

**HOME AFFAIRS PORTFOLIO
AUSTRALIAN BORDER FORCE**

PARLIAMENTARY INQUIRY WRITTEN QUESTION ON NOTICE

Select Committee on COVID-19

QoN Number: CV19-64

Subject: Procedures and Guidance - dealing with travellers airports

Asked by: Rex Patrick

Question:

What procedures/guidance/briefings concerning contagious diseases were in place for Border Force personnel dealing with travellers at airports prior to the coronavirus outbreak? Please table any written advice distributed to officers in January/February.

Answer:

On 9 January 2020, the World Health Organisation (WHO) reported that Chinese authorities had made a preliminary determination of a novel (or new) coronavirus.

Prior to this announcement, Australian Border Force (ABF) officers had access to procedural instructions on Communicable Diseases, which offered advice on:

- The potential for exposure to communicable diseases in the workplace;
- Practical steps to eliminate or minimize the risk of exposure to these communicable diseases; and
- Procedures for managing workers who may have been exposed to or who have contracted a communicable disease.

On 10 January 2020, the ABF workforce was made aware of the existence of a virus originating in China, and advised that the WHO recommended the practicing of hand hygiene, and the donning of a surgical mask, as public health measures to prevent the spread of influenza and severe acute respiratory infections. A copy of this email advice is attached

Subsequent advice was received from the Department of Health, and distributed to the ABF workforce, as follows:

– ***‘New Coronavirus Information Sheets for Border Staff’*** - were received from the Department of Health and distributed to the ABF workforce as follows:

<u>Fact Sheet</u>	<u>Distribution Date</u>
Fact Sheet 1	21 January 2020
Fact Sheet 2	27 January 2020
Fact Sheet 3	01 February 2020
Fact Sheet 4	03 February 2020

Copies of these Fact Sheets are attached.

The Department of Home Affairs provided further guidance to the Portfolio workforce on 12 February 2020, with the distribution of the ‘Novel Coronavirus (2019-nCov) – FAQs’ document. A copy of this document is attached.



New Coronavirus Information Sheet for Border Staff

17 January 2020

There is currently an outbreak of a new coronavirus in Wuhan, Hubei Province China.

The risk to workers at the Australian border is extremely low.

What is coronavirus?

There are many different coronaviruses that can affect humans and animals. Some coronaviruses cause illness similar to the common cold and other coronaviruses cause more serious illness such as Severe Acute Respiratory Syndrome (SARS) and Middle East respiratory syndrome (MERS). The new coronavirus in China is not thought to be as severe as SARS or MERS.

There has been no evidence to date that this new coronavirus can transmit from person to person in the community or in health care settings.

What is Australia doing?

Consistent with recommendations by the World Health Organization (WHO), no additional border screening measures will be implemented at this time.

Border workers should continue to follow existing processes for screening ill travellers arriving at our international air and sea ports. This includes identification of ill travellers, isolation and referral to Human Biosecurity Officers where indicated.

No international travellers suspecting of having coronavirus have been identified at Australia's borders.

The Australian Department of Health is closely monitoring this situation in collaboration with the WHO and the states and territories.

How can I reduce my low risk even further?

The WHO does not recommend any specific health measures for travellers.

Border staff should continue to follow existing agency infection prevention work instructions when in contact with ill passengers.

General infection prevention measures include:

- Practising and promoting frequent handwashing.
- Practising and promoting good cough etiquette.
- Using personal protective equipment when recommended by agency work instructions.

For general infectious diseases advice and information, please refer to the Department of Health *Infectious Disease Information Sheet for Border Staff*.



There is currently an outbreak of a novel coronavirus (2019-nCoV) in Wuhan, Hubei Province China.

The risk to workers at the Australian border is considered relatively low.

What is coronavirus?

Coronaviruses are a type of virus that can affect humans and animals. Some coronaviruses cause illness similar to the common cold while other coronaviruses cause more serious illness, such as severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS).

The novel coronavirus (2019-nCoV) is primarily affecting people who have recently been in the city of Wuhan, China, or had contact with sick people from Wuhan.

What are the symptoms of 2019-nCoV?

Symptoms of 2019-nCoV include fever, cough, sore throat and difficulty breathing. Difficulty breathing is a sign of possible pneumonia that requires prompt medical attention.

What is Australia doing?

Consistent with recommendations by the World Health Organization (WHO), no mass temperature screening measures will be implemented at this time. To capture ill travellers who may have been exposed to 2019-nCoV, the Department of Health has included additional questions on the Traveller with Illness Checklist (TIC) for biosecurity officers to administer. The Department of Agriculture is in contact with airlines to ensure compliance with pre-reporting requirements of ill travellers.

The Department of Health is also providing additional communication material for travellers at all international ports. This material informs travellers of the symptoms of 2019-nCoV and encourages them to report to biosecurity officers if they are experiencing symptoms while in the port environment if arriving from China.

The Australian Department of Health is closely monitoring this situation in collaboration with the WHO and the states and territories, and will keep border agencies informed.

Border workers should continue to follow existing processes for screening ill travellers arriving at our international air and sea ports using the updated TIC. This includes identification of ill travellers, isolation and referral to human biosecurity officers where indicated.

How can I reduce my risk?

Border staff should continue to follow existing agency infection prevention work instructions when in contact with ill passengers. Use personal protective equipment (PPE) when recommended by agency work instructions.

If interviewing an ill traveller arriving on a flight from a 2019-nCoV risk area, you may wish to wear a mask, gloves and eye protection in accordance with your workplace guidance.



While the infection does not currently appear to spread easily between people, the following measures will also help reduce the risk further:

- Practise and promote frequent handwashing.
- Where possible, stay 1 metre or more away from travellers who are ill.
- Practise and promote good respiratory (cough) etiquette.
- Undertake appropriate cleaning and disinfection activities.
- Use of PPE if close contact with an ill traveller is required.

Border staff working at the primary line, biosecurity bag inspection areas and other areas of the air and sea ports are not considered to be at a high risk¹. PPE is only recommended when assisting in the processing of ill travellers.

For general infectious diseases advice and information, please refer to the Department of Health *Infectious Disease Information Sheet for Border Staff*.

What should I do if I develop symptoms?

There is no need for alarm, however, the 2019-nCoV outbreak is an emerging concern. If you develop symptoms, see a doctor, call ahead and describe your profession as a border worker with possible contact with travellers from risk areas. If you are coughing, ask for a medical mask to wear while you are at the doctor.

You should also:

- Wash your hands frequently
- Use good cough etiquette – cover your mouth and nose when coughing or sneezing and wash your hands afterwards
- Inform your manager of your symptoms

Other information

While 2019-nCoV is of concern and we remain vigilant, it is currently influenza season in the northern hemisphere. It is more likely that travellers displaying infectious symptoms have a common respiratory infection, rather than 2019-nCoV.

¹ Frequent handwashing and cough etiquette should still be practiced in this setting.



Novel Coronavirus Information Sheet

An outbreak of novel coronavirus (2019-nCoV) was detected in Wuhan, Hubei Province, China in late December 2019. It is called a 'novel' virus because it is new, and has not been detected before this outbreak.

The risk to workers at the Australian border is considered low.

What is coronavirus?

Coronaviruses can make humans and animals sick. Some can cause illnesses similar to the common cold while other coronaviruses cause more serious illness, such as Severe Acute Respiratory Syndrome (SARS) and Middle East respiratory syndrome (MERS).

What is novel coronavirus (2019-nCoV)?

There is a new coronavirus primarily affecting people who have recently been in mainland China, particularly Hubei Province, or had contact with sick people from Hubei Province. It's likely that the coronavirus originally came from an animal, and there is now evidence that it can spread from person-to-person. There have been cases of 2019-nCoV reported in other countries.

What are the symptoms of 2019-nCoV?

Symptoms include (but are not limited to) fever, cough, sore throat, fatigue and shortness of breath. Shortness of breath is a sign of possible pneumonia that requires prompt medical attention.

It can take up to 14 days for symptoms to show after a person has been infected. This means when passengers arrive in Australia they are well, however, symptoms may appear days later.

What is Australia doing?

Consistent with recommendations by the World Health Organization (WHO), no mass temperature screening measures will be implemented at this time. To capture ill travellers who may have been exposed to 2019-nCoV, the Department of Health has included additional questions on the Traveller with Illness Checklist (TIC) for biosecurity officers to administer. The Department of Agriculture is in contact with airlines and international vessels to ensure compliance with pre-arrival reporting requirements of ill travellers.

The Department of Health is also providing additional communication material for travellers at all international ports. This material informs travellers of the symptoms of 2019-nCoV and encourages them to report to biosecurity officers if they are experiencing symptoms while in the port environment. All travellers arriving in Australia from Hubei Province are required to isolate themselves in their home for the 14 days following leaving Hubei Province. This requirement is highly precautionary.

The Australian Department of Health is closely monitoring this situation in collaboration with the WHO and the states and territories, and will keep border agencies informed.



Border workers should continue to follow existing processes for screening ill travellers arriving at our international air and sea ports using the updated TIC. This includes identification of ill travellers, isolation and referral to human biosecurity officers where indicated.

How does 2019-nCoV spread?

2019-nCoV is most likely to spread from person to person through:

- direct contact with a person whilst they are infectious;
- contact with droplets when a person with a confirmed infection coughs or sneezes; or
- touching objects or surfaces that are contaminated by droplets from secretions coughed or sneezed from a person with a confirmed infection, and then touching your mouth or face.

Close contacts¹ (such as people staying in the same house or sharing a closed space for a prolonged length of time) are most at risk of infection. However, there is emerging evidence which suggests in some infected persons the virus may be spread the day before symptoms develop.

Risk of infection to border workers from someone who has 2019-nCoV but is not yet displaying symptoms is still considered low.

Who is most at risk of a serious illness?

Some people who are infected may not get sick at all, some will get mild symptoms from which they will recover easily, while some may become very ill.

From previous experience with other coronaviruses, the people at most risk of serious infection are:

- people with compromised immune systems;
- elderly people;
- very young children and babies; and
- people with diagnosed heart and lung conditions.

Pregnant and/or immunocompromised staff should wear personal protective equipment (PPE) when agency work instructions recommend it. If there are concerns about working in the airport environment during this time, you are encouraged to speak to your supervisor.

How can I reduce my risk? When should I wear full PPE?

As 2019-nCoV most likely spreads through direct contact with droplets when an infected person coughs or sneezes, casual contact with travellers who are not showing symptoms is not considered a high risk for infection.

¹ A close contact is someone who has spent more than 15 minutes face-to-face or more than two hours in a closed room with an infected person.



As a precautionary measures, if interviewing an ill traveller or ill crew on a flight or vessel arriving from mainland China, you should wear a mask, full length disposable gown, gloves and eye protection in accordance with your workplace guidance.

PPE must be used appropriately to be effective. If you are required to wear PPE, you should be trained in the correct way to put on, remove and dispose of all PPE. If you are unsure of the process, talk to your supervisor about appropriate guidance.

All used PPE should be placed in a lined bin and disposed of with other waste in the arrivals area of an international airport.

The following measures will also help reduce the risk further:

- Practise and promote frequent handwashing throughout your shift. When hand washing facilities are not readily available, alcohol-based hand sanitiser is recommended. Use according to instructions or receive advice from your supervisor. .
 - If you are regularly handling documents from travellers, it is good practice to use hand sanitiser regularly and avoid touching your face unless your hands are clean.
- Where possible, stay 1 metre or more away from travellers who are ill.
- Practise and promote good respiratory (cough) etiquette.
- Undertake appropriate cleaning and disinfection activities.
- Use of PPE if close contact with an ill traveller is required.

Border staff working at the primary line, biosecurity inspection areas, cargo and mail, processing areas and other areas of air and sea ports are not considered to be at a high risk. PPE in the form of gloves, gowns, eye protection or face shields is not considered necessary when performing these roles. However, frequent handwashing (including the proper use of alcohol-based sanitisers) and cough etiquette should still be practiced in this setting. If a border officer elects to wear disposable gloves, or other PPE items supplied by their agency, regular hand hygiene is still required and care must be taken to avoid breaching the glove material.

What should I do if I develop symptoms?

There is no need for alarm, however, the 2019-nCoV outbreak is an emerging concern. If you develop symptoms, call a doctor and describe your profession as a border worker with possible contact with travellers from risk areas. If you are coughing, ask for a medical mask to wear while you are at the doctor.

You should also:

- Wash your hands frequently.
- Use good cough etiquette – cover your mouth and nose when coughing or sneezing and wash your hands afterwards.
- Inform your supervisor of your symptoms.



Will I be contacted if I have been exposed to someone with 2019-nCoV?

When someone is diagnosed with 2019-nCoV in Australia, health authorities conduct contact tracing. Contact tracing is when public health staff contact people who had close contact² with the unwell person during their contagious period. You will be notified by staff if you have been in close contact with someone who has 2019-nCoV and you will be given information and advice relevant to your exposure.

Other information

While 2019-nCoV is of concern and we remain vigilant, it is currently influenza season in the northern hemisphere. It is more likely that travellers displaying infectious symptoms have a common respiratory infection, rather than 2019-nCoV.

Where can I get more information about 2019-nCoV?

Visit the Australian Government Department of Health's website at www.health.gov.au.

² Close contact is when a person has spent more than 15minutes face-to-face or more than two hours in a closed room with an infected person.



Novel Coronavirus Information Sheet

An outbreak of novel coronavirus (2019-nCoV) was detected in Wuhan, Hubei Province, China in late December 2019. It is called a 'novel' virus because it is new, and has not been detected before this outbreak.

The risk to workers at the Australian border is considered low.

What is coronavirus?

Coronaviruses can make humans and animals sick. Some can cause illnesses similar to the common cold while other coronaviruses cause more serious illness, such as Severe Acute Respiratory Syndrome (SARS) and Middle East respiratory syndrome (MERS).

What is novel coronavirus (2019-nCoV)?

There is a new coronavirus primarily affecting people who have recently been in mainland China, or had contact with sick people from mainland China. It's likely that the coronavirus originally came from an animal, and there is now evidence that it can spread from person-to-person. There have been cases of 2019-nCoV reported in other countries.

What are the symptoms of 2019-nCoV?

Symptoms include (but are not limited to) fever, cough, sore throat, fatigue and shortness of breath. Shortness of breath is a sign of possible pneumonia that requires prompt medical attention.

It can take up to 14 days for symptoms to show after a person has been infected. This means when passengers arrive in Australia they are well, however, symptoms may appear days later.

What is Australia doing?

Consistent with recommendations by the World Health Organization (WHO), no mass temperature screening measures will be implemented at this time. To capture ill travellers who may have been exposed to 2019-nCoV, the Department of Health has included additional questions on the Traveller with Illness Checklist (TIC) for biosecurity officers to administer. The Department of Agriculture is in contact with airlines and international vessels to ensure compliance with pre-arrival reporting requirements of ill travellers.

The Department of Health is also providing additional communication material for travellers at all international ports. This material informs travellers of the symptoms of 2019-nCoV and encourages them to report to biosecurity officers if they are experiencing symptoms while in the port environment. All travellers arriving in Australia from mainland China are required to isolate themselves in their home for the 14 days following leaving mainland China.

The Australian Department of Health is closely monitoring this situation in collaboration with the WHO and the states and territories, and will keep border agencies informed.



Border workers should continue to follow existing processes for screening ill travellers arriving at our international air and sea ports using the updated TIC. This includes identification of ill travellers, isolation and referral to human biosecurity officers where indicated.

How does 2019-nCoV spread?

2019-nCoV is most likely to spread from person to person through:

- direct contact with a person whilst they are infectious;
- contact with droplets when a person with a confirmed infection coughs or sneezes; or
- touching objects or surfaces that are contaminated by droplets from secretions coughed or sneezed from a person with a confirmed infection, and then touching your mouth or face.

Close contacts¹ (such as people staying in the same house or sharing a closed space for a prolonged length of time) are most at risk of infection. However, there is emerging evidence which suggests in some infected persons the virus may be spread the day before symptoms develop.

Risk of infection to border workers from someone who has 2019-nCoV but is not yet displaying symptoms is still considered low.

Who is most at risk of a serious illness?

Some people who are infected may not get sick at all, some will get mild symptoms from which they will recover easily, while some may become very ill.

From previous experience with other coronaviruses, the people at most risk of serious infection are:

- people with compromised immune systems;
- elderly people;
- very young children and babies; and
- people with diagnosed heart and lung conditions.

Pregnant and/or immunocompromised staff should wear personal protective equipment (PPE) when agency work instructions recommend it. If there are concerns about working in the airport environment during this time, you are encouraged to speak to your supervisor.

How can I reduce my risk? When should I wear full PPE?

As 2019-nCoV most likely spreads through direct contact with droplets when an infected person coughs or sneezes, casual contact with travellers who are not showing symptoms is not considered a high risk for infection.

¹ A close contact is someone who has spent more than 15 minutes face-to-face or more than two hours in a closed room with an infected person.



If interviewing an ill traveller or ill crew on a flight or vessel arriving from mainland China, you should wear a mask, full length disposable gown, gloves and eye protection in accordance with your workplace guidance.

PPE must be used appropriately to be effective. If you are required to wear PPE, you should be trained in the correct way to put on, remove and dispose of all PPE. If you are unsure of the process, talk to your supervisor about appropriate guidance.

All used PPE should be placed in a lined bin and disposed of with other waste in the arrivals area of an international airport.

The following measures will also help reduce the risk further:

- Practise and promote frequent handwashing throughout your shift. When hand washing facilities are not readily available, alcohol-based hand sanitiser is recommended. Use according to instructions or receive advice from your supervisor.
 - If you are regularly handling documents from travellers, it is good practice to use hand sanitiser regularly and avoid touching your face unless your hands are clean.
- Where possible, stay 1 metre or more away from travellers who are ill.
- Practise and promote good respiratory (cough) etiquette.
- Undertake appropriate cleaning and disinfection activities.
- Use of PPE if close contact with an ill traveller is required.

Border staff working at the primary line, biosecurity inspection areas, cargo and mail, processing areas and other areas of air and sea ports are not considered to be at a high risk. PPE in the form of gloves, gowns, eye protection or face shields is not considered necessary when performing these roles. However, frequent handwashing (including the proper use of alcohol-based sanitisers) and cough etiquette should still be practiced in this setting. If a border officer elects to wear disposable gloves, or other PPE items supplied by their agency, regular hand hygiene is still required and care must be taken to avoid breaching the glove material.

What should I do if I develop symptoms?

There is no need for alarm, however, the 2019-nCoV outbreak is an emerging concern. If you develop symptoms, call a doctor and describe your profession as a border worker with possible contact with travellers from risk areas. If you are coughing, ask for a medical mask to wear while you are at the doctor.

You should also:

- Wash your hands frequently.
- Use good cough etiquette – cover your mouth and nose when coughing or sneezing and wash your hands afterwards.
- Inform your supervisor of your symptoms.



Will I be contacted if I have been exposed to someone with 2019-nCoV?

When someone is diagnosed with 2019-nCoV in Australia, health authorities conduct contact tracing. Contact tracing is when public health staff contact people who had close contact² with the unwell person during their contagious period. You will be notified by staff if you have been in close contact with someone who has 2019-nCoV and you will be given information and advice relevant to your exposure.

Other information

While 2019-nCoV is of concern and we remain vigilant, it is currently influenza season in the northern hemisphere. It is more likely that travellers displaying infectious symptoms have a common respiratory infection, rather than 2019-nCoV.

Where can I get more information about 2019-nCoV?

Visit the Australian Government Department of Health's website at www.health.gov.au.

² Close contact is when a person has spent more than 15 minutes face-to-face or more than two hours in a closed room with an infected person.



Novel coronavirus (2019-nCov) – FAQs

Updated – 11 February 2020

This information is supplementary to the information provided in the Home Affairs factsheet Novel coronavirus (2019-nCoV) PPE requirements and Department of Health information on their website, which should be consulted for additional information.

How is the coronavirus spread?

The coronavirus is most likely to spread from person-to-person through:

- direct close contact with a person whilst they are infectious
- close contact with a person with a confirmed infection coughs or sneezes
- touching objects or surfaces (such as door knobs or tables) contaminated from a cough or sneeze from a person with a confirmed infection, and then touching your mouth or face.

Most infections are only transmitted by people when they have symptoms. These can include fever, a cough, sore throat, tiredness and shortness of breath.

What is the risk?

The Department of Health advice continues to indicate that the risk of transmission of novel coronavirus to our officers who are not in “close contact” with someone who is ill with novel coronavirus is low.

“Close contact” generally relates to cohabitation, more than 15 minutes of close interaction or more than 2 hours in an enclosed space (for example, a room).

If you believe that you may have been in contact with someone who is ill with coronavirus for a longer period than outlined above, please talk to your supervisor about the circumstances. If you need to stay at home in self-isolation, the Department will grant you additional miscellaneous leave with pay for this purpose.

What can I do to protect myself against the virus?

Practising good hand hygiene and sneeze/cough hygiene is the best defence against most viruses.

You should:

- wash your hands often with soap and water before and after eating as well as after attending the toilet
- avoid contact with others (including touching, kissing, hugging, and other intimate contact)
- cough and sneeze into your elbow
- where possible, stay one metre or more away from people who are ill
- use personal protective equipment (PPE) if close contact with an ill traveller is required.

Advice about the PPE that officers should be using is available [here](#).

What do I do if I have been in contact with a traveller or a member of the public through work who has symptoms of novel coronavirus?

The Department of Health advice continues to indicate that the risk of transmission of novel coronavirus to our officers who are not in “close contact” with someone who is ill with novel coronavirus is low.

“Close contact” generally relates to cohabitation, more than 15 minutes of close interaction or more than 2 hours in an enclosed space (for example, a room) without wearing PPE.

If you believe that you may have been in contact with someone who has symptoms of novel coronavirus for a longer period than outlined above and you were not wearing the recommended PPE, please talk to your supervisor about the circumstances.

While coronavirus is of concern, it is currently influenza season in the northern hemisphere. It is more likely that travellers displaying infectious symptoms have a common respiratory infection, rather than coronavirus. Testing will be undertaken in order to confirm if a traveller has coronavirus.

If someone is diagnosed with coronavirus in Australia, health authorities conduct contact tracing. Public health staff contact people who had close contact (based on the criteria above) with the ill person during their contagious period. You will be notified by Public health staff if you have been in close contact with someone who has tested positive for coronavirus and you will be given information and advice relevant to your exposure.

If you are contacted, please notify your supervisor and comply with the directions provided to you immediately. The Department will grant you additional miscellaneous leave with pay if you are requested to self-isolate and will also work with the relevant public health authority to provide you with any other support you may need.

What do I do if I have been in contact with a traveller or a member of the public through work who has tested positive for novel coronavirus?

The Department of Health advice continues to indicate that the risk of transmission of novel coronavirus to our officers who are not in “close contact” with someone who is ill with novel coronavirus is low.

“Close contact” generally relates to cohabitation, more than 15 minutes of close interaction or more than 2 hours in an enclosed space (for example, a room) without wearing PPE.

If someone is diagnosed with coronavirus in Australia, health authorities conduct contact tracing. Public health staff contact people who had close contact (based on the criteria above) with the ill person during their contagious period. You will be notified by Public health staff if you have been in close contact with someone who has tested positive for coronavirus and you will be given information and advice relevant to your exposure.

If you are contacted, please notify your supervisor and comply with the directions provided to you immediately. The Department will grant you additional miscellaneous leave with pay if you are requested to self-isolate and will also work with the relevant public health authority to provide you with any other support you may need.

I have tested positive to the novel coronavirus (2019-nCoV), what do I do?

If you have tested positive to the novel coronavirus, please notify your supervisor and comply with all directions provided to you by health authorities.

The Department will grant you additional miscellaneous leave with pay for the period you are required to remain isolated and will also work with the relevant public health authority to provide you with any other support you may need.

Further advice is available on the Department of Health website [here](#)

I have been in close contact with someone who has tested positive to the novel coronavirus (2019-nCoV), what do I do?

If someone is diagnosed with coronavirus in Australia, health authorities conduct contact tracing. Public health staff contact people who had close contact (based on the criteria above) with the ill person during their contagious period. You will be notified by Public health staff if you have been in close contact with someone who has tested positive for coronavirus and you will be given information and advice relevant to your exposure.

If you are contacted, please notify your supervisor and comply with the directions provided to you immediately. The Department will grant you additional miscellaneous leave with pay if you are requested to self-isolate and will also work with the relevant public health authority to provide you with any other support you may need.

Further advice on self-isolation is available on the Department of Health website [here](#)

What precautions are in place for staff returning from mainland China?

Any officer who has returned from mainland China must self-isolate in their home for 14 days after leaving mainland China.

Advice from the Department of Health is available [here](#)

The Department will grant up to 14 days of additional miscellaneous leave with pay for this purpose.

If you remain well throughout this period, you should return to work once the 14 day period concludes.

If you develop any symptoms, you should call a doctor or hospital and tell them about their recent travel history or your contact with someone who has travelled. In this instance, you should obtain medical clearance before you return to work.

What if my child or someone I have primary caring responsibilities for has recently returned from mainland China?

Returned travellers who have been in mainland China must be isolated in their home for 14 days after leaving mainland China.

If someone you have primary caring responsibility for meets this criteria, you should advise your supervisor that you will need to be absent from work and comply with the self-isolation direction immediately. Advice from the Department of Health is available [here](#)

The Department will grant up to 14 days of additional miscellaneous leave with pay for this purpose.

If you and the person you are caring for remains well throughout this period, you should return to work once the 14 day period concludes.

If you or the person you are caring for develops any symptoms, please call a doctor or hospital and tell them about your recent travel history or your contact with someone who has travelled. Follow their instructions and obtain medical clearance before you return to work.

If someone in my household who I don't have primary caring responsibilities for is in self-isolation, am I required to be in self-isolation also?

The Department of Health advises that other members of the household are not required to be isolated unless they meet one of the following criteria for self-isolation:

- If they themselves have left mainland China less than 14 days ago.
- If they have been identified as a close contact of a confirmed case of coronavirus, they must isolate themselves for 14 days after their last contact with the confirmed case.

If the person in their household who is in self-isolation becomes unwell and are suspected to have novel coronavirus, members of the household will then be classified as close contacts and will need to be isolated.

You will be notified by Public health staff if you have been in close contact with someone who has tested positive for coronavirus and you will be given information and advice relevant to your exposure.

If you are contacted, please notify your supervisor and comply with the directions provided to you immediately. The Department will grant you additional miscellaneous leave with pay if you are requested to self-isolate and will also work with the relevant public health authority to provide you with any other support you may need.

Further advice on self-isolation is available on the Department of Health website [here](#)

Miscellaneous leave with pay is only available to staff who are required to self-isolate themselves and for staff who are the primary care giver for someone who has to self-isolate (such as a young child or an elderly parent).

How effective are face masks to shield against novel coronavirus?

The Department of Health has advised that surgical masks, P2 masks and N95 masks provide protection from coronavirus when used in certain circumstances and in accordance with the instructions provided in our departmental [PPE advice](#).

Based on the current evidence, the Department of Health advises that:

- At the border, where risk is still minimal but higher than the general community, surgical masks are sufficient.
- The advice for health care workers other than those performing high-risk procedures (i.e. taking specimens) is surgical masks.
- P2/N95 masks are reserved for high-risk procedures in health care settings and other high-risk situations.

You can use surgical masks, P2 masks and N95 masks based on availability in your workplace.

The Department of Health's advice is that face masks are not recommended for members of the general public and that the best approach to avoid getting sick is to practise good hand hygiene and to avoid contact with people who are sick.

Is it mandatory to wear a mask if performing a high-risk function or does it remain at the individual's discretion?

PPE must be worn if dealing with unwell travellers.

In other cases, where PPE is recommended in order to minimise coronavirus risk, those officers should wear PPE. If you choose not to wear PPE, hand-hygiene becomes even more important.

All staff are advised that good hand hygiene practices are your best line of defence.

- You should undertake frequent handwashing throughout your shift using adequate soap and water, and follow advice on your hand washing technique.
- When hand washing facilities are not readily available, alcohol-based hand sanitiser of at least 60% ethanol is recommended. Use according to instructions.
- If you are unable to access hand washing stations and are sensitive to alcohol based hand rubs / hand sanitiser, you are required to use nitrile disposable gloves.
- It is important that you change gloves regularly, ensuring you do not touch the "dirty" gloves with your "clean" hand(s) during gloves removal and do not touch your face when wearing gloves.
- You must practise and promote good respiratory (cough) etiquette.
- Undertake appropriate cleaning and disinfection activities.

Where possible, stay one metre or more away from anyone who is ill.

Additionally, staff who are pregnant and/or immunocompromised who work in public facing roles are requested to wear masks whenever they are undertaking functions that involve public contact.

Further advice about the safety precautions required is available [here](#).

What PPE protocols should be in place for officers working at counters, when dealing with clients who may have been to mainland China recently?

Advice about PPE for counter staff is available [here](#).

Officers undertaking roles in the Australian community are not currently considered to be at risk, however they should exercise good hygiene and general safety precautions in order to minimise their risk of any exposure to anyone who may have become ill after arriving in Australia.

All ABF officers and Department staff should follow these general safety precautions:

- Practise and promote frequent handwashing.
- Where hand washing facilities are not readily available, alcohol-based hand sanitiser of at least 60% ethanol is recommended. Use according to instructions.
- If you are regularly handling documents, it is good practise to use hand sanitiser regularly and avoid touching your face unless your hands are clean.
- Where possible, stay one metre or more away from travellers who are ill.
- Practise and promote good respiratory (cough) etiquette.
- Undertake appropriate cleaning and disinfection activities.

[Brochures](#) are available in English and simplified Chinese that explain the symptoms and medical support arrangements for anyone who becomes ill in the Australian community.

If anyone in the Australian community presents to you with symptoms and has recently returned from mainland China or has been in close contact with someone who has recently returned, the individual should be provided with a mask if they are not currently wearing one and they should be assisted to obtain medical advice.

You should stay one metre or more away from any person who is ill.

- For mild symptoms, contact should be made with a doctor or hospital providing the individual's recent travel history.
- If the individual is experiencing serious symptoms such as difficulty breathing, Department of Health's advice is to call 000 and ask for an ambulance and notify the officers of the individual's recent travel history

You must not proceed with an interview of an individual who is presenting with symptoms.

Masks and gloves are not required in these roles, but if you are concerned about your safety and wellbeing, you can use either a mask and/or nitrile gloves. If you do, all of the same good practices around use of PPE should be followed.

What additional precautions are recommended for people who are pregnant or at high risk?

Additional precautions should be taken by individuals who have proven more susceptible to previous outbreaks of coronavirus. The people at most risk of serious infection are:

- people who are pregnant or have compromised/weakened immune systems
- elderly people
- very young children and babies
- people with diagnosed heart and lung conditions.

All staff that meet this criteria and who work in public facing roles are requested to wear masks and nitrile gloves whenever they are undertaking functions that involve public contact. All good practices around use of PPE should be followed.

Further advice about the safety precautions required is available [here](#).

Why are other departmental agencies wearing different PPE?

Different agencies perform different functions in response to the novel coronavirus.

If you are asked to undertake duties on behalf of another agency (like the Department of Agriculture), you should check with your supervisor that this has been agreed to by the Department or ABF in order to support the delivery of Government policy.

Any ABF officer temporarily performing duties to assist another Department must implement the safety measures and the PPE associated with that function. You must be provided with the required PPE by that Department and must be instructed in its correct use before you commence those duties.

If the duties being performed require a lesser level of PPE than those required in your normal ABF duties, the [ABF PPE](#) requirements should continue to be implemented.

Will hand sanitisers be provided at main entrance points within buildings (i.e. security desks)?

Not at this point. Alcohol based hand sanitiser and disinfectant wipe supplies are currently being prioritised for distribution in work areas where officers are undertaking traveller clearance functions and interacting directly with the public.

Hand sanitisers must contain at **minimum of 60% alcohol content** in order to be effective against coronavirus.

What advice do we provide to new starters to the Department that may have been in China or come into contact with someone that may be infected?

Workers, including new starters, who have been in mainland China must be isolated in their home for 14 days after leaving mainland China.

If they, or someone they have primary caring responsibility for meets this criteria, they will need to be absent from work and comply with the direction immediately. The Department will grant up to 14 days of additional miscellaneous leave with pay for this purpose.

If they remain well throughout this period, they should return to work once the 14 day period concludes.

If they develop any symptoms, they should call a doctor or hospital and tell them about their recent travel history or their contact with someone who has travelled. In this instance, they should follow medical advice and obtain medical clearance before commence work.

All new starters should be provided with a briefing on relevant information and procedures to prevent the spread of 2019-nCoV.

How do departmental staff order PPE?

Based on the information provided by the Department of Health, safety precautions are required for a range of Home Affairs staff who:

- undertake traveller clearance functions
- undertake roles in the Australian Community where they deal directly with the public
- are pregnant or immunocompromised (weakened immune system) and work in public facing roles
- have recently travelled to mainland China
- have been in direct contact with an individual who has tested positive to the novel coronavirus.

Further advice about the safety precautions required is available [here](#).

If you work in a departmental work area which requires PPE, a request can be sent to WHS@homeaffairs.gov.au, containing the following information:

- section and location requiring the PPE
- what PPE is required
- how many items are required
- business reason for the PPE request with appropriate approval
- a contact point (EL1 or EL2) within the section requesting the PPE.

What advice can I provide to staff who are concerned about the risk this new virus presents to them and their family?

Staff who have serious concerns about working in the airport/seaport environment during this time are encouraged to speak to their supervisors. It is otherwise expected that they will continue to perform their usual duties.

As per the [Information Sheet for Border Staff](#) released by Department of Health for officers, “the risk of infection to border workers from someone who has 2019-nCoV but is not yet displaying symptoms is still considered low”.

Officers should continue to follow existing processes for screening ill travellers arriving at our international air and sea ports.

Additional safety precautions have been implemented for officers who are pregnant or immunocompromised (weakened immune systems) and work in public facing roles.

Further advice about the safety precautions required is available [here](#).

I have staff due to travel to overseas this month on separate work trips. In light of the escalating situation with coronavirus, should this travel proceed?

International travellers should check the latest Department of Foreign Affairs and Trade (DFAT) travel advice on the [Smartraveller](#) website.

DFAT have raised their advisory to 'level 4 – do not travel to all of mainland China'.

What do I need to do if I am travelling to other countries in the course of my duties?

If you develop symptoms (fever, a cough, sore throat, tiredness or shortness of breath) within 14 days of your return, you should arrange to see your usual doctor for urgent assessment. You should telephone the health clinic or hospital before you arrive and tell them your travel history.

You should follow all medical advice and notify your supervisor.

Questions

If you have any questions about your safety, please talk to your supervisor in the first instance. If you still have questions, please send them to whs@homeaffairs.gov.au so we can address them in future advice.

Staff are encouraged to stay up-to-date with information via the [Department of Health website](#). Information that is specific to Department and ABF will be made available on [MyHR](#) as it becomes available.

Take care of your mental wellbeing

If you are experiencing difficulties, you can get help through the [Employee Assistance Program](#) (1300 793 883), which provides professional, confidential counselling and support services. The program is available at no charge for you and your immediate family. You can also find a range of other internal and external [support services](#) on the intranet.

In addition to the regular 24/7 EAP service, a dedicated EAP clinician is available for direct and confidential contact _____ each day, 8 am to 4.30 pm, until 14 February.

The dedicated EAP clinician phone contact may be extended beyond this time subject to circumstances.

****Email advice circulated to ABF workforce – Friday 10 January 2020****

Pneumonia of Unknown Cause – China

As of 3 January 2020, the World Health Organisation (WHO) has informed of 44 cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province of China. The causal agent has not yet been identified or confirmed. National authorities report that all affected patients are isolated and receiving treatment in Wuhan medical institutions.

Based on preliminary information from the investigation team, no evidence of significant human-to-human transmission and no health care worker infections have been reported. WHO is closely monitoring the situation and is in close contact with national authorities in China.

Until further information is made available, WHO's recommendations on public health measures around the prevention of influenza and severe acute respiratory infections apply. These include practicing hand hygiene using alcohol –based [hand rubs](#) (or [handwashing](#) if hands are visibly soiled), and donning of a surgical mask if staff are concerned about their risk of transmission when interacting with passengers off flights coming from Wuhan City, China (if any).

In case of symptoms suggestive of respiratory illness (i.e. fever, difficulty breathing), staff are encouraged to seek medical attention and share history of possible contact with travellers from Wuhan City with their healthcare provider.

For more information, please refer to [WHO's Pneumonia of Unknown Cause factsheet](#).