

PARLIAMENTARY INQUIRY QUESTION ON NOTICE

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

14 August 2020

PDR Number: IQ20-000483

Number of nurses and level of clinical care provided at aged care centres

Spoken

Hansard Page number: 8

Senator: Rachel Siewert

Question:

Senator SIEWERT: I wanted to go to the aged-care issue. I understand we're having another hearing, so I'll keep this relatively short. Following my previous questions and then Senator Gallagher's questions this morning to be taken on notice, are you able in that disclosure of information to also give us a breakdown of the staff ratios. In particular, I'm interested in the number of nurses that are on at each of these centres and the make-up of their workforce. Are you able to provide that level of information?

Prof. Murphy: I would have to take that on notice. I think that might be very hard to determine, because we have been actually adding surge workforce across the sector. We have provided extra funding for the sector to increase its workforce. When they have had outbreaks, we have brought in significant workforce, so to actually go back historically might be difficult, but we can take that on notice and see what we can provide.

Senator SIEWERT: They surely must have records. I'm particularly interested to look at the make-up of their workforce, particularly how many nurses they had and what level of clinical care was being provided or able to be provided in these centres before the outbreak.

Prof. Murphy: We will take that on notice and see what we can provide.

Answer:

It is expected that the sector holds this information. The Department of Health does not gather or hold workforce data on individual residential aged care facilities or aged care in-home providers, however following the retention bonus claims the Department will be able to provide some data on this into the future.

PARLIAMENTARY INQUIRY QUESTION ON NOTICE

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

14 August 2020

PDR Number: IQ20-000484

AHPPC public statement on the national plan for visitor control in aged care centres

Spoken

Hansard Page number: 14

Senator: Kristina Keneally

Question:

Senator KENEALLY: Thank you. Back in April, Scott Morrison, the Prime Minister, warned aged-care homes to end strict coronavirus lockdowns or face new rules. Was the Prime Minister's warning in April part of the government's plan?

Prof. Murphy: The government's plan, or the national plan that AHPPC endorsed, was that there should be very strict visitor controls in circumstances where there was community transmission. That was national health advice, supported by AHPPC, and that was about seriously limiting ingress into facilities so that we reduced—

Senator KENEALLY: But the Prime Minister actually warned aged care to get rid of those rules. I'm trying to understand: did you advise him to do that? Did he do it off his own—

Prof. Murphy: Can I finish my answer please, Senator? I'm coming to the point you made. Some facilities went much further than the recommended health advice and completely excluded all families and relatives from visiting, even in circumstances where there was no community transmission. The Prime Minister, supported by AHPPC, suggested that those facilities needed to relax those restrictions that went further than the health advice. Now, with the situation in Victoria it is completely reasonable to stop all visitors. But when there is no community transmission it is not reasonable to stop people coming in and seeing their loved ones. So the Prime Minister was merely reflecting the health advice at the time, which was that some facilities had gone much further than the advice. That advice changed—

Senator KENEALLY: Can you table that advice for our committee?

Prof. Murphy: The AHPPC advice is a public statement. It's on the website, but we can certainly provide it.

Answer:

The Australian Health Protection Principle Committee (AHPPC) released initial advice on restrictions on entry into residential aged care facilities on 22 April 2020. This is available on the Department of Health's (Department) website at:

<https://www.health.gov.au/news/australian-health-protection-principal-committee-ahppc-advice-on-residential-aged-care-facilities>.

The AHPPC published updated advice on 19 June 2020. This is available on the Department's website at: <https://www.health.gov.au/news/australian-health-protection-principal-committee-ahppc-update-to-residential-aged-care-facilities-about-minimising-the-impact-of-covid-19>.

PARLIAMENTARY INQUIRY QUESTION ON NOTICE

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

14 August 2020

PDR Number: IQ20-000485

Establishment of the Victorian Aged Care Response Centre

Spoken

Hansard Page number: 18

Senator: Katy Gallagher

Question:

Prof. Kelly: Specifically on aged care and preparedness activities—for example, looking even more closely at that preparedness around PPE and infection control, and having very detailed information at the local public health unit level about aged-care facilities in their immediate vicinity. The thing I think you're referring to, though, and which I referred to in my previous comments, is specifically related to this new entity that has only been running for a few weeks now—the Victorian Aged Care Response Centre. So this is taking an emergency response approach—quite appropriately, I believe—to this emerging issue in Victoria, with the large numbers of factors.

CHAIR: When was that established again? Was that towards the end of July?

Prof. Kelly: Probably about three weeks ago, but I will take that on notice.

CHAIR: It was quite late in the outbreak.

Prof. Murphy: It was the middle of July.

Prof. Kelly: Middle of July, yes—so maybe it has been going for a month. We have found that extremely valuable, and all of the premiers and chief ministers were really interested in having a very detailed how-to guide about that: who should be in there; what should they do to prepare it; where should it occur; what sorts of things should it be doing? We have learnt, for example, about the very important component of epidemiology and public health expertise within there, as well as workforce issues, communications issues and so forth.

Answer:

The Victorian Aged Care Response Centre was established on 25 July 2020.

PARLIAMENTARY INQUIRY QUESTION ON NOTICE

Department of Health

Senate Select Committee on COVID-19

Australian Government's Response to the COVID-19 Pandemic

14 August 2020

PDR Number: IQ20-000489

Number of people involved in contact tracing

Spoken

Hansard Page number: 23

Senator: Richard Di Natale

Question:

Senator DI NATALE: Having spoken to people who have been contacts of cases, the stories they've recounted are that they received information from the department sometimes a week—and, on one occasion, over a week—after that contact occurred and well after action was taken by those individuals because they had become aware of it through other means, many of them being hospital workers. That obviously is hugely problematic. Given that we had that number of cases, what contact-tracing support did the Commonwealth provide Victoria?

Prof. Kelly: We've been supporting them all along. We've had multiple discussions. Personally, I've had many discussions with Professor Sutton and others within the centre. We have arranged for specific ADF resources to go into the public health unit within DHHS in Melbourne and to assist specifically with increasing the timeliness and the extent of contact-tracing exercises at that level. At the National Incident Room here in Canberra, I think yesterday or the day before, we reached our 1,000th contact-tracing event. Queensland—early on—New South Wales and other states have also assisted remotely in this exercise. From discussions with Professor Sutton and others, I know that Victoria have increased their resources enormously. The last figure I heard was well over 2,000 people doing contact tracing in Victoria. They've now moved to a more regional approach as well. I know there are small cells of contact tracers in different regions of Melbourne but also in Geelong and other regional and rural areas. So they've ramped up extensively, as they did in the first wave as well. But in the days when people were still moving around Melbourne and having up to 10 contacts a day, sometimes more than that—it can become extremely difficult when you're getting several hundred cases a day. So it's really volume, as you mentioned, that's been the crucial component, and we've been there to support from the beginning.

CHAIR: Senator Di Natale, you've got just a couple of minutes left.

Senator DI NATALE: Yes. Could you perhaps take on notice specifically the ADF resources

that were deployed, in terms of people—the resources associated with the Incident Room? I'd like to know what sort of numbers we're talking about in terms of assistance and what sort of assistance was provided by the states—again, specifically around the numbers of people involved in assisting with contact tracing?

Prof. Kelly: I'll take that on notice, but, as I say, it wasn't only ADF resources. Professor Murphy arranged for our very best people, around Australia, to be flown into Melbourne for a period, including our Chief Nurse and Midwifery Officer.

Senator DI NATALE: Understood. I'm just keen to get a sense of the numbers of people that were involved, because obviously this will help us, into the future, if we face a similar situation. I think it's important to get a sense of what sort of scale of response is required.

Answer:

The Australian Government has responded to the COVID-19 outbreak in Victoria with a range of personnel support, including:

ADF resources

As at 15:15hrs 18 August 2020, ADF has deployed 1770 personnel to Victoria as part of Operation COVID -19 Assist. Human resources include:

- 545 ADF personnel are providing support to the Department of Health and Human Services contact tracing and community engagement efforts.
- 240 personnel are involved in medical testing initiatives.
- 152 personnel are supporting Victoria Police checkpoints.
- 87 personnel are assisting in other logistics roles, including the Police Assistance Line call centre in Ballarat.
- 134 personnel are providing support to the Victorian Aged Care Response Centre. (Australian Government Department of Defence, Latest updates – Operation COVID-19 Assist <https://news.defence.gov.au/national/latest-updates-operation-covid-19-assist-tue-08182020-1515> - Accessed 18 August 2020)

Victorian Aged Care Response Centre (VACRC)

The Australian and Victorian governments established the VACRC in Melbourne to support residential aged care facilities experiencing COVID-19 outbreaks in Victoria.

Since 25 July 2020, the VACRC has brought together a workforce of more than 50 staff and experts from Australian and Victorian Government Departments and a number of hospitals and health services.

Australian Medical Assistance Team (AUSMAT)

AUSMAT is deployed in Victoria to support and act under the direction of the VACRC to rapidly respond to high risk and at risk residential aged care facilities. AUSMAT is providing strong leadership in nursing, clinical care, infection prevention and control, use of personal protective equipment (PPE) and waste management for impacted aged care facilities.

AUSMAT teams – made up of some 37 members on rotation over the course of the mission since late July – have attended some 72 aged care facilities and conducted over 160 visits

(including revisits), providing leadership and reassurance for returning staff to have the confidence to continue to implement strong infection prevention and control systems and procedures.

National Incident Room contact tracing resources

On 10 July 2020, the National Incident Room (NIR) stood up a Contact Tracing Team to assist the Victorian DHHS with COVID-19 contact tracing in Victoria.

The NIR's Contact Tracing Team is a scalable surge workforce of 30 trained staff which supports Victorian contact tracing efforts on a 7 day basis. A register of an additional 90 volunteer staff from across the department are on standby should greater surge capacity be required.

The team supports DHHS by conducting confirmed case and close contact interviews, providing public health support to cases and contacts and statistical reporting as required.

As at 30 August 2020, the Commonwealth Contact Tracing Team had been allocated responsibility for 1399 initial calls or case interviews by Victoria.

Other assistance

The Chief Nurse and Midwifery Officer has also provided assistance in person to both the Department of Health and Human Services (DHHS) and the VARC in Victoria.

The Australian Government has brought together medical staff from across the country to assist with COVID-19 testing in Victoria.

The Commonwealth is also facilitating other jurisdictions to provide medical staff to assist in Victorian hospitals across both regional and metropolitan health services.