Developing an Integrated COVID Management Strategy across all Health Jurisdictions to Support Aged Care Residents, the Workforce and the Community Alike

Introduction

Opening up our communities on the achievement of agreed vaccination milestones is now about to be realised.

This document seeks to highlight the challenges experienced over the past two years, while operating aged care services during the pandemic. Specifically, the objective is to highlight the challenges brought about by the current health framework or ecosystem and the impact this is having in regard to delivering optimum care outcomes to residents in residential aged care homes, while also ensuring the health and safety of employee's in a "COVID Normal" society.

Currently, there is no doubt that the many varied and complex issues focussing on COVID management are being addressed by providers, Government (Federal and State) and third-party stakeholders, with the health and safety of care recipients at the forefront. However, managing risk and maintaining the safety of our residents and employees alike, continues to be typified by reactive decision making, further complicated by multiple directions issued across numerous agencies and levels of Government.

There remains a high degree of confusion within the aged care sector in regard to the role of the Department of Health (DoH), NSW Health and even the Aged Care Quality and Safety (ACQSC) Commission in the context of a COVID crisis response. In a broader sense, communication and directions are issued by all parties continuously creating excessive duplication, LHD's are inconsistent in their approach to health protocols (e.g. hospital transfers), collaboration with hospitals varies considerably between LHD's, even advice regarding COVID health and safety protocols have been at times inconsistent across these settings. Further, advice between States has varied significantly.

As we begin to emerge from "lockdown" it is generally accepted that our communities will continue to experience an increased level of COVID activity once restrictions are eased, following the achievement of community vaccination milestones. As a result and despite the high levels of community and workforce vaccination, we will likely experience more frequent COVID outbreaks in residential aged care homes, where older residents, with higher levels of acuity are more vulnerable to infection.

From the outset of the pandemic the entire sector was largely caught off guard and was essentially forced to navigate into new territory reactively, as we learnt new approaches and strategies and waited for science to pave a way forward. Numerous examples exist to demonstrate this fact and also highlight the levels of innovation that have resulted.

Examples Include:

- 1. Vaccination Strategies
- 2. The roles of PCR and RAT testing
- 3. Visitation Restrictions
- 4. PPE Strategies

- 5. Single site workforce arrangement
- 6. Workforce Furloughing
- 7. QR Codes



While these strategies have evolved as a crisis management response to the pandemic, the time has come to develop a truly strategic partnership, involving all stakeholders within the health ecosystem. If we are committed to delivering a best practice approach to protecting the health and wellbeing of our residents, our workforce and our communities alike, the time has come to establish a clearly defined strategic partnership between providers and all health jurisdictions (Federal / State).

This is necessary, not only to define with absolute clarity the roles and responsibility of each stakeholder, it should go beyond and identify resource sharing strategies, single source communication protocols and collaborative approaches, that integrate the operations of providers and health services alike, to minimise duplication and optimise resources.

Given the learnings of 2020/21, there still remains an opportunity to consolidate the various stakeholder strategies within the broader health ecosystem. This is absolutely necessary to ensure the elderly residents, whose care is entrusted to the aged care sector, are given the best pathway through the next phase of the pandemic. The alternative is to continue to respond in silos and in a largely reactive manner, in an environment where best intentions do not equate to best practice outcomes.

Key Outcomes

In terms of the key outcomes the sector requires from a new approach:

- 1. **Continuity of quality care** for existing residents (minimising the disruption of COVID)
- 2. **Develop a clearly defined aged care specific strategy**, that responds to COVID outbreaks effectively and defines each stakeholder's roles and responsibilities clearly and consistently across all jurisdictions and levels of Government
- 3. **Ensure workforce strategies are refined** and that mechanisms are established to allow the effective deployment of the workforce as a whole across the various health settings in responding to crisis

In order to achieve these outcomes the following areas will require specific focus through careful planning and collaborative working arrangements.

1. Clinical Care Strategies

Managing and responding to the COVID virus must be operationalised as we have seen with other infection control strategies. This requires a holistic approach in order to achieve optimal results. In conjunction with both NSW Health and the DoH the sector must urgently develop a set of agreed clinical care strategies that support:

- a. longer term care planning outcomes (living with COVID)
- b. Considers the long-term use of PPE strategies with consistent protocols uniformly applied
- c. Implementation of a vaccination policy that also provides a longer-term view for all stakeholders including residents, employees and visitors.
- d. Confirms the detailed roles and responsibilities attached to COVID outbreak's and other critical response functions, between each health jurisdiction
- e. Confirms the long-term approach to contact tracing and the roles and responsibilities of each stakeholder



- f. Defines the screening mechanisms that are required to be in place by all stakeholders (e.g. PCR / RAT), agrees on a protocol and the mechanism that will allow providers to access these tools
- g. Defines a best practice approach to environmental controls within the accommodation environment (e.g. HEPA air filters)
- Development of a best practice visitation protocol code that incorporates vaccination, indoor / outdoor settings and technology, while focussing on resident wellbeing as a priority
- i. Informs the design of new and refurbished aged care homes to ensure the inclusion of infection control principles.

2. Clearly define the roles and responsibilities of NSW Health, DoH, the Aged Care Quality and Safety Commission and providers

- a. Develop a formal accord or agreement that is applied to all LHD's consistently and adhered to by all stakeholders
- b. Create a communication protocol to ensure one source of truth in regard to health directions, compliance and general advice (i.e. remove the duplication and confusion currently being experienced in receiving similar directions from multiple stakeholders and agencies).
- Agree on a detailed protocol, including the roles and responsibilities of each stakeholder, in regard to the management of COVID positive residents, that also clearly addresses outbreak management and can be modified to adapt to various settings (e.g. regional locations)
- d. Develop a plan that identifies both Government and provider owned assets that can be used to address capacity shortages in regard to significant COVID outbreaks. Again this should be adaptable to both regional and metropolitan settings.
- e. Develop strategies that identify where shared support services can be accessed in the event of serious outbreaks or workforce disruption (e.g. Catering / Laundry)
- f. Engage with the DoH to clearly understand the reform pathway over the next two years, to ensure that policy change, information requests and consultation can be planned, rather than delivered unexpectedly and to ensure that care delivery can be effectively resourced and managed
- g. Receive clear guidance from the Aged Care Quality and Safety Commission regarding their role during an outbreak, ongoing approach to accreditation and establish a collaborative approach, to ensure providers can meet compliance expectations whilst managing the pressures of COVID

3. Workforce

- a. Develop an agreed set of furloughing and COVID response protocols that apply consistently to the workforce across both NSW Health settings and within aged care
- b. Establish clear workforce capacity plans by region that address surge workforce initiatives and also consider accommodation arrangements and logistics management in regional locations
- Create a shared workforce arrangement and agreed protocols that allow access to specific skilled roles and professionals during times of crisis between the various health settings
- d. Develop specific workforce strategies that provide workforce support in regional, rural and remote settings during disruptions due to COVID



- e. Consult with industry regularly regarding ongoing border and visa planning to ensure that longer term workforce planning can be effectively achieved by providers
- f. Identify additional measures to attract, retain and access skilled health workers and professionals

4. Financial

- a. Project and extrapolate the financial implications of the ongoing strategy and develop a partnership model with both health jurisdictions to ensure that the long-term planning requirements of the sector are met
 - i. This should include consideration to support the ongoing PPE demands along with renewed workforce strategies
- b. Assess the implication of ongoing COVID outbreaks to the sector in the context of projected admissions and occupancy and identify the level of liquidity risk that exists within the sector.
 - i. Develop an industry wide liquidity management plan to address this should a heightened level of risk be identified
 - ii. Ensure that effective PPE planning and other support protocols are considered in terms the long term that incorporates funding support, a collaborative sector procurement approach and other strategies designed to optimise efficiencies

5. Communication Strategy

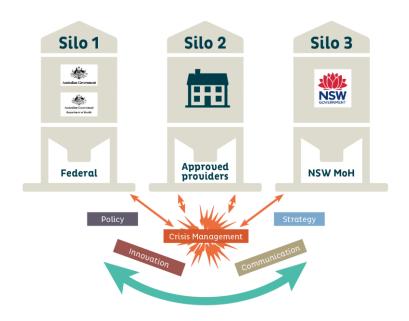
- a. On finalisation of this framework develop a communication strategy that is issued uniformly to all stakeholders within the health eco system
- b. Develop a communication strategy that conveys the collaborative framework to communities, workforce and users of the various health services to create further confidence in the system and the approach to supporting the community
- c. Ensure a single and appropriate source of communication is established within each channel and for appropriate areas or health subsets when responding to the ongoing COVID management strategies and directions to the aged care sector
- d. Establish a governance structure to support this ongoing strategy (that includes all stakeholders) until such time that the level of risk within the environment permits otherwise

Whilst the past eighteen months have seen unprecedented demands placed on the sector and a level of unpredictability not previously experienced within our health services more broadly, we have still managed to improve workflows and working relationships between the various stakeholders operating within the health ecosystem. The disruption of COVID has also led to increased innovation, collaboration and the development of new strategies, policies and protocols that have ultimately saved many thousands of lives.

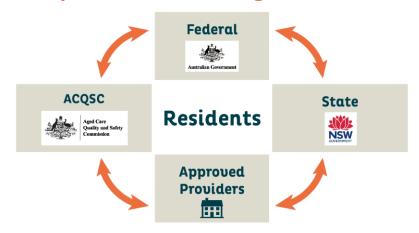
As we plan for the new "COVID-normal" we must proactively draw on the progress made and work together not only as an industry, but as an integrated health sector, to enable the ongoing protection of the vulnerable people we are entrusted to care for, always with a focus on their quality of life.



Current COVID Management Model



Proposed COVID Management Model



Example of Stream Lined Approach to COVID Management

	Planning and Policy	Aged Care Communication	Crisis Management
Federal	~	~	
State	~		~
ACQSC	~		~
APs	~		

