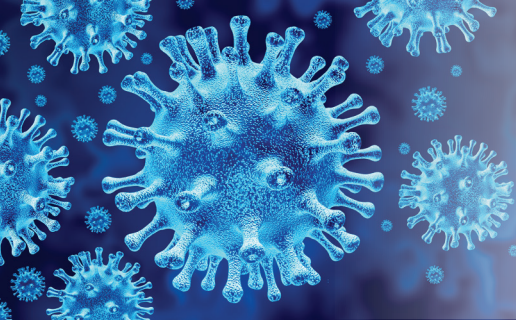


# **COVID-19 outbreak preparation:** ADVICE FOR GPs WITH PATIENTS IN AGED CARE FACILITIES





## Do you have patients in an aged care facility?

This tip sheet is the first in a series to support our GPs working in residential aged care facilities (RACFs) and is designed to support involvement in RACF COVID-19 outbreak preparedness activities. It incorporates the expertise of a range of stakeholders including our local Emergency Response Outbreak Advisory Group GPs, Dr James Hardy and Prof Sue Kurrle, Geriatricians in Northern Sydney LHD.

**Key actions for GPs:** CHECK ALL CONTACT DETAILS and COMMUNICATE INTENTION TO CONTINUE ONSITE VISITATION IN THE EVENT OF AN OUTBREAK

<b>CHECK that the RACF has your details</b>	Make sure the RACF: has accurate contact numbers and details for you, your practice ✓ and after-hours contacts, and they are stored with the RACF's COVID-19 Outbreak ✓ Management plan.
<b>CHECK the RACF has a list of your patients</b>	Keep an up to date list of the residents you care for at each site and make sure that the site also has a list of the residents you care for.
<b>CHECK the contacts you have for the RACF.</b>	Refer to the RACF's governance chart. Ensure you know who is in charge and how to contact them. This may be a facility manager or nurse manager. Check you have contact information for the local Aged Care Rapid Response Teams (BRACE, GRACE & ARRT) and understand the likely escalation points. Ensure you can contact the pharmacy that supplies your residents, including after-hours, in case of urgent medication needs.
<b>ADVISE RACF if you will visit during COVID-19</b>	Advise the RACF whether you are willing to continue to physically visit the site in appropriate PPE in the event of a COVID-19 outbreak, for either COVID positive or non-COVID residents.  If you are visiting multiple RACFs, then unaffected RACFs may be unwilling to have you onsite if you are delivering services into a facility where there is an active COVID-19 outbreak. Potential solutions to this could be the use of telehealth or liaising with a "lead", onsite GP linked to your other RACFs. SNHN can assist with coordination of GP workforce in these situations.



## Key actions for GPs: REVIEW YOUR PATIENTS' CLINICAL RECORDS

<b>REVIEW the patient's clinical details</b>	Ensure patients clinical summary and details, including next of kin, are up to date and can be effectively used as a handover summary.
<b>REVIEW goals of care and care escalation</b>	Review goals of care and care escalation for each of your patients in the RACF.
<b>REVIEW the patient's ACP</b>	Review of Advance Care Plans for all patients. Discuss plans for what would happen to a resident if they were to contract COVID-19. <ul style="list-style-type: none"> <li>• <a href="#">Advance Care Planning Australia COVID-19 resources for GPs</a></li> <li>• <a href="#">ELDAC resources</a></li> <li>• More resources listed in HealthPathways</li> </ul>
<b>REVIEW the patient's medication charts and prescriptions</b>	Review medication charts; make sure prescriptions are up to date. Consider: <ul style="list-style-type: none"> <li>• ensuring all prescriptions have at least a 7-day supply remaining.</li> <li>• AVOID ALL NEBULISERS due to the increased risk of transmission of COVID-19 through droplet spread. Instead, consider prescribing a spacer.</li> <li>• anticipatory medications for palliative care needs (morphine and midazolam subcutaneously in appropriate dosage).</li> </ul> Check <a href="#">HealthPathways</a> for latest recommendations. Transitions of care are high risk for medication errors. Use of MyHealthRecord and the Pharmacy Shared Medicine List is recommended to ensure information can be accessed quickly and effectively.
<b>immunisation record</b>	Ensure that flu vaccinations are up to date.

## Key actions for GPs: MANAGE YOUR RACF PATIENTS WITH COVID-19

<b>PROVIDE continuity of care</b>	Maintain continuity of care through face to face care or by telehealth. COVID-19 MBS telehealth items can be claimed, see <a href="#">mbsonline.gov.au (news, COVID -19 telehealth MBS items)</a> . Provide ongoing care for residents who choose to go home with family.
<b>CHECK infection and PPE Plan for visiting the facility</b>	If you will be attending a RACF, always undertake best practice infection control and PPE requirements. Check for updates on PPE requirements via <a href="#">HealthPathways</a> . Practice donning and doffing your PPE. Consider having someone observe you to make sure you're doing it correctly.  More information on access to PPE can be found on the <a href="#">SNHN website</a> . <a href="#">Advise SNHN if you require additional PPE training</a> . Review the <a href="#">CEC training videos</a> or <a href="#">RACGP video</a> on use of PPE.



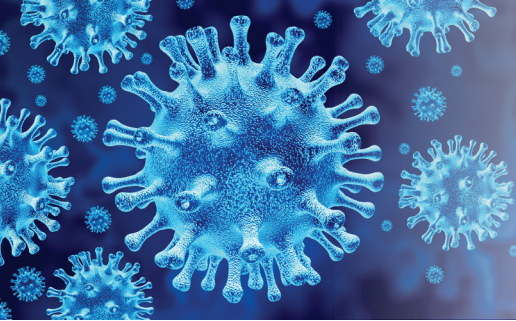
<b>ACCESS to clinical advice and COVID-19 information</b>	<p>If you are managing patients with COVID-19 and have any COVID-19 specific questions, contact NSLHD Virtual Hospital GP Helpline on 0400 303 716.</p> <p>Sydney North <a href="https://sydneynorth.healthpathways.org.au">HealthPathways</a> also has regularly updated pages on assessment and management of COVID-19 patients.</p> <div><a href="https://sydneynorth.healthpathways.org.au">sydneynorth.healthpathways.org.au</a> Username: <b>healthpathways</b> Password: <b>gateway</b></div>
<b>CONNECT and communicate with families</b>	<p>Contact families and be a conduit for information for them. Consider having a video conference for several families or all the families of your patients from the one facility at the same time for rapid sharing of information and to allay anxiety.</p>

### Key actions for GPs: MANAGE COVID-19 – your PRACTICE and the RACF

<b>PLAN for surge capacity</b>	<p>Plan for surge capacity amongst your colleagues, if possible, in discussion with the nursing staff. Consider forming a group where one (or more) “lead” GPs continue to visit the site if others need to self-isolate. The visiting GPs can perform any tasks that can’t be undertaken via telehealth. SNHN can advise who the visiting GPs for each facility are.</p> <p>SNHN can assist by facilitating joint meetings and case conferences with GPs, RACFs and local hospital in-reach teams to agree how best to manage COVID positive patients.</p>
<b>SEEK ADVICE for concerns about an RACF</b>	<p>If you have concerns about a facility’s ability to prepare adequately or to cope with escalating issues, contact the PHN via <a href="mailto:agedcare@snhn.org.au">agedcare@snhn.org.au</a></p>

### When an RACF is affected by an outbreak: GPs need to BE PREPARED for:

<b>New staff and management</b>	<ul style="list-style-type: none"><li>• Usual RACF staff may be furloughed/quarantined and replacement staff put in place who do not know the residents, their medical care needs or care wishes. In some instances, this can include surge GP workforce to provide onsite care. However, the PHN is encouraging continuity of care with a patient’s regular GP wherever possible.</li><li>• RACF management may also have been quarantined/replaced.</li><li>• Breakdown in usual procedures when regular staff are replaced.</li><li>• The NSLHD will provide an outbreak strike force team to the affected RACF which will include the local aged care rapid response team (ARRT, BRACE or GRACE), infection control and public health personnel. Maintaining contact with the outreach team in your area will ensure communication and continuity of care during the outbreak.</li></ul>
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<b>GPs impacted by COVID</b>	<ul style="list-style-type: none"> <li>Some visiting GPs may be in isolation or unable to attend facilities on site. Plan amongst GPs and facility staff. SNHN can assist with sourcing GPs from the surge workforce pool if required.</li> </ul>
<b>Communication difficulties</b>	<ul style="list-style-type: none"> <li>Difficulty contacting nursing staff within the RACF (e.g. phone calls unanswered or very limited information provided in response to GPs' calls).</li> <li>Difficulties with communication lines within the facility (e.g. messages not being transferred between wings or floors of the facility).</li> <li>Frequent contact from residents' family members seeking information about their family member.</li> </ul>

Before you go, please consider checking the COVID-19 Information section on our website:

<https://sydneynorthhealthnetwork.org.au/news/coronavirusinformation/>

This will help keep you on top of the rapidly changing situation. If you need further help, please contact [agedcare@snhn.org.au](mailto:agedcare@snhn.org.au)

## Useful Numbers:



**[sydneynorth.healthpathways.org.au](https://sydneynorth.healthpathways.org.au)**  
Username: **healthpathways** Password: **gateway**

<b>Aged Care Rapid Response Team (ARRT)</b> <ul style="list-style-type: none"> <li><u>Ryde/Hunters Hill CNC:</u> 0409 460 419</li> <li><u>Lower North Shore CNC:</u> 0408 546 907</li> <li><u>ARRT Registrar:</u> 0434 329 970</li> </ul>	<b>Geriatric Rapid Acute Care Evaluation Team (GRACE)</b> <ul style="list-style-type: none"> <li><u>GRACE CNC:</u> 0434 183 549</li> <li><u>GRACE Intake Line:</u> 02 9485 6552</li> </ul>	<b>Beaches Rapid Access Care of the Elderly (BRACE)</b> <ul style="list-style-type: none"> <li><u>BRACE CNC:</u> 0491 211 013</li> <li><u>BRACE Intake Line:</u> 02 9998 6111</li> </ul>
<b>Extended Care Paramedics</b> 13 12 33	<b>Palliative Care Outreach Team</b> 9998 3600   1800 427 255  <b>Aged Care Supportive and Palliative Care – Transitional Nurse Practitioners:</b> Hornsby Ku-ring-gai: 0427 353 387 (Mon-Thurs business hours) Northern Beaches: 0457 484 556 (Mon-Thurs business hours)	<b>After-Hours Medical Services</b> <ul style="list-style-type: none"> <li><u>National Home Doctor Service:</u> 137 425</li> <li><u>Sydney Medical Service Co-operative limited (1300HOMEGP)</u> (02) 8724-6300</li> <li><u>Palliative Care After Hours Helpline:</u> 1800 548 225</li> </ul>
<b>Virtual Hospital GP Helpline</b> 0400 303 716	<b>Virtual Hospital RACF Helpline</b> 0407 267 673	<b>NSLHD RACF Swab team</b> 0438 613 273

**Hornsby Public Health Unit (Northern Sydney LHD)** Hornsby Ku-ring-gai Hospital, Hornsby, 2077

Phone: (02) 9485 6911 | Fax: (02) 9482 1358 (secure line)

After hours - Phone: (02) 9477 9123 (Hornsby Hospital) - ask for Public Health Officer on call



# NSLHD COVID-19 Strike Force Model



**SYDNEY NORTH**  
Health Network

## PHASE 1 Immediate Response

NSLHD advised of COVID-19 outbreak

'COVID-19 Strike Force Initial Response Team' activated

### TEAM MEMBERS:

- Infectious Diseases Clinician (immediate medical assessment and advice)
- Senior Infection Prevention & Control (IP&C) Clinician (immediate IP&C assessment and advice)
- Public Health Unit (PHU) Clinician (immediate outbreak management, including contact tracing, assessment and advice)
- Senior Nurse (immediate nursing workforce and nursing support assessment and advice)
- Outbreak Location Senior Management (location specific governance, engagement and input)

### ROLE:

- Complete '**COVID-19 Strike Force Outbreak Checklist**' to assess situation, determine immediate containment and mitigation measures
- Provide '**COVID-19 Support Pack**' to location
- Determine level of risk and concern as per '**COVID-19 Strike Force Outbreak Assessment Protocol**' and develop '**COVID-19 Strike Force Implementation Plan**'
  - **HIGH**
    - Engage 'COVID-19 Strike Force Incident Management Team' and provide '**COVID-19 Strike Force Implementation Plan**'
    - Supplement RACF workforce with NSLHD COVID-19 Casual Workforce Support Team as able
  - **MEDIUM**
    - Engage 'COVID-19 Strike Force Incident Management Team' and provide '**COVID-19 Strike Force Implementation Plan**'
    - Provide workforce support from NSLHD 'COVID-19 Casual Workforce Support Team'
  - **LOW**
    - Engage 'COVID-19 Strike Force Incident Management Team' and provide '**COVID-19 Strike Force Implementation Plan**'

## PHASE 2 Ongoing Management

'COVID-19 Strike Force Incident Management Team' activated

### Core Team Members:

- Infectious Diseases Clinician
- General Practitioner
- Nursing (including IP&C) & Allied Health
- Virtual Hospital Clinician

### Location-Specific Team Members:

- Geriatrician / In-reach Team (RACF)
- Public Health Unit (workplace)
- Mental Health (Group Home)
- Intellectual Support Service (Group Home)
- Others as deemed necessary

### ROLE:

- Provide IP&C advice and education.
- Enforce CSFIRT directives for containment and management.
- Provide workforce support to outbreak location and assist in the clinical management of patients/residents.
- Provide training and PPE advice.
- Engage Virtual Hospital for remote management of positive COVID-19 patients.
- Engage COVID-19 Swab Team for remote testing.
- Engage the Workforce Welfare Team for welfare checking of RACF and Group Home workforce in isolation.
- Ongoing feedback and consultation with 'COVID-19 Strike Force Initial Response Team' regarding progress.

'COVID-19 Casual Workforce Support Team' activated

### TEAM MEMBERS:

- Nursing & Allied Health

### ROLE:

- Provide frontline clinical services within healthcare-related outbreak site (RACF or Group Home).
- Promote and reinforce IP&C practices with frontline staff.
- Ongoing feedback and consultation with 'COVID-19 Strike Force Incident Management Team' regarding progress.

## PHASE 3 Transition

### TEAM MEMBERS:

- COVID-19 Strike Force Initial Response Team
- COVID-19 Strike Force Incident Management Team
- COVID-19 Casual Workforce Support Team (optional)
- Management team at outbreak location

### ROLE:

- Using the '**COVID-19 Strike Force Implementation Plan**' as a guide, NSLHD Strike Force teams engage in ongoing liaison with facility management to determine appropriate timing of transition of roles and responsibilities back to the facility.

## PHASE 4 Withdrawal

'COVID-19 Strike Force Initial Response Team' re-activated

### ROLE:

- Implement '**Withdrawal Protocol**' to withdraw NSLHD management and support within outbreak location.
- Criteria developed by 'COVID-19 Strike Force Initial Response Team' must be met by outbreak location.
- Physical review of site completed by 'COVID-19 Strike Force Initial Response Team'.