JER-8000-MGT-PRO-0032 Infectious Disease

(AS/NZS, ISO 45001:2018, Clause 8.1.2)

1 INTRODUCTION

The purpose of this procedure is to provide a framework to manage risks associated with infectious diseases.

2 SCOPE

This procedure applies to all KGL Resources employees.

3 RELEVANT LEGAL & OTHER REQUIREMENTS

It is the responsibility of all personnel to comply with this procedure and seek guidance from the Project Director where clarification is required.

- Work Health and Safety Act 2011 (NT)
- Work Health and Safety Regulation 2011 (NT)
- National Code of Practice for the Control of Work-related Exposure to Hepatitis and HIV (Blood-borne) Viruses 2010
- Safe Work Australia National Guide for safe workplaces – COVID-19

4 DEFINITIONS

Infectious diseases	Infectious diseases are diseases caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi that can be spread, directly or indirectly, from one person to another.
Safe Work Method Statement (SWMS)	A SWMS is a pre-start risk assessment that is undertaken prior to commencing any high-risk construction work or as otherwise required by a supervisor or manager. For more information, refer to the KGL Resources Risk Management Procedure.
Take 5	A Take 5 is a pre-start risk assessment that is undertaken by all workers prior to commencing work. For more information, refer to the KGL Resources Risk Management Procedure.
Workers	Workers include employees, contractors, sub-contractors, volunteers and consultants who conduct work for KGL Resources.

5 RESPONSIBILITIES

Senior Leadership Team	1. Establishes safe systems of work that mitigate risks associated with Infectious Diseases. 2. Provides adequate resources to managers and workers in support of the risk management of infectious disease risks in KGL Resources activities. 3. Reviews and acts on reported organisational risk management performance.

Safety Manager	1. Establishes and maintains hazard identification, risk management, and training systems within the KGL Resources Safety Management System, including consultation with workers. 2. Assesses and reports on risk management performance to the Senior Leadership Team. 3. Ensures the procedure is fit for purpose and meets all applicable legislative requirements. 4. Ensures this procedure is implemented and is regularly reviewed and monitored for ongoing effectiveness. 5. Supports workers and managers and supervisors in the implementation and operation of this procedure. 6. Recommends change or improvement to this procedure. 7. Reviews and monitors risk management of infectious diseases by managers and supervisors.
Managers and Supervisors	1. Ensure all contractors under their management and control are made aware of this procedure and processes are established to ensure their contractors comply with this procedure prior to commencing work. 2. Ensure that this procedure is implemented in their area by ensuring that all workers are aware of and understand this procedure. 3. Ensure that this procedure is implemented in their area. This may include ensuring that: a. all workers are aware of and understand this procedure; b. any risks arising from alcohol and drugs in the workplace are addressed proactively to ensure the health and safety of all workers; c. support is provided to workers where appropriate; d. any suspected breaches of this procedure are acted on promptly and in accordance with this procedure; and e. Project Director is consulted with for confidential advice as appropriate or if there are any suspected breaches of this procedure.
Workers	1. Ensures that they are fit for duty when they present for work, and capable of performing the inherent requirements of the job in a safe, secure, productive and efficient manner. 2. Complies with the requirements of this procedure. 3. Assists in identifying workplace hazards. 4. Reports any potential exposure to infectious diseases.

6 BACKGROUND

Exposure to infectious diseases can be a potential risk in the workplace. Workers can be exposure to infectious diseases in public or private places, such as:

a. offices, including rest and break facilities;

b. picnic areas and campgrounds, parks, toilets, and spaces such as gardens and playing areas;

c. accident and crash sites; and

d. workplaces that may contain biohazard associated with water sampling, animals, insects and parasites.

Infectious agents can be spread in a variety of ways, including:

a. airborne - coughs or sneezes release airborne pathogens, which are then inhaled by others (e.g. COVID-19, influenza);

b. contaminated objects or food - the pathogens may be spread to food or other objects, if their hands are dirty;

c. skin-to-skin contact - the transfer of some pathogens can occur through touch, or by sharing personal items, clothing or objects (e.g. COVID-19); and

d. contact with body fluids - pathogens in saliva, urine, faeces or blood can be passed to another person's body via cuts or abrasions, or through the mucus membranes of the mouth and eyes.

7 INFECTIOUS DISEASE RISK MANAGEMENT

KGL Resources manages risks associated with infectious diseases through a risk management approach. The key elements of KGL Resources' systematic approach to risk management include:

a. hazard identification;

b. risk assessment;

c. controlling risks; and

d. reviewing control measures to ensure they remain effective.

This is to be undertaken in line with the **KGL Resources Risk Management Procedure**. The assessment of potential exposure to infectious diseases risks should be considered when a worker completes a Take 5 and where applicable, a SWMS.

7.1 Hazard Identification

The purpose of identifying hazards associated with infectious diseases is to eliminate or, if it is not reasonably practicable to eliminate the risk, to minimise it so far as is reasonably practicable.

Before workers undertake work activities or enter workplaces where there is the potential for exposure to hazardous materials and practices, managers and supervisors must ensure hazards are identified.

Hazard identification should identify activities in the workplace that may put workers or members of the public at risk of exposure to infectious disease as a result of work activities.

Hazards should be identified through:

a. routine workplace inspection of work areas and consideration of transmission modes for disease in the work environment;

b. risk assessment of work activities;

c. consulting workers on proposed work activities, conditions and hazards likely to result in infection; and

d. reviewing previous injury/incident records.

Two aspects must be considered in the hazard identification:

a. potential sources of infection; and

b. activities and occupations where hazards exist, and potential means of transmission (e.g. from soil, water, airborne, direct contact, infected animals and insects, during first aid treatment, abrasions, cuts from rusty objects).

Risk factors that should be considered in hazard identification include circumstances where:

a. contaminated sharps (such as syringes) could penetrate the skin;

b. infected blood or other body fluids/substances could splash into the areas such as eyes, nose, or onto broken skin; and

c. poor work practices could occur. For example, not washing hands or not wearing gloves when cleaning up blood/body fluids or exposure to biohazards from water sampling.

7.2 COVID-19

The novel coronavirus (COVID-19) belongs to a family of viruses known as the Corona viruses, which can cause illnesses ranging from the common cold to more severe diseases, such as the Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). COVID-19 was first reported from Wuhan, China, on 31st December 2019 and has since spread to other mainland China provinces and most parts of the world. For further information about the virus and current situation reports please visit the Australian Government Health Websites.

https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm

The symptoms of the COVID-19 are similar to that of regular pneumonia and include:

- Fever
- Sore throat
- Cough
- Fatigue
- Loss of sense of smell
- Difficulty breathing

While coronavirus is of concern, it is important to remember that most people displaying these symptoms are likely suffering with a cold or other respiratory illness – not coronavirus.

7.3 Risk Assessment

Prior to workers undertaking work where there is a potential exposure to infectious diseases, managers and supervisors must undertake a risk assessment in accordance with the **KGL Resources Risk Management Procedure.** This risk assessment will be in the form of a Take 5or a SWMS (if applicable).

Risk assessments should take into account:

a. the type and frequency of exposure to airborne contaminants, body fluids/substances or other contaminated materials and biohazards in the workplace, including:

(i) the probability of exposure;

(ii) the type of contaminant or biological hazard encountered;

(iii) the likely routes of transmission;

(iv) consideration of multiple exposures, including multiple sources;

(v) the factors contributing to exposures and their recurrence;

(vi) access to relevant medical and first aid services;

(vii) the level of knowledge and training of Workers regarding infectious diseases;

(viii) the availability and use of personal protective equipment (PPE), including face masks, rubber gloves, eye goggles, face shields and appropriate clothing;

(ix) the suitability of equipment for the task and whether or not the use of the equipment is likely to lead to exposures to blood or other body fluids/substances, or contaminated materials;

(x) individual risk factors for each Worker, such as an underlying medical condition, damaged/broken skin, dermatitis and eczema;

(xi) the number of Workers and other persons at risk of exposure; and

(xii) the availability of vaccines (e.g. Flu, COVID-19 vaccine) and post exposure prophylaxis.

b. the risks of exposure to airborne, blood or body fluids/substances or contaminated materials associated with workplace layout, design and work practices including:

(i) poor lighting;

(ii) lack of social distancing;

(iii) suitability and cleanliness of work surfaces;

(iv) crevices that encourage concealment of used needles and syringes; and

c. current risk control measures and the potential need for new risk control measures.

Managers and supervisors should give consideration to workers who have a greater potential of exposure to infectious diseases such as:

a. cleaners;

b. first aid providers;

c. workers undertaking installations in medical facilities or quarantine facilities;

d. workers who undertake installations in locations such as rivers or sewage systems that may contain biological hazards, or who service assets in these areas; and

e. workers in areas where insect-borne illnesses have been identified.

7.4 Risk Control Measures

As set out in KGL Resources Risk Management Procedure, control measures should always be considered in the order of the hierarchy of control, starting with elimination. In some circumstances, two or more control measures will be required to minimise so far as is reasonably practicable the risk(s).

Risk control measures for infectious diseases must be documented in a Take 5 or SWMS (if applicable).

KGL Resources applies the hierarchy of control for eliminating, so far as is reasonably practicable, or minimising the risks arising from infectious diseases.

Managers and supervisors should determine and implement effective risk control measures in consultation with workers.

Risk control measures and strategies may include:

a. safe work procedures, incorporating infection control precautions;
b. post-injury testing, counselling and follow-up;
c. an immunisation program;
d. social distancing, use of face masks;
e. screening of visitors to show rooms;
f. supervision, particularly of new employees or employees transferred to a higher risk work environment;
g. training workers in the risk control measures;
h. well-designed equipment and work premises;
i. quarantine and come clean/go clean protocols;
j. personal hygiene;
k. an infection control program incorporating standard precautions;
l. post-injury testing, counselling and follow-up;
m. well-designed equipment; and
n. well-designed work premises.

7.5 Guidelines for infectious disease risk control

Where reasonably practicable, all work activities should be designed to eliminate the likelihood of exposure and harm arising from exposure. This includes ensuring:

a. work practices are designed to minimise exposure to airborne contaminants blood or other body fluids/substances and other contaminated materials, through work design and the implementation of standard precautions and other strategies;
b. any material soiled with blood or body fluids/substances should be treated as being potentially infectious and safe-working procedures must be adopted. For example, workers carrying out work near sewers or waste pipes should treat the material as potentially infectious.
c. isolation of processes to reduce the number of people exposed;
d. seeking professional advice from an occupational physician or equally qualified person in performing risk assessments and determining the need for vaccination or screening;
e. conduct antibody screening if appropriate;
f. offering vaccination to KGL Resources workers whose work puts them at risk of contractible disease, or passing on disease, for example COVID-19, Influenza, Hepatitis A or B, Tetanus, Q Fever;
g. ensuring appropriate personal protective equipment (**PPE**) is available and used;
h. good house-keeping, including maintaining a clear work area free from trip hazards, fit for purpose tools and control of leaks and spills
i. appropriate waste management, including sharps handling and disposal and disposal of other potentially infectious material;
j. supervision and monitoring; and

k. training.

7.6 Guidelines for management of COVID-19

The following guidelines detail strategies to deal with COVID-19. These guidelines should be read in conjunction with current State and Federal Government directions and guidelines.

1. Actively monitor development of the virus outbreak and disseminate messages to workers with clear instructions when measures need to be activated.
2. Educate workers on the latest available information on the virus. Brief them on the need for infection control measures and the preventive procedures that have been set in place. Educate workers on the different types of thermometers, such as oral and ear thermometer, and the proper way of using them.
3. Collate updated contact information of all workers, i.e. home address/home telephone number/ mobile phone number. Make sure all workers have contact numbers of Safety Manager. Workers are to contact the Safety Manager if they are admitted to hospital with suspected infections for contact tracing purposes
4. Ensure that at least one designated Point of Contact (POC) (may be the Safety Manager) has been appointed who will be responsible for liaising with Department of Health during activation of contact tracing processes at the workplace'. Check the websites for updated advisories and update workers accordingly:
5. Ensure that workers who have travelled self-isolate in accordance with the requirements stipulated by NT Health & directions given by the Safety Manager. Check on workers' health by phone or email during his/her absence from work.
6. Appoint a person to keep quarantined workers informed of events.
7. Ensure that the workplace has adequate supplies of tissue paper/hand towels, disinfectants and masks.
8. Brief workers on personal hygiene measures (refer to Appendices).
9. Put up notices in washrooms on proper hand-washing techniques .
10. Ensure common areas e.g. washrooms, meeting rooms are disinfected daily. Liaise with cleaning workers/contractors on this matter.
11. Designate a room/area in the office areas with nearby toilet facilities as the isolation room/area for the employee(s) with fever to use. Isolated workers will be assisted from site to either a local hospital or clinic or as advised at the time. At Jervois, this will be the First Aid Room.
12. Identify hospital/clinics that workers with fever can be transported to.
13. Carry out symptom or temperature monitoring of workers. Daily temperature monitoring ensures that all workers and visitors have their temperature measured daily. Once an employee is identified to have fever (37.5ºC and above), follow instructions below.
14. If an employee is feeling unwell, they are not to come to the workplace, they are to attend their local doctor for assessment. A medical certificate where appropriate will be required and shall be provided to the Safety Manager as soon as possible. Circumstances that negate this requirement will be implemented if circumstances change to promote a more conducive environment to self-report sickness.
15. Personnel who have returned from overseas must self-isolate for 14 Days from date of return to the country.

16. Workers who have recently travelled to, or have an intention to travel to any area other than their normal place of residence, should be required to declare that they have been fit and well for the last seven days; that they have not undertaken any high-risk activities (such as contact with infected persons). Travel to any areas, including hotspots designated by State and Territory Health Services, and other than their normal place of residence should not be undertaken, and any travel must be undertaken in accordance with Federal and State Government restrictions.

17. Travel to the normal place of residence, if that place is within a hotspot designated by either State and Territory Health Services, shall not be undertaken unless approval is granted by the Safety Manager.

8 INCIDENT REPORTING AND INVESTIGATION

The immediate first aid response to an exposure incident should include:

a. removing contaminated clothing;

b. promptly flushing the wound under running water;

c. washing the wound using warm water and liquid soap (except for the eyes, mouth and nose);

d. rinsing the eyes, mouth and nose (if affected) thoroughly with warm water (without soap) or saline;

e. thoroughly pat drying the area applying a sterile waterproof dressing (such as an adhesive plaster), as necessary, and applying pressure through the dressing if bleeding is still occurring; and

f. seek medical advice.

First aid kits should contain disposable gloves, eye goggles, surgical facemasks and resuscitation masks to prevent the transmission of HBV, HCV or HIV between first aid providers and patients. However, the absence of these items should not prevent the administering of first aid in emergency situations.

Any incidents arising from infectious disease must be reported in accordance with the **KGL Resources Incident Managing Procedure**.

9 REVIEW AND REVISION OF RISK CONTROL MEASURES

Risk controls must be reviewed on a regular basis to ensure their effectiveness and also to ensure that new risks have not been introduced. A review is required:

a. when the control measure is not effective in controlling the risk;

b. before a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control;

c. if a new hazard or risk is identified;

d. if the results of consultation indicate that a review is necessary; and

e. if a health and safety representative requests a review.

10 INFORMATION, INSTRUCTION, TRAINING & SUPERVISION

Managers and supervisors must provide workers with information on how to manage infectious disease matters including knowledge of KGL Resources consultative mechanisms for raising work health and safety matters.

11 BREACH OF THIS PROCEDURE

Workers must comply with this procedure at all times. KGL Resources takes breaches of this procedure very seriously.

If an employee is found to have breached this procedure, they may be subjected to disciplinary action in accordance with KGL Resources' disciplinary processes. Contractors of KGL Resources who are found to have breached this procedure may be the subject of action under their contract with KGL Resources.

12 GRIEVANCE

A worker's grievance at a decision relating to an infectious disease management issue should be referred to the supervisor in the first instance. Thereafter, parties may seek grievance resolution through KGL Resources' human resources processes.

13 CONSULTATION

This procedure has been developed and implemented in consultation and co-operation with KGL Resources' workers.

14 PRIVACY

KGL Resources will ensure that any information will be handled according to relevant legislation and in accordance with the KGL Resources Privacy Procedure. Managers and supervisors must ensure that any illness or injury in the workplace is managed in accordance with the KGL Resources Incident Management Procedure, the KGL Resources Injury Management and Rehabilitation Procedure and KGL Resources' equal employment opportunity/discrimination processes.

15 RELATED DOCUMENTATION

JER-8000-MGT-PRO-0006	Risk Management
JER-8000-MGT-PRO-0023	Incident Management
JER-8000-MGT-PRO-0029	Fitness for Work
JER-8000-MGT-FRM-0011	Incident Report

16 MONITORING, EVALUATION AND REVIEW

VERIFICATION	
Monitoring	Compliance with this procedure will be monitored through training and regular audits.
Evaluation & Review	The risk rating is low, reviewed every 3 years.

	A review will be undertaken sooner if there are changes to legislation, standards and industry codes, or following a SMS review, changes as defined by WHS Regulators, or to ensure continual improvement.
Version Control	Version 1: May 2026

17 APPROVAL

Konrad Litfin
Project Director