





## **COVID-19 information for Board Chairs of Residential Aged Care Providers**

## Dear Chair

We are writing to draw your attention to the rise in COVID-19 and influenza cases in aged care. As we enter the 2024 winter period, it is imperative that your aged care services remain alert and take action to protect older people (and your staff).

Vaccination remains the best line of defence in reducing the risk of serious illness and death of aged care residents for both COVID-19 and influenza. However vaccination rates in residential aged care remain disappointingly low.

You and your Board are responsible for ensuring that residents have access to the recommended vaccine dose as soon as they are eligible. Under Aged Care Quality Standard 3: Personal care and clinical care, aged care providers are also expected to offer staff influenza vaccinations and keep records of these vaccinations.

The value and importance of taking these actions is underscored by the data. People who were vaccinated for influenza last year had a reduced risk of hospitalisation with flu by 68% and the need to visit a GP due to flu by 64%. While COVID-19 vaccine effectiveness data continues to emerge, COVID-19 vaccines have been shown to be effective against hospitalisation (reducing the risk by 71–77%), and against ICU admission (by 73%).

COVID-19 vaccinations are free and recommended every 12 months for people aged 65 and over and every 6 months for people aged 75 and over and adults who are severely immunocompromised. The current Australian Technical Advisory Group for Immunisation (ATAGI) guidelines have removed the requirement to wait for six months after a COVID-19 illness. The influenza vaccines are free under the National Immunisation Program for people aged 65 years or over. ATAGI guidelines allow both vaccines to be administered on the same day.

Funding is available for pharmacists to provide free COVID-19 and <u>National Immunisation</u> <u>Program</u> vaccines at residential aged care homes. Further vaccination guidelines and information on engaging with your Primary Health Network is available on the <u>Department of Health and Aged Care website</u>.

Ensuring <u>rapid access to oral antivirals</u> must also be part of your planning to reduce the risk of severe illness, hospitalisation and death. We encourage you to ensure that staff in your services have already discussed with, and sought consent from, the people in your care for the option of antiviral treatment. This should be done <u>before</u> an outbreak occurs. In case there is any doubt, let us be clear that oral antivirals as a first line treatment for people with COVID-19 should be administered, ideally in the first 24 hours after a confirmed diagnosis, in addition to vaccinations as a vital preventative measure to reduce the overall risk presented by a COVID-19 infection.

To minimise the risk of transmission and ensure effective outbreak management to protect the older people in your care, infection prevention and control (IPC) practices and procedures must be in place.

All residential aged care providers should be self-auditing to ensure they are prepared by using the <u>IPC operational readiness</u> and <u>IPC governance</u> self-assessment checklists. Please be advised that the Aged Care Quality and Safety Commission (Commission) is heightening its monitoring of provider actions taken for self-assessment and readiness.

<u>IPC resources</u> are available on the Commission's website, including the IPC guidance tool which allows users to filter the information according to Commonwealth, state and territory specific guidance.

You and the other members of your governing body are accountable for ensuring that clear and robust systems are in place in all of your residential aged care homes that encompass:

- IPC process oversight, audit and monitoring
- disease outbreak prevention, detection and management
- access to vaccines, immunisation recordings, antiviral therapy access and timely access to medical services
- monitoring and facilitation of staff education and competency training.

Your Board should be working closely with your executive leadership team to ensure that across your services:

- IPC leaders are actively engaged to ensure that all workers are trained in IPC and adhering to IPC practices
- outbreak and workforce management plans are up to date and communicated
- arrangements are in place to ensure continuity of care for residents in the event of an outbreak
- arrangements are in place to purchase personal protective equipment (PPE) and rapid antigen test (RAT) kits through commercial suppliers; and that stock is adequate to cover potential outbreaks and is available to workers at all times
- workers, residents, families and visitors are encouraged and supported to access a COVID-19 and influenza vaccination as soon as they are eligible to do so.

As we are sure you are aware, under the Aged Care Quality Standards in the Aged Care Act 1997, every aged care provider is responsible for ensuring that they have sufficient staff with the necessary knowledge and skills to provide safe, respectful and quality care and services. Aged care providers are also responsible for ensuring that staff have the necessary training, including in IPC practices and procedures, and in the appropriate use of PPE.

Where risk of respiratory illness transmission is high, it may be necessary to apply restrictions to visitors in line with the Industry Code for Visiting in Aged Care Homes. The Commission's Visitor access page provides information and resources for providers, workers and people living in aged care homes and their families to safely manage visitor access while minimising the risk of social isolation.

We do appreciate your continued efforts to protect the people in your care. The evidence is compelling that old age is the biggest risk to becoming seriously ill with COVID-19, and it is now well understood that people living in residential aged care are particularly vulnerable to COVID-19 and other infections.

Thorough preparation and ongoing vigilance are key to managing the risks that COVID-19 presents in aged care settings, and aged care provider Boards and leadership teams have clear accountability and responsibility for ensuring this.

Yours sincerely

Professor Paul Kelly Chief Medical Officer

24 May 2024

Janet Anderson PSM Aged Care Quality and Safety

Commissioner

24 May 2024