

Information for Residential Aged Care Facilities

Residential Aged Care Facilities Emergency Management Direction

To reduce the spread of COVID-19 within South Australia, the State Coordinator has issued a Direction under the Emergency Management Act 2004 to limit entry into residential aged care facilities (RACF) in South Australia.

Due to the evolving nature of COVID-19 in the community, the Direction is regularly reviewed and updated to ensure it continues to balance protecting residents, staff and others from the risk of COVID-19 transmission while supporting the rights and wellbeing of residents and their families.

To ensure they are up to date with the current requirements, all providers of residential aged care are urged to read the full [Direction](#).

Who does the Direction apply to?

Under the Direction, a residential aged care facility or RACF means:

- > Residential Aged Care Facility under the Commonwealth Aged Care Act 1997; or
- > Multi-purpose Service (MPS) aged care beds funded through the Commonwealth Government Multi-purpose Service Program; or
- > State funded residential aged care beds.

The operator of a RACF in South Australia must take all reasonable steps to ensure that a person who is prohibited under the Direction does not enter or remain on the premises.

It is an offence to breach this Direction and fines may be issued for non-compliance.

A separate fact sheet has been prepared to provide advice on compliance with the Direction for RACF that are co-located with other facilities, for example acute settings and retirement villages. For more information, visit www.sahealth.sa.gov.au/covidagedcare.

COVID Safe Check-In

Anyone entering a RACF, including employees, contractors, volunteers and visitors, must use [COVID SAfe Check-In](#) (QR code) upon entry to capture their relevant contact details. If they are not able to use the COVID Safe Check-In, they must sign in using a paper record.

RACF operators must display the COVID SAfe Check-In QR code at the point of entry. A paper record must be made available for people who are unable to use the COVID SAfe Check-In to record their:

- > name
- > telephone number
- > date and time of the visit and departure
- > resident/area of the RACF visited.

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RACF workforce

To reduce the risk of COVID-19 transmission, operators of RACF must implement a number of changes to the way that employees and contractors at their facilities work.

Working across multiple RACF

To the extent **reasonably possible**, personal care workers must not provide personal care to residents at more than one RACF.

- > Whilst personal care workers are not restricted from having secondary employment or working at more than one RACF, employers should make best endeavours to support personal care workers to work at a single RACF site as much as possible.
- > If the risk of COVID-19 in the South Australian community increases, single site restrictions on personal care workers may become mandatory.
- > Any person working at a RACF during a declared COVID-19 outbreak is prohibited from other employment for the duration of the prescribed self-quarantine period.

All employees, contractors and volunteers must notify the operator of the RACF (as soon as possible) of:

- > any additional place of employment
- > any COVID-19 case identified at their additional place of employment.

Workforce Management Plans

All RACF must have in place a Workforce Management Plan that requires:

- > All employees, contractors and volunteers to provide details of any additional places of employment they may have.
- > All employees, contractors and volunteers to notify the RACF if they become aware of a case of COVID-19 being identified at any of their other places of employment.
- > All employees, contractors and volunteers to notify the RACF of any COVID-19 vaccination received (and provide evidence of same) if that vaccination was not conducted at a clinic held at the RACF.

The operator of the RACF must keep records of these notifications and provide this information to an authorised officer upon request to assist with contact tracing, if required.

For the purposes of the Workforce Management Plan, 'contractors' only include people who make up part of the RACF 'workforce'. The Plan does not need to include those people who are entering the facility on a short-term basis to provide goods or services.

Staff furloughing and workforce strategies in an outbreak

Accessing and sustaining a skilled RACF workforce is critical to successfully manage COVID-19 outbreaks. RACFs should aim to be self-sustainable with their workforce capacity, wherever possible, and build into their Outbreak Management Plan strategies to manage a loss of at least 40% of their workforce. It is acknowledged that under escalating scenarios, surge workforce may be difficult to source. In such instances, surge workforce may be accessible from a mix of other sources, including:

- > the provider's other services (e.g. residential, home care, corporate)
- > collaborative local networks and regional support clusters

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- > Commonwealth surge workforce supplier contracts, and
- > volunteer carers/partners in care, where appropriate.

The Commonwealth Department of Health Case Manager is the liaison point between the RACF, SA Health and the Department of Health Surge Workforce Team for all surge workforce support.

Return to work of close contacts

Where the RACF is experiencing critical workforce shortages, to enable the safe operation of the facility and maintenance of a safe level of care to all residents, the Chief Executive (or equivalent) of the RACF may grant work permissions during a period of quarantine to provide direct personal or nursing care.

For more information, including roles and responsibilities and specific requirements that must be met, refer to [Information for RACF - Interim guidance for COVID-19 outbreak management](#).

Mandatory COVID-19 vaccination

A person cannot engage in work or duties at a RACF unless they have:

- > Received at least one dose of a TGA approved or recognised COVID-19 vaccination; and
- > Received, or have evidence of a booking to receive, a second dose of a TGA approved COVID-19 vaccine within the interval after the first dose recommended by the Australian Technical Advisory Group on Immunisation (ATAGI) for that COVID-19 vaccine Provided the operator of the health care setting with proof of their vaccination status upon request; and
- > Within four weeks of becoming eligible in accordance with ATAGI guidelines, the person receives, or has evidence of a booking to receive, a third dose (booster) of a TGA approved COVID-19 vaccine.

The vaccination requirements apply to:

- > People employed or engaged by or on behalf of a RACF (whether as an employee, contractor or agency staff) to work or perform duties at a premises of a RACF on a full time, part time or casual basis, including:
 - o Direct care workers (nurses, personal care workers, allied health professionals and allied health assistants)
 - o Administration staff (reception, management, administration)
 - o Ancillary staff (food preparation, cleaning, laundry, garden, maintenance)
 - o Lifestyle / social care (music/art therapy)
 - o Transport drivers of residents of RACF.
- > Volunteers engaged by a RACF to undertake duties at a RACF.
- > Students on placement at a RACF.
- > Medical practitioners and allied health professionals who attend and provide care to residents of a RACF whether employed or engaged by the resident, RACF or another person.

For more information on Australian Technical Advisory Group on Immunisation (ATAGI) COVID-19 vaccine clinical guidance, visit www.health.gov.au/resources/publications/covid-19-vaccination-atagi-clinical-guidance-on-covid-19-vaccine-in-australia-in-2021.

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All residential aged care workers, including people employed or engaged by or on behalf of a RACF, volunteers, students and medical practitioners must provide the operator of the RACF with evidence of their vaccination status upon request.

COVID-19 mandatory vaccination exemptions

From 6 December 2021, exemptions to the mandatory COVID-19 vaccination requirement for RACF workers are limited to the below circumstances:

- > **The RACF must be provided with a medical certificate or letter from a legally qualified medical practitioner certifying that the person:**
 - has a medical exemption from receiving a TGA approved COVID-19 vaccine on either a permanent or temporary basis in accordance with the guidelines published from time to time by ATAGI; or
 - has a medical exemption on either a permanent or temporary basis from receiving the preferred vaccine as recommended by ATAGI for the person's age; or
 - has an appointment to be assessed by a medical specialist or has commenced an assessment with a medical specialist to determine whether they have a medical exemption from receiving a COVID-19 vaccine on either a permanent or temporary basis in accordance with the guidelines published from time to time by ATAGI.
- > The certificate or letter must specify the nature of the exemption and the basis on which it applies and must be **accompanied by a letter of endorsement from the Chief Public Health Officer or her delegate.**

For more information about ATAGI guidance on medical conditions for a temporary medical exemption, visit www.health.gov.au/resources/publications/atagi-expanded-guidance-on-temporary-medical-exemptions-for-covid-19-vaccines.

For more information on COVID-19 vaccine clinical guidance in Australia, visit www.health.gov.au/resources/publications/covid-19-vaccination-atagi-clinical-guidance-on-covid-19-vaccine-in-australia-in-2021.

Exemption process

1. Anyone seeking a medical exemption must obtain a medical certificate from a legally qualified medical practitioner that clearly outlines the reason for the exemption, in line with the ATAGI guideline: www.health.gov.au/resources/publications/atagi-expanded-guidance-on-temporary-medical-exemptions-for-covid-19-vaccines
2. The medical practitioner must complete the [SA Health Chief Public Health Officer Immunisation Exemption Application Form](#).
3. The completed form and medical certificate must be submitted to the Chief Public Health Officer (CHPO) for endorsement: Health.NJNPExemptions@sa.gov.au.
4. The medical exemption is not valid until it has been endorsed by the CPHO or her delegate. If approved, the CPHO will provide a signed exemption letter that can be provided to the RACF.

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Infection Prevention and Control

PPE requirements

Currently, any person (other than a resident or a child under 12 years) must not enter or remain on the premises of a RACF, unless the person is wearing a face mask (covering mouth and nose) at all times when in the physical presence of other persons. The requirement for a mask does not apply:

- > when the person is eating or drinking;
- > the wearing of a mask will hinder the provision of the relevant care and/or impact resident safety or wellbeing;
- > by a person who has a relevant medical condition, including problems with their breathing, a serious condition of the face, a disability or a mental health condition; or
- > in circumstances where the ability to see the mouth is essential for communication, such as to enable communication by or with any person who is deaf or hard of hearing.
- > An Infection Prevention and Control in RACF - PPE fact sheet is available on the SA Health website: www.sahealth.sa.gov.au/covidagedcare.

As children under 12 are not yet able to be vaccinated against COVID-19, children should be encouraged to wear a mask when visiting a RACF if appropriate in the circumstances and they are able to do so. This is a recommendation only not a mandatory requirement for children visiting a RACF.

Sourcing PPE

- > SA Health can provide surgical masks to RACF free of charge while the wearing of masks by all staff and visitors is a mandatory requirement in the RACF Emergency Management Direction.
 - o To obtain stock, please email: HealthPSCMSCOCustomerService@sa.gov.au
- > General supply of PPE to RACF is coordinated by the Commonwealth Department of Health (DoH).
 - o Aged care providers can request PPE by emailing agedcareCOVIDPPE@health.gov.au.
 - o The DoH assesses all requests and may ask for more information if needed - if your request is successful, the agreed PPE will be distributed to the RACF.
 - o Priority is given to aged care providers with a confirmed case of COVID-19.

Rapid Antigen Testing (RAT)

The Australian Government will provide RAT kits to all RACF commencing in early 2022. RAT kits supplied through this process are expected to be used for screening staff and residents, where appropriate.

The RAT kits being provided are to support:

- > testing of all residential aged care staff, including volunteers and subcontractors at each service, and
- > testing regular visitors on arrival at the service. This includes family and friends of residents, visiting allied health and other service providers.

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Everyone who uses a RAT and receives a positive result **must** fill out the online [Rapid Antigen Test Reporting Form](#). It is also encouraged to report negative results to provide ongoing surveillance information to SA Health.

RACF can also submit all **negative** results via excel spreadsheet to Health.COVIDrapidantigentests@sa.gov.au

Sourcing RATs

RACF can order RATs from the National Medical Stockpile by completing the [online form](#).

RACF can also order RATs from their usual providers or from SA Health (at a cost):

- > To order RAT kits from SA Health, complete the [order form](#) and submit via email to HealthPSCMSCOcustomerservice@sa.gov.au.

Further information regarding the process for implementing [RAT for COVID-19](#) is available on the [SA Health website](#).

Training requirements

All employees or contractors who provide personal care or nursing care to residents must complete [Understanding COVID-19 for Aged Care Workers](#) infection control before being permitted to enter or remain on the premises of a RACF.

This training is available at launch.sahealth.sa.gov.au.

- > Refresher training must be completed every **two** months.
- > This training may be completed individually online, or undertaken in a group setting using the online training module.
- > The operator of the RACF must keep records of completion of this training.
- > These records must be provided to an authorised officer upon request.

COVID-19 Infection Control Plans

All RACF must have COVID-19 Infection Control Plan for all communal areas at the facility, approved by the Department for Health and Wellbeing:

- > A template and guidance document is available on the SA Health website: www.sahealth.sa.gov.au/covidagedcare.
- > COVID-19 Infection Control Plans must be submitted to the Department for Health and Wellbeing via Health.COVIDInfectionControlPlan@sa.gov.au.
- > Approved COVID-19 Infection Control Plans must be kept available for inspection by authorised officers and any persons entering the RACF. It may also be published by the Department for Health and Wellbeing.

Influenza vaccination

From 1 June 2021, **all staff and visitors** to a RACF must be vaccinated against 2021 seasonal influenza. This applies to staff, visitors, health practitioners, students, volunteers and others (for example, cleaners, tradesmen, gardeners, hairdressers, and maintenance staff).

While vaccination for all residents is important to protect themselves and others against influenza, residents have the right to refuse vaccinations.

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Exemptions

There are a small number of exemptions to the influenza vaccination requirement:

- > A person who has a medical contraindication to the influenza vaccine (such as person who has a history of anaphylaxis or has had Guillain-Barré Syndrome following vaccination, or who is taking check point inhibitor medication for cancer treatment).
 - The visitor must provide appropriate evidence to the RACF they wish to visit, for example, a letter from a medical practitioner stating that they have a medical contraindication to the influenza vaccine.
- > A person who is observing the recommended 7 day waiting period between receiving the COVID-19 vaccine and the influenza vaccine
 - The visitor will need to provide evidence of the date of receipt of a COVID-19 vaccination to the RACF and take all reasonable steps to ensure they are vaccinated as soon as is reasonably practicable following the preferred minimum interval of 7 days between administration of the COVID-19 vaccine and the influenza vaccine.
- > A person to whom the vaccine is not reasonably available **Note: this includes the summer months when supply of the influenza vaccine is no longer readily available.*
- > Infants aged 6 months or less.
- > In the event of an emergency, emergency services personnel are permitted to enter a RACF regardless of immunisation status.
- > Visitors who have been called in to provide end of life support to a resident who have not yet received their flu vaccination, and who take all reasonable steps to get vaccinated as soon as practicable after their initial visit.
- > The SA Health Exemptions Panel has advised that unvaccinated persons are permitted to enter and remain on the premises of a RACF for the purposes of visiting a resident in the following circumstances:
 - The visitor must remain on the outdoor side of the closed window, with the resident to remain indoors.
 - Physical distancing must be maintained at all times and there must be no contact with other visitors or staff on the premises.

Note: SA Health will not consider additional requests for exemptions in relation to flu vaccination. The RACF is responsible for ensuring that prohibited persons do not enter or remain on the premises. The RACF operator is responsible for considering and accepting an unvaccinated person entering the facility under one of the exemptions, based on the evidence provided to them and appropriate documentation should be kept.

What if staff do not want to be vaccinated due to cultural, religious or other reasons?

Residential aged care providers will need to take all reasonable steps to ensure staff who have not had the influenza vaccination, and do not fall into the listed exemptions, do not enter or remain on the premises.

How will aged care providers know whether visitors have been vaccinated?

Aged care providers should seek appropriate evidence of immunisation status from individuals seeking to enter the facility.

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- > Appropriate evidence may include a statement or record from a health practitioner, or an immunisation history statement available from Medicare online or the Express Plus Medicare mobile app.

Providers may also consider maintaining records to support effective administration and to substantiate their compliance with this requirement.

Visitor restrictions

Prohibited visitors

The following are not permitted to enter or remain on the premises of a RACF in SA (referred to as 'prohibited categories'):

- > A person who has arrived in SA from an international location in the past 7 days.
- > A person who has been in contact with a confirmed case of COVID-19 in the last 14 days (except in circumstances where appropriate PPE was worn).
- > A person with a fever (>38), or who has a history of fever or chills in the preceding 72 hours, or symptoms of acute respiratory infection, loss of taste and smell, or diarrhoea and vomiting.
- > A person who has undertaken a COVID-19 test and is awaiting a test result, unless this is in accordance with routine surveillance testing of asymptomatic persons.
- > A person who has not been vaccinated against 2021 seasonal influenza (from 1 June 2021).
- > A person who has not been vaccinated against COVID-19 (from 6 December 2021).
 - From 29 January 2022, a person is vaccinated against COVID-19 if they have received at least two doses of a COVID-19 vaccine approved by the TGA or all dosages of a recognised COVID-19 vaccine in accordance with dosage schedule recommended by ATAGI for that vaccine, and within 4 weeks of becoming eligible in accordance with ATAGI guidelines, receives a third dose (booster) of a TGA approved COVID-19 vaccine.

Mandatory COVID-19 vaccination requirements for visitors

From 6 December 2021, a person who has not been vaccinated against COVID-19 must not enter or remain on the premises of a RACF unless:

- > the person is aged 12 years and 2 months or less.
- > the person has a medical certificate or letter from a legally qualified medical practitioner certifying that the person:
 - has a medical exemption from receiving a TGA approved COVID-19 vaccine on either a permanent or temporary basis in accordance with the guidelines published from time to time by ATAGI; or
 - has a medical exemption on either a permanent or temporary basis from receiving the preferred vaccine as recommended by ATAGI for the person's age; or
 - has an appointment to be assessed by a medical specialist or has commenced an assessment with a medical specialist to determine whether they have a medical exemption from receiving a COVID-19 vaccine on either a permanent or temporary basis in accordance with the guidelines published from time to time by ATAGI.

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- > The certificate or letter must specify the nature of the exemption and the basis on which it applies, and must be **accompanied by a letter of endorsement from the Chief Public Health Officer or her delegate**.

Requesting an exemption

1. Anyone seeking a medical exemption must obtain a medical certificate from a legally qualified medical practitioner that clearly outlines the reason for the exemption, in line with the ATAGI guideline: www.health.gov.au/resources/publications/atagi-expanded-guidance-on-temporary-medical-exemptions-for-covid-19-vaccines
2. The medical practitioner must complete the [SA Health Chief Public Health Officer Immunisation Exemption Application Form](#).
3. The completed form and medical certificate must be submitted to the Chief Public Health Officer (CPHO) for endorsement: Health.NJNPExemptions@sa.gov.au.
4. The medical exemption is not valid until it has been endorsed by the CPHO or her delegate. If approved, the CPHO will provide a signed exemption letter that can be provided to the RACF.

Permitted visitors

Providing they do not fall into any of the prohibited categories (see above), the following people are permitted:

- > Employees, contractors, students and volunteers of the RACF.
- > People providing care and support to a resident, including family members and friends coming for a social visit. This also includes children.
- > Prospective residents (and their support people).
- > People providing goods or services that are necessary for the effective operation of the RACF, or other professional services (e.g. hairdressers and advocates) at the facility.
- > People providing health, medical or pharmaceutical services to a resident.
- > People providing end of life support to a resident.
- > Legal practitioners who are providing legal advice or services.
- > Emergency management or law enforcement personnel, such as police, ambulance and fire services. In the event of an emergency, emergency service personnel may enter the facility regardless of any of the criteria listed in clause 5 of the Direction.
- > Officials undertaking regulatory functions, such as the officers from the Aged Care Quality and Safety Commission undertaking inspections.
- > People participating in a group activity led or supervised by an employee, contractor, student or volunteer of the facility.

Visits by family and friends

- > RACF where **less than 70% residents** are vaccinated against COVID-19 (at least one dose):
 - o Visits for the purpose of providing care and support to a resident (including social visits by family and friends) are limited to a maximum of **two visitors per day**. This may be two visits of one person each time, or one visit or two people together.
- > RACF where **70% or more of residents** are vaccinated against COVID-19 (at least one dose):

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- There are no limitations on the number of family or friends who are permitted to visit a RACF for the purpose of providing care and support to a resident.

Processes should be put in place to ensure that residents are able to receive visitors safely:

- > All visitors (other than a resident or a child under 12 years) must wear a mask (covering mouth and nose) at all times when in the physical presence of other persons. The requirement for a mask does not apply:
 - when the person is eating or drinking;
 - the wearing of a mask will hinder the provision of the relevant care and/or impact resident safety or wellbeing;
 - by a person who has a relevant medical condition, including problems with their breathing, a serious condition of the face, a disability or a mental health condition; or
 - in circumstances where the ability to see the mouth is essential for communication, such as to enable communication by or with any person who is deaf or hard of hearing.
- > All visitors should be screened upon entry to the RACF to ensure they do not fall within any of the prohibited categories listed above.
- > All visitors must check-in using [COVID SAfe Check-In](#) (QR code) upon entry to capture their relevant contact details. If they are not able to use the COVID Safe Check-In, they must sign in using a paper record.
- > Visitors should adhere to physical distancing of 1.5m wherever possible, particularly in communal areas with other residents, staff and visitors.

Compassionate visits

Aged care providers are asked to take particular care to balance the need to protect residents, staff and others from the risk of transmission of COVID-19, while supporting the rights and wellbeing of residents and their families.

- > Compassionate visits should be given to people in palliative care and those nearing end of life. Under the Direction, 'end of life' is defined as a person for whom death is imminent (likely within 2 weeks). Visits for the purpose of providing end of life support to a resident are permitted and numbers of visitors are not restricted in these circumstances.
- > Visitors identified as entering SA from an international location to provide end of life support to a resident are permitted to visit a RACF within 7 days of entering SA, provided they:
 - Have received written confirmation of a negative COVID-19 test
 - Wear appropriate PPE at all times while on the premises of the RACF
- > Visitors who are providing end of life support to a resident are permitted to visit if they have not yet received their COVID-19 or flu vaccination, however, they must take all reasonable steps to get vaccinated as soon as practicable after their initial visit.

Visitors during COVID-19 outbreaks

Wherever possible, processes should be put in place to ensure that residents are able to receive essential visitors safely during an outbreak.

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For further information, refer to the [Industry Code for Visiting Residential Aged Care Homes during COVID-19](#) and the [Interim Guidance for the management of COVID-19 Outbreak in Residential Aged Care Facilities](#).

Residents

COVID-19 vaccination for residents

The Australia Government Department of Health [Commonwealth New Resident Entrance Protocol](#) flow chart outlines the process for RACF to check whether new residents have been vaccinated for COVID-19.

COVID-19 vaccination for RACF residents is strongly encouraged but not mandatory. The Commonwealth Department of Health have undertaken in-reach vaccination clinics for residents of RACF nationally.

Residents who wish to be vaccinated and have missed the in-reach clinic, should be supported by the RACF to access a COVID-19 vaccine. This could include arranging a GP to administer vaccinations onsite or travel to one of the [vaccination sites](#).

Residents in aged care facilities who received a second dose of a COVID-19 vaccine at least 3 months ago are eligible to receive a booster dose. Eligible residents will be offered a COVID-19 booster dose through Commonwealth in-reach clinics. Residents who are eligible for their booster dose ahead of their facility's booster clinic can request a visiting GP or pharmacist to receive their booster.

For further information about COVID-19 vaccines in RACF, visit the Commonwealth Department of Health [website](#).

The operator of a RACF must, as far as is reasonably practicable, maintain a record of residents in the RACF who have received COVID-19 vaccinations. This must be made immediately available for inspection at the request of an authorised officer.

Can a resident leave the RACF?

Residents are permitted to leave a RACF and then return, regardless of their reason for leaving.

- > Residents returning from hospital, another RACF or the community (home) do not require a routine COVID-19 negative test result.
- > All residents re-entering a RACF should undertake a [screening checklist](#) for COVID-19 upon their return. If they indicate 'yes' to any identified risk factors, appropriate strategies should be put in place to mitigate any risks to other residents.
- > Any resident who has been transferred to an ED from a RACF for assessment of acute respiratory symptoms OR fever where no other cause is found will be tested and cleared of COVID-19 prior to being discharged back to the RACF, if they had not been swabbed in the RACF prior to presentation.

Transfer to hospital

The majority of residents who are diagnosed with COVID-19 should be able to be cared for in their home, and this is the preferred option in most situations. However, where clinically indicated or

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required due to the specific circumstances of the COVID-19 outbreak in the RACF, the resident may be transferred to hospital.

The decision to transfer a COVID-positive resident to hospital will be made in consultation with the resident and their representatives, the RACF provider, CDCB, and the person's GP.

Transfer of returning residents to RACF from hospital

- > To support the safe transfer of returning residents to RACF from metropolitan and country hospital Emergency Departments, a Rapid Antigen Test (RAT) should be performed to facilitate discharge, if the following conditions are met:
 - Senior Decision Maker (ED Consultant, or senior registrar after hours) documents that they have clinically screened the patient for COVID-19 and that COVID-19 is not the most likely diagnosis
 - Clinical impression of a differential diagnosis as or more likely than COVID-19 documented
 - Clinically well enough for discharge.
- > If the above criteria are not met, the resident will need to await the result of a standard PCR prior to discharge.
- > If the RAT is positive, then the ED will undertake a rapid viral PCR. If the rapid viral PCR test result is positive, the ED will proceed as per defined pathways for management of COVID-19 positive patients. If the rapid viral PCR test result is negative, then the resident will be discharged to RACF.
- > Clinical screening by a senior emergency department medical practitioner combined with a negative RAT will place the patient into a low risk category for COVID-19.
- > If above criteria is met and RAT is negative, then the resident will be transferred back to their RACF whilst formal PCR result is pending, with infection control practices such as PPE in place.
- > As per established procedures, asymptomatic residents should be accepted back into the RACF without requiring a negative PCR test. However, RAT can be used if further risk categorisation is required as for symptomatic RACF patients.

Can a RACF still accept new residents?

Yes, RACF can still admit new residents. New residents entering a RACF either from hospital, another RACF or the community (home) are not required to undertake a routine COVID-19 test prior to being admitted. Whilst COVID-19 vaccination is strongly encouraged, it is not a mandatory requirement for new residents.

In the case of an outbreak in a RACF, depending on the extent of the outbreak, new admissions may need to be restricted (to either a particular floor/wing or, if necessary, the full facility) while the outbreak situation is being managed. Where new admissions can be facilitated, the resident and their family must be informed of the outbreak.

Residents who are in hospital for any reason may be readmitted to the RACF during an outbreak. This should be considered on a case-by-case basis, considering both the person's clinical condition and the circumstances within the RACF.

Refer to the [Commonwealth New Resident Entrance Protocol](#) COVID-19 vaccine program for aged care.

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All residents entering a RACF should undertake a [screening checklist](#) for COVID-19 upon admission. If they indicate 'yes' to any identified risk factors, appropriate strategies should be put in place to mitigate any risks to other residents.

What steps need to be taken if a resident is awaiting COVID-19 test results?

A resident who has undertaken a COVID-19 test is required to remain isolated in accordance with the directions of an authorised officer, until the result of the test is known.

A person providing care to a resident who is awaiting a COVID-19 test result is required to wear appropriate PPE, in accordance with the Australian Guidelines, when providing care to that resident until the result of the test is known.

Declared outbreaks in RACF: Self-quarantine period

A COVID-19 outbreak is declared in a RACF when:

- > a resident of a RACF has been diagnosed with COVID-19 and has been onsite at the RACF at any time during their infectious period; or
- > two or more staff of the RACF are diagnosed with COVID-19 at the same time, with at least one having exposed/worked at the RACF during their infectious period.

The infectious period is generally considered to commence 48 hours prior to symptom onset or test date if asymptomatic, and to last for 10 days.

In the event of a COVID-19 outbreak, a prescribed authorised officer may declare a prescribed self-quarantine period in relation to the RACF, ending at the time declared by the prescribed authorised officer.

During a prescribed self-quarantine period, residents are prohibited from leaving the RACF, except in the following circumstances:

- > for urgent medical or dental treatment; or
- > for transfer to hospital; or
- > for transfer to another RACF determined to be suitable by an authorised officer; or
- > in order to self-quarantine at another location, including a family home, approved by an authorised officer.

Note: *nothing in the Direction authorises the provision of treatment of a resident that is contrary to a relevant Advance Care Directive.*

If a resident is approved to leave the RACF to self-quarantine at a family home or other suitable location during a prescribed self-quarantine period, others residing at that location who are deemed close contacts will also be required to quarantine.

Anyone working at a RACF during an outbreak is prohibited from other employment for the duration of the prescribed self-quarantine period.

COVID-19

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For more information

Office for Ageing Well
Department for Health and Wellbeing
SA Health, Government of South Australia
www.sahealth.sa.gov.au/COVID2019

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