Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000086

Question Subject: Unofficial reports

Type of Questions: Question in Writing

Questioner: Senator Patrick

Question:

On what days in December 2019 did the Department of Health receive "unofficial reports of a cluster of pneumonia cases in China"?

What was the source of those: unofficial reports" and who received those reports in the Department of Health?

Did the Department of Health take any action in response to those unofficial reports? If so, what action was taken?

Answer:

On 31 December 2019, the National Incident Room (NIR) in the Department of Health received an email from the Program for Monitoring Emerging Diseases (ProMED) subscription service advising of undiagnosed pneumonia in China.

On 1 January 2020, the NIR began monitoring the situation in China through information provided by the World Health Organization (WHO) under the International Health Regulations and Australia's National Focal Point, and publicly accessible information.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000091

Question Subject: False negative rate for COVID-19 testing

Type of Questions: Question in Writing

Questioner: Senator Griff

Question:

What is the false negative rate for COVID-19 testing in Australia?

Answer:

State and territory health departments notify confirmed cases of COVID-19 for inclusion in the National Notifiable Diseases Surveillance System. These data do not include the false negative rate for COVID-19 testing in Australia.

The Public Health Laboratory Network, a standing committee of the Australian Health Protection Principal Committee, estimates the sensitivity of the current COVID-19 PCR tests to be well over 95 per cent. This will be formally studied in coming weeks by the quality assurance program of the Royal College of Pathologists of Australasia.

(This response relates to PDR Number IQ20-000093)

Senate Select Committee on COVID-19

PARLIAMENTARY INQUIRY QUESTION ON NOTICE

Department of Health

Hearing Name

06 May 2020

PDR Number:IQ20-000092

Question Subject: First engagement with aged care sector regarding visitation guidelines

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

When did the Prime Minister and/or Chief Medical Officer first engage with the aged care sector or service providers in relation to establishing the visitation guidelines announced on 18 March, 2020? Please provide the dates of meetings that took place and who attended the meetings.

Answer:

- On 6 March 2020, the Minister for Aged Care and Senior Australians and the Chief Medical Officer chaired an Aged Care COVID-19 Preparedness Forum.
 - Participants discussed the development of the guidelines for the prevention, control and management of COVID-19 in residential care settings being undertaken by the Communicable Diseases Network of Australia (CDNA), a standing committee of the Australian Health Protection Principal Committee (AHPPC). The list of attendees is at Attachment 1.

- On 13 March 2020, an Aged Care webinar was held where Baptist Care shared their experience managing the outbreak at the Dorothy Henderson Lodge. A Deputy CMO participated in this webinar. On the same day, the CDNA issued the guidelines for the prevention, control and management of COVID-19. The Department issued an electronic newsletter to the aged care sector advising of the new guidelines.
- On 16 March 2020, the Australian Government announced that residential aged care
 providers will be encouraged to limit visits under the CDNA national guidelines aimed at
 the prevention and control of COVID-19. Media release available at:
 https://www.health.gov.au/ministers/senator-the-hon-richard-colbeck/media/covid-19-prevention-guidelines-issued-to-aged-care-providers
- On 16 March 2020, the Department convened a teleconference with aged care peak consumer and provider organisations to seek feedback on potential additional measures to protect residents of aged care facilities.
 - The feedback was obtained prior to the consideration of the new guidelines to prevent transmission of COVID-19 into residential aged care facilities at the AHPPC (chaired by the CMO) meeting on 16 March 2020 and 17 March 2020.
 - The following organisations participated:
 - Aged and Community Services Australia (ACSA)
 - Aged Care Guild
 - Aged Care Quality and Safety Commission
 - Anglicare
 - BaptistCare
 - Catholic Health Australia
 - COTA Australia
 - Dementia Australia
 - Leading Age Services Australia (LASA)
 - National Seniors Australia
 - Older Persons Advocacy Network (OPAN)
 - UnitingCare
- On 17 March 2020, the AHPPC published advice recommending restrictions on entry into RACFs.
 - https://www.health.gov.au/news/australian-health-protection-principal-committee-ahppc-coronavirus-covid-19-statement-on-17-march-2020-0
- On 18 March 2020, the Government announced further visitation restrictions to aged care facilities following consideration of the AHPPC's recommendations. https://www.health.gov.au/ministers/senator-the-hon-richard-colbeck/media/strengthened-guidelines-to-protect-aged-care-residents
- The Chief Medical Officer has been in regular formal and informal contact with the BaptistCare Executive during and after the first major outbreak in a residential aged care facility (RACF), the Dorothy Henderson Lodge. Lessons learnt from this outbreak helped inform recommendations in the CDNA guidelines for the prevention, control and management of COVID-19 in residential aged care facilities, and subsequent advice issued by the AHPPC and Government.

MEETING: Aged Care COVID-19 Preparedness Forum

DATE AND TIME: Friday 6 March 2020 - 12.30pm - 3.00pm

PARTICIPANTS – chaired by Minister Colbeck and the Chief Medical Officer

| ACT Health | Goodwin Aged Care |
|---|--|
| Aged and Community Services Australia | HammondCare |
| Aged Care Guild | Health Direct |
| Aged Care Industry Association | Health Services Union |
| Aged Care Quality and Safety Advisory Council | Juniper |
| Aged Care Quality and Safety Commission | Leading Age Services Australia |
| Austin Health | National Disability Insurance Scheme Commission |
| Australian College of Nursing | National Seniors Australia |
| Australian College of Rural and Remote Medicine | Older Persons Advocacy Network |
| Australian Medical Association | Opal Aged Care |
| Australian Nursing and Midwifery Federation | Pharmaceutical Society of Australia |
| Australian Primary Healthcare Nurses Association | Presbyterian Aged Care |
| BaptistCare | Queensland Health |
| Brisbane North Primary Health Network | Remote Accord Aged Care |
| Bupa | Royal Australian College of General Practitioners |
| Catholic Health Australia | Rural Doctors Association of Australia |
| COTA Australia | United Workers Union |
| Dementia Australia | UnitingCare |
| Emerald Medical Group | Victorian Department of Health and Human Services |
| Estia Health | WA Primary Health Alliance |
| GenWise | |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000093

Question Subject: Minister briefing on recommendations

Type of Questions: Question in Writing

Questioner: Senator Griff

Question:

What proportion of people eventually diagnosed with COVID-19 had prior negative COVID-19 tests?

Of those who had negative tests in Q2, on average, how many additional tests were needed to make a positive diagnosis?

Answer:

State and territory health departments notify confirmed cases of COVID-19 for inclusion in the National Notifiable Diseases Surveillance System. The Department of Health does not receive detailed sequential results for individual patients and jurisdictions do not routinely collate this information.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000096

Question Subject: Government engagement with aged care sector to establish visitation guidelines

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

What engagement has the Government had with the aged care sector or service providers in relation to establishing the visitation guidelines announced on 18 March, 2020? Please provide the dates of meetings that took place and who attended the meetings.

Answer:

- On 26 February 2020, Australia's Chief Medical Officer, Professor Brendan Murphy wrote to all aged care providers on Residential Aged Care Infection Control and Emergency Planning:
 - Reiterating the importance of infection control and being prepared for health emergencies
 - Advising protocols should be established and in place for health emergencies that arise including service-wide infection outbreaks or broader community epidemics
 - Providing links to the following guidance:
 - Guidelines for the Prevention and Control of Infection in Healthcare, by the National Health and Medical Research Council available at: https://www.nhmrc.gov.au/health-advice/public-health/preventing-infection
 - ii. Australian Health Sector Emergency Response Plan for Novel Coronavirus, by the Department of Health available at:
 https://www.health.gov.au/resources/publications/australian-health-sector-emergency-response-plan-for-novel-coronavirus-covid-19

- iii. National Guidelines for Public Health Units in the Series of National Guidelines, by the Communicable Diseases Network Australia (CDNA) available at:
 - https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdnasong-novel-coronavirus.htm
- iv. Factsheets and resources for aged care staff, residents and families, which are available on the Department's website at:
 http://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources
- On 26 February 2020, the Chief Medical Officer convened a COVID-19 clinical stakeholder briefing to discuss the COVID-19 Plan and how stakeholders may be asked to respond as circumstances with the virus evolve.
- On 2 March 2020, the Chief Medical Officer sent a letter to persons who administer or prescribe vaccines. This letter primarily provides details about the influenza vaccination program.
- On 2 March 2020, the Aged Care Quality and Safety Commissioner (Ms Janet Anderson PSM) sent a letter to aged care providers, including residential aged care services, home services and the National Aboriginal and Torres Strait Islander Flexible Aged Care program regarding COVID-19.
 - This letter provided advice to aged care providers across Australia about monitoring their quality and safety requirements, including paying particular attention to their standards and protocols for infection controls to minimise any risks.
- On 6 March 2020, an Aged Care COVID-19 Preparedness Forum was convened with aged care sector stakeholders with the Minister for Aged Care and Senior Australians and the Chief Medical Officer. Members were advised the Communicable Diseases Network of Australia (CDNA) would shortly be releasing guidelines for the prevention, control and management of COVID-19 in residential aged care facilities. The list of attendees is at Attachment 1.
- On 13 March 2020, the CDNA issued the guidelines for the prevention, control and management of COVID-19. The Department issued an electronic newsletter to the aged care sector advising of the new guidelines.
- On 16 March 2020, the Australian Government announced that residential aged care providers will be encouraged to limit visits under the CDNA national guidelines aimed at the prevention and control of COVID-19.
- On 16 March 2020, the Department convened a teleconference with aged care peak consumer and provider organisations to seek feedback on potential additional measures to protect residents of aged care facilities.
 - The following organisations participated:
 - Aged and Community Services Australia (ACSA)
 - Aged Care Guild
 - Aged Care Quality and Safety Commission
 - Anglicare
 - BaptistCare
 - Catholic Health Australia
 - COTA Australia

- Dementia Australia
- Leading Age Services Australia (LASA)
- National Seniors Australia
- Older Persons Advocacy Network (OPAN)
- UnitingCare
- The feedback was obtained prior to the consideration by the Australian Health Protection Principle Committee's (AHPPC) development of new guidelines to prevent transmission of COVID-19 into residential aged care facilities at their meeting late Monday 16 March 2020 and Tuesday 17 March 2020.
- From 18 March 2020 to date, the Department has organised twice weekly teleconferences with Minister Colbeck and aged care peak consumer and provider organisations and representatives of aged care providers who have managed COVID-19 outbreaks. Issues relating to visitation to residential aged care facilities have routinely been discussed at these teleconferences, including specifically on the development of visitation guidelines.
- The following organisations participate:
 - Aged and Community Services Australia (ACSA)
 - Aged Care Guild
 - Aged Care Quality and Safety Commission
 - Anglicare
 - BaptistCare
 - Catholic Health Australia
 - COTA Australia
 - Dementia Australia
 - Estia Health
 - Leading Age Services Australia (LASA)
 - Mercy Health
 - National Seniors Australia
 - Opal Aged Care
 - Older Persons Advocacy Network (OPAN)
 - UnitingCare
- On 18 March 2020, the Government announced further visitation restrictions to aged care facilities following consideration of the AHPPC's recommendations.
- On 24 April 2020, Minister Colbeck, Chief Medical Officer Prof Brendan Murphy participated in a webinar on Residential Care Visitor Restrictions, facilitated by Aged and Community Services Australia and Leading Age Services Australia, with aged care providers.
- As a complement to the AHPPC recommendations on visitor restrictions, an Aged Care Visitor Access Code developed by the aged care industry and consumer peak bodies.

- On 28 April 2020, Minister Colbeck attended a teleconference to discuss an industry-led visitation code.
 - The following organisations participated:
 - Aged and Community Services Australia (ACSA)
 - Aged Care Quality and Safety Commission
 - Anglicare
 - BaptistCare
 - Catholic Health Australia
 - COTA Australia
 - Dementia Australia
 - Leading Age Services Australia (LASA)
 - National Seniors Australia
 - Older Persons Advocacy Network (OPAN)
 - UnitingCare
- Updates on the progress of the Code were also discussed at the regular twice weekly sector peak teleconferences convened by the Department.
- The Code was finalised on 12 May and sets out a nationally consistent, principles-based approach to maintaining residents' visitation and communication with loved ones.
- The Code aims to apply a compassionate and consistent visitor policy that continues to minimise the risk of COVID-19 while providing innovative on-site visiting solutions to maintain the mental health of residents.
- Aged care providers have also been regularly advised about factsheets and additional resources specifically designed for aged care staff, residents and families that provide advice on measures to limit transmission of the virus are available on the Department's website.

MEETING: Aged Care COVID-19 Preparedness Forum

DATE AND TIME: Friday 6 March 2020 - 12.30pm - 3.00pm

PARTICIPANTS – attended by Minister Colbeck and the Chief Medical Officer

| ACT Health | Goodwin Aged Care |
|---|--|
| Aged and Community Services Australia | HammondCare |
| Aged Care Guild | Health Direct |
| Aged Care Industry Association | Health Services Union |
| Aged Care Quality and Safety Advisory Council | Juniper |
| Aged Care Quality and Safety Commission | Leading Age Services Australia |
| Austin Health | National Disability Insurance Scheme Commission |
| Australian College of Nursing | National Seniors Australia |
| Australian College of Rural and Remote Medicine | Older Persons Advocacy Network |
| Australian Medical Association | Opal Aged Care |
| Australian Nursing and Midwifery Federation | Pharmaceutical Society of Australia |
| Australian Primary Healthcare Nurses Association | Presbyterian Aged Care |
| BaptistCare | Queensland Health |
| Brisbane North Primary Health Network | Remote Accord Aged Care |
| Bupa | Royal Australian College of General Practitioners |
| Catholic Health Australia | Rural Doctors Association of Australia |
| COTA Australia | United Workers Union |
| Dementia Australia | UnitingCare |
| Emerald Medical Group | Victorian Department of Health and Human Services |
| Estia Health | WA Primary Health Alliance |
| GenWise | |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000097

Question Subject: Recommendations from the Communication Diseases Australia

Type of Questions: Written

Questioner: Senator Siewert

Question:

How does advice and recommendations from the Communicable Diseases Network Australia impact determinations made under the Biosecurity Act 2015 to restrict access to remote communities during the coronavirus pandemic?

Answer:

The decision to enact the *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Emergency Requirements for Remote Communities)*Determination 2020 (the Determination) was a made by the Minister for Health, taking into account advice from the Australian Government Chief Medical Officer who is the Chair of the Australian Health Protection Principal Committee of which the Communicable Diseases Network of Australia (CDNA) is a sub committee.

The CDNA considered and provided advice on the 'Management Plan for Aboriginal and Torres Strait Islander Populations' which outlines the broad approach to protecting Aboriginal and Torres Strait Islander people, including the provision for travel restrictions. CDNA has been involved in the ongoing discussion on the implementation of the Determination, particularly on the role of Human Biosecurity Officers.

The National Aboriginal and Torres Strait Islander Advisory Group on COVID-19 (the Taskforce) has continued to provide advice on implementation arrangements and amendments to the Determination. The Taskforce reports at each CDNA meeting and includes a CDNA representative in its membership.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number:IQ20-000099

Question Subject: Residential aged care providers access to PPE National Stockpile

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many residential aged care providers and home care providers have requested access to the PPE National Stockpile?

Answer:

As at 8 May 2020, 1346 providers delivering residential aged care or home care services had requested access to PPE from the National Medical Stockpile (NMS)

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000100

Question Subject: First Nations Consultation

Type of Questions: Written

Questioner: Senator Siewert

Question:

Did the Department consult First Nations communities about specific implementation of specific restrictions? If so, what criteria and processes did the Department follow to consult First Nations communities in designated areas about the implementation of travel restrictions?

Answer:

In early March, Aboriginal and Torres Strait Islander leaders and communities called for some form of travel restrictions at the beginning of the pandemic, acknowledging the risk COVID-19 posed to their communities.

On 21 March 2020, the Minister for Indigenous Australians wrote to his counterparts in the states and the Northern Territory to request nominations for areas the Determination under the *Biosecurity Act* 2015 could be applied to, in consultation with key stakeholders and Indigenous communities.

Between the 22 and 26 March 2020, Queensland, Western Australia, South Australia and the Northern Territory confirmed their designated areas, through consultation with Aboriginal and Torres Strait Islander leaders, communities and organisations.

Parallel to this, the Department of Health undertook consultation with national bodies and the Aboriginal and Torres Strait Islander Advisory Group on COVID-19.

On 26 March 2020, the Minister for Health signed the *Biosecurity (Human Biosecurity Emergency) (Human Coronavirus with Pandemic Potential) (Emergency Requirements for Remote Communities) Determination 2020.*

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000102

Question Subject: Disconnection of First Nation remote communities

Type of Questions: Written

Questioner: Senator Siewert

Question:

Is the government aware of any First Nations remote communities that are disconnected from basic essential services due to the travel restrictions and lock down?

Answer:

The Department of Health is not aware of any communities disconnected from essential services due to the Determination under the *Biosecurity Act* 2015 to restrict travel into remote communities.

The requirements are designed to allow access to designated areas as long as appropriate conditions are met, which aim to reduce the risk of transmission of COVID-19. There are specific provisions to allow essential activities, such as food supplies, medical services, policing and critical infrastructure such as power, water and telecommunications, to take place safely.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number:IQ20-000106

Question Subject: Aged care services in rural, regional and remote services

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How has the Government assisted service providers delivering aged care services in rural, regional and remote services? Please provide a breakdown of the measures by state and territory, funding and its purpose.

Answer:

As noted in IQ20-000131, the Government announced a temporary 30 per cent increase in the viability supplement paid to support eligible rural and remote aged care providers.

In addition, on Friday 1 May 2020, the Government announced a further \$205 million for a one-off COVID supplemental payment for residential care providers. In metropolitan areas this equates to around \$900 per resident. In rural and remote areas (MMM 2-7) an additional loading is payable therefore those providers receive up to around \$1350 per resident.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number:IQ20-000107

Question Subject: List of residential aged care facilities with positive tested Covid-19 cases

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

Please provide a list of residential aged care facilities that have had either a staff member or resident test positive to COVID-19 or a resident who has died. Please include the number of residents and staff who have tested positive, the number of deaths, the name of the facility and a breakdown by state and territory.

Answer:

The following table shows the number of residential care recipients and staff who have tested positive to COVID-19, a breakdown of those who have recovered, and the number of deaths, as at 12 May 2020.

| Confirmed COVID-19 cases [recovered] (deaths) | ACT | NSW | NT | QLD | SA | TAS | VIC | WA | Australia |
|---|--------------|-----------------|--------------|-----------|-----------|--------------|--------------|--------------|--------------|
| Residential care recipients | 0 [0] | 61 [16] (24) | 0 [0] (0) | 1 [0] (1) | 0 [0] (0) | 1 [0] (1) | 0 [0] (0) | 0 [0] (0) | 63 [16] (26) |
| Residential care staff | 0 [0] (0) | 49 [17] (0) | 0 [0] (0) | 1 [1] (0) | 1 [1] (0) | 1 [1] (0) | 4 [2] (0) | 2 [2] (0) | 58 [24] (0) |

As at 12 May 2020, twenty-six residential facilities have had a case(s) of COVID-19. Of these facilities five have active cases.

The following facilities have released public statements that they have had either a staff member or resident test positive to COVID-19 or a resident who has died:

- Dorothy Henderson Lodge, NSW
- Moran Engadine, NSW
- Anglicare Newmarch House, NSW
- Catholic Healthcare Bodington, NSW
- Doutta Galla, VIC

While state and territory health authorities may choose to publicly disclose the names of aged care services that have known cases of COVID-19 from a broader public health perspective, the Department would prefer not to name further facilities due to the impact public disclosure has on services, their staff and residents due to media exposure as well as their continued ability to operate. We want to encourage service providers to proactively report cases to the Department of Health. The Department can provide the Committee a private briefing, should this detail be required.

Based on the number of recipients in residential care in February 2020, the relative share of expected expenditure is given below:

| State/Territory | Proportion |
|-----------------|------------|
| NSW | 33% |
| VIC | 26% |
| QLD | 19% |
| WA | 8% |
| SA | 9% |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number:IQ20-000107

Question Subject: List of residential aged care facilities with positive tested Covid-19 cases

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

Please provide a list of residential aged care facilities that have had either a staff member or resident test positive to COVID-19 or a resident who has died. Please include the number of residents and staff who have tested positive, the number of deaths, the name of the facility and a breakdown by state and territory.

Answer:

The following table shows the number of residential care recipients and staff who have tested positive to COVID-19, a breakdown of those who have recovered, and the number of deaths, as at 12 May 2020.

| Confirmed COVID-19 cases [recovered] (deaths) | ACT | NSW | NT | QLD | SA | TAS | VIC | WA | Australia |
|---|--------------|-----------------|--------------|-----------|-----------|--------------|--------------|--------------|--------------|
| Residential care recipients | 0 [0] | 61 [16] (24) | 0 [0] (0) | 1 [0] (1) | 0 [0] (0) | 1 [0] (1) | 0 [0] (0) | 0 [0] (0) | 63 [16] (26) |
| Residential care staff | 0 [0] (0) | 49 [17] (0) | 0 [0] (0) | 1 [1] (0) | 1 [1] (0) | 1 [1] (0) | 4 [2] (0) | 2 [2] (0) | 58 [24] (0) |

As at 12 May 2020, twenty-six residential facilities have had a case(s) of COVID-19. Of these facilities five have active cases.

The following facilities have released public statements that they have had either a staff member or resident test positive to COVID-19 or a resident who has died:

- Dorothy Henderson Lodge, NSW
- Moran Engadine, NSW
- Anglicare Newmarch House, NSW
- Catholic Healthcare Bodington, NSW
- Doutta Galla, VIC

While state and territory health authorities may choose to publicly disclose the names of aged care services that have known cases of COVID-19 from a broader public health perspective, the Department would prefer not to name further facilities due to the impact public disclosure has on services, their staff and residents due to media exposure as well as their continued ability to operate. We want to encourage service providers to proactively report cases to the Department of Health. The Department can provide the Committee a private briefing, should this detail be required.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000108

Question Subject: Home care providers by state and territory tested positive to COVID-19

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

Please provide a list of home care providers by state and territory that have had either a staff member or home care recipient test positive to COVID-19. Please include the number of recipients and staff who have tested positive, the number of deaths, the name of the service provider and a breakdown by state and territory.

Answer:

The table below shows the number of in-home care recipients and staff who have tested positive to COVID-19, a breakdown of those who have recovered, and the number of deaths, as at 12 May 2020.

| Confirmed COVID-19 cases [recovered] (deaths) | ACT | NSW | NT | QLD | SA | TAS | VIC | WA | Australi a |
|---|--------------|-----------------|-----------|-----------|-----------|-----------|-----------|-----------|----------------|
| In-home care recipients | 0 [0] (0) | 13 [1 3] (0) | 0 [0] (0) | 8 [7] (0) | 1 [1] (0) | 5 [0] (2) | 3 [3] (0) | 1 [0] (1) | 31 [22] (3) |
| In-home care staff | 0 [0] (0) | 5 [5] (0) | 0 [0] (0) | 2 [1] (0) | 0 [0] (0) | 1 [0] (0) | 1 [1] (0) | 1 [1] (0) | 10 [8] (0) |

As at 12 May 2020, 29 home care providers have had a case(s) of COVID-19. Of these services five have active cases.

The Department would prefer not to release details of service providers due to the impact public disclosure has on services, their staff and care recipients due to media exposure as well as their continued ability to operate. We want to encourage service providers to proactively report cases to the Department of Health. The Department can provide the Committee a private briefing, should this detail be required.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000109

Question Subject: Minister briefing on recommendations

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

Did the Department of Health provide any briefs in the lead up to the establishment of the COVID-19 Commission to the Minister for Aged Care and Senior Australians or the Minister for Health? If yes, did the Department put forward the names of any suitable candidates to be part of the Commission to the Prime Minister's office or to Prime Minister and Cabinet?

| Λ | n | cı | A | ıе | r | |
|---|---|----|---|----|---|--|
| м | | 21 | w | Œ | ı | |

No.

Department of Health

Senate Select Committee on COVID-19 Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number: IQ20-000110

Question Subject: Number of aged care workers been tested for COVID-19

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many aged care workers have been tested for COVID-19? Please provide a breakdown by state and territory and where they work – that is – residential or home care?

Answer:

The Department of Health does not collect this information.

PARLIAMENTARY INQUIRY QUESTION ON NOTICE Department of Health

Senate Select Committee on COVID-19 Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number:IQ20-000111

| Question Subject: Dorothy Henderson Lodge first request access to PPE National Stockpile |
|--|
| Type of Questions: Question in Writing |
| Questioner: Senator Gallagher |
| Question: |
| When did Dorothy Henderson Lodge first request access to the PPE National Stockpile? |
| Answer: |
| 5 March 2020. |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000112

Question Subject: December 2019 quarterly home care package report

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

Why hasn't the December quarter of home care data been published? Please provide the December 2019 quarterly home care packages report.

Answer:

The 2nd quarter 2019-20 Home Care Packages Program Data Report (https://gen-agedcaredata.gov.au/Resources/Reports-and-publications/2020/April/Home-care-packages-program-data-report-1-October-%E2%80%93) was published on the Australian Institute of Health and Welfare's GEN website on Thursday, 30 April 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000113

Question Subject: Notifications of positive test to COVID-19 at Dorothy Henderson Lodge

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

- 1. When was the Department of Health first notified there was a positive test to COVID-19 at Dorothy Henderson Lodge?
- 2. When was NSW Health first notified there was a positive test to COVID-19 at Dorothy Henderson Lodge?
- 3. When was the Minister for Aged Care and Senior Australians first notified there was a positive test to COVID-19 at Dorothy Henderson Lodge?
- 4. When were families first notified there was a positive test to COVID-19 at Dorothy Henderson Lodge?

Answer:

- 1. 3 March 2020.
- 2. The Department is not aware of the details of state notifications, noting that COVID-19 is a notifiable disease such that the requesting medical officer and/or the testing laboratory is obliged to notify the jurisdictional communicable disease authority upon diagnosis.
- 3. 4 March 2020.

4. Approved providers are responsible for determining the timing and communication method to inform families about a care recipient or staff member with a positive test for COVID-19.

In line with requirements under the Aged Care Quality Standards, approved providers must ensure services have in place arrangements for notification advice to consumers, families, carers and relevant authorities.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000114

Question Subject: Progression of paused measures

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

When will the following paused measures begin to be progressed by the Government again?

- AN-ACC Assessment Trial
- ACAR round
- Home Care Payments changes from advance to arrears.

Answer:

Recommencement of these measure will occur subject to status of the COVID-19 pandemic, in consultation with the aged care sector and on the basis of medical advice, and at the discretion of Government.

Department of Health

Senate Select Committee on COVID-19 Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number: IQ20-000115

Question Subject: OPAN funding to establish COVID-19 telephone service

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much funding did OPAN receive to establish its new COVID-19 telephone service?

Answer:

The Australian Government has provided OPAN \$1.2 million to support the expansion of its advocacy, education and information services to COVID-19 related requests. This includes the establishment of the new 1800 number.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000116

Question Subject: Additional calls received by OPAN to COVID-10 telephone service

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many additional calls has OPAN received to its dedicated COVID-19 telephone service? Please provide the total number of calls and a breakdown of calls by state and territory?

Answer:

OPAN has received 1,302 calls to its COVID-19 information line (1800 237 981) between 1 March 2020 and 8 May 2020. A state and territory breakdown of the calls is not currently available.

Additionally, OPAN continues to receive and respond to requests for information and advocacy support related to COVID-19 through its usual phone service.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000117

Question Subject: Funding to 1800 171 866 support line

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much funding has been allocated, as a total, to the 1800 171 866 support line? Please provide how much funding each organisation received as a total and the purpose the funding was used for.

Answer:

The Department is currently working with National Seniors and COTA Australia to finalise grants agreements for their involvement with the 1800 171 866 support line. The anticipated total value of these two grant agreements is approximately \$1 million.

Neither Dementia Australia nor OPAN will receive dedicated funding for their involvement with the 1800 171 866 support line. The support line will provide a new avenue to link people to the existing services offered by these two organisations.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number:IQ20-000118

Question Subject: Number of older Australians calling the 1800 171 866 support line?

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many older Australians, their families and carers have called the 1800 171 866 support line? Please provide the total number of calls and a breakdown of calls by the organisations involved and by state and territory?

Answer:

A total of 512 calls were received by the 1800 171 866 older Australians COVID-19 support line between 21 April and 12 May 2020.

| | Not known | ACT | NSW | QLD | SA | TAS | VIC | WA | Total |
|-------------------------------|--------------|-----|-----|-----|----|-----|-----|----|-------|
| СОТА | 3 | 2 | 47 | 27 | 22 | 4 | 44 | 11 | 160 |
| Dementia Australia | | | 10 | 6 | 4 | | 8 | 2 | 30 |
| National Seniors Australia | 12 | 3 | 74 | 43 | 21 | 3 | 41 | 14 | 211 |
| OPAN | 6 | 4 | 31 | 18 | 15 | 2 | 32 | 3 | 111 |
| Total | 21 | 9 | 162 | 94 | 62 | 9 | 125 | 30 | 512 |

A further 1824 outbound calls were made by the service during the period 21 April to 8 May 2020 (COTA: 1459; National Seniors: 365).

The figures above do not include calls to the older Australians COVID-19 support service which were received via the organisations' usual phone numbers.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000119

Question Subject: Deferring of aged care home services?

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

Please provide the number of home care recipients who have elected to defer aged care home services? Please provide this information by state, territory and by Aged Care Planning Region.

Answer:

Data on social leave (suspension) for home care packages from March 2020 onwards is not currently available, due to timeframes for approved providers to submit their claims. The Department of Health will continue to monitor this issue in collaboration with provider and consumer organisations, with data to be provided once available.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number:IQ20-000120

Question Subject: Welfare checks for older Australians

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many welfare checks have been conducted for older Australians who have elected to defer aged care home services during the COVID-19 pandemic?

Answer:

Between 8 April and 8 May 2020 the Older Person's Advocacy Network (OPAN) received 58 referrals from aged care providers for support through the OPAN call back service.

Referrals for this service can be made by aged care providers when they have a concern regarding someone reducing or cancelling their home care package or CHSP services.

Additional promotion of the call-back service is scheduled for the week commencing 11 May 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000121

Question Subject: Food supply boxes

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$9.3 million has been allocated to buy 36,000 emergency food supply boxes? How many emergency food supply boxes have been produced? How many have been provided to Australians? Please provide the number of Australians this measure has assisted by state and territory.

Answer:

As a safety net for older people in crisis, My Aged Care can purchase a standard basic food and essential grocery pack, which is delivered to their home (as well as link them to longer term care arrangements). As at 10 May 2020, 38 boxes have been delivered – this result indicates that referrals to, and take up of referrals by providers is working very well, but that demand is low for this form of emergency assistance.

A breakdown of the emergency food boxes, by state and territory, is provided below:

| Jurisdiction | NSW | VIC | QLD | WA | SA | TAS | NT | ACT | TOTAL |
|--------------|-----|-----|-----|----|----|-----|----|-----|-------|
| | 9 | 14 | 6 | 2 | 6 | 0 | 0 | 1 | 38 |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000122

Question Subject: Funds spent on meals for 41,000 people

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$50 million provided to fund 3.4 million meals for 41,000 people for six weeks has been spent? How many of the 3.4 million meals have been provided and to how many people across each state and territory?

Answer:

Meals providers are required to report on expenditure and meals delivered with this funding under the terms of the grant agreement. Their first performance report is not due until 31 July 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000123

Question Subject: Prepared meals

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$59.3 million to ensure more prepared meals, food staples and essential daily items are delivered has been allocated? Please provide a breakdown of which organisations have received the funding, how much funding each organisation has received and where the organisations are located including by state and territory.

Answer:

Of the \$59.3m allocated for this measure, \$50m was allocated for Commonwealth Home Support Programme (CHSP) meals providers to maintain and expand meals funding in 2019-20 and 2020-21.

To date an additional \$44.9 million has been offered to 552 service providers (see breakdown of state/territory, number of providers and funding over 2019-20 and 2020-2021 at Table 1). Grant agreements for the additional \$5.1 million are currently being finalised, with offers expected to be made in the coming weeks.

Funding is being paid to providers upon the execution of funding agreements (i.e. when providers sign the agreements). Of the \$44.9 million allocated through this process, \$31.5 million has been paid to providers.

The remaining \$9.3m was allocated for the purchase of emergency food supply boxes, as outlined in IO20-000121.

Table 1: Distribution of additional meals funds

| State or Territory | Number of providers * | 2019-20 | 2020-21 | Total |
|-----------------------|-----------------------|--------------|--------------|--------------|
| ACT | 5 | \$193,714 | \$129,142 | \$322,856 |
| NSW | 171 | \$9,990,205 | \$6,711,975 | \$16,702,180 |
| NT | 22 | \$1,023,847 | \$682,564 | \$1,706,411 |
| QLD | 166 | \$3,223,315 | \$2,188,327 | \$5,411,642 |
| SA | 62 | \$2,235,660 | \$1,610,741 | \$3,846,401 |
| TAS | 25 | \$601,309 | \$400,873 | \$1,002,182 |
| VIC | 103 | \$7,293,641 | \$4,643,288 | \$11,936,929 |
| WA | 30 | \$2,392,110 | \$1,590,811 | \$3,982,920 |
| Grand Total | 552 | \$26,953,800 | \$17,957,721 | \$44,911,521 |

^{*} Total providers is the total number of unique providers – this is less than the sum of the providers in each jurisdiction, as some providers operate in multiple jurisdictions

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000124

Question Subject: My Aged Care telephone line number of calls

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many calls to the My Aged Care telephone line have gone unanswered since 23 March, 2020?

Answer:

From 22 March 2020 to 10 May 2020, 1,511 calls to the My Aged Care line were unanswered – this represents 1.05 per cent of total calls.

During the same period the My Aged Care line handled a total of 142,615 calls with an average speed to answer of 13 seconds.

Callers terminate calls for a range of reasons, including responding to information on the recorded messages that plays prior to the connection with a telephone operator. For instance, they may need to find their Medicare card, or have decided to access the My Aged Care website for information. Other reasons might include that they have called the wrong number, they need to attend to another matter, or that they have decided to call back at another time.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000126

Question Subject: My Aged Care telephone line specifically about COVID-19

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How many calls to the My Aged Care telephone line were specifically about COVID-19? If this information is unavailable has there been an increase in call volume? If yes, please provide details.

Answer:

The My Aged Care contact centre has answered 6133 calls in relation to COVID-19 between the period 28 January 2020 to 10 May 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000127

Question Subject: \$12.3 million towards supporting the My Aged Care service

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$12.3 million to support the My Aged Care service to meet the surge in aged care specific COVID-19 enquiries, allowing for additional staff to minimise call wait times has been allocated?

Answer:

As at 10 May 2020, the total amount committed is \$3,030,878.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000129

Question Subject: Commonwealth Home Support Program

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$92.2 million in additional support to home care providers and organisations which deliver the Commonwealth Home Support Program (CHSP), operating services including meals on wheels has been allocated? Please provide a breakdown of this funding by organisation and by state and territory. How much of the \$92.2 million was allocated to services for people in self-isolation such as shopping and meal delivery? How many people did this funding assist across each state and territory?

Answer:

The \$92.2 million includes \$22 million in temporary subsidy increases for Home Care Packages and \$70.2 million for an ad hoc selection process to maintain and expand existing CHSP services.

In relation to the \$70.2 million, since 23 March 2020, the Department of Health has received 97 applications requesting a total of \$25.87 million (GST exc) in additional funding in 2019-20 and \$28.3 million (GST exc) in 2020-21, with applications continuing to be received.

The Department expects to make all offers for 2019-20 funding to all successful applications by mid-June 2020. To date, \$2.15 million (GST exc) has been allocated to 18 providers in 2019-20 and \$1.66 million (GST exc) has been allocated to 16 providers in 2020-21.

Of the \$92.2 million, \$22 million is being paid in additional funding to home care providers via a temporary 1.2 per cent increase to the home care subsidy.

The temporary increase is being paid over a six month period from 1 March 2020 to 31 August 2020 inclusive.

Based on government funding to Home Care Providers in 2018-19, the relative share of expected expenditure is given below:

| State/Territory | Proportion |
|-----------------|------------|
| NSW | 31% |
| Vic | 25% |
| Qld | 19% |
| WA | 13% |
| SA | 7% |
| Tas | 3% |
| ACT | 2% |
| NT | 1% |

Source: Derived from 2018-19 Report on the Operations of the Aged Care Act 1997

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000131

Question Subject: Minister briefing on recommendations

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$78.3 million in additional funding for residential care to support continuity of workforce supply has already been allocated? Please provide details about how this funding has been allocated and to what measures or for what purpose. Please provide a breakdown outlining how the funding was allocated and for what purpose, by location, by service provider or residential aged care facility and by state and territory.

How much of the \$26.9 million for a temporary 30 per cent increase to the Residential and Home Care Viability Supplements and the Homeless Supplement has already been allocated? Please provide a breakdown of how much funding was allocated for National Aboriginal and Torres Strait Islander Flexible Aged Care Program providers, Multi-Purpose Services and homeless providers. Please provide a breakdown of the funding by service provider, location and by state and territory.

Answer:

Funding for these initiatives started to flow to providers in April 2020 via the usual payment mechanisms through Services Australia:

- The \$78.3 million is being paid as a 1.2 per cent uplift to the Aged Care Funding Instrument
- The \$26.9 million is being paid as a 30 per cent increased through the usual Viability and Homeless Supplement payments.

The data to determine how much has already been paid in aggregate and at the provider level is not yet available.

In addition:

- \$3.3 million is being paid to providers under the National Aboriginal and Torres Strait Islander Flexible Aged Care Program; and
- \$7.9 million is being paid to Multi-Purpose Services

These payments are being made through an increase to existing grant agreements administered by the Department of Health.

The breakdown of payments to each State and Territory is described in the table below:

| State | Residential Care Subsidy Viability and Homeless Supplement – | National Aboriginal & Torres Strait Islander Flexible | Multi-Purpose Service Program |
|-------|--|---|----------------------------------|
| | Proportion | Aged care Programs | |
| Ext | | | \$90,152.64 |
| NSW | 31.7% | \$67,010.96 | \$2,649,114.24 |
| VIC | 27.7% | \$226,780.00 | \$438,326.64 |
| QLD | 18.7% | \$502,448.80 | \$1,562,404.72 |
| WA | 8.4% | \$479,480.08 | \$1,522,474.49 |
| SA | 8.8% | \$614,824.96 | \$1,478,210.00 |
| TAS | 2.5% | \$29,820.88 | \$121,504.40 |
| ACT | 1.0% | - | - |
| NT | 1.2% | \$1,386,625.84 | \$22,770.00 |
| Total | | \$3,306,991.52 | \$7,884,957.13 |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000132

Question Subject: Hiring of extra nurses

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$101.2 million has been allocated to enable aged care providers to hire extra nurses and aged care workers for both residential and home care? Please provide a breakdown outlining how many extra nurses and aged care workers were employed under this funding, how the funding was allocated and for what purpose, by location, by service provider or residential aged care facility and by state and territory.

Answer:

Of the \$101.2 million:

- \$43 million is allocated to support the surge workforce needs of Commonwealth funded aged care providers who experience a COVID-19 case or outbreak.
 - This is a national program to assist aged care providers to ensure older people in their care, who are at greater risk of serious illness if they contract COVID-19, continue to receive the care and support they need.
 - To date, Aspen Medical and Mable have been engaged to provide surge workforce where a provider (regardless of location) is unable to source critical workforce. This is a demand driven program.
 - The funds expended will be determined on the support needed by the service provider experiencing COVID-19.

- \$52.9 million is allocated for the COVID-19 Aged Care Support Program.
- This is a national grant program to assist residential age care, National Aboriginal and Torres Strait Islander Flexible Aged Care Program and Home Care providers that are subject to direct COVID-19 impacts, to deliver continuity of safe quality care for consumers.
- Providers are able to seek reimbursement for eligible expenditure incurred once all COVID-19 cases have been resolved in the service. This is a demand driven program.
- o As at 12 May, seven applications have been received.
- \$5.2 million is allocated to the Aged Care Quality and Safety Commission to expand consumer education and support, provide additional supports to the sector on their obligations regarding infection control and increase vigilance and scrutiny of infection control arrangements in the sector.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000134

Question Subject: Education and training of aged care workers

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much of the \$101.2 million has been allocated to educate and train aged care workers in infection control? How many aged care workers have been educated or trained as part of this funding package and what was the funding used for?

Answer:

Nine training modules have been developed and published to educate and train the aged care workforce on a range of topics including how to use personal protective equipment, outbreak management, cleaning and implementation of guidance developed by the Communicable Diseases Network Australia. As at 11 May, 435,833 people have completed the nine modules.

Development of modules was funded through existing funding sources. Funds allocated for the development of the nine modules is \$44,000.00 (GST Inclusive).

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000135

Question Subject: Funding allocated to Commonwealth Home Support Program

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

How much funding has been allocated to the Commonwealth Home Support Program to deliver specific support during the COVID-19 pandemic? Please provide the total amount of funding, the specific measures and the amount of funding for each measure.

Answer:

The Commonwealth Home Support Programme (CHSP) has been allocated an additional \$120.2 million to fund emergency COVID-19 support measures.

This includes:

- \$70.2 million for an adhoc grant process to enable CHSP providers to apply for additional funds to maintain and expand key services facing additional costs and/or client demand pressures associated with COVID-19, \$40 million in 2019-20 and \$30.2 million in 2020-21.
- \$50 million to support a non-competitive program-wide expansion of CHSP meals funding to support older Australians isolating at home, \$30 million in 2019-20 and \$20 million in 2020-21.

A further \$9.3 million has been provided to the My Aged Care Contact Centre to fund emergency food staples and essential daily items, delivered to those who need them most.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number:IQ20-000136

Question Subject: What assistance has been provided to Dorothy Henderson Lodge

Type of Questions: Question in Writing

Questioner: Senator Gallagher

Question:

What assistance has been provided to Dorothy Henderson Lodge by the Government after it was identified there had been a positive test to COVID-19? Please outline the assistance provided along with any funding allocated.

Answer:

The Department of Health and the Aged Care Quality and Safety Commission provided BaptistCare (the approved provider of Dorothy Henderson Lodge) the following:

- Between 4 and 24 March 2020, the Aged Care Quality and Safety Commission (the Commission) provided support to BaptistCare managing three consumer complaints and one enquiry related to COVID-19 outbreak.
- The Commission also contacted BaptistCare to monitor and support the quality of care and services to consumers. Advice tools and resources were made available to all providers to assist in their preparedness for COVID-19 and outbreak management
- The Commission also had ongoing engagement with BaptistCare to assess the emotional and physical health of the 62 care recipients who had tested negative.
- Provision of Personal Protective Equipment (PPE) through the National Medical Stockpile.
- 1.2 per cent increase in the Aged Care Funding Instrument subsidies, which had effective commencement date of 20 March 2020.

 COVID-19 payment for residential aged care as part of the \$205 million measure that each facility will receive based on the appropriate claiming data for the March 2020 quarter.

The Department has also offered assistance through the COVID-19 Aged Care Support Program, which enables reimbursement of expenditure, such as staffing costs, due to the impact of COVID-19. The Department understands BaptistCare will apply for funding under this program.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 06 May 2020

PDR Number: IQ20-000137

Question Subject: Did the Aged Care Quality and Safety Commission visit Dorothy

Henderson Lodge before COVID-19

Type of Questions: Question in Writing

Questioner: Senator Katy Gallagher

Question:

Did the Aged Care Quality and Safety Commission visit Dorothy Henderson Lodge before the COVID-19 outbreak, during the COVID-19 outbreak or after the COVID-19 outbreak? If yes, please provide the dates, times and purpose of the visits. If not, why not?

Answer:

The first COVID-19 case at BaptistCare Dorothy Henderson Lodge was confirmed on 3 March 2020. Based on currently available information, as at 4 May 2020, there are no active COVID-19 cases at the service (of either staff or consumers).

Prior to the outbreak, the Commission most recently conducted a reaccreditation audit at BaptistCare Dorothy Henderson Lodge on 11 and 12 October 2018. The service met 44 of the 44 expected outcomes of the Accreditation Standards and was re-accredited for three years until 25 January 2022.

The Commission has also engaged with the Approved Provider in resolving three complaints received about the service since 1 January 2019.

Additionally, the Commission has undertaken the following monitoring activities with the Approved Provider:

- 20 March 2020 non-site assessment contact. The purpose of this contact was to enquire into the COVID-19 readiness of the provider's services.
- 24 March 2020 service responded to a non-site assessment contact via a self-assessment survey regarding the service's COVID-19 readiness.

During an active outbreak, for health and safety reasons based on clinical advice, the Commission utilises monitoring methods other than site visits. In this case, contact with the Approved Provider occurred through a daily interagency forum established to coordinate joint action. In addition to executive and management staff from the Approved Provider, this forum included senior representatives from the Australian Government Department of Health, the Aged Care Quality and Safety Commission, and the NSW Health Public Health Unit. Senior Commission staff and Dorothy Henderson Lodge executives were also in frequent direct contact.

The Commission has not visited the service since the cessation of the outbreak. The next site visit will be determined through the Commission's risk assessment process.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000138

Question Subject: Surge workforce/emergency response team provided to Dorothy Henderson Lodge

Type of Questions: Written

Questioner: Katy Gallagher

Question:

Was a surge workforce or emergency response team provided to Dorothy Henderson Lodge? If yes, please outline the dates that additional or replacement staff were allocated, the number of staff and their qualification.

Answer:

The Department of Health did not provide a surge workforce or an emergency response team to BaptistCare (the approved provider of Dorothy Henderson Lodge). However, the Department of Health did offer to assist BaptistCare to source additional staffing.

The Department has also offered assistance through the COVID-19 Aged Care Support Program, which enables reimbursement of expenditure, such as staffing costs, due to the impact of COVID-19. The Department understands BaptistCare will apply for funding under this program.

PARLIAMENTARY INQUIRY QUESTION ON NOTICE Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000139

Question Subject: Newmarch request for access to PPE

Type of Questions: Written

Questioner: Katy Gallagher

Question: When did Newmarch House first request access to the PPE National Stockpile?

Answer:

12 April 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 06 May 2020

PDR Number: IQ20-000140

Question Subject: Notifications of positive test of COVID-19 at Newmarch House

Type of Questions: Written

Questioner: Katy Gallagher

Question:

- 1. When was the Department of Health first notified there was a positive test to COVID-19 at Newmarch House?
- 2. When was NSW Health first notified there was a positive test to COVID-19 at Newmarch House?
- 3. When was the Minister for Aged Care and Senior Australians first notified there was a positive test to COVID-19 at Newmarch House?
- 4. When were families of residents notified that there was a positive test to COVID-19 at Newmarch House?

Answer:

- 1. 12 April 2020
- 2. The Department is not aware of the details of state notifications, noting that COVID-19 is a notifiable disease such that the requesting medical officer and/or the testing laboratory is obliged to notify the jurisdictional communicable disease authority upon diagnosis.
- 3. 13 April 2020.
- 4. Approved providers are responsible for determining the timing and communication method to inform families about a care recipient or staff member with a positive test for COVID-19. In line with requirements under the Aged Care Quality Standards, approved providers must ensure services have in place arrangements for notification advice to consumers, families, carers and relevant authorities.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 06 May 2020

PDR Number: IQ20-000141

Question Subject: What assistance what provided to Newmarch House

Type of Questions: Written

Questioner: Katy Gallagher

Question: What assistance was provided to Newmarch House by the Government after it was identified there had been a positive test to COVID-19? Please provide the measures, the date it was provided and any funding allocated.

Answer:

The Department of Health along with the Aged Care Quality and Safety Commission (the Commission) have provided significant support to Newmarch House since 12 April 2020. The support provided included:

- Participating in regular case conferencing with representatives from the New South Wales (NSW) Ministry of Health, Nepean Infectious Disease and Control Unit, Nepean Blue Mountains Local Health District, NSW State Health Operations Unit, NSW State Emergency Operations Unit and Newmarch House, and representatives from other services as required.
- 24/7 support through the Department's NSW State Manager.
- Facilitating of clinical support through the Commission.
- Arranging General Practice surge team through Nepean Blue Mountains Primary Health Network, for 15 GPs to be on a 24 hour roster including weekends as additional clinical care.
- Participated in a residents and relatives meeting is held on 23 April, hosted by Newmarch House.

- Facilitating access to, sourcing, and funding additional workforce through the Aged Care COVID-19 Preparedness measure via Aspen Medical and Mable, as well as facilitating access to staff through other aged care services.
- Arranging for and funding a social worker from Services Australia to be onsite to support the family communication plan and facilitated agreement for Catholic Healthcare to provide communications support.
- Supplying and facilitating the supply of Personal Protective Equipment (PPE) as at 7 May 2020: more than 11,000 P2, N95 respirators; 6500 surgical masks; 180,000 gloves; 14,000 gowns.
- Arranging and funding access to testing via Sonic Healthcare on and off-site.
- Facilitating the Older Persons Advocacy Network (OPAN) to provide support to residents and their families to ensure their rights are known and upheld including Zoom meetings three times a week, closed Facebook group and providing resources.
- Facilitating and funding support from a Communications Agency to assist with written communications.

Additionally, the Aged Care Quality and Safety Commission issued the following to Anglican Community Services in respect of Newmarch House:

- an administrative direction;
- a notice of non-compliance; and
- a notice of requirement to agree to certain matters and consideration of sanctions.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 06 May 2020

PDR Number: IQ20-000142

Question Subject: Did the Aged Care Quality and Safety Commission visit Newmarch House

before COVID-19

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: Did the Aged Care Quality and Safety Commission visit Newmarch House before the COVID-19 outbreak, during the COVID-19 outbreak or after the COVID-19 outbreak? If yes, please provide the dates, time and purpose of the visits. If not, why not?

Answer:

The first reported COVID-19 case at Newmarch House was identified on 12 April 2020. As at 12 May 2020, there are still positive cases at the service so the outbreak is considered active.

Prior to the outbreak, the Commission most recently conducted a site visit at Newmarch House on 5 September 2019. The purpose of this visit was to undertake an unannounced assessment contact. No compliance issues were identified.

Additionally, the following monitoring activities were undertaken by the Commission:

- 19 March 2020 non-site assessment contact. The purpose of this contact was to enquire into the COVID-19 readiness of the provider's services.
- 24 March 2020, non-site assessment contact via a self-assessment survey regarding the service.

During an active outbreak, for health and safety reasons based on clinical advice, the Commission utilises monitoring methods other than site visits.

Since the beginning of the outbreak at Newmarch House on 12 April 2020, the Commission has been actively engaged with Anglican Community Services (the approved provider) and Newmarch House management to monitor and support the provider to meet their obligations under the Aged Care Quality Standards. This has included contact with the approved provider at least on a daily basis both through direct contact and also through a daily interagency forum established to coordinate respective roles and involving senior representatives from the Australian Government Department of Health, the Aged Care Quality and Safety Commission, and the New South Wales Health Public Health Unit.

The Commission has taken a series of graduated regulatory actions with the Approved Provider to ensure their compliance in response to escalating concerns and evidence that the provider was failing to meet Quality Standards at Newmarch House, and that there was immediate and severe risk to the safety, health and wellbeing of residents. These regulatory actions comprise issuing an administrative direction, followed by a non-compliance notice, and most recently, a notice requiring agreement.

The next site visit at Newmarch House will be determined through the Commission's risk assessment process.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 06 May 2020

PDR Number: IQ20-000143

Question Subject: Surge workforce/ emergency response team provided to Newmarch House

Type of Questions: Written

Questioner: Katy Gallagher

Question: Was a surge workforce or emergency response team provided to Newmarch House? If yes, please outline the dates that additional or replacement staff were allocated, the number of staff and their qualification.

Answer:

As at 12 May 2020, the following surge workforce and emergency response teams were provided to Newmarch House.

| Workforce | No. of staff provided | Role |
|--------------------|-----------------------|-----------------------------------|
| Surge Workforce | 17 | 5 x Registered Nurses (RNs) |
| From 16 April | | 12 x Personal Care Workers (PCWs) |
| Emergency Response | 35 | 3 x Clinical First Responder |
| Team | | 19 x RNs |
| From 20 April | | 9 x PCWs |
| | | 3 x Physiotherapists |
| | | 1 x Administrator |

PARLIAMENTARY INQUIRY QUESTION ON NOTICE Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000154

Question Subject: Melaleuca Nursing Home PPE National Stockpile

Type of Questions: Written

Questioner: Katy Gallagher

Question: When did the Melaleuca Nursing Home first request access to the PPE National

Stockpile?

Answer:

17 April 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000155

Question Subject: Melaleuca Nursing Home positive test

Type of Questions: Written

Questioner: Katy Gallagher

Question:

When was the Tasmanian Department of Health and Human Services first notified there was a positive test to COVID-19 at the Melaleuca Nursing Home?

Answer:

The Department is not aware of the details of state notifications, noting that COVID-19 is a notifiable disease such that the requesting medical officer and/or the testing laboratory is obliged to notify the jurisdictional communicable disease authority upon diagnosis.

Department of Health

Senate Select Committee on COVID-19

6 May 2020

Australian Government's Response to the COVID-19 Pandemic

PDR Number: IQ20-000157

Question Subject: Minister for Aged Care and Senior Australians notified positive test to COVID-19 at the Melaleuca Nursing Home

Type of Questions: Written

Questioner: Katy Gallagher

Question:

When was the Minister for Aged Care and Senior Australians first notified there was a positive test to COVID-19 at the Melaleuca Nursing Home?

Answer:

16 April 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000158

Question Subject: Families of residents notified there was a positive test to COVID-19 at the Melaleuca Nursing Home

Type of Questions: Written

Questioner: Katy Gallagher

Question: When were families of residents first notified there was a positive test to COVID-19 at the Melaleuca Nursing Home?

Answer:

Approved providers are responsible for determining the timing and communication method to inform families about a care recipient or staff member with a positive test for COVID-19. In line with requirements under the Aged Care Quality Standards, approved providers must ensure services have in place arrangements for notification advice to consumers, families, carers and relevant authorities.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000159

Question Subject: Assistance provided to the Melaleuca Nursing Home by the Government

Type of Questions: Written

Questioner: Katy Gallagher

Question: What assistance was provided to the Melaleuca Nursing Home by the Government after it was identified there had been a positive test to COVID-19? Please provide the measures, the dates and any funding allocated.

Answer:

The Department of Health, along with the Aged Care Quality and Safety Commission, provided significant support to the Melaleuca Nursing Home since 17 April 2020 including:

- Participating in daily case conferencing with representatives from the Aged Care Quality and Safety Commission, Public Health Services Tasmania as well as liaison with Tasmania's Specialist Medical Adviser and Clinical First Responder;
- 24/7 support through the Department's Victoria/Tasmania State Manager;
- Coordinating and liaising with State Emergency Services, the Royal Hobart Hospital Pathology laboratory, Sonic Health, Tasmania's Emergency Coordination Centre to enable testing and retesting of residents and staff;
- Accessing, sourcing and funding additional workforce, through the surge workforce measures via Aspen Medical and Mable; and
- Sourcing PPE from the National Stockpile and other suppliers from 17 to 27 April 2020; 1800 surgical masks; 5000 gowns; 3000 gloves; 50 Eye Protection; 15 Litres Hand Sanitiser; 3200 Aprons were provided to Melaleuca.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000160

Question Subject: Aged Care Quality and Safety Commission visiting the Melaleuca Nursing

Home

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: Did the Aged Care Quality and Safety Commission visit the Melaleuca Nursing Home before the COVID-19 outbreak, during the COVID-19 outbreak or after the COVID-19 outbreak? If yes, please provide the dates, time and purpose of the visits. If not, why not?

Answer:

The first COVID-19 case at the Melaleuca Home for the Aged was identified on 16 April 2020. Based on currently available information, as at 3 May 2020, there are no active COVID-19 positive cases at the service (of either staff or consumers).

Prior to the outbreak, the Commission most recently conducted a site visit at Melaleuca Home for the Aged on 19 September 2019. The purpose of this visit was to undertake an unannounced assessment contact. No compliance issues were identified.

The Commission has also engaged with the Approved Provider in resolving two complaints received about the service since 1 January 2019.

Additionally, the following monitoring activities have been undertaken by the Commission:

- 19 March 2020 non-site assessment contact. The purpose of this contact was to enquire into the COVID-19 readiness of the provider's services.
- 22 April 2020 service responded to a non-site assessment contact via a self-assessment survey regarding the service's COVID-19 readiness.

During an active outbreak, for health and safety reasons based on clinical advice, the Commission utilises monitoring methods other than site visits. In this case, contact with the Approved Provider occurred through a daily interagency forum established to coordinate joint action. In addition to executive and management staff from the Approved Provider, this forum included senior representatives from the Australian Government Department of Health, the Aged Care Quality and Safety Commission, and the Tasmanian Department of Health Public Health Unit.

The Commission has not visited the service since the cessation of the outbreak. The next site visit will be determined through the Commission's risk assessment process.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000161

Question Subject: Surge workforce or emergency response team provided to the Melaleuca Nursing Home

Type of Questions: Written

Questioner: Katy Gallagher

Question: Was a surge workforce or emergency response team provided to the Melaleuca Nursing Home? If yes, please outline the dates that additional or replacement staff were allocated, the number of staff and their qualification.

Answer:

The following surge workforce and emergency response teams were provided to Melaleuca Nursing Home.

| Workforce | No. staff provided | Roles |
|--------------------|--------------------|----------------------------------|
| Emergency Response | 4 | 1 Clinical First Responder (CFR) |
| Team | | 2 x Registered Nurses (RNs) |
| From 18 April 2020 | | 1 x Enrolled Nurse |
| Surge Workforce | 4 | 4 x Personal Care Workers |
| From 21 April 2020 | | |

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000162

Question Subject: Remote Locums

Type of Questions: Written

Questioner: Katy Gallagher

Question: How many remote locums were utilised in Australia to ensure medical services continued to be delivered across the aged care sector? Please provide this information by state and territory and the location of where the locums were utilised.

Answer:

There has been no remote locums utilised through the Aged Care COVID-19 Preparedness Measure, as no Commonwealth funded aged care services have required this support to date.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000163

Question Subject: Aged Care Workers – date and who made decision re retention bonus

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please confirm when the decision was made to offer a retention bonus to aged care workers and by whom?

Answer:

The Government announced an aged care support package on 20 March 2020 providing additional funding of \$444.6 million to strengthen the industry, with specific mechanisms to reinforce the aged care workforce. The retention bonus formed part of this package. The decision was made prior to the announcement; however the Department cannot comment on details or timing of Cabinet decisions.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000164

Question Subject: Remote locums funding

Type of Questions: Written

Questioner: Katy Gallagher

Question:

Please provide a breakdown of the amount of funding as a total and for each locum response and the funding stream utilised. Was this funding associated with this measure part of any announcement made during the COVID-19 pandemic? If yes, please include the relevant announcement and date of that announcement.

Answer:

Funding for remote locums for Commonwealth funded aged care services that may experience COVID-19 is available through the \$101.2 million Aged Care COVID-19 Preparedness Measure – part of the Government's \$2.4 billion health package announced by the Prime Minister on 11 March 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000165

Question Subject: Requests to access the PPE National Stockpile

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please confirm if the Eliza Purton Home for the Aged and Coroneagh Park submitted requests to access the PPE National Stockpile. If yes, please provide dates when they made their submissions.

Answer:

On 17 April 2020, Respect (the Approved Provider) requested surgical masks for both Coroneagh Park and Eliza Purton Home for the Aged. An additional request for gowns was made on 23 April 2020, which was facilitated through the State Government supply. This is to be replenished by the NMS.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000166

Question Subject: Aged Care Quality and Safety Commission visiting Eliza Purton Home for

the Aged and Coroneagh Park

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: Did the Aged Care Quality and Safety Commission visit Eliza Purton Home for the Aged and Coroneagh Park before the COVID-19 pandemic, during the COVID-19 pandemic or after the COVID-19 pandemic? If yes, please provide the dates, time and purpose of the visits. If not, why not?

Answer:

The first (and only) COVID-19 case at Eliza Purton Home for the Aged and Coroneagh Park was identified on 16 April 2020. Based on currently available information, as at 1 May 2020, there are no active COVID-19 cases at either of the services (of either staff or consumers).

Prior to the outbreak, the Commission most recently conducted a site visit at the Eliza Purton Home for the Aged on 14 March 2019 and at Coroneagh Park on 25 June 2019. The purpose of these visits was to undertake an unannounced assessment contact. No compliance issues were identified at either service.

The Commission has also engaged with the Approved Provider in resolving five complaints received about the two services since 1 January 2019.

Additionally, the following monitoring activities have been undertaken by the Commission:

- 20 March 2020 non-site assessment contact. The purpose of this contact was to enquire into the COVID-19 readiness of the provider's services.
- 26 March 2020 services responded to a non-site assessment contact via a self-assessment survey regarding the service's COVID-19 readiness.

During an active outbreak, for health and safety reasons based on clinical advice, the Commission utilises monitoring methods other than site visits. In this case, contact with the approved provider occurred through a daily interagency forum established to coordinate respective roles and involving senior representatives from the Department of Health, the Aged Care Quality and Safety Commission, and the Tasmanian Department of Health Public Health Unit.

The Commission has not visited the services since the cessation of the outbreak. The next site visit for each service will be determined through the Commission's risk assessment process.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000167

Question Subject: If brief provided to Minister for Aged Care, Minister for Health or the Prime Minister regarding retention bonus to aged care workers, and was there a change in decision

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please confirm if a brief about providing a retention bonus to aged care workers was provided to the Minister for Aged Care and Senior Australians, the Minister for Health or the Prime Minister by the Department of Health? At any stage was there a change in decision to exclude any aged care workers from receiving the retention bonus? If yes, please confirm who made the decision to exclude aged care workers from receiving the retention bonus and when this decision occurred.

Answer:

The Government has been provided with a range of advice about impacts on the aged care sector and aged care workers in response to COVID-19. This included advice about retention payments.

There has been no change in decision on who would receive the retention bonus since it was announced.

PARLIAMENTARY INQUIRY QUESTION ON NOTICE Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000168

Question Subject: Who made decision to allocate \$234.9 million to retention bonus and when

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please confirm who made the final decision to allocate \$234.9 million to the retention bonus and when this decision occurred?

Answer:

This was a decision of government.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000169

Question Subject: Exclusion of retention bonus of any aged care workers and notification to cabinet

Type of Questions: Written

Questioner: Katy Gallagher

Question: When the retention bonus for aged care workers was presented to the National Cabinet did the measure, at that time, exclude any aged care workers from receiving the payment?

Answer:

The measure was a decision of the Australian Government. It was designed specifically to target direct care and personal support workers, recognising the particular role they play in the care of individuals.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000170

Question Subject: Chemical and physical restraint in residential aged care facilities during the COVID-19 outbreak

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: Has the Government been monitoring the use of chemical and physical restraint in residential aged care facilities during the COVID-19 outbreak? If yes, please provide details of any increased use of restraints, and a breakdown by state/territory of any increases.

Answer:

During the pandemic, the Aged Care Quality and Safety Commission continues to use the full range of our regulatory powers - conducting site visits, monitoring risk, managing complaints, engaging with consumers and supporting providers - to help keep aged care consumers safe. This includes monitoring the use of restraint.

The Commission's regulatory response during the COVID-19 pandemic has been adjusted to put additional focus on minimising infection risks to consumers and staff. In addition to promoting guidance on infection control, we are providing advice on a range of other key issues and risks during COVID-19.

The Commission is communicating directly with providers through assessment contacts and undertaking targeted site visits where there is a higher level of assessed risk that Aged Care Quality Standards may not be met.

In response to questions and concerns raised with the Commission about the application of visitor restrictions, we have engaged with the sector (including by convening roundtables with consumer and provider peak bodies) to support problem solving in relation to the management of these new arrangements including associated risks.

We are also closely monitoring and responding to complaints received by the Commission. The number of complaints on restraints is comparable with those received about this issue in prior years.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number: IQ20-000171

Question Subject: From the \$234.9 million, how many aged care workers will receive retention bonus, listing aged care workers by qualification who will receive in residential facilities

Type of Questions: Written

Questioner: Katy Gallagher

Question: As part of the \$234.9 million funding package how many aged care workers delivering services in residential aged care facilities will receive the retention bonus? Please list all of the aged care workers by qualification who will receive the retention bonus in residential aged care facilities.

Answer:

All direct care workers in residential aged care will receive the bonus. This includes personal care workers, registered nurses, enrolled nurses and allied health.

Based on growth in the resident population since 2016, it is expected the workforce has grown to around 163,000. Employers will be required to apply for the retention bonus in relation to their eligible employees.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number: IQ20-000172

Question Subject: From the \$234.9 million, how many aged care workers will receive retention bonus, listing aged care workers by qualification who will receive in Commonwealth Home Support program?

Type of Questions: Written

Questioner: Katy Gallagher

Question: As part of the \$234.9 million funding package how many aged care workers delivering services in home care will receive the retention bonus? Please list all of the aged care workers by qualification who will receive the retention bonus across the delivery of home care services including any workers in the Commonwealth Home Support Program

Answer:

Workers delivering Home Care Packages (HCP) services eligible for the bonus, include, clinical care, personal care, cleaning, home support activities and meal preparation, social support, shopping, community access and transport, allied health and respite.

Commonwealth Home Support Programme (CHSP) workers are not eligible for this bonus.

Based on relative funding between HCP and CHSP, and growth in the number of HCP recipients since 2016, it is expected the eligible home care workforce is around 65,000.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000173

Question Subject: Complaints made to the Aged Care Quality and Safety Commission

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: How many complaints were made to the Aged Care Quality and Safety Commission about service providers limiting visits to residential aged care facilities during the COVID-19 pandemic?

Answer:

From 1 January 2020 to 10 May 2020, the Commission received 513 complaints and enquiries on its complaints line relating to visitor restrictions at aged care facilities in the context of the COVID-19 pandemic.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000174

Question Subject: State breakdown of workers by program who will receive retention payment

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please provide a state breakdown of workers by program (ie residential, homecare, CHSP) that will receive the retention payment.

Answer:

The tables below shows how the residential and home care and support workforce was distributed by state and territory in 2016.

Table 4.1: Distribution of residential direct care workforce (per cent) by State/Territory, location, ownership type and facility type: 2003, 2007, 2012 and 2016

| | | - | | | | | | | |
|---------------------------|------|--------------------|------|------|------|-----------------------|------|------|--|
| | All | All PAYG employees | | | | Direct care employees | | | |
| | 2003 | 2007 | 2012 | 2016 | 2003 | 2007 | 2012 | 2016 | |
| State/Territory | | | | | | | | | |
| NSW | 31.2 | 31.6 | 30.6 | 30.2 | 32.1 | 31.8 | 31.0 | 30.1 | |
| Victoria | 30.4 | 27.9 | 27.6 | 27.2 | 29.4 | 28.6 | 27.8 | 27.5 | |
| Queensland | 16.1 | 18.0 | 18.5 | 17.1 | 15.8 | 17.4 | 17.7 | 16.7 | |
| WA | 7.6 | 7.9 | 8.2 | 8.9 | 7.8 | 8.0 | 8.6 | 8.9 | |
| SA | 9.3 | 9.9 | 10.4 | 12.1 | 9.7 | 9.9 | 10.4 | 12.3 | |
| Tasmania | 3.6 | 3.4 | 3.5 | 2.9 | 3.1 | 3.0 | 3.2 | 2.9 | |
| ACT | 1.5 | 0.9 | 1.0 | 1.2 | 1.5 | 0.9 | 1.0 | 1.2 | |
| NT | 0.3 | 0.4 | 0.3 | 0.5 | 0.4 | 0.4 | 0.3 | 0.4 | |
| Location* | | | | | | | | | |
| Major cities of Australia | | | 64.0 | 63.4 | | | 65.6 | 64.6 | |
| Inner Regional Australia | | | 24.9 | 23.7 | | | 23.9 | 23.4 | |
| Outer Regional Australia | | | 9.9 | 11.0 | | | 9.3 | 10.3 | |
| Remote Australia | | | 8.0 | 1.3 | | | 8.0 | 1.2 | |
| Very Remote Australia | | | 0.4 | 0.6 | | | 0.4 | 0.5 | |
| Ownership Type | | | | | | | | | |
| Not-for-profit | 64.5 | 60.0 | 56.8 | 57.8 | 61.6 | 58.4 | 55.7 | 58.3 | |
| For-profit | 26.1 | 31.4 | 34.1 | 34.0 | 28.9 | 33.0 | 35.3 | 34.3 | |
| Government | 9.4 | 8.6 | 9.0 | 8.2 | 9.5 | 8.6 | 8.9 | 7.4 | |

Table 6.1: Distribution of home care and home support direct care workforce Total PAYG and Direct Care (per cent) by State/ Territory, location, and ownership type: 2007, 2012 and 2016

| | Total I | Total PAYG employees | | | Direct care employees | | |
|---------------------------|---------|----------------------|------|------|-----------------------|------|--|
| | 2007 | 2012 | 2016 | 2007 | 2012 | 2016 | |
| State/Territory | | | | | | | |
| NSW | 20.5 | 31.2 | 25.7 | 22.7 | 32.9 | 26.4 | |
| Victoria | 30.5 | 22.6 | 32.3 | 27.6 | 20.9 | 26.5 | |
| Queensland | 20.3 | 16.9 | 15.8 | 22.3 | 19.1 | 17.8 | |
| WA | 11.3 | 13.1 | 12.1 | 10.7 | 11.1 | 13.7 | |
| SA | 9.0 | 10.7 | 7.4 | 9.4 | 9.5 | 8.1 | |
| Tasmania | 6.2 | 2.5 | 4.4 | 4.9 | 3.0 | 5.1 | |
| ACT | 1.2 | 2.1 | 1.8 | 1.2 | 2.0 | 1.8 | |
| NT | 1.0 | 1.0 | 0.6 | 1.3 | 1.4 | 0.6 | |
| Location* | | | | | | | |
| Major cities of Australia | | | 63.5 | | | 59.7 | |
| Inner Regional Australia | | | 16.9 | | | 18.9 | |
| Outer Regional Australia | | | 14.6 | | | 17.0 | |
| Remote Australia | | | 4.0 | | | 3.5 | |
| Very Remote Australia | | | 0.6 | | | 0.6 | |
| Ownership Type | | | | | | | |
| Not-for-profit | 70.0 | 74.4 | 70.4 | 72.9 | 76.1 | 68.0 | |
| For-profit | 7.6 | 5.2 | 9.3 | 4.7 | 6.7 | 12.1 | |
| Government | 22.5 | 20.4 | 20.3 | 22.4 | 17.1 | 19.9 | |

Source: Census of home care and home support outlets. *ABS remoteness area categories.

Source: Census of residential aged care facilities.
*Direct comparison of location with previous years is not possible due to change in categories.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000175

Question Subject: Was any modelling or analysis completed prior to decision to pay retention bonus and if so details

Type of Questions: Written

Questioner: Katy Gallagher

Question: Did the Government undertake any modelling or analysis prior to making a decision to pay aged care workers a retention bonus? If yes, please provide details. If not, why not?

Answer:

Since the start of the pandemic, the Department has provided government with a range of analysis on the impacts of COVID-19 on the aged care sector and its workforce. This analysis has supported government deliberations around the specific measures that have been announced, including the retention payments.

Department of Health

Senate Select Committee on COVID-19 Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000176

Question Subject: Submissions made to the Royal Commission into Aged Care Quality and Safety

Type of Questions: Written

Questioner: Katy Gallagher

Question: How many submissions were made to the Royal Commission into Aged Care Quality and Safety during the COVID-19 pandemic?

Answer:

The Royal Commission into Aged Care Quality and Safety is an independent inquiry. Submissions from the public and organisations are made directly to the Royal Commission, some of which are published on the Royal Commission's website at the discretion of the Royal Commission. The Department of Health does not receive information about the submissions.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000177

Question Subject: How was calculation made re \$234.9 million

Type of Questions: Written

Questioner: Katy Gallagher

Question: How did the Government calculate that it would provide \$234.9 million to a retention bonus for aged care workers?

Answer:

This is the amount government determined to make available for this initiative, as part of a \$444.6 million package of measures, which provided support across a range of areas. This took into account the estimated workforce and the funding that would be required to support retention of direct care and personal support workers.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000178

Question Subject: Breakdown of funding allocated for full time, part time and casual direct workers in residential aged care and workers in home care including CHSP and eligibility of workers employed by either local or state governments and is yes provide a breakdown

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please provide a breakdown of the amount of funding that will be allocated to the retention bonus for aged care staff working in the following areas:

- Full-time, part-time and casual direct care workers in residential aged care.
- Full-time, part-time and casual direct care workers in home care including CHSP.

Are any workers employed by either local or state governments eligible for the payment if they work in residential aged care or provide home care? If yes, please provide a breakdown by state/territory of these workers.

Answer:

Payment arrangements will work as follows:

- Up to \$800 per quarter for eligible residential care staff
- Up to \$600 per quarter for eligible home care staff. CHSP is not included.

Pro-rata payments will be supplied as follows to eligible staff.

- Between 3 and 7.5 hours per week 20 per cent of bonus payment
- More than 7.5 and up to 15 hours per week 40 per cent of bonus payment;
- More than 15 and up to 22.5 hours per week 60 per cent of bonus payment;
- More than 22.5 and up to 30 hours per week 80 per cent of bonus payment;
- More than 30 hours per week 100 per cent of bonus payment.

Workers in Government services are eligible. The Department does not have information on states/territories workforces.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000179

Question Subject: How many of the 20000 international nurses already worked in aged care prior to restrictions lifted and number of hours they were able to work

Type of Questions: Written

Questioner: Katy Gallagher

Question: How many of the 20,000 international nursing students already worked in residential or home care prior to the restrictions being lifted on the number of hours they were able to work?

Answer:

As per portfolio responsibilities, we ask the Committee to refer this question to the Department of Home Affairs.

The Department of Health does not track the international student workforce in health or aged care settings.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000180

Question Subject: How many of the 20000 international nursing students increased their hours after announcement 18 March 2020

Type of Questions: Written

Questioner: Katy Gallagher

Question: How many of the 20,000 international nursing students were able to increase their hours and contribute to the aged care workforce after the announcement on 18 March, 2020?

Answer:

As per portfolio responsibilities, we ask the Committee to refer this question to the Department of Home Affairs.

The Department of Health does not track the international student workforce in health or aged care settings.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000181

Question Subject: Workforce data

Type of Questions: Written

Questioner: Katy Gallagher

Question:

- 1) What is the total number of aged care workers in Australia?
- 2) How many aged care workers deliver services in residential aged care?
- 3) How many aged care workers deliver services under the Home Care Packages Program?
- 4) How many aged care workers deliver services under the Commonwealth Home Care Program?

Answer:

The latest available data is from 2016 – The Aged Care Workforce 2016, commissioned by the Australian Government Department of Health and undertaken by National Institute of Labour Studies (NILS).

At 2016 there was a total of 366,027 aged care workers in Australia – this included 240,315 direct care staff across residential care and in-home care and 125,712 ancillary, which included case managers, management, administration, spiritual and other ancillary care.

There was a total of 235,764 people working in residential aged care. This included 153,854 direct care workers of which around 70 per cent were personal care workers and nearly 15 per cent were registered nurses and 10 per cent enrolled nurses. There were 81,911 ancillary staff.

At the time of the 2016 census and survey, in-home care data was aggregated together from the home care and home support areas; data cannot by split at present by Home Care packages and the Commonwealth Home Care program.

At 2016 there was a total of 130,263 aged care workers working in home care. This included 86,462 direct care workers and 43,801 ancillary staff. Around 84 per cent of direct care workers were Community Care workers, followed by around 8 per cent registered nurses and 5 per cent allied health.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

6 May 2020

PDR Number: IQ20-000182

Question Subject: Tracking 20000 international nursing student's contribution and details if not/why?

Type of Questions: Written

Questioner: Katy Gallagher

Question: Is the Government tracking how the 20,000 international nursing students are contributing to the aged care workforce? If yes, please provide details. If not, why not?

Answer:

The Department of Health does not track the international student workforce in health or aged care settings.

The Department of Home Affairs is responsible for monitoring student visa compliance.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000183

Question Subject: Number staff working residential aged care who had flu vaccine by 1 May 2020

Type of Questions: Written

Questioner: Katy Gallagher

Question: How many staff working in residential aged care facilities received their flu vaccine by 1 May, 2020?

Answer:

On 17 March 2020, and confirmed on 21 April 2020, the Australian Health Protection Principal Committee (AHPPC) made a number of recommendations including, that all visitors and staff (including visiting workers) to residential aged care facilities should not be permitted to enter the facility if they have not been vaccinated against influenza (after 1 May 2020).

States and territories have released directions to give effect to the AHPPC recommendations. These set out that individuals must not enter or remain on the premises of a residential aged care facility if the person does not meet certain vaccination requirements. The entry restrictions generally apply to most individuals entering a residential aged care facility, including staff, visitors, health practitioners, volunteers and others.

Residential aged care facilities are not required to report the number of staff who have received the influenza vaccine to the Australian Government Department of Health.

However, since 1 May 2018, the *Quality of Care Principles 2014* have required all Australian Government-subsidised residential aged care providers to offer the influenza vaccine to all staff and volunteers. In addition, the *Records Principles 2014* require approved providers to keep records of the number of staff and volunteers that receive an influenza vaccination each calendar year.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000184

Question Subject: Do aged care facilities have to report number staff received flu vaccine by 1 May to Department of Health, if not why?

Type of Questions: Written

Questioner: Katy Gallagher

Question: Given the Government has made it a requirement that residential aged care facilities do they have to report the number of staff who have received a flu vaccine by 1 May, 2020 to the Department of Health? If yes, please provide details. If not, why not?

Answer:

On 17 March 2020, and confirmed on 21 April 2020, the Australian Health Protection Principal Committee (AHPPC) made a number of recommendations including, that all visitors and staff (including visiting workers) to residential aged care facilities should not be permitted to enter the facility if they have not been vaccinated against influenza (after 1 May 2020).

States and territories have released directions to give effect to the AHPPC recommendations. These set out that individuals must not enter or remain on the premises of a residential aged care facility if the person does not meet certain vaccination requirements. The entry restrictions generally apply to most individuals entering a residential aged care facility, including staff, visitors, health practitioners, volunteers and others.

Given that these are the requirements of the state and territories, residential aged care facilities are not required to report the number of staff who have received the influenza vaccine to the Australian Government Department of Health.

However, since 1 May 2018, the *Quality of Care Principles 2014* have required all Australian Government-subsidised residential aged care providers to offer the influenza vaccine to all staff and volunteers. In addition, the *Records Principles 2014* require approved providers to keep records of the number of staff and volunteers that receive an influenza vaccination each calendar year.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000186

Question Subject: Contact to providers prior 1 May re needs assessment and coordination of flu vaccination programs

Type of Questions: Written

Questioner: Katy Gallagher

Question: Did all PHNs contact every residential aged care provider prior to 1 May 2020 to undertake a needs assessment and coordinate influenza vaccination programs for those services with an identified need? If not, why not?

Answer:

On 17 March 2020, and confirmed on 21 April 2020, the Australian Health Protection Principal Committee (AHPPC) made a number of recommendations including, that all visitors and staff (including visiting workers) to residential aged care facilities should not be permitted to enter the facility if they have not been vaccinated against influenza (after 1 May 2020).

States and territories have released directions to give effect to the AHPPC recommendations. These set out that individuals must not enter or remain on the premises of a residential aged care facility if the person does not meet certain vaccination requirements. The entry restrictions generally apply to most individuals entering a residential aged care facility, including staff, visitors, health practitioners, volunteers and others.

Following the recommendations of AHPPC and release of directions by states and territories, Commonwealth funded aged care providers raised concerns with the Department about their ability to access influenza vaccinations.

On 14 April 2020, the Department engaged all PHNs to undertake a co-ordination activity to support residential aged care facilities obtain supply of the influenza vaccine for staff (primarily) and residents, where the aged care facility indicated that they were not able to source sufficient vaccine through private market supply.

PHNs were required to contact each residential aged care facility in their region and undertake a needs assessment, in terms of vaccine supply and appropriately qualified vaccine administrators. Those needs assessments were received by the Department from 17 April 2020, with the last received on 29 April 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000188

Question Subject: Number residents in aged care facilities received flu vaccine before and after 1 May 2020

Type of Questions: Written

Questioner: Katy Gallagher

Question: How many older Australians in residential aged care facilities have received a flu vaccine before 1 May, 2020 and after 1 May, 2020?

Answer:

Under the National Immunisation Program (NIP), a range of individuals are eligible to receive a free seasonal influenza vaccine including:

- People aged 65 years and older;
- Aboriginal and Torres Strait Islander people aged 6 months and older;
- People aged 6 months and older with medical conditions putting them at increased risk of severe influenza and its complications.

Data is not collected on the number of older Australians in residential aged care facilities who have received an influenza vaccine, however as at 11 May 2020, 4.199 million doses have been distributed to states and territories for over 65s under the NIP. This represents enough vaccine for over 100 per cent of the over-65 population in Australia.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000190

Question Subject: Number of additional aged care workers that have been part of the emergency response teams

Type of Questions: Written

Questioner: Katy Gallagher

Question: Please provide the number of additional aged care workers that have been part of the emergency response teams including the name of the residential aged care facility or service provider they were sent to support and by state and territory.

Answer:

As at 12 May 2020, the following Emergency Response Teams (ERT) have been deployed.

| Service name | State/Territory | No. staff provided | Roles |
|----------------------------|--------------------|--------------------|-----------------------------------|
| Service 1 | Tasmania | 4 | 1 Clinical First Responder (CFR)* |
| | | | 2 x Registered Nurses (RNs) |
| | | | 1 x Enrolled Nurse |
| Service 2 | Tasmania | 1 | 1 x RN |
| Service 3 | Tasmania | 1 | 1 x RN |
| Service 4 (Newmarch House) | New South Wales | 35 | 3 x CFR |
| | vvales | | 19 x RNs |
| | | | 9 x Personal Care Workers |
| | | | 3 x Physiotherapists |
| | | | 1 x Administrator |

| Service name | State/Territory | No. staff provided | Roles |
|---|--------------------|-----------------------|-------------------|
| Service 5 (Catholic Healthcare Bodington) | New South Wales | 1 | 1 x CFR |
| Service 6 | Victoria | 1 | 1x CFR |
| Service 7 (Doutta Galla) | Victoria | 2 | 1 x CFR 1 x RN |

^{*} CFR supported Services 1, 2 and 3

As per IQ20-000107, the services named above have released public statements in respect of cases of COVID-19. While state and territory health authorities may choose to publicly disclose the names of aged care services that have known cases of COVID-19 from a broader public health perspective, the Department would prefer not to name further facilities due to the impact public disclosure has on services, their staff and residents due to media exposure as well as their continued ability to operate. We want to encourage service providers to proactively report cases to the Department of Health. The Department can provide the Committee a private briefing, should this detail be required.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000191

Question Subject: Additional funding for ACQSC for Covid-19

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: Did the Aged Care Quality and Safety Commission receive additional funding during the COVID-19 pandemic? If yes, how much funding was allocated and for what purpose?

Answer:

The Aged Care Quality and Safety Commission (ACQSC) was provided with \$5.251 million under the \$101.2 million Aged Care COVID-19 Preparedness measure.

This additional funding has been provided over two years to expand education and support for the aged care sector's implementation of COVID-specific infection control measures. The funding will also strengthen ACQSC's capacity to audit and monitor at-risk providers' infection control arrangements.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000192

Question Subject: Emergency response teams

Type of Questions: Written

Questioner: Katy Gallagher

Question:

Please provide a breakdown of each emergency response team by number and qualification as well as the total amount of funding, the amount of funding for each emergency response team and the funding stream utilised. Was this funding associated with this measure part of any announcement made during the COVID-19 pandemic? If yes, please include the relevant announcement and date of that announcement.

Answer:

As at 12 May 2020, seven Emergency Response Teams (ERT) have been deployed, with a total of 45 workers. Of these, there were 24 registered nurses, one enrolled nurse, one administrator, three physiotherapists, seven clinical first responders, and nine personal care workers.

The total amount of funding for the ERTs deployed is not available as some are still operational.

ERTs are part of workforce surge options funded through the \$101.2 million Aged Care COVID-19 Preparedness Measure, part of the Government's \$2.4 billion health package announced by the Prime Minister on 11 March 2020.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000193

Question Subject: Funding re more staff for Covid-19 for ACQSC and if so how much and purpose

Type of Questions: Written

Questioner: Senator Katy Gallagher

Question: Did the Aged Care Quality and Safety Commission receive any funding to employ more staff during the COVID-19 pandemic? If yes, how much funding was allocated and how many new staff were employed and for what purpose?

Answer:

The Aged Care Quality and Safety Commission (ACQSC) was provided with \$5.251 million under the \$101.2 million Aged Care COVID-19 Preparedness measure. This included funding to engage 16.5 additional contractors over two years.

As at 30 April 2020, 13 additional staff have been employed in the following functions:

- complaints management;
- quality assessment;
- data management and analysis (including identification of services most at risk); and
- strategic engagement.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000195

Question Subject: Funding as a total for each surge workforce response and the funding stream and announcements

Type of Questions: Written

Questioner: Katy Gallagher

Question:

Please provide a breakdown of the amount of funding as a total and for each surge workforce response and the funding stream utilised. Was this funding associated with this measure part of any announcement made during the COVID-19 pandemic? If yes, please include the relevant announcement and date of that announcement.

Answer:

The total number of staff engaged through Mable is determined by the individual need of the aged care services. The total amount of funding for the surge workforce is not available as some are still operational.

Surge workforce through the Mable platform for Commonwealth funded aged care service who may experience COVID-19 is funded through the \$101.2 million Aged Care COVID-19 Preparedness Measure—part of the Government's \$2.4 billion health package announced by the Prime Minister on 11 March.

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic 6 May 2020

PDR Number: IQ20-000201

Question Subject: NSW police investigation – the Ruby Princess

Type of Questions: Written

Questioner: Kristina Keneally

Question:

NSW Police Commissioner Mick Fuller has said that he wishes to make the findings of the Strike Force Bast investigation into the Ruby Princess available to public if he is permitted. Will the Department make a commitment now that Ministers and officers will cooperate fully with the investigation into the Ruby Princess, and will not prevent attempt to prevent the findings of the NSW Police inquiry from being made public?

Answer:

Release of the NSW Police findings of the Strike Force Bast investigation is a matter for the NSW Government and the NSW Police.