

Friday 3rd September 2021

Dear Friends

Update: COVID-19 Alert – Harbison Moss Vale

As announced by SMS last night, the suspected cases of COVID-19 at Moss Vale have returned negative PCR tests. We are very grateful for the same-day testing of the samples, which allowed us to cancel the alert at 6:30pm.

The visitor restrictions announced earlier this week have also been cancelled, because we are satisfied that the case confirmed at Southern Medical Practice is not linked to Harbison. Thank you for your understanding as we investigated that situation.

Appointments to visit on compassionate grounds, for end-of-life, or to support new residents are now reinstated. If your appointment was cancelled, our staff will contact you to make new arrangements.

I do not expect this will be the last alert in the pandemic. I am pleased to report that our outbreak management plan, coordinated by our outbreak management team, ran smoothly. My thanks to Leah Willis, our Infection Prevention & Control Coordinator, who made all the right moves and the difficult calls yesterday. It is a high-pressure role!

When I arrived on site last night I was impressed to see how quietly and calmly the teams were getting on with the massive job of setting up our outbreak management equipment. I was not surprised to see so many staff and managers who had stayed back to get the job done. Thank you. But I was surprised, and humbled, to see the off-duty staff who had turned up to help. I am very lucky to work with you, and we would not be Harbison without you. Next time someone asks you what you do, tell them you are a hero.

Next time might be the real thing. Yesterday was valuable experience. An outbreak will be very disruptive to normal services, and most staff will be impacted by sudden and unavoidable changes to their rosters.

I know it can be confusing, but it is important to understand the basic principles. In the absence of a direction from public health to the contrary, we expect that staff at the exposed site will be required to test, and in some cases may be required to isolate. Pending receipt of the test results essential staff may be required to work and will not be permitted to attend any other site. This will be a time of uncertainty, but as we saw yesterday the testing system can produce fast results when needed. Anyone who shares a household with those staff will also need to test and may be prevented from



attending their usual place of work. Unvaccinated staff, including staff who have had their first dose in the past 14-days, will be redeployed or, if that is not reasonably possible, stood down. I note that in 14-days all staff will be vaccinated in accordance with the new public health order unless they are medically contraindicated. As quickly as possible we will move to 12-hour shifts to compensate for unavailable staff.

What does all this mean? Put simply, we will quickly identify which staff are available to work and reorganise them to meet the needs of our residents in the initial hours of an outbreak. Some staff will find themselves redeployed, stood down, in self-isolation, working-from-home, or on different shifts. Regardless, we will work as a team to support each other and to ensure our residents have the care they need.

The great news is that 95% of our workforce and 91% of our residents are vaccinated. We anticipate that soon visitors who are fully vaccinated will have more freedom to visit residents who are vaccinated, and we hope to provide more information about that by the end of the month.

The cause of yesterday's alert was positive rapid antigen test results. Harbison has invested in rapid antigen testing to increase our ability to detect infection early. It is one of many strategies we are using to keep everyone at Harbison safe. The advantage of rapid antigen testing is a result within minutes. The disadvantage is that the accuracy of the test is lower than PCR tests, which means the risk of false positive or false negative results is higher.

I have already received helpful hindsight advice from people who think that yesterday's alert was unnecessary. We will continue to use rapid antigen testing and will always err on the side of caution by declaring an alert before we have all the facts we would like. If we wait, we might be too late. If the PCR test had confirmed the suspected cases, we were already on an outbreak footing and we know from outbreaks at other aged care providers that response time is of the essence.

I am sorry to anyone who was concerned or confused yesterday. Our team will review the event to learn and improve. We welcome your feedback and thank you for reading these letters.

Yours sincerely,

A handwritten signature in black ink, appearing to read "D. Cochran".

David Cochran
Chief Executive Officer