



Information for workers from Australian Government Agencies, services and programs visiting remote communities

This guidance aims to protect people in remote communities by minimising the risk of introduction of COVID-19 into those communities. The guidance provides a risk management approach designed to limit non-essential travel to remote communities¹ and ensure stringent health protocols for Australian Government workers² (also referred to as “workers”) engaging in essential travel.

The on-going community transmission present across most of Australia increases the underlying epidemiological risk to remote communities. This guidance remains a relevant risk mitigation tool to protect remote communities from the increased risk of severe outcomes from COVID-19.

This guidance applies to all workers (employees, contractors, consultants, volunteers) of Australian Government Agencies³ and services and programs who are visiting remote communities for employment or as part of their work arrangements. For the purpose of this document, Australian Government Agencies, programs and services include but are not limited to:

- Government workers visiting a remote community to deliver a service or conduct a community meeting/forum;
- Government workers engaging in consultation/information/planning activities; and
- visiting and outreach providers delivering an Australian Government program or service (e.g. health professionals engaged through the Medical Outreach Indigenous Chronic Disease Program, a contracted service provider undertaking local area coordination activities for the National Disability Insurance Agency).

This guidance does not apply to workers of Australian Government Agencies, services and programs who are residents of remote communities in the conduct of their employment in their residential community. However, workers of Australian Government Agencies that reside in remote communities are strongly encouraged to be up to date with their vaccination against COVID-19 and must ensure they follow local advice (i.e stay home and get tested for COVID-19 if you have any cold or flu-like symptoms (no matter how mild) before entering a remote community, and ideally before moving between remote communities.

¹ Modified Monash Model | Australian Government Department of Health and Aged Care

² A Government worker is one who is employed by an Australian Government Agency as outlined in (3) below.

³ This includes all Commonwealth entities and companies subject to the PGPA Act.

Why are remote communities at risk?

Isolation and remoteness offer opportunities for delaying or potentially preventing an outbreak in those areas. However, high mobility of community members and a reliance on visiting and outreach services for many essential needs increase the risk of COVID-19 being introduced into community.

On average, Australians living in remote areas have shorter lives, higher levels of disease and injury and poorer access to and use of health services, compared with people living in metropolitan areas. Poorer health outcomes in remote areas may be due to multiple factors including social determinants of health and access to health services⁴.

Everyone is susceptible to COVID-19; however, older people, people with a compromised immune system, and people with chronic illnesses tend to get more severe disease. First Nations people experience a burden of disease 2.3 times the rate of other Australians, which may increase the risk of severe disease if they acquire COVID-19.

How do we minimise risk related to COVID-19?

To minimise risk related to COVID-19 entering remote communities, it is important to only access remote communities for essential purposes.

Australian Government Agencies with essential activities wishing to support employee travel to remote communities are encouraged to be up to date⁵ with their COVID-19 vaccination. Employees undertaking travel to remote communities are also encouraged to receive a negative COVID-19 test before travel and entering remote communities.

A Risk Management Plan template is provided below, which has been drafted by the Department of Health and Aged Care in consultation with its Human Biosecurity Officers. It is up to each agency to decide whether or not it wants to use the Risk Management Plan and adapt the templates to its own circumstances. Should an agency wish to use the Risk Management Plan for its remote travel purposes, it must decide what level of delegate support is required.

Key decision points and health practices to ensure Australian Government Agencies consider and mitigate risks related to employee travel into remote communities are outlined below:

⁴ Australian Institute of Health and Welfare 2019. Rural & remote health. www.aihw.gov.au/reports/rural-remote-australians/rural-remote-health-external-site

⁵ ATAGI statement on defining 'up-to-date' status for COVID-19 vaccination [Australian Government Department of Health and Aged Care](https://www.health.gov.au/government/department-of-health-and-aged-care)

Is travel to the Community permitted?

Are there state or territory travel restrictions in place? Are you aware of any community access restrictions/COVID-19 management plans in place or additional requirements you need to take into consideration?

Recommendation: seek information and adhere to local guidance on restrictions to access.

Australian Government Agencies may have their own travel protocols and these should be considered concurrently, with adherence to whichever is the most stringent. Communities may have in place permit systems or consider additional requirements and restrictions to protect themselves during the outbreak. It is therefore important to check access restrictions, both at the Commonwealth, state and local levels, as well as consult with leaders of the remote community prior to the proposed visit and only proceed with the trip if prior approval is obtained. The National Indigenous Australians Agency's (NIAA) Regional Network can facilitate this process. Your nearest NIAA Regional Office is available on 1800 079 098.

Is the remote travel essential and/or are there alternatives?

Recommendation: Re-consider the need to undertake any non-essential travel to remote communities.

Government workers should consider if the remote visit is essential, if the same objectives could be achieved via tele/videoconference, or if the trip could be postponed. Consideration should also be given to the number of people required; only people essential to the trip should attend. The more people that enter a community the higher the chance of transmission of the disease. The minimum number for personal safety should attend.

Have you followed health protocols?

Pre-Travel Check

If you've assessed your need to travel and the purpose is considered essential, you are encouraged to do the following:

- review the relevant jurisdictional workforce vaccination requirement;
- be up to date with your COVID-19 vaccination;
- receive a negative COVID-19 test (through a PCR or Rapid Antigen Test (RAT)) prior to travel or entering remote communities;
- if your travel is during flu season (April to October each year), obtain or demonstrate a current influenza vaccination as a condition of travel;
- complete and submit the individual Risk Management Plan to your relevant delegate for endorsement; and
- consult with leaders of the remote community prior to the proposed visit (including involving First Nation interpreters if required), including about the actions and requirements to protect the community against the introduction of COVID-19, and only proceed with the trip if prior approval is obtained.

To reduce your risk of transmitting disease in remote communities, you also need to consider the issues below.

Do you have symptoms compatible with COVID-19? (fever, a cough, sore throat, tiredness and/or shortness of breath or are a close contact of a COVID-19 case)?

Recommendation: Do not travel to a remote community if you currently have symptoms or had any of these symptoms in the 7 days prior (unless you have tested negative for COVID-19 since the onset of symptoms).

If you are uncertain about symptoms, the [healthdirect Coronavirus \(COVID-19\) Symptom Checker- external site](#) asks questions about your symptoms to see if you need to seek medical help or get tested. This tool is available online at any time.

On arriving at a remote location, how can visitors help prevent the spread of COVID-19?

Practicing good hand and sneeze/cough hygiene is the best defence against most viruses. You are encouraged to:

- wash your hands frequently with soap and water, before and after eating, and after going to the toilet;
- cover your mouth and nose when coughing and sneezing, dispose of tissues, and frequently use alcohol-based hand rub (sanitiser);
- ensure you take your own supplies of soap, tissues, alcohol-based hand rub, cleaning products including disinfectant wipes or spray, face masks and gloves (supplied by your agency);
- wear a face mask in accordance with relevant state or territory public health directions;
- be mindful of how used items are disposed of and consider securing rubbish to take out of community with you for disposal;
- maintain 1.5m of physical distance from others, including when travelling in vehicles when possible;
- minimise time in the location, stick to absolutely essential activities only and leave the community as soon as possible.

What should Government workers do if they develop symptoms (fever, a cough, sore throat, tiredness and/or shortness of breath) after arriving at a remote location?

If you develop symptoms (fever, a cough, sore throat, tiredness and/or shortness of breath), after arriving at a remote community please follow state / territory public health directions. You are encouraged to:

- isolate yourself in your own room and eat/sleep alone in your own bedroom or donga;
- if you need to go outside, maintain at least 1.5m distance from others;

- wear a face mask in accordance with relevant state or territory public health directions; and when physical distancing cannot be maintained (if you don't have one, cover your coughs and sneezes);
- get tested (PCR or RAT) and isolate until a negative result is received;
- wash your hands frequently with soap and water and use alcohol-based hand sanitiser (rub);
- contact the local health centre for advice;
- do not attend the health centre in person, unless advised to do so; and
- any plan for repatriation should consider the clinical situation and be in accordance with the community's occupational health and safety policies.

Where can I get more information?

For the latest advice, information and resources, go to www.health.gov.au

If you have concerns, go to www.healthdirect.gov.au or call the National Coronavirus Helpline on 1800 020 080. The line operates 24 hours a day, seven days a week. If you require translating or interpreting services, call 131 450.

The contact details from the NIAA regional network are available at www.niaa.gov.au/contact-us/regional-network-addresses. Remote communities include, but are not limited to, those listed on the National Indigenous Australians Agency Website <https://www.indigenous.gov.au/communities/list-view/A>.

The phone number of your state or territory public health agency is available at www.health.gov.au/state-territory-contacts

Last reviewed:

23 December 2022