



Supporting information for the management of Acute Respiratory Infection (including COVID-19 and Influenza) in Residential Aged Care Facilities

Version 4.0; 14 October 2022

Summary of Key Updates

- **Public Health Operations (PHOps) will cease support to RACFs from 17:00 on Friday 21 October 2022. After this time, RACFs should liaise with their local Public Health Unit for advice and support in the management of acute respiratory infection (ARI) outbreaks.**
- **There are no longer mandatory requirements for isolation of COVID-19 cases or quarantine of close contacts in WA. However, it is recommended that public health guidelines be followed to minimize the risk of transmission in high risk settings.**
- **These WA-specific “supporting” guidelines for RACFs have been significantly reduced in scope and RACFs should now refer to the CDNA National Guidelines for the Prevention, Control and Public Health Management of Outbreaks of Acute Respiratory Infection (including COVID-19 and Influenza) in Residential Care Facilities for guidance.**
- **RESIDENT COVID-19 CASES should isolate for 7 days following their positive test, or until they have had substantial resolution of their acute respiratory symptoms and no fever for 24 hours, whichever is longer.**
- **STAFF AND VISITOR COVID-19 CASES should not attend high risk settings, including residential aged care facilities and hospitals, until day 8, if they have had no symptoms for at least 24 hours.**
- **STAFF AND VISITOR CLOSE CONTACTS should not attend residential aged care facilities until day 8 after their last exposure, excepting those who are permitted by the facility to attend, with additional precautions.**

This document provides updated information on the management of acute respiratory infections (ARI), including COVID-19 and influenza, in residential aged care facilities (RACFs) in WA. The scope of this version of the document has been reduced considerably in the context of:

- The revocation on 14 October 2022 of the WA COVID Transition (Testing and Isolation Directions) (No18), removing mandatory isolation of COVID-19 cases and quarantine of close contacts.
- Planned revocation of the WA State of Emergency arrangements for the response to the COVID-19 pandemic (date to be determined).

- The decommissioning of Public Health Operations for COVID-19 (PHOps), which will cease providing support to RACFs from **17:00 on Friday 21st October 2022**. After this time, RACFs should liaise with their local Public Health Unit (PHU) for advice and support in management of ARI outbreaks, including COVID-19 and influenza.
- Contact details for Public Health Units are listed at [contact details for local population/public health units](#) on healthywa.wa.gov.au.

RACFs should follow the [National Guidelines for the Prevention, Control and Public Health Management of Outbreaks of Acute Respiratory Infection \(including COVID-19 and Influenza\) in Residential Care Facilities](#) from the Australian Government Department of Health and Aged Care. Please note this supporting information has been updated to reflect the National guidelines and the end of the mandatory requirement for isolation of COVID-19 cases and quarantine of close contacts in WA.

Other relevant supporting documents include:

- [Infection Prevention and Control Guidelines for Western Australian Residential Care Facilities](#)
- [Advice on how to access COVID-19 critical supplies](#)
- [Coronavirus \(COVID-19\) guidelines for infection prevention and control in residential care facilities](#)

WA Specific Information

1. Testing

- COVID-19 PCR testing may still be recommended by WA Health PHU staff or by a GP for multiple resident contacts across a whole facility or in an affected wing or zone of a facility:
 - This can still be requested in a RACF with an active outbreak.
 - Contact the Clinipath COVID Hotline on 9371 4325 or email psdmanagement@clinipath.net
 - Consider other arrangements in country areas where Clinipath does not provide a service.
 - This should be requested by a medical practitioner linked to the facility using their Medicare Provider Number.
 - In exceptional circumstances, a PHU (PHOps until 21st October 2022) may assist with providing approval for this testing. Discuss with your local PHU during office hours.
- Testing for influenza and other respiratory viruses must be requested by a resident's doctor, either through CliniPath or the usual pathology provider for the facility.

2. Notification and Reporting of Cases and Outbreaks

- Notify positive cases in compliance with WA Health and Commonwealth requirements.
- Discuss as required with PHOps (until 21st October 2022) and after that date with your local PHU when one or more residents have tested positive for COVID-19 or influenza.

- Notify the Commonwealth via the [My Aged Care provider portal](#) of positive COVID-19 cases.
- Notify your local PHU (PHOps until 21st October 2022) of an **outbreak** when two or more residents test positive to COVID-19, or two or more residents test positive for influenza, within a 72-hour period.
- WACHS multi-purpose service (MPS) sites and WACHS-managed RACFs should follow the WACHS notification and reporting process.
- Cases of COVID-19 or influenza in staff members **are not a trigger** for an outbreak response, but should be included in case reporting and line lists once an outbreak has been declared.
- If PCR test results are delayed, notify your PHU (PHOps until 21st October 2022) when two or more residents have ARI symptoms within a 72-hour period.
- Notify other care providers, facilities and hospitals where residents have had a potential exposure to COVID-19, influenza or unidentified ARI cases, or during any outbreak at the facility, and have subsequently been transferred or require immediate transfer for care.
- Record and report details of each resident and staff case in the Residential care facility ARI Outbreak Report (Line List) and email to your local PHU (PHOps until 21st October 2022), Monday-Friday. Please note there is no requirement to email line lists to PHUs over the weekend. Refer to the “Instruction” tab on the line list for more information.
- Facilities should continue to forward line lists (Monday-Friday) to their local PHU (PHOps until 21st October) by email for the first 5 days of an outbreak, and following this, if there are any new cases, hospitalisations, deaths, or when the outbreak can be declared over.
- **Positive RATs for both residents and staff should continue to be registered via the [RAT portal](#).** If a facility does not have capacity to register positive COVID-19 RATs for **residents** during COVID-19 **outbreaks**, PHUs (PHOps until 21st October 2022) may be able to register such cases if they are included on the line list and the facility explicitly requests PHU assistance in each instance.
- Although facilities are **not** required to send through copies of COVID-19 PCR results to PHUs, please send through copies of staff and resident influenza/respiratory panel lab reports once received (even if negative).
- Promptly report sentinel events such as deaths, or attack rates >50% to your PHU (PHOps until 21st October 2022).

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