

Arcare COVID-19 Outbreak Response

Frequently Asked Questions

MANAGEMENT

1. How is a situation at a COVID-19 positive residence managed each day?

The Residence Manager or Senior Nurse is on-site to 'lead' the outbreak team and are supported by a member of the quality team.

To reduce the transmission of infection, cleaning and disinfection is increased in line with the Department of Health recommendations and our Infection Control Consultant with additional cleaners brought in wherever needed. Waste management measures include additional bins which are securely fenced and emptied regularly.

If clients have tested positive, they are clustered together to protect the negative cases. This is often described as "cohorting" and may mean changing suites for a period of time during the outbreak.

All on-site personnel have completed online infection control and COVID-19 education as well as a practical assessment in donning and doffing of personal protective equipment (PPE) and hand hygiene. Additional education has been provided on wearing masks and face shields. Upon an outbreak, reminders, policing, and toolbox education is provided to all team members.

2. How is a COVID-19 positive situation approached by Arcare's management team?

A management meeting is held every morning seven days per week. The leader on site provides an update on supplies, client and team member medical and emotional well-being, workforce issues and other topics as required. This meeting is an opportunity to escalate any concerns or additional needs to the Arcare Crisis Management Team which meets bi-weekly.

Membership of this team includes the CEO, State Operations Manager, Human Resources Manager, Communications Manager, Clinical Governance Manager, Infection Control Specialist, Regional Services Manager and Residence Manager.

3. How does Arcare communicate with clients, families, team members and the media?

During an outbreak, Arcare will communicate with the relevant residence community daily initially and, once things settle, frequency will be reduced accordingly. Arcare will inform the national Arcare community every few days so that everyone is updated. Media Statements will be released as required. All community communications can be assessed on the Arcare website.

4. How does Arcare management communicate with relevant State and Federal Government Agencies?

A team member from the Public Health Unit (PHU) is assigned to assist each positive COVID-19 site with any issues or concerns. Guidance is provided on team members returning to work, workforce issues and accessing government supplies of PPE.

There are also regular meetings held between Arcare and the Aged Care Quality and Safety Commission and the Commonwealth and State Departments of Health.

5. What medical support takes place each day?

During an outbreak, the “normal” channels of day-to-day medical support are replaced with telehealth appointments to minimise access to and movement around an outbreak site.

The in-reach team from the local hospital also supports an outbreak residence by physically coming on site with a Geriatrician and senior nurses to review processes and practices and identify improvements, and to provide medical care to clients often on a daily basis.

6. Is there enough PPE?

When there is a confirmed case of COVID-19, the government supplies the PPE that is required. We are also continuously sourcing our own additional PPE stock that we store in a central location for immediate transfer to an outbreak site.

Stocktake of PPE is conducted daily at an outbreak site and weekly at all other sites, including the central location stores. These figures are supplied weekly to our Procurement team to ensure supply is maintained at appropriate levels.

7. Do you advise who the infected people are?

Clients and their nominated representative are advised in the event they test positive to COVID-19. Privacy legislation does not allow us to provide the identity of infected clients, team members or contractors to others.

8. Where can I find the total number of positive COVID-19 cases at Arcare?

The number of cases at Arcare are updated on our community updates which are saved on our website. [This is the link.](#)

9. How long are outbreak precautions in place?

This is a PHU decision, however, strict outbreak precautions are required for at least 14 days from the last person testing positive to COVID-19. After the 14 days and throughout the process, the PHU provides guidance on the precautions required depending on individual circumstances.

10. Are clients, team members and contractors retested after recovery from COVID-19?

This is currently guided by the Communicable Disease Network Australia (CDNA) COVID-19 isolation release guidelines. The PHU provides directives to the site depending on requirements of the outbreak.

CLIENTS

11. Can I take my family member/friend home to live with me from an outbreak site?

Every client's circumstances are different so a request would need to be submitted to the Residence Manager who in turn would consult with the Department of Health for approval. For non-outbreak sites if the client is otherwise well you can take them home.

Having said that, given the risk to both the client whilst out in the community and to their fellow residents and the Arcare team on their return, it is not something we encourage. If you are considering this option, please submit a request to your Residence Manager and you will be taken through the process.

12. Will you send people who test COVID-19 positive to hospital?

This is a PHU decision. We can confirm that two private hospitals are on standby to take any Maidstone clients with confirmed COVID-19.

13. Will clients be quarantined/isolated to their rooms?

During an outbreak, clients will be required to remain in their rooms at all times apart from supervised exercise, where clients will be required to wear PPE (wherever and to the extent possible taking into account each client's particular limits regarding the ability to wear PPE). We commit to additional hours for our lifestyle teams so that one on one support can be provided to those clients who need it.

14. How does it impact further visitation?

During an outbreak, there will be no access to visitors due to the risk of infection transmission to visitors and the Arcare internal community, unless in exceptional circumstances such as end of life. This needs to be approved by the Residence Manager and full PPE must be worn. Numbers of visitors and the length of visits may also need to be limited.

15. What happens to lifestyle activities, minor repairs, and maintenance during an outbreak?

Lifestyle activities will be suite-based and approached on an individual basis. Activities can include lifestyle team member visits for one-on-one activities such as chats, quizzes, games and assistance with computer and phone access to communicate regularly with families and loved ones.

Essential repairs and maintenance continue with our maintenance team remaining on site throughout an outbreak and being subject to the same rules concerning the donning and doffing of PPE and movement around the residence.

16. How will it impact food and food delivery to clients?

A surge workforce is put in place during an outbreak. This may see pre-preparation of frozen meals if required and tray service (akin to hotel room service) throughout the residence. Meals may be served on plastic plates and disposable cutlery may need to be utilised as part of the overall containment approach. Unfortunately, this may mean meals may come a little cooler than normal despite all efforts to keep warm.

TEAM MEMBERS

17. Do team members move between residences and hospitals?

As of 31 May, we have directed our staff members to nominate a principal residence from which to work, supported by Federal funding to assist those team members so that they do not lose vital income. This initiative is in place until 10 June but may be extended depending upon levels of community transmission and outbreaks in residential aged care in particular.

18. Will there still be dedicated staffing?

Team members are designated to area-specific tasks and zones, and do not move between areas to minimize possible infection transmission. Dedicated client staffing will continue whenever possible.

19. Is COVID vaccination of staff and clients mandatory?

Currently there is no law making the COVID-19 vaccinations that are available in the community mandatory to our staff. It has always been a question of choice for our clients.

This issue is something that Arcare and its legal and clinical teams are closely monitoring and seeking advice on. In the meantime, we are actively encouraging and supporting our team members to get the vaccination available to them as quickly as possible. That support will include paid leave to obtain the vaccination and working with Government and the private sector to find a way to bring private vaccinations to our residences for our teams to improve and encourage uptake.

We will also be actively supporting the initiative of the Victorian Government announced Tuesday 1 June 2021, to provide priority access to our team at walk-in vaccination hubs around Victoria from Wednesday 2 June to Sunday 6 June 2021 between 9am and 4pm.