



The Australian and New Zealand Society of Occupational Medicine: Submission to the COVID-19 Response Inquiry

Introduction

The <u>Australian and New Zealand Society of Occupational Medicine</u> (ANZSOM) is the peak body for medical practitioners and other health professionals who practice in occupational medicine, environmental medicine and workplace health more generally. Our members include specialist occupational and environmental physicians, general practitioners, occupational health nurses and allied health professionals, who work in various industries and settings to help manage workplace risks and protect and manage workers' health.

Our members consider medical issues within the wider context of their psychosocial, industrial, and motivational frameworks, and have a key role in communicating with employers, business and government. They focus on the health effects of the relationship between workers and their work lives, at both an individual and an organisational level. This includes considering the needs of culturally and linguistically diverse workers.

This submission addresses the areas of **governance**, **key health response measures and support for industry and business**. It draws on our experience during the pandemic, particularly as part of the coordinated Victorian response, which saw a sizeable team of occupational physicians mobilised to advise on and implement initiatives across the state to protect essential and emergency services and high-risk industries.

The submission highlights the key areas where the contribution of occupational medicine professionals delivered value through their specialised expertise and collaborative innovative approach. In doing so it provides some insight into strategies that may be considered in future pandemic planning.

Detailed case studies of the examples mentioned in this submission are available on request.

Workers and workplaces - a vital focus for pandemic planning

Management of workplaces and workers has been a vital aspect of the COVID-19 response, aimed at:

- **Identifying and protecting high-risk workers and industries**, such as meat processing, agriculture and food production.
- Protecting vulnerable populations, such as those living and working in aged and disability care, education and quarantine detention.
- Ensuring continuity of essential services, such as health, food production and transport logistics more generally, including shipping and aviation.
- Securing the state and federal economies more generally by ensuring continuity of industries such as transport, mining, manufacturing and hospitality.

With these aims in mind, some of the key considerations for risk management have included:

- Work organisation: including managing shifts and workflows to minimise transmission.
- Work environments: including managing ventilation and disinfection.
- **Worker protection**: including vaccination, personal protective equipment (PPE) and education.

Getting it right – ensuring early and ongoing access to evidence and expertise

Managing the risks in workplaces is a complex task requiring diverse technical inputs and the ability to interpret and act on the rapidly evolving situation that is characteristic of a pandemic. Access to the expertise of various professional groups including occupational physicians, nurses and hygienists, public health and infectious diseases physicians and nurses, ventilation experts and health and safety professionals is therefore essential.

These inputs are required at various levels to inform policy and guide practical implementation.

During the COVID-19 pandemic, two high-level examples stood out:

1. The Infection Control Expert Group (ICEG)

This group was the major source of advice regarding COVID control for the Australian Health Protection Principal Committee (AHPPC). The composition of ICEG was initially confined to infectious disease physicians and infection control nurses. An experienced occupational and environmental physician joined the group when it became apparent that a wider skill base was needed, especially for to advise regarding control in workplaces outside the healthcare system.

2. Victorian Taskforce for Building and Construction Industry

A novel model of governance was established in Victoria to prevent and control COVID-19 infections in the building and construction industry. A taskforce with senior representatives from the Victorian Department of Health, WorkSafe Victoria, the building industry and relevant unions in the sector was established. A senior occupational and environmental physician with experience in this industry was appointed to act as liaison between the Taskforce and the Chief Health Officer. It was successful in keeping the industry operating with reduced infection rates.

Building on high level policy and advice, occupational physicians, doctors in industry and occupational health nurses applied their knowledge and skills within individual workplaces to help reduce risk of infection, support vaccination strategies and provide advice about return to work. This was instrumental in maintaining operations in numerous industries, from food supply chains and manufacturing to mining. Several case examples are available on request to illustrate the role of occupational health professionals and effective strategies for risk reduction and mitigation.

Of course, many workplaces do not have access to the necessary expertise to manage the workplace risks associated with a pandemic. In Victoria, this was addressed through the establishment and mobilisation of a group of occupational physicians and registrars, who worked with public health professionals to advise on and implement initiatives across the state

to protect essential and emergency services and high-risk industries. Key industries included aviation, shipping, the meat industry, transport, agriculture, food production and logistic supply chains. Some work settings required a nuanced approach, including labour hire, seasonal and international workers and major hazard facilities. The group also supported residential and disability/aged care accommodation and provided advice on workplace management to a range of government bodies including the State and Federal Departments of Agriculture, as well as employer and union groups.

The group comprised up to 20 occupational physicians who were able to respond quickly as needs were identified, conducting workplace and facility risk assessments, engaging with managers and staff, providing expert advice and advising about practical risk reduction strategies.

Ventilation was found to be a problem in many sites including quarantine residences, industry, business, entertainment entities, health and aged care and disability services and residential apartment blocks. As part of the Victorian Government ventilation initiative, the occupational physicians assisted in the development of education and guidance materials for better ventilation and air purification at work, in homes and health care, schools, travel, entertainment venues and public events. The ventilation guidance may be of value in future aerosol-based outbreaks.

Education was an important activity more broadly for this group, as they collaborated with public health and infectious diseases physicians to educate industries, workplaces and workers, ensuring accurate and evidence-based content, such as for webinars and written material, was consistently provided across the state.

This Victorian model provides a practical template for future responses at a state, territory and national level.

Recommendations for pandemic planning

Future outbreaks may have different infectious agents and transmission features and will require accurate early evidence-based data on modes of spread. We recommend that occupational physicians and nurses be recruited and integrated in the public health response as early as possible to improve overall scope and quality of outbreak management through:

- Early identification of high-risk worksites and industries.
- Provision of high-level advice to Government and Chief Health Officers, business, and industry.
- Collaborating with the public health decision makers to manage industries and keep food and other essential industries operating.
- Collaborating with a range health professionals and scientists.
- Using and adapting technical resources developed for the current pandemic.
- Using the lessons and strategies from this experience to inform and direct work in future outbreaks.