

AAG STATEMENT

Responding to COVID-19 spread in Victorian aged care facilities

30 July 2020

AAG commends the work of frontline workers, service providers and governments in trying to address the spread of COVID-19 through Victorian residential aged care facilities.

AAG acknowledges the complexity of the epidemiological, societal and individual issues that must be balanced in trying to control the COVID-19 outbreaks in Victorian residential aged care facilities. The differing opinions in how the outbreaks should be managed amongst the public are reflected in our own membership. This includes debate around whether all older people in residential aged care should be transferred to a hospital immediately upon testing positive, or whether other responses such as in-reach acute care in residential aged care should also be considered.

AAG members are in agreement that responses to the current spread of COVID-19 in Victorian aged care facilities must ensure fundamental human rights are upheld throughout all COVID-19 responses based on principles of equity and autonomy (the right to choose). This includes:

- Ensuring aged care facility residents receive the same access to health care (including admission to acute care hospitals) as Australians living in other types of accommodation.
- Involving older people, their families and significant others in healthcare decisions, which includes foregrounding older people's needs, preferences and goals. An individual's goals may include protecting current health status, recovering from COVID-19 and/or maintaining end of life wishes.
- Increasing the number of health care clinicians (including registered nurses, nurse practitioners, general practitioners, geriatricians and allied health professionals) available to support residential aged care facility staff.
- Providing in-reach acute health services in residential aged care facilities to support older people who want to remain in place during the pandemic, including older people who test positive to COVID-19.
- Increasing the capacity of residential aged care facilities to respond to the current and any future COVID-19 outbreaks through a national coordinated infection control response model.

AAG highlights that not all older people in residential aged care have the same medical needs, some may be at the palliative stage of care, some may have high clinical needs and other people may have very low clinical care needs but require intensive behavioural and social supports. Furthermore, not all residential aged care facilities have the same design, from rooms off shared corridors to a group of independent units with their own entrances.

In addition, [AAG's response to the BMJ Editorial Covid-19: control measures must be equitable and inclusive in March 2020](#) is particularly relevant during this current increase in COVID-19 cases in Victorian aged care facilities:

- Age must be discussed sensitively and respectfully when developing policy responses to Covid-19. Age itself is not a risk factor for vulnerability to Covid-19. Rather, age is correlated with other underlying risk factors. A simplistic use of age to determine Covid-19 vulnerability and underpin policy choices is therefore inappropriate.
- An ethical framework to guide resource rationing must be developed before the point of needing to ration resources is reached. This must include the voices of older people, including those captured in the [Health Issues Centre April 2020 forum report "Who Makes the Call?"](#).
- "Usual" care needs to be boosted in the face of COVID-19. Simultaneously boosting primary health care, disability, aged care and social services in the face of Covid-19 will ensure that peoples' usual health care needs are addressed. This will prevent additional harm from Covid-19 and relieve pressure on the secondary- and tertiary health care systems.



About AAG

The Australian Association of Gerontology (AAG)'s purpose is to improve the experience of ageing through connecting research, policy and practice. Since 1964, AAG has been Australia's peak body linking professionals working across the fields of ageing. The multidisciplinary nature of our association is one of our key strengths. With 1,455 members across every State and Territory in Australia, our members include researchers, aged care leaders, geriatricians, nurses, allied health professionals, policy makers, advocates for older people and others with expertise in ageing.

Contact:

James Beckford Saunders

Chief Executive Officer, AAG

Email: jbeckfordsaunders@aag.asn.au

Phone: 0422 076 414