

# Secretary

Dear service provider

Thank you for your ongoing efforts to support the COVID-19 response. It is pleasing to see case numbers in Australia and in residential aged care facilities now so low. This is the result of an extraordinary amount of cooperation and collaboration across the sector and all levels of Government, and I thank you for your part in this.

On 13 October 2020 the Minister for Aged Care and Senior Australians, Senator the Hon Richard Colbeck, wrote to all Commonwealth funded aged care providers delivering residential care about the second COVID-19 supplement to support the residential aged care sector. I am writing to provide you with further guidance in relation to the infection prevention control (IPC) lead requirements, which are a condition of this additional funding.

The Minister’s letter set out a requirement for each aged care facility to engage an IPC lead. This requirement is designed to increase infection prevention and control expertise across the aged care sector. It will ensure that each service has a dedicated expert responsible to support the design, implementation and continuous improvement of infection prevention and control policies, procedures and practices within the service. I am sure you will agree that this will better protect residents both from COVID‑19 outbreaks and other infectious diseases.

## IPC lead requirements

The Department of Health (Department) would like to provide further detail on the requirements set out by the Minister, namely:

1. The IPC lead must be a designated member of the nursing staff who has completed an identified IPC course (or initially is in the process of completing)

This requirement has been placed at nurse level (RN or EN) in recognition of the need to be involved in the clinical aspects of a service, level of expertise expected and ability to have influence at a service. It is expected this role will also provide an additional career pathway for nurses in aged care.

1. The IPC lead must be employed by and report to the Provider

It is important for the individual to have a clear relationship with the provider who retains overall responsibility for IPC in accordance with its grant obligations.

1. The role is to observe, assess and report on IPC of the service and assist with developing procedures and providing advice within the service

The IPC lead should play an important role in promoting ongoing best practice and preparedness at a residential facility. Their knowledge should lead the creation and refinement of procedures to reflect best practice, monitoring of IPC practices to determine where shortfalls may exist, and reliable advice for both staff and management to ensure IPC responsibilities are upheld.

1. Must be engaged onsite and dedicated to a facility

The requirement for a dedicated onsite IPC lead recognises the need to provide advice and oversight as part of ongoing, day to day operations and on a localised basis with regard to facility circumstances (including the resident mix, staff mix, services offered and physical aspects of a facility).

1. May have a broader role within the facility and could be an existing member of the nursing staff

It is recognised that IPC leads may have other responsibilities within a facility. With limited excess IPC expertise available, it is anticipated that many IPC leads will be existing nursing staff that benefit from increased knowledge and expertise. At larger facilities, or to address certain deficiencies, providers may determine that a full-time IPC lead or a number of IPC leads is appropriate.

## IPC lead training requirements

By 1 December 2020, each residential aged care facility must have appointed an IPC clinical lead.

By 31 December 2020, this IPC lead must, at a minimum, have completed the Department’s COVID-19 focused online training modules, specifically;

* Infection Control Training – COVID 19; and
* all aged care modules except 2.2 or 9.2, which relate to home care.

The online training, originally released in March and April 2020, is available by searching ‘COVID-19 infection control training’ at [www.health.gov.au](http://www.health.gov.au). IPC Leads can complete the registration to commence the training. Individuals should keep a copy of their completion certificates for verification purposes.

Also by 31 December 2020, the nominated IPC lead must have enrolled in, and/or commenced a suitable IPC training course if they do not have suitable existing qualifications. Individuals enrolled in training courses must have an identified date for completion that is prior to 28 February 2021. It is expected that the second COVID-19 supplement will be used to meet these costs.

On advice from the Australian Health Protection Principal Committee Aged Care Advisory Group, the Department has determined that for an IPC course to be deemed suitable it must:

* focus on infection prevention and control;
* be specified at the level of AQF8;
* be delivered by a recognised education or training provider; and
* have an assessment, or assessments, that facilitate successful completion of the course.

## Identified training courses

The Department has identified that the Foundations of Infection Prevention and Control course offered by the Australasian College for Infection Prevention and Control (ACIPC) meets the above requirements. ACIPC has confirmed that they are able to deliver this course within the timeframes outlined to meet IPC lead requirements. This course is able to be undertaken online and takes 80 hours to complete.

The Department notes that any course that meets the requirements outlined above will be considered suitable.

The following is a list of other identified training courses that meet the educational requirements. Individuals who have completed one of these courses prior to 28 February 2021 meet the training requirements.

* Graduate Certificate in Infection Prevention and Control, Griffith University
* Master in Infection Prevention and Control, Griffith University
* Graduate Certificate of Infection Control, James Cook University
* Graduate Certificate in Nursing Science (Infection Control Nursing), University of Adelaide

## IPC lead reporting

All National Aboriginal and Torres Strait Islander Flexible Aged Care (NATSIFAC) Program providers of residential aged care are requested to provide details of their IPC leads using the form attached to this letter. NATSIFAC providers should return the completed form via email to agedcareIPC@health.gov.au by 31 December 2020.

Further information on IPC lead requirements

Information on IPC lead requirements, as detailed in this letter, will be made available on the Department’s website at [health.gov.au/ipc-leads](http://www.health.gov.au/ipc-leads).

Further questions on IPC requirements can be sent to agedcareIPC@health.gov.au.

The Aged Care Quality and Safety Commission is currently considering how it will have regard to providers’ response to this new requirement in its quality assessment and monitoring activities, and will provide separate advice to providers about this.

General IPC training

The general principles of IPC in residential aged care facilities[[1]](#footnote-1) include that all staff should be trained in basic IPC practices, when they begin employment at the facility, and at regular intervals (annually or more frequently, as required). Providers are reminded to provide a basic level of IPC training to all staff at aged care facilities.

Thank you for your cooperation and contribution to COVID-19 efforts and controlling the spread of the virus in aged care to date. We recognise the challenges and difficulties providers have faced throughout 2020 and appreciate the sector’s responsiveness to this new measure designed to support the aged care sector and protect our older Australians.

Yours sincerely

Dr Brendan Murphy

November 2020

Encl (1): Infection Prevention and Control (IPC) Lead Reporting Form

1. COVID-19 Infection Prevention and Control for Residential Care Facilities, Infection Control Expert Group, 23 October 2020. [↑](#footnote-ref-1)