UnitingCare

COVID-19
Hospital Safety Response Matrix

Note:

- The response level (0-5) will be determined by Crisis Management Team (CMT) in consultation with each individual hospital
- The Hospitals are required to implement the determined action level directions unless exception sought from CMT
- GM or delegate to contact CMT for escalation points
- An Outbreak is declared by the Public Health Unit (PHU)
- Any Chief Health Officer (CHO), State or Commonwealth Directive are in addition or replace these directions
- If the hospital has a dedicated COVID 19 ward this ward may operate at a different response level then the rest of the facility

Safety Response Level determined by	1	2	3	4
COVID-19 prevalence in the Local Govt area, Local Community (LGA/HHS), Hospital or Health Service as advised by QLD Health	Low Risk	Moderate Risk	High Risk	Outbreak
	No or few cases; cases only in quarantine; small numbers of linked cases	A series of unlinked cases; high number of locally-acquired cases; cases with high numbers of local	High numbers of unlinked cases; sustained community transmission	Overwhelming impact on daily operations and/or declared outbreak

Proudly representing
Blue Care | Lifeline | ARRCS | The Wesley Hospital | Buderim Private Hospital
St Stephen's Hospital | St Andrew's War Memorial Hospital

Version 4, March 2021

Hospital Safety Response Action Plan

Safety Response Level	1	2	3	4
Entry Screening	Yes	Yes	Yes	Yes
Contractors working on site	Yes – social distancing & temperature check on arrival plus a negative response to all screening check point questionnaire questions	Yes – social distancing & temperature check on arrival plus a negative response to all screening check point questionnaire questions	Yes – limited to essential, temperature check on arrival, plus a negative response to all screening check point questionnaire questions. Entry to clinical areas under supervision with full PPE where indicated. Engineering Manager to consult with contractors on procedure. (essential determined by CMT)	Yes, but limited to critical. temperature check on arrival, plus a negative response to all screening check point questionnaire questions. Entry to clinical areas under supervision and with full PPE. (critical determined by CMT)
Staff & Staff Management	Temperature check on entry into hospital & normal rostering practice	Temperature check on entry into hospital, minimise staff movement across wards and facilities, develop staff teams & minimise contact between teams (including SLT), consider roles that can work remotely, discourage congregation in tea rooms and other joint spaces, assess the need for or prepare for a COVID 19 ward, daily communication with staff.	Temperature check on entry into hospital, stop unnecessary staff movements across wards and facilities, establish staff teams & minimise contact between teams (including SLT), consider roles that can work remotely, stop congregation in tea rooms and other joint spaces, assess the need for or prepare for a COVID 19 ward, daily communication with staff.	No site crossover, temperature check on entry, no unnecessary staff movements across wards, enforce cohort of staff in teams, segregate team amenities (handover area, tea room, toilets), daily communication with staff, and assign COVID ward. All non-essential staff options to work from home on a rotation basis. SLT to cohort and to implement buddy system (approved by GM).
Training & Meetings	Yes, adhering to social distancing – facility based	Yes, adhering to social distancing however virtual where possible - facility based COVID 19 command meetings to occur twice weekly	Yes, adhering to social distancing however virtual where possible - facility based COVID 19 command meetings to occur daily	Training - Limited - social distancing, suspend non-essential, essential to be delivered virtually where able. Exception – continue PPE, PALS, BLS & ALS. Meetings - to be conducted virtually where not possible to be GM approved. Facility based COVID 19 command meetings to twice daily.
General visitation	No visitor restrictions Temperature check on arrival plus a negative response to all screening check point questionnaire questions	Limited Numbers (1) and visit length (2hrs) within hospital visiting hours. Temperature check on arrival plus a negative response to all screening check point questionnaire questions Or as otherwise directed by Qld Health	No General Visitors (see below for exceptions)	No General Visitors (see below for exceptions)

Hospital Safety Response Action Plan

Safety Response Level	1	2	3	4
End of Life Support Visits & Exceptional circumstances visits	CNM discretion to approve for extended hours, days & number of visitors – in addition to temperature check on arrival plus a negative response to all screening check point questionnaire questions	CNM discretion to approve for extended hours, days & number of visitors – in addition to temperature check on arrival plus a negative response to all screening check point questionnaire questions	Will be considered by GM/DCS - conditions are only temperature check on arrival plus a negative response to all screening check point questionnaire questions	Will be considered by GM/DCS – conditions are only in-patient room, supervised with full PPE, temperature check on arrival plus a negative response to all screening check point questionnaire questions
Visitors under the age 16 years	No restrictions	No – only exception is visiting maternity unit with direct family link or EOL	No – only exception is visiting maternity unit with direct family link or EOL	No
Pastoral Care Visits (internal & external)	Yes – social distancing & temperature check on arrival	Yes – social distancing & temperature check on arrival	Yes – social distancing & temperature check on arrival	Considered by GM/DCS in consultation with DMS & CMT as to how a pastoral presence will happen at hospitals & temperature check on arrival
Staff PPE Use	As required by standard precautions for infection prevention. Refer to COVID-19 PPE Matrix	As required by standard precautions for infection prevention. Refer to COVID-19 PPE Matrix Or as otherwise directed by Qld Health	As required by standard precautions for infection prevention. Refer to COVID-19 PPE Matrix Or as otherwise directed by Qld Health	As required by contact droplet & airborne precautions for infection prevention. Refer to COVID-19 PPE Matrix
Patients 'On Leave' (contract and social)	Contract leave only (example: dialysis, ICON, hyperbaric chamber)	Contract leave only (example: dialysis, ICON, hyperbaric chamber)	Contract leave only (example: dialysis, ICON, hyperbaric chamber)	Contract leave to be considered by GM/DCS/ DMS in consultation with CMT.
Patient movement restrictions within the hospital/ward	Yes – within social distancing guidelines	Yes – within designated area's & social distancing guidelines	Yes – within designated areas & social distancing guidelines with direct supervision	No – in room only movements
Single/Shared patient rooms	Normal Operations	Normal Operations	Consider and prepare to move patients to a non-shared room environment	All patients in single private rooms with single bathrooms. No shared facilities between patients
New admissions	Yes, with pre-screening by VMP's, temperature check & screening questionnaire on entry	Yes, with pre-screening by VMP's, temperature check & screening questionnaire on entry	Yes, with pre-screening by VMP's, temperature check & screening questionnaire on entry	Yes, subject to any state directive on elective theatre with pre-screening by VMP's, temperature check & screening questionnaire on entry

Hospital Safety Response Action Plan

Safety Response Level	1	2	3	4
Cleaning	Routine Cleaning plus Touch point cleaning two times a day.	Routine Cleaning plus Touch point cleaning three times a day.	Routine Cleaning plus Touch point cleaning three times a day.	Outbreak Cleaning - Interim infection prevention and control guidelines for the management of COVID-19
Waste Management	Routine Waste Management	Routine Waste Management	All waste from COVID 19 pending or confirmed cases and locations is considered clinical waste.	All waste from COVID 19 pending or confirmed cases and locations is considered clinical waste.
Mortuary Management	Routine Management	Routine Management	Consider mortuary capacity and ability to expand	Consider mortuary capacity and ability to expand
Meals Service	Normal operations within social distancing restrictions as required by standard precautions for infection prevention	Normal operations within social distancing restrictions as required by standard precautions for infection prevention	Normal operations within social distancing restrictions as required by standard precautions for infection prevention – implement disposable water bottles to cease water jug use	In room only, disposable cutlery, plates, crockery
Café & Retail Outlets	Normal operations within social distancing restrictions	Normal operations within social distancing restrictions	Takeaway only	Takeaway only
Personal laundry taken from hospital and returned by visitors	Allowed – acceptance at hospital subject to visitor screening.	Allowed – acceptance at hospital subject to visitor screening.	Allowed – non-contact delivery and items to be bagged with patient name	Not allowed, hospital will provide patient gowns where required
Gifts and items brought into the hospital (flowers)	Allowed –Items wiped down where possible.	Allowed –Items wiped down where possible.	Allowed – non-contact delivery and items wiped down where possible.	Allowed – non-contact delivery and items wiped down where possible.
Facility Management & Protection	Signage at entrances alerting patients and visitor of restrictions and to do not enter if symptomatic	Signage at entrances alerting patients and visitor of restrictions and to do not enter if symptomatic	Signage at entrances alerting patients and visitor of restrictions and to do not enter if symptomatic	Close all external doors. Limit entry and exit points
Out-Patient Programs (Maternity, Day Rehab and Physio)	Normal operations within social distancing	Consider performing telehealth where possible & consider the use of PPE where appropriate	Consider performing telehealth where possible & consider the use of PPE where appropriate	No Out-Patient programs on site (telehealth where possible)

Hospital Safety Response Action Plan

Safety Response Level	1	2	3	4
In-patient Allied Health Services	Yes	Limited to essential	Limit to essential – cease all communal activities	Cease all non-critical allied health services
Volunteers	No restrictions with temperature check	Yes – under the age of 70 (unless approved by SLT) with no co-morbidities with temperature check	Yes – engaged in low risk activities under the age of 70 (unless approved by SLT) with no co-morbidities. Limited to one central location with temperature check	Subject to approval from GM but limited to one central location and under the age of 70 with no co-morbidities with temperature check
Emergency Centres (ED)	Temperature and Questionnaire screening prior to registration – allocated isolation room if symptomatic. Nurse and Dr to wear full PPE for symptomatic	Temperature and Questionnaire screening prior to registration – allocated isolation room if symptomatic, Nurse and Dr to wear full PPE for symptomatic	Temperature and Questionnaire screening prior to registration – allocated isolation room is symptomatic. Nurse and Dr to wear full PPE for symptomatic	Liaise with QAS around Residential Aged Care transfers. Consideration of expansion of ED space into other locations. Consider the need for a fever clinic outside of the ED space at the discretion of the facility with consultation with CMT
HITH	Normal Operations	Normal Operations	Increase capacity where clinically appropriate.	Increase capacity where clinically appropriate.

UnitingCare