



11 July 2022

Dear friends,

This letter follows my letter dated 5 July 2022 and includes an important update about COVID-19 outbreaks at Harbison. We are sharing this information with residents and their representatives, our workforce, company members, local GPs, and the broader community. Note that we provide direct updates to families of any residents who are isolating due to COVID-19.

New COVID-19 outbreaks at both Burradoo and Moss Vale

Unfortunately, within hours of closing our outbreaks at Burradoo we detected new cases of COVID-19 in a resident in Alpine at Moss Vale and Lindsay at Burradoo. The infection has spread in both wings and to Joadja at Moss Vale. We are now monitoring four active cases at each site. As a result, we have declared COVID-19 outbreaks at Moss Vale and Burradoo.

Until further notice, only end-of-life visits and Partners-in-Care can visit Moss Vale. Alpine, Avoca, and Joadja are isolated from the rest of the service and residents of those wings are limited to their wing or the garden. Cases are required to isolate in their rooms, but we acknowledge that cases who are living with dementia are not always able to comply with isolation.

At Burradoo, normal visits are currently possible to residents in the hostel and Dementia Living, but visits to Alexandria, Gibraltar, Lindsay, and Chisholm are limited to end-of-life visits and Partners-in-Care. Lindsay is isolated from the rest of the home, and cases in Lindsay are required to isolate in their rooms.

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Each outbreak has been linked to visitors, including recent arrivals from overseas, or to outings, including to hospital. As we all know, there is a high and increasing prevalence of COVID-19 in the community. It is vital that everyone plays a part in keeping our residents safe by taking individual responsibility for COVID-19 safety. Please stay away if you are a household contact or unwell and consider the risks to others when you make your choices.

We intend to provide regular direct updates to families of any resident in an isolating wing, and at least daily updates to the families of infected residents. We will provide a general update at a Zoom meeting for families, which will be scheduled after we have our next meeting with the Public Health Unit.

Until further notice, the café is operating in takeaway mode. Employees are entitled to free coffee and tea from the café during the outbreak, and residents who are isolating will also be supported with access to free tea and coffee.

Blue zones have been declared for staff breaks at each site. Staff are not permitted to have their breaks together, and only one person at a time may remove their mask and face shield in a blue zone to eat or drink. It is vital that we do everything we can to prevent the spread of COVID-19 from one employee to another.

The minimum PPE required is a P2 mask and face shield, and tier 3 PPE is required in red zones.

If you would like to know more about the Partners-in-Care program so you can support a resident even in an outbreak, please contact Rebecca Glover or Elly Alcock. Contact details are:

- **Burradoo** - Rebecca Glover
E Rebecca.Glover@harbisoncare.org.au
T 02 4868 6215
- **Moss Vale** Elly Alcock
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Decommissioning the Burradoo hostel

The population of the Burradoo hostel has reduced to 31 residents, which is expected to be 27 residents by the end of the month. One of our hostel residents has decided to relocate to the Central Coast, and the others have plans to move to Moss vale or into the main building at Burradoo.

Unfortunately, the Harden Lounge was damaged in the recent rainstorms and has been closed for safety reasons. We had hoped to maintain access to the lounge until there were less residents living in the hostel, but this incident has brought forward the closure of the lounge.

Because there are fewer residents, we have rearranged the hostel dining room to promote social engagement and we have set up a lounge area in front of the dining room fireplace to provide an alternative to the Harden Lounge. Soon, our hostel staff will be offered a choice of allocations in other parts of Harbison as the need for staff in the hostel continues to reduce.

COVID-19 vaccine, 4th dose

Eligibility for a 4th dose of COVID-19 vaccine has been extended to anyone over the age of 30-years and is strongly recommended for the those of us who are over the age of 50-years. Most residents have already had a 4th “Winter” dose, but now the members of our workforce can also access a 4th dose. It is not mandatory, but we strongly recommend that everyone at least considers it. A highly vaccinated workforce allows us to minimise the impact of furloughs on our residents.

Department of Health and Aged Care

The new Government has announced that from 1 July 2022, the Department of Health will be called the Department of Health and Aged Care.

June 2022 Residents Survey results – call bell response times

Thank you to the 86 people who completed the June residents survey. We use your feedback to plan improvements to care and services.

A key question in the survey was about call bell response times. We recently made a significant investment in new call bell systems at Moss Vale and Burradoo and are implementing new policies and processes to ensure we get the best results for our residents from that investment.

Based on your feedback, we expect 70% of call bells to be answered in less than 10-minutes, 90% in less than 15-minutes, and 100% in less than 20-minutes. Any call bell which is not answered within 20-minutes will be treated as an incident. We will notify you and your representative (where appropriate) about a call bell incident, explain what our investigation of the incident revealed, describe what we will change to minimise the likelihood of recurrence, and invite you to discuss the incident with us if you wish.

To empower our teams to be more responsive, we are providing each of them with a mobile device which, among other functions, is linked to the call bell system. At Moss Vale, we have relocated nurse stations into the wings to minimise the time it takes to reach residents. We have also moved the Moss Vale staff room from near the ground floor entry to the first floor, adjacent to the higher-needs wings, and installed call bell monitors to ensure that even off-duty staff can respond promptly to an emergency.

The new system includes clever staff ID tags which automatically record when staff attend a resident's room, allowing them to focus on the resident instead of finding and pressing a wall-mounted switch. The tags also provide staff with a duress button, improving their personal safety at work.

After three-years of work, the new system will be fully operational soon but does not include the Burradoo hostel because of our plans to decommission that building.

Paradoxically, the call bell system in the Burradoo hostel was the newest call bell system operated by Harbison before this upgrade because it was installed in 2018 as part of the room refurbishment program that year. It is fit for service until the last resident leaves the hostel. When the hostel call bell system is turned off, Harbison will for the first time be operating a single, unified call bell system.

Please help our staff adjust to the new technology and processes. We will survey residents again after the new system has been operating for more than six months. We hope that improved responsiveness delivers a range of positive outcomes for residents and staff.

Conclusion

I am sorry to be writing again about COVID-19 outbreaks.

It is important to understand that we are not alone. There are currently 737 outbreaks in Australian residential aged care services, and each service has had more than two outbreaks on average. In Australia, 97% of services have reported COVID-19 cases. There are currently 14,530 reported active cases of resident and staff cases in residential aged care services, which is about 5% of all reported active cases in Australia.

Given the relatively high risk in residential care settings, the aged care sector is effectively managing the risk with infection prevention and control strategies. But we need your help! Unless everyone works together, infections can too easily spread to vulnerable people.

No country has been able to avoid outbreaks in residential aged care when there is widespread community transmission, but Australia is doing well compared to e.g., Canada where the rate of COVID-19 deaths in residential aged care is more than six times higher than Australia.

Our goal is to prevent the spread of these new outbreaks, to allow us to close the outbreaks as quickly as possible, to minimise the impact on residents, families, and staff. That goal depends on teamwork and skill.

We restrict visitors as a last resort, to reduce the demand for PPE, RAT kits, and supervision, and to reduce the number of people moving between the community and Harbison who might introduce new infections which will prolong the outbreaks. As always, we are working closely with the Public Health Unit, and we hope to ease restrictions for some residents within a week if the outbreak does not spread.

- If you would like to send messages of encouragement to our staff during the outbreak, please use the online feedback system at <https://harbison.org.au/contact-harbisoncare/feedback/>
- If you would like to nominate a member of staff for the Rewards & Recognition scheme, simply use this link <https://tinyurl.com/2p8yeea6> or QR code



Thank you for reading this letter. Updates will follow as circumstances change.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'D. Cochran', with a long horizontal flourish extending to the right.

David Cochran

Chief Executive Officer