



Monday 10th January 2022

Dear friends,

This letter follows my letter dated 5th January 2022 and provides an update about the COVID-19 outbreaks at Burradoo and Moss Vale. As usual this information is being widely shared.

Outbreak update

We continue to coordinate our response with the public health unit and meet with their Outbreak Management Team every two-days. Our Outbreak Management Team meets daily.

We now have one case of COVID-19 in Mandemar (Moss Vale) and five cases in Alexandria (Burradoo).

I am pleased that our early response to the outbreak has so far contained the outbreak in Alexandria, and we are not surprised to see a case in Mandemar because the data has been pointing that way since the Moss Vale outbreak was declared.

Our hostel and dementia residents are not currently confined to their rooms and the dining rooms have reopened for those residents. Residents must stay within their area, in accordance with instructions from staff. Motiview is operating on a limited basis at Moss Vale.

Every available member of staff is working 12-hour shifts. Fifty-three staff have been furloughed because they have been infected or had a high-risk exposure, but I am pleased to report that some furloughed staff are returning to work after eight-days. Our most acute staff shortage is in nursing, but our catering, administration, and personal care teams have all been affected. Annual leave is being cancelled in some cases and new applications for annual leave are not being processed.

It is important to remember that these outbreaks have been caused by unprecedented community transmission, not by a failure of our infection prevention and control systems. Our early detection, rapid and competent response, and high testing and PPE capacity have contained and slowed the spread of the virus within our homes.

Unfortunately, like workforces in other sectors, our workers are vulnerable when they leave work, and we continue to experience daily new cases and exposures for our staff.

Harbison

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Registered NDIS Provider

Burradoo

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Burradoo NSW 2576
F 02 4868 6476

Moss Vale

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Moss Vale NSW 2577
F 02 4869 3214

Resident testing protocols

Based on current guidelines and our risk assessment, the following testing protocols are in place for residents:

- Weekly rapid antigen testing is the minimum test frequency during the outbreak.
- If a worker case is detected, then the frequency of rapid antigen testing in that area increases to every 72-hours.
- If a resident shows signs or symptoms, then the frequency of testing in that area increases to daily and residents are confined to their rooms where practicable for 7-days if no positive test is returned.
- If a resident tests positive, then that resident is no longer subject to rapid antigen testing (but may require a PCR test) but other residents in the area isolate in their room and continue daily surveillance.

Background statistics

For context, we are currently two of 495 COVID-19 residential aged care services with outbreaks in Australia (bringing the pandemic total to 907, as of 8th January 2022).

For the first time, more services have had an outbreak than have not. Like Harbison, active workforce infections outnumber active resident infections. Since the pandemic began 420 residential aged care outbreaks have been resolved, so with 495 concurrent active outbreaks you can understand that the system is under extreme pressure.

Wingecarribee had 1,807 reported cases as of 8th January 2022, and our local health district has the second-highest number of cases in the state. The true number is likely much higher. While the local picture represents an unprecedented increase, we are still doing well compared to other local government areas.

Hospital transfer for COVID-19 cases – making an informed choice

We strongly recommend that residents with COVID-19 choose to go to hospital for their care. We do not have enough nurses to provide the usual one-on-one care and may not have enough capacity to adequately manage pain. We respect the choice to remain at Harbison for end-of-life if your prognosis is poor, but the choice needs to include acceptance that the end-of-life dignity and respect we usually provide may not be possible.

The public health unit has advised us to transfer COVID-19 patients to hospital at the first sign of deterioration, because older adults have been found to deteriorate very quickly from there and early intervention may be beneficial.

Regardless of your preference, if our nursing shortage becomes any more acute, we will have no choice but to override a choice to remain at Harbison in the interests of maintaining care for our other residents.

Please consider updating your advance care directive to ensure it reflects your wishes.

Partnerships in Care – further information

We have had a positive response to the Partnerships in Care program. Unlike visitors, Partners in Care are not required to pay for their rapid antigen test when they enter Harbison.

If you are interested in becoming a Partner in Care your first step is to advise Mark Jeffery by email on mark.jeffery@harbisoncare.org.au or 02 4868 6301 during office hours.

Reaccreditation of Harbison Burradoo

Despite the outbreaks, life goes on. Every three years we must pass a quality audit to maintain government funding for the care of our residents. The audit is performed on an unannounced basis, which means we do not know when it will happen. Attached is a notice of the audit and we invite residents and their representatives to speak to the quality assessors when they visit.

Next Zoom outbreak update – Wednesday 12th January 2022, 11am

If you have not registered, the following link allows family members and representatives to register for the weekly Zoom outbreak meeting:

<https://us06web.zoom.us/meeting/register/tZYkdeGhrT4tGNeJm7DaxXfhxObfKxrQMLus>

The 1-hour meeting is intended to provide you with an opportunity to ask me questions and share your experiences and suggestions. We had a very good turnout at the first meeting last week and recommend the meeting to every family.

Thank you for reading this letter. We will provide further updates as circumstances change.

Yours sincerely,



David Cochran
Chief Executive Officer



Australian Government

Aged Care Quality and Safety Commission

Harbison Burradoo 2658

Quality assessors from the Aged Care Quality and Safety Commission (Commission) will be visiting to check the quality of care and services at Harbison Burradoo.

This assessment is called a site audit. The audit will be unannounced, so the service will not be aware of which day or week the audit will be conducted.

When quality assessors visit the home, you (or someone who represents you) will be given the opportunity to talk to an assessor about the quality of your care and services.

You (or someone who represents you) can also provide information *prior* to the audit. You can do this by calling the Commission on **1800 951 822 (press option 2)** or completing an online survey with the Commission.

The survey asks about your experience of quality and safety at your aged care service. You can access this survey at the following address. <https://www.agedcarequality.gov.au/consumer-feedback>. To open the survey, use the code **2658**.

The Commission respects the privacy of your information and will not provide us with the details that you have discussed with them, unless you agree to this, or where they are very concerned about your care.

Your personal information and comments will be used by quality assessors when conducting the site audit, and also when they prepare their report about the quality of care and services provided here.

For information on the Commission's privacy policy and practices, please refer to the Commission's website [agedcarequality.gov.au](https://www.agedcarequality.gov.au) or contact the Commission on **1800 951 822**.

If you need interpreter assistance, please call Translating and Interpreting Service (TIS) on **131 450** and ask for Aged Care Quality and Safety Commission.