# **Fact sheet - Considerations for business continuity**

The fact sheet (current as of 16 March 2020) aims to support services to develop a business continuity plan in the event that your service is affected by COVID-19. The fact sheet is intended to be used in conjunction with the *COVID-19 Checklist for AOD NGO Services* to prepare your service for contingency planning. Below are key factors for consideration in developing a business continuity plan.

## **Clients:**

### Does the plan consider?

* Management and acknowledgement of fear and anxiety experienced by clients.
* Impacts on vulnerable populations (pregnant women, elderly, people with comorbidities, Aboriginal and Torres Strait Islander communities, carers)
* Any special requirements related to the age, demographics and comorbidity of your clients
* Ability for clients to access treatment service, should service closure occur.
* Whether clients can access take home naloxone at community pharmacies (For a list of services supplying take home naloxone go to <https://yourroom.health.nsw.gov.au/getting-help/Pages/Naloxone.aspx>)
* Communication about isolation and treatment access should an individual become infected or be at risk of infection (i.e. through travel or contact with a known case).
* Access and distribution of up-to-date information about COVID-19.

## **Staffing, education and training:**

### Does the plan consider?

* Management and acknowledgement of fear and anxiety experienced by staff.
* Monitoring staff wellbeing and fatigue if extended working hours are required.
* Isolation or segregation of staff (if required) and what this means for service capacity.
* Training and education in infection control measures such as hand hygiene and use of Personal Protection Equipment (PPE).
* The criticality of your service/s. *You can seek this information by contacting your local Emergency Response Unit.*
* Distribution and access of up-to-date information about COVID-19.

## **Resources, service impacts and logistical impacts:**

Does the plan consider?

* Infection control and cleaning procedures such as:
  + Client and/or staff isolation,
  + Increase surface cleaning and disinfecting,
  + Increase supply, use and stock of Personal Protection Equipment (PPE),
  + Ensure normal infectious clinical waste processes and management,
  + Ensure normal linen management processes.
* Medication supply and delivery options.
  + Consider impact of supply chains and other logistics.
* Use of alternate modes of service delivery, where possible and appropriate:
  + Face-to-face, telehealth, digital.
* Impact of community service closures:
  + GPs and pharmacies
* Emergency care for high risk clients.
* The management of OTP should nurses be unable to work.
* Identifying the key contacts within your LHD and community.

# **Infection prevention and control examples:**

### Refer to NSW Health website for updated infection control measures

* Undertake routine transmission based precautions
* Enhance hand hygiene by washing hands via hand rub technique with soap and water and/or alcohol-based hand rub
* Encourage appropriate respiratory etiquette for example coughing and sneezing into elbow

## Keep yourself updated on COVID-19 by visiting the [**NSW Health website**](https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus.aspx)