

Friday, 11 February 2022

Dear friends

This letter follows my letter dated Thursday, 27 January 2022 and provides a general update about the COVID-19 outbreaks at Burradoo and Moss Vale, which began on 28 and 29 December 2021 respectively. As always, we are committed to the principle of transparency, which means this letter is not only shared with residents and their representatives and our workforce, but also with local GPs, our company members, and the wider community.

Outbreak update – resumption of visits from Monday, 14 February 2022

Harbison Burradoo was cleared of outbreak on Monday, 7 February 2022 and, provided there are no new cases in the next 72 hours, Moss Vale will achieve that status on Monday, 14 February 2022. As announced at the Families Meeting last Wednesday, 9 February 2022, for operational reasons we will bring both sites out of outbreak at the same time on Monday, 14 February 2022.

From that date visits to residents may resume, under the following conditions:

- Visiting hours will initially be limited to between 10am and 4pm, seven (7) days. If these times are impossible for you, please contact Rabin Joshi (rabin.joshi@harbisoncare.org.au) at Burradoo or Rebecca Glover (rebecca.glover@harbisoncare.org.au) at Moss Vale during office hours to discuss alternative arrangements.
- Partners in Care are not subject to visiting hours and should continue to visit according to their agreed Care Plan.
- Your COVID-19 vaccination must be up to date. This means two (2) doses at the time of writing this letter, but yesterday the Government announced that the definition will soon require a booster dose. As we have previously recommended, you should organise your booster dose as soon as you are eligible to avoid exclusion. If you are medically contraindicated for the booster, please contact Leah Willis (leah.willis@harbisoncare.org.au) during office hours to discuss your circumstances. There are exemptions in place for end-of-life visits.
- A negative Rapid Antigen Test (RAT) is required immediately prior to entry. We will provide the test kit for you to administer under the observation of our staff. If you prefer, you may supply your own RAT kit. Visiting health professionals are not required to wait for their result before commencing their visit, but all other visitors must wait so please allow the 15-minutes required for the test when planning your visit.
- You are required to perform hand hygiene before and after you sign in, using the alcohol-based sanitiser provided.
- Visitors must always wear a surgical mask, which we will supply. In some cases, we may require a visitor to wear additional PPE. If you are visiting Alpine, Avoca, or Harbison Dementia Living at Burradoo you may request permission from staff to remove your mask for the purposes of non-verbal communication, if permission is granted then social distance must be maintained.

Harbison

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www.harbisoncare.org.au

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Registered NDIS Provider

Burradoo

2 Charlotte Street
Burradoo NSW 2576
F 02 4868 6476

Moss Vale

36 Yarrawa Road
Moss Vale NSW 2577
F 02 4869 3214

- Visits must take place in a resident's room, outdoors, or in the café which is a designated blue zone where masks may be removed to eat or drink. You must minimise interactions with staff and other residents and not linger in communal areas.
- Visits are limited to two (2) visitors per resident per day plus two (2) children under the age of 12 if accompanied by the adult visitors. Children over the age of three (3) months are required to wear a surgical mask. Partners in Care do not count towards the visitor limit.
- You are not permitted to enter Harbison if you have COVID-19 symptoms, have been exposed to COVID-19 in the past 14-days, are waiting for a COVID-19 PCR result, or have been overseas in the past seven (7) days. If you have recently arrived from overseas, you must contact Leah Willis during office hours for clearance before you visit (leah.willis@harbisoncare.org.au).

I know it is a long list, but our goal is to sustain visits and avoid further outbreaks. If everyone cooperates, we believe we can achieve that goal. We intend to review these protocols in four (4) weeks or if there are significant changes to the public health advice, with the hope that we can progressively reduce precautions.

We estimate it costs at least \$10 to screen, test, and provide each visitor with PPE. This infection prevention and control cost is born from resident's care funding, which means that funding for other services is significantly reduced. We estimate the cost to date of preventing and managing COVID-19 is more than \$710,000.00.

We ask visitors to consider donating when they visit to help offset the cost of their visit. Because we are a registered charity, donations of \$2 or more may be tax deductible. Our staff will gladly accept your donation at the door, or you can email donations@harbisoncare.org.au with your contact details.

Resident outings may resume

From Monday, 14 February, residents may resume social outings provided they comply with the same COVID-19 rules that apply to everyone. If a resident returns to Harbison on the same day, they will be required to have a RAT on days two, (2), four (4), and seven (7) but will not need to isolate unless they develop COVID-19 symptoms.

For residents who do not return on the same day the RAT schedule is slightly different – days three (3), five (5), and seven (7) after their return.

We will provide each resident with a suitable mask prior to their outing. If they are unable to wear a mask, they will require a medical certificate from their GP to avoid breaching public health rules.

Please notify us in advance of planned outings so there is enough time to make the necessary arrangements.

If a resident is on an outing when an outbreak is declared, they may wish to consider emergency leave. I refer you to my earlier letters for details of how emergency leave can be accessed.

RAT kits are available for purchase

We have had a very strong response to the RAT kits which we sell in boxes of 20 kits for \$175.00 per box. Orders should be placed online using this link <https://harbison.org.au/rapid-antigen-testing-kits/> and will be fulfilled on a first come, first served basis.

The kits we sell are rated the highest sensitivity available in Australia, which means they are very accurate. We cannot guarantee availability always, but if our supplies run low, we will hold orders and prioritise them as soon as more stock becomes available. I note that the cost of RAT kits may now be tax deductible.

Volunteers – update

Our tireless Volunteer Coordinator, Jill Wall, stepped down from her role today. Briannah Bentley will take on responsibility for coordinating our volunteers, in addition to her other responsibilities in our

People & Culture team. If you are a current volunteer, or are interested in joining our volunteers, simply contact Bri during office hours on 02 4868 6200 or briannah.bentley@harbisoncare.org.au

I'd like to thank Jill for her enthusiasm, dedication, and perseverance during the most challenging period in Harbison's history. We were founded by volunteers, and we would not be Harbison without them. We hope to expand our volunteer program and believe that there are plenty of meaningful and rewarding opportunities for people who wish to support older adults and people living with dementia in our community.

COVID-19 booster doses – update

We have circulated correspondence from the Government to our workforce and unvaccinated residents to encourage them to take up the booster dose if they are eligible. A third dose is required for protection against the Omicron variant.

Our staff have been informed of temporary workforce vaccination clinics, and all Aged Care workers can request priority appointments from State-run clinics, pharmacists, and GPs. Commonwealth in-reach clinics are being conducted at Harbison to provide remaining residents with access to the third dose, and GPs and pharmacists have been working hard to support the vaccination drive.

As of Tuesday, 8 February 2022, 82% of Burradoo residents and 61% of Moss Vale residents have received their booster dose. A rescheduled booster clinic today is expected to increase these figures. However, only 14% of Moss Vale staff and 20% of Burradoo staff have reported a booster dose. Staff are required to disclose their vaccination status because we are required to report depersonalised vaccination data weekly to the Government.

We await the detail, but the Government announced yesterday that the booster dose will be mandated for aged care workers, as part of the decision to amend the definition of fully vaccinated to include an up-to-date booster every six (6) months.

103 staff have now isolated because of exposure to COVID-19. Some of these will be waiting until they are eligible for the booster following infection, but it is critical to further easing of restrictions that we achieve 100% up-to-date vaccination of our workforce.

If we remain at high risk of staff shortages due to furlough because our workforce is not fully vaccinated, then restrictions will need to remain higher. If you are eligible for your booster please arrange it as a matter of urgency, and if you have failed to report your booster, please notify hr@harbisoncare.org.au

Molnupiravir

It's unpronounceable, but very good news. Our first shipment of COVID-19 anti-viral medication has arrived. It may be prescribed by a GP to treat infection, and consists of a course of four (4) tablets, twice-a-day, for five (5) days. We believe the possibility of an effective treatment will permit a reassessment of the risks of COVID-19 in residential aged care, and hope that we will soon see that reflected in updated public health guidelines.

Family Meetings – update

As discussed at the Families Meeting last Wednesday, that was the last weekly outbreak meeting. We will be converting the weekly outbreak meeting into a new meeting, approximately every month, which will provide families with an opportunity to provide me with feedback and share their experiences and suggestions. Invitations to the new meetings will follow in March.

Australian Defence Force (ADF) in Aged Care – explanation

You may be aware of media reports that the ADF has been deployed to supplement the Aged Care workforce. We have not been provided with any definitive information about this but note that the ADF medics and nurses are reported to be exceptional. In many cases, we understand they will be reservists, which begs the question of what impact their deployment will have on other services.

We hope we do not need the support of the ADF in future outbreaks, and if we do by then I hope that there is clear agreement about how the deployment will work. Based on our experience, I have a high degree of confidence in our ability to manage future outbreaks with our own workforce, and I again commend the staff who converted to 12 hour shifts during our outbreaks. You were **game changers!**

Welcome to Fran McPherson, EA

I am pleased to confirm that Fran McPherson has taken up the Executive Assistant role vacated by Sue Golightly on her (somewhat delayed) retirement. Fran joins Harbison from SBS in Sydney and brings a wealth of experience with her. Fran can be contacted during office hours on 02 4868 6291 or fran.mcpherson@harbisoncare.org.au

There is an election around the corner

It is a year since the Aged Care Royal Commission published their Final Report. Commissioner Lynelle Briggs recently commented that the Government should have had a better plan to avoid the current situation.

Three (3) months after Omicron was first identified there are more than 1,100 outbreaks in Residential Aged Care Services. More than 5,000 residents are infected, and more than 500 have died in the first month of 2022. The Government's Aged Care surge workforce has failed, and the ADF has been called out.

But Minister Colbeck says, in response to criticism that he prioritised attending test cricket to overseeing the national response, "I don't believe the system is in complete crisis...".

In my view, the Minister has lost the confidence of the sector and his continuation in the role reflects poorly on the Prime Minister. I do not wish to invite controversy, but in my personal view the Government has failed Aged Care again and the Minister should be accountable.

The Royal Commission found that 'the Australian Aged Care system is unacceptable and unsustainable' due in large part to 'fundamental systemic flaws' including a workforce that is undervalued, understaffed and underpaid, and services that are not funded to deliver all the care that is needed to the standards that are desired.

The Industry and Unions are currently engaged in a case for an increase to the minimum wage for Aged Care workers. While the parties do not agree on every point, there is broad consensus that our workforce is undervalued and deserves a better deal. Harbison fully supports the case for an increase, which must be funded by the Government. However, our Government has chosen not to join the case, despite the fundamental value issue identified by their own Royal Commission.

Maybe it doesn't matter. But if it does, please let your local member of parliament know. If you live locally, your local member is either the Hon. Angus Taylor MP, Member for Hume, (ph. 02 4658 7188) or Mr Stephen Jones MP, Member for Whitlam (stephen.jones.mp@ahp.gov.au).

(As an aside, I recommend Stephen's speech to Parliament this week about his son, Paddy, and nephew, Ollie. I saw Paddy respond on TV and would offer him a job at Harbison, but he's only 14.)

Thank you for reading this letter and indulging my soap box opinions. As always, we welcome your feedback and will keep you updated as circumstances change.

Yours sincerely



David Cochran
Chief Executive Officer