

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.

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 initially communicate with the relevant residence community daily and, as things settle, frequency is reduced accordingly. Media Statements will be released as required.

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.

5. Who is the Public Health Unit (PHU) and what do they do?

The Public Health Unit is the local arm of the State Government. They are responsible to managing outbreaks in residential aged care.

The PHU decide everything from who are considered close contacts, how long contacts needs to isolate for, how often testing occurs, and when the outbreak can be stood down.

6. How long are outbreak precautions in place?

This is a PHU decision, that depends on the details of the index (first) case, among numerous other factors. Generally, we advise to expect 10 days of outbreak precautions, although we will provide clearer timelines in our updates as that information becomes available from the PHU.

7. What is the planned procedure for opening?

Unfortunately, we are guided by the PHU as to how and when we open and therefore, we are unable to give a definite answer.

8. 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.

9. Is there enough PPE?

Stock take 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.

10. 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.

11. 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.

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

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

CLIENTS

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

All client 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/ PHU 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.

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

This is a PHU decision.

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

During an outbreak, clients will be asked to remain in their rooms. We commit to additional hours for our lifestyle teams so that one on one support can be provided to those clients who need it.

Clients who are unable to safely isolate in their rooms will be closely monitored by team members with additional cleaning and infection control processes in place.

Where possible, clients will be encouraged to access fresh air and exercise.

16. 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 PHU and Residence Manager and full PPE must be worn. Numbers of visitors and the length of visits may also need to be limited.

17. 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.

18. 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.