



ANHF

AUSTRALIAN NURSING HOME FOUNDATION

澳華療養院基金

Culturally Appropriate Aged Care Since 1980

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What to expect in the event if the facility has a suspected or confirmed case of COVID-19?

When the resident presents COVID-19 symptoms

- The resident's primary contact will receive a phone call from the facility registered nurse in the first instance when the resident starts showing flu-like symptoms.
- The resident will be organised to be seen by his/her GP or the after-hours doctor.
- Medical intervention or treatment commences.
- Swab test will be conducted for the resident to be tested for COVID-19.
- During the period while the test result is not known, the resident will be isolated and cared for in his/her room. Additional precautions including the use of PPE such as masks and gowns will be required to put on for anyone entering this room.
- The resident's room-mate in the share room will also be tested and be arranged to stay in room till the result is returned.
- The resident's nominated primary contact will be updated by the facility registered nurse on the resident's condition.

When the resident's test returned positive

- An outbreak will be declared at the facility which will trigger a lockdown of the facility.
- The resident's primary contact will receive a phone call from the facility management or his/her delegate as soon as practicable (within an hour from the positive test result is received).
- The primary contact will be given support and opportunities to ask questions, so that they are informed to share information with other family members or friends.
- The resident will remain isolated and care for in his/her room, or be transferred to a more suitable room if available in the facility.
- A designated phone number will be provided for the COVID-19 positive resident's primary contact for future communication from this point on.
- In the meantime, the facility management would have notified the State Health authority (Public Health Unit) who will commence the coordination of the public health response to the outbreak.

When a staff member's test returned positive

- It would be highly unlikely that the staff member would be on site because all staff presented symptoms would have been excluded from work.
- Currently we require all staff to report concerns of probable COVID-19 contacts to their facility manager for risk assessment. We follow the

guidelines by the State Health authorities in directing staff how to respond to their concerns. When in doubt, we will not allow staff to return to work until they obtained clearance from the test.

- Upon receiving a report of positive test result of any staff member, we will notify State Health authority and take direction from them immediately. An outbreak will be declared at the facility which will trigger a lockdown of the facility. All residents will be asked to remain in their rooms.
- We would have commenced contact tracing and arranged for all identified close contacts to be tested for COVID-19.
- We will notify the residents' primary contacts if the residents are identified as close contacts.

What happened to other residents in the facility

- We would have commenced contact tracing and arranged for all identified close contacts to be tested for COVID-19.
- We will notify the residents' primary contacts if the residents are identified as close contacts.
- Staff will sensitively inform all residents of the reason for the lockdown and we will continue to care for all other residents (symptomatic or not) who would have been asked to remain in their rooms.
- Both Commonwealth and State governments have guidelines for the facility regarding the lockdown of the facility, the use of masks and other PPEs in a confirmed case situation.
- The facility will not disclose the infection status of any residents except to the affected resident's authorised representatives. However, the primary contacts of other residents will be contacted by the facility manager's delegates when a lockdown has happened.
- We will provide a daily update to the primary contacts of the clinical status of these residents and also a designated phone number for them to make enquiries if they have any concerns.

During a COVID-19 outbreak

- We will cease all new admission or avoid resident transfers out of the facility if possible (except hospital transfers).
- We will communicate with the primary contacts of all COVID-19 positive residents directly and daily.
- We will bring in extra support via the government to help, e.g. surge workforce, rapid COVID-19 testing capabilities, rapid stocks of PPE.
- We will provide daily operational updates to the public via the COVID-19 updates on our website: www.anhf.org.au
- We will continue to help residents in isolation to communicate directly with their families via phone or video conferencing. We can support family who may want to provide own communication device for the residents to use at this time.

Hospital Transfers or Nursing Home Care

- Since March 2020, NSW Health has introduced a process called "Secondary Triage". All calls from residential aged care facilities to NSW Ambulance have been secondarily triaged by a remote accredited emergency physician consultation service.

- We will transfer the resident to hospital if
 - the need for transfer is for the best interest of the resident in the event of an acute episode. Facility registered nurses are directed to ring 000 and follow the Secondary Triage process.
 - the residents' deterioration or changes of health conditions are related to their medical history, and it is the individual resident and his/her families' wishes for hospital transfer as documented in his/her Advance Care Directive or Advance Care Plan. (In this case we will commence Palliative Care pathway and make referral to the local hospital aged care support teams for support and direction regarding accessing hospitals).
- Regarding the decision to transfer COVID-19 positive residents to hospital
 - State health authority (Public Health Unit) has informed that hospital transfer may not occur for all COVID-19 positive residents as they will decide on a case by case basis depending on whether the transfer is medically warranted and other factors.
 - **It is the position of ANHF to advocate for hospital transfers for our residents who are tested COVID-19 positive due to the limitations of our facility's physical layout in containing the outbreak.**
 - Having said this, our clinical team will continue to adhere to the clinical guidelines and the Public Health Unit's direction in determining the needs for transfer to hospital.
 - Apart from communicating the clinical needs of the residents for hospital transfer, Facility Registered Nurse are directed to ensure the following points are also addressed to the state health emergency physician who is making the decision over hospital admission at the time:
 - The clinical conditions of the residents based on the RN in charge's clinical judgement.
 - The individual resident and his/her families' wishes for hospital transfer as documented in his/her Advance Care Directive or Advance Care Plan, or stated by their family members.
 - The physical limitations (e.g. shared bed) and non-compliant (e.g. residents have behaviour of concerns) in isolating the COVID-19 positive residents in their rooms.
 - If the resident's transfer to hospital request is declined, we will inform the resident's primary contact and seek direction from the emergency physician and/or the resident's own GP to manage the resident's care.
 - We will support the families in exercising their rights to obtain the best care for the resident from the government.