



The Aged Care Infection Prevention and Control Guide

A supplementary resource for the **Australian
Guidelines for the Prevention and Control of
Infection in Healthcare** for aged care settings

Introduction and executive summary

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

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Introduction

The Aged Care Infection Prevention and Control Guide (the Guide) aims to support the prevention and control of infections in all settings where aged care is provided. This Guide is a living document and supplements the [Australian Guidelines for the Prevention and Control of Infection in Healthcare](#) (AICGs) and is informed by resources developed by the Australian Commission on Safety and Quality in Health Care, the Aged Care Quality and Safety Commission, the Department of Health and Aged Care (the Department) and the [World Health Organization's infection prevention and control \(IPC\) guidance](#).

The AICGs provide a nationally accepted approach to IPC, focusing on core principles and how healthcare organisations can reduce the impact of infection-related risks. They also provide a basis for workers and organisations to develop guidelines, policies and procedures for IPC specific to local settings. Although the evidence that informs the AICGs is broadly based on acute healthcare settings, the principles of IPC are transferable and applicable to a variety of settings where aged care is provided.

A broad range of client types use aged care services in a broad range of settings. This Guide is designed to provide guidance on infection control for diverse client types and aged care delivery settings. As such, additional and complementary measures may be required for the care of people with specific conditions or needs (for example, disability, cognitive impairment) who may be receiving services in an aged care setting. This may require consideration of condition-specific and person-specific resources when delivering care.

The Guide is intended to support aged care organisations to meet the IPC-related requirements of the strengthened [Aged Care Quality Standards](#) and to minimise the risk of infection for the older people and the workforce. The target audience for this Guide is staff responsible for IPC in both residential and community aged care settings. However, this Guide may also support the aged care workforce and those providing care for older people to understand the basic principles of IPC and how to apply these principles using a risk-based approach. The Guide has been developed to help aged care organisations develop local policies and procedure to support IPC within their own organisation.

The development of this Guide was supported by a Reference Group that included members with expertise in aged care and IPC. The Reference Group advised on the scope of the Guide, priority areas for review and recommendations.

Existing guidelines

Aged care organisations and aged care workers should refer to relevant national guidelines such as the [Communicable Diseases Network Australia Series of National Guidelines](#) to support the implementation of effective IPC measures. Decisions about IPC systems and practices should also be informed by a thorough **risk assessment**, sound clinical judgement and discussions with people involved in care such as the older person, carers, families, aged care workers, the aged care organisation and other healthcare professionals.

For information regarding outbreak management for acute respiratory infections in residential aged care, aged care organisations should refer to the [National Guideline for the Prevention, Control and Public Health Management of Outbreaks of Acute Respiratory Infection in Residential Aged Care Homes](#).

This Guide references Australian Standards relevant to IPC. A list of relevant Australian Standards can be found in **Appendix 1**. Australian Standards can be purchased from [Standards Australia](#).

Executive summary

Effective infection prevention and control (IPC) is central to providing high-quality aged care for all older people and a safe working environment for those that work in aged care settings. There is a known complexity to implementing IPC practices in aged care, especially when care is delivered in a communal or home environment. Since the COVID-19 pandemic, the implementation of IPC practices in aged care has become contentious, with many interventions resulting in extreme or prolonged restrictions, such as separation from loved ones, and the unnecessary use of personal protective equipment (PPE). While it is important to aim to remove all risks associated with delivering an aged care service, this is often not possible. The aim of *The Aged Care Infection Prevention and Control Guide* (the Guide) is to promote a systematic, risk-based approach to IPC in aged care that ensures IPC practices are implemented using the [hierarchy of controls](#), while also considering the impact on the older person's health and wellbeing.

In other words, the Guide is intended to assist aged care organisations implement IPC strategies informed by consideration of risks versus benefits for older persons and workers. While the overarching aim is always to make the risk of infection as low as possible, other social and wellbeing factors must be considered so that IPC interventions and restrictions are not overly severe for older persons and their family and carers.

This Guide is a supplementary resource designed to equip aged care workers, organisations, older people and carers with the tools and knowledge to apply a risk-based approach to IPC in aged care. The key messages included in this Guide are covered within the following topics.

Risk assessment and management

Aged care settings differ in complexity and in local requirements, so risk assessment is essential to inform appropriate management, reduce infection risks and achieve a balanced approach to IPC. While it is important for organisations and aged care workers to aim to eliminate infection risks, this is often not achievable without impacting on an older person's quality of life. This Guide promotes the [hierarchy of controls](#) model to support the development of IPC systems in aged care, and to identify effective strategies to prevent and control the risk of spreading infections. The use of the hierarchy of controls is a requirement of the Safe Work Australia resource [Code of practice: How to manage work health and safety risks](#).

This Guide explores the concept of risk acceptance, because aged care organisations must strike a balance between IPC practices and ensuring a high quality of life for older persons. Recognising that it is often impracticable to completely eliminate risk, aged care organisations, older persons, their carers, and the workforce should collectively accept a certain level of risk. Ensuring older persons can always maintain essential visitor access is an example of how accepting a level of risk can uphold their quality of life.

Person-centred care and wellbeing

Aged care services differ from acute care services because care is provided in an environment that is the older person's home. In aged care settings, the focus of minimising infection-related risks in aged care requires careful consideration of the quality of life of the older people to whom services are provided as part of the approach for risk assessment. Putting older people at the centre of IPC and enabling them to take part in their own care involves considering their needs in relation to mental health and social wellbeing at all levels of decision-making. These considerations should be **balanced** with maintaining an environment where care can be delivered in a manner that minimises the spread of infection and the impact on others receiving and providing care.

IPC-related risk assessments must ensure the [Charter of Aged Care Rights](#) and [worker rights](#) (under the *Fair Work Act 2009*) are prioritised. This means protecting the rights of older people, while also ensuring the safety of the workforce.

IPC system for aged care

All aged care organisations should set up an IPC system to prevent and manage infections effectively when they occur. An IPC system should include the core components (IPC-related guidelines and policies; audits and feedback; infection monitoring; and education and training) and include the key roles and responsibilities. This Guide acknowledges that there is no ‘one size fits all’ for IPC systems in aged care. Each system will need to be structured to reflect the service context, availability of resources, the older person’s care needs and the workforce. The core components of an IPC system in aged care settings outlined in this Guide are based on information from the [Australian Guidelines for the Prevention and Control of Infection in Healthcare](#) and the [World Health Organisation’s core components for IPC](#).

Standard and transmission-based precautions

This Guide outlines the two types of precautions that should be used to prevent and control infections in aged care: standard and transmission-based precautions. Standard precautions are practices that must be used at all times, such as hand hygiene, the appropriate use of PPE, aseptic technique and waste management. Transmission-based precautions are extra precautions used alongside standard precautions and are based on the ways that microorganisms or infections are spread. This Guide focuses on two broad types of transmission-based precautions, contact and respiratory precautions. For most situations when an aged care worker is caring for a person with a respiratory infection, this Guide recommends that a surgical mask with eye protection is worn. In some unusual, infrequent, and higher risk situations (for example, during aerosol-generating procedures), the use of a particulate filter respirator (PFR) may be appropriate instead of a surgical mask. This Guide recommends that the IPC lead or person responsible for IPC be consulted before a PFR is used in aged care settings.

Isolation

Isolation (this may be self-isolation in a home or community setting) is an effective method for reducing the spread of infections, especially in outbreak situations. However, prolonged periods of isolation can cause harm to the physical and psychological health of older people and can be challenging for older people with cognitive impairment. This Guide recommends that the decision to implement visitor restrictions (or encourage self-isolation in a home or community setting) should always be informed by a risk-based approach. Employing a risk-based approach requires consideration of the hazards, the available controls, and the impacts of applying the controls. This includes impact on the risk of acquiring and spreading infections, as well as the potential impact on the mental, physical, and emotional state of older people. This Guide uses the term *risk-based isolation* to support aged care organisations and older people to understand the benefits of isolation strategies, while also considering the risks that can result from prolonged periods of isolation. Isolation measures should only be implemented when they are necessary and when the benefit from the isolation is greater than the risk of harm, including psychological, emotional, and physical harm.

Vaccination

This Guide strongly promotes vaccination for both aged care workers and older individuals. Being up to date with vaccination decreases the risk for individuals (both young and old) of the serious effects of infections and also reduces the risk of transmission of infections to others.

A workforce screening and vaccination program in an aged care setting can significantly reduce the burden and transmission of vaccine-preventable diseases. Workforce screening programs aid in identifying workers with vaccine-preventable diseases or those at higher risk, which helps with IPC. Aged care organisations should establish processes to address seasonal and ongoing infection risks such as influenza and COVID-19.

Unless required under state or territory public health regulation, vaccination should not be mandated. It should, however, be strongly encouraged, and programs that facilitate easy and timely access to vaccines should be put in place for both older people and aged care workers.

Infection monitoring

Monitoring infections and IPC-related activities helps aged care organisations identify infection problems, the sizes of the problems and the factors that may be contributing to the problems. This Guide promotes monitoring infections and IPC activities as a useful method to prevent and control infections in aged care. If implemented, infection monitoring should be targeted to the needs and the context of the service and be linked to a prevention strategy or a continuous quality improvement activity to drive change.

Antimicrobial stewardship

Antimicrobial stewardship (AMS) is an ongoing effort to reduce the risk of antimicrobial resistance and improve the use of antimicrobial medicine for older people. Older people receiving aged care services experience higher rates of infection and have a higher overall rate of antimicrobial use compared to the general population. This Guide recommends that aged care organisations that prescribe, administer or oversee medication management maintain an AMS program to promote the appropriate use of antimicrobial medicines. AMS programs should be tailored to the residential or community setting where care is provided.

How to use this Guide

- 1) This Guide is meant to be a resource and reference tool for aged care workers responsible for IPC in residential aged care services.
- 2) This Guide should be used to inform daily practice as well as ongoing policy review and development and assist aged care healthcare organisations understand how to meet their IPC obligations.
- 3) Key points are provided for each chapter. These points can be used as quick references at the point of care delivery or to inform educational activity in the aged care organisation.

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