



Advice on how to support employees during the COVID-19 pandemic:
A fact sheet for the GP setting

Employees in GP practice settings are at increased risk of exposure to COVID-19, due to close contact with patients, fellow staff members and the public. The following advice has been adapted for the Victorian GP practice setting.

What is my responsibility to all my staff as an employer?

As far as is reasonably possible, employers have a duty to provide and maintain a safe working environment that minimises or eliminates risks to the health of their employees. Along with minimising potential exposure to COVID-19, risks to psychological and physical health must also be considered.

Employees have responsibilities to comply and cooperate with occupational health and safety measures put in place by their employer, as well as the responsibility to take reasonable care of their own and others' health and safety whilst in the workplace.

The employer may require the employee to provide a statutory declaration or other reasonable evidence (such as a medical certificate), to prove the reason for the higher risk status or pre-existing condition.

Steps employers should take to keep all employees safe

- Set up office space to allow for one person per 4 square meters;
- Attend to regular cleaning of environmental and work surfaces;
- Provide and encourage use of hand hygiene;
- Open windows and enhance airflow where possible;
- Strictly maintain physical distancing of at least 1.5m between others;
- Minimise large indoor meetings, gathering in lunchrooms & congregating in shared spaces;
- Consider staggered shift start times and meal breaks to reduce staff interactions;
- Regularly remind all staff not to attend work if they have any symptoms of COVID-19 and have a clear plan of how you will handle any staff member who becomes unwell whilst at work;
- Utilise available measures to mitigate identified risks, such as PPE;
- Ensure that all staff have access to and follow current usage guidelines for PPE and provide training and access to these resources;
- Avoid shared work stations and hot desk arrangements. Where this is not possible, ensure thorough cleaning procedures between users;
- Encourage all employees to avoid sharing pens, keyboards, telephones and other equipment, or ensure thorough cleaning procedures between users; and
- Encourage annual influenza immunisation for all staff.

Defining a high risk employees

Higher risk employees fall into the following categories:

- Aboriginal and Torres Strait Islander people 50 years and older with one or more chronic medical conditions;
- People 65 years and older with chronic medical conditions;
- People 70 years and older;
- People with compromised immune systems; and
- Additionally, pregnant women may be considered potentially vulnerable, particularly from 28 weeks gestation (this is discussed further below).

Employers must undertake an occupational risk assessment for high risk employees

An occupational risk assessment must be undertaken to inform any modifications to the workflows or the working environment of the higher risk employee. This is followed by implementing risk mitigation measures; such risk assessments take into account the characteristics of the higher risk worker, the work they are performing and the workplace environment.

Employers must be flexible with high risk employees

Employers are encouraged to adopt a flexible approach to granting leave or agreeing to alternative or flexible working arrangements. Employees are encouraged to work with their employer to find suitable and reasonable modifications or arrangements to continue in their role. Early, open communication and negotiation between employer and employee will help facilitate this.

Employers must maintain confidentiality at all times

At each step, be mindful of maintaining confidentiality and privacy of the employee's health status and other private information. Significant changes to an employee's practice will be obvious to others, so it may be useful to discuss in advance with the employee how they wish to inform staff and patients of the clinic of their need for workplace modifications.

Options available for high risk employees

- If staff can work from home, they should work from home;
- Consider limiting or ceasing direct patient contact via reallocation to administrative duties or telehealth only;
- Utilise the skills of the higher risk employee in other areas, for example, in an advisory role or other non-patient contact role; and
- Where risk cannot be appropriately mitigated or alternative work arrangements are not feasible, consider alternate arrangements or leave arrangements.

What are an employer's responsibilities to pregnant employees?

Pregnant healthcare workers may be considered a potentially vulnerable group, especially beyond 28 weeks gestation. Conflicting employment/occupational guidance available poses a challenge to employers and employees in addressing this issue. Current available information does not appear to suggest that pregnant women are at higher risk of severe COVID-19 illness than the general population. However it is true to say that generally this population is regarded as higher risk when affected by respiratory infections. This is due to pregnancy-related changes in their body and immune system, so there is some confusion amongst employees and employers.

Pregnant women are encouraged to follow the standard advice to protect themselves against COVID-19, report possible symptoms to their healthcare provider, and follow current guidelines for testing. Discussing their individual risk on a case-by-case basis with their obstetric team may be advisable.

DHHS 'Factsheet for higher risk healthcare workers':

"The following chronic conditions are of concern in Aboriginal and Torres Strait Islander people over 50 years and vulnerable workers over 65 years:

- Chronic renal failure
- Coronary heart disease or congestive cardiac failure
- Chronic lung disease (severe asthma for which frequent medical consultations or the use of multiple medications is required, cystic fibrosis, bronchiectasis, suppurative lung disease, chronic obstructive pulmonary disease, chronic emphysema)
- Poorly controlled diabetes
- Poorly controlled hypertension

People at any age with significant immunosuppression include those who have:

- Haematologic neoplasms: leukemias, lymphomas, myelodysplastic syndromes
- Post-transplant: solid organ (on immunosuppressive therapy), haematopoietic stem cell transplant (within 24 months or on treatment for GVHD)
- Immunocompromised due to primary or acquired immunodeficiency (including HIV infection)
- Current chemotherapy or radiotherapy
- High-dose corticosteroids (≥ 20 mg of prednisone per day, or equivalent) for ≥ 14 days
- All biologics and most disease-modifying anti-rheumatic drugs (DMARDs) as follows:
 - Azathioprine > 3.0 mg/kg/day
 - 6-Mercaptopurine > 1.5 mg/kg/day
 - Methotrexate > 0.4 mg/kg/week
 - Prednisone > 20 mg/day. If < 14 days treatment, can resume work when treatment ceased
 - Tacrolimus (any dose)
 - Cyclosporine (any dose)
 - Cyclophosphamide (any dose)
 - Mycophenolate (any dose)
 - Combination (multiple) DMARDs irrespective of dose"

Advice herein is adapted for the Victorian GP setting from available national and state guidelines.

References can be accessed via the AMAV COVID-19 information portal <https://amavic.com.au/stethoscope/information-for-gps-and-health-services-on-coronavirus--covid-19->

- Guidance Note on Employment Matters 5 June 2020, DHHS, Victoria
- COVID-19 Factsheet At risk Healthcare workers DHHD, Victoria
- Preventing infection in the workplace website (accessed 25/6/20) <https://www.dhhs.vic.gov.au/preventing-infection-workplace-covid-19>
- Vulnerable workers, SafeWork Australia (accessed 25/6/20) <https://www.safeworkaustralia.gov.au/covid-19-information-workplaces/industry-information/general-industry-information/vulnerable>
- Prevention and management of exposure to coronavirus (COVID-19) in the healthcare and social assistance industry, WorkSafe Victoria (accessed 26/6/20) <https://www.worksafe.vic.gov.au/prevention-and-management-exposure-coronavirus-covid-19-healthcare-and-social-assistance-industry>