



## Queensland Health

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# Designated COVID-19 Hospital Network Direction (No. 2)

## Summary

**Effective from:** 1.55pm AEST 31 May 2021

**Posted:** 31 May 2021

## Direction from Chief Health Officer in accordance with emergency powers arising from the declared public health emergency

*Public Health Act 2005* (Qld)

Section 362B

On 29 January 2020, under the *Public Health Act 2005*, the Minister for Health and Minister for Ambulance Services made an order declaring a public health emergency in relation to coronavirus disease (COVID-19). The public health emergency area specified in the order is for 'all of Queensland'. Its duration has been extended by regulation to 29 June 2021 and may be further extended.

Further to this declaration, I, Dr Jeannette Young, Chief Health Officer, reasonably believe it is necessary to give the following direction pursuant to the powers under s 362B of the *Public Health Act 2005* to assist in containing, or to respond to, the spread of COVID-19 within the community.

## Preamble

The purpose of this Direction is to protect the health of the community and health workers, and safeguard the delivery of non-COVID-19 hospital care, by mitigating the risk of the spread of COVID-19 through a consistent and best practice approach to the management of individuals diagnosed with COVID-19 in Queensland or international arrivals at risk of developing COVID-19.

This Direction establishes designated COVID-19 hospitals. These hospitals have inpatient capacity, infrastructure, workforce and services that support a high degree of clinical capability to manage the spectrum of acuity of COVID-19 positive patients.

This Public Health Direction affects:

- a. operators of hospitals who may have an individual with COVID-19 present;

- b. operators of designated COVID-19 hospitals where individuals who have COVID-19 are isolated or individuals subject to quarantine receive health care;
- c. individuals who have COVID-19 who must isolate;
- d. individuals arriving from overseas who are quarantined and who are receiving health care at a hospital;
- e. health workers at a hospital who treat, care for or work in proximity with an individual with COVID-19 or a quarantined person;
- f. ambulance services or others who transport individuals who have COVID-19 or transport quarantined persons to a hospital.

Separately from the requirements under Public Health Directions, under sections 362G and 362H of the *Public Health Act 2005*, a person may be given a direction by an **emergency officer (public health)** to stay at or in a particular place for up to 14 days if the emergency officer believes it is reasonably necessary to assist in containing, or to respond to, the spread of COVID-19 in the community.

## Citation

1. This Public Health Direction may be referred to as the *Designated COVID-19 Hospital Network Direction (No. 2)*.

## Revocation

2. The *Designated COVID-19 Hospital Network Direction* is revoked from the time of publication of this Direction.

## Commencement

3. This Direction applies from time of publication until the end of the declared public health emergency, unless it is revoked or replaced.

## Application

4. This Direction applies to **diagnosed persons, quarantined international arrivals**, any **operator of a hospital** in Queensland, the Commissioner Queensland Ambulance Service and all **health service employees, QAS employees** and **contractors**.

## PART 1 – DIRECTION TO NON DESIGNATED HOSPITALS – TREATMENT OF DIAGNOSED CASES AND INTERNATIONAL ARRIVALS IN QUARANTINE

5. The **operator of a hospital** must ensure that a **diagnosed person** or **quarantined international arrival** is not knowingly accommodated, isolated, or treated in the hospital unless:

- a. the **hospital** is a **designated COVID-19 hospital** in Schedule 2; or
- b. it is to provide temporary health care to a **diagnosed person** or **quarantined international arrival** in an emergency or urgent situation.

*Note: a diagnosed person or quarantined international arrival may need to be treated in a hospital that is not a designated COVID-19 hospital due to bed capacity, geographical limits, or other emergency circumstances. For example, an international maritime arrival may be treated for non urgent care in a regional hospital that is not a designated COVID-19 hospital if the hospital has a site specific plan in place as required by paragraph 6.*

6. The **operator of a hospital** that is not a **designated COVID-19 hospital**:
  - a. must arrange for a **diagnosed person** to be transported to a **designated COVID-19 hospital** once it is safe for the person to be transported, unless an exemption to provide ongoing care to the diagnosed case is granted by the Chief Health Officer or their delegate under Part 10 of this Direction; and
  - b. may arrange for a quarantined international arrival to be transported to a **designated COVID-19 hospital** once it is safe for the person to be transported; or
  - c. may continue to provide health care in an intensive care unit to a **quarantined international arrival** if the operator of the non-designated hospital is satisfied it has a site specific plan that:
    - i. provides for the staff providing health care to be vaccinated, have routine surveillance testing and wear personal protective equipment as outlined in parts 4, 5, 6 and 7; and
    - ii. includes measures to keep the quarantined international arrival separate from other patients and staff in the hospital to the greatest extent possible; and
    - iii. has a process for collecting and keeping a record of all individuals, including staff, that have direct or indirect contact with the quarantined international arrival; and
    - iv. keeps the quarantined international arrival isolated as required by paragraphs 12 and 13; and
    - v. keeps and provides records as required by Part 8.

7. If the **operator of a hospital** that is not a **designated COVID-19 hospital** becomes aware that a patient in the care of the hospital has been diagnosed with COVID-19, the operator must contact the local public health unit and follow the directions of the local public health unit.

*Example: A private hospital has a patient who becomes a diagnosed person while in the care of the hospital. The hospital must, once it is safe to do so without compromising the care of*

*the patient, transfer the patient to a designated COVID-19 hospital, and must inform the local public health unit and follow its directions. For example, people who had contact with the patient may be required to quarantine under another public health direction such as Management of Close Contacts Direction (No.2) or its successor.*

## **PART 2 – DIRECTION – ISOLATION FOR DIAGNOSED PERSONS AND QUARANTINED INTERNATIONAL ARRIVALS**

8. A **diagnosed person** must **isolate** in a **COVID-19 ward**.
9. A **COVID-19 ward** means an area in a **designated COVID-19 hospital** that:
  - a. is a separate area from the rest of the hospital; and
  - b. has airflow that is isolated from other areas of the hospital; and
  - c. has an entry and exit used exclusively for the COVID-19 ward and measures in place to monitor and record who is entering the ward whenever a **diagnosed person** or **quarantined international arrival** is present; and
  - d. has had an assessment of airflow by a qualified engineer; and
  - e. is clearly identified through signage or other means that it is a COVID-19 ward.
10. A **quarantined international arrival** who requires medical care at a **hospital** must be transported by ambulance or aeromedical retrieval to:
  - a. a **COVID-19 ward**; or
  - b. to a non-designated hospital for emergency or urgent care under paragraph 5 or other care by the non-designated hospital in accordance with paragraph 6.

*Notes: under the Quarantine for International Arrivals Direction (No. 9) and the Quarantine and COVID-19 Testing for Air Crew Direction (No. 2) or their successors an international arrival must travel by ambulance when leaving quarantine for medical care.*

*An exemption may be granted under Part 10 for example to transport an international arrival by another form of transport. These requests will be actioned through the State Health Emergency Coordination Centre.*

11. A person who is **informed** that they have been diagnosed with COVID-19 in Queensland (**diagnosed person**) must travel or be transferred directly to a **COVID-19 ward** for isolation:
  - a. by ambulance service; or
  - b. by an endorsed transport provider with a Transport Plan in the form approved by the Chief Health Officer; or

c. as permitted, allowed, or given under a direction given to the person by an **emergency officer (public health)**.

12. A **diagnosed person** or **quarantined international arrival**:

a. must not leave the **COVID-19 ward** unless:

- i. to avoid injury or illness or to escape a risk of harm; or
- ii. in the event of an emergency situation; or
- iii. to attend another area of the designated COVID-19 hospital for **occasional or intermittent care**; or
- iv. as otherwise required or permitted under a direction given to the person by an **emergency officer (public health)**; and

b. must not receive a visitor unless permitted by the Health Service Chief Executive or nominated representative, in accordance with paragraph 17(e).

13. A **diagnosed person** or **quarantined international arrival** must wear a **surgical mask**, personal protective equipment and follow infection control measures as directed:

- a. when leaving the **COVID-19 ward** as permitted under paragraph 12; or
- b. when directed to do so by a **health service** of a **COVID-19 ward** or an **emergency officer (public health)** unless it is not practicable because of the emergency situation or the need to avoid immediate injury or illness or to escape a risk of harm.

14. A **diagnosed person** must remain at the **COVID-19 ward** until **clearance from isolation** is given to the person, or they have completed 14 days of quarantine as required under another public health direction made under section 362B of the *Public Health Act 2005*, whichever is longer.

*Note: a diagnosed person who is a quarantined international arrival must complete 14 days of quarantine as required by the Quarantine for International Arrivals Direction (No. 9) or Quarantine and COVID-19 Testing for Air Crew Direction (No. 2) or their successors.*

15. A **quarantined international arrival** who refuses to be tested for COVID-19 on day 1, day 5 and day 12 or 13 of their quarantine period, or as directed by an **emergency officer (public health)**, will be quarantined in the **COVID-19 ward** or other **nominated premises** for a further 14 days.

16. A **quarantined international arrival** who is no longer required to be present at the **designated COVID-19 hospital** or **COVID-19 ward** to receive health care must complete their period of quarantine at **nominated premises** as directed by an **emergency officer (public health)** under section 362H of the *Public Health Act 2005* or as required under another public health direction made under section 362B of the *Public Health Act 2005*, whichever is longer.

## PART 3 – DIRECTION – DESIGNATED COVID-19 HOSPITALS

17. The Health Service Chief Executive of a **designated COVID-19 hospital** must ensure that:

- a. **diagnosed persons** and **quarantined international arrivals** are treated and accommodated in a **COVID-19 ward**, unless they are required to attend another part of the hospital for **occasional or intermittent care**; and
- b. the **COVID-19 ward** complies with **COVID-19 care infection control and safety standards**; and
- c. the **COVID-19 ward** has controls in place to minimise contact between **diagnosed persons, quarantined international arrivals** and other patients in the COVID-19 ward; and
- d. the only individuals who work in or enter the **COVID-19 ward** are –
  - i. **health service employees, QAS employees or contractors** who comply with the vaccination, surveillance testing and personal protective equipment requirements in Parts 4, 5, 6 and 7 of this Direction and the *Hospital Visitors Direction (No. 20)* or its successor; or
  - ii. personal visitors permitted by the Health Service Chief Executive or nominated representative who comply with requirements imposed by the Health Service Chief Executive and the *Hospital Visitors Direction (No. 20)* or its successor; and

*Examples: the Health Service Chief Executive may require a personal visitor to be vaccinated and wear personal protective equipment or impose other infection control measures. Under the public health direction for Hospital Visitors, staff, visitors or volunteers cannot enter a hospital if they have been to an interstate exposure venue in the last 14 days.*

*Note: students are not permitted to work in or enter COVID-19 wards.*

- e. a record is kept of each individual who enters or works in the **COVID-19 ward** or who provides **occasional or intermittent care** and including personal visitors; and
- f. **health service employees, QAS employees or contractors** who work in or enter the **COVID-19 ward** or provide **occasional or intermittent care** receive training on, understand and comply with the requirements of this Direction and **COVID-19 care infection control and safety standards**; and
- g. **health service employees or contractors** who work in the **COVID-19 ward** do not work in any other areas of the **Hospital and Health Service** during the same roster period, unless they are a **health service employee** or

**contractor** who entered the ward for **occasional or intermittent care**; and

- h. the **COVID-19 ward** is staffed with appropriately skilled **health service employees** or **contractors** to meet the requirements of treating **diagnosed persons**, including a medical officer with appropriate specialist college qualifications or who is otherwise trained and experienced in the management of infectious diseases.

18. The Health Service Chief Executive of **designated COVID-19 hospital** may allow a person who does not meet the vaccination, surveillance testing and personal protective equipment requirements in paragraph 17(e) to enter or temporarily work in the **COVID-19 ward** if:

- a. emergency care needs to be immediately provided to a **diagnosed person** or **quarantined international arrival**; or
- b. there is no appropriate person in the **Hospital and Health Service** area available to provide care to or transport the **diagnosed person** or to provide services necessary to maintain the safe operation of the **COVID-19 ward** or to maintain a safe working environment for staff.

*Note: please see the reporting requirements in paragraph 23 for a person who provides care or services as described in paragraph 18.*

## **PART 4 – DIRECTION – VACCINATION, TESTING AND PERSONAL PROTECTIVE EQUIPMENT REQUIREMENTS FOR EMPLOYEES IN COVID-19 HOSPITALS**

19. A **health service employee, QAS employee** or **contractor** who works in or enters a **COVID-19 ward** or who provides **occasional or intermittent care**:

- a. must comply with the **COVID-19 care infection control and safety standards**; and
- b. must comply with the vaccination, surveillance testing and personal protective equipment requirements in Parts 5, 6 and 7 of this Direction; and
- c. must not work in any other areas of the **Hospital and Health Service** during the same roster period, unless the individual only provided **occasional or intermittent care**.

## **PART 5 – DIRECTION - COVID-19 VACCINATION REQUIREMENTS FOR HEALTH SERVICE EMPLOYEES, QUEENSLAND AMBULANCE SERVICE EMPLOYEES AND CONTRACTORS**

20. A **health service employee, QAS employee** or **contractor**:

- a. who works in or enters a **COVID-19 ward**; or
- b. provides **occasional or intermittent care**; or
- c. who provides emergency care to a **diagnosed person** or **quarantined international arrival** in an emergency department of a **designated COVID-19 hospital**; or
- d. who is working in an intensive care unit during a time when a **diagnosed person** or **quarantined international arrival** is receiving care in the intensive care unit of a **designated COVID-19 hospital**; or

*Note for paragraph (d): an employee in the intensive care unit who is not vaccinated should be redeployed to another area of the hospital until the diagnosed person is no longer being treated in the unit.*

- e. who transports a **diagnosed person** by ambulance or aeromedical services, including from a **quarantine facility** to a **hospital**,

must comply with the vaccination requirements in this Part.

21. An individual in paragraph 20 must:

- a. be vaccinated for COVID-19; and
- b. notify the Health Service Chief Executive or Commissioner Queensland Ambulance Service or their nominated representatives of receiving a vaccination.

22. A **health service employee, QAS employee** or **contractor** who is not vaccinated must not knowingly enter a **COVID-19 ward** or transport a **diagnosed person** except where:

- a. emergency care is necessary to be immediately provided to a patient in the ward; or
- b. there is no **health service employee, QAS employee** or **contractor** in the **Hospital and Health Service** area available to provide care or transport or to provide services necessary to maintain the safe operation of the **COVID-19 ward** or to maintain a safe working environment for staff.

*Examples: clinical and non-clinical staff (cleaners, security, administrative staff or orderlies) who are necessary to maintain the safe operation of the COVID-19 ward.*

23. A **health service employee, QAS employee** or **contractor** who is not vaccinated but who enters a **COVID-19 ward** under paragraph 22 must:

- a. report the entry to the Health Service Chief Executive or Commissioner Queensland Ambulance Service or their nominated representatives as soon as is reasonably practicable; and
- b. undertake **surveillance testing** under Part 5 and wear a surgical mask at all times when working in the hospital until 14 days has passed since working at or entering the **COVID-19 ward**; and



24. A **health service employee, QAS employee** or **contractor** who is not vaccinated may continue to work in a **Hospital and Health Service**, the Department of Health or Queensland Ambulance Service but must not work in a **COVID-19 ward**, or in an intensive care unit during any period that a **diagnosed person** is being treated in the unit.

*Note: an individual may not be able to be vaccinated due to a medical reason such as risk of anaphylaxis.*

25. The Health Service Chief Executive or Commissioner Queensland Ambulance Service must ensure an employee specified in paragraph 24 is temporarily deployed to another work unit until this Direction is revoked.
26. If deployment under paragraph 25 is not available, the **health service employee, QAS employee** or **contractor** must discuss this with their line manager and consult with the local Human Resources Team for other options.

## **PART 6 – DIRECTION – COVID-19 SURVEILLANCE TESTING FOR EMPLOYEES**

27. A **health service employee, QAS employee** or **contractor** must comply with **surveillance testing** obligations in this Part if they:

- a. work in or enter a **COVID-19 ward**; or
- b. provide **occasional or intermittent care**; or
- c. work in an intensive care unit at the same time as a **diagnosed person** or **quarantined international arrival** is receiving care in the intensive care unit of a designated COVID-19 hospital, unless a different testing requirement is specified in a guideline or protocol for the intensive care ward that has been approved by the Chief Health Officer; or
- d. transport a **diagnosed person** or **quarantined international arrival** by ambulance or aeromedical services, including from a quarantine facility to a hospital; or
- e. provide emergency care to a **diagnosed person** or **quarantined international arrival** in an emergency department of a designated COVID-19 hospital and the local public health unit recommends surveillance testing after completing contact tracing.

28. An individual in paragraph 27 must:

- a. undertake **surveillance testing** for COVID-19; and
- b. notify the **Hospital and Health Service** or Queensland Ambulance Service of being tested; and
- c. if not tested under paragraph (a) or as required by the local public health unit, not work as a **health service employee, QAS employee** or **contractor** until in compliance with testing or until 14 days have passed since the employee worked in or entered the **COVID-19 ward**

or provided the occasional or intermittent care, emergency care or transport.

*Note: an employee who does not consent to a COVID-19 test may be subject to a fine if they knowingly continue to attend the Hospital and Health Service or provide ambulance services while untested.*

29. **Surveillance testing** means, until 14 days have passed since an individual was present at a **COVID-19 ward**, provided the **occasional or intermittent care** or had contact with a **diagnosed person** or **quarantined international arrival**, the individual is:

- a. to have a saliva collection test for COVID-19 for each shift which can be conducted before, during the course of, or after, each shift; and
- b. if away from work for 7 days or more, use best endeavours to be tested for COVID-19 with an oropharyngeal and deep nasal swab at least every 7 days while away until 14 days have passed since the employee was last present at work, unless the employee is able to present for a daily saliva collection test.

*Notes: The requirement for an oropharyngeal and deep nasal swab while away from the hospital applies even if the worker has been vaccinated for COVID-19, as these workers will not be screened with a regular saliva test.*

*The employee may present at any COVID-19 testing location while away. A list of testing locations in Queensland and pathology testing forms for each nasal swab test required while an employee is away will be provided to the employee.*

30. An individual who is tested for COVID-19 as part of **surveillance testing** and who does not have **symptoms consistent with COVID-19** is not required to **isolate** or quarantine while awaiting a test result unless there is another lawful reason for them to do so.

*Example: a relevant health service employee may be directed to quarantine for another reason such as being identified as a close contact of a person with COVID-19.*

31. If an individual in paragraph 27 develops **symptoms consistent with COVID-19**, they must:

- a. immediately seek medical attention; and
- b. be tested for COVID-19 and **isolate** until a negative test result is received and they are symptom-free; and
- c. comply with other requirements in any other public health direction.

## **PART 7 – PPE FOR EMPLOYEES**

32. A **health service employee, QAS employee** or **contractor** must comply with personal protective equipment obligations in

this Part and in the **COVID-19 care infection control and safety standards** if they:

- a. work in or enter a **COVID-19 ward**; or
- b. provide **occasional or intermittent care**; or
- c. provide care to a **diagnosed person** or **quarantined international arrival** in an emergency department; or

*Note for paragraph (c): the requirement to wear a mask in an emergency department does not apply unless it is known that the patient has been diagnosed with COVID-19.*

- d. work in an intensive care unit during a time when a **diagnosed person** or **quarantined international arrival** is receiving care in the intensive care unit; or
- e. transport a **diagnosed person** by ambulance or aeromedical services, including from a **quarantine facility** to a **hospital**.

33. An individual in paragraph 32 must:

- a. be fit tested for an appropriate respirator (such as a P2/N95 mask or approved purified air powered respirator); and
- b. perform fit checking; and

*Note for paragraphs (a) and (b): see the Fit Testing of P2/N95 respirators in respiratory protection programs – Guidance published by Queensland Health for information about fit testing, fit checking and training*

- c. wear an appropriate respirator (such as a P2/N95 mask or approved purified air powered respirator) at all times:
  - i. when working or entering a **COVID-19 ward** or providing **occasional or intermittent care**; or
  - ii. when providing care in an emergency department to a patient who is known to be a **diagnosed person** or **quarantined international arrival**; or
  - iii. when working in an intensive care unit during a time when a **diagnosed person** or **quarantined international arrival** is receiving care in the unit unless a different requirement is specified in a guideline or protocol for the intensive care ward that has been approved by the Chief Health Officer.

34. A **health service employee, QAS employee** or **contractor** who is unable to be fit tested may continue to work in a Hospital and Health Service, the Department of Health or Queensland Ambulance Service but must not knowingly work in or enter a **COVID-19 ward**.

*Note: an individual may not be able to be fit tested and achieve an adequate seal due to the shape of their face.*

35. The Health Service Chief Executive or Commissioner Queensland Ambulance Service must ensure an employee specified in

paragraph 34 is temporarily deployed to another work unit until this Direction is revoked.

36. If deployment is not an option the **health service employee, QAS employee** or **contractor** must discuss this with their line manager and consult with the local Human Resources Team for other options.

## PART 8 – RECORD KEEPING

37. The Health Service Chief Executive and the Commissioner Queensland Ambulance Service or their nominated representatives must keep a record of **surveillance testing** and of individuals who enter a **COVID-19 ward** or transport a diagnosed person.
38. The information must be stored in a secure database that is accessible to authorised persons only and maintained in accordance with the *Information Privacy Act 2009* and the *Public Records Act 2002*.
39. The Health Service Chief Executive and Commissioner Queensland Ambulance Service must notify the chief executive of the Department of Health, or nominated representative, as soon as practicable of any report made to them under paragraph 22 (entry by an unvaccinated employee to a **COVID-19 ward** or transporting a diagnosed person).
40. The Health Service Chief Executive of a **designated COVID-19 hospital** must provide a weekly report to the chief executive of the Department of Health of permissions given by the Chief Executive or nominated representative for:
- a. a non-COVID-19 patient to be cared for in a COVID-19 ward; or
  - b. a personal visitor to a diagnosed person in isolation; or
  - c. any other exception to the requirements of this Direction
41. The **operator of a hospital** that is not a designated COVID-19 hospital must keep a record of **quarantined international arrivals** and any individual who has direct or indirect contact with the arrival. The information must be provided to the chief executive of the Department of Health upon request and stored in accordance with paragraph 38.

## PART 9 – OTHER MATTERS

42. An **emergency officer (public health)** can give a direction to a **health service employee, QAS employee** or **contractor** about the conduct of a COVID-19 test or require the employee to provide evidence of being vaccinated as required by this Direction.

*Notes: An individual can provide evidence of vaccination in their immunisation history statement from the Australian Immunisation Register.<sup>1</sup> An individual can obtain their immunisation history statement from the Australian Government using myGov, the Medicare mobile app or by calling the Australian Immunisation Register and requesting a statement to*

be posted. Information is available at:

<https://www.servicesaustralia.gov.au/individuals/services/medical/immunisation-register/how-get-immunisation-history-statement><sup>2</sup>

## PART 10 – EXEMPTIONS

43. The Chief Health Officer, the Deputy Chief Health Officer or their delegate may grant a person an exemption from all or part of these directions on the basis of extreme exceptional circumstances.
44. An exemption may be given on conditions and if so, the person given the exemption must comply with the conditions.

## PART 11 – PENALTIES

A person to whom the direction applies commits an offence if the person fails, without reasonable excuse, to comply with the direction.

Section 362D of the *Public Health Act 2005* provides:

Failure to comply with public health directions

A person to whom a public health direction applies must comply with the direction unless the person has a reasonable excuse.  
Maximum penalty—100 penalty units or 6 months imprisonment.

Dr Jeannette Young  
Chief Health Officer

28 May 2021

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## SCHEDULE 1 – DEFINITIONS

**Clearance from isolation** means when a registered medical practitioner from the treating **Hospital and Health Service** assesses and certifies that the person meets the criteria for discharge from isolation under the Communicable Diseases Network Australia Series of National Guidelines for Coronavirus Disease 2019 (COVID-19) as amended from time to time and Queensland Health requirements for discharge.

*Note: the Series of National Guidelines are available here - <https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdnasong-novel-coronavirus.htm>*<sup>3</sup>

**Contractor** means a person engaged to perform services (clinical or non-clinical) within Hospital and Health Services as an independent contractor, including:

- a. contractors and consultants;
- b. aeromedical retrieval services;
- c. locum workers;
- d. visiting medical practitioners;
- e. authorised practitioners of a contracted VMO; and

- f. workers engaged under an arrangement with an employment agency or workforce labour company.

**Corrective services facility** has the same meaning as in the *Corrective Services Act 2006*.

**COVID-19 care infection control and safety standards** means:

- a. Australian Government Department of Health Minimising the risk of infectious respiratory disease transmission in the context of COVID-19: the hierarchy of controls as amended from time to time, available at <https://www.health.gov.au/resources/publications/minimising-the-risk-of-infectious-respiratory-disease-transmission-in-the-context-of-covid-19-the-hierarchy-of-controls><sup>4</sup>; and
- b. Queensland Health Hierarchy of controls for prevention of COVID-19 transmission in hospitals V1.0 23 October 2020 as amended from time to time; and
- c. a guideline for the treatment of diagnosed persons in an intensive care unit approved by the Chief Health Officer; and
- d. a standard, guideline, protocol, manual or similar approved by the Chief Health Officer or their delegate appointed to approve documents under this Direction; and
- e. if there is an inconsistency between the documents in (a) to (d) and the requirements of this Direction, the Direction prevails.

*Note for paragraph (d): under section 362FA of the Public Health Act 2005 the chief health officer may delegate a function or power under a public health direction (but may not delegate the power to give a public health direction).*

**COVID-19 ward** see paragraph 9.

**Designated COVID-19 hospital** means a hospital prescribed by the Chief Health Officer in Schedule 2 of this Direction.

**Diagnosed person** means an individual who has been diagnosed with COVID-19 and includes a **quarantined international arrival** who becomes diagnosed with COVID-19 during their period of quarantine.

**Emergency officer (public health)** means an emergency officer appointed under the *Public Health Act 2005*.

*Note: Emergency officers appointed under the Public Health Act 2005 include **public health officers** and police and includes emergency officers (medical) and emergency officer (general).*

**Face mask** means a surgical mask, P2/N95 mask or a cloth face mask with three layers that covers the nose and mouth (but does not include a face shield).

*Note: a scarf or bandana is not a face mask.*

**Hospital** means:

- a. a hospital, as defined in schedule 2 to the *Hospital and Health Boards Act 2011*; or
- b. a private health facility, as defined in section 8 of the *Private Health Facilities Act 1999*; or

- c. a multi-purpose service, as defined in section 104 of the *Subsidy Principles 2014* made under section 96-1 of the *Aged Care Act 1997* (Cth).

**Health service employee** means a health service employee engaged under the *Hospital and Health Boards Act 2011* in Hospital and Health Services or the Department of Health.

**Hospital and Health Service** means a hospital and health service as defined in Schedule 2 of the *Hospital and Health Boards Act 2011*.

**Informed** means given oral or written notice by a **public health officer** or a government authority in another jurisdiction, irrespective of whether that oral or written notice is correct.

*Example: a public health officer may inform a person by SMS, email or telephone call.*

**Isolate** means –

- a. for a **diagnosed person** or **quarantined international arrival** under Part 2 means the requirements set out paragraphs 11 to 14 in Part 2 (Isolation for diagnosed person and quarantined international arrivals); and
- b. for any other individual required to isolate under this Direction:
- i. the person is to travel directly by private vehicle to their home or premises that are suitable to reside in and remain until a negative COVID-19 test result is received and they are symptom-free; or
  - ii. travel directly to, or remain at, a hospital for medical treatment, and following treatment and discharge from the hospital, travel directly to their home or premises that are suitable to reside in and remain until a negative COVID-19 test result is received and they are symptom-free; and
  - iii. must not leave their home or the premises except to:
    1. obtain a COVID-19 test if permitted under a direction given to the person by an **emergency officer (public health)**; or
    2. avoid immediate injury or illness or to escape a risk of harm; or
 

*Example — escaping a risk of harm related to sexual or domestic and family violence.*
    3. in the event of an emergency situation; or
    4. as otherwise permitted or required under a direction given by the person by an **emergency officer (public health)**; and
  - iv. must wear a **face mask** whenever directed to do so by an **emergency officer (public health)** and when leaving isolation as permitted by paragraph (i), unless it is not practicable because of the emergency situation or the need to avoid immediate injury or risk of harm; and
  - v. must not permit any other any other person to enter their home or the premises unless that other person:

1. usually resides at the premises or is residing at the premises for the purpose of quarantine or isolation at home; or
2. is required to enter the premises in an emergency; or
3. as otherwise required or permitted under a direction given to the person by an **emergency officer (public health)**.

**Nominated premises** means:

- a. a person's allocated room within **government-nominated accommodation** as directed by an **emergency officer (public health)**; or
- b. another premises, including a **residence**, as directed by an **emergency officer (public health)**.

**Occasional or intermittent care** means health care provided to a **diagnosed person** or **quarantined international arrival** in a **designated COVID-19 hospital** that is not part of the routine care provided in the **COVID-19 ward** for example specialist consults (including infections disease consultations), dialysis, palliative care, obstetrics, nuclear medicine, allied health care or medical imaging. Occasional or intermittent care may be provided within the **COVID-19 ward** or another area of the designated **COVID-19 hospital**.

**Operator of a hospital** means a person who owns, controls or operates the **hospital**.

**Public health officer** includes an emergency officer under section 315 of the *Public Health Act 2005*, a contact tracing officer under section 90 of the *Public Health Act 2005* or an authorised person under section 377 of the *Public Health Act 2005*.

*Note: an emergency officer under the Public Health Act includes an emergency officer (general) and emergency officer (medical).*

**QAS employee** means a person appointed under section 13 (employees) or section 14 (honorary ambulance officers) of the *Ambulance Service Act 1991*.

**Quarantine facility** means a hotel or other accommodation premises at which a quarantined international arrival is residing and at which quarantine services are provided under the *Requirements for Quarantine Facility Workers Direction (No. 4)* or its successors.

**Quarantined international arrival** means an individual who is an international arrival subject to the *Quarantine for International Arrivals Direction (No. 9)* or *Quarantine and COVID-19 Testing of Air Crew Direction (No.2)* or their successors and has been directed to quarantine by an **emergency officer (public health)**.

*Example: an individual who has arrived from overseas and has been directed to quarantine for 14 days in government nominated hotel quarantine.*

**Surgical mask** means a single use surgical mask with a minimum level 1 barrier protection level under the Australian Standard (AS 4381:2015) that covers the nose and mouth.

**Surveillance testing** see paragraph 29.



**Symptoms consistent with COVID-19** means fever or history of fever, symptoms of acute respiratory infection (cough, shortness of breath, sore throat), loss of smell, loss of taste, runny nose, diarrhoea, nausea, vomiting or fatigue.

## SCHEDULE 2 – DESIGNATED COVID-19 HOSPITAL

Cairns Hospital, Cairns and Hinterland Hospital and Health Service

Gold Coast University Hospital, Gold Coast Hospital and Health Service

Queensland Children’s Hospital, Children’s Health Queensland

Sunshine Coast University Hospital, Sunshine Coast Hospital and Health Service

Prince Charles Hospital, Metro North Hospital and Health Service

Royal Brisbane and Women’s Hospital, Metro North Hospital and Health Service

Last updated: 31 May 2021

## Understanding this Direction

Information to help you understand what this Direction means to travellers, people diagnosed with COVID-19 and operators of health facilities.

[Find out more<sup>5</sup>](#)

## Links

1. <https://www.servicesaustralia.gov.au/individuals/services/medicare/australian-immunisation-register>
2. <https://www.servicesaustralia.gov.au/individuals/services/medicare/australian-immunisation-register/how-get-immunisation-history-statement>
3. <https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm>
4. <https://www.health.gov.au/resources/publications/minimising-the-risk-of-infectious-respiratory-disease-transmission-in-the-context-of-covid-19-the-hierarchy-of-controls>
5. <https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19/current-status/public-health-directions/designated-covid-19-hospital-network>

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[Right to information](https://www.health.qld.gov.au/system-governance/contact-us/access-info) (<https://www.health.qld.gov.au/system-governance/contact-us/access-info>).

[Accessibility](https://www.qld.gov.au/help/accessibility/) (<https://www.qld.gov.au/help/accessibility/>).

[Jobs in Queensland Government](https://smartjobs.qld.gov.au/jobtools/jncustomsearch.jobsearch?in_organid=14904) ([https://smartjobs.qld.gov.au/jobtools/jncustomsearch.jobsearch?in\\_organid=14904](https://smartjobs.qld.gov.au/jobtools/jncustomsearch.jobsearch?in_organid=14904)).

[Other languages](https://www.qld.gov.au/languages/) (<https://www.qld.gov.au/languages/>).

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