Workforce Services

Pandemic Influenza sub plan

2015
Acknowledgements

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Introduction

The aim of this document is to issue a standardised approach to the key workforce issues relating to ensuring health, safety and welfare of workers (including employees, agency staff and other contractors, students, volunteers and tenants) within SA Health whilst maintaining essential business services in the event of the outbreak of a pandemic influenza.

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Background

An influenza pandemic occurs when a novel influenza A virus appears against which the human population has little or no immunity, resulting in epidemics on a worldwide scale. Infection rates are expected to be higher than during seasonal epidemics of influenza resulting in significant numbers of illness and deaths. With the increase in global transport, as well as urbanization and overcrowded conditions, epidemics due the novel influenza A virus are likely to quickly take hold around the world.

Influenza A viruses cause most seasonal epidemics and all pandemics. Outbreaks of influenza in animals, especially when happening simultaneously with annual outbreaks of seasonal influenza in humans, increase the chances of a pandemic, through the merging of animal and human influenza viruses. During the last few years, the world has faced several threats with pandemic potential, making the occurrence of the next pandemic only a matter of time.¹

Influenza pandemics have occurred at irregular intervals throughout history. In the twentieth century, the world experienced three (3) pandemics, the severe Spanish flu pandemic of 1918-1919, and the milder Asian flu pandemic of 1957-58 and the Hong Kong flu pandemic of 1968-70. In addition to their potential to cause serious harm to human health, pandemics threaten wider social and economic disruption.

South Australia has not had to deal with a significant large-scale threat to the health and well-being of its citizens for several decades, therefore an influenza pandemic is likely to create a significant level of concern and impact within the community, including workers in the SA public sector.

Social and economic disruption may be greatest when rates of absenteeism impair the provision of essential services. It is estimated that as many as 50% of workers could be absent at the peak of a pandemic, estimated to be at around the fifth to sixth week into the pandemic. Given the circumstances, many workers will experience either personal illness or a level of concern for their health and safety, or that of members of their family. This may be evidenced by a reluctance to mix with groups of other people, e.g. attending their place of work, using public transport, attending schools, etc.

Focus

The focus of this document is to provide an overarching approach that will assist SA Health managers in developing their own ‘business-specific’ contingency plans and identification of workforce issues in relation to the:

> health, safety and welfare of workers.

> maintenance of business continuity.

**Emphasis**

Managers should ensure that contingency plans are developed well in advance of a potential influenza pandemic so as key foci are achieved.

In developing workforce contingency plans it is recommended that managers place an emphasis on:

> Health, safety and welfare of all SA Health workers, clients and visitors.
> Maintaining the ‘normal approach’ to business for as long as circumstances permit.
> Planning a ‘phased’ approach to implementing alternative operating arrangements in the event of an increasing number of employees being absent
> Ensuring that existing business continuity plans address the additional issues that may conceivably arise in the event of a pandemic influenza outbreak and that alternative plans are adopted.

Managers can further support these outcomes by:

> Implementing a positive two-way approach to communicating and consulting with workers, based on honesty and openness, which is timely, on-going and culturally and linguistically appropriate.
> Providing briefing sessions for relevant workers to provide them with the relevant information regarding the pandemic, empowering them to make rational and informed decisions, thereby minimizing the impact of rumours and ‘fear of the unknown’
> Providing training sessions to those workers who will be involved in the provision of critical services, possibly under changed circumstances.
> Implementing measures that provide additional support and encouragement to workers who may be making their best effort to continue to operate under more demanding circumstances.
> Facilitating an environment in which employees will volunteer for alternative duties rather than possibly having to be directed to do so.

**Degree of lead time**

It is considered unlikely that the next pandemic will emerge in Australia as it is assumed that it will emerge overseas. The SA Government is likely to have several weeks lead time prior to the impact of a pandemic being experienced in South Australia. It is during this period that SA Health will need to ‘fine-tune’ and begin implementation of the workforce contingency plan.

Attachment D summarise the stages of a pandemic as defined in the Australian Health Management Plan for Pandemic Influenza (AHMPPPI) 2014. This provides a useful indicator on which managers can base implementation of their contingency plans.

**Duration of Impact**

South Australia has not had to deal with a significant large-scale threat to the health and well-being of its citizens for several decades, therefore an influenza pandemic is likely to create a significant level of concern and impact within the community, including employees of the SA public sector.

Social and economic disruption may be greatest when rates of absenteeism impair the provision of essential services. It is estimated that as many as 50% of employees, agency staff and contractors could be absent at the peak of a pandemic, estimated to be at around the fifth to sixth week into the pandemic. Given the circumstances, many workers will experience either personal illness or a level of
concern for their health and safety, or that of members of their family. This may be evidenced by a reluctance to mix with groups of other people, e.g. attending their place of work, using public transport, attending schools, etc.

**State of emergency declared**

Under all but the most extreme circumstances it is envisaged that the operation of the SA public sector will continue under normal management arrangements or at reduced levels in some cases. If, however, a state of emergency is declared it is envisaged that the SA public sector will continue to function in accordance with the normal legislative framework, although some staff may undertake alternative duties, and a range of functions may be allocated a lesser priority. In particular, it is emphasised that the provisions of the relevant legislation and supporting mechanisms would continue to apply.

**Duty of Care**

Under the provisions of the Work Health and Safety Act (SA) 2012, SA Health is responsible for ensuring a duty of care for all its employees, agency staff, contractors, students, volunteers and tenants whilst they are within the workplace. Rather than this duty diminishing in the event of changed circumstances, the level of responsibility actually increases. For example, some employees may be asked to undertake different duties, in different locations, and perhaps under more demanding conditions. Systems need to be in place to ensure that, for example, a manager who is transferring an employee to another workplace ensures that the receiving area manager has adequately addressed their duty of care to the employee.

The legislative responsibilities of managers and workers (at all levels) will continue to apply under the provisions of the Work Health and Safety Act (SA) 2012 and Work Health and Safety Regulations (SA) 2012, Codes of Practice, and supporting policies and practices.

The circumstances under which business units normally operate may change in the event of a pandemic, and managers and workers should therefore give serious consideration to what is reasonably practicable in ensuring health and safety taking into account and weighing up all relevant matters including:

- circumstances (i.e. the phase of the pandemic) prevailing at the time.
- nature of the business unit’s operations.
- individual(s) and the level of training, skill, knowledge and experience that they bring, and its relevance to the situation.
- degree of risk of exposure associated with the situation.

**Fundamental Principles**

**There are two fundamental principles underpinning this document:**

1. To prevent or minimise the spread of the pandemic influenza virus.
2. To engage in a “phased approach” to the application of a business continuity plan.

Based on these principles and the following topics, business units can develop workforce contingency plans that are specific to the operations of their business.
Infection Control

The SA Health Infection Control Service will release relevant information as required. It must be ensured that all workers and visitors are reminded that simple hygiene measures (hand hygiene and cough and sneeze etiquette) help protect against any infection as well as all types of influenza. Keeping at least one metre away from people who have obvious flu symptoms is also important to observe. The “Wash, wipe, cover - don’t infect another” resources provide detailed information on hand and respiratory hygiene to slow the transmission of colds, flu and gastro. Refer to www.health.sa.gov.au/INFECTIONCONTROL/default.aspx?tabid=175

The information contained in the Wash, Wipe, Cover resource package should be actively distributed and promoted throughout the SA Health workforce.


Social Distancing

A number of measures at the community level (often referred to as ‘social distancing measures’) may be implemented by the Government to minimise the spread of the pandemic. These may include:

- closure of schools and childcare centres
- workplace measures e.g. cancellation of large meetings, roster changes
- cancellation of mass gatherings
- changing public transport arrangements to limit crowding
- movement restrictions.

If implemented, these measures will have a significant impact on the workforce and will need to be considered when planning for business continuity. For example, an employee may need to stay home and care for a child who is unable to attend school due to closure.

Screening

In order to prevent the spread of pandemic influenza in the workplace, it may be necessary for SA Health to implement a screening program for signs and symptoms of influenza. This could be a self-assessment protocol to be undertaken prior to travel to work or alternatively point of entry screening of all workers, clients and visitors to its places of work. Indeed, this measure may be imposed by a SA Government direction as a key element of its strategy to contain the pandemic.

Anyone with symptoms will be asked to put on a surgical mask (supplied by the employer) and return home. Information will be given to the person on where/how to seek medical advice.

Further information will be provided by the appropriate authorities in regard to the most appropriate means of implementing this process.

Safe Systems of Work

In the event of a Pandemic, a risk assessment will be required to determine if the current safe work systems of work, including the use of personal protective equipment, are effective or if additional systems are required to ensure duties can be performed safely. Employees, in accordance with the Work Health and Safety Act (SA) 2012 must use personal protective equipment (PPE) provided for health and safety purposes and obey reasonable instructions that managers may give in relation to health and safety in the workplace. PPE is generally only required to be used by health care and emergency services workers in some situations. Refer to www.flu.sa.gov.au for fact sheets.
Management will be required to assess the risks and manage the situation on a case by case basis, should a worker choose not to obey a reasonable instruction relating to the health and safety of themselves and that of others within the workplace.

Vaccination

Seasonal vaccine
Seasonal vaccines, updated yearly, protect against seasonal (winter) influenza viruses. They do not provide protection against the pandemic influenza virus.

However, workers should be encouraged to have the seasonal influenza vaccine offered by SA Health to avoid the risk of getting seasonal influenza and pandemic influenza at the same time. There is a higher risk of complications and death if an individual were to have both influenzas concurrently.

Pandemic vaccine
There is no generic vaccine against a pandemic virus. Production of a customised pandemic vaccine can only commence once a pandemic virus has emerged and it is estimated that it may take several months to become available and up to twelve months from the start of production before there is enough vaccine for the Australian population to receive a full course and develop immunity.

Prioritising of pandemic vaccination distribution
Supply of the pandemic vaccine by the Commonwealth may be limited when it becomes available. Public vaccination priorities may be established on the basis of the pattern of disease, and may need to be reviewed in light of epidemiology of a particular virus strain (e.g. which sectors of the population are affected with the highest mortality/morbidity rate).

Priority groups will be determined by the Commonwealth and confirmed at the time the vaccine is available. It is anticipated that these groups will include health care workers and other essential services workers such as Police and Fire personnel.

In the event that a pandemic vaccine is available for use, it must be noted that workers cannot be required to be vaccinated. Some workers have precluding health conditions or view vaccination as invasive and/or against their personal beliefs and values. Managers will need to assess the risks arising should a worker choose not to be vaccinated and consider options to control these risks so as to ensure duty of care to both that worker and other workers, clients and visitors. These controls may include using alternative safe systems of work and/or assigning the worker alternative duties.

Staff Training
In the event of a pandemic ‘normal business operations’ may fail to cope with a high percentage of employees on leave. Having identified the essential services within each unit, managers are strongly encouraged to develop and implement an education and training program to ensure a greater number of employees can effectively undertake the key duties. The additional process, in which one or more employee(s) ‘shadows’ another, will also assist in ensuring that SA Health has trained and competent employees able to continue providing essential services.

Employee and Volunteer Contact Details and Arrangements
Although basic employee contact details, including ‘next-of-kin’ details are obtained from employees and volunteers at the time of their initial engagement, it is recognised that in many cases these records are no longer current. In order to implement any workforce contingency plan, or indeed existing business continuity plans, it will be essential for managers to have a record of employee and volunteer contact details that can be easily accessed by authorised employees (e.g. the Human
Resources unit and/or branch/unit managers). These records should be reviewed and updated as soon as knowledge of a pandemic has been noted. Responsibility for maintaining current contact details for other workers including agency staff and other contractors rests with their employer and for students with their education provider who would communicate any relevant contingency plan.

Consideration should be given to the possibility that one or more key employees who are authorised to access such a record, may themselves be absent due to illness, therefore ‘back-up’ arrangements will be necessary. Similarly, a computer-based record may eventually become inaccessible due to the system failing, so an alternative record (held in secure storage) may also be necessary.

A record of employee contact details may include:

- home phone and/or fax number
- mobile phone number
- home e-mail address (grouping these addresses in groups that are meaningful to the unit will facilitate rapid and easy contact with large numbers of employees simultaneously, at least as long as corporate IT systems are maintained)
- residential address
- next of kin contact details

Managers should ensure:

- these records are available and are backed up regularly
- the storage of this information is secure
- all employees are confident that the information is stored securely, and will only be accessed by authorised personnel (a ‘cascading’ arrangement of ‘authorised personnel’ may be necessary to provide for these people also becoming ill)

**Contractors, Consultants, Labour Hire firms**

Managers are reminded that they must ensure that the same duty of care is provided to people engaged by SA Health as contractors, consultants and through a labour hire firm. It would be prudent to consider maintaining a similar health record for these people, as described in Section 9.7 for employees and volunteers.

**Workers Health Records**

Given the potential risks associated with the spread of a pandemic, it will be essential that regions and directorates maintain an accurate record (where possible) of:

- Workers (employees, agency staff, contractors, tenants and volunteers) who contract the strain of pandemic influenza (according to medical opinion),
- Workers (employees, agency staff, contractors, tenants, students and volunteers) who have contact with people who are known to have pandemic influenza (according to medical opinion).
- Workers (employees, agency staff, contractors, tenants and volunteers) who have been vaccinated for seasonal influenza and when available, received the pandemic influenza vaccine.

Service delivery managers may also consider whether it is appropriate to maintain a similar record in relation to their regular clients.

These records should be maintained in accordance with [Cabinet Circular PC012](#) that sets out the ‘Information Privacy Principles for the whole of Government’.
Establishing critical staff numbers

In consultation with employees, managers may determine which employees:

- are required to ensure the maintenance of the business unit’s critical services (or undertake critical services in other areas)
- provide non-essential but desirable services
- can provide services to critical areas within SA Health (or the wider public service)
- Where is it determined that the business unit does not have enough employees to maintain critical services, alternative arrangements must be made, e.g. bring in non-critical employees, agency staff or contractors from another area

Alternative Working Arrangements

Managers may encourage or direct certain employees to utilise alternative working arrangements including:

- working from home,
- flexible working hours,

in order to minimise contact with other people (both in the work place and on public transport).

Planning may need to consider the fact that IT systems may fail due to lack of trained IT people to maintain them. In such cases, additional arrangements may need to be used to enable employees to access or return completed work.

Each situation should be dealt with on a case by case basis considering safe systems of work and an assessment of what work is required. This is particularly important where an employee may be required to be on site for long hours e.g., working long shifts for several consecutive days, and/or remaining at work between shifts (including overnight).

Direction to not attend the workplace

It may be necessary for the Chief Executive to direct employees (who are not ill) to not attend work - this may also be the outcome of a Government direction. In this event it must be emphasised that employees are NOT regarded as being on leave, and will be entitled to all normal salary and wages for the period during which they are stood down.

Leave

Employees may need to access their leave entitlements for a variety of reasons including (but not limited to):

- their own illness
- care of ill family members
- care of family members due to reduced public services, e.g. child-care and/or school closures.

Paid sick leave

Employees who are sick must access their accrued entitlement to paid sick leave. Should an employee have exhausted their accrued sick leave entitlement they may apply for other types of paid leave (e.g. annual leave, long service leave, special leave with pay).
Personal leave to care for family members (Carer’s Leave)
Carer’s leave may be accessed in accordance with the employee’s existing accrued entitlement. Provisions are specified in Attachment D.

Special leave with pay
Special leave with pay may be accessed in accordance with accrued entitlement. Special leave with pay may be used in the following instances (but not limited to):

- a direction from Health authorities to stay home as a precautionary quarantine
- to care for an ill family member
- to care for a family member that is not ill but is home due to closures of public services (e.g., schools, child care)

Special leave without pay
Special leave without pay may be granted in the event that an employee has exhausted all accrued entitlements to paid leave, and is still unable to return to work due to continuing illness of either themselves or a family member.

Payment of Salaries and Wages
SA Health is committed to ensuring that employees are not disadvantaged during a pandemic. This commitment is critical to the future operations of business units in terms of morale, efficiency and the speed with which business operations return to normal.

It will be essential to consider the scenario in which payroll and system support personnel (HR Administration) progressively withdraw from the workforce due to illness, and what alternative arrangements may be possible to ensure that employees continue to receive their pay.

Shared Services SA is responsible for delivery of a whole of government payroll service. For further information regarding payroll services, please contact the Manager, Corporate Compliance and Risk Management Unit, Shared Services, telephone 8462 1016.

Record Keeping – Salaries and Wages
It will be essential for managers to maintain accurate records of any amendments to employees’ salaries and wages to facilitate any necessary retrospective adjustments for employees as soon as possible after resumption of normal operations.

Directing Employees
The continuation of SA Health core business activities will be of critical importance to the care and safety of the South Australian community. This continuation will rely greatly on employees undertaking their own core duties and possibly undertaking alternative core duties as directed. It is recommended that managers identify the business services that are critical, and ensure that contingency plans give particular focus to various ways in which employees can contribute (if necessary) to maintaining those services.

Transferring Employees within SA Health
The Chief Executive, Department of Health, or delegate, may direct SA Health employees to work for the benefit of another person or organisation.

The Commissioner for Public Employment and the Governor also have powers under the PSM Act to
assign, transfer or deploy staff to meet operational needs.

A direction to an employee to perform the functions of another role or additional or different functions to those of their substantive role, including possibly at another location, at different times, with varied reporting arrangements etc. can be a lawful and reasonable direction. This may be necessary to ensure the continuity of functions critical to the community. Under the circumstances of a pandemic, the specific duties may be those of the position to which they are appointed (but may be reluctant to perform), or other duties that, in the opinion of the delegate, the person is capable of undertaking. Requiring an employee to undertake a different role or to perform duties at a different location may also require varying an employee’s roster at short notice. In this situation consideration must be given to consulting with the employee, and/or appropriate union and ensuring any relevant Work Health and Safety requirements are addressed e.g. training competencies.

Bearing in mind the need to maintain a duty of care, it is emphasised that whenever possible, managers encourage an environment of cooperation and corresponding support within the business unit.

**Directing employees to work in other government agencies**

Whilst it is likely that SA Health employees would be directed to assist in critical areas within SA Health, should the need arise that urgent assistance is required in another agency, employees can be directed to work in another agency.

**Record Keeping – Transfer of employees**

In the event of an employee being assigned/directed to work at another location, it is important to ensure that appropriate records are maintained, and that the employee/s concerned are consulted and provided with their appropriate salary or wages, entitlements to leave, etc. Retrospective payment of any outstanding salaries and wages, and adjustment to leave entitlements should be regarded as a high priority task upon resumption of normal operations.

**Employee Assistance Programs**

In the event of a pandemic, Employee Assistance Programs will be essential as employees and their family members may experience increased psychological pressure, due to general concerns relating to the pandemic, illness that impacts on the family (e.g., employee, family member, child’s carer or teacher), or death of a family member or friend. In the latter case, the availability of grief counselling may assist the employee or family member in dealing with their loss and supporting their ability to function effectively at, or on return to work. It should be remembered that the specialist service providers may also be operating under the limitation of diminishing resources, and may therefore be unable to provide the service as promptly as normal.

**Union Consultation**

The circumstances associated with the emergence of a pandemic, and the planning for and management of the public sector workforce in the event of a pandemic will conceivably result in many short term changes within the working environment. In ensuring genuine consultation with employees, it will be necessary for SA Health to ensure appropriate and timely consultation with relevant unions. SA Health will work to alleviate concerns by involving union officials and worksite delegates in meaningful consultation, and by being able to demonstrate that, within SA Health:

> contingency plans are in place to manage a range of scenarios that may impact on the workforce; and
> the health, safety and welfare of the employees is the key issue, and that it is being managed in
genuine consultation with the employees concerned, and in accordance with established risk
management processes.

References/Resources

> Australian Health Management Plan for Pandemic Influenza (AHMPPI) 2014
> Commissioner’s Standard 3.1 Responsive and Safe Employment Conditions
> Commissioner’s Standard 3.4 – ‘Leave’
> Fair Work Act (1994)
> WHS Act (SA) 2012 and Regulations 2012
> Public Sector Management Act and Regulations 1995
> SA Health Care Act 2008
> SA Health Flu website at www.flu.sa.gov.au
> SA Health (Health Care Act) Human Resources Manual
> SA Health Pandemic Influenza website at www.pandemicinfluenza.sa.gov.au/
> World Health Organisation www.who.int
> Relevant awards and enterprise agreements