Raine&Horne. Commercial

18 January 2022

To our valued clients,

Raine & Horne Commercial WA - COVID-19 Response (Jan 2022)

With the impending opening of Western Australian borders, and recent local community transmission events of the Omicron variant, Raine & Horne Commercial are taking steps designed to minimise disruption to our clients as much as is possible.

In the interests of protecting the health of all our staff members and their families, in turn ensuring we can provide uninterrupted service to our clients, we have implemented the following measures designed to minimise the risk of an office wide outbreak of one of the Covid variants.

These measures are based on best practices as per the most recent advice from Health WA (copy attached).

As of today's date, we have split our entire staff into two separate groups who will be required to maintain strict and complete social distancing from one another until further notice.

These two teams will be working in the office on alternate weeks, and from home the remainder of the time to ensure continuity of business.

We will also increase the regular cleaning and sanitisation of our offices, have ordered bulk stocks of N95 mask, PPE, and rapid antigen tests for staff. All staff have been directed to remain home, should they experience <u>any</u> symptoms that may be associated with COVID-19.

We anticipate some delays and staff shortages, particularly from our suppliers, during peak periods of the outbreak, primarily affecting reactive maintenance.

We are therefore are taking steps to attempt to reduce the impact of this by proactively programming as much scheduled maintenance ahead of the peak period as possible, and leveraging our close contacts with multi-discipline building maintenance providers to ensure they have staffing levels required to react as and when required.

This will be a challenging time as we navigate 'the new normal' and appreciate your patience and understanding.

Should you have any queries or concerns, please feel free to reach out to myself or your Property Manager.

Best Regards,

Simon Woodacre

Department Manager - Property Management

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COVID-19 preparation and response guidelines for office settings

This document provides information on the broad principles as they apply to office settings to prepare for and respond to cases of coronavirus (COVID-19). This guideline is divided into two sections:

- 1. Planning and preparedness
- 2. Principles of outbreak management and response in an office setting

1. Planning and preparedness

General preparedness

Businesses are responsible for their own preparedness for an outbreak with guidance and support from the Department of Health, Western Australia (DoH WA). Services should develop plans for prevention, and prepare for responding to COVID-19 exposure in the office setting by:

- ensuring management plans for workforce and supplies are in place
- promoting public health and infection prevention and control (IPC) principles
- developing and maintaining an outbreak management plan.

The preparedness measures listed in Table 1 below may reduce the risk of large numbers of staff being required to quarantine, reduce the transmission of COVID-19 between staff, and may reduce the impact on a business. However, WA Health is unable to guarantee that employing these measures will prevent an office from being closed for a short period of time to manage a COVID-19 outbreak, nor that these measures will prevent the need for all staff to guarantine.

IPC measures should be maximised as these protect all individuals but will not completely mitigate the COVID-19 risk to the workforce. Implementing split shifts or cohorting of staff where possible (e.g. working across different sites or having separate workstreams), along with COVID-19 vaccination, are the best mitigation strategies to reduce the impact of COVID-19 in the office setting (refer to Workforce section in Table 1) and should be employed with IPC measures.

COVID-19 vaccination should be encouraged for all staff and contractors in an office setting, as this protects the individuals from severe disease and plays a role in limiting disease transmission.

Table 1. COVID-19 preparedness measures for the office setting

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Infection prevention and control measures	 Any staff member who is unwell, must not attend work. If they become unwell at work, they must be sent home with a surgical mask. Staff must inform their supervisor and present for a COVID-19 test at a COVID-19 testing clinic. Following the test staff must follow health advice regarding isolation. Staff should practise respiratory etiquette i.e. cough/sneeze into elbow or use a tissue. Discard the used tissue immediately. Perform hand hygiene. Ensure hand hygiene facilities including soap, water and paper towels/hand dryer and alcohol-based hand rub (ABHR) that contains between 60-80% alcohol is readily available and easily accessible for staff. Regular hand hygiene behaviour is to be supported and promoted. Posters on how to perform hand hygiene are available from the Healthy WA website. Ensure frequent cleaning and disinfection of the environment with attention to high touch surfaces in line with IPC guidelines. Refer to the Infection prevention and control advice for environmental cleaning in non-healthcare settings (home and workplace) factsheet for more information regarding this. Ensure use of personal protective equipment (PPE) aligns with Health Department recommendations. During community transmission, ensure there are plans in place regarding waste management, linen and uniform management, and management of shared equipment. 	
Physical distancing measures	 The following measures are recommended, where possible: Implement work from home policies. Limit face to face meetings, the number of people at face to face meetings, and use videoconference or teleconference options where possible. Limit the number of non-essential external agencies/visitors on site. Limit employee cross exposure by ensuring all employees are appropriately physically distanced at their desks (i.e.1.5m apart) or implement remote and flexible working arrangements. Limit desk sharing and hot seats and implement a strategy to manage shared desks such as a logbook and cleaning regime. 	
Workforce	 Cohorting and splitting shifts These measures should be implemented where working from home arrangements are not possible, in order to separate the workforce and reduce cross-exposure between workers. The aim of split shifts is to separate the workforce into two or more smaller work streams (e.g. separate shifts with no overlap/cross over of staff) to reduce the number of staff identified as close contacts and being required to quarantine. This measure will only be effective where IPC measures including cleaning have been 	

adhered to and where all contact between the separate work streams has been eliminated. To effectively implement split shifts. the following principles should be employed: Split the staff into two or more shifts or work streams and ensure no contact between the shift or work streams. o Ensure that all staff (including managers) only work one of the shift streams, unless there is a reasonable break (at least 7 days) between working across two or more shift streams. Allow adequate time between the shifts / work streams to ensure staff do not overlap elsewhere at the facility e.g. in the change rooms, in the carpark. Consider work stream selection based on skillsets and social groups to minimise risk of cross-exposure between staff in a social setting. Consider parking and travel arrangements so staff are not mixing prior to arrival to work. Consider allocating separate bathrooms and break rooms to further distance staff interaction. General principles Identify critical positions and undertake contingency planning for replacement of staff; multiple personnel may be unable to work for an extended period. Create a contact list of all staff members including casual staff members and contractors. Consider additional staff requirements for other roles that may be needed in the event of a COVID-19 case, such as additional cleaning staff where an office environment is still being used. Ensure staffing considerations include recognising that staff working across multiple areas of the office may have contact with a large proportion of the workforce. Consider staff working in multiple locations; additional precautions (such as strict physical distancing) for these employees may be required. Vaccination Encourage COVID-19 vaccination for staff. Encourage influenza vaccination for staff. Maintain a record of who has been vaccinated. Record keeping Maintain an up to date register of all staff, including contact details. Maintain ongoing and up to date visitor logs which include the location, date, name, telephone number and arrival time of each visitor. Contact information can be provided either directly to the facility, or by using the SafeWA app. Encourage all staff members to use the SafeWA app to log locations visited. Maintain a log of staff who are sharing equipment.

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Other business considerations	Review business continuity plans to consider the impacts of an outbreak and potential closure of the workplace.
Management of sick employees	 Staff who develop any COVID-19 symptoms (e.g. cough, shortness of breath, sore throat, runny nose, fever, chills, night sweats, loss of taste or loss of smell) should be advised not to attend the office. They should isolate at home, attend a COVID clinic for testing and seek medical attention, particularly if they are feeling very unwell. If a staff member is unable to leave work immediately after declaring symptoms, they should be supported to isolate at work, preferably in a separate room. They should wear a mask and remain 1.5m from others. Businesses should consider maintaining a suitable supply of PPE such as masks for this purpose. They should travel by private transport where possible, or by taxi, rideshare or public transport if necessary. A mask should be worn. Staff should remain in isolation until they receive a negative test result and should not return to work until their symptoms have resolved. For additional information on COVID-19 testing please refer to the Healthy WA website.

2. Principles of outbreak management and response in an office setting

This section provides information on the broad principles of outbreak management as they apply to office settings.

The following steps will be undertaken in response to an outbreak (or a single case) in an office setting. Note that these steps may occur in a different order to which they are written and commonly several steps will occur concurrently.

Notification of a COVID-19 case to the workplace

It is a statutory requirement for the testing laboratory to notify the DOH WA urgently if a positive test result is detected.

The Public Health team (within the DOH WA) will immediately contact the affected individual and commence the interview process and contact tracing to identify other people who may be contacts.

If the individual confirmed as positive for COVID-19 is a staff member and was infectious while in the workplace, the Public Health team will contact their employer (after first informing the individual) to discuss implications for the workplace.

If a staff member is unable to isolate at their usual place of residence, they can contact the State Welfare Incident Coordination Centre (SWICC) on 13 COVID (13 268 43). This number is applicable in both the metropolitan and regional areas.

Case management

An employee who is confirmed as a case of COVID-19 infection will need to go into isolation to prevent further spread of the virus to fellow workers, the public or their family. The Public Health team establishes if the case is safe in their home and may put them in touch with support agencies or health professionals to manage their health and social needs.

An employee with COVID-19 can return to work once they are released from isolation, as determined by the Public Health team. The employee will be told by the Public Health team when they are to be <u>released from isolation</u> (documentation is provided by Public Health and clearance testing is not usually recommended or required).

Workplace management during investigation

Following initial notification of a case of COVID-19, the Public Health team will undertake a situational analysis and make a risk assessment of the workplace. This can often be completed by phone with the business manager, although sometimes a site visit is helpful. The Public Health team provide assistance with decisions about when and if they need to send employees home prior to the end of a work day, and/or if they need to temporarily close the workplace for cleaning, investigation or contact tracing purposes.

Contact tracing

All confirmed cases of COVID-19 must be interviewed by a member of the Public Health team to identify all close and casual contacts. This is generally performed via phone call. Employers should work with the Public Health team to identify close contacts in the work setting including providing accurate records of attendance at the workplace. The employer will be requested to provide contact details for all identified close and casual contacts. The Public Health team will identify close contacts who need to quarantine and will contact these individuals to provide information and instructions.

Additional case finding

Following the notification of a case of COVID-19 in a workplace, the Public Health team may recommend testing other people in the workplace to determine if they have been infected. The Public Health team will provide advice about this at the time.

Management of close contacts

All close contacts will be required to quarantine following their last contact with the confirmed case and to follow the Public Health team's directions, including getting tested. Following this period of quarantine, the employee may return to work.

Casual contacts will be advised by the Public Health team regarding testing requirements and whether a short initial period of quarantine is required. Casual contacts may later be reclassified as close contacts if there is evidence of transmission within an office; these decisions will be made by the Public Health team.

Implementation of Infection Prevention and Control (IPC) measures

The Public Health team will provide advice regarding IPC measures and any additional measures that are required at the workplace. The office/site may need to undergo cleaning prior to return of the workforce. Refer to the Infection prevention and control advice for environmental

<u>cleaning of a site following COVID-19 exposure</u>. Additional signage and/or supportive measures may be recommended to reduce further cases in the workplace.

Provision of information

The Public Health team will provide advice on who needs to be informed about the case or an outbreak. Employees that work in the office setting should be informed and there are factsheets and information available for them, including in languages other than English. Employers should await instruction from Public Health to inform any general communications to employees. Employers should avoid providing advice to employees regarding quarantine, unless instructed to do so by Public Health. Additional reporting and/or media enquiries can be discussed with the Department of Health Communications team.

Closure or restriction of service

An office may need to close temporarily during contact tracing or to enable cleaning to take place.

For some offices which are considered higher risk for large or ongoing outbreaks, a very precautionary approach may be taken resulting in a short-term closure or reduction in operations. Businesses may need to close if a large proportion of their workforce is required to quarantine following exposure to a case. Measures such as working from home arrangements, split shifts and/or isolating 'teams' of employees will assist in reducing this outcome.

Further information

Additional information about the principles of outbreak response to COVID-19 can be found in the COVID <u>CDNA National Guidelines for Public Health Units</u> or at <u>Safe Work Australia</u>.

Additional information for employers can be found on the <u>Australian Government health</u> website.

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