*COVID Safety Plan*

Template



The Royal Australian College of General Practitioners (RACGP) has developed this COVID Safety Plan (known in some states and territories as a COVID Safe Plan) template to help general practices comply with current requirements for businesses operating during the COVID-19 pandemic. It is best as a guide and should be adapted to suit individual procedures and workflows.

This template is designed to support practices in maintaining a COVID-safe workplace and complying with public health directives (where applicable) by having a documented COVID Safety Plan in place.

It covers:

* practice access and patient flow
* physical distancing
* infection-control training
* use of personal protective equipment (PPE)
* environmental cleaning and management
* record-keeping
* practice team management and limiting interactions in closed spaces
* responding to a positive case, or close contact, in the practice team.

The sections in red text are for practices to adapt to their specific procedures. The listed actions are not exhaustive, and practices should add, remove or amend actions appropriate to their situation.

It is important practices regularly review their plan to ensure it remains compliant with public health directives.

[Insert practice name] COVID Safety Plan

Current as of: [insert date of last revision]

Introduction

This plan provides members of the practice team guidance on operating in a COVID-safe way, and helps identify and mitigate risks during the ongoing pandemic.

Purpose and objectives

Our practice is dedicated to the health, safety and wellbeing of all team members, patients, contractors and visitors. In this pandemic environment, we acknowledge additional precautions are required and that these are outlined in this COVID Safety Plan.

1. Practice access and patient flow

To control the flow of people into and through the practice, we will:

[Add, remove, or amend the below actions, as appropriate to the practice]

* encourage telehealth consultations (where appropriate)
* check the temperature of each person presenting to the clinic. If the temperature registers >37.5°C the person will be asked to remain outside of the clinic until further assessment can be conducted
* have a management plan in place for patients presenting with symptoms suggestive of COVID-19 which enables immediate isolation of that patient, as well as the requirement that the patient don of a surgical face mask to reduce risk of transmission [refer to the RACGP resource [*Managing patients who present with respiratory symptoms*](https://www.racgp.org.au/clinical-resources/covid-19-resources/other-health-issues/managing-patients-with-respiratory-symptoms)]
* limit patient entry to the entrance located at [define which entrance]
* define foot traffic through the practice using floor markings and signage
* display information at the entrance and ensure clear messaging on the website asking patients to call ahead if they have any symptoms suggestive of COVID-19 to enable appropriate triage
* display information at the entrance outlining the requirements of entry [define requirements, ie wearing a mask, have an appointment, be free from symptoms consistent with COVID-19]
* require all people entering the practice to don a face mask [patients are asked to bring their own, but will be supplied with one if they present without a mask]
* provide access to hand-hygiene products upon entry and exit (and at appropriate locations throughout the practice), such as an alcohol-based hand sanitiser or hand-washing facilities.
1. Physical distancing

While acknowledging the nature of medical care means maintaining a physical distance of 1.5 m with a patient is not always possible, our practice will put in place physical distancing measure by:

[Add, remove, or amend the below actions, as appropriate to the practice]

* providing training to all members of the team
* taping a line on the floor 1.5 m from all people’s chair/desk as a physical indicator
* erecting physical shields at high-interaction areas (eg reception)
* minimising patient congestion in the waiting room by
	+ limiting the number of people on the premises at any one time
	+ having patients wait in their cars or outside until the GP or nurse is ready
	+ spacing furniture in the waiting room
	+ encouraging patients to call ahead to book an appointment rather than walk in.
1. Infection-control training

All members of the practice team, including GPs, nurses, and reception and cleaning staff, will undertake infection-control training.

All training will be documented and include:

[Add, remove, or amend the below actions, as appropriate to the practice]

* completion of Department of Health [COVID-19 infection control training](https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training)
* completion of the Australian Commission on Safety and Quality in Health Care [e-learning modules](https://www.safetyandquality.gov.au/our-work/infection-prevention-and-control/infection-prevention-and-control-elearning-modules) on the principles of infection prevention and control
* review of the RACGP [*Infection prevention and control standards*](https://www.racgp.org.au/running-a-practice/practice-standards/standards-for-other-health-care-settings/infection-prevention-and-control) (5th edition)
* ensure team members are aware of their role when managing a patient presenting with – or exhibiting symptoms suggestive of – COVID-19.
1. Use of personal protective equipment

Appropriate use of personal protective equipment (PPE) is critical in limiting the spread of COVID-19. All members of the practice team will:

[Add, remove, or amend the below actions, as appropriate to the practice]

* ensure standard precautions, including hand hygiene, cough etiquette and appropriate waste-management techniques, are maintained
* be trained in donning and doffing PPE
* wear PPE appropriate to the patient presentation and as per advice from the local public health unit
* dispose of all used PPE in accordance with standard precautions.
1. Environmental management and cleaning

Our practice will regularly clean and disinfect shared spaces, surfaces and communal items. Our practice will:

[Add, remove, or amend the below actions, as appropriate to the practice]

* enhance air flow by opening windows and doors in shared spaces (where and when appropriate) and optimising fresh air flow in air conditioning systems (by maximising the intake of outside air and reducing or avoiding recirculation of air)
* minimise the volume of equipment in clinical areas and waiting rooms to reduce the cleaning burden and risk of transmission
* minimise the sharing of clinical and administrative equipment between team members
* adhere to strict environmental cleaning as per the most current advice from the Department of Health’s [Coronavirus (COVID-19) Environmental cleaning and disinfection principles for health and residential care facilities](https://www.health.gov.au/resources/publications/coronavirus-covid-19-environmental-cleaning-and-disinfection-principles-for-health-and-residential-care-facilities) or our local public health unit
* clean and disinfect frequently touched surfaces with detergent and disinfectant wipe/solution between each episode of patient care – using a cleaning detergent followed by a disinfectant, or a two-in-one product with cleaning and disinfecting properties
* require team members who are cleaning an area or equipment possibly exposed to SARS-CoV-2 to wear fresh non-contaminated gloves, a surgical mask, and eye protection
* provide training to all staff members on environmental cleaning requirements (this training will be documented)
* maintain a cleaning log.
1. Record-keeping

To aid contact tracing in the event a patient, team member, contractor or any visitor to the practice tests positive for COVID-19, our practice will:

[Add, remove, or amend the below actions, as appropriate to the practice]

* maintain a record of all patient appointments (including recording people accompanying the patient), team member work times, and contractors/visitors to the practice, including entry and exit times
* utilise a contactless electronic system (ie QR code or similar) to record contact details, ensuring data is stored confidentially and securely and is only used for the purpose for which it was intended
* maintain these records for a minimum of 28 days.
1. Practice team management and limiting interactions in closed spaces

To reduce the risk of COVID-19 transmission between practice team members, we will:

[Add, remove, or amend the below actions, as appropriate to the practice]

* regularly communicate with all team members regarding the requirement to not attend the practice if they have any symptoms consistent with COVID-19, regardless of how mild, and will encourage testing in line with local public health unit advice
* check the temperature of each practice team member on commencement of work. Where the person registers a temperature >37.5°C they will not enter the practice and will be asked to seek further medical review
* require a verbal/written/electronic attestation from each team member at the commencement of each shift confirming they do not have any symptoms consistent with COVID-19, have not been in contact with a confirmed case, and have not been directed to isolate
* support any team member who tests positive for COVID-19, or is identified as a close contact or is required to self-isolate – including by making them aware of their leave entitlements
* where a team member typically works across a number of sites within the business, minimise movement between sites by scheduling shifts at one location (where possible)
* encourage physical distancing in common areas (ie tea room), through organisation of furniture, floor markings and signage
* encourage tea breaks/lunchbreaks to be taken outside
* stagger breaks to limit the number of people in common areas
* encourage all team members to provide their own drinking vessels and cutlery
* require all team members to thoroughly clean communal items (eg cutlery) immediately after use by washing with hot water and detergent or by placing them in the dishwasher to be washed on the hottest possible setting
* ban the sharing of food on site (eg cake and dips).
1. Responding to a positive case, or close contact, in the practice team

If a member of the practice team tests positive to COVID-19, our practice will:

[Add, remove, or amend the below actions, as appropriate to the practice]

* implement ‘close contact’ requirements as outline by our state/territory health department, including contact tracing if any patient or team member meets the criteria for being a ‘close contacts’
* ensure the team member does not return to the practice until they meet the criteria for release from isolation, and as per local requirements.

Plan review

This plan will be reviewed regularly to ensure it reflects the current processes and procedures of [insert practice name], as well as current legislation requirements and public health directives. The plan will be reviewed on or before [insert review date].

Public health unit contacts

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| --- | --- |
| State/territory  | Public health unit contact |
| Australian Capital Territory | 02 5124 9213 (business hours) 02 9962 4155 (after hours) |
| New South Wales  | 1300 066 055 |
| Northern Territory  | 08 8922 8044 1800 008 002 |
| Queensland  | [Find your nearest unit](https://www.health.qld.gov.au/system-governance/contact-us/contact/public-health-units) |
| South Australia  | 1300 232 272 |
| Tasmania  | 1800 671 738 |
| Victoria  | 1300 651 160 |
| Western Australia  | 08 6373 2222 |

Further resources

RACGP

* [*COVID-19 infection-control principles*](https://www.racgp.org.au/running-a-practice/practice-management/managing-emergencies-and-pandemics/managing-pandemics/covid-19-infection-control-principles)
* [Patient alert posters](https://www.racgp.org.au/clinical-resources/covid-19-resources/infection-control/management-of-pandemics)

Federal Department of Health

* [COVID-19 infection control training](https://www.health.gov.au/resources/apps-and-tools/covid-19-infection-control-training)
* [CDNA national guidelines for public health units](https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm)
* [Coronavirus (COVID-19) environmental cleaning and disinfection principles for health and residential care facilities](https://www.health.gov.au/resources/publications/coronavirus-covid-19-environmental-cleaning-and-disinfection-principles-for-health-and-residential-care-facilities)
* [Guidance on the use of personal protective equipment (PPE) for health care workers in the context of COVID-19](https://www.health.gov.au/resources/publications/guidance-on-the-use-of-personal-protective-equipment-ppe-for-health-care-workers-in-the-context-of-covid-19)
* [Minimising the risk of COVID-19 transmission in a Primary Health Care setting](https://www.health.gov.au/resources/publications/minimising-the-risk-of-covid-19-transmission-in-a-primary-health-care-setting)

Safe Work Australia

* [COVID-19 Information for workplaces](https://www.safeworkaustralia.gov.au/covid-19-information-workplaces)

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*We acknowledge the Traditional Custodians of the lands and seas on which we work and live, and pay our respects to Elders, past, present and future.*

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