



# Seasonal Workers Health Management Plan Direction—accommodation providers FAQs

The public health direction—[Seasonal Workers Health Management Plan Direction](#)—is effective 12:01 am on Tuesday 5 May 2020 until the end of the declared public health emergency in relation to coronavirus (COVID-19).

## 1. How will the new requirements in the Seasonal Workers Health Management Plan Direction protect regional communities from the spread of COVID-19?

This framework allows agribusiness and commercial fishing to access the seasonal workforce necessary to maintain production, while also protecting regional communities and workers from the spread of COVID-19. The five elements of the framework are:

- Stronger border protections—requiring workers from COVID-19 hotspots to self-quarantine for 14 days before starting work
- Mandatory health management plans—agribusinesses, accommodation facilities and transport service providers for seasonal workers must have a health management plan to manage preventing the transmission of COVID-19 among workers and the community
- Complying with health obligations—everyone has an obligation to keep Queensland as safe as possible by following the public health directions
- Stronger compliance—additional officers are being authorised under the *Public Health Act 2005* to undertake compliance
- Locally-led solutions—working with Local Disaster Management Groups to develop local solutions to address accommodation, transport and workforce supply issues.

## 2. I am an accommodation provider, do I need to submit a health management plan?

Hostels, bed and breakfasts, backpackers, boarding houses, caravan and camping parks (unless they operate solely for permanent residents or health and community services) as well as short-term accommodation facilities that offer shared bathroom or shared kitchen facilities, must have a health management plan and operate in compliance with the health management plan:

- [Accommodation and Transport Health Management Plan Template](#)
- [Guideline for the development of a health management plan—accommodation and private or charter workforce transportation providers](#)

## 3. How long do I have to prepare and submit my health management plan?

Health management plans are mandatory for accommodation providers from the date of commencement of the Chief Health Officer [Non-essential Business, Activity and Undertaking Closure Direction \(No.8\)](#), effective from 12.01am on Tuesday 5 May 2020. It is recommended you develop and submit your workforce health management plan as soon as possible.

## 4. Where do I submit my health management plan and when will I hear if it has been approved?

Your health management plan should be submitted to Queensland Health at [covid.plans@health.qld.gov.au](mailto:covid.plans@health.qld.gov.au). You will receive a confirmation email from Queensland Health when your health management plan is received. Health management plans are not formally approved by Queensland Health, however you may be contacted if further information is required. You may also be visited by an officer authorised under the *Public Health Act 2005* to audit compliance against the plan.



## 5. What records are required to be kept as part of the health management plan?

The type of records required to be kept as part of the health management plan include:

- a guest's accommodation history for the 14 days prior to arriving at the accommodation facility, including evidence of self-quarantining if relevant
- confirmation from the guest that they have not experienced COVID-19 symptoms in the 72 hours prior to arriving at the accommodation facility
- if managing guests in 'household units', record of household units and rosters for common area access.

There is no mandatory time period that records must be kept. However, it is recommended you retain copies of each guest's records for a minimum of 14 days after they have left your accommodation.

## 6. Who is responsible for self-isolation accommodation?

Accommodation for self-isolation is the responsibility of the individual, in the first instance, or the person/business meeting accommodation costs. If a person or business is unable to arrange suitable accommodation, this should be referred to the local disaster management group as a special needs case. Queensland Health does not provide accommodation for persons requiring accommodation when self-isolating.

## 7. How does the accommodation facility approach cleaning rooms of guests?

Accommodation facility staff should avoid close contact with guests that must self-isolate.

Find [health and hygiene advice for accommodation providers](#).

## 8. What are the social distancing requirements for communal areas?

Facilities should manage guests to allow access to areas on the basis of 1 person per 4 square metres.

Accommodation providers can also manage guests' access to areas using a 'household unit' method, where the 'household unit' comprises no more than 4 guests, and access to communal areas is on a rostered basis.

## 9. How will a 'household unit' be defined and managed?

A 'household unit' is a maximum of four people. To be considered a household unit, all persons within the unit must live, work and travel together at all times. People working at different or varied locations cannot form a household unit. Household units may share accommodation (for example, four people sharing a room) and can access communal areas such as kitchens and showering facilities together on a rostered basis. Health management plan guidelines provide advice on the management of household units, including rostering and recommended cleaning of communal areas between household unit use.

Find additional [guidance for accommodation providers](#).

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