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Dear Feedlot Operator,

'COVID-19 – Guidance for an outbreak in the Feedlot workplace'

The Australian Lot Feeders' Association (ALFA), the voice representing the cattle feedlot industry, is working to provide you with timely and practical information to manage COVID-19.

Please find enclosed a **'COVID-19 – Guidance for an outbreak in the Feedlot workplace'**. The Guide provides 'Questions and Answers' which aim to give practical guidance for feedlots who may experience the unfortunate event of an outbreak amongst staff or suppliers on their feedlot.

It is vitally important for feedlot operators to follow all directions from health authorities. This Guide does not override those directions but simply aims to help you think about some of the actions you may need to take in the event you experience an outbreak. You should refer to your local state health authorities for specific directions.

The Guide, developed using Grain Fed Levies via MLA, builds on a range of information tools that ALFA has made available directly to the feedlot community. This includes **'COVID-19 – A Guide for Feedlots'**, which is a comprehensive document providing checklists and templates developed to help prepare for, and manage, the impacts of the virus. I encourage you to visit [ALFA's COVID-19 Resources website page](#) to view the range of resources available.

Finally, once again I ask that you prepare as best as possible for the impacts this event may have on the health and safety of your people, your families, the broader community and your business. The safety and wellbeing of our feedlot community and the ongoing sustainability of our industry is paramount.

Kind regards,

Bryce Camm
President
Australian Lot Feeders' Association

COVID-19 – Guidance for an outbreak in the Feedlot workplace



OVERVIEW

This Guide provides 'Questions and Answers' which aim to give practical guidance to feedlots who may experience the unfortunate event of a COVID-19 outbreak amongst staff or suppliers on their feedlot.

It is vitally important that you prepare for potential disruptions to your workforce caused by COVID-19. Make sure you have a plan in place to manage a COVID-19 outbreak on your feedlot, including being able to access additional staff to cover essential business operations.

Having contingency plans is a key requirement of the National Feedlot Accreditation Scheme (NFAS).

It is essential that feedlot operators **follow all directions from health authorities** if an employee or supplier returns a positive COVID-19 test. You should refer to your local state health authorities for specific directions. Federal and State Authorities are preparing and distributing information on what to do if an employee returns a positive COVID-19 test and where to source employees. Some useful guides are included in the resources section of this document.

This Guide does not override directions from health authorities. This Guide aims to help you prepare and think about some of the actions you may need to take in the event you experience a COVID-19 outbreak.

COVID-19 – Guidance for an outbreak in the Feedlot workplace

Use these 'Questions and Answers' to help you prepare, plan for and respond to a COVID-19 outbreak on your feedlot. Make sure you **follow all directions from health authorities** if an employee or supplier returns a positive COVID-19 test.

Questions	Response	Feedlot action
What is 'isolation' or 'self-isolation'?	Isolation or self-isolation is when people remain in the home or accommodation and avoid contact with other people. Most people who need to self-isolate will probably be advised to do so for 14 days.	Plan and prepare employees for self-isolation
How do people self-isolate?	<p>During isolation, people must stay at home or in accommodation for 14 days – do not go to public places or places where they might have contact with other people, such as work, school, childcare or public gatherings.</p> <p>Only people who usually live together should be in the same home. Avoid seeing visitors. If people are in another form of accommodation, such as a hotel, avoid contact with other guests or staff.</p> <p>When travelling to their home or accommodation to start isolation, use personal transport, such as a car, if possible. This will minimise the exposure to others.</p> <p>When in isolation, monitor for symptoms including fever, cough or shortness of breath. Other early symptoms include chills, body aches, sore throat, runny nose and muscle pain.</p> <p>If a person becomes unwell, all other members of the household must self-isolate.</p> <p>If a person is required to seek medical help, it is very important that they call before visiting the doctor or the hospital emergency department, to describe their symptoms and travel history. The doctor will provide further advice on self-isolation and testing for everyone who lives in the household.</p>	Plan and prepare employees for self-isolation
What should a person do if they develop symptoms of COVID-19?	<p>If a person <u>develops symptoms</u> (fever, a cough, sore throat, tiredness or shortness of breath) within 14 days of last contact with a confirmed case, they should arrange to see a doctor for urgent assessment.</p> <p>Person should telephone the doctor's surgery, health clinic or hospital before they arrive and tell them their travel history or that they may have been in contact with a potential case of COVID-19.</p> <p>Person must remain isolated either in their home or a healthcare setting until public health authorities inform them it is safe for them to return to their usual activities.</p>	Plan and prepare employees for self-isolation
What if a person is a suspected case who has been identified as being at risk of infection with COVID-19 and has now developed symptoms?	<p>Person must isolate themselves in their home or accommodation or health care setting until Public Health authorities inform them it is safe for them to return to their usual activities.</p> <p>The doctor will arrange for the person to be tested for the infection. It may take a few hours or a couple of days for the test results to be returned depending on the locality.</p> <p>If the person's symptoms are serious they will remain in hospital isolated from other patients to prevent further spread of the virus.</p> <p>If your doctor says the person is well enough to return home while they are waiting for your test results, the person must isolate themselves.</p>	Plan and prepare employees for self-isolation

	<p>Public Health officers will make contact with the person each day to check on their condition and provide them with a phone number to contact if they have questions.</p> <p>The person's family and other close contacts do not need to remain isolated unless they develop symptoms. If they develop symptoms, they must return home and contact the Public Health Unit.</p>	
<p>What if a person is a suspected case who has been identified as being at risk of infection with COVID-19, has developed symptoms, but then tests negative (antigen PCR)?</p>	<p>Person no longer need to remain in isolation.</p> <p>Person may return to normal activities on the advice of Public Health authorities.</p> <p>Person should continue to carefully monitor their health for up to 14 days after the last contact with the confirmed case.</p> <p>Report any new or returning symptoms to Public Health in this period. The person may be required to be tested again.</p>	<p>Plan and prepare employees for self-isolation</p>
<p>What if a person is a confirmed or probable case of COVID-19?</p>	<p><u>If the person is well enough to remain in the home or accommodation, they should:</u></p> <ul style="list-style-type: none"> • stay at home and do not attend work • wash hands often with soap and water • cough and sneeze into the crook of elbow • avoid cooking for or caring for other members of the household • do not share dishes, cups, eating utensils, towels, bedding or other items with other people - after using these items, wash them thoroughly with soap and water • wear a mask (which the doctor will provide) when in the same room as other people - the person who is not unwell does not need to wear a face mask while at home • wear a mask if need to go out in public (for example, if need to seek healthcare) • ask others, such as friends or family who are not required to be isolated, to get food or other necessities for the household (but restrict visitors who do not need to be in the home) • stay in a different room from other people or be separated as much as possible • avoid contact with elderly people and those with compromised immune systems or chronic health conditions (such as chronic heart, lung or kidney conditions, and diabetes) <p>Public health officers will contact the person everyday to check on their condition and let them know when it's safe to return to normal activities. This is likely to be 1 day after symptoms have disappeared. They will also provide a phone number to call if the person has any questions.</p> <p><u>If a person's condition gets worse, seek medical attention:</u></p> <ul style="list-style-type: none"> • notify public health officers by calling National COVID-19 Helpline on 1800 022 080, or healthdirect on 1800 022 222 - follow their instructions - they may ask the person to go to a doctor's clinic or a local hospital emergency department • call ahead before visiting the doctor or hospital and tell staff they have either a confirmed or probable case of COVID-19 • wear a surgical mask if need to leave the house • when a person arrives at the doctor's surgery or hospital, tell staff that they have either a confirmed or probable case of COVID-19. 	<p>Plan and prepare employees for self-isolation</p>

	<p><u>If a person is experiencing severe symptoms</u>, such as shortness of breath:</p> <ul style="list-style-type: none"> • call triple zero (000) and ask for an ambulance • tell the paramedics on arrival that they have either a confirmed or probable case of COVID-19. 	
What if a person tests positive to COVID-19?	<p>If a person tests positive for COVID-19, people who have had contact with them, including family members and people they live and work with, will need to isolate themselves for 14 days from their last contact with the person. This includes close contact in the 24 hours before the person became unwell.</p> <ul style="list-style-type: none"> • Visit the Australian Government Department of Health website for general information about self-isolation • Visit the Australian Government Department of Health website for information about self-isolation when unwell with a confirmed or probable case. 	Plan and prepare employees for self-isolation
If a person is self-isolating while waiting for test results, then receives a negative result, should they continue to self-isolate for 14 days?	<p>Yes, even if the person receives a negative result, they should complete the whole 14 days of self-isolation. The World Health Organization (WHO) currently estimates that the incubation period ranges from 0 to 14 days, with many incubation periods being 5 to 6 days (These estimates may change as more data becomes available).</p>	Plan and prepare employees for self-isolation
When can a person stop self-isolating at home?	<p><u>If a person is a confirmed COVID-19 case with a mild illness</u>, and did not require hospitalisation, they can end self-isolation if they meet <u>both</u> of the following criteria:</p> <ul style="list-style-type: none"> • at least 10 days have passed since the onset of symptoms, and • all symptoms of acute illness have been resolved for the previous 72 hours. <p>Some people may have a pre-existing illness with chronic respiratory signs or symptoms, such as chronic cough. In this case, the doctor who has been treating the person should assess whether the signs and symptoms of COVID-19 have resolved.</p> <p>People should continue to regularly and thoroughly wash their hands for 20 seconds with soap and water, cover their mouth with a tissue when coughing, or cough into the crook of elbow, and keep at least 1.5 metres (2 arms' lengths) from other people.</p>	Plan and prepare employees for self-isolation
When can a person be released from hospital isolation?	<p>If a person is a confirmed COVID-19 case with <u>severe illness</u> - but is clinically ready to be discharged from hospital - and has not had 2 consecutive negative COVID-19 tests (antigen PCR) at least 24 hours apart, then they will need to be discharged to home self-isolation.</p> <p><u>A person can only end home self-isolation</u> if they meet <u>both</u> the following criteria:</p> <ul style="list-style-type: none"> • at least 10 days have passed since hospital discharge, and • all symptoms of the acute illness have been resolved for the previous 72 hours. <p>Some people may have a pre-existing illness with chronic respiratory signs or symptoms, such as chronic cough. In this case, the doctor who has been treating the person should assess whether the signs and symptoms of COVID-19 have resolved.</p>	<p>Plan and prepare employees for self-isolation.</p> <p>Liaise with medical experts.</p> <p>People should continue to regularly and thoroughly wash hands for 20 seconds with soap and water, cover mouth with a tissue when coughing or cough into</p>

	<p>If a person is a confirmed case of COVID-19 who has had specimens taken at the time of clinical recovery, they can be released from isolation if they meet <u>all</u> the following criteria:</p> <ul style="list-style-type: none"> • have been without fever for the previous 48 hours, and • all symptoms of the acute illness have been resolved for the previous 24 hours, and • at least 7 days must have passed since the onset of acute illness, and • have had at least 2 negative COVID-19 tests (antigen PCR), collected 24 hours apart, after acute illness has resolved (This may be reviewed as the pandemic evolves in Australia). 	the crook of elbow and keep at least 1.5 metres (2 arms' lengths) from other people.
People returning to work	People who have been required to be in home isolation or quarantined and have completed their 14 day period <u>without showing signs or symptoms of being unwell</u> , are permitted to return to their daily activities including going to work, attending public places and using public transport. They must continue to adhere to the Commonwealth, State and Local government directives issued during the pandemic.	People are encouraged to continue good hygiene practices to help stay free of illness.
Will people who return to work from isolation need any documentation?	<p>Medical clearance or documentation is not required for people who return to work after 14 days of isolation, <u>provided they had no signs or symptoms of being unwell while in isolation</u>.</p> <p>Workplaces are encouraged to accept leave requests, without requiring medical clearance, for employees who need to isolate themselves for 14 days and who have not experienced any signs or symptoms.</p>	Plan and prepare employees for self-isolation.
What should people do if they become unwell after leaving isolation or quarantine?	<p>While COVID-19 is of concern, it is important to remember that most people displaying symptoms such as fever, cough, sore throat and tiredness are much more likely to be suffering from a cold or other respiratory illness – not COVID-19.</p> <p>However, as a precaution, if people do develop these symptoms soon after leaving isolation, they are encouraged to see their usual doctor. The doctor will be able to advise on what steps should be taken to get better and may test for a number of respiratory infections including COVID-19, if medically necessary.</p>	

Source: Referenced from Department of Health, Australian Commonwealth Government

Note 1: The Australian Government continues to take every precaution to ensure the safety of the community surrounding the COVID-19 outbreak (current measures on www.health.gov.au).

Note 2: If a person is in self-isolation because they are confirmed or suspected to have COVID-19, or have been in close contact with a confirmed case, use the form at link www.aus.gov.au/covid-form to help the Department of Health track the spread of the virus.

Disinfecting Work Premises for COVID-19

Cleaning and disinfection principles

Cleaning is an essential part of disinfection. Organic matter can inactivate many disinfectants. Cleaning reduces the soil load, allowing the disinfectant to work. Removal of germs such as the virus that causes COVID-19 requires thorough cleaning followed by disinfection.

The length of time that SARS-COV-2 (the cause of COVID-19) survives on inanimate surfaces will vary depending on factors such as the amount of contaminated body fluid – such as respiratory droplets – present and environmental temperature and humidity. In general, coronaviruses are unlikely to survive for long once droplets produced by coughing or sneezing dry out.

How long does COVID-19 last?		
In the air	Droplets from coughs, sneezes etc	3 hours
Copper, steel	Taps etc	3 hours
Cardboard	Packaging etc	24 hours
Plastic	Water bottles etc	2-3 days
Non-porous surfaces	Door knobs, handles, telephones, light switches, gear shifts, controls etc	4 days
Glass	Mobile telephones, screens, cups, glasses, windows etc	9 days

Source: Referenced from World Health Organisation

It is good practice to routinely clean surfaces as follows:

1. Frequently touched surfaces
 - Should be cleaned frequently
 - Door handles, desk tops, bench tops, light switches
 - Detergent solution (as per manufacturer's instructions) can be used, with the exact choice of detergent determined by the nature of surface and likely degree of contamination
 - Detergent-impregnated wipes may be used but should not be used as a replacement for the mechanical cleaning process.
2. Minimally touched surfaces
 - Floors, ceilings, walls, blinds
 - Detergent solution/wipes (as per manufacturer's instructions) are adequate for cleaning general surfaces and non-patient care areas
 - Damp mopping is preferable to dry mopping
 - Walls and blinds should be cleaned when visibly dusty or soiled
 - Window curtains should be temporarily removed
 - Sinks and basins should be cleaned on a regular basis.

Appropriate use of disinfectants

The Australian Government's Therapeutic Goods Administration (TGA) has identified disinfectants as being critical in preventing the spread of COVID-19. To help ensure the disinfectants are effective, it is important that people are aware of how to use them properly.

About COVID-19 and the role of disinfectants

COVID-19 is an enveloped virus, which means it has an outer membrane. Enveloped viruses are relatively easy to kill compared to non-enveloped viruses, as the outer layer is easily damaged by most environmental disinfectants, provided the disinfectant is used in accordance with label directions. Disinfectants containing $\geq 70\%$ alcohol, quaternary ammonium or diluted household bleach are suitable for use.

Information for users

Disinfectants are liquids, sprays and wipes that are designed for use on surfaces to kill germs (microorganisms such as bacteria and viruses). They can play an important role in infection control. Disinfectants are not to be taken internally or used on the skin, and when selecting a disinfectant for use, it is important to consider whether it is suitable for the surfaces to be disinfected.

Follow the instructions on the label

The disinfectant label usually includes information about the surfaces that it can be safely used on, like bench tops in the home, floors, toilet seats, work benches and other premises and may also include:

- pre-cleaning advice (i.e. cleaning the surface to remove other contaminants or debris before applying the disinfectant)
- dilution of the product
- the application method
- contact time (how long the product needs to be on the surface being disinfected to inactivate or kill microorganisms)

Additional tips on using disinfectants safely and effectively

Care should be taken with respect to any hazard warnings and people should always use the products in a well ventilated area. People should also not mix different cleaning/disinfection products together. It is recommended that disposable gloves are worn when cleaning and disinfecting surfaces. Gloves should be disposed immediately after use and hands washed. If disposable gloves are not available, reusable gloves can be worn but should not be used for any other task.

It is important that any visibly dirty surfaces are pre-cleaned with a detergent, or soap and water solution, and allowed to dry prior to disinfection with the disinfectant.

Information for cleaning staff

- The risk when cleaning is not the same as the risk when face to face with a sick person who may be coughing or sneezing
- Cleaning staff should be informed to avoid touching their face, especially their mouth, nose, and eyes when cleaning
- Cleaning staff should wear impermeable disposable gloves and a surgical mask plus eye protection or a face shield while cleaning
- Cleaners should use alcohol-based hand rub before putting on and after removing gloves
- Alcohol-based hand rub should also be used before and after removing the surgical mask and eye protection

The surgical mask and eye protection act as barriers to people inadvertently touching their face with contaminated hands and fingers, whether gloved or not.

The disinfectant used should be one for which the manufacturer claims antiviral activity, meaning it can kill the virus (such as chlorine-based disinfectants)

If there is visible contamination with respiratory secretions or other body fluid, the cleaners should wear a full length disposable gown in addition to the surgical mask, eye protection and gloves

Advice should be sought on correct procedures for wearing PPE.

Use of disinfection

- Use disinfectant solution and follow manufacturer's instructions for use
- Wipe the area with disinfectant solution using disposable paper towels or a disposable cloth
- Dispose of gloves and mask in a leak proof plastic bag
- Wash hands well using soap and water and dry with disposable paper or single-use cloth towel - if water is unavailable, clean hands with alcohol-based hand rub.

Preparation of disinfectant solution

- Gloves should be worn when handling and preparing disinfectant solution
- Protective eye wear may need to be worn
- Disinfectant solution should be:
 - used mainly on hard, non-porous surfaces
 - given sufficient contact time to kill the virus (i.e. at least 10 minutes).

Social contact environments

Social contact environments include (but are not limited to) office spaces, work stations, transport vehicles, plant & equipment cabins, weighbridges, mill offices, livestock offices and work station bench tops.

The risk of transmission of COVID-19 in these environments can be minimised through a good standard of general hygiene, which includes:

- Promoting cough etiquette and respiratory hygiene
- Social distancing – apply the four (4) metre square or >1.5m separation distance rules
- Routine cleaning of frequently touched hard surfaces with detergent/disinfectant solution/wipes
- Providing adequate alcohol-based hand rub for staff to use - alcohol-based hand rub stations should be available, especially in areas where food is being consumed and frequent touching of surfaces occurs (amenities)
- Training staff on use of alcohol-based hand rub.

	Areas	Actions
Routine cleaning in buildings	<p>Employee communal areas. These environments include (but are not limited to):</p> <ul style="list-style-type: none"> • staff meal rooms • staff meeting rooms • admin offices • weighbridge offices • mill office • livestock office • workshop office and • work station benches. 	<p>Routine cleaning (at least daily) of frequently touched hard surfaces with detergent/disinfectant solution/wipe.</p> <p>Providing adequate alcohol-based hand rub for staff. Alcohol-based hand rub stations should be available, especially in areas where food is consumed and frequent touching of surfaces occurs.</p> <p>Training staff on use of alcohol-based hand rub.</p>
Routine cleaning of vehicles	<p>Environments include (but are not limited to):</p> <ul style="list-style-type: none"> • motor vehicles inc. utes • loaders • feed trucks • motorbikes • general equipment 	<p>Routine cleaning of frequently used vehicles, plant and equipment.</p> <p>Clean between users and/or shifts – door handles, steering wheels, levers, grabs etc.</p> <p>Vehicle air-conditioning should be set to fresh air.</p>
Areas where workers where have been unwell (suspected of COVID-19 infection)	<p>Environments include (but are not limited to) offices, rooms, motor vehicles, plant and equipment</p>	<p>Clean and disinfect frequently touched surfaces with detergent and disinfectant wipe/solution.</p> <p>Clean and disinfect equipment after each use.</p> <p>Clean and disinfect surfaces that have been in direct contact with or exposed to respiratory droplets.</p>
Areas where workers have been who subsequently tested positive for COVID-19 infection	<p>Environments include (but are not limited to) offices, rooms, motor vehicles, plant and equipment</p> <p><u>Note:</u> Clean using a combined detergent and disinfectant with activity against viruses (according to label/product information) or a chlorine-based product such as sodium hypochlorite, where indicated for use (i.e. a combined detergent/disinfectant wipe or solution)</p>	<p>Comprehensive and enhanced cleaning procedure to decontaminate an area following a person with an infectious or communicable disease:</p> <ul style="list-style-type: none"> • Wear PPE - surgical mask, protective eyewear, gloves and gown • Damp dust all surfaces, furniture and fittings • Clean windows, sills, frames and floor • Remove PPE and perform hand hygiene • Clean all cleaning equipment and return it to the storage area, discard any waste • Perform hand hygiene

Source: Referenced from Therapeutic Goods Administration, Department of Health, Australian Commonwealth Government

RESOURCES

Federal and State Authorities are all preparing and distributing information on what to do if an employee returns a positive COVID-19 test and where to source employees.

Useful guides include:

- Click [HERE](#) for South Australian Government's advice outlining actions for businesses to take in response to a positive COVID-19 test result by an employee, contractor or volunteer (positive case) that has been in their business.
- Click [HERE](#) for Queensland Government's Fact Sheet on COVID-19 impact on Queensland agriculture workforce, included where and how to source employees.

Disclaimer

This document has been developed to provide general guidance to assist feedlot operators plan for and mitigate the risks posed by COVID-19 to their employees, their business and assist in the care of livestock. It is not to be used for any other purpose or made available to any other party, except your partners or advisors, without prior written consent from the Australian Lot Feeders Association.

While care has been taken preparing this guide it does not constitute legal advice. In particular, the protocols that are suggested to be followed in the event of an employee or a member of your workforce being confirmed positive for COVID-19 are recommendations only. They do not constitute official advice. You must heed any advice and directions given by public health officials.

Be aware that the pandemic situation is changing rapidly, and that these guidelines may need to be revised in the light of future developments.