

Tier 1

Mild community transmission

Stay at home if you are sick • Get tested • Stay 1.5m apart from other people • Wash your hands with soap and water • Sneeze or cough into your arm or a tissue

*Note: additional measures to those below may be implemented for periods of time at the discretion of Metro North executive if deemed necessary.

Governance	Workforce	Metro North Virtual Care Services and HiTH	Intensive Care Unit	Service operations	Meetings
<ul style="list-style-type: none"> Stand up weekly MN Response Management meeting Weekly reporting of MN and State surveillance, and monitoring of National and overseas trends – ND Performance Planning, Office of the CNMO Communicate and collaborate with external stakeholders 	<ul style="list-style-type: none"> P2/N95 masks when caring for suspected/confirmed ARI, once defined – change accordingly (see appendix 3 & 4) Eye protection in line with PPE matrix (see appendix 3 & 4) MNH Executive comms to all staff as required Promote maintenance of up-to-date influenza/COVID vaccinations Prioritise new staff fit testing and annual reviews for existing staff Actively plan for fatigue recovery and use of high annual leave balances Monitor & report staff sickness >3% Review PPE, testing kits, antivirals & vaccine stocks weekly. 	<ul style="list-style-type: none"> Promote Metro North Virtual Care Services – <i>stretch targets per service to be confirmed</i> Virtual ED Virtual Ward HiTH Weekly reporting on referral and utilisation of all services 	<ul style="list-style-type: none"> Review and refresh ICU capacity plans. 	<ul style="list-style-type: none"> Provide outpatient appointments across all urgency categories, prioritising long waits and Aboriginal and Torres Strait islander peoples Provide surgery and procedures across all urgency categories, prioritising long waits and Aboriginal and Torres Strait islander peoples Virtual outpatient care to continue to meet Metro North targets Optimise and report monthly on Surgery Connect. Review of private health facility funding arrangement (PHFFA) 	<ul style="list-style-type: none"> Teams link to be included as option for all meetings for times when staff can't attend face-to-face
		<p style="text-align: center;">Emergency Department</p> <ul style="list-style-type: none"> Review and refresh ED capacity plans Review PCR collection services & testing criteria (Plan sect 5.3) 	<p style="text-align: center;">Bedded Services</p> <p>Placement of patients with ARI, are based on the following principles</p> <ul style="list-style-type: none"> Transmission-based precautions should be applied in addition to standard precautions SARS-CoV-2 will not be cohorted with other infections Co-infection (SARS-CoV-2 and Influenza) patients will not be cohorted Surgical masks will be provided at point of TRIAGE, but should be provided whenever the ARI is first recognised Utilise over-census bed areas as per MNH Acute Capacity Framework. 		

For more information, refer to Metro North Health Acute Respiratory Illness Plan – Click link to access <https://metronorth.health.qld.gov.au/extranet/ari>