

SESLHD BUSINESS RULE - SESLHDBR/093

Name	Infection Prevention and Control Practitioners - Out of Hours On-Call Role		
What it is	A guide to the Infection Prevention and Control practitioners key out of hours roles and responsibilities when on-call during a pandemic.		
What it is not	It is not a Standard Operating Procedure.		
Risk Rating	High Review Date September 2023		
Who it applies to	On-call Infection Prevention and Control (IPC) Practitioners and personnel involved in the SESLHD Executive on-call roster.		
Why the rule is necessary	 During a pandemic, the SESLHD IPC Practitioners participate in an on-call roster out of hours to support the SESLHD (District) Executive on-call. The hours are weekdays 5pm-8am (weekdays), 8am-8am (weekends & public holidays). The frequency and scope of requests made to the on-call IPC Practitioners will be reviewed by the SESLHD Director of Nursing and Midwifery. 		
When to use it	 Practitioners will be reviewed by the SESLHD Director of Nursing and Midwifery. If IPC advice is required out of hours, namely to discuss issues unable to be resolved by a SESLHD facility or health based facility located within the boundaries of SESLHD, by the District Executive on-call after escalation by the Executive on-call, After-Hours Nurse Manager (AHNM) or residential facility outbreak response lead. Issues may include risk assessment and IPC management strategies for suspected clusters of disease (one or more cases and/or potential exposure in a residential institution) and problems arising in hot zones where additional infection prevention and control expertise is required. As a minimum, a teleconference will be undertaken to permit the on-call IPC practitioner to communicate directly with the site Executive on-call and/or the AHNM and District Executive on-call. When the request is related to a residential facility, a risk assessment should be undertaken with the outbreak response lead to determine if an out of hours onsite IPC review is required. The risk assessment should include, but not be limited to: Capacity to virtually communicate with the site on platforms such as skype, facetime and teams; Effectiveness and efficiency of the site to implement their pandemic response plan since notification of the outbreak or exposure; Ability to access the affected sites' IPC lead; Time of day. Can the review be deferred to the next business day or within hours on the weekend and public holidays; Consideration whether attending out of hours will permit the ICP to review 'normal' operations of the facility i.e. cleaning, food delivery, staff arriving and leaving, laundry, and resident interactions. A site visit to the institution may be required out of hours. The on-call IPC Practitioner is contacted via the on-call roster. 		
When not to use it	In business hours.		

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Role and responsibility of the on-call Infection Prevention and Control Practitioners	 Be accessible during rostered on-call shifts to participate in teleconferences and on-site meetings as required by the District Executive on-call. Take relevant PPE (for self only) if attending a site of concen. Confirm any advice provided with an email to the facility Executive on-call; the AHNM; site IPC Practitioner; District Executive on-call or residential facility outbreak response lead, as appropriate. Provide advice and support based on: NSW Health PD2017 013 - Infection Prevention and Control Policy CEC Infection Prevention and Control Practice Handbook NSW Health GL2019 013 - Triggers for escalation following detection ofinfection outbreaks or clusters SESLHDPR/581 - Management of Acute Respiratory Illness Latest COVID-19 (Coronavirus) advice http://seslhnweb/COVID/ Public Health policies Table of Infectious Diseases modes of Transmission and Recommended Precautions for Staff and Patients to Prevent Transmission. SESLHDPR/677 - COVID-19 Response-Aged Care Facility Rapid Response and Assessment Procedure. Residential aged care facilities, multipurpose services, community residential care group homes, hostels and refuges V2.0, CEC document RACF COVID-19 PPE Train the trainer package V2.0 SHEOC Aged Care: First 24 Hours: Managing COVID-19 in a Residential Aged Care Facility 	
Role and Responsibility of District Executive	Undertake assessment of issue with facility Executive on-call and attempt to resolve issue locally.	
on-call	 Contact the IPC practitioner on-call as required. Action delegated to the residential aged care facility outbreak response lead when appropriate. Report incident as per usual communication channels. Ensure access to contact details for practitioner on call 	
Role and Responsibility of facility Executive on-call and the AHNM	 Undertake assessment of issue with ward / department staff affected. Escalate and problem solve with District Executive on-call first. Participate in teleconference with the IPC Practitioner on-call as required. Ensure site staff implement and monitor recommendations made by the IPC Practitioner. Follow up with email communication that actions have been carried out as per plan. Report incident as per usual communication channels. 	
Executive Sponsor	SESLHD Director of Nursing and Midwifery	
Author	SESLHD DON group	

Revision and Approval History

Date	Revision Number	Author and Approval
March 2020	Draft	Author SESLHD DON group. Endorsed at Infection Prevention and Control. Committee.
April 2020	Draft	Approved by SESLHD Director of Nursing and Midwifery.
April 2020	Draft	Draft for Comment period.

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June 2020	0	Approved by Executive Council. Published by Executive Services.
August 2021	1	Draft for consideration of changes
September 2021	1	Minor review. Addition of health based facilities located within the boundaries of SESLHD and role of residential aged care outbreak response leads and updated reference documents. Approved by Executive Sponsor.

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