

Individual Risk Management Plan

NSW Health Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases Policy Directive

Instructions

An individual risk management plan must be completed for:

- Workers/students that are unprotected due to a medical contraindication to measles, mumps, rubella (MMR), varicella, diphtheria, tetanus and pertussis vaccination; or
- New recruits who have not completed the MMR and/or varicella vaccination requirements and have been granted temporary compliance to commence employment.

For new recruits and workers (excluding students)

The Individual Risk Management Plan (IRMP) may be drafted by Staff Health or a Senior OASV Assessor, however it is the responsibility of the position manager to assess if the position is suitable for risk management. The position manager must provide a copy of the signed and completed IRMP to Staff Health or the Senior OASV Assessor and new recruit/worker.

This information must be recorded in VaxLink.

For students

The manager of the unit in which the student will be attending placement is responsible for assessing if the student is suitable to be risk managed during the placement and completing and returning the completed IRMP to the Student Compliance Team.

This information must be recorded in ClinConnect and a copy of the IRMP provided to the student.

Personal Details

Full name:

Date of birth:

Contact number:

Work/placement location:

Employee/Student ID number:

NSW Health Agency/Education provider:

Email:

Managers name:

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Full name:

Date of birth:

Employee/Student ID number:

Risk Identification

Permanent medical contraindication

MMR vaccine

Varicella vaccine

dTpa vaccine

Temporary medical contraindication (date exemption ends)

MMR vaccine

Varicella vaccine

Temporary compliance (not applicable to students)

MMR vaccine (Dose 1 received)

Varicella vaccine (Dose 1 received)

Risk and Consequences of Exposure

Exposure risk:

High risk area/ duties:

Antenatal, perinatal and post-natal areas including labour wards and recovery rooms and antenatal outreach programs

Neonatal intensive care units; special care units; any home visiting health service and community-based setting service provided to neonates

Paediatric intensive care units

Transplant and oncology wards

Respiratory wards

Emergency departments

Intensive care units

Multipurpose Services (NSW Health)

NSW Health Residential aged care facilities

Consequences of exposure:

'Supporting Documentation for New Recruit/Workers/Students' included at the end of the IRMP provided to new recruit/worker/student.

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Full name:

Date of birth:

Employee/Student ID number:

General Overall Risk Mitigation Strategies Including Testing Requirements

Risk mitigation in the event of exposure:

'Supporting Documentation for New Recruit/Workers/Students' included at the end of the IRMP provided to new recruit/worker/student.

Testing requirements (if applicable):

General risk mitigation strategies: (select all that are applicable)

Exclude from patients/areas known or suspected to have disease for which new recruit/worker/student is unprotected

Exclusion from clinical duties as per disease specific guidelines

Assessment by a medical practitioner to be non-infectious if they develop symptoms of unprotected disease

Completion of all mandatory Infection Prevention and Control My Health Learning Modules

Wear a surgical mask in clinical areas

Wear a surgical mask with face shield in clinical areas

Wear a P2/N95 mask in clinical areas

Goggles (not glasses/spectacles) for eye protection

Double gloving

Cover all cuts and abrasions with an occlusive dressing until wound is healed

Other PPE requirements (specify):

Other risk management strategies

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Full name:

Date of birth:

Employee/Student ID number:

Implementation

Person(s) responsible (manager) (full name and position):

Signature:

Date:

Contact details:

Outstanding Requirements (if applicable)

Due date:

Due date:

Review

Review date:

This Individual Risk Management Plan will be:

Temporary until _____ and will require further medical review on _____ OR

Permanent (annual review recommended) OR

For students only: valid during the current clinical placement from _____ to _____

Outcome of review

Are the risk mitigation measures in place?

Are there any new risk issues identified?

Outcome of review:

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Full name:

Date of birth:

Employee/Student ID number:

Declaration of Understanding (new recruit/worker/student) (please tick applicable options only)

I understand that I am an unprotected new recruit/worker/student.

I understand the risk and consequences of remaining unprotected.

I understand and agree to comply with the additional risk management measures outlined in my individual risk management plan including redeployment to an area of lower risk if required.

I agree to notify my manager/onsite supervisor if there any changes to my medical status or I develop any symptoms following contact with a person with a suspected infectious disease.

In addition, for new recruits who are granted temporary compliance:

I understand that my letter of offer is conditional on completion of all outstanding vaccinations within the required timeframe(s). Failure to do so will result in suspension clinical placements/ duties and may jeopardise further employment/ studies.

I understand that it is a condition of my employment that I must complete this vaccination by the stated date and I agree to send the documentation to:

Signature:

Date:

Declaration of understanding (manager) (please tick applicable only)

I understand that it is my responsibility as manager to ensure the new recruit/worker/student understands the terms of this individual risk management plan.

I understand that it is my responsibility as manager to ensure this worker complies with the risk mitigations measures for the duration of the individual risk management plan.

I agree to ensure the new recruit submits the required vaccination/s evidence by the required date and/or advise Staff Health if there are issues with reaching compliance by the due date.

Signature (manager):

Date:

Staff Health/Senior OASV Assessor or Student Compliance Assessor Use Only

Received by (full name and position):

Date completed:

Signature:

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Supporting Documentation for New recruits/ Workers/Students

NSW Health Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases Policy Directive

Full name:

Date of birth:

Employee/Student ID number:

Information

The NSW Health [Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases Policy Directive](#) requires all Category A new recruits/workers/students to be protected against a range of vaccine preventable diseases.

Risk to new recruits/workers/students that are unprotected due to a medical contraindication to measles, mumps, rubella (MMR), varicella, diphtheria, tetanus or pertussis vaccination or new recruits who have not completed the MMR and/or varicella vaccination requirements and have been granted temporary compliance to commence employment, must be managed under an individual risk management plan.

Temporary compliance means a new recruit has been approved to commence work on the condition that the outstanding vaccination requirements are completed by the required due date.

While a new recruit/worker/student is unprotected, they are at risk of exposure and acquiring and transmitting the infectious disease that they are not protected against to others in the workplace including patients. It is therefore important that new recruits/workers/students understand the risks and consequences of exposure and comply with the additional risk management strategies included in their individual risk management plan.

Employment arrangements during exclusion periods

Where an unprotected worker is exposed to a communicable disease, prescribed periods of exclusion as defined by in Appendix 4 Risk Management Framework of PD2024_015 are applicable.

Community exposure (including personal overseas travel)

Where practicable to do so, the NSW Health agency will provide duties that can be performed away from the workplace.

Where this is not practicable, the unprotected worker is able to access their leave entitlements (annual leave, long service leave etc), subject to application and approval processes.

Exposure relating to NSW Health employment

Where practicable to do so, the NSW Health agency will provide duties that can be performed away from the workplace.

Where this is not practicable, full-time and part-time workers are entitled to be paid at their full rate of pay for the hours they would have worked if they were not excluded due to workplace exposure.

Casual workers will be paid at their full rate of pay for the hours they were rostered to work in the period they were excluded due to workplace exposure.

Exposure resulting in illness

Where the unprotected worker contracts the communicable disease; usual sick leave provisions apply. Where the exposure relates to NSW Health employment, workers compensation provisions apply.

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Full name:

Date of birth:

Employee/Student ID number:

Disease Factsheet – Date provided to new recruit/worker/student

Pertussis (Whooping cough)

Highly infectious bacterial infection spread by respiratory droplets through coughing or sneezing.

Cough that persists for more than 3 weeks and may be accompanied by paroxysms, resulting in a “whoop” sound or vomiting. Can be fatal, especially in babies under 12 months of age.

Neither infection nor vaccination provide long-lasting immunity, however vaccinated people have less severe disease.

For more information: <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/pertussis.aspx>

Measles

Highly infectious viral disease spread by respiratory droplets. Infectious before symptoms appear and for several days afterwards. Serious complications such as ear infection, pneumonia, or encephalitis can occur in up to 1/3 of cases.

At risk are persons born during or after 1966 who haven't had 2 doses of MMR vaccine, babies under 12 months of age, before they have had a first dose and children over 18 months of age who have not had a second dose.

For more information: http://www.health.nsw.gov.au/Infectious/factsheets/Pages/measles_factsheet.aspx

Mumps

Viral disease spread by respiratory droplets. Now relatively uncommon in Australia because of immunisation.

Anyone not immune through vaccination or previous infection is at risk. Persons who have the infection after puberty can have complications, such as swelling of testes or ovaries; encephalitis or meningitis may occur rarely.

For more information: <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/mumps.aspx>

Rubella

Viral disease spread by respiratory droplets and direct contact. Infectious before symptoms appear and for several days afterwards.

Anyone not immune through vaccination or previous infection is at risk. Infection in pregnancy can cause birth defects or miscarriage.

For more information: <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/rubella-german-measles.aspx>

Varicella (chickenpox)

Viral disease, usually mild, but can be severe, especially in immunosuppressed persons. Complications include pneumonia and encephalitis. In pregnancy, can cause foetal malformations. Early in the infection, varicella can be spread through coughing and respiratory droplets; later in the infection, it is spread through contact with fluid in the blisters.

Anyone not immune through vaccination or previous infection is at risk.

For more information: <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/chickenpox.aspx>

Tetanus

Infection from a bacterium usually found in soil, dust and animal faeces, generally occurs through injury. Toxin from the bacterium can attack the nervous system. Although the disease is now fairly uncommon, it can be fatal and is seen mostly in older adults who were never adequately immunised. Not spread from person to person.

Neonatal tetanus can occur in babies of inadequately immunised mothers.

For more information: <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/tetanus.aspx>

Diphtheria

Contagious, potentially life-threatening bacterial infection, now rare in Australia because of immunisation. Spread via respiratory droplets and discharges from the nose, mouth or skin. Infectious for up to 4 weeks from onset of symptoms.

Anyone not immune through vaccination or previous infection is at risk. Diphtheria toxin (produced by the bacteria) can cause inflammation of the heart muscle, leading to death.

For more information: <http://www.health.nsw.gov.au/Infectious/factsheets/Pages/diphtheria.aspx>

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Full name:

Date of birth:

Employee/Student ID number:

Disease Specific Risk Mitigation Strategies – Date provided to new recruit/worker/student

Measles

An unprotected worker must be excluded from working in the clinical area (as specified in Section 2.1.1 Category A positions) for 14 days after they have returned from overseas.

The unprotected worker must also be excluded from all clinical duties until assessed by a medical practitioner to be non-infectious if they, develop a fever, new unexplained rash or coughing illness. Public health unit advice must be sought if the unprotected worker has been in contact with a measles case.

Following contact with a measles case, an unprotected worker must be offered the MMR vaccine within 72 hours of exposure or normal human immunoglobulin (NHIG) within 144 hours (6 days).

Those who refuse/are unable to be vaccinated must be excluded from clinical duties for 18 days after the last exposure to the infectious case.

Mumps

A worker who develops mumps must be excluded from all clinical duties for 9 days following the onset of swelling or until fully recovered, whichever is sooner.

Rubella

An unprotected worker must be excluded from all clinical duties for 21 days following exposure to a rubella case, or at least 4 days after the onset of a rash if illness develops.

Unprotected pregnant women or women planning pregnancy should avoid contact with people experiencing possible symptoms of rubella due to the risks associated with rubella infection in pregnancy.

Following contact with a confirmed rubella case, unprotected pregnant women must be offered normal human immunoglobulin (NHIG) within 5 days of exposure in

line with advice in the Australian Immunisation Handbook and in consultation with the treating obstetrician or general practitioner.

Varicella

Following contact with a varicella/shingles case, an unprotected worker must be offered varicella vaccine as soon as possible and within 5 days of exposure or varicella-zoster immunoglobulin (VZIG) within 96 hours (4 days).

Those who refuse/are unable to be vaccinated must be excluded from clinical duties for 21 days after the last exposure to the infectious case.

Pertussis

Following exposure to a pertussis case, an unprotected worker must be excluded from all clinical duties until they have completed a 5-day course of an appropriate antibiotic.

In situations during an outbreak at a facility where asymptomatic unprotected workers have been recommended and refused antibiotics, they must be excluded from all clinical duties for 14 days following exposure to a pertussis case.

Tetanus

For unprotected workers with a medical contraindication to tetanus-toxoid vaccines and a tetanus-prone wound due to occupational exposure, consider using tetanus immunoglobulin in consultation with an infectious diseases disease specialist or senior emergency department consultant.

Diphtheria

If an unprotected worker is exposed to diphtheria, contact management should be undertaken in consultation with the local public health unit.

To be completed by the person providing this information to the new recruit/worker/student

Completed by (full name and position):

Date completed:

Signature: