

NSW IPAC Framework for Respiratory and COVID Safe Healthcare



Foundational level provides the minimum Infection Prevention and Control (IPAC) measures for preventing and managing Acute Respiratory Infections (ARIs) and COVID-19. Tier 1 (yellow and amber) and Tier 2 (red) levels provide escalation of preventative/management strategies and guidance to NSW health facilities in relation to the levels of transmission risk. Changes to risk level where state-wide, (including escalation or de-escalation) will be assessed by the Risk Escalation Review Panel (RERP) and directed by the NSW Health Secretary. Enhancement to IPAC may also be applied during foundational level, relevant to local epidemiology.

	TRANSMISSION RISK	CLINICAL & PATIENT CARE	VISITORS AND HEALTH WORKERS	GENERAL PRINCIPLES
Foundational Level Strategies	System prepared <i>Facility/unit outbreaks and/or community transmission increase</i> Implement enhanced IPAC precautions such as: <ul style="list-style-type: none"> - HWs and visitors to wear mask in clinical areas - Symptom screening (if symptomatic, RAT test) - P2/N95 respirator and eye protection when providing care to patients with COVID-19 	<ul style="list-style-type: none"> • Implement strategies^{1,2} to reduce risk of exposure • Get tested as soon as symptoms develop to enable timely access to antiviral medications • Patients with an acute respiratory infection (ARI) to wear a surgical mask on presentation and transit if able • Standard precautions. Personal Protective Equipment (PPE) as per Transmission Based Precautions (TBP) as required • Monitoring and management of cases through IPC contact tracing measures • Additional protection of vulnerable patients¹ • Outbreak management plans in place and reviewed, including notification processes 	Visitors <ul style="list-style-type: none"> • Adhere to visitor policy (see guide to healthcare visitation) • Stay away if symptomatic • Symptom screening, mask wearing for high-risk areas and for vulnerable patients Health Worker (HW) <ul style="list-style-type: none"> • Positive HW - stay home until acute symptoms resolve; asymptomatic positive RAT / PCR stay home at least until day 3 (see HW return to work) • Additional controls for vulnerable patients¹ 	<ul style="list-style-type: none"> • Vaccination (COVID-19 & flu) recommended/required • Symptomatic testing /stay home if symptomatic or confirmed COVID-19 / flu • Infection Prevention and Control² <ul style="list-style-type: none"> - Hand/respiratory hygiene - PPE including masks / eye protection - Close contact monitoring for symptoms - HW training on IPAC principles - Airborne Precautions for AGPs /Aerosol generating behaviours • Optimise ventilation⁴ • HW to wear surgical mask and eye protection (≤1.5m) for all ARIs and as per risk assessment • HW – P2/N95 respirator and eye protection to be worn when managing suspected or confirmed COVID-19 and other communicable diseases patients as per TBP directions
Escalation Strategies Tier 1				
YELLOW	Low to moderate transmission risk	<ul style="list-style-type: none"> • All Patients to wear a surgical mask on presentation and during transit if able • Testing of suspected COVID-19 / flu / RSV and symptomatic ARI patients 	<ul style="list-style-type: none"> • HW to wear surgical mask and eye protection for all ARIs • HW and visitors to wear surgical mask in clinical and patient facing areas 	<ul style="list-style-type: none"> • Consider increasing areas of mask wearing where indicated including publicly accessible areas
AMBER	Moderate to high transmission risk	<ul style="list-style-type: none"> • All patients to wear a mask on presentation and during transit if able • Symptomatic and selected surveillance testing of patients • Zoning of patients as required 	<ul style="list-style-type: none"> • HWs and visitors to wear surgical mask including non-clinical areas and shared spaces (e.g., on entry, corridors, office spaces) 	High community prevalence and/or outbreak <ul style="list-style-type: none"> • Outbreak management plan activated and scaled up • Mask wearing for visitors³ • Limit visitor numbers • Staff surveillance testing • RAT screening of visitors • Surge workforce, if required • PCR COVID-19 / flu testing • National medical stockpile – deployment of additional PPE if required • Enhanced surveillance testing of patients
Tier 2				
RED	High transmission risk	<ul style="list-style-type: none"> • Universal surgical mask wearing • All ED HWs and HWs providing direct care in clinical areas to wear P2/N95 respirators and eye protection. 	<ul style="list-style-type: none"> • Capacity limits, contingency staffing • Work from home, where possible • Selected surveillance testing for HWs 	

¹ For example, Standard and TBP, isolation/cohorting, PPE (Mask + eye protection), case identification, in-hospital primary contact tracing, hand hygiene, cough/respiratory hygiene, optimising well-ventilated settings, environmental cleaning. **For vulnerable patients (examples include but not limited to immune compromised, immunodeficiency, transplant) in protective precautions.**

² Implementation of IPAC measures determined by CEC principles, facility IPAC guidelines in accordance with local risk assessment and Work, Health & Safety policies.

³ Aged care and disability residential care settings only. Visitors not required to wear masks at base level (so residents can see faces). However, facilities to assess their own risk and may require visitor mask wearing at all times.

⁴ Refer to published guidance [Optimising ventilation for infection prevention and control in healthcare settings](#).