

# Communications and Engagement Actions

COVID-19 in Residential Aged Care  
Facilities



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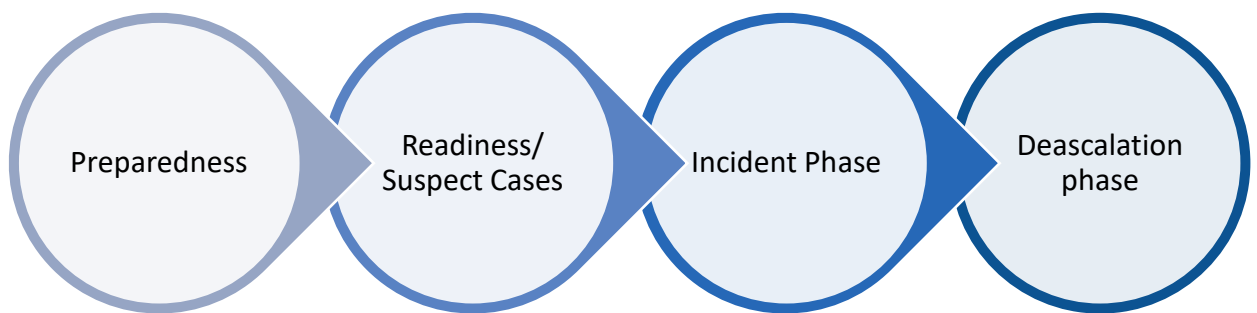
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# Context

This document provides detailed information to support the

It provides detailed information about the communications activities to be undertaken by the aged care providers and government during the phases of the COVID-response:



It is primarily aimed at Communications specialists and complements the Guidance for managing Communications and Engagement document which provides general advice about audience needs, messaging and principles.

# Phases

## Preparedness phase

This phase aligns with *phase 0* in the [RACF Rapid Response](#), to monitor and prepare for COVID-19. This phase of communication focuses on creating awareness of the strategies that need to be in place to ensure RACFs are incorporating measures to prevent, and if necessary, manage cases of COVID-19. During this phase it is also important that residents, their family and staff are confident that RACFs are prepared and have processes in place to ensure the health and safety of residents and staff.

## Readiness phase – suspect case/s

The readiness phase aligns with the first part of *phase 1* of the [RACF Rapid Response](#), where there are suspected case/s in the RACFs. During this phase there will be heightened concern for the welfare of residents, and it is important to increase the communication about the responses being implemented and to provide updates as the situation develops.

Readiness communications may also increase during times of increased community transmission. In this case, RACFs will need to provide information about changes to facility procedures (e.g. restrictions on visits, PPE use). Queensland Health will also provide information about changes to aged care directions and other measures being implemented.

## Incident phase – confirmed case/s

The incident phase is where there is at least one confirmed case associated with the RACF. This may be a confirmed case in a staff member, a resident or, in some cases, a frequent visitor. Communication during this phase is crucial. During this phase, residents are likely to be isolated from loved ones and routines disrupted.

Staff and relatives of residents are likely to be concerned about the ongoing health and safety of residents and regular, transparent and sensitive communication will be necessary.

Staff will also be significantly affected and need to be supported through ongoing communication.

It is anticipated that the RACFs, providers and Government agencies will also need to manage increased media and community attention.

## De-escalation phase

The de-escalation phase is after the outbreak has been declared over, or community transmission has decreased. During this phase, the communication strategies used should be reviewed, evaluated and where necessary, updated. As part of the review it is critical that staff, residents, family members and other stakeholders are consulted with to provide feedback on the communication methods and messages used. Communication with residents and family members should continue, gradually decreasing towards the level of the readiness phase or as business as usual applies, depending on resident and staff needs.

# Government

## Preparedness phase

Audience	Purpose	Considerations	Message	Medium/Channel	When
<p>RACFs and providers</p>	<p>State-wide public announcement (SCB)</p> <p>Sharing of existing resources locally (HHSs)</p>	<p>Limited control over dissemination of message to staff, visitors and contractors</p> <p>Ensuring appropriate receivers</p>	<p>Update processes to accommodate new Public Health Directions</p> <p>Provide advice on roles and responsibilities</p> <p>Advise of liaison officers, both Queensland and Commonwealth Department of Health</p> <p>Provide an overview of the incident response process</p> <p>How to use PPE effectively and infection prevention and control</p> <p>Refer to existing pandemic communications plan for next steps</p>	<p>Direct email to RACFs and providers</p> <p>Update website with new Direction and supporting material</p> <p>PHU engagement using teleconference, site visits and meetings</p> <p>Update website to reflect new advice and provide supporting material such as:</p> <ul style="list-style-type: none"> <li>• Checklist and guidance material</li> <li>• Online training</li> <li>• Factsheets</li> </ul>	<p>Within 24 hours of advice becoming available</p> <p>Ongoing reminders as preparation phase continues</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Community – Statewide or LGA based	Communicate advice in Public Health Directions	Providing clear advice to a range of stakeholders with varying needs	<p>Incident leading to recent changes</p> <p>What actions community members need to take when visiting RACFs</p> <p>Need for restrictions to ensure health and safety of older Queenslanders</p> <p>Link to public resources available</p>	<p>Media briefings and direct engagement including press conference</p> <p>Media statements/conferences</p> <p>Social media posts and prepared responses to social media comments – corporate and HHS</p> <p>Update website with new Direction and supporting material</p> <p>Translated resources</p> <p>Potential for advertising</p>	Within 24 hours of Direction being made
Medical and clinical staff	Communicate advice from health professionals, including Queensland Health, Public Health Unit Commonwealth Department of Health and Chief Health Officer	Limited control over dissemination of message, including extent	<p>Advice on treating and testing older people residing in RACFs</p> <p>Encourage communication with RACFs about resident care and any increased risks due to resident existing conditions in association with COVID-19</p>	<p>Utilise existing network through PHN, allied health and RaSS</p> <p>Clinical Excellence Queensland communication channels</p>	Within 24 hours of advice becoming available
HHS Communication teams	Support RACFs and HHS prepare	Continual changing advice and processes based on new learnings and changing scenarios	Templated communications materials, for example, explainer videos, posters, templated communications and FAQs	Asset Library	At initiation of preparedness stage

Audience	Purpose	Considerations	Message	Medium/Channel	When
Advocacy and consumer groups	Communicate advice in Public Health Directions	Limited control over dissemination of message to family and residents	Changes to Public Health Directions have occurred  Summary of changes and what it means for members	Electronic communication through existing networks  Meetings	Within 24 hours of Direction being made

## Readiness phase – suspect case/s

Audience	Purpose	Considerations	Message	Medium/Channel	When
RACFs and providers	Support RACFs in preparedness	Limited control over dissemination of message to staff, visitors and contractors	Re-confirm protocols and incident response process  Encourage training updates on how to use PPE effectively and infection management  Outline what HHS support for RACF residents and staff is available  Highlight importance of engagement with residents, families and staff to inform and check on welfare  Link to public resources e.g. website	Direct engagement with RACFs and providers, this may come from the HHS, PHU or Department of Health level	When becoming aware of suspected case an ongoing as testing progresses

Audience	Purpose	Considerations	Message	Medium/Channel	When
Premier, Deputy Premier appropriate Ministers and Chief Health Officer	Inform and prepare	Changing and emerging data	Responses being implemented Status of residents in the facility Identified issues	Existing Government communication channels Dashboards Prepared Questions and Answers	When becoming aware of suspected case an ongoing as testing progresses

### Incident phase – confirmed case/s

Audience	Purpose	Considerations	Message	Medium/Channel	When
RACFs and providers	Announce COVID-19 case in a RACFs (resident or staff) Promote confidence in management of a confirmed case Communication of testing strategy	A number of staff may be quarantined pending test results	Advise of outbreak in a facility Check on staff and ensure they do not attend work if unwell Confirm Workforce responses Ensure up to date contact lists Re-confirm HHS support for RACF residents and staff Highlight importance of engagement with families and resident/family engagement	Direct email to RACFs and providers Conference call to RACFs coordinated by each HHS PHU teleconference and visits	As soon as results are confirmed



Audience	Purpose	Considerations	Message	Medium/Channel	When
Media to inform State and Local community	<p>Announce COVID-19 case in a RACFs (resident or staff)</p> <p>Promote confidence in management of a confirmed case</p>	<p>Providing clear advice to a range of stakeholders with varying needs</p>	<p>Advise of outbreak in a facility and identify facility</p> <p>Actions that are being taken to ensure health and safety of residents and staff</p> <p>Need for these actions to ensure health and safety of older Queenslanders</p> <p>Updates on progress of residents and staff</p> <p>Advise of any movement restrictions</p>	<p>Media statements</p> <p>Media conference and press briefings</p> <p>Social media posts and prepared responses to social media comments – corporate and HHS</p> <p>Fever clinic posters</p>	<p>Within a reasonable time after results are confirmed – allowing for RACF, resident and family notification first</p> <p>Social media posts repeated every second day</p> <p>Updates at daily media conference</p>
Advocacy and consumer groups	<p>Announce COVID-19 case in a RACFs (resident or staff)</p> <p>Promote confidence in management of a confirmed case</p>	<p>Have the potential to act as a conduit of information between care providers and residents and families</p>	<p>Overview of incident response</p> <p>Response to identified staffing issues</p> <p>Incoming messages from residents and families regarding systemic issues</p>	<p>Electronic communication through existing networks</p> <p>Meetings</p>	<p>Ongoing during phase</p>
Premier, Deputy Premier, appropriate Ministers and Chief Health Officer	<p>Promote confidence in management of a confirmed case</p>	<p>Changing and emerging data</p>	<p>Responses being implemented</p> <p>Status of residents in the facility</p> <p>Identified issues</p>	<p>Existing Government communication channels</p> <p>Dashboards</p> <p>Prepared Questions and Answers</p>	<p>At initiation of phase</p> <p>Twice weekly</p>

## De-escalation phase

Audience	Purpose	Considerations	Message	Medium/Channel	When
RACFs and providers	Declaration that the outbreak is over and a return to preparedness phase	Limited control over dissemination of message to staff, visitors and contractors	PHU to declare outbreak over Call to remain vigilant Support for work of the staff	Direct email to RACFs and providers	Within 24 hours of confirmation of no active or suspected cases
Media to inform State and Local community	Inform that the outbreak is over	Providing clear advice to a range of stakeholders with varying needs Limited control over dissemination of message, including extent	PHU to declare outbreak over Call to remain vigilant Support for work of the staff	Media statements Social media posts and prepared responses to social media comments – corporate and HHS Media briefings and direct engagement including press conference	Within 24 hours of confirmation of no active or suspected cases
Advocacy and consumer groups	Inform that the outbreak is over	Limited control over dissemination of message to group members	PHU to declare outbreak over Call to remain vigilant Support for work of the staff	Electronic communication through existing networks Meetings	Within 24 hours of confirmation of no active or suspected cases
Director-General (Queensland Health), Chief Health Officer and Department of Health (Cth)	Declaration that the outbreak is over and a return to preparedness phase	Certainty that outbreak is over	PHU to declare outbreak over	Direct correspondence	Within 24 hours of confirmation of no active cases

# Residential aged care facilities and providers

## Preparedness phase

Audience	Purpose	Considerations	Message	Medium/Channel	When
Residents	Communicate changes in Public Health Directions	<p>Providing clear and reassuring advice.</p> <p>Consider capacity to understand message, need for interpreter</p> <p>Empower residents' preparedness</p>	<p>Confirm commitment to the care for the health and safety of residents</p> <p>Outline what support is available and implications for residents.</p> <p>Communicate how communication and information will be shared.</p> <p>Share advice and information that will help residents in their own preparedness, where appropriate.</p>	Face-to-face communication, meal tray messages, noticeboard if in dining or activities room	Within 24 hours of notice of changes
Immediate family contact, care partner, Guardian/EPOA	<p>Communicate changes in Public Health Directions</p> <p>Promote confidence about facility preparedness and outbreak management plans</p>	<p>Providing clear and reassuring advice.</p> <p>consider capacity to understand message, need for interpreter</p>	<p>Confirm commitment to the care for the health and safety of residents</p> <p>Outline what support is available from the facility, provider and HHS for residents and any implications for residents.</p> <p>Advise families about the role of, and how to access, the Older Persons Advocacy Network and the Aged Care Safety and Quality Commission</p> <p>Communicate how ongoing information will be shared.</p>	<p>Phone (mobile first then landline), text, email, or preferred communication avenue of family member</p> <p>Social media</p> <p>Department of Health Website</p> <p>Fact sheets</p>	Within 24 hours of notice of changes

Audience	Purpose	Considerations	Message	Medium/Channel	When
Staff	<p>Communicate changes in Public Health Directions</p> <p>Use of PPE and advice about infection control processes</p> <p>Promote confidence about facility preparedness and outbreak management plans</p> <p>Provide advice about workforce management plan</p>	<p>Message fatigue as repeated communication is needed to promote proper and correct use</p> <p>Need to provide clear and consistent advice which is relevant to facility</p> <p>Providing clear and reassuring information that is practical and compassionate</p> <p>Varying levels of experience across staff</p> <p>Ensure existing and any new staff receive message</p> <p>Complacency due to low number of active cases and community transmission</p> <p>Provide confidence by including source information, for example advice from Commonwealth Department of Health, Queensland Health etc.</p>	<p>Outline the operational changes for their role and for residents and families that they care for</p> <p>Emphasise importance on communicating consistent and transparently with residents and family</p> <p>Seek feedback on the processes proposed for the facility in meeting the Public Health Direction</p> <p>Create awareness of plans for to implement infection control measures and what those measures are</p> <p>Promote constant awareness of PPE requirements</p> <p>Training on infection control processes and how and when to use PPE and where stocks are located</p> <p>Seek feedback from staff about confidence level</p> <p>Check on staff and ensure they do not attend work if unwell</p> <p>Express commitment to staff health and safety</p> <p>Provide detailed brief on roles and responsibilities under workforce management plan</p> <p>Detail facility reporting process</p>	<p>Email to all staff</p> <p>Use of staff notice boards</p> <p>Changeover shift meetings</p> <p>Staff meetings</p> <p>Dedicated meeting and training sessions</p> <p>Posters and signage around facility</p> <p>Making Residential Aged Care Facility and Disability Accommodation PPE Guidance available</p> <p>Giving access to infection control plans</p> <p>Posters and signage around the facility</p>	<p>As soon as possible after becoming aware of the new Public Health Direction and before it comes into effect</p> <p>As soon as PPE requirements are introduced</p> <p>Regular repeated reminders must occur</p> <p>Regular check in with staff to understand confidence level</p> <p>Making plans and guidance available at all times</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Extended family, friends, neighbours	Providing advice about support services for managing additional stress due to COVID-19	Need for sensitivity	<p>Share advice about provider / facility processes for accessing mental health services</p> <p>Advise that the Commonwealth Department of Health has advice online</p> <p>Provide advice about Aged Care Workforce Retention Bonus Payment</p>	<p>General advice can be provided through staff email or meetings</p> <p>Direct conversations with appropriate officers, e.g. manager or human resources officer</p> <p>Fact sheets</p>	On an as needed basis
Visitors including contractors', physicians, support service providers etc	Communicate changes in Public Health Directions	<p>Varying levels of impact on a range of contractors</p> <p>Providing clear and reassuring information that is practical</p> <p>Access to telehealth and other virtual visit options</p>	<p>Outline the operational changes for their role as a service provider and how the changes may impact on contractors' access to the facility and any actions they need to take while in the facility</p> <p>Whether use of PPE is required for them</p> <p>Advice on the proper and correct use of PPE</p> <p>Provide advice about alternative visit options, such as telehealth or Zoom</p>	<p>Phone or email to suppliers, contractors and clinicians</p> <p>Notices at entry and contractor use areas</p>	As soon as possible after becoming aware of the new Public Health Direction and before it comes into effect

## Readiness phase – suspect case/s

Audience	Purpose	Considerations	Message	Medium/Channel	When
Residents	<p>Provide advice about suspected case</p> <p>Communicate new processes</p>	<p>Increased anxiety about health and safety</p> <p>Increased concern about isolation and loneliness</p>	<p>Confirm a resident or staff is being tested, reinforcing current proactive testing protocols</p> <p>Explain the precautions that need be taken while testing occurs</p> <p>Share protocols to prevent transmission and protocols in event of a positive case.</p> <p>Share information on ways to stay connected with family and friends</p> <p>Share publicly available information (DH website updates)</p>	<p>Facility notice or meeting</p> <p>Staff inform residents personally</p> <p>Regular direct briefings (either one to one or collectively, dependent on resident)</p> <p>Notices on meal tray, noticeboards, etc</p> <p>Multi-modal messaging using verbal, written, graphics, voice and video that can be re-viewed by residents as needed.</p>	<p>As soon as testing occurs</p> <p>May require repeated messaging</p>
Physician of suspected case	Inform patient is being tested	Timeliness	<p>Advise a resident is being tested</p> <p>Inform precautions being implemented</p>	Phone call	As soon as testing occurs
Incident controller	Provide advice about residents Advance Care Plans or expressed wishes about care	Currency of Advanced Care Plans and wishes (whether developed to consider a COVID-19 context)	<p>Explain the expressed wishes of each of the residents about end of life care</p> <p>Balance expressed wishes with the health and safety of other residents.</p>	In writing	<p>On an as needed basis for each positive COVID-19 case</p> <p>Within 24 hours of confirmation of a cluster at a RACF</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Extended family, friends, neighbours	<p>Provide advice about suspected case</p> <p>Communicate new processes</p>	<p>Communicate advice from health professionals</p> <p>Reassure families of adherence to advice by RACF/staff/attending physicians</p> <p>Communicate what to expect proactively and with compassion: communicate what families can do as well as the list of what they can't do under family presence policies</p> <p>Limited ability to rapidly scale up staffing to respond to increased call volumes</p>	<p>Advice on protocols to be implemented in the RACF, CHO Directive updates</p> <p>Electronic information on ways to stay connected</p> <p>Share publicly available information (DH website updates)</p> <p>Family Presence Policies: what they can and can't do. Rationale for restrictions.</p>	<p>Online family briefings/Q&amp;A</p> <p>Social media</p> <p>Posters/leaflets/email</p>	Daily
Staff	<p>Provide advice about suspected case</p> <p>Communicate new processes</p> <p>Provide advice about support services for managing additional stress due to COVID-19</p>	<p>Increased anxiety about health and safety</p> <p>Increased workload</p>	<p>Explain the precautions that need be taken while testing occurs</p> <p>Remind staff of outbreak management plan and need for increased PPE use and infection control processes</p> <p>Refresh PPE and infection control training</p> <p>Share advice about provider / facility processes for accessing mental health services</p>	<p>Staff email</p> <p>Staff meeting</p> <p>General advice can be provided through staff email or meetings</p> <p>Direct conversations with appropriate officers, e.g. manager or human resources officer</p>	On an as needed basis

Audience	Purpose	Considerations	Message	Medium/Channel	When
Immediate family contact, care partner, Guardian/EPOA	Provide advice about suspected case Communicate new processes	Communicate advice from health professionals Reassure families of adherence to advice by RACF/staff/attending physicians Consider visitation/support impact Communicate what to expect proactively and with compassion: communicate what families can do as well as the list of what they can't do under family presence policies. State why these restrictions are in place	Prepare families for possibility of a positive case. Advice on protocols to be implemented in the RACF, CHO Directive updates Any changes to processes and on-going developments i.e. resident's health and wellbeing, staffing, resident's laundry etc Share publicly available information (DH website updates)  Family Presence Policies: what they can and can't do. Rationale for restrictions.	Phone (mobile first then landline), text, email, or preferred communication avenue of family member  Online family briefings/Q&A Social media Posters/leaflets/email	Daily Within 12 hours of direction being made May require repeated messaging

## Incident phase – confirmed case/s

Audience	Purpose	Considerations	Message	Medium/Channel	When
Residents	Inform there has been a confirmed case at the facility	Impact on hearing of confirmed case	Advise of outbreak in facility What it means for the resident – will they be safe, moved to another facility/hospital. Ensure their choice of staying or being moved are followed  How you will inform their family and how they can stay in contact	Face to face Consider having immediate family contact or support person available to assist with communication	Immediate Continue updating as required – regularly/daily



Audience	Purpose	Considerations	Message	Medium/Channel	When
Visitors including contractors', physicians, support service providers etc	Inform there has been a confirmed case at the facility	<p>Varying levels of impact on a range of contractors</p> <p>Providing clear and reassuring information that is practical</p> <p>Access to telehealth and other virtual visit options</p>	<p>Advise that their information will be passed onto contact tracers and that any recent visitors may need to isolate</p> <p>Advise they will not be able to enter the facility</p> <p>Provide advice about alternative visit options, such as telehealth or Zoom</p>	<p>Phone or email to suppliers, contractors and clinicians</p> <p>Notices at entry and contractor use areas</p>	As soon as possible after confirmation
Extended Family, friends, neighbours	Inform there has been a confirmed case at the facility	<p>May need to enable residents and families to communicate quickly with each other.</p> <p>Fear for family member's health</p> <p>Residents being moved from their facility</p>	<p>Ensure timing for notification is prior to or in parallel to notifying residents. May need to enable residents and families to communicate quickly with each other.</p> <p>Situation at the facility and processes in place or being put in place</p> <p>Confirm resident's safety, confirm their choice of staying or moving facilities and share expert advice about whether the choice expressed is viable in the circumstance presented</p> <p>Inform families if residents being moved, location and when, how to contact them.</p> <p>Advocacy support contact details</p>	<p>Daily online family meetings</p> <p>emails</p> <p>Social media</p>	Within 12 hours of notification
Local residents	To inform local residents that movement in nearby streets may be affected	<p>Heightened concern about increased community transmission</p> <p>Concern over access to homes and businesses</p>	Provide advice about any road closures or reduced access to neighbourhood due to increased media attention or medical vehicles	<p>Mailbox drops</p> <p>Door knocking</p> <p>Phone calls</p>	Within 12 hours of a cluster of cases being identified

Audience	Purpose	Considerations	Message	Medium/Channel	When
<p>Immediate family contact, care partner, Guardian/EPOA</p>	<p>Inform there has been a confirmed case at the facility</p>	<p>Ensure timing for notification is prior to or in parallel to notifying residents.</p> <p>May need to enable residents and families to communicate quickly with each other.</p> <p>Fear and anxiety for family member's health</p> <p>Residents being moved from their facility</p> <p>Daily updates that confirm all key details of care (even if there is no changes)</p>	<p>Ensure timing for notification is prior to or in parallel to notifying residents. May need to enable residents and families to communicate quickly with each other.</p> <p>Situation at the facility and processes in place or being put in place</p> <p>Confirm resident's safety, confirm their choice of staying or moving facilities and share expert advice about whether the choice expressed is viable in the circumstance presented</p> <p>Inform families if residents being moved, location and when, how to contact them.</p> <p>Daily updates about care and arrangements: meals, showering, clothes, laundry, staffing and infection control.</p> <p>Advocacy support details</p>	<p>Phone (mobile first then landline), text, email, or preferred communication avenue of family member</p> <p>Online family briefings/Q&amp;A</p>	<p>Immediate</p> <p>Daily – even twice daily if needed</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Staff	<p>Inform there has been a confirmed case at the facility</p> <p>Use of PPE and advice about infection control processes</p> <p>Provide advice about workforce management plan</p>	<p>Heightened anxiety about health and safety</p> <p>Message fatigue as repeated communication is needed to promote proper and correct use</p> <p>Providing clear and reassuring information that is practical and compassionate</p> <p>Ensure existing and any new staff receive message</p>	<p>Undertake re-training on infection control processes and how and when to use PPE and where stocks are located</p> <p>Inform staff about quarantine requirements for close contacts and remind staff to not attend work if unwell</p> <p>Express commitment to staff health and safety</p> <p>Provide detailed brief on roles and responsibilities under workforce management plan</p>	<p>Phone call to all staff</p> <p>Use of staff notice boards</p> <p>Changeover shift meetings</p> <p>Staff meetings</p> <p>Dedicated meeting and training sessions</p> <p>Posters and signage around facility</p> <p>Making Residential Aged Care Facility and Disability Accommodation PPE Guidance available</p> <p>Giving access to infection control plans</p>	<p>As soon as positive case is confirmed and ongoing through phase</p>
	<p>Providing advice about support services for managing additional stress due to COVID-19</p>	<p>Need for sensitivity</p>	<p>Share advice about provider / facility processes for accessing mental health services</p> <p>Advise that the Commonwealth Department of Health has advice online</p> <p>Provide advice about Aged Care Workforce Retention Bonus Payment</p>	<p>General advice can be provided through staff email or meetings</p> <p>Direct conversations with appropriate officers, e.g. manager or human resources officer</p>	<p>As soon as positive case is confirmed and weekly reminders</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Surge staff	<p>Provide staff with facility specific advice</p> <p>Provide staff with understanding of residents needs</p> <p>Use of PPE and advice about infection control processes</p>	<p>Heightened anxiety about health and safety</p> <p>Unfamiliar with the facility</p> <p>Unfamiliar with residents and their family who have heightened anxiety about health and safety</p> <p>Need to provide clear and consistent advice which is relevant to facility</p> <p>Varying levels of experience across staff</p>	<p>Provide detail of residents needs to ensure their ongoing health, safety and care</p> <p>Emphasise importance on communicating consistent and transparently with residents and family</p> <p>Explain the facilities outbreak management plan and infection control measures</p> <p>Training on infection control processes and how and when to use PPE and where stocks are located</p> <p>Check on staff and ensure they do not attend work if unwell</p> <p>Express commitment to staff health and safety</p> <p>Provide detailed brief on roles and responsibilities under workforce management plan</p> <p>Detail facility reporting process</p>	<p>Use of staff notice boards</p> <p>Changeover shift meetings</p> <p>Staff meetings</p> <p>Dedicated meeting and training sessions</p> <p>Posters and signage around facility</p> <p>Making Residential Aged Care Facility and Disability Accommodation PPE Guidance available</p> <p>Giving access to infection control plans</p>	<p>As soon as new staff commences</p> <p>Regular repeated reminders must occur</p> <p>Regular check in with staff to understand confidence level</p> <p>Making plans and guidance available at all times</p>

## De-escalation phase

Audience	Purpose	Considerations	Message	Medium/Channel	When
Residents	<p>Inform the outbreak is over</p>	<p>Clear advice to residents with different needs</p>	<p>Outbreak is over</p> <p>What this means for residents – what processes and changes will be in place and when</p> <p>Contact with families</p>	<p>Face-to-face communication</p> <p>Meal tray messages</p>	<p>Within 12 hours of notice of change in direction</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Immediate family contact, care partner, Guardian/EPOA	Inform the outbreak is over	Clear advice	<p>Outbreak is over</p> <p>What this means for residents and what processes and changes will be put in place</p> <p>If resident moved to hospital or another facility what this means for them</p> <p>Contact with residents/visitation/support</p>	<p>Phone, text, email</p> <p>Family online meeting</p>	Within 12 hours of notice of change in direction and at same time as residents
Extended Family, friends, neighbours	Inform the outbreak is over	Clear advice	<p>Outbreak is over</p> <p>What this means for residents and what processes and changes will be put in place</p> <p>If resident moved to hospital, private housing or another facility what this means for them</p> <p>Contact with residents/visitation/support</p>	<p>Online family meeting</p> <p>Emails</p> <p>Social media</p>	Within 24 hours of notification
Staff	Inform the outbreak is over	Need for sensitivity to the impacts of the outbreak	<p>Appreciation of work performed</p> <p>Update on the status of residents</p> <p>Return to preparedness phase</p> <p>Seek feedback</p>	<p>Phone calls and emails</p> <p>Changeover shift meetings</p> <p>Staff meetings</p> <p>Dedicated meeting and training sessions</p>	<p>Within 24 hours of notification</p> <p>Ongoing support required</p>

Audience	Purpose	Considerations	Message	Medium/Channel	When
Surge staff	Inform the outbreak is over	Need for sensitivity to the impacts of the outbreak	Appreciation of work performed Update on the status of residents Return to preparedness phase Seek feedback	Phone calls and emails Changeover shift meetings Staff meetings Dedicated meeting and training sessions	Within 24 hours of notification  Ongoing support required
Visitors including contractors' physicians, support service providers etc	Inform the outbreak is over	Need for sensitivity to the impacts of the outbreak	Return to preparedness phase	Phone calls and emails Notices at entrance	Within 24 hours of notification

	<b>Date of Publication</b>	<b>Approved By</b>	<b>Contact</b>
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