



4.1 SAFE ENVIRONMENT POLICY AND PROCEDURE

1.0 Purpose

To ensure that each participant accesses supports in a safe environment that is appropriate to their needs.

2.0 Scope

The policy applies to:

- ESG Inclusive Homes employees, whether permanent or casual, contractors, volunteers, and stakeholders
- All participants, their families, carers and/or advocates.

3.0 Definitions

Terminology	Definition
Additional Precautions	An additional level of practice for infection control that is put in place when an individual is aware that they will be in contact with an infection.
Airborne	Tiny particles containing infectious agents travel through air currents (e.g., air conditioning) and are breathed in by a person.
Contamination	When infectious agents spread to a surface or item, creating risks for the spread of infection.
Contact	Infectious agents are transferred directly (e.g., contact with infected blood or body fluids), or indirectly (e.g., touching a contaminated surface).
Droplet	Droplets made by coughing or sneezing transfer to someone's eyes, nose, or mouth.
Infectious Disease	Also known as communicable diseases; caused by organisms such as bacteria, viruses, fungi, and parasites. These micro-organisms can invade and reproduce in the human body, and then cause harmful effects. In healthcare settings, the main modes for transmission of infectious agents are contact (including bloodborne), droplet and airborne.
Host	The origin of the infectious agent such as people, animals, air, water, food, or equipment.
Notifiable Disease	Notifiable disease, any of various health conditions that upon detection are required to be reported to public health authorities. For certain diseases, namely those of an infectious nature, mandatory disease reporting plays a critical role in preventing and controlling the spread of disease in populations.
Standard Precautions	A minimum level of practice for infection control.

Susceptible Host	A person exposed to an infectious agent who is vulnerable to infection.
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4.0 Policy

The health, safety, and well-being of all stakeholders of ESG Inclusive Homes is of critical importance and priority. ESG Inclusive Homes implements policies and procedures, protocols, and preventative measures to ensure that each participant accesses supports in a safe environment that is appropriate to their needs by ensuring:

- Each participant can easily identify employees who provide supports to them
- Work is undertaken with each participant, and others, in settings where supports are provided (including their home), to ensure a safe support delivery environment for them.
- Where relevant, work is undertaken with other providers (including health care and allied health providers and providers of other services) to identify and manage risks to participants and to correctly interpret their needs and preferences
- For each participant requiring support with communication, clear arrangements are in place to assist employees who support them to understand their communication needs and the way they express emerging health concerns
- Protocols are in place for each participant about how to respond to medical emergencies for them
- ESG Inclusive Homes employees are trained to distinguish between and respond to urgent and non-urgent health situations medical emergencies
- ESG Inclusive Homes employees are trained, and have refresher training, in infection prevention and control standard precautions including hand hygiene practices, respiratory hygiene, cough etiquette and the use of personal protective equipment (PPE)
- PPE is available to each employee, and each participant, who requires it
- Maintaining relationships with appropriately qualified and licenced organisations for:
 - Removal of waste
 - Regular monitoring and removal of pests when required (e.g., termites, spiders)
 - Supply of food
 - Cleaning and laundry equipment and services
 - Monitoring and maintenance of air handling systems (where installed)
 - Supply of personal protective equipment; and
 - Pharmaceuticals and medical supplies.
- Systems for escalation are established for each participant in urgent health situations
- Infection prevention and control standard precautions are implemented throughout all settings in which supports are provided to participants; and
- Routine environmental cleaning is conducted of settings in which supports are provided to participants (other than in their homes), particularly of frequently touched surfaces.

4.1 Responsibilities

4.1.1 Responsibilities of the Director and/or Appointed Delegate

- Primary accountability for this *Safe Environment Policy and Procedure*
- Internal and external audits, schedules, and reviews; and
- Provide complaint outcomes of all complaints in an efficient and timely manner.
- Ensure that each ESG Inclusive Homes employee is provided induction training, and annual refresher training specific to:
 - How to respond to urgent and non-urgent medical emergencies (including how to distinguish between urgent and non-urgent health situations)
 - Infection prevention and control standard precautions including hand hygiene practices, respiratory hygiene, cough etiquette; and
 - Effective use of personal protective equipment (PPE)

- Ensure that all mandatory training is recorded in the *Employment Register*
- Ensure that PPE is available to each employee, and each participant, who requires it
- Ensure that additional precautions are implemented when required to prevent the spread of infection such as in the instance of a pandemic or outbreak
- Conduct annual infection control audits as per the *Internal Audit Schedule*
- Maintain ESG Inclusive Homes *Risk Register* and identify and monitor any trends related to safe environment formulation and then formulate and monitor action plans to address these
- Oversee the selection and provision of uniforms and identification badges that allow for ESG Inclusive Homes employees to be easily identified
- Ensure that all ESG Inclusive Homes employees hold relevant qualifications, expertise, and experience
- Monitor employee's compliance with safe environment requirements and address any issues identified
- Provide information and feedback to management and employees regarding all safe environment related matters, including actions taken and outcomes achieved
- Oversee the production of educational materials for ESG Inclusive Homes employees and participants use relating to maintaining a safe environment using a variety of formats such as posters, printer and material and educational videos
- Mandate that all ESG Inclusive Homes employees use appropriate identification provided by ESG Inclusive Homes, such as uniform and identification badge so that each participant can easily identify ESG Inclusive Homes employees who provide supports to them
- Oversee the selection and provision of equipment and supplies to ensure safe environment requirements are met
- Ensure all ESG Inclusive Homes equipment is maintained and kept in working order
- Ensure appropriate and timely management of all workplace injuries, near misses and illnesses
- Ensure that emergency and disaster management plans are in place at all ESG Inclusive Homes locations
- Oversee the implementation of emergency and disaster management plans are implemented with each participant
- Ensure that if a participant requires support with communication, clear arrangements are in place to assist ESG Inclusive Homes employees who support them to understand their communication needs and the way they express emerging health concerns
- Ensure that systems for escalation are established for each participant in urgent health situations
- Conduct annual safe environment and emergency evacuation audits on an annual basis as per the *Internal Audit Schedule*; and
- Ensure that ESG Inclusive Homes Business *Emergency and Disaster Management Plan* are reviewed every year and assembly areas are defined in the case of evacuation.

4.1.2 Responsibilities of All ESG Inclusive Homes Employees

- Make and monitor all reasonable adjustments to a support delivery environment to ensure it is fit for purpose and in alignment with each participant's health, privacy, dignity, quality of life and independence
- Work with a participant, their family, and carer and/or advocate to ensure that the home is safe for a participant and ESG Inclusive Homes employees. If required, ESG Inclusive Homes employees will assess the premises using a *Home Risk Assessment Form* to identify and manage risks, ensure environments are safe and prevent and/or manage injuries
- Where relevant, ensure that work is undertaken with other providers (including health care and allied health providers and providers of other services) to identify and manage risks to participants and to correctly interpret their needs and preferences

- Ensure completion of all mandatory infection control training and annual competency refresher training
- Ensure personal protective equipment is worn at all required times
- Ensure personal appearance is kept neat and clean
- Ensure appropriate identification such as uniforms and identification badges are worn so that each participant can easily identify ESG Inclusive Homes employees who provide supports
- Ensure that personal protective equipment is stored in a sanitary and dry environment
- Request and inform the Director and/or the appointed delegate if stock levels are low so that it can be ordered
- Familiarise participants with ESG Inclusive Homes infection control guidelines *and this Safe Environment Policy and Procedure*
- Encourage participants to disclose their health or risk status if there is a potential increased risk or source of infection
- Provide educational materials relating to infection control using a variety of formats such as posters, printer and material and educational videos if requested by participants
- Ensure that all workplace injuries, near misses and illnesses are immediately reported to the Director and/or appointed delegate
- Provide opportunities for patients to identify and communicate risks and encourage them to use feedback procedures through the service's feedback, compliments, and complaints processes
- Work with a participant, their family, carer and/or advocate to ensure a safe environment is established for all stakeholders when delivering support and care
- Ensure that if a participant requires support with communication, clear arrangements are in place to assist employees who support them to understand their communication needs and the way they express emerging health concerns
- Ensure all ESG Inclusive Homes equipment is maintained and kept in working order
- Ensure the use of appropriate identification provided by ESG Inclusive Homes, such as uniforms and identification badges, upon delivering supports in a participant's environment.
- Ensure that all workplace injuries, near misses and illnesses are immediately reported to the Director and/or appointed delegate
- Where relevant, ensure collaboration with other providers and services to identify and treat risks, ensure safe environments, and prevent and manage injuries
- Ensure personal appearance is kept neat and clean
- Request and inform management and/or the Director and/or the appointed delegate if stock levels are low so that it can be ordered
- Familiarise participants with ESG Inclusive Homes safe environment guidelines and this *Safe Environment Policy and Procedure*
- Ensure routine environmental cleaning is conducted of settings in which supports are provided to participants (other than in their homes), particularly of frequently touched surfaces
- Provide opportunities for patients to identify and communicate risks and encourage them to use feedback procedures through the service's feedback, compliments, and complaints processes; and
- Ensure all information relevant to safe environment development and management is documented in a participants file.

4.1.3 Responsibilities of a Participant

- Adhere to the guidelines relating to developing and maintaining a safe environment for all stakeholders as outlined in their *Service Agreement*
- Maintain a safe work environment (e.g., repair broken steps, mow long grass, restrain animals, provide adequate lighting)
- Look after their own in-home safety (e.g., maintain electrical equipment and install smoke alarms and safety switches to switchboards)

- Not act recklessly or placing the health and safety of others at risk
- Ensure their actions or failure to act do not put themselves or ESG Inclusive Homes employees at risk
- Cooperate with ESG Inclusive Homes employees to make reasonable adjustments to ensure safe work procedures and a safe work environment (e.g., move furniture to allow adequate workspace, use lifting equipment based on assessed needs)
- Keep their equipment safe, well maintained and in good order; and
- Inform service providers and others of any known hazards.

5.0 Procedure

5.1 Risk Identification and Management

ESG Inclusive Homes considers risk identification and management to be fundamental to a safe and supportive work environment. Reportable incidents extend to:

- Injuries to employees or employees
- Emergency situations; and
- Near miss incidents where there is no injury but requires preventative action.

ESG Inclusive Homes employees must:

- Where possible take immediate action to minimise risks
- Report to the Director and/or appointed delegate or manager immediately where the action is beyond role limitations, and the hazard poses a high risk
- Record the hazard according to the occupational work health and safety reporting requirements; and
- Ensure that when an incident has occurred, it is acknowledged and managed effectively, and all information is documented in a participant's file.

ESG Inclusive Homes is also required to remain vigilant to infection control as many diseases and infections are notifiable diseases which require a notification to be made to the Department of Health. As a precautionary measure, all ESG Inclusive Homes employees who are deemed to have a notifiable disease are not permitted to undertake work until a medical officer has advised them that it is safe to do so. It is essential that all ESG Inclusive Homes employees supply a medical certificate to the Director and/or appointed delegate prior to recommencement of work.

5.2 Assessment (Pre-Service)

Where ESG Inclusive Homes delivers services in a participant's home, ESG Inclusive Homes employees will conduct an initial risk assessment of possible domestic hazards using a participant *Home Environment Checklist* and *Risk Assessment Form* to allow for adequate controls to be put in place prior to commencing service delivery.

The risk assessment will follow the 5-step risk management process:

- Identify hazards
- Analyse - Assess and prioritise risks
- Treat - Implement controls to eliminate or mitigate the risk
- Monitor and review - Continually monitor and evaluate the risks and treatments to maintain their effectiveness and appropriateness; and
- Report - Provide regular reports to the organisation and stakeholders

A *Home Risk Assessment* will be conducted in consultation with a participant, their family, carer and/or advocate, landlords and other support providers, where appropriate, to make and monitor all reasonable adjustments to a support delivery environment to ensure it is fit for purpose and in alignment with each participant's health, privacy, dignity, quality of life and independence.

If the outcome of the risk assessment identifies that ESG Inclusive Homes employees are exposed to significant risks, ESG Inclusive Homes will determine the necessary steps required to adequately control the identified risk/s

5.3 Risk Assessment (On-Going)

5.3.1 Change in a Participant's Health

Illness, injury, and other changes to an employees' health status should be monitored as a potential source of risk to workplace health. ESG Inclusive Homes employees are to:

- Regularly monitor a participant's health status; and
- Inform the Director and/or appointed delegate and initiate the need for a review of the care plan, reassess their activities to ensure the risks are controlled and discuss the need for changes with the participant, their family, carer and/or advocate.

5.3.2 Changes to The Home Environment

A participant's home environment can change between visits. ESG Inclusive Homes employees are to be maintain vigilance and determine at each visit the safety of a participant's home as a workplace before commencing duties and monitor for changes which may include:

- Positioning of furniture
- Inoperable electrical equipment
- People or animals are now present
- Altered storage patterns
- Spills or leaks
- New equipment or furniture; and/or
- Obstructed access.

5.3.3 Changes to Service Arrangements

Changes to service arrangements could include:

- Changes in the service required
- A requested employees change initiated by ESG Inclusive Homes employees and/or a participant; and
- Changes to an alternate service provider.

5.4 Manual Handling

- ESG Inclusive Homes implements a minimal lift policy
- Comprehensive manual handling and safe lifting training is included within the induction training for all ESG Inclusive Homes employees and as part of mandatory annual refresher training
- The manual handling needs of all ESG Inclusive Homes employees are assessed and documented on entry to ESG Inclusive Homes
- The manual handling needs, risk identification and assessment of all ESG Inclusive Homes participants are assessed and recorded within a participants *Intake Assessment and Support Plan*
- All manual handling injuries and incidents are recorded on an *Incident Report Form* and included on the *Incident Register*; and
- Appropriate equipment is provided for manual handling activities to be safely executed; and
- Personal manual handling equipment such as 'slide sheets' are maintained according to infection control guidelines.

5.5 Electrical Equipment

- ESG Inclusive Homes is responsible for the testing and maintenance of equipment it provides for use in a participant's home
- ESG Inclusive Homes employees are to report faults and suspected faults immediately

- Where ESG Inclusive Homes employees must use a participant's electrical installation and electrical equipment (e.g., power points, lights, extension leads etc), they should:
 - Visually inspect the electrical installation paying particular attention to details such as damaged or missing parts and burning or discoloration of the electrical fittings in the installation (e.g., damaged light switch or cracked power point).
 - Avoid using the employees' electrical equipment (e.g., electric kettles, vacuum cleaners, extension leads etc) if possible, as ESG Inclusive Homes is not in control of the electrical condition of this equipment; and
 - Connect employee's equipment via a compliant safety switch. If the employees' residence is not fitted with a safety switch, or if uncertain, ESG Inclusive Homes employees should use their own portable safety switch, supplied by ESG Inclusive Homes.

5.6 Hazardous Substance and/or Chemical Use

ESG Inclusive Homes is committed to ensuring that when chemicals are used in a participant's home they are used, managed, and disposed of appropriately. ESG Inclusive Homes employees must:

- Keep hazardous substance and/or chemical use to a minimum
- Avoid using chemicals that have been decanted into another container
- Read the first aid information and precautions on the label before use
- Ensure hazardous substance and/or chemical waste is disposed of safely and in accordance with relevant regulations and standards
- Ensure that in the event of a chemical related incident, an *Incident Form* is completed that provides details of the incident and the steps taken to minimise harm to the affected individual; and
- Undertake hazardous substance and/or chemical use induction training and partake in mandatory annual refresher training and/or other training requirements.

5.7 Smoke Free Environment

- ESG Inclusive Homes promotes a smoke free environment at all locations and will not be tolerated
- ESG Inclusive Homes public areas are free from smoke and will not be tolerated
- Smoking in company cars is prohibited; and
- Smoking in a participant's home is prohibited.

5.8 Standard and Additional Precautions

5.8.1 Overview

ESG Inclusive Homes implements a two-tier system of infection control precaution:

- Standard precautions (Tier 1)
- Additional precautions (Tier 2)

The precautions are designed to control the spread of infection that occurs through the following modes of transmission:

- Direct physical contact
- Indirect physical contact
- Droplet
- Airborne
- Vehicle; and
- Vector-borne.

5.8.2 Standard Precautions (Tier 1)

Standard precautions help reduce the risk of transmission of microorganisms from both known and unknown sources of infection and are always undertaken.

Standard precautions must be used when employees are likely to encounter:

- Blood (including dried blood)
- All body substances, secretions, and excretions
- Non-intact skin
- Mucous membranes
- Soiled surfaces
- Soiled equipment; and/or
- Contaminated food and/or water.

Standard precautions must be implemented by all ESG Inclusive Homes employees including but not limited to:

- Washing hands for a minimum of 30 seconds before and after contact with participants, handling food, attending to personal hygiene matters, using equipment, or handling contaminated materials such as linen
- Using hand sanitising agents as necessary
- Wearing suitable disposable gloves, eye wear, enclosed footwear, and other protective clothing appropriate for the task
- Ensure injuries such as cuts or scratches are covered with a waterproof, breathable dressing
- Ensure any sharps or needles are disposed of in designated sharps containers; and
- Adhering to respiratory hygiene/ cough etiquette.

5.8.3 Additional Precautions (Tier 2)

Additional precautions must be implemented by all ESG Inclusive Homes employees when they know they will be in contact with certain infections including:

- Contact precautions - Used to reduce the risk of transmission of microorganisms by direct or indirect contact (e.g., contact with skin or surfaces contaminated with MRSA, scabies, or gastroenteritis)
- Droplet precautions - Used where a participant may have an infection transmitted by droplets (e.g., mumps, rubella, influenza, and SARS)
- Airborne precautions - Used for participants known, or suspected, to be infected with pathogens that can be transmitted through the air (e.g., tuberculosis or chickenpox virus).

Standard precautions are always used with additional precautions. Additional precautions are used by all employees' members when the Director or their delegate instructs employees to use them. The following table details employees' requirements when undertaking standard precautions and when instructed to take additional precautions.

Additional Precautions				
Requirement	Standard Precautions	Contact Precautions	Droplet Precautions	Airborne Precautions
Signage	No	Yes	Yes	Yes
Hand Hygiene	Yes	Yes	Yes	Yes
Gloves	Yes, if there is a risk of contact with blood or body substances	Yes, for direct contact with a participant or their environment	No	No

Impervious Apron/ Gown	Yes, if there is a risk of splash or contamination with blood or body substance	Yes, for direct contact with a participant or their environment	No	No
Mask	Yes, if there is a risk of splash, splatter, or risk of blood or body substances spraying into the air	No	Yes. Employees to use a surgical mask when coming within one (1) metre of the participant. Employees to remove the mask after leaving the room	Yes. Employees to use a P2 mask. Employees to remove the mask after leaving the room
Protective Eyewear	Yes, if there is a risk of splash, splatter or risk of blood or body substances spraying into the air	No	Yes. Employees to use when coming within one (1) metre of the participant	No
Equipment	Yes, when handling equipment contaminated with blood or body substances. Remove gloves when finished handling the equipment and wash hands	Single-use or dedicated equipment where possible. Reprocess reusable items to the required level before reusing on other participants	No	No
Cleaning	Yes, standard cleaning	Standard cleaning but depends on the organism. Director to advise employees of specific cleaning needed	Cleaning Yes, standard cleaning. Standard cleaning but depends on the organism. Director to advise employees of specific cleaning needed	Standard cleaning but depends on the organism. Director to advise employees of specific cleaning needed
Transport of Participants	Yes Cover all open wounds	Surgical mask if coughing/ sneezing and an	Surgical mask for the participant when leaving the	Surgical mask for the participant when leaving the

		infectious condition known or suspected. Director to advise precautions to transport employees and the receiving area	room. Use mask over the top of nasal oxygen prongs (if in use). Advise transport employees and receiving area of precautions	room. Use mask over the top of nasal oxygen prongs (if in use). Advise transport employees and receiving area of precautions
Visitors	Yes. Hand hygiene before and after the participant visit	Yes, as directed by the Director	Yes. Use a surgical mask when coming within one (1) metre of the participant. Remove mask after leaving the room	Yes. Use a P2 mask. Remove mask after leaving the room
Other	Respiratory hygiene for coughing/ sneezing participants	Do not take medical records into the room	Do not take medical records into the room	Do not take medical records into the room

5.9 Visitors

The Director and/or appointed delegate is responsible for determining if visitors need to use personal protective equipment to protect themselves and others from infection when visiting a ESG Inclusive Homes location. In the instance that personal protective equipment is deemed mandatory, all requirements and reasons for the mandate must be displayed at all affected locations and required personal protective equipment made available for visitors to use as required.

Visitors who do not wish to comply with requirements should be referred to the Director and/or appointed delegate for further discussion and explanation.

5.10 Hand Hygiene and Hand Care

5.10.1 Situations Requiring Hand Hygiene

Situations requiring hand hygiene include but are not limited to:

- When starting and finishing work (including before and after a meal or other breaks) and before starting a new task or activity
- After going to the toilet
- After using handkerchief or tissue, coughing, or sneezing
- After touching hair or any other part of the body
- After handling rubbish
- Whenever employees can see dirt on their hands, or when employees are requested to stop the spread of microorganisms
- Before and after direct contact with a participant and their surroundings

- Before wearing, and after removing, any personal protective apparel, including gloves, mask/face protection, or impervious apron/gown
- After any contact with blood or body fluids, non-intact skin, and abnormal risk (e.g., rash)
- After handling unwashed linen or clothing
- Before handling or preparing any food or drinks for participants or employees, including assisting participants with their meals; and/or
- After contact with any surface, environment or object that may be contaminated.

5.10.2 General Rules for Hand Hygiene

- Hands must be cleaned with soap and water when there are dirt\substances on hands
- Employees must wash their hands before and after using gloves
- Artificial nails, nail extensions and nail enhancements (varnish or nail art) are not to be worn by employees while providing direct care to participants. These types of nails cause microorganisms to increase
- Hand and wrist jewellery are to be kept to a minimum for employees providing direct participant care
- Rings (other than a plain wedding band), bangles, wristbands or bracelets are not to be worn
- Hands must be dried after washing, as the residual moisture left on the hands may harbour bacteria; and/or
- Paper towels or single-use cloth towels must be used to dry hands.

5.10.3 Types of Hand Hygiene

Routine: Removing transient microorganisms

Product	Duration	Technique
Alcohol-based hand cleanser	10-20 seconds	Rub over all surfaces until dry without wiping

Product	Duration	Technique
Liquid soap and water	30 seconds	Wet hands. Apply one measured dose of solution, lather well overall surfaces, rinse, and pat dry with a disposable towel

5.10.4 Procedural (Clinical/Non-Surgical)

Use before aseptic procedures

Product	Duration	Technique
Alcohol-microbial liquid soap and water	30-60 seconds	Wet hands. Apply one measured dose of solution, lather well overall surfaces, rinse, and pat dry with a disposable towel.
Alcohol-based hand cleanser with known residual effect	30 seconds minimum	Rub over all surfaces until dry without wiping.

5.10.5 Safety, Storage and Use of Non-Water Cleansers (Alcohol-Based Rub)

Alcohol-based hand rub will be made available in all ESG Inclusive Homes vehicles and offices.

A Safety Data Sheet (SDS) for alcohol-based hand rub will be made available in areas where alcohol-based hand rubs are stored.

Alcohol-based rubs can ignite and catch on fire when they reach 21° to 24° Celsius or if there is a large volume in one area. These rubs must be stored away at temperatures less than 21° Celsius.

5.11 Personal Protective Equipment (PPE)

5.11.1 Types of Gloves

- Sterile gloves- Used for procedures where there is contact with susceptible sites (e.g., catheterisation, where aseptic technique is required for wound care or managing a tracheotomy)
- Non-sterile gloves- Used for procedures that involve contact with non-intact skin and mucous membranes (e.g., emptying a catheter bag) and personal care activities (e.g., assisting with toileting); and
- Reusable utilised gloves - Used for non-care activities (e.g., general cleaning, cleaning contaminated surfaces).

Gloves are used when:

- Changing a colostomy bag or urinary drainage bag
- Dressing wounds or touching broken skin
- Assisting with toileting
- Giving mouth or eye care
- Oral suctioning
- Touching equipment or surfaces that may encounter blood or body substances
- Blood glucose monitoring
- Touching broken skin; and/or
- Preparing food.

Gloves are not used instead of hand hygiene; employees must always:

- Perform hand hygiene before and after using gloves
- Remove gloves when a care activity is finished
- Change gloves before starting a different care activity; and
- Dispose of used gloves immediately.

All gloves are to be disposed of immediately into a designated general and/or clinical waste bins after use.

5.11.2 Protective Eyewear

Protective eyewear is commonly used to eliminate any potential hazardous and/or infectious substances entering the eye area such as:

- Droplets or aerosols (e.g., from oral suctioning, coughs, or sneezes); and
- Splashes or sprays of blood or body fluids (e.g., when emptying catheter bags).

Protective eyewear must be worn and available to anyone who is in an environment that may contain the splattering of blood or any other body substances or fluids. Some protective eyewear may be designed to have singular use only. ESG Inclusive Homes is expected to notify any individual wearing the eyewear if the disposal is necessary after the first use. However, if the protective eyewear can be used multiple times, they must be washed and cleaned with provided cleaning materials, after every use.

ESG Inclusive Homes employees are trained to understand that the outside of the eyewear is contaminated and to:

- Remove eyewear using the headband or earpieces
- Clean eye shields after each use with detergent and water and allow it to dry; and
- Dispose of single use eyewear on completion of the care activity.

5.11.3 Face Masks

Face masks are designed and used to be fluid repellent to ensure no hazardous substances enters the mouth or nose area such as:

- Droplets or aerosols (e.g., from oral suctioning, coughs, or sneezes); and
- Splashes or sprays of blood or body fluids (e.g., when emptying catheter bags).

ESG Inclusive Homes expects all personnel to wear masks for the duration of any procedures that may encounter mouth or face contact and during the care of participants who have an infection that is spread by the droplet or airborne route.

Masks may also be placed onto participants who are coughing, especially if they are unable to cover their mouths. Before doing this, consider whether wearing a mask will cause distress (e.g., if the participant is unable to understand the purpose of wearing the mask).

5.11.4 Types of Masks

- Surgical masks are appropriate for most situations
- Other types of masks may be required; and
- The supervisor will inform employees of appropriate mask to wear, if necessary.

When using a mask:

- Check manufacturer's instructions before use
- Ensure the mask fits the individual's face, where the nose and mouth area are completely covered
- Do not touch the front of the mask with hands once the mask is in place
- Use each mask for the care of one participant only as each mask is singular use only
- Ensure the mask is changed if a care activity is taking an extended time
- Do not leave a mask dangling around the neck
- Ensure it is immediately disposed of when no longer required; and
- Perform full hand hygiene after discarding.

5.11.5 Gowns and/or Aprons

ESG Inclusive Homes employees are expected to wear an impermeable (waterproof) plastic gown or apron where exposure to body substances is present such as splashes or sprays of bodily fluids (e.g., vomiting or diarrhoea). Gowns/aprons are worn during the care of participants who have an infection that is spread by the contact, droplet or airborne route and assist to protect an individual's clothing where the risk of contamination of blood or body fluid may be transferred.

Hand hygiene must be performed before and after using gowns or aprons.

A gown or apron must fully cover the torso from neck to knees, arms to end of wrists and adequately wrap around the back. All fastenings on the gown/apron must be tied and fastened at the back. A gown or apron will be removed and disposed of as soon as care is completed.

Plastic aprons can be used:

- When clothes may be exposed to blood or body fluids, and there is a low risk that arms will be contaminated
- When the employees' clothes might get wet (e.g., when showering a participant); and
- Only once and then must be disposed of as soon as care is completed.

All gowns and aprons are for singular use only and are to be disposed of when no longer required.

ESG Inclusive Homes will designate a specific location to dispose of all aprons or gowns which must occur when changing environments and/or when changing procedures and tasks between participants.

5.12 Respiratory Infection and Cough Etiquette

ESG Inclusive Homes employees who are exhibiting signs or symptoms of a suspected respiratory infection must follow respiratory hygiene and cough etiquette protocols including but not limited to:

- Covering nose/mouth with a disposable single-use tissue when coughing, sneezing, wiping and/or blowing noses
- Ensure all disposable tissues and other sanitary items are disposed of in the nearest waste receptacle or bin after use
- If no tissues are available, cough and/or sneeze into the inner elbow rather than the hand
- Ensuring that appropriate masks are worn when in direct contact with other ESG Inclusive Homes employees and participants, their families and/or carers
- Practice hand hygiene after contact with respiratory secretions and contaminated objects/materials; and
- Keep contaminated hands away from the mucous membranes of the eyes and nose.

5.13 Sharps Management

- Employees members who use a sharp are responsible for its safe disposal
- Place sharp in a hard plastic or metal tray when passing to another person
- Needles should not be recapped under any circumstance
- The whole disposable needle and syringe in the sharps container unless there are instructions to do otherwise (e.g., insulin pen)
- Containers are only to be filled to the level as marked on the container. Never force items into a full sharps container as this can damage the container or cause injury); and
- Full containers must have the lid firmly locked in place for collection by waste management.

5.14 Management of Blood and Body Substance Spills

If blood or body substance spills employees must:

- Put on protective clothing; this always includes gloves but may also include impervious apron and nose/mouth and eye protection
- Use brush and pan to remove any broken glass or sharps
- Clean up the bulk of spill with a paper towel and discard in the bin; and
- Use a mop and bucket to clean the spill (checking first with the participant as they may have specific cleaning equipment for use).

When finished cleaning employees will:

- Dispose of single-use items
- Place reusable items (e.g., sheets, towels) in washing receptacle for washing and drying
- Clean reusable items such as goggles with a neutral detergent and then dry; and
- Clean the mophead and bucket with detergent and place upside down to drain and dry
- Complete an *Incident Form*.

5.15 Routine Environmental Cleaning

Routine environmental cleaning is conducted, either by ESG Inclusive Homes employees and/or third-party services and in respect to the participants NDIS plan, in settings in which supports are provided to participants (other than in their homes), particularly of frequently touched surfaces. Routine surface cleaning duties include but not limited to:

- Cleaning and drying work surfaces and equipment before and after usage or when visibly soiled
- Cleaning up spills immediately
- Ensuring kitchens, bathrooms and common areas are cleaned on a regular basis; and
- Ensuring floors are cleaned daily or as necessary with an appropriate cleaning agent or vacuum cleaner depending on the type of flooring present.

5.16 Multi-Resistant Organisms (MRO)

The issue of multiple resistant organisms (MROs) (also known as “superbugs”) can be a source of real anxiety for employees and participants. It can cause inappropriate social and physical isolation and excessive infection prevention actions. Finding a balance between infection prevention strategies and not inadvertently limiting a participant’s activity level and engagement with the residential care community is essential.

ESG Inclusive Homes employees must notify the Director and/or appointed delegate immediately as soon as they are aware a participant is infected or suspected to be infected, with a multi-resistant organism.

5.17 Notification of Infectious Diseases

The Director and/or appointed delegate will report any of the following diseases as applicable to relevant state and national legislative requirements. The *Communicable Diseases Network Australia (CDNA)* has agreed that certain communicable diseases must be notified nationally and provided to the *Commonwealth’s National Notifiable Diseases Surveillance System (NNDSS)*. Please refer to the *Communicable Diseases Network Australia (CDNA)* website to view an up-to-date list of notifiable diseases.

5.18 Identifying and Managing Environmental Risks

ESG Inclusive Homes is committed to proactively identifying, managing, evaluating, and mitigating organisational risks to ensure safe and effective operation and delivery of support to participants that is consistent with ESG Inclusive Homes risk management system.

The Director and/or appointed delegate is ultimately responsible for identifying and managing environmental risks that impact or have the potential to impact participants, employees, and all other stakeholders. All ESG Inclusive Homes employees are expected to act responsibly to minimise risk to themselves and others, and report hazards and other risks as soon as they are noticed.

All identified environmental risks or hazards are to be reported by ESG Inclusive Homes employees promptly to the Director and/or appointed delegate using an *Incident Form*. For more information on incident management processes, please refer to ESG Inclusive Homes *Incident Management Policy and Procedure*.

5.19 Training and Ongoing Development

ESG Inclusive Homes is committed to ensuring employees and volunteers have the necessary skills and knowledge to competently undertake their duties. ESG Inclusive Homes will provide ongoing training and development. At commencement of employment with ESG Inclusive Homes, all employees will undertake mandatory infection control induction training, and annual refresher training, in infection prevention and control standard precautions including hand hygiene practices, respiratory hygiene and cough etiquette and personal protective equipment.

6.0 Related Documents, Legislation, Regulations and Standards

- *Incident Form*
- *Incident Register*

- Risk Assessment Form
- Risk Register
- Quality and Continuous Improvement Register
- Quality and Continuous Improvement Plan
- Home Risk Assessment
- Employment Register
- Internal Audit Schedule
- Participant Emergency and Disaster Management Plan
- Business Emergency and Disaster Management Plan
- Incident Management Policy and Procedure
- Australian Guidelines for the Prevention and Control of Infection in Healthcare 2010
- Department of Health - Australian Guidelines for Prevention and Control of Infection in Healthcare 2019 (Commonwealth)
- [National Disability Insurance Scheme Act 2013](#)
- [National Disability Strategy 2010-2020](#)
- [NDIS Developing Your First NDIS Plan](#)
- [National Disability Insurance Scheme Terms of Business for Registered Providers](#)

7.0 Policy Review

This *Safe Environment Policy and Procedure* will be reviewed on an annual basis to ensure that ESG Inclusive Homes operates in accordance with legal, regulatory and company standards. This process will include a review and evaluation of current practices and service delivery types and locations, relevant policies and procedures, forms and registers and will incorporate all ESG Inclusive Homes employee, participant, and other stakeholder feedback.

ESG Inclusive Homes *Quality and Continuous Improvement Register* will be used to record and monitor progress of any improvements identified and where relevant feed into service planning and delivery processes.

ESG Inclusive Homes may make changes to this *Safe Environment Policy and Procedure* at any time to allow for continual improvement, evaluation, and implementation of best practices to improve the effectiveness of its operation.