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CS ENERGY PROCEDURE

PANDEMIC RESPONSE CS-OHS-41

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1 PURPOSE

The purpose of this procedure is to provide a guideline for CS Energy regarding appropriate actions in the event of a pandemic outbreak. It is vital the electricity industry stays online in the event of a pandemic.

CS Energy will respond to a pandemic outbreak in accordance with advice and information provided by the recognised health institutions of the World Health Organisation (WHO), Department of Health (Australian Government) including Australian Health Protection Principal Committee (AHPPC) and Queensland Health (State Government).

The objectives of this procedure are to:

- Provide clear guidelines as to how to efficiently manage effective organisational outcomes in the occurrence of a pandemic outbreak.
- Protect persons, environment, facilities, production and the communities in which CS Energy operates from the effects associated with a pandemic outbreak and ensure business continuity.
- With reference to procedures adopted within the CS Energy Crisis Management Plan CS-IM-2 implement a dynamic response plan to a pandemic outbreak.
- Manage the linkages between operating sites and the Corporate Office to ensure coordination and effective implementation of the Crisis Management Plan and business continuity response.
- Provide a procedure that minimises potential health impacts on CS Energy employees.

The actions required to be undertaken in the event of a pandemic outbreak are dependent on the circumstance at hand. Each pandemic outbreak, due to its unique attributes, will be reviewed individually and an active 'Pandemic Alert Level' will be determined for each outbreak. Each classified 'Pandemic Alert Level' will trigger certain actions on CS Energy sites to ensure an appropriate response is initiated and carried out. Actions provided in the menu below, will govern the appropriate response.

1.1 Pandemic Alert Level

Level 1 → **LOW** – no human infection, possible animal infection

Level 2 → **MODERATE** – known animal infection, overseas human infection

Level 3 → **SIGNIFICANT** – domestic human infection, overseas human to human circulation

Level 4 → **HIGH** – domestic and sustained human to human circulation, overseas circulation in large cluster(s)

Level 5 → **EXTREME** – domestic and sustained circulation in large cluster(s) and a declared pandemic

1.2 Alert Level Definitions

Level 1 - LOW

- No new virus subtypes have been detected in humans. Virus subtype that have caused human infection may be present and circulating in the animal domain. Presence of virus subtype is known however, risk for human infection or disease is low.

Level 2 - MEDIUM

- No new virus subtypes have been detected in humans. However, a known circulating virus presently causing animal infection poses a substantial risk for human disease.
- Overseas human infection with a new or known virus subtype has been identified but there is no/low potential for human to human circulation (i.e. infection). This virus subtype is not communicable.

Level 3 - SIGNIFICANT

- Domestic (Australia) human infection with a new or known virus subtype but no established human to human circulation (i.e. infection) domestically (i.e. outside of tracing from overseas sources), or
- There is established overseas human to human circulation and infection in small cluster(s) where spread is highly localised which is suggesting that the virus subtype is not well adapted to humans.

Level 4 - HIGH

- Domestic and sustained human to human circulation and infection in small cluster(s) where spread is highly localised, and
- There is established overseas human infection in large cluster(s).

Level 5 - EXTREME

- Domestic and sustained human infection in large cluster(s) where human to human transmission is localised. (*Substantial pandemic risk – sites should be placed on high alert*), and
- A declared pandemic by health authorities has been issued where virus displays full adaptability to humans where there is an increased and sustained transmission of the virus subtype in the general domestic population. (*Declared pandemic – site action plans commence*)
- Pandemic Alert Levels will be determined upon information provided by updates, alerts and publications from the WHO, Department of Health and Queensland Health.

The Pandemic Response Team may move CS Energy between alert levels based on its own risk assessment.

2 ACTIONS

Actions will be allocated between functional areas to assist in identification of required response and personnel responsibilities. The functional areas will be consistent with the organisational structure where possible.

The guiding principle when coordinating a response to a pandemic outbreak is to uphold the health and safety of the staff and public via limiting exposure and effectively utilizing available medical interventions. The difficulty associated with planned pandemic response is the unpredictability of each circumstance. Each type of contagious disease or virus will affect societal functioning and the population in different degrees.

A pandemic outbreak will be considered as a crisis event within CS Energy. The CS Energy Crisis Management Teams will be activated and decide whether to transition to establish a Pandemic Response Team which will coordinate the response with the sites and ensure business continuity.

The Pandemic Response Team will operate as the Crisis Management Team in accordance with the defined process in CS Energy Crisis Management Plan CS-IM-2.

For the purposes of supporting and coordinating a response to a pandemic:

- a responsible person will be appointed under the title of the Pandemic Response Coordinator (Corporate); and
- each site will also appoint a Pandemic Officer (Site) who will directly liaise with the Pandemic Response Coordinator (Corporate).

The Pandemic Response Coordinator (Corporate) will be provided with direction from the Pandemic Response Team.

The single most important factor in pandemic response management is to ensure that critical and credible information is sufficiently to every employee in a comprehensible manner.

The CS Energy pandemic organisational structure, stakeholders and communication's flow that will be adopted in the event of a pandemic outbreak is highlighted below. The Pandemic Response Team may determine to adjust this process flow depending on circumstances:

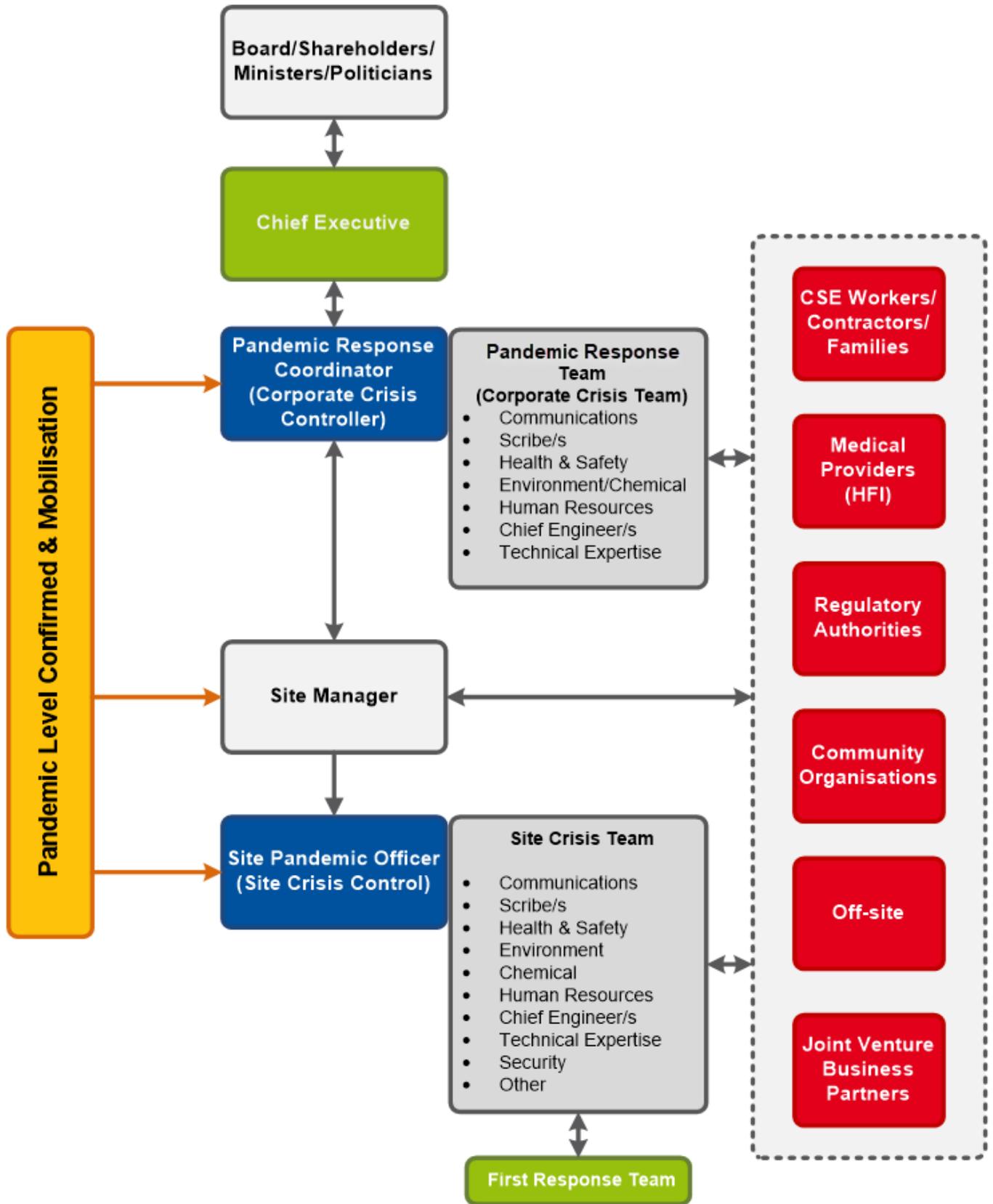


Figure 1 - Pandemic Crisis Response System

2.1 Roles, Teams and Responsibilities

Role / Team	Constituents	Responsibility
Pandemic Response Coordinator (Corporate)	Appointed person who is trained and competent	<ul style="list-style-type: none"> ▪ Coordinate initial response, provide technical knowledge, based on advice from Medical professionals (CMO), be aware of pandemic characteristics and current climate ▪ With Corporate H&S monitor circulating virus subtype, check updates, research information. ▪ Communicate with CMT and Pandemic Officer (Sites). ▪ Will initiate responsibilities during pandemic alert levels 2-5
Pandemic Response Team	As determined by the CMT Leader and as per CS Energy's procedure for Crisis Management (CS-IM-02)	<ul style="list-style-type: none"> ▪ Act as a steering committee giving direction and critical decision making to the coordination of the pandemic response ▪ Communicate with Pandemic Response Coordinator (Corporate) ▪ Will initiate responsibilities during pandemic alert level 3-5
Pandemic Officer (Site)	Appointed person who is trained and competent	<ul style="list-style-type: none"> ▪ Communicate with Pandemic Response Coordinator ▪ Update Site management team ▪ Will initiate responsibilities during pandemic alert level 3-5
Crisis Management Team	As per CS Energy's procedure for Crisis Management (CS-IM-02)	<ul style="list-style-type: none"> ▪ Coordinate pandemic response ▪ Communicate with Pandemic Response Coordinator (Corporate) for information. ▪ Communicate with Site Crisis Team giving organisation direction and critical decisions. ▪ Will initiate responsibilities during pandemic alert level 5
Site Crisis Team	As per CS Energy's procedure for Crisis Management (CS-IM-02)	<ul style="list-style-type: none"> ▪ Coordinate pandemic response on each site as per the site requirements ▪ Communicate with their Pandemic Officer (Site) for technical information ▪ Communicate with Pandemic Response Team for updates and direction

3 PANDEMIC ALERT LEVEL 1 – LOW

Response considerations are outlined below:

3.1 Planning and Coordination

Threat level is low and requires limited attention from the Pandemic Response Team. Factors associated with relevant existing virus subtypes have minimal risk of affecting communities within Australia.

3.2 Surveillance

- Track updates released by recognised health organisations.

3.3 Logistics

- Current threat status is low has no relevance to CS Energy operational sites.
- Corporate Health and Safety Team is to keep up to date with relevant innovative health strategies/interventions regarding pandemic response.
- Encourage annual influenza vaccination for employees.

3.4 Finance/Functioning

- Current threat status is low and has no financial or functional impact on CS Energy operational sites.

4 PANDEMIC ALERT LEVEL 2 – MEDIUM

Response considerations are outlined below:

4.1 Planning and Coordination

Threat level is Medium and requires elevated attention from the Pandemic Response Team. Factors associated with relevant existing virus subtypes have an increased risk to communities within Australia.

- Appointment of a responsible person, the Pandemic Response Coordinator (Corporate),
- Develop a communications strategy for staff, suppliers and contractors clearly detailing what messages are to be sent out, by whom, at what stage and in what format.
- Share best practices with other businesses in your communities, chambers of commerce, and associations to improve community response efforts.

4.2 Surveillance

- The Pandemic Response Coordinator (Corporate) or delegate will be required to:
 - Track updates released by recognised health organisations.
 - Monitor and advise possible growth/spread patterns.
 - Advise on possible growth timeframes.

4.3 Logistics

- Consider procurement or re-stock relevant supplies:
 - P2 mask 3M Reusable Full Face Respirator 6000 Series.
 - Standard First Aid supplies: vital medical equipment - defibrillators.
 - Appropriate signage.
 - Thermometers.
 - Clean drinking water.
 - Hygiene measures: gloves, tissues, body wipes, alcohol wipes, anti-bacterial soap and washing stations.
- Communicate updates of the circulating virus. This would include informational broadcasts concerning effects, symptoms and treatments of the virus of concern.
- Monitor research and news updates regarding the research of possible new vaccines or treatment available publicly.
- Monitor travel information regarding visitors from overseas and overseas travel.
- Implement regular cleaning of areas.
- Provide available health care and health information to staff e.g. Vaccine banks, Wild animals inhabiting areas surrounding work or home, General health information, Hygiene coaching and direction, Geographical areas to travel and to avoid.
- Encourage annual influenza vaccination for employees.
- Exercise and test the processes functionality

4.4 Finance/Functioning

- Current threat status is medium and has possible future financial or functional impact on CS Energy operational sites.
- Resource procurement for further escalation of pandemic threat.
- Determine human resource availability.
- Ensure associated IR policies are developed (i.e. work from home, sick leave etc.)
- Review impacts upon market trading.

5 PANDEMIC ALERT LEVEL 3 – SIGNIFICANT

Response considerations are outlined below:

5.1 Planning and Coordination

Threat level is **Significant** and requires immediate attention from the Pandemic Response Team. Factors associated with relevant existing virus subtypes have an elevated risk of affecting communities within Australia.

- Appoint a responsible person, the Pandemic Response Coordinator (Corporate),

- The Pandemic Response Coordinator (Corporate) and Pandemic Officer (Site) will coordinate the development of relevant communication with employees as to the status of the circulating virus subtype. Additional communication means including email, web page updates and verbal broadcasts should also be utilized. Employ the use of a pandemic fact sheet, information on key general infection control notices and social distancing. The fact sheet should entail general expected symptoms, aggressiveness, transfer of infection and expected infection range.
- The Head of Corporate Affairs and Pandemic Response Coordinator (Corporate) are to review the emergency communications plan, which includes identification of key contacts, chain of communication and processes for tracking and communicating business status. Key communication channels regarding business continuity include communication:
 - Within CS Energy.
 - With other electricity generators.
 - With the Government.
 - With key providers.
 - With key customers.
 - With key contractors.
- The Pandemic Response Team will establish a plan for infrastructure and business continuity. This plan should include the identification of critical operational areas and key personnel (including contractors) required, assuming minimum staff numbers. Critical areas must be of primary focus. Identify strategies for back up of key personnel e.g. retired personnel. Appropriate retraining will have to be ascertained. This plan will be required to be updated or aligned with the relevant Business Continuity Plan. This Team will also specify the generation requirements. Plan for up to 30% absenteeism of the workforce.
- Plan for methods of social distancing, for example:
 - Avoid meeting people face to face - increased use of video conferencing and internet.
 - Where operationally possible, critical working teams are encouraged to split into different work location to avoid cross infection.
 - Avoid unnecessary travel and postpone meetings, training or workshops.
 - Avoid public transport by using other personal means of transport to work.
 - Stagger lunchtimes and discourage congregation in lunchrooms and other areas where people socialise.
 - If meetings are necessary, sit a minimum of two metre from each other.
 - Encourage employees to avoid recreational and other leisure classes outside of work where they might meet other infected people.
- Implement provisions to allow personnel to work from home. This should include the updating and development of any plans, policies and actions that are required.
- Inform the appropriate governmental departments of critical areas and minimum staff requirements. It is crucial to liaise with health department closely regarding status and limitations.

5.2 Surveillance

- The Pandemic Response Coordinator (Corporate) or delegate will be required to:

- Track updates released by recognised health organisations.
- Monitor and advise possible growth/spread patterns.
- Advise on possible growth timeframes.

5.3 Logistics

- Advise employees working overseas to return home if they are in the vicinity of the overseas cluster. Worker to be quarantined prior to returning to work.
- Suspend overseas travel to affected areas.
- Educate employees of the benefits of increased social distancing. Include information of how to reduce frequency and type of face to face contact. Recommendations include:
 - Avoid meeting people face to face - increased use of video conferencing, telephone conferencing and internet.
 - Where operationally possible, critical working teams are encouraged to split into different work location to avoid cross infection.
 - Avoid unnecessary travel and postpone meetings, training or workshops.
 - Avoid public transport by using other personal means of transport to work.
 - Stagger lunchtimes and discourage congregation in lunchrooms and other areas where people socialise.
 - If meetings are necessary, sit a minimum of two metres from each other.
 - Encourage employees to avoid recreational and other leisure classes outside of work where they might meet other infected people.
- Encourage annual influenza vaccination for employees.
- Establish and communicate policies for a flexible worksite including flexible working hours.
- Implement an exercise drill to test your plan and revise accordingly. This will include a communications readiness exercise.
- Consider procurement of or re-stock relevant supplies:
 - Masks: P2 mask 3M Reusable Full Face Respirator 6000 Series. It is recommended that a suitable supply is purchased and stored at this risk level based on availability (there may be government restrictions).
 - Appropriate signage: e.g. cough etiquette, social distancing and personal hygiene.
 - Thermometers.
 - Appropriate transport to minimise social contact.
 - Hygiene measures: gloves, tissues, body wipes, alcohol wipes, anti-bacterial soap and washing stations.
- Ensure all work areas are adequately ventilated.
- Adopt appropriate security measures to minimise visitors on site.
- Continued increase of communication regarding updates of the circulating virus. This would include informational broadcasts concerning effects, symptoms and treatments of the virus of concern.
- Monitor research and news updates regarding possible new vaccines or treatment available.

- Provide available health care and health information to staff, for example:
 - Vaccine banks.
 - General health information.
 - Hygiene coaching and direction.
 - Areas to avoid when travelling.
- Implement regular cleaning of areas affected.

5.4 Finance/Functional

- Determine potential impact of the pandemic on company business financials using multiple possible scenarios. Use reputable information sources to assess the possible impact on relevant societal communities.
- Determine unique features of the pandemic:
 - Rapid onset.
 - Prolonged existence or exposure risk.
 - Areas that are or have been affected or could possibly spread to.
- Resource procurement for further escalation of pandemic threat.
- Determine human resource availability.
- Review impacts upon market trading.

6 PANDEMIC ALERT LEVEL 4 – HIGH

Response considerations are outlined below:

6.1 Planning and Coordination

Threat level is **High** and requires direct and instantaneous attention from the Pandemic Response Team. Factors associated with relevant existing virus subtypes have an imminent risk of affecting communities within Australia. The appointed Pandemic Response Coordinator (Corporate) is to commence their role immediately.

Prominent notices at entry and exit points to the facility should be displayed. Additional communication means including email, webpage updates and verbal broadcasts should also be utilized. Allocate more human resources to pandemic management as necessary. Anticipate employee fear, anxiety, rumours and misinformation and plan communications accordingly.

- It is likely that there will be fear and anxiety stemming from a pandemic situation and this is likely to contribute to increased work absence and/or increased staff distress. The suggested ways of managing this is to:
 - Ensure clear and constant communication of the pandemic status and CS Energy's preparedness to respond to the situation;
 - Ensure quick and effective communication if there is any change to the status; and
 - Provide counselling and back-up assistance through the EAP program.
- A review of performance of the Pandemic Response Coordinator (Corporate) must be completed to ensure they are coping with the demand of the role.

- The Pandemic Response Coordinator (Corporate) and Pandemic Officers (Site) are to coordinate relevant communication with employees using effective means as to the status of the circulating virus subtype. Implement a pandemic fact sheet, information on key general infection control notices and social distancing. The fact sheet should entail general expected symptoms, aggressiveness, transfer of infection and expected infection range and duration.
- Pandemic Response Team is to invoke the emergency communications plan, which includes identification of key contacts, chain of communication and processes for tracking and communicating business and employee status. Key communication channels regarding business continuity include communication:
 - Within CS Energy;
 - With other electricity generators;
 - With the Government;
 - With key providers;
 - With key customers; and
 - With key contractors.
- Implement logistics to allow employees to work from home.
- The Pandemic Response Coordinator (Corporate) and Pandemic Officers (Site) should instruct staff at this point if they feel ill (with any flu-like symptoms) they should not go to work or immediately leave their workplace if they at all feel ill.
- Provide directions on how to seek the appropriate medical treatment.
- Liaise with health departments to determine when, how and the quantity of the antiviral that will be supplied from their stockpiles.
- Collaborate with federal, state and local public health agencies and emergency services to share pandemic plans and to understand their capabilities.
- Consider suspending non-essential work.
- Confirm critical operational areas and key personnel. Review strategies for back up of key personnel.
- Activate the relevant Business Continuity Plan for reduced staffing levels and output.
- The Pandemic Response Team will monitor, review and update the Business Continuity Plan.

6.2 Surveillance

- The Pandemic Response Coordinator (Corporate) or delegate will:
 - Track updates released by recognised health organisations.
 - Monitor and advise possible growth/spread patterns.
 - Advise on possible growth timeframes.
 - Monitor employees that are ill with typical flu-like symptoms.

6.3 Logistics

- Employees will be required to implement CS Energy's Pandemic control measures.

- Implement social distancing procedures (procedures are implemented according to the site-specific social distancing plan developed during Level 3 - Significant alert level). This will include providing guidelines to modify frequency and type of face to face contact.
 - Avoid meeting people face to face - increased use of video conferencing, telephone conferencing and internet.
 - Where operationally possible, critical working teams are encouraged to split into different work location to avoid cross infection.
 - Avoid unnecessary travel and postpone meetings, training or workshops.
 - Avoid public transport by using other personal means of transport to work.
 - Stagger lunchtimes and discourage congregation in lunchrooms and other areas where people socialise.
 - If meetings are necessary sit a minimum of two metres from each other.
 - Encourage employees to avoid recreational and other leisure classes outside of work where they might meet other infected people.
- Distribute personal PPE pandemic packs to working employees. These should include surgical grade masks, gloves, cleaning products and tissues. Facemasks provided will be required to make an effective seal onto the person face. This may require the removal of facial hair.
- Suspend all work-related overseas travel until further notice.
- Suspend site access to visitors or contractors from affected areas.
- Ensure all work areas are adequately ventilated.
- Communicate pandemic status and actions to employees, contractors, suppliers and customers. Utilize available mailing lists and dedicated websites.
- Provide available health care and health information to staff, for example:
 - General health information.
 - Hygiene coaching and direction.
 - Areas to avoid when travelling.
- Ensure all stocks are up to date in appropriate quantities and are sufficiently distributed to all sites.
- Stock will include:
 - Masks: P2 mask 3M Reusable Full Face Respirator 6000 Series. It is recommended that a suitable supply is purchased and stored at this risk level based on availability (there may be government restrictions);
 - Appropriate signage: e.g. cough etiquette, social distancing and personal hygiene;
 - Thermometers;
 - Appropriate transport to minimise social contact; and
 - Hygiene measures: gloves, tissues, body wipes, alcohol wipes, anti-bacterial soap and washing stations.

- Office and site cleaning is to be stepped up. Thorough cleaning is to be undertaken in common areas that involve constant human contact: including eating areas, amenities, communal water dispensers, computer keyboards, telephones and meeting rooms. It is also essential to target air-purifying systems such as changing the filters on air-conditioning units. For the development and use of appropriate anti-bacterial disinfectants refer to Attachment 1.
- Implement provisions for flexible worksites including flexible working hours.
- Identify, establish and communicate restricted areas of travel to affected geographical locations.
- Provide counselling and support to employees regarding the circulating pandemic.
- Encourage annual vaccination for employees.
- Implement regular cleaning of areas which pose a risk of transmission.
- Monitor research and news updates regarding possible to new vaccines or treatment.

6.4 Finance/Functional

- Determine potential impact of the pandemic on company business financials using multiple possible scenarios.
- Use forecasting to predict shifts in the state's electricity demand.
- Consider holding an amount of cash on each site in case banking systems become congested or eventually goes offline.
- Determine unique features of the pandemic:
 - Rapid onset.
 - Prolonged existence or exposure risk.
 - Areas that are or have been affected or could possibly spread to.
- Resource procurement for further escalation of pandemic threat.
- Determine human resource availability.
- Review impacts upon market trading.

7 PANDEMIC ALERT LEVEL 5 – EXTREME

Response considerations are outlined below:

7.1 Planning and Coordination

Threat level is Extreme and requires urgent and immediate attention from the Pandemic Response Team. Factors associated with relevant existing virus subtypes are now affecting widespread communities within Australia and the health authorities have declared a pandemic. The constituents of Pandemic Response Team are to commence their role on a priority arrangement.

Prominent notices at entry and exit points to the facility should be displayed. Additional communication means including email, web-page updates and verbal broadcasts should also be utilized.

Allocate more human resources to pandemic management as necessary. Anticipate employee fear, anxiety, rumours and misinformation and plan communications accordingly.

- It is likely that there will be fear and anxiety stemming from a pandemic situation and this is likely to contribute to increased work absence and/or increased staff distress. The suggested ways of managing this is to:
 - Ensure clear and constant communication of the pandemic status and CS Energy's preparedness to respond to the situation.
 - Ensure quick and effective communication if there is any change to the status.
 - Provide counselling and back-up assistance through the EAP program.
- The following 3 months are critical for business continuity.
- A review of performance of the Pandemic Response Coordinator (Corporate) must be completed to ensure he/she is coping with the demand of the role.
- Site Crisis Teams should be in full operation liaising with the Pandemic Response Team.
- Identify key personnel, triggers and procedures for altering business operations (e.g. shutting down operations in affected areas).
- The Pandemic Response Team and/or the Pandemic Response Coordinator (Corporate) are to continually communicate with employees using effective means as to the status of the circulating virus subtype. The Pandemic Response Team and/or Pandemic Response Coordinator (Corporate) will send out emails to all staff regarding what to do if people get sick at work. However, if someone feels ill at work, or someone observes that another person is exhibiting symptoms of the relevant virus at work, they are to contact the delegated site responder (e.g. first aid officer or ERT) by telephone or email.
- Initiate Site quarantine procedures. The Pandemic Response Coordinator (Corporate):
 1. Should avoid visiting this person if it can be avoided - manage the process over the phone.
 2. Check and confirm employee symptoms.
 3. If the employee does have symptoms that match any of those listed, they should be treated as a "suspect case." The Pandemic Response Coordinator (Corporate) should complete staff Pandemic virus notification form, including details of any staff and/or visitors the person has been in contact with.
 4. The employee/suspect case should be instructed to wear personal facemasks immediately if they are not already. This is to help protect other staff.
 5. The suspect case should leave work immediately and be advised to contact their GP by telephone for a review. They should not use public transport if at all possible - the business will pay for a taxi if necessary.
 6. The supervisor or manager of the suspect case shall be informed that they have left work.
 7. Contact management - the Pandemic Response Coordinator (Corporate) and Pandemic Officers (Site) will work with leaders to:
 - Identify contacts (once an employee is suspected to be infected);
 - Advise contacts that they have been in contact with a person suspected of having a relevant virus; and
 - instruct contacts to wear personal face masks immediately if they are not already. This is to help protect other staff.
 - Direct contacts to go home and stay at home until advised otherwise.

8. The suspect case and contact's work stations should be cleaned and disinfected, as indicated in the section on Workplace cleaning.
9. Return to work of the suspect case and their contacts:
 - Advise staff member on how long to stay away from work
 - Check on the staff member during his/her absence from work. This will facilitate treatment, contact tracing, etc., if they become ill
 - Staff are required to have medical clearance prior to their return to work.
10. Liaise with health departments to determine when, how and the quantity of the antivirals that will be supplied from their stockpiles and implement.
11. The Pandemic Response Team is to invoke the emergency communications plan, which includes identification of key contacts, chain of communication and processes for tracking and communicating business and employee status. Key communication channels regarding business continuity include communication:
 - Within CS Energy;
 - With other electricity generators;
 - With the Government;
 - With key providers;
 - With key customers; and
 - With key contractors.
12. Managers should instruct staff at this point if they feel ill they should not go to work.
13. If pandemic continues to spread consider shutting down the peripheral processes and only maintaining the identified critical processes to ensure the sites are still producing electricity.
14. Activate and review the Business Continuity Plan for reduced staff levels and output.
15. Allow authorised people to work from home utilizing previously arranged provisions including Internet and VPN access.
16. Restrict all access to sites from visitors, family members and any other unauthorised personnel.
17. Provide direction of how to seek appropriate medical treatment from the home.

7.2 Surveillance

- The Pandemic Response Coordinator (Corporate) or delegate will be required to:
 - Track updates released by recognised health organisations.
 - Monitor and advise possible growth/spread patterns.
 - Advise on possible growth timeframes.
 - Monitor employees that are ill with typical flu-like symptoms.
 - Tack and document people who have contracted the circulated virus sub-type.

7.3 Logistics

- Cancel all non-essential work.

- Implement necessary full home quarantine, infection control and social distancing to its full extent.
- Educate employees of recommended home health and hygiene. This includes anti-bacterial cleaning, hand washing, wearing a mask, wearing gloves, human to human contact, correct diet, and sufficient sleep.
- Secure all areas, which will not be staffed for an extended period.
- Suspend all work-related overseas travel until further notice.
- Maximise building and workplace ventilation (open all doors and windows or increase building air-con).
- Office and site cleaning is to be stepped up. Thorough cleaning is to be undertaken in common areas that involve constant human contact: including eating areas, amenities, communal water dispensers, computer keyboards, telephones and meeting rooms. It is also essential to consider air-purifying systems such as changing the filters on air-conditioning units. For the development and use of appropriate anti-bacterial disinfectants refer to Attachment 1.
- Continue to distribute personal PPE pandemic packs to working employees when required. These should include surgical grade masks, gloves, cleaning products and tissues. Facemasks provided will be required to make an effective seal onto the person face. This may require the removal of facial hair.
- Require employees to employ the associated PPE at all times where there is a risk of contact with other people. This includes the provided mask, gloves and appropriate clothing.
- Manage dispersal of personal protective equipment:
 - Masks: P2 mask 3M Reusable Full Face Respirator 6000 Series.
 - Appropriate signage: e.g. cough etiquette, social distancing and personal hygiene.
 - Thermometers.
 - Hygiene measures □ gloves, tissues, body wipes, alcohol wipes, anti-bacterial soap and washing stations.
- Implement social distancing procedures (procedures are implemented according to the site-specific social distancing plan developed during Level 3 - Significant alert level). This will include providing guidelines to modify frequency and type of face to face contact.
 - Avoid meeting people face to face - increased use of video conferencing, telephone conferencing and internet.
 - Where operationally possible, critical working teams are encouraged to split into different work location to avoid cross infection.
 - Avoid unnecessary travel and postpone meetings, training or workshops.
 - Avoid public transport by using other personal means of transport to work.
 - Stagger lunchtimes and discourage congregation in lunchrooms and other areas where people socialise.
 - If meetings are necessary sit a minimum of two metres from each other.
 - Encourage employees to avoid recreational and other leisure classes outside of work where they might come into contact with other infected people.

- Introduce cough etiquette procedures and other hygiene measures such as wiping down phones and touched surfaces.
- Organise appropriate transport for critical staff to allow them to attend site and return home minimising social contact.
- Undertake daily systematic temperature checks of staff. Periodically (every 4 hours) or when required. If temperature is raised or high then employee must be evacuated and transported to appropriate medical treatment immediately.
- Arrange to administer the maximum levels of antivirals from the health department.
- Develop and maintain a register of the employee who been infected by the virus through the pandemic. (refer to Attachment 7 for an example)
- Identify, establish and communicate restricted areas of travel to affected geographical locations.
- Provide counselling and support to employees regarding the circulating pandemic.
- Employ flexible worksite procedures to allow employees to work flexible hours.
- Provide health care and health information regarding:
 - General health information.
 - Hygiene coaching and direction.
 - Geographical areas to travel and to avoid.
- As information is gathered from reputable organisations (WHO, Department of Ageing and Health and Queensland Health) the Pandemic Response Coordinator (Corporate) will provide information fact sheets on what to do if employees or people within the workplace or at home get sick.
- Possible biohazard suit for ERT so they can be protected in an unforeseen emergency situation.
- Encourage annual vaccination for employees.
- Implement regular cleaning of areas which pose a risk of transmission.
- Communicate pandemic status and actions to employees, contractors, suppliers and customers. Utilize available mailing lists and dedicated websites.

7.4 Finance/Functional

- Refer to the Business Continuity Plan.
- Determine potential impact of the pandemic on company business financials using multiple possible scenarios.
- Use forecasting to predict shifts in the state's electricity demand.
- Consider holding an amount of cash on each site in case banking systems become congested or eventually goes offline.
- Consider holding an amount of cash on each site in case banking systems become congested or eventually goes offline.
- Determine unique features of the pandemic:
 - Rapid onset.

- Prolonged existence or exposure risk.
- Areas that are or have been affected or could possibly spread to.
- Resource procurement for further escalation of pandemic threat.
- Determine human resource availability.
- Review impacts upon market trading.

8 INFECTION CONTROL FOR A PANDEMIC OUTBREAK

Applying basic precaution will contribute effectively to lowering transmission of air-borne viruses. These include:

- Adopting good hand washing/hand hygiene practices;
- Personal hygiene;
- Workplace cleaning (rigorous cleaning of all hard surfaces in the workplace);
- Personal protective equipment;
- Restricting the use of publicly used facilities;
- Social distancing or avoiding the contact with other;
- Restricting staff travel and workplace entry; and
- Screening workers.

8.1 Practice good personal hygiene

Hand hygiene and practicing correct cough etiquette is crucial to reducing the transmission on infectious agents. Hand hygiene includes washing hand with soap and water or cleaning hands with alcohol-based products (gels, rinses) that can be used without water.

Hand washing:

- Adopt good hand washing/hand hygiene practices, particularly after coughing, sneezing or using tissues.
- Immediately dispose of used tissues.
- Keep hands away from the mucous membranes of the eyes, nose, and mouth.
- If hands are visibly soiled with respiratory secretions (phlegm, spit) you need to wash with soap (plain or antimicrobial) and water. Wash them with soap and warm water scrubbing you wrists, palms fingers and nails for up to 20 seconds. Rinse, and dry with a clean dry towel.
- Ensure that adequate supplies of hand hygiene products are available. (This is a high planning priority as there may be interruption to the supply or shortages of soap and hand towels.)
- Have a supply of tissues available and provide no-touch receptacles for used tissue disposal.
- Consider having conveniently located dispensers of alcohol-based hand rub.
- Provide soap and disposable towels for hand washing near sinks.

Refer to **Attachment 3** and **Attachment 4** for correct hand washing technique.

Influenza and other viruses can be transmitted by indirect contact from hands and items that have been in contact with an infected person or contaminated surfaces. By frequently washing your hands you can wash away any germs from these sources. This is especially important before you eat.

If your hands are visibly spoiled with respiratory secretions, they must be washed using soap (either plain or antimicrobial) and water. It is best to wash the hands with soap and warm water, scrubbing your wrists palms, fingers and nails for ten to fifteen seconds. Rinse and dry with a clean, dry towel.

- Always wash your hands after contact with other people and after removing a mask or gloves if you have been wearing them.
- You should ensure you have facilities for people to wash their hands frequently. This includes sinks with warm and cold running water, soap (plain or antimicrobial) and disposable paper towels. You may also wish to have alcohol-based disinfectants available.

Hand and personal hygiene information should be communicated to staff or visitors. This might include hygiene notices posted in entrances to washrooms, hand washing stations and public areas. Utilise brochures, newsletters, global emails, employee notice boards and staff newsletters to inform employees of the importance of personal hygiene during a pandemic.

8.2 Coughing and Sneezing Etiquette

Coughing propels infectious agents from the mouth and nose and these infectious agents have the potential to land on surfaces and people providing the potential for spread. Always follow these instructions when you feel the need to cough and sneeze:

- Cover nose and mouth when sneezing and coughing (preferably with a disposable single use tissue).
- Dispose of tissues in the nearest waste receptacle after use. Do not store them in your pockets.
- Wash your hands after coughing or sneezing or touching used tissues.
- Consider putting up signs about cough and sneeze etiquette such as those included at the back of this guide.

8.3 Workplace Cleaning

To minimise the transmission of viruses through the work environment, particularly hard surfaces such as sinks, handrails, handles, objects and counters, additional processes must be implemented. Transmission from contaminated surfaces is unlikely but viruses hold the potential to live up to two days on such surfaces. To combat this, it is a known fact that viruses are inactivated by alcohol and chlorine. Therefore, it is recommended that hard surfaces should be cleaned often, preferably daily. The table in **Attachment 1** outline suitable cleaning solutions to be utilized to combat viruses.

Staff should be reminded not to share cups, dishes and cutlery and ensure they are thoroughly washed with detergent and hot water use. Dishwashing machine is an appropriate machine.

Consider removing magazines or papers, from office foyers, cafés and lunchroom in high-risk levels of a pandemic.

8.4 Personal Protective Equipment

All personal protective equipment provided by CS Energy will be issued as per government advisories based on the type of pandemic and shall be used as directed as per the Supplier's instructions. The purpose of the PPE is to either provide a barrier against the air-borne virus entering the body or to prevent transmission through contact. It does not guarantee immunity from the virus but rather reduces the risk of infection. The personal protective equipment shall be carefully managed, as there may be a limited supply accessible to CS Energy.

8.5 Using Face Masks

In the event of escalated pandemic risk employees of CS Energy will be provided with guidance as to when a face mask is required based on risk and medical advice relating to the virus. The purpose of this mask is to help prevent exposing others to their respiratory secretions. Information relating to the method for use of face masks will be provided.

8.6 Social Distancing

Viruses can travel up to one metre when someone sneezes or coughs. Therefore a distance of at least two metres can contribute significantly to reducing the spread of the infection. The social distancing strategies employed by CS Energy should be in proportion with the severity of the circulating pandemic.

Strategies for improving social distancing include:

- Avoid meeting people face to face—use the telephone, video conferencing and the internet to conduct business as much as possible—even when participants are in the same building;
- If face to face is unavoidable minimize the meeting time and use the largest room possible or consider holding the meeting in open air;
- Avoid any unnecessary travel and cancel or postpone non-essential meetings/gatherings/workshops/training sessions;
- If possible, arrange for employees to work from home or work variable hours;
- Practice shift changes where one shift leaves the workplace before the new shift arrives;
- Avoid public transport;
- Bring lunch and eat it at your desk or away from others;
- Do not congregate in tearooms or other areas where people socialize;
- If a face-to-face meeting with people is unavoidable, minimize the meeting time, choose a large meeting room and sit at least two metres away from each other if possible; avoid shaking hands or hugging.

8.7 Restricting Staff Travel

The Department of Foreign Affairs and Trade (DFAT), in conjunction with the Department of Health, will publish appropriate travel advisories for Australians traveling to other countries infected by the pandemic on their website.

It is possible that all incoming passengers may be required to complete quarantine for a period equivalent to the estimated incubation period of the virus - this could be up to 14 days.

8.8 Symptoms / Complications – Influenza / Coronavirus / Common Cold

Early recognition of the onset of the relevant virus is the key to control the infection. Viruses can be identified from the symptoms shown by an infected employee. The first symptom that is likely to affect an employee is the increase of body temperature (above 38°C). This alone doesn't signal that the employee has the relevant pandemic related virus. However, if the employee is displaying a second symptom (refer to **Attachment 2**) they should be treated as an infected person and shall be recommended to see a doctor.

During a pandemic the possibility remains that misdiagnosis can take place between the common cold, influenza or coronavirus. Misdiagnosis between a common cold and other relevant pandemic related viruses could create unnecessary action, anxiety or panic. It's important to understand the difference

between the various conditions to ensure this does not occur and to refer the affected person for clinical testing to get a confirmed diagnosis. Attachment 2 outlines the primary differences between Viruses and the common cold.

8.9 Restricting Workplace Entry

Employees should be advised not to come to work when they are feeling unwell, particularly if they are exhibiting any influenza like symptoms.

Unwell employees should also be advised to phone their doctor to arrange an appointment.

8.10 Screening Workers and Managing Staff Who Become Ill at Work

The Pandemic Response Coordinator (Corporate) or their delegate:

- Should avoid visiting this person if it can be avoided - manage the process over the phone.
- Coordinate the checking and confirmation of employee symptoms.
- If the employee does have symptoms that match any of those listed, they should be treated as a "suspect case." The Pandemic Response Coordinator should coordinate the completion of an employee Pandemic related virus notification form, including details of any staff and/or visitors the person has been in contact with.
- The employee/suspect case should be instructed to wear personal facemasks immediately if they are not already. This is to help protect other staff.
- The suspect case should leave work immediately and be advised to contact their GP by telephone for a review. They should not use public transport if at all possible - the business will pay for a taxi if necessary.
- The supervisor or manager of the suspect case shall be informed that they have left work.
- Contact management - the Pandemic Response Coordinator (Corporate) and Pandemic Officers (Site) will:
 - Identify contacts (once an employee is suspected to be infected);
 - Advise contacts that they have been in contact with a person suspected of having a pandemic related virus; and
 - The contacts should be instructed to wear personal facemasks immediately if they are not already. This is to help protect other staff.
 - Ask contacts to go home, and stay at home until advised otherwise.
- The suspect case and contact's workstations should be cleaned and disinfected, as indicated in the section on Workplace cleaning.
- Return to work of the suspect case and their contacts:
 - Advise employee on how long to stay away from work
 - Check on the staff member during his/her absence from work. This will facilitate treatment, contact tracing, etc., if they become ill
 - Where possible, employees are to have confirmation from GP that they are well prior to their return to work.

8.11 Vaccination

At the present time in Australia, development and supply of vaccines for pandemic viruses are coordinated at a national level by the Australian Government. The current technology only supports a vaccine to be created from an already existing virus strain that is being transmitted from human-to-human (i.e. the strain that is transmitted from human to human will be different to strain that is currently being transmitted from animal to human and developing a vaccine now may not work on a new strain). More information can be obtained in the Australian Health Management Plan for the relevant pandemic related virus (www.health.gov.au).

9 DEFINITIONS

Term	Definition
Influenza	An acute contagious viral infection, commonly occurring in epidemics or pandemics, and characterized by inflammation of the respiratory tract and by the sudden onset, fever, chills, muscular pain, headache, and severe prostration.
Infected person	A human being who has been contaminated with a pathogenic microorganism or agent that has invaded or produced infection in the host being.
Disease	A pathological condition of a part, organ, or system of an organism resulting from various causes, such as infection, genetic defect, or environmental stress, and characterized by an identifiable group of signs or symptoms. It's a condition or tendency, as of society, regarded as abnormal and harmful.
Antivirals	Drugs that are utilised to prevent or cure a disease caused by a virus, by interfering with the ability of the virus to multiply in number or spread from cell to cell.
Antibody	A protein produced by the body's immune system in response to a foreign substance (antigen). An antibody reacts specifically with the antigen that induced its formation and inactivates the antigen. Our bodies fight off an infection by producing antibodies.
Contact	Person who has been in close unprotected contact with a symptomatic person.
Carrier	Is a person who is infected with an agent that causes a disease who shows no sign of illness. Asymptomatic carriers shed the causative agent, such as a virus or bacteria, and so can pass the disease onto others. The most famous asymptomatic carrier was Mary Mallon, or Typhoid Mary
Contagious Disease	A contagious disease is easily spread from one person to another by contact with the infectious agent that causes the disease. The agent may be in the droplets of aerosols made by coughing or sneezing, contaminated food utensils, water or food.
Coronavirus	Coronaviruses are a large family of viruses that can make humans and animals sick. They cause illnesses that can range from the common cold to more severe diseases. Coronaviruses include Middle East Respiratory Syndrome (MERS), Severe Acute Respiratory Syndrome (SARS) and COVID-19.
Genetic Mutation	A change in genetic material (DNA, or RNA in the case of serious viruses) resulting in the new or rearranged hereditary determinants. Mutations are rare, random events in which the base sequences of the nucleic acid molecule are changed. The frequency of the mutations may be increased via chemicals or radiation
Immune System	The cells, tissues or organs that assist the body to resist infection and disease by producing antibodies and/or altered cells that inhibit the multiplication of the infectious agent.
Pandemic	An epidemic occurring over a wide spread area, crossing international boundaries and usually affected a large number of people. A global epidemic.
Pandemic related virus	Any virus which has the potential to be declared a pandemic, including but not limited to the influenza and coronavirus virus families and subtypes.
Vaccine	A preparation consisting of antigens of the disease-causing organism which, when introduced into the body, stimulates the production of specific antigens or altered cells. This produces immunity to the disease-causing organism. The antigen in the preparation can be whole disease-causing organisms (killed or weakened) or parts of these organisms

Virulent	Highly lethal; causing severe illness or death
Virus	A sub-microscopic infectious agent consisting of nucleic acid (DNA or RNA) molecule surrounded by a protein coat. Viruses cannot replicate outside a living cell.
Zoonoses	Diseases that are transferable to human from animals

10 REFERENCES

Reference No	Reference Title	Author
B/D/11/43851	CS-IM-02 - Crisis Management Plan	CS Energy
Web Link	World Health Organisation	
Web Link	Australian Government, Department Health and Ageing	
Web Link	Queensland Health	
Web Link	Australian Industry Group web site	
Web Link	International SOS - Travel restrictions, Flight operations and Screening	
Web Link	Health Topics - Australian Government	
Web Link	Safe Work Australia	
Web Link	Smartraveller - Australian Government	

11 RECORDS MANAGEMENT

In order to maintain continual improvement, suitability, safety and effectiveness of the organisation, registered documents will be reviewed on a two-yearly basis or at intervals specified by legislative or regulatory requirements. Review of controlled documents should occur where it has been identified that there are changes in technology, legislation, standards, regulation or where experience identifies the need for alteration to the content. Registered documents should also be reviewed following an incident, change management process, modification or where directed as part of a risk assessment process. A 'review' can simply mean that it has been identified, confirmed and appropriately recorded that no changes are required and that the existing process remains the same.

Government Owned Corporations must ensure that records are retained according to accountability, legal, administrative, financial, commercial and operational requirements and expectations. In compliance with records retention and disposal, all documentation created in relation to business must be retained in line with minimum retention periods as detailed in legal retention and disposal schedules.

12 ATTACHMENTS

Attachment 1 – Suggested Anti-bacterial disinfectants

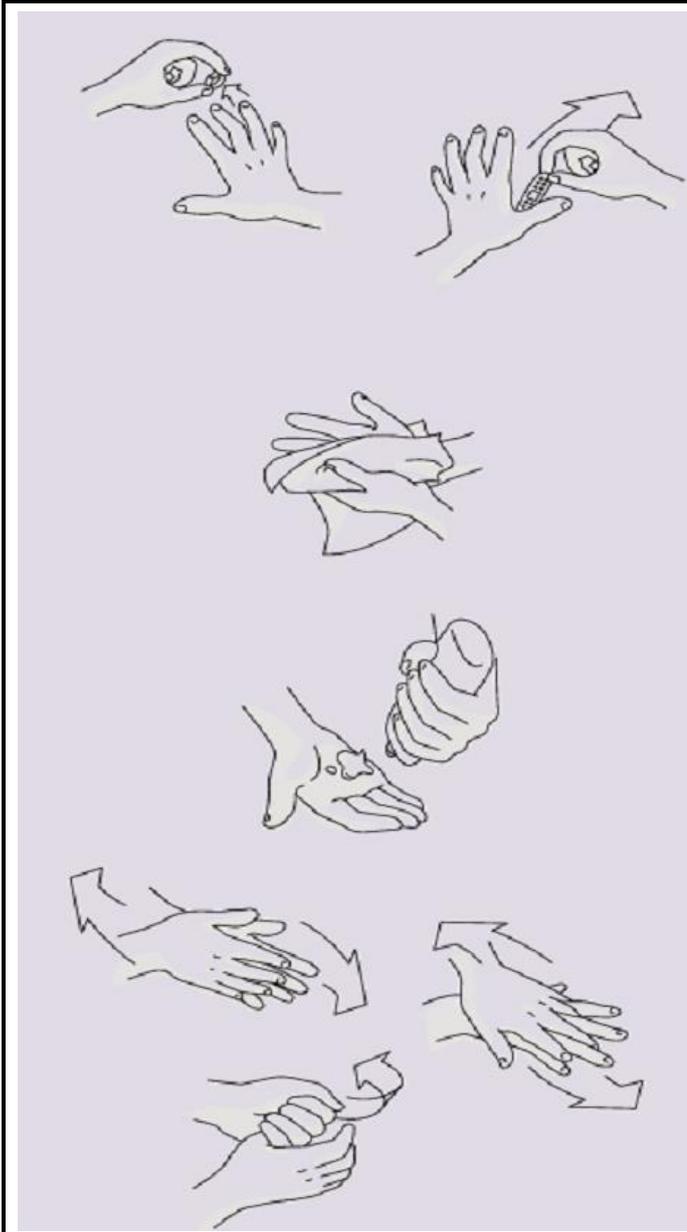
Anti-bacterial Disinfectants	Recommended Use	Precautions
<p>Sodium hypochlorite: 1000 parts per million of available chlorine, usually achieved by a 1 in 5 dilution of hospital grade bleach.</p>	<p>Disinfection of material contaminated with blood and body fluids.</p>	<ul style="list-style-type: none"> • Should be used in well-ventilated areas • Protective clothing required while handling and using undiluted bleach • Do not mix with strong acids to avoid release of chlorine gas • Corrosive to metals
<p>Granular chlorine: e.g. Det-Sol 5000 or Diversol, to be diluted as per manufacturer's instructions.</p>	<p>May be used in place of liquid bleach, if it is unavailable.</p>	<ul style="list-style-type: none"> • Same as above
<p>Alcohol: e.g. Isopropyl 70%, ethyl alcohol 60%.</p>	<p>Smooth metal surfaces, tabletops and other surfaces on which bleach cannot be used</p>	<ul style="list-style-type: none"> • Flammable and toxic • To be used in well-ventilated areas • Avoid inhalation • Keep away from heat sources, electrical equipment, flames, and hot surfaces • Allow it to dry completely, particularly when using diathermy, as this can cause diathermy burns
<p>Benzalkonium Chloride: e.g. in disinfectant wipes at >0.05%, such as Pine-O-Clean wipes.</p>	<p>Surface wipes to reduce any virus contaminants.</p>	<ul style="list-style-type: none"> • Avoid prolonged contact with skin.

Attachment 2 – Symptoms / Complications – Influenza / Coronavirus / Common Cold

SYMPTOM	INFLUENZA or CORONAVIRUS	COMMON COLD
Fever	Usual, sudden onset 38°C-40°C and last up to 3-4 days	Rare
Cough	Usual and can be severe	Sometimes, but usually mild
Headache	Usual and can be severe	Rare
Aches and pains	Usual and can be severe	Rare
Fatigue and weakness	Usual and can be severe	Sometimes, but usually mild
Debilitating fatigue	Usual, early onset and can be severe	Rare
Nausea, vomiting, diarrhoea	In children under 5 years old	Rare
Watering of the eyes	Rare	Usual
Runny, stuffy nose	Rare	Usual
Sneezing	Rare in early stages	Usual
Sore throat	Usual	Usual
Chest discomfort / shortness of breath	Usual and can be severe	Sometimes, but mild to moderate
Complications	Respiratory distress. The most serious complication of a SARS-CoV-2 infection is a type of pneumonia that's been called 2019 novel coronavirus-infected pneumonia (NCIP).	Congestion or earache
Fatalities	Well recognised in the elderly and people with chronic medical conditions	Not reported

Attachment 3 – Alcohol-Based Liquid or Hand Rub

Cleaning Hands using an Alcohol based Liquid or Hand Rub



- ✓ Remove jewellery and cover abrasions.
- ✓ Use water or a wet wipe to remove visible soiling.
- ✓ Dispense product into dry hands.
- ✓ Rub all surfaces of hands for one minute.

When rubbing, pay particular attention to the back of hands, fingers, fingernails, fingertips and the webbing between fingers.

Attachment 4 – Washing and Drying Your Hands

Washing and Drying your Hands correctly



- Remove jewellery and cover abrasions



- Wet hands with warm water, then apply soap or liquid soap



- Lather for 20 seconds



- Rinse hands under running water



- Dry hands with clean towel

During lather, pay particular attention to the back of the hands and fingers, fingernails, fingertips and the webbing between the fingers.

Hand hygiene is crucial in reducing the transmission of infections. It includes both hand washing with plain or antimicrobial soap and water, and the use of alcohol-based products (gels, rinses, foams) containing an emollient that does not require the use of water.

If hands are visibly soiled or contaminated with respiratory secretions, wash hands with soap (with either antimicrobial or non-antimicrobial) and water

Attachment 5 – Cough Etiquette and Respiratory Hygiene

Cough Etiquette and Respiratory Hygiene

Cover Your Cough



- When coughing or sneezing, use a tissue to cover your nose and mouth.
- Consider wearing a surgical mask if practicable.
- Dispose of the tissue afterwards.

Wash Your Hands



- After coughing, sneezing or blowing your nose, wash your hands with soap and water.
- Use alcohol-based liquids, gels or wipes if you do not have access to soap and water.

Remember hand washing is the single most effective way to reduce the spread of germs that cause respiratory disease.

Anyone with signs and symptoms of a respiratory infection, regardless of the cause, should be instructed to cover their nose / mouth when coughing or sneezing; use tissues to contain respiratory secretions; dispose of tissues in the nearest waste receptacle after use; and wash their hands afterwards.

Attachment 6 – Suggested Household Supplies During a Pandemic

Useful household supplies for an extended stay at home	
Food Items	Canned meat, fish, fruits and vegetables – (ready to eat)
	Canned soups, juices and other fluids
	Protein and fruit bars
	Dry cereals
	Peanut butter or nuts
	Dried fruit
	Crackers / biscuits
	Baby food – cans/jars and formula (only if needed)
	Non-perishable food – dry dog biscuits (for pets if needed)
Medical, health and emergency supplies	Prescription medicine and any specific medical equipment
	First aid box and first aid equipment
	Soap, or alcohol-based hand gel
	Medicines for fever, such as paracetamol or ibuprofen (including any appropriate infant medication)
	Digital thermometer
	Vitamins
	Torch, portable radio and spare batteries
	Manual can opener
	Disposable plates and cutlery
	Garbage bags / plastic shopping bags for used tissues and other waste
	Tissues, toilet paper, disposable nappies
	Gloves and surgical masks

