



# Safe, high quality aged care in Australia through better infection prevention and control.

OVERVIEW OF THE REGULATION OF INFECTION PREVENTION AND CONTROL (IPC) IN THE RESIDENTIAL AGED CARE SECTOR

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## About the Author

**Cath Murphy PhD** is a registered nurse whose career over several decades has covered senior infection prevention positions within the clinical, government, non-government and professional associations in her home country Australia and internationally.

She is currently a member of two Standards Australia committees. Cath is an Honorary Adjunct Assoc. Professor at Bond University on the Gold Coast, Australia. For more than 20 years Cath has provided independent consulting services to a range of clinical, public policy, professional associations and commercial clients throughout the world.

Career highlights include working in the USA at the CDC, consulting for the World Health Organization and serving as the elected APIC President in 2010.

Cath's passion for improving patient safety through better and smarter infection control and prevention is unrelenting. Cath's ideas are innovative and practical. She looks forward to learning from and giving reliable, high-quality service to her professional peers and colleagues particularly those involved in infection control and prevention and perioperative care and nursing.



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# SAFE, HIGH QUALITY AGED CARE IN AUSTRALIA THROUGH BETTER INFECTION PREVENTION AND CONTROL.

The purpose of this article is to provide a high-level overview of the regulation of infection prevention and control (IPC) in the residential aged care sector. It includes recent performance and reforms. It also provides simple, practical examples and links to resources that for aged care providers and staff to improve their organisational and personal IPC practices. Although antimicrobial resistance is a concern across all Australian care settings it is purposely excluded from this article.

Australian aged care includes subsidised care provided to aged consumers at home and care provided to the elderly in a residential care facility. Aged care providers are funded by the Australian Government under the Aged Care Act (1997). The Act also details their obligations and responsibilities. [The Aged Care Quality and Safety Commission](#) (the Commission) regulates, sets standards for and monitors aged care service. The Commission's [Aged Care Quality Standards](#)<sup>1</sup> outline the expected standards of care.

One of the Commission's essential functions is to protect and enhance the health, safety, well-being and quality of life of aged care recipients.<sup>2</sup> Regardless recent research<sup>3,4</sup> and the results of the [Royal Commission into Aged Care Quality and Safety](#)<sup>5,6</sup> (the Royal Commission) including their 2020 [Aged care and COVID-19: a special report](#)<sup>7</sup> demonstrated the overwhelming lack of well structured, organised, managed and effective infection prevention and control (IPC) programs resulting in substandard care, deplorable conditions, suffering, increased risk and poor outcomes for aged care residents.

In 2020 the Commission initiated a series of [infection control monitoring visits](#) or spot-checks of residential aged care settings. These visits highlighted the following concerns among staff and services:

- the incorrect wearing of masks and frequent touching of either the face or the mask
- lack of cleaning of shared equipment between patient uses
- the unnecessary wearing of PPE
- lack of physical distance between staff
- insufficient preparation of and training in outbreak management plans.<sup>8</sup>





Residential aged care settings are perhaps one of the most challenging settings to reduce the spread of infection between staff, residents and visitors. There are well-documented cases of spread among and between each of those groups. The complexity of prevention is due in part to the vulnerability of the residents due to their age and comorbidities, the emphasis on non-restrictive care environments and routine promotion of intermingling between residents, staff and visitors and as reported by the Royal Commission. The absence of staff with infection control specialist knowledge, basic IPC training and insufficient supply of essential protective items, including PPE, compound the problem.

The Royal Commission noted that “Infection control should be a central feature of care for aged care providers.”<sup>5</sup> Its report specifically highlights concerns about staff training in IPC and hygiene, restricted access and insufficient supplies of critical personal protective equipment (PPE) and equipment and supplies required for environmental, equipment and surface cleaning.<sup>5</sup> The consequences of IPC inadequacy in residential care have long been recognised. They manifest in periodic and seasonal outbreaks of scabies, gastroenteritis, influenza and multi drug resistant organisms (MDROs) such as methicillin-resistant *Staphylococcus aureus* and Vancomycin-resistant enterococci (VRE). However, the substantial outbreaks of COVID in residential aged care, the suffering of isolated individuals and families, and the concurrent absence of good, quality PPE horrified Australians and compelled urgent systemic and legislative reform. [Commonwealth government data](#) show that from late January 2020 to date at least 2060 residents in aged care have contracted COVID-19, with more than one-third of them dying from it.<sup>9</sup>



*Infection control should be a central feature of care for aged care providers.*

# IPC Reforms

Recommendations of the Royal Commission<sup>5,7,10</sup> compelled:

- all residential aged care homes to have one or more trained infection control officers ([IPC lead](#)) as a condition of accreditation. The training requirements for these officers should be set by the aged care advisory body
- the Australian government “to arrange for the deployment of accredited infection prevention and control experts into residential aged care homes.”<sup>7</sup>
- the Commission urgently reviews and amend the Aged Care Quality Standards<sup>1</sup> by requiring aged care providers to deliver best practice infection control.

The national government has now adopted each of these recommendations. To gain accreditation or re-accreditation every residential aged care provider must now demonstrate that they have an [IPC lead whose role](#) includes but is not limited to:

- assisting with development and implementation of outbreak management plans
- providing assistance on day one of an outbreak and
- providing training to staff on IPC and use of PPE.<sup>10</sup>

Further information about the IPC lead and their role are available from the Commission’s website.<sup>11</sup>

In late June 2021 the Commission updated the [Guidance and Resources for its Quality Standards](#)<sup>12</sup> including those relating to IPC.<sup>1,11</sup> Residential aged care providers and staff are encouraged to familiarise themselves with the following IPC-related standards:

- Standard 3, specifically Requirement (3)(g) regarding minimisation of infection control risks
- Standard 4, specifically Requirement (4)(3)(g) regarding clean equipment
- Standard 5, specifically Requirement (5)(3)(b) and (c) regarding cleanliness of the environment, furniture, fittings and equipment
- Standard 7, specifically Requirement (3)(c) regarding the workforce competency and holding relevant qualifications and knowledge
- Standard 8, specifically Requirement (3)(c) regarding effective workforce governance systems.



# Resources and practical examples of good IPC for residential aged care

A few key elements underpin good, safe IPC for the prevention of infection transmission in healthcare settings. **Table 1** below outlines these elements.

A comprehensive, detailed overview of basic and specific residential aged care IPC strategies and measures is available in the Australian [Government's 2021 Guidance on infection prevention](#) and control for residential care facilities in the context of COVID-19.<sup>13</sup> Understanding the elements it details, learning more about them and applying them routinely and consistently in Australian aged care residential settings guarantee safe, high quality aged care in Australia through better infection prevention and control.

**Table 1**

Strategy	Evidence that it is in place	Quality Standard it relates to	More information & other resources
<b>Organisational support for IPC</b>	<ul style="list-style-type: none"> <li>An ICP lead is employed and supported to perform in the role as detailed by the Commission</li> </ul>	Standard 3: (3) (g)(i) Standard 7: (3) (c) Standard 8: (3) (c)	<a href="#">Aged Care Quality and Safety Commission. Infection Prevention and Control Leads: Updates for providers</a>  <a href="#">Aged Care Quality and Safety Commission. Aged care quality standards.</a>
<b>Standard and transmission-based precautions</b>	<ul style="list-style-type: none"> <li>Signage is in place distinguishing between standard and transmission-based precautions</li> <li>Staff routinely and correctly undertake ICP risk assessments prior to delivering care</li> <li>Proper practice is observed and routinely monitored and reported</li> <li>Policies exist regarding IPC</li> <li>Staff receive IPC education at orientation and regularly thereafter</li> <li>Management has protocols or policies for reporting and responding to non-compliance</li> <li>Management and senior staff champion and role model IPC</li> <li>Transmission-based precautions are applied to patients suspected or confirmed to be infected with agents transmitted by the contact, droplet or airborne routes.</li> </ul>	Standard 3: (3) (g)(i)  Standard 8: (3) (c)	<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>  <a href="#">Guidance on the use of personal protective equipment (PPE) for health care workers in the context of COVID-19.</a>  <a href="#">PPE Stockpile Calculator   Halyard</a>
<b>Hand hygiene (HH)</b>	<ul style="list-style-type: none"> <li>Posters,</li> <li>Sufficient supply of alcohol-based handrub (ABHR)</li> <li>Staff performing HH as per the 5 moments of HH</li> <li>Precedes and follows all PPE use</li> </ul>	Standard 3: (3) (g)(i)	<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>  <a href="#">National Hand Hygiene Initiative</a>
<b>Cough etiquette</b>	<ul style="list-style-type: none"> <li>Staff and residents cover sneezes and coughs to prevent and reduce dispersal of respiratory secretions into the air</li> <li>Tissues are disposed of in the closest receptacle and followed by HH</li> </ul>	Standard 3: (3) (g)(i)	<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>
<b>Vaccination</b>	<ul style="list-style-type: none"> <li>Residents are vaccinated against influenza and COVID-19</li> <li>Staff are vaccinated against COVID-19 &amp; hepatitis B</li> </ul>		
<b>Separation</b>	The organisation: <ul style="list-style-type: none"> <li>has policies and plans for segregation of residents with a transmissible infection</li> <li>ensures staff are familiar with and can access required policies and plans</li> <li>has adequate signage and supplies for resident segregation</li> </ul>		<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>  <a href="#">ICEG guidance on PPE for health care workers</a>

Table 1 Continued

Strategy	Evidence that it is in place	Quality Standard it relates to	More information & other resources
<b>PPE</b>	<p>Sufficient supplies of the following are always available and accessible:</p> <ul style="list-style-type: none"> <li>• masks, gloves, gowns and eye protection</li> <li>• signage</li> <li>• the correct order for donning, doffing and disposal of all PPE is followed</li> </ul>	Standard 3: (3) (g)(i)	<p><a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a></p> <p><a href="#">ICEG guidance on PPE for health care workers in the context of COVID</a></p>
<b>PPE - Masks (surgical) Levels 1-3</b>	<ul style="list-style-type: none"> <li>• Level 1 mask is worn if there is a low risk of exposure to blood or body fluid (BBF)</li> <li>• Level 2 or 3 worn if there is risk of BBF exposure</li> </ul>	Standard 3: (3) (g)(i)	<p><a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a></p> <p><a href="#">ICEG guidance on PPE for health care workers in the context of COVID</a></p>
<b>PPE - (Particulate filter respirators P2/N95)</b>	<ul style="list-style-type: none"> <li>• P2/N95 respirator is worn if there is significant COVID risk</li> </ul> <p>All staff:</p> <ul style="list-style-type: none"> <li>• are trained in use</li> <li>• fit tested before using a P2/N95 for the first time</li> <li>• fit check each time a P2/N95 is used</li> </ul>	Standard 3: (3) (g)(i)	<p><a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a></p> <p><a href="#">ICEG guidance on PPE for health care workers in the context of COVID</a></p>
<b>PPE - Gloves</b>	<p>For direct contact with patients:</p> <ul style="list-style-type: none"> <li>• Vinyl gloves are not recommended for the clinical care of patients</li> <li>• Powder-free latex or nitrile gloves are accepted as superior in clinical care and are less likely to be breached compared with vinyl gloves.</li> </ul>	Standard 3: (3) (g)(i)	<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>
<b>PPE - Gowns</b>	<ul style="list-style-type: none"> <li>• A launderable cloth gown or apron is adequate when direct physical contact is minimal and/or the risk of blood or body fluid splash is low</li> <li>• If risk is high an impervious gown should be used</li> </ul>	Standard 3: (3) (g)(i)	<p><a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a></p> <p><a href="#">ICEG guidance on PPE for health care workers in the context of COVID</a></p>
<b>PPE - Eye protection</b>	<ul style="list-style-type: none"> <li>• Protective eyewear or face shields are worn if there is the potential for generation of splashes or sprays of blood and body substances into the face and eyes</li> <li>• Single-use or reusable face shields may be used in addition to surgical masks, as an alternative to protective eyewear.</li> </ul>	Standard 3: (3) (g)(i)	<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>
<b>Cleaning and Disinfection</b>	<ul style="list-style-type: none"> <li>• Shared equipment is cleaned between use by different patients</li> <li>• Shared furniture and environments are cleaned regularly according to the risk of contamination, mode of transmission and risk to others should be used to determine whether disinfectants are required.</li> <li>• Spills of BBF are cleaned immediately according to an approved local policy including PPE</li> </ul>	<p>Standard 3: (3) (g)(i)</p> <p>Standard 4: (4) (3)(g)</p> <p>Standard 5: (5)(3)(b) and (c)</p>	<a href="#">Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021)</a>
<b>Outbreak management plan</b>	<ul style="list-style-type: none"> <li>• An Outbreak Management Plan must be in place and it must conform with the Commissions' practical guidance on same</li> </ul>		<p><a href="#">Aged Care Quality and Safety Commission. Outbreak management planning in aged care</a></p> <p><a href="#">Department of Health. First 24 hours – managing COVID-19 in a residential aged care facility.</a></p>

Table 1: Infection prevention and control elements to underpin safe, high quality aged care in Australia.

## References

1. Aged Care Quality and Safety Commission. Aged care quality standards,. Canberra: Aged Care Quality and Safety Commission; 2021, [cited 2021 July 25]. Available from: <https://www.agedcarequality.gov.au/providers/standards>
2. Aged Care Quality and Safety Commission. Aged Care Quality and Safety Commission Glossary. Canberra: Aged Care Quality and Safety Commission; 2021, [cited 2021 July 25]. Available from: <https://www.agedcarequality.gov.au/resources/aged-care-quality-and-safety-commission-glossary>
3. Shaban RZ, Sotomayor-Castillo C, Macbeth D, Russo PL, Mitchell BG. Scope of practice and educational needs of infection prevention and control professionals in Australian residential aged care facilities. *Infection, Disease & Health* 2020;25(4):286-93.
4. Mitchell BG, Shaban RZ, MacBeth D, Russo P. Organisation and governance of infection prevention and control in Australian residential aged care facilities: A national survey. *Infection, Disease & Health* 2019;24(4):187-93.
5. Royal Commission into Aged Care Quality and Safety. Final Report: Care, Dignity and Respect-Volume 1: Summary and recommendations. Canberra: Commonwealth of Australia; 2021, [cited 2021 July 23]. Available from: <https://agedcare.royalcommission.gov.au/publications/final-report-volume-1>
6. Royal Commission into Aged Care Quality and Safety. Final Report: Care, Dignity and Respect-Volume 2: The current system Canberra: Commonwealth of Australia; 2021, [cited 2021 July 23]. Available from: <https://agedcare.royalcommission.gov.au/publications/final-report-volume-2>
7. Royal Commission into Aged Care Quality and Safety. Aged care and COVID-19: a special report. Canberra: Commonwealth of Australia; 2020, [cited 2021 July 23]. Available from: <https://agedcare.royalcommission.gov.au/publications/aged-care-and-covid-19-special-report>
8. Aged Care Quality and Safety Commission. Infection control spot checks,. Canberra: Aged Care Quality and Safety Commission; 2021, [cited 2021 July 25]. Available from: <https://www.agedcarequality.gov.au/providers/covid-19-provider-resources/infection-control-spot-checks#about%20infection%20control%20monitoring%20visits>
9. Department of Health. Coronavirus (COVID-19) case numbers and statistics. Canberra: Australian Government; 2021, [cited 2021 July 25]. Available from: <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-case-numbers-and-statistics#cases-in-aged-care-services>
10. Royal Commission into Aged Care Quality and Safety. Final Report - Executive summary. Canberra: Commonwealth of Australia; 2021, [cited 2021 July 23]. Available from: <https://agedcare.royalcommission.gov.au/sites/default/files/2021-03/final-report-executive-summary.pdf>
11. Aged Care Quality and Safety Commission. Infection Prevention and Control Leads: Updates for providers,. Canberra: Aged Care Quality and Safety Commission; 2021, [cited 2021 July 25]. Available from: <https://www.agedcarequality.gov.au/resources/infection-prevention-and-control-leads-updates-providers>
12. Aged Care Quality and Safety Commission. Guidance and resources for providers to support the Aged Care Quality Standards,. Canberra: Aged Care Quality and Safety Commission; 2021, [cited 2021 July 25]. Available from: <https://www.agedcarequality.gov.au/resources/guidance-and-resources-providers-support-aged-care-quality-standards>
13. Department of Health. Coronavirus (COVID-19) guidelines for infection prevention and control in residential care facilities,. Canberra: Commonwealth Government; 2021, [updated 21 June 2021,; cited 2021 July 25]. Available from: <https://www.health.gov.au/resources/publications/coronavirus-covid-19-guidelines-for-infection-prevention-and-control-in-residential-care-facilities>

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