



Western Australia Directive Summary

Introduction

1. The *Western Australian Chiropractor Workplace Policy (Policy) Act* is in accordance with the Health Worker (Restrictions on Access) Directions (No 3) under the *Public Health Act 2016* (WA) (“**the Directions**”).
2. The Policy will commence on 29 November 2021 until the cessation of the public health emergency declaration.
3. The Directions have caused significant hardship for healthcare workers in Western Australia.
4. This policy aims to provide the framework for chiropractors to continue working on the premises while not vaccinated against COVID-19, by:
 - a. only treating patients in the event of an emergency as described by direction 7(e) of the Directions (“**Policy Part 1**”);
 - b. detailing COVID-19 safe procedures to reduce the spread of COVID-19 (“**Policy Part 2**”); and
 - c. the use of COVID-19 Rapid Antigen Testing (RAT) as a ‘reasonable alternative’¹ to vaccination (“**Policy Part 3**”).

Policy Part 1 – Workers not vaccinated against COVID-19 only to treat patients in the event of an emergency (“Policy Part 1”).

1.1 Chiropractors who are not vaccinated against COVID-19 will only treat patients in the event of an “emergency situation”, defined under direction 7(e) of the Directions.

1.2 Direction 7(e) states:

“Nothing in these directions prevents a person who is not vaccinated against COVID-19 from entering any part of a health care facility for the purposes of:

¹ COVID-19 Directions (No. 55) 2021: Directions for mandatory vaccination of workers to attend the workplace section 12 <<https://www.optometry.org.au/wp-content/uploads/2021/CHO-Directions-No.-55-of-2021-Directions-for-mandatory-vaccination-of-workers-to-attend-the-workplace-SIGNED-3.pdf>>.

- (a) performing a law enforcement function that cannot reasonably be performed other than by entering the health care facility; or
- (b) performing a statutory duty arising under a written law of the Commonwealth that cannot reasonably be performed other than by entering the health care facility; or
- (c) performing any function or duty or exercising any right or power under a Fair Work entry permit issued by the Fair Work Commission under the Fair Work Act 2009 (Cth) or a Work Health and Safety entry permit issued by the Fair Work Commission under the Work Health and Safety Act 2011 (Cth) or a right of entry permit issued by the Registrar of the Department of the Registrar Western Australian Industrial Relations Commission under the Industrial Relations Act 1979 (WA); or
- (d) responding to an emergency in a capacity other than as a health care worker or a health support worker; or
- (e) providing emergency care to a patient in the health care facility where the emergency care is necessary to be provided immediately and a fully vaccinated or a partially vaccinated health care worker or health support worker is not available to provide that emergency care, and to the extent that a health care worker or a health support worker enters a health care facility for any of the purposes in paragraph (a) to (e), then the health care worker or the health support worker is deemed to be an exempt person at any time they enter or remain at a health care facility for that purpose irrespective of whether that person appears in Column 2 of the table in Schedule 1 or Column 2 of the table in Schedule 2.”**

1.3 “Emergency” is not defined in the Directions.

1.4 Under the COVID-19 Mandatory Vaccination (Workers) Directions (No 7) under the *Public Health and Wellbeing Act 2008* (VIC), “emergency situation” is defined as:

“emergency situation means a situation where it is reasonably apparent to an employer that medical treatment is necessary, as a matter of urgency to:

(a) save a person’s life; or

*(b) prevent **serious damage to a person’s health; or***

*(c) **prevent a person from suffering or continuing to suffer significant pain or distress;”***

1.5 Preventing serious damage to a person’s health and preventing suffering significant pain or distress is the usual work of chiropractors. This definition can be read in to direction 7(e) of the Directions to mean that chiropractors who are not vaccinated against COVID-19 can

perform work where a patient displays significant pain or distress.

1.6 Policy Part 1 should be read alongside Policy Part 2.

Policy Part 2 – Implementation COVID-19 safe procedures in clinical settings.

2.1 Unvaccinated chiropractors working in a clinical setting should implement clear COVID-19 safe measures.

2.2 COVID-19 safe procedures should include:

(a) The implementation of a COVID-Safe Plan:

a. A COVID-Safe Plan should include measures such as:

- i. A detailed plan of action to help prevent the risk of infection of COVID-19 in the workplace;
- ii. The appropriate PPE and face mask for the workplace;
- iii. How the workplace should prepare for and respond to the possibility of a COVID-19 infection; and
- iv. How the workplace will meet all the requirements set out in the Directions.

(b) Ensuring density quotients and social distancing measures are maintained in the workplace; and

(c) Accurate record-keeping. For example, ensuring the workplace is registered for a QR code and checking that individuals, including employees, are signing in and out when entering and leaving the premises.

(d) A template to guide the implementation of, and adherence to, these measures can be found here <https://www.coronavirus.vic.gov.au/covidsafe-plan#creating-a-covidsafe-plan>.

(e) The implementation of COVID-19 Rapid Antigen Testing (RAT) for chiropractors who are not vaccinated against COVID-19 (see Policy Part 3).

2.4 When read with Policy Part 1, Policy Part 2 ensures that the risk of COVID-19 infection in a clinical setting is minimal.

² For example, see Department of Health, *COVIDSafe Plan* (18 November 2021) <<https://www.coronavirus.vic.gov.au/covid-safe-plan>>.

Policy Part 3 – The use of COVID-19 Rapid Antigen Testing ('Policy Part 3').

We are aware currently in WA that RAT testing is not allowed but we believe this will be changing soon. The below advice is recommended once that has changed.

- 3.1** RAT is to be used by all unvaccinated chiropractors in a clinical setting.
- 3.2** Our recommendation is the introduction of RAT testing daily, or at least three times per week, for workers who are not vaccinated against COVID-19.
- 3.3** RAT ensures that those attending the workplace are negative for COVID-19, reducing the risk to both staff and patients.
- 3.4** RAT is a 'reasonable adjustment' for chiropractors who are unvaccinated to use to reduce the risk of transmission of COVID-19 while treating persons who are not 'specified persons'.
- 3.5** RAT has been approved by the Therapeutic Goods Administration ("TGA") in accordance with the *Guidance for Implementation and Checklist for Businesses in respect of COVID-19 Rapid Antigen Point of Care Testing* and offers a minimum clinical sensitivity and detection COVID-19 virus of greater than 95%.³
- 3.6** Policy Part 3 should be read alongside Policy Part 1 and Policy Part 2 to ensure that the risk of COVID-19 infection in a clinical setting is minimal.
- 3.7** RAT is currently used alongside or as an alternative to COVID-19 vaccination in various industries in Victoria and New South Wales, including government, agencies, schools, construction. For example, RAT has been approved for use in the emergency department of the Royal Melbourne hospital. These industries have included guidance on use.⁴

³ Therapeutic Good Association, *COVID-19 rapid antigen self-tests that are approved for use in Australia* (17 November 2021) Australian Government Department of Health <<https://www.tga.gov.au/covid-19-rapid-antigen-self-tests-are-approved-australia>>.

⁴ NSW Ministry of Health, *Framework for the Provision of Rapid Antigen Screening for COVID-19 in Clinical and Non-Clinical Settings*, August 2021 <https://www.nsw.gov.au/sites/default/files/2021-08/209659_RAS%20Framework%20and%20Standard%20Operating%20Procedure%20Aug21%20v5.pdf>.