

COVID-19 Outbreak Response Planning

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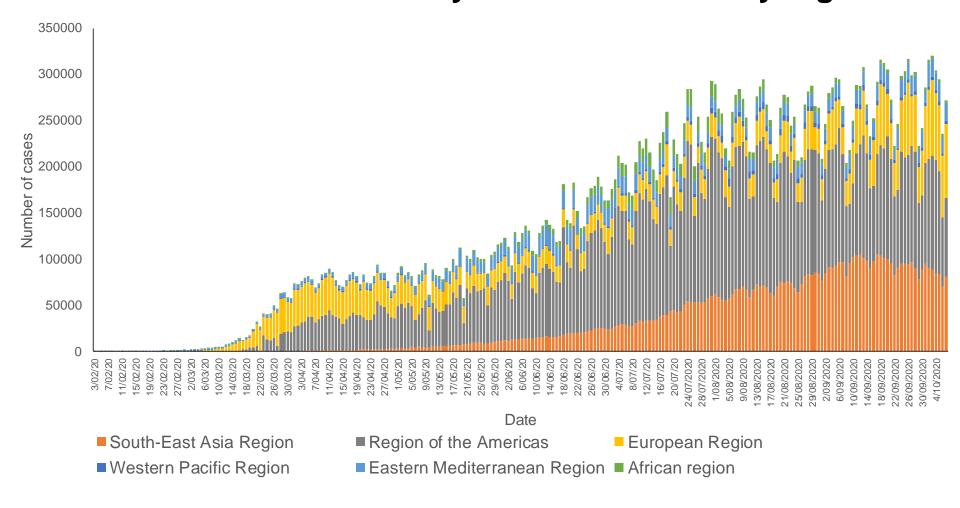
Preparing and responding to the COVID-19 pandemic

- Governance
- Legislation
- Communication
- Public health measures
 - Border closures
 - Case finding/isolation/contact tracing/quarantine
 - Guidelines development
 - Physical distancing
- Outbreak planning

Preparing and responding to the COVID-19 pandemic

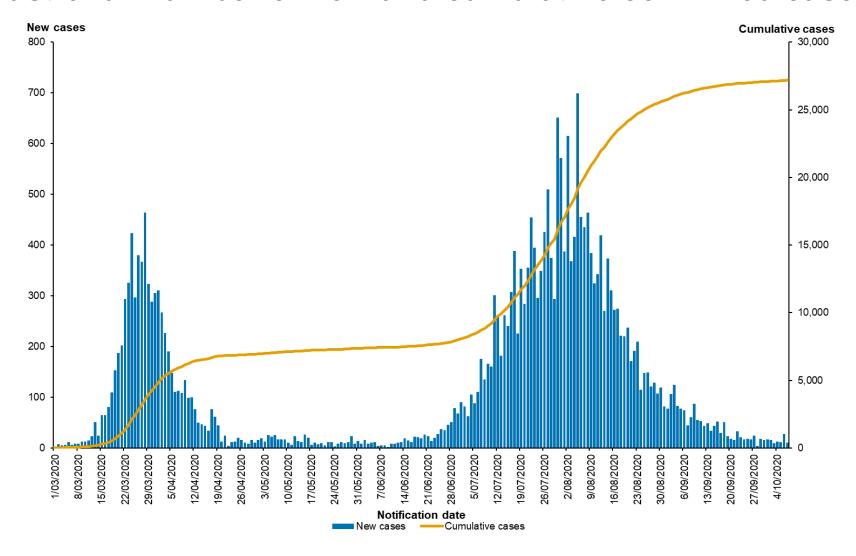
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World: Number of newly confirmed cases by region



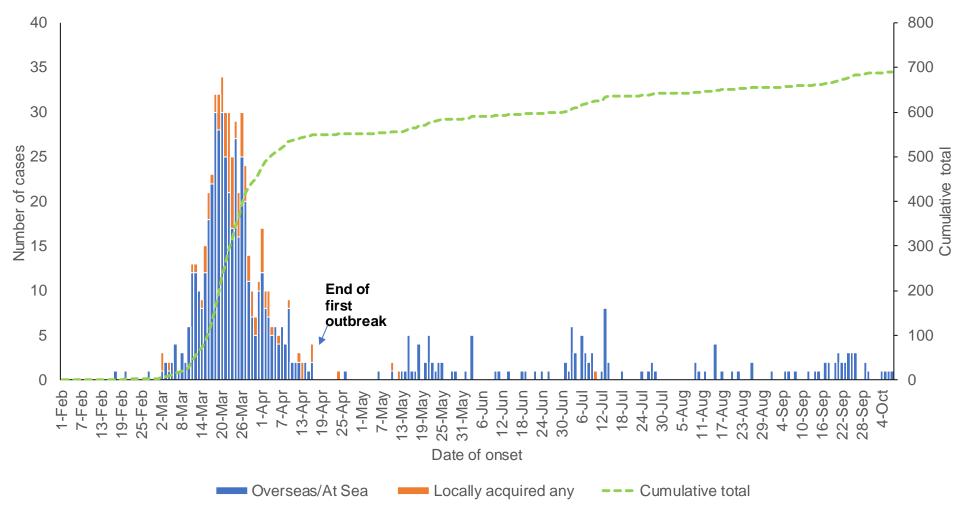
Globally: >37 million confirmed cases >1 million deaths

Australia: Number of new and cumulative confirmed cases



27,182 total cases; 897 total deaths (as on 8/10/2020)

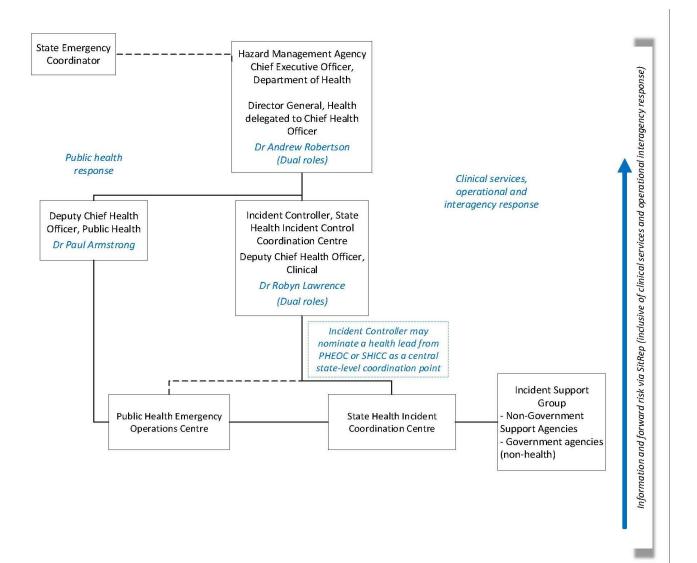
WA: Number of new and cumulative confirmed cases by place of acquisition.



- Year to date (6/10/20): 691 cases.
- 1st outbreak period: 550 cases over 76 days.
- 2nd outbreak period: 141 cases over 174 days

emergency nanagement

Information and forward risk via SitRep (inclusive of public health advice)

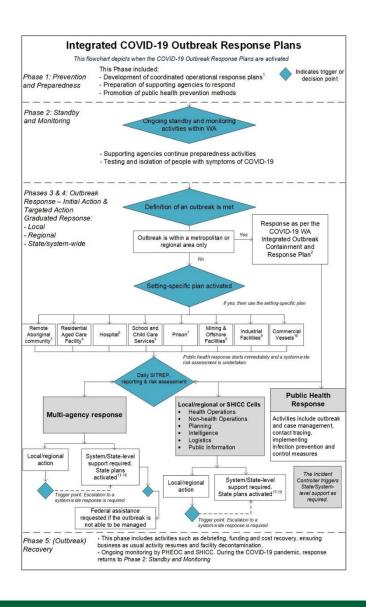


Integrated Outbreak Plans

Integrated Outbreak Response Plans have been developed to set out the State's strategic response to outbreaks – both at a State-level and 'high risk' settings.

- During limited community transmission, it is assumed that most outbreaks will be discrete events managed through suppression and containment as WA's primary strategy and plans focus on this strategy.
- The integrated plan recognises the need for integrated Public Health advice and clinical, operational and inter-agency responses to inform the overall incident response.
- Plans set out how the extensive portfolio of local and regional plans / responses are supported by State/system level plans. Principles include:
 - Ensure a graduated, proportionate response, that is coordinated and integrated;
 and
 - Enable the activation of a system-level response through SHICC that can be scaled, where the ability to manage locally is exceeded; and
 - Provide clarity on roles and responsibilities.
- Whilst plans address current-state, the phases, principles, strategies and key
 considerations described within this plan are scalable should a geographic cluster
 or clusters not be containable and/or widespread community transmission occurs.

Integrated Outbreak Plans



Setting-specific outbreak plans

Integrated plans for outbreaks in a number of specific settings have been developed that set out how local, regional and State-level plans will support WA's response.



- Remote Aboriginal Community Outbreak Response Plan;
- Residential Aged Care Facility Outbreak Response Plan;
- Prison Outbreak Response Plan;
- Hospital Outbreak Response Plan;
- School and Child Care Service Outbreak Response Plan, which includes child care centres and boarding schools;
- Mining and Offshore Facilities Outbreak Response Plan;
- Industrial Facilities Outbreak Response Plan;
- Commercial Vessels Outbreak Plan; and
- Congregate Living Outbreak Response Plan.

Management of vulnerable populations

- Vulnerable populations can be defined as groups and communities at a higher risk for poor health because of the barriers they experience due to social, economic, political and environmental factors as well as limitations due to illness or disability.
- In addition to the vulnerable groups recognised by the Commonwealth Department of Health, the WA health response planning for vulnerable populations has also considered the following cohorts in collaboration with stakeholders and subject matter experts to develop specific plans to appropriately respond to their needs:
 - People with mental health and drug and alcohol issues;
 - Homeless/displaced people;
 - People with disability;
 - Culturally and linguistically diverse, and refugee/detainee persons;
 - People in correctional facilities or services; and
 - Persons at end of life.
- Planning for the needs of many of these vulnerable populations has been considered in the COVID-19 Outbreak Response Plan: Congregate Living.
- The WA Department of Health has been participating in national planning for vulnerable populations via Commonwealth-led management and operational planning.

Management of vulnerable populations

- Locally, WA Health has been engaging with the Department of Communities via their Taskforces for vulnerable groups including disability, homelessness, and Aboriginal communities.
- Information to assist the planning and preparedness for vulnerable populations is available on the HealthyWA website and includes guidance for:
 - Infection Prevention & Control and Personal Protective Equipment specific to aged care facilities;
 - People with a disability;
 - The homelessness sector;
 - Home care and in-home care workers;
 - Management of mental health patients in hostels and supported accommodation.

Public health response to an outbreak

A number of activities will occur after the D/CHO, Public Health determines the definition of an outbreak has been met (may vary by setting).

- Declaration of outbreak/outbreak notification
- 2. Formation of outbreak management team (OMT)
- 3. **Situational analysis** (define the setting)
- 4. Case management
- 5. Contact tracing and contact management (downstream contact tracing)
- 6. Investigation of source of infection (upstream contact tracing)
- 7. Local facility response / local and regional response in line with plans
- Additional case finding
- 9. Control measures
- 10. **Standby** of the Rapid Response Team (RRT), the Patient Flow Coordination Centre (PFCC) and other SHICC capacity
- 11. Communication and Public Information
- 12. Reporting/monitoring and activation of a system level response, where required

Next Steps

The plans will continue to be subject to further desktop scenario exercises to further test the plans and will be reviewed regularly to maintain currency and incorporate emerging lessons.

Action: Plans finalised and distributed to involved organisations **Action**: Desktop scenario exercises run as required to evaluate plans and help inform agencies of roles and responsibilities **Action**: Continued review cycle to ensure currency and incorporate emerging national and international lessons learnt

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