Residential Homes including (Supported Independent Living Disability, Out of Home Care Residential, Homelessness and Domestic and Family Violence Services) Roadmap

A guide to the on/off application of Restrictions in response COVID-19 detection or community transmission

- The roadmap aims to balance the rights of clients, staff, visitors and contractors with public health and infection control requirements. It considers the whole of community factors that will be considered in decisions on the levels of • restrictions imposed on any Family and Disability Service. The roadmap can be used to guide the approach for other residential homes including disability hostel accommodation services. Consideration will be given to differentiated responses in restricted areas or larger geographical areas
- In the event of an outbreak in community, stringent infection control measures will apply and will be implemented as per advice from the local Public Health Unit and our key Funding and Regulatory Bodies (Department of Children, Youth • Justice and Multicultural Affairs https://www.cyjma.qld.gov.au/news-updates/covid-19-updates; Department of Communities, Housing and Digital Economy https://www.chde.qld.gov.au/; Department of Social Services https://www.dss.gov.au/about-the-department/coronavirus-covid-19-information-and-support Department of Education https://alt-ged.ged.gld.gov.au/covid19; NDIS https://www.ndis.gov.au/coronavirus; NDIS Quality and Safeguarding Commission https://www.ndiscommission.gov.au/resources/coronavirus-covid-19-information NOTE: This Roadmap does not apply to a residential home with COVID-19 outbreak - to be managed via the FADS Response Plan and Outbreak Plan

Situation Stage Objectives		No COVID-19 detected in community (low risk) Maintain vigilance Protect clients but enable social interaction Protect PPE stock and establish distribution channels Maintain social connection for clients	On detection in community and protective measures deemed necessary (moderate risk) Temporary Restrictions to Assess the Situation Protect clients Support ongoing social connection for clients eg ICT options Stop or limit transmission to homes	Case/s detected case detected Restrictions – U • Protect client • Support ongo • Stop or limit					
					Controls	Staff/ Leaders	 Minimise workforce/contractor movement across houses Localised workforce management plan developed and implemented Staff maintain infection control learning requirements Ensure addresses and staffing rosters are available 	 Movement restricted Use of face mask by staff providing direct care and in line with any Health Directive or organisational requirement PPE precautions for staff working across more than one home Use of full PPE for active showering of clients 	 Movement o do so PPE precauti Use of face n Use of full PF
						Clients	 Clients can leave the homes Promote infection prevention and control measures such as hand hygiene using various forms of communication Social distancing maintained Hand washing is maintained 	 Promote infection prevention/control measures e.g. hand hygiene Social distancing maintained If Directed Only: Restrict movement outside the home Prepared but not alarmed 	 Clients restri Engage addit If Directed O
	Visitors and service providers	 Visitors and service providers may enter maintain records as per usual practice Entry screening processes 	 If Directed: No visitors (exceptions to apply) or non-essential service providers Essential service providers and key guardians permitted (e.g. GPs, Allied Health) permitted. Must use appropriate PPE. Continue entry screening processes All entering the home required to use face mask 	 No visitors (e Essential hea use appropri Continue ent All entering t 					
Communications		 Communication with clients and families regarding current status Refreshing PPE and infection control training for staff Reinforcing messaging re staying at home and getting tested if symptomatic to staff and visitors Reinforce messaging to visitors not attending if unwell Engagement and preparation with community services industry & stakeholders 	 Information about the direction and the implications of the changes (refer to website) Communications with clients and families Refresh PPE training and communication to staff regarding infection control Status updates to community services Industry peak bodies & key stakeholders 	 Update infor changes (refe Communicat Communicat Status updat stakeholders 					
Testing		 As required/directed – all symptomatic staff and clients As required/directed - all clients and staff in the event of a confirmed case at the home (client, staff or visitor) 	• As required/directed – all symptomatic staff, clients, visitors – broad testing as clients may present with atypical symptoms	 As required/ testing as clic Surveillance 					
Additional Health Direction		No-Current Direction	Yes – Regulatory or Funding Body precautionary Direction restrictions applied to defined geographical area, for 48 hours. Review occurs after 48 hours. Restrictions remain in place where a directive applies until replaced or revoked.	Yes – Regulatory defined geograp					

ected in nearby residential/community service, ed client, staff or visitor close contact (high risk) Until Outbreak Declared Over/ Declared Stand Down

ents and the community going social connection for clients eg ICT options it transmission to homes

of staff working across homes ceases where practical to

tions for staff working across more than one home mask by all staff and potentially clients PPE for active showering of clients

ricted as per any DOH Directive

ditional communication strategies

Only: Restrict movement outside the home

(exceptions to apply) or non-essential service providers ealth service providers and guardians permitted. Must riate PPE.

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v or Funding Body Direction restrictions applied to

phical area until the Direction is replaced or revoked.