



Supporting organisational
preparedness:
QNADAs COVID response

Our Approach

- Provide as specific advice and guidance as possible so that it is most useful and relevant to the AOD sector.
- Facilitate space for services to come together regularly to exchange information and issues and share individual service approaches.
- Collaborate with the State and Commonwealth Governments on issues and advice.

May 2020

Dear Residential Service Members

Re: Infection control advice

Thank you for taking the time to provide us with your thoughts and questions during our meeting on 20th May in relation to infection control during COVID-19.

We've since been in touch with the Public Health Incident Management Team (COVID-19) at Queensland Health who've provided us with the following advice. QNADA will continue to explore opportunities for a face to face session in future.

If you have any questions, as always please feel free to contact us.

General information and description around contagion risk

SARS-CoV-2, the virus that causes COVID-19 is spread by large respiratory droplets (droplet transmission). What this means in a practical sense, is that droplets exit the nose and/or mouth when a person is coughing, sneezing or talking loudly. Droplet transmission requires close contact because the droplets do not stay suspended in the air and only travel short distances. That is why the advice around physical distancing recommends staying at least 1.5 metres away from others where possible – because those large droplets usually can't travel more than about a metre. The other concern with diseases spread by droplet transmission is around direct contact with people and contaminated surfaces. This is because the virus found in those large droplets can remain active on surfaces where they land and be spread by hands. That's why proper cleaning and disinfection, along with good hand hygiene is so important.

November 2020

COVID-19 Information for the Alcohol and Other Drugs (AOD) Sector: Residential Treatment



March 2021



COVID-19 Vaccine Roll-out #1

Member Briefing

Eligibility for access

Alcohol and other drug services workers who are currently employed are classified as 'other health care workers' eligible for access to the COVID-19 vaccine as part of Phase 1B of the vaccine roll-out. Phase 1B commenced on 22 March, 2021. Eligibility extends to all staff working in healthcare settings, such as administrative staff, management and students. Individuals working in corporate offices which aren't service delivery sites aren't eligible in phase 1B.

Also eligible are Aboriginal and Torres Strait Islander people aged 55 and above, other people aged 70 and above, and younger adults with an eligible underlying health condition or disability. More detailed information about priority groups for the COVID-19 vaccination program, including the list of eligible conditions, is available on the Department of Health website [here](#).

Proof of eligibility

Individuals need to prove their eligibility in order to receive the vaccine. Alcohol and other drug workers seeking to prove their eligibility can do so through providing proof of occupation.

Proof of occupation can be demonstrated through a completed eligibility declaration form, which is available on the Department of Health website [here](#). Alternatively, proof of occupation can be demonstrated through a letter from their employer which confirms that individual is currently employed in a relevant occupation for phase 1B, or by providing a current work ID which shows employment in a relevant occupation for phase 1B.

July 2020



State and Territory Alcohol and Other Drugs Peaks Network

Impact of the Covid-19 Pandemic on alcohol and other drug service delivery

July 2020

October 2021

**COVID-19 Information for
the Alcohol and Other
Drugs (AOD) Sector:
Workforce vaccination
guidance**

November 2021

Healthcare setting means a setting or premises where **healthcare** is provided

Examples of a healthcare setting include:

- a. *public hospitals, public health clinics, ambulance services, patient transport services, and other health services; or*
- b. **private health facilities**, *such as private hospitals or day procedure centres, or specialist outpatient services; or*
- c. **residential aged care facilities;**
- d. **shared disability accommodation services;**
- e. *private provider facilities, such as general practitioners, private nurse offices and allied health consulting offices, pharmacies, optometrists, dental surgeries and private pathology centres; or*
- f. *not for profit health organisations providing and/or commissioning public healthcare under a service agreement with any State or Commonwealth agency, including an Aboriginal and Torres Strait Islander Community Controlled Health Service; or*
- g. *Non Government Organisations (NGO) delivering healthcare services, for example Alcohol and other Drugs residential rehabilitation and treatment services; hospital and other public healthcare services on a Hospital and Health Service campus e.g. integrated mental health Step Up Step Down models; or*