

Australian Health Protection Principal Committee (AHPPC) update to residential aged care facilities about minimising the impact of COVID-19

A statement from the Australian Health Protection Principal Committee (AHPPC) to update residential aged care facilities about minimising the impact of COVID-19.

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The Australian Health Protection Principal Committee (AHPPC) published advice for [residential aged care facilities about minimising the impact of COVID-19](#) on 21 April 2020. AHPPC continues to emphasise the significant health risk of COVID-19 for the elderly and individuals with co-morbidities or low immunity.

AHPPC recommends that all Residential Aged Care Facilities (RACFs) ensure they are sufficiently prepared to manage a COVID-19 outbreak. [Detailed guidance for facilities](#) is available.

AHPPC considers the personal welfare and mental health of residents in RACFs to be of vital importance. Visitors including family and friends provide support for resident wellbeing, and external service providers such as hairdressers and allied health are an important component of person-centred residential care. As Australia moves towards becoming COVID Safe, these factors must be balanced against the significant risks of COVID-19 outbreaks in RACFs.

Restrictions on entry into RACFs

AHPPC maintains that the following visitors and staff (including visiting workers) should not be permitted to enter a RACF:

- Individuals who have returned from overseas in the last 14 days.
- Individuals who have been in close contact with a confirmed case within the last 14 days.
- Individuals who are unwell, particularly those with fever or acute respiratory infection (for example, cough, sore throat, runny nose, shortness of breath) symptoms.
- Individuals who have not been vaccinated against influenza.

Recommendations for entry into RACFs

Based on emerging evidence and given the current epidemiological and public health situation in Australia, with low levels of local transmission, AHPPC recommends that:

- children of all ages be permitted to enter RACFs — all visitors, including children, must adhere to restrictions on visitor numbers, social distancing and personal hygiene
- visiting service providers such as hairdressers, diversional therapists and allied health professionals be permitted to enter RACFs when their services cannot be provided via telehealth or other adaptive models of care, and the resident cannot attend an external facility to receive these services; these providers must adhere to equivalent social distancing and hygiene practices as they have implemented in community settings
- spouses or other close relatives or social supports are not limited in the number of hours that they spend with their spouse/relative

AHPPC recommends that facilities return to a higher level of protection (such as restricting visiting service providers) if there are recent cases of COVID-19 acquired in the local vicinity of the facility. A guide would be that there are cases in the surrounding suburbs or town that have not been acquired overseas.

AHPPC recommends that RACFs implement measures to reduce the risk of transmission to residents, including:

- limiting visits to a maximum of two visitors at any one time per resident
- visits should be conducted in a resident's room, outdoors, or a specified area in the RACF, rather than communal areas with other residents
- no large group visits should be permitted at this time, however gatherings of residents in communal or outdoor areas which adhere to social distancing and current jurisdictional requirements for gathering size may be permitted

Visitors must practise social distancing where possible, including maintaining a distance of 1.5 metres. Visitors have a responsibility to supervise any children with them, practise hand hygiene and respiratory etiquette, and to comply with directions given by RACF staff.

AHPPC recommends that RACF staff should not be required to supervise visits, however staff should promote compliance with COVID-19 prevention methods by:

- educating visitors on entry about practising social distancing and hygiene during their visit
- placing signage throughout the facility to remind visitors to maintain these measures
- screening visitors on their current health status upon entry to ensure unwell visitors do not enter the facility

In the event a facility needs to return to a higher level of protection (for example, an outbreak of COVID-19 or local cluster in the community), facilities should recommence supervising visitors.

External excursions

AHPPC recommends that external excursions for groups of residents not be permitted.

However, individuals and family members (close friends, partners, couples or siblings/familial groups in an RACF) should be permitted to leave the RACF to attend small family gatherings.

- The size of the family gathering should be in line with current jurisdictional advice and physical distancing and hygiene measures should be adhered to during the visit.
- The RACF should conduct a risk assessment for each visit, taking into account the local epidemiology, number of people attending and the feasibility of physical distancing. The RACF should maintain a record of the visit location, number of people in the gathering and the date of visit.

In the event a facility needs to return to a higher level of protection (for example, an outbreak of COVID-19 or local cluster in the community), facilities should cease all external excursions.

Residents

The current AHPPC advice recommends:

- active screening for symptoms of COVID-19 in residents being admitted or re-admitted from other health facilities and community settings should be conducted
- no new residents with COVID-19 compatible symptoms should be permitted to enter the facility, unless the person has recently tested negative for COVID-19
- residents admitted from other health facilities should be assessed by appropriate medical staff prior to admission to the facility and appropriate infection prevention practices should be implemented for residents returning from treatment or care at other facilities

There is no requirement for routine testing on admission or re-admission, unless clinically warranted. Clinical judgement should be applied — for example, where a patient is coming to the RACF from an area with known community transmission.

One-off screening on entry or re-entry to the facility should comprise a questionnaire about symptoms of COVID-19 and an initial temperature reading.

If otherwise unexplained symptoms are present or indicated in the response to the questionnaire, or fever is present, the resident should not be admitted to the facility. If admission is unavoidable the resident should be isolated and tested immediately, and appropriate infection prevention and control precautions should be implemented. The resident should be managed as per the [CDNA recommendations](#) for suspected COVID-19 cases.

Requirement for visitors to be vaccinated against influenza

Older Australians are at higher risk of morbidity and mortality due to influenza than the general population. While there is no vaccine or treatment for COVID-19, vaccination is a key protective factor against influenza infection. Unvaccinated staff and visitors pose a risk of introducing influenza into a RACF. This would burden the health system and endanger older Australians residing in RACFs.

As a protective measure, AHPPC continues to advise that only visitors and staff who have been vaccinated against influenza may enter RACFs. Individuals with a valid medical reason to not be vaccinated may seek a medical exemption to enter RACFs, in accordance with their jurisdictional requirements.

Management of staff and visitors that are ill

COVID-19 can be introduced into RACFs by staff and visitors who are unwell, which can result in significant outbreaks. RACFs must advise regular visitors and staff to be vigilant in monitoring their health for signs of illness, and staying away from RACFs if they are unwell.

RACFs should undertake health symptom screening of all people upon entry as recommended by the [Aged Care Quality and Safety Commission](#). Residential aged care providers need to take responsibility for the health of visitors and staff to whom they grant entry to protect our most vulnerable community members.

Staff who have symptoms of COVID-19 should be excluded from the workplace and be tested for COVID-19. Staff must immediately report their symptoms to the RACF, even very mild symptoms, and not go to any workplaces. Sick leave policies must enable employees to stay home if they have any of the COVID-19 symptoms, as outlined on the [Department of Health website](#).