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COVID-19: LESSONS TO BE LEARNED FROM DOROTHY HENDERSON LODGE

FOR IMMEDIATE RELEASE

THE COVID-19 outbreak in the Dorothy Henderson Lodge nursing home in Sydney showed that optimal infection prevention and control practice cannot be assumed, even among trained healthcare workers, in an outbreak setting, according to one of Australia's leading infectious diseases experts.

Clinical Professor Gwendolyn Gilbert is Director of Infection Prevention and Control for the Western Sydney Local Health District, and a senior researcher at the Marie Bashir Institute for Infectious Diseases and Biosecurity.

In an article published today by the *Medical Journal of Australia*, Professor Gilbert wrote that the outbreak at Dorothy Henderson Lodge provided important lessons.

"The most important lesson of the Dorothy Henderson Lodge COVID-19 outbreak was the need for early, ongoing leadership by facility management and guidance from an experienced IPC professional," she wrote.

"The COVID-19 outbreak, in Australia, has highlighted a widespread lack of infection prevention and control (IPC) competence and confidence among healthcare and residential aged care facility (RACF) workers. Regular, targeted training of hospital and RACF staff is required to embed IPC principles in routine practice and enable rapid escalation to high-level outbreak precautions, when required.

"Contingency plans are needed to ensure outbreak surge capacity of appropriately qualified and experienced RACF staff to deal with sudden demand, due to absenteeism, from illness or quarantine, particularly if multiple facilities may be affected simultaneously.

"Proactive allied-health support is needed to maintain social connection, mobility and nutrition to mitigate risks of prolonged isolation or quarantine of elderly residents.

"Hospital admission of RACF residents with COVID-19, can be determined, on a case-by-case basis, according to medical need, resident preference and facility resources.

"In an RACF, a single confirmed case of COVID-19, in a resident, staff member or frequent visitor, requires an immediate outbreak response, including testing of all staff and residents, isolation or quarantine, as required, and implementation of strict IPC measures."

Altogether, 17 of 76 (22%) Dorothy Henderson Lodge residents were infected with COVID-19 and six died; five were more than 90 years old. Twelve residents were admitted to hospital; of the five who remained at Dorothy Henderson Lodge four recovered and one died, with palliation.

"Ongoing training and advice, from experienced infection prevention and control professionals is needed," Professor Gilbert concluded.

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