Aged Care Quality and Safety Commission

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

Written Question from 21 August 2020

PDR Number: IQ20-000518

Aged Care Quality and Safety (ACQSC) COVID-19 preparedness survey

Written

Senator: Kristina Keneally

Question:

Did the ACQSC undertaken any surveying with residential or home service providers to ascertain their preparedness in relation to the bushfire response in 2020? If yes, please provide the date when the survey took place and how many residential or home service providers responded. If no survey was undertaken, why not?

When did the COVID-19 preparedness survey go to service providers? Please provide a date. What date did the ACQSC complete the COVID-19 preparedness survey results?

Before the ACQSC conducted its COVID-19 preparedness survey did the Commission know how many residential and home service providers had an emergency plan in place? Please provide a breakdown of how many residential and how many home service providers had a plan in place across each state and territory. If no, why doesn't the ACQSC know or hold this information?

Why did the ACQSC conduct the COVID-19 preparedness survey? Please provide details of what the ACQSC was seeking through the survey.

When did the ACQSC conduct COVID-19 preparedness surveys of all residential and home service providers? Please provide a date or timeframe.

Can the ACQSC provide a copy of the survey questions? If no, why not? Of the 4,000 surveys that the ACQSC received back please provide a breakdown the following:

- The total number of surveys.
- The total number of surveys received back from residential providers.
- The total number of surveys received back from home care providers.

Of the 4,000 survey responses please provide the total number of residential and home service providers that the ACQSC made contact with?

- Where issues were identified how many residential providers did the ACQSC make contact with to follow up with services to monitor and support their COVID-19 preparedness?
- Where issues were identified how many home care providers did the ACQSC make contact with to follow up with services to monitor and support their COVID-19 preparedness?
- Please provide a list of identified issues that compelled the ACQSC to follow up with residential and home service providers in context to the survey results.

Does the ACQSC keep a record of the amount of PPE a residential or home service provider holds in preparedness for an emergency? For example if there is an influenza or gastro outbreak.

Can the ACQSC explain the consequences of any residential or home service provider that is not prepared for an emergency with a plan and the associated PPE?

How many breaches have been found in relation to non-preparedness and what action has been taken by the ACQSC?

As at 8 May, 2020 there were 1,346 providers delivering residential aged care or home care services that requested access to PPE from the National Medical Stockpile. Can the ACQSC provide a reason why these requests were made?

Answer:

In monitoring aged care services against the Aged Care Quality Standards (Quality Standards), the Aged Care Quality and Safety Commission (the Commission) considers emergency preparedness primarily through:

- Standard 8 (3) Effective risk management systems and practices including but not limited to (i)managing high impact or high prevalence risks associated with the care of consumers.
- Standard 8 (3)(c) Effective organisation-wide governance systems relating to the following (iv)workforce governance, including the assignment of clear responsibilities and accountabilities.
- Standard 8 (3)(d) Where clinical care is provided- a clinical governance framework.

During the bushfire crisis across January 2020, the Commission conducted fire-response monitoring for aged care services identified through geospatial mapping as being affected, or at risk of being affected, by the bushfires. The monitoring allowed for individualised risk assessments of fire-affected and potentially fire-affected services, monitoring of evacuated consumers and implementation of a regulatory approach appropriate to the local conditions, risk factors and geographical access. The Commission also monitored providers that were affected and had services elsewhere across the country, for example where some providers were providing surge staff from interstate to support fire affected services.

The Commission conducted the self-assessment surveys to monitor and support providers' preparedness for a COVID-19 or an influenza outbreak.

The purpose of each survey undertaken to date was:

- Infection Control Residential and Home Services Self-Assessment Survey 1:
 To support providers to self-assess their readiness for a possible COVID-19 outbreak, to review their infection control systems in place, and to take action to identify, minimise and manage risks to the safety, health and well-being of consumers.
- Outbreak Management Residential Self-Assessment Survey 2: To support providers to undertake a critical check of their Outbreak Management Plan (OMP) and ensure they were ready to enact it if an outbreak occurs. The

self-assessment tool was accompanied by a Companion Resource which focussed on key actions to support preparedness.

The Commission also contacted by telephone all residential aged care providers across the country between 17 March to 1 April 2020. The aim of the telephone assessment contacts was to support and assist residential aged care providers in evaluating their readiness for an outbreak, review infection control measures, and actions to minimise and manage risks to consumers.

The Commission analysed the survey results from each survey along with intelligence received from other regulatory activities such as complaints information. A non-response to a survey also increased the Commission's assessed level of risk at the service.

Identified services assessed as being at higher risk were followed up by the Commission to monitor and support their preparedness and consider further regulatory action.

Matters that prompted follow up by the Commission included:

- Residential: Sufficient stock of PPE, hand sanitiser and cleaning supplies in anticipation
 of increased need, staff contingency planning, sufficiency of staffing arrangements to
 deal with residents in isolation or cohorts of affected residents
- Home services: Clinical governance processes, routine assessment of consumers with respiratory symptoms, PPE stock, hand sanitiser and cleaning supplies in anticipation of increased need, approaches to consumer plans considering emergency contacts, and continuity of care cancelled or deferred provision of home services due to COVID-19.

The outcomes of Survey 2 are being risk assessed against the service characteristics, compliance profile and location. Non-responders and high-risk services are being followed up and the Commission will consider a range of regulatory actions based on risk assessments.

Where there is evidence that a provider is not complying with the Quality Standards, the Commission will consider the nature and extent of the non-compliance in deciding on regulatory action. This includes consideration of the potential risk to consumers posed by the non-compliance. In cases where it has been determined that a provider's non-compliance poses an immediate and severe risk to consumers, the regulatory action will have more significant implications for a provider.

With respect to non-compliance with Standard 3 requirement (3)(g) Minimisation of infection related risks: between 1 January 2020 and 30 June 2020, the Commission took compliance action against 14 providers; issuing eight non-compliance notices, three notices to agree and three sanction notices.

With respect to non-compliance with Standard 8 requirement (3)(e)(ii): between 1 January 2020 and 30 June 2020, the Commission has taken 14 compliance actions: 10 non-compliance notices, one notice to agree and three sanctions notices.

Start and end dates for the self-assessment surveys are below.

	Released to the	Closed
	sector	
Residential survey #1 (Infection Control)	20 March 2020	27 March 2020
Home services survey #1 (Infection Control)	20 April 2020	29 April 2020
Residential survey #2 (Outbreak	31 July 2020	14 August 2020
Management)		

A copy of the questions for each survey is attached.

The table below shows a breakdown of the number of surveys and responses to 24 August 2020.

	Surveys issued	Responses received
Residential #1	2,724	2,647
Home Services #1	1,640	1,396
Residential #2	2,603	2,424
Total	6,967	6,467

Note: Residential surveys are issued to providers for each *residential service*. i.e. one survey per service. Home services surveys are issued to providers for all their services, i.e. one survey per provider.

The Commission does not keep a record of the PPE held by a provider. Providers are responsible for ensuring an adequate supply of PPE.

Requests by providers to access PPE from the National Medical Stockpile are managed by the Department of Health. The Commission understands that the Department deals with these requests in accordance with set protocols.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

Written Question received 21 August 2020

PDR Number: IQ20-000523

National taskforce on aged care

Written

Senator: Rachel Siewert

Question:

Did the Commonwealth ever consider setting up a national taskforce on aged care to advise Government? Why not?

Answer:

The aged care response to COVID-19 has been closely incorporated into the national health response to the pandemic, and is a critical part of the health pandemic plan. The National Incident Room, the Communicable Diseases Network Australia (CDNA) and the Australian Health Protection Principal Committee (AHPPC) have been the key conduits for developing advice to support aged care actions throughout the pandemic.

On 12 March 2020, the Department of Health established an internal Aged Care COVID-19 Taskforce within the Ageing and Aged Care Group of the Department to coordinate the Government's aged care response to COVID-19. The Taskforce liaises closely with Departmental case managers (based in the Department's state and territory offices) supporting impacted residential aged care facilities and the National Incident Room to support the Government's response to COVID-19 in aged care; as well as state and territory government health departments; and Aged Care Peaks through weekly teleconferences and through the Aged Care Sector Committee.

Collaboration with jurisdictions through National Cabinet, following its establishment earlier this year, continues to support the national response to COVID-19 in aged care. All states and territories are taking immediate action to strengthen the preparedness of residential aged care facilities to respond to future COVID-19 outbreaks.

As announced by the Prime Minister following the National Cabinet meeting of 21 August 2020, this includes:

- ongoing assessment of the preparedness of aged care providers to respond to outbreaks of COVID-19, including a risk profiling tool developed by the Aged Care Quality and Safety Commission to inform emergency response planning;
- auditing of state and territory emergency response capabilities and planning for the standing up of joint health aged care emergency responses; and
- prioritisation of additional face-to-face infection prevention and control training for residential aged care providers.

In addition, an AHPPC Aged Care Advisory Group has been established to support the national public health response to COVID-19 in aged care. The Advisory Group brings together a broad range of critical expertise about the aged care sector, infection control and emergency preparedness, and public health response.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

Written Question received 21 August 2020

PDR Number: IQ20-000525

Pandemic leave for home care workers

Written

Senator: Rachel Siewert

Question:

Are you considering providing pandemic leave going to home care workers?

Answer:

The Pandemic Leave Disaster Payment of \$1,500 for Victorian workers is funded by the Australian Government and administered by Services Australia. This includes home care workers.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

Written Question received 21 August 2020

PDR Number: IQ20-000526

Cost to residents in residential aged care from COVID-19

Written

Senator: Rachel Siewert

Question:

What did StewartBrown calculate earlier this year as the additional cost per resident per day needed to protect older Australians in residential aged care from Covid-19?

Answer:

StewartBrown provided some analysis to the Department in April 2020 that related to a Cabinet decision and is therefore confidential.