principles.**

- Perform a risk assessment to determine the level of exposure as applied to COVID-19 suspected/confirmed.

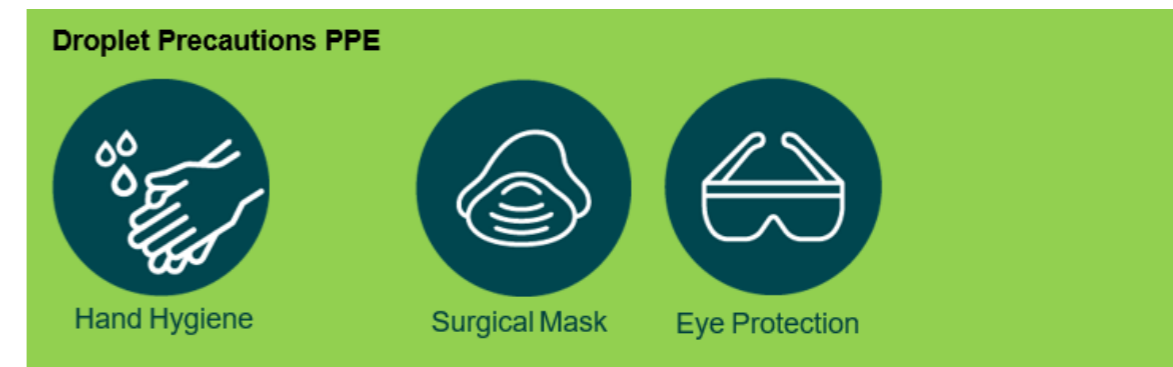


Adapted and modified from work developed by AUSMAT Quarantine management and operations compendium for the Howard Springs Quarantine Facility for the Repatriation of Australians at the Centre for National Resilience. National Critical Care and Trauma Response Centre. Darwin 2021.

- **Contact Precautions** protect the HW by minimising the COVID-19 transmission risk from direct physical contact with patients or indirect contact from shared patient care equipment or from contaminated environmental surfaces



- **Droplet Precautions** protect the HWs nose, mouth and eyes from droplets produced by the patient coughing and sneezing



- **Airborne Precautions** protect the HWs respiratory tract from very small and unseen airborne particles that become suspended in the air.

