

**Senate Select Committee on COVID-19: 4 August 2020 Public Hearing**  
**Opening statement by Ms Janet Anderson PSM**

Good morning

When I last appeared before the Committee in May 2020, there had been three significant COVID-19 outbreaks in residential aged care services - all in NSW - with 57 residents and 42 staff infected, and very sadly, 27 deaths.

Now – in August - a state of disaster has been declared in Victoria with worrying levels of community transmission being detected in the greater Melbourne area and Mitchell Shire, and further afield. Aged care services have been significantly impacted by this resurgence of the virus in local communities in Victoria, and there are now over 100 aged care services with active cases of COVID-19, with over 1,200 aged care consumers and staff having contracted the virus. Tragically a further 108 individuals receiving aged care have died and that number may well grow before we get to “the other side” of the pandemic.

The spread of the virus through local communities and into some residential aged care services in Victoria underscores two points:

First, for as long as there is an elevated level of community transmission of COVID-19, there will be a heightened risk that the virus will continue to enter residential aged care services, and;

Second, everyone working in the aged care sector must remain on high alert, and be ready to act promptly and decisively.

The Aged Care Quality and Safety Commission has used and continues to use the full range of our regulatory powers to ensure that providers are doing everything possible to mitigate the risks that COVID-19 presents to their aged care consumers – working both to prevent an outbreak, and to respond effectively in the event of an outbreak.

Along with the Department, the Australian Health Protection Principal Committee and the Communicable Diseases Network Australia, we have published and distributed a range of clear, targeted advice, guidance and learning materials for the aged care sector, commencing in March and becoming increasingly specific over time. My executive staff and I have also hosted and participated in multiple webinars with service providers.

The Commission has undertaken assessment contacts by telephone with every aged care service across Australia and required each approved provider of residential care to complete and submit two online surveys (separated by several months) in which they have assessed and rated their own readiness. Services are using those survey questions and the accompanying guidance material as their checklist for internal planning.

Drawing on providers’ responses and other regulatory intelligence, we have identified providers and services at heightened risk, and undertaken site visits to monitor and assess their infection prevention and control arrangements, and outbreak preparedness. We have recently deployed Infection Control Monitoring

Teams to Melbourne specifically to make unannounced checks of residential aged care homes at high risk because of their location in a so-called “hot zone”.

We also continue to respond to all complaints received about aged care services and are supporting home care consumers through outreach calls to discuss their current experiences of aged care.

Where services have not met the expected standards for quality and safety, we take proportionate enforcement action. Since May 2020, we have issued ten Notices to Agree relating to approved provider responses to COVID-19 outbreaks to ensure that necessary actions are taken to manage risks and provide safe, quality care to residents.

In relation to lessons learned, the Commission, along with other agencies involved in or supporting the aged care sector, has sought to extract every lesson possible from the outbreaks in NSW and now in Victoria, and we are continuing to apply this learning in all aspects of our work. We are also engaging with regulators in other countries to share experiences and take on board their lessons.

Some of the key lessons distilled to date from our shared experiences are that effective action to control, manage and limit an outbreak in a residential aged care service is underpinned by:

1. solid planning and preparation by a provider to minimise the risks and impact of an outbreak at their service;
2. strong leadership and organisational governance by a provider, including capable onsite management of the service and clearly defined and well-rehearsed roles and responsibilities, systems and processes, and;
3. effective co-ordination among the multiple organisations, services and individuals with a role in the outbreak response.

Since its establishment at the end of July, we have been working with the Victorian Aged Care Response Centre to monitor and support Victorian aged care services in minimising their risks of an outbreak, and responding effectively where they have an outbreak.

We continue to work in close partnership with the Commonwealth Department of Health, state health authorities and clinical experts in all jurisdictions where risk of an outbreak is present or realised.

The Commission is a learning organisation, constantly assessing our own performance and impact, and adjusting our regulatory approach as necessary to optimise our impact as the situation evolves.

We remain on duty, vigilant and focused on undertaking our important role in the aged care sector as the pandemic continues to impact all Australians.

Thank you, Chair.