

Guiding Principles for residential aged care – keeping Victorian residents and workers safe

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The safety of residents and workers in residential aged care is the highest priority. These principles are designed to minimise the potential risk of workers unintentionally transmitting COVID-19 either by attending work while experiencing symptoms, or working across multiple sites and, by extension, reducing the overall risk of outbreak at any given site and also reducing the health risk for individual residents and workers in Victorian aged care homes, located in hotspots.

Development

The ‘Guiding Principles for residential aged care – keeping Victorian residents and workers safe’ were developed by industry leaders with input from Government, peak bodies and unions.

The Guiding Principles should be read in conjunction with the Department of Health’s Support for Aged Care Workers in COVID-19 [Grant Guidelines](#). The Grant Guidelines outlines the Australian Government’s provision of funding support to help employers and employees stop the spread of COVID-19.

Objectives

To keep residents and workers located in hotspots in Victoria protected from the risks of acquiring COVID-19 in residential aged care facilities.

To have Victorian aged care workers based with one residential aged care facility only during this high risk pandemic period.

To reduce the risk of aged care workers unintentionally transmitting COVID-19 by working across multiple sites.

Scope

The principles apply to permanent and casual residential aged care workers who work in a hotspot in Victoria and will apply if the worker has multiple employers.

The principles do not apply to contractors, the emergency workforce and agency staff.

Guiding Principles

1. Every effort will be made to ensure workers are supported, paid their usual income, not disadvantaged and have choice over their place of employment¹;
2. It is expected that workers will work at the site where they can work the most hours for the duration of the activity period.
3. There will be no diminishing impact to the consumer's right to make informed choices about care and services;
4. Implementation of risk management practices and workforce practices will be practical, and providers will have access to avenues of support; and
5. Recommendations will promote sustainable and safe rostering, employment and workplace practices to minimise disruption to any one provider.

Timeframe

The changes are intended to be started as soon as practicable. Employers should aim to commence implementing roster changes from Monday 27 July 2020.

The changes have been extended and are now for a fixed term of 12 weeks from Monday 27 July until 26 October 2020. They may be extended further if required as a result of the pandemic and advice from the Commonwealth and Victorian Governments.

These principles initially apply in Victoria only, but may be adopted in other States and Territories as needed.

Stakeholder engagement

Stakeholder engagement has and will be continued throughout the fixed term period and any extension. The Guiding Principles have been met with a constructive and cooperative approach from the sector, sector peaks, industrial bodies and Governments, and the initiative to find a solution has been welcomed.

Implementation – Single Site employment

Worker protection:

1. Any changes during this fixed term period will be implemented with a specific focus on not disadvantaging workers.
2. Workers will continue to be protected by safe working conditions (including the provision of appropriate PPE and hand hygiene products).
3. Workers who elect to work at a single-site must have the security of their additional jobs and their accrued entitlements and continuity of service maintained during this period, subject to relevant legislation.

¹ No disadvantage to workers with respect exercising their workplace rights.

4. Workers who elect to work at a single-site will be able to access annual leave or long service leave entitlements accrued at their additional job(s) during this period.
5. Workers who elect to work at a single-site within the Guidelines will be recognised to be exercising a workplace right, reflecting the intent of these Principles to minimise the risk to health and safety.

Practical implementation:

Any employee who requests unpaid single-site leave to work at a second provider must be granted that leave.

1. The employer must hold the employee's position for a minimum of twelve weeks for the agreed period of single-site leave;
2. The employee must notify the employer in writing, if the employee elects to extend the single-site leave period;
3. The employee's primary and additional employment must be with an approved residential aged care provider;
4. The additional employer(s) have a right to request evidence of the employee's elected primary job (evidence may be in the form of an employment agreement, letter of offer, pay slip or statement of service from the employer) – the employee may choose to redact personal information (including pay rates) from such documents;
5. Employees will continue to be allowed to access their annual leave and long service leave entitlements only via their usual leave application and approval channels;
6. Personal and annual leave will not continue to accrue with additional employer(s) during this period if the employee is taking unpaid leave (although personal and annual leave **will** continue to accrue if the employee is taking paid leave); [see [s.22 of the FW Act](#)];
7. Continuity of service is protected (including for redundancy purposes) and long service leave will continue to accrue; and
8. As a result of taking this leave, the employee will not be disadvantaged in the future with respect to progression, development, learning and other opportunities in the workplace.

Provider support:

9. Providers will continue to have access to Government support through the Aged Care Support Program, access to PPE, and support to boost an emergency workforce.
10. Providers without sufficient internal resources will have access to practical tools to support them in complying with the Principles. Providers will access support via the member services of their elected Peak Body which will serve as a support hub.
11. Providers will work cooperatively to stabilise the workforce and prevent disadvantage to any one provider.

Support hub:

12. Peak Bodies will be engaged to serve as support hubs to provide guidance, tools and advice to employers to assist them in implementing these guidelines.
13. An Advisory Committee will be led by Peak Bodies and will include representatives from Government, Unions, AQSC, and other sector representatives.

14. The support hub will promote regional and state collaboration to facilitate access to resources, expertise and intelligence for smaller providers who may require support to adapt to the new scheme, including through support to adopt new payroll and other HR processes.

Support from providers, peak bodies, industrial bodies and Governments

An effective workforce pandemic response will require generous and open collaboration between providers, peak bodies and industrial bodies, with support from Governments. A regional cooperative approach to a temporary single-site solution is critical.

Providers will be required to:

- Adhere to the guidelines to preserve the safety of their consumers and their workers;
- Act reasonably and in accordance with the guidelines and workplace laws;
- As far as reasonably practicable, employers will take steps to mitigate the risk of worker fatigue;
- Contribute to the regional solution through participation in facilitated conversations, providing due consideration to other local providers, and considering how the aged care workforce is best utilised and mobilised for the benefit of the sector;
- Contribute resources and expertise, where this is possible and safe, to support smaller providers or providers where an outbreak has occurred; and
- Provide employees with extra shifts, where operational requirements allow, to make up for shifts they have foregone with their other employer(s).

The **peak bodies** will provide strong mentorship of providers to assist them to maintain the safety of their consumers and workers. Peak bodies have the capacity to offer:

- Direct communications channels to providers to circulate information, policy, resources and toolkits;
- Deep sector touch points to understand the challenges of members, advocate for change for more effective solutions and escalate providers to the support network;
- Expert, sector-specific resources to support implementation of the guidelines; and
- A channel for feedback and data collection to evaluate impact and opportunities for continuous improvement.

The **unions** representing aged care workers will continue to represent member interests and ensure that members are provided with accurate information and support to guide their decisions, mindful of the primary obligation of the Principles to ensure resident and worker safety. Such unions have the capacity to offer:

- Direct communications channels to their members to circulate information and support;
- Deep sector touch points to understand the challenges of workers, advocate for change for more effective solutions and escalate worker issues to providers and governments;
- A channel for feedback and data collection to evaluate impact and opportunities for continuous improvement.

To enable aged care providers to implement the principles, support from **governments** will be provided in the form of funding to:

- Residential providers to ensure aged care employers can cover costs to enable employees to work at a single site; and
- Funding to facilitate the establishment of a hub which will support providers to implement these principles.

In addition to supporting Victorian aged care workers be based with one residential aged care facility, the Department of Health will provide additional supports for workers through:

- Paid leave for employees who are not to attend work due to testing positive for COVID-19, experiencing symptoms, or as a result of self-isolation or quarantine.
- Training additional staff where existing aged care workers are not to attend work due to self-isolation, quarantine or single site requirements.