



# Aged care vaccinations and preparing for outbreaks - Winter 2024

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**National Outbreak Management Guideline for Acute Respiratory  
Infection (including COVID-19, influenza and RSV) in Residential  
Aged Care Homes**

Version 2.0  
June 2024

Scan to access:



**Table 1 – Case and contact management for COVID-19, influenza, and other confirmed respiratory pathogens (including RSV) - *Resident***

		COVID-19 (RAT or PCR)	Influenza (RAT or PCR)	Other respiratory pathogen (inc RSV)
Resident	Release from isolation	<ul style="list-style-type: none"> <li>After 5 days since symptom onset (or positive test if asymptomatic) provided that acute symptoms have resolved and COVID-19 RAT is negative</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>After day 7 if acute symptoms resolved and no fever for 24 hours. No testing required.<sup>1</sup></li> </ul> <p>Note: During isolation, case can cohort with COVID-19 positive residents.</p>	<ul style="list-style-type: none"> <li>After 5 days from symptom onset, or until acute symptoms resolved, whichever is longer.</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>72 hours after antivirals commenced regardless of symptoms. No testing required.</li> </ul> <p>Note: During isolation, case can cohort with influenza positive residents.</p>	<ul style="list-style-type: none"> <li>Once acute symptoms resolved. No testing required.</li> </ul> <p>Note: During isolation, case can cohort with residents with same confirmed pathogen.</p>
	Antiviral treatment	COVID-19 antivirals (via treating clinician).	Influenza antivirals (via treating clinician).	Seek guidance from treating clinician.

**Table 1 (cont) – Case and contact management for COVID-19, influenza, and other confirmed respiratory pathogens (including RSV) - *Staff and Visitor***

		COVID-19 (RAT or PCR)	Influenza (RAT or PCR)	Other respiratory pathogen (inc. RSV)
<b>Staff</b>	Return to work	<ul style="list-style-type: none"> <li>After 5 days since symptom onset (or positive test if asymptomatic) provided that acute symptoms have resolved and COVID-19 RAT is negative</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>After 7 days if acute symptoms resolved for 24 hours, no testing required. If symptoms continue, return when acute symptoms resolved and no fever for 24 hrs.</li> </ul>	<ul style="list-style-type: none"> <li>5 days from symptom onset, or until acute symptoms resolved, whichever is longer.</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>72 hours after antivirals commenced. No testing required.</li> </ul>	<ul style="list-style-type: none"> <li>Once acute symptoms resolved. No testing required.</li> </ul>
<b>Visitors</b>	Visitors to RACH	After day 7 if acute symptoms resolved and no fever for 24 hours. No testing required.	<ul style="list-style-type: none"> <li>After 5 days from symptom onset or until symptoms resolved, whichever is longer.</li> </ul> <b>OR</b> <ul style="list-style-type: none"> <li>72 hours after antivirals commenced.</li> </ul>	<ul style="list-style-type: none"> <li>Exclude if symptomatic.</li> </ul>

# How to prepare for new ARI symptoms or an outbreak:

- **Vaccinations**

- Promote and facilitate COVID-19 and influenza vaccination among residents, staff, visitors and contractors

- **Infection prevention and control activities**

- Regularly undertake IPC risk assessments and stay up to date with national and jurisdictional IPC guidance
- All aged care workers should have suitable qualifications, experience and training to perform IPC practices relevant to their role

- **Planning**

- Utilise established clinical pathways with GPs, Nurse Practitioners, pharmacists and pathology providers
- Have early discussions with residents about vaccinations and oral antiviral treatments

- **Testing**

- Have sufficient stocks of RAT kits, on hand and order from commercial suppliers before being impacted by an outbreak
- Develop a systematic method for detecting and recording residents in the RACH who develop [ARI symptoms](#), and their accompanying testing date/s and results

- **Maintain resident wellbeing**

- Engage residents and their representatives in key decisions prior to an outbreak, including resident choices regarding isolation
- When planning, RACHs should consider jurisdictional advice and the [sector code for visiting in aged care homes](#) regarding entry restrictions (including screening) for visitors and staff, and use of PPE during an outbreak



# Initial actions – New ARI symptoms in a resident:

- Step 1: Isolate the symptomatic resident
- Step 2: Test
- Step 3: Risk assessment and risk management
- Step 4: Infection prevention and control measures
- Step 5: Case and contact management
- Step 6: Notification and reporting
- Step 7: Activate outbreak management plan
- Step 8: Communicate
- Step 9: Declaring an outbreak over

Genevieve Donnelly

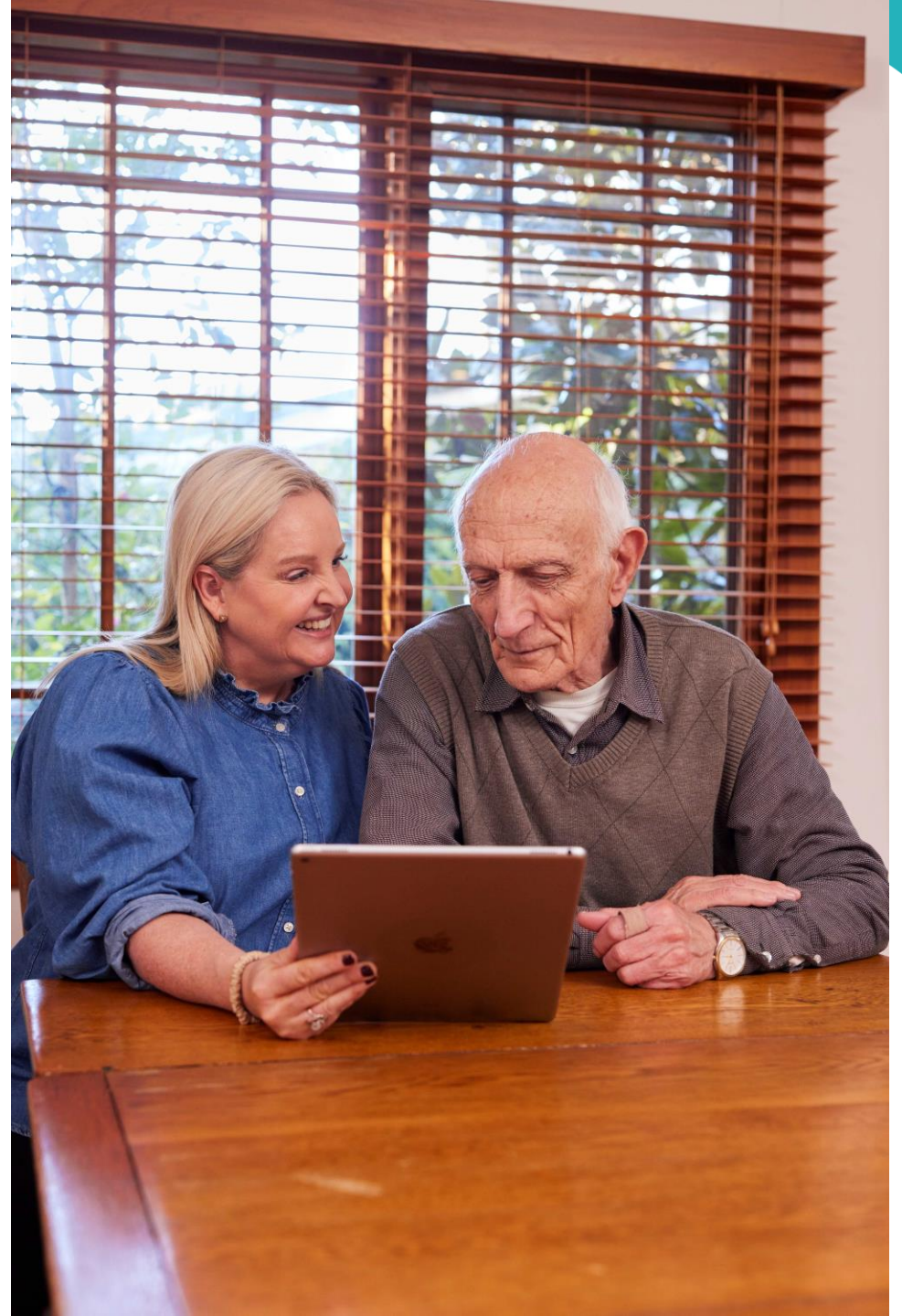
Assistant Secretary

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# COVID-19 and flu vaccinations are still important

- Older age is the strongest risk factor for COVID-19 disease
- Immunity wanes over time and COVID-19 cases continue to occur in aged care homes
- Getting vaccinated has many benefits, including protecting against severe illness and death from COVID-19



# 2024 COVID-19 and flu vaccination advice

- COVID:
  - 75 years and older: Recommended dose every 6 months
  - 65-74 years: Recommended dose every 12 months, eligible to receive a dose every 6 months
  - 18-64 years with severe immunocompromise: Recommended dose every 12 months, eligible to receive dose every 6 months
  - All other adults can receive a single dose this year.
- Influenza
  - Recommended for all Australians from 6 months of age
  - Particularly important for people 65 years and over

# Supporting access to COVID vaccinations

- Free COVID-19 and flu vaccines are available to all aged care residents
- Incentive payments are provided for doctors and pharmacists to vaccinate aged care residents
- PHNs can implement local initiatives to assist with access to COVID-19 and flu vaccinations
- Vaccine Administration Partners Program addresses gaps in primary care vaccination services



## For more information

Email:



Government support enquiries email:



Website:



Updated CDNA Guidelines:



# Useful links and contacts:

- [Australian Guidelines for the Prevention and Control of Infection in Healthcare](#)
- [Q&As on combination rapid antigen self-tests | Therapeutic Goods Administration \(TGA\)](#)
- [Aged Care Quality and Safety Commission COVID-19 Regulatory bulletin and media statement](#)
- [Infection Prevention and Control Self-assessment checklists | Aged Care Quality and Safety Commission](#)
- [Aged Care COVID-19 infection control training | Australian Government Department of Health and Aged Care](#)

# Useful links and resources:

- [healthdirect | Australian Government Department of the Health and Aged Care](#)
- [Residential aged care residents COVID-19 vaccination rates | Australian Government Department of Health and Aged Care](#)
- [COVID-19 booster eligibility checker | Australian Government Department of Health and Aged Care](#)
- For help with vaccinations, you can call the Vaccine Operations Centre on [\*\*1800 318 208\*\*](#)
- If you experience difficulty accessing vaccination services, please contact the department on [racfvaccineclinics@health.gov.au](mailto:racfvaccineclinics@health.gov.au)





[agedcareengagement.health.gov.au](https://agedcareengagement.health.gov.au)



Phone **1800 200 422**  
(My Aged Care's free call phone line)