



**SAMARINDA**  
locals for locals

16<sup>th</sup> July 2020

MEMO TO: To all Samarinda residents, families and staff  
FROM: Mark Zentgraf  
SUBJECT: COVID-19 update

286 High Street,  
Ashburton, Victoria 3147  
Telephone 1300 591 464  
Facsimile 03 9092 0997  
www.samarinda.org.au  
*a community not for  
profit organisation*

*Our Services*

- RESIDENTIAL CARE
- COMMUNITY CENTRE
- THE 'ASHY' OP SHOP

To Samarinda residents, families and staff,

This memo is to provide you with an update on the impacts of COVID-19 on the day to day practice of Residential Staff.

As the risk of COVID-19 becomes more serious in Victoria, the State Department of Health and Human Services has updated its recommendations (see attachment) on the use of masks in aged care.

In line with these recommendations, staff will now be required to wear masks when providing direct care and when in close contact with residents (where social distancing cannot be maintained) to offer further protection from the potential spread of COVID-19. In addition, we are also minimising movement of people between wings and floors of the Lodge and trying to ensure that staff are being consistently rostered into the same wings.

We understand that some of these strategies may detract from Samarinda Lodge having a home like feel; however believe it is necessary for reducing the potential spread of COVID-19 to our residents and / or staff.

Once again we thank you for your support and understanding during this time.

Yours sincerely,

Mark Zentgraf  
Chief Executive Officer  
Samarinda

Samarinda Ashburton  
Aged Services Inc.  
ABN: 48 522 054 140

Incorporated Association  
registration number:  
A0023229J



# Coronavirus (COVID-19) Advice for residential aged care

staff and visitors in metropolitan Melbourne and Mitchell Shire

13 July 2020

## Who should read this?

This factsheet is for residential aged care services (RACFs) located in the Stage 3 'Stay at Home' restricted areas of metropolitan Melbourne and Mitchell Shire.

This information is for staff, associated staff and visitors, including health practitioners and volunteers at residential aged care services in these restricted areas.

## Why do services need to escalate the outbreak management plan?

The Department of Health and Human Services advises that RACFs located in metropolitan Melbourne and Mitchell Shire should escalate their outbreak prevention measures due to the increased community transmission of coronavirus (COVID-19).

## What additional escalation measures are recommended?

As outlined in the *COVID-19 Residential Aged Care Facilities Plan for Victoria*, the recommendation is to transition from *Stage 1: initial containment* to *Stage 2: targeted action*.

All residential services located within a designated restricted area - as identified by Victoria's current restriction levels <https://www.dhhs.vic.gov.au/victorias-restriction-levels-covid-19> - should consider implementing the following additional escalated outbreak prevention measures as a matter of priority:

### For residents

- Implement daily screening of residents for symptoms of coronavirus (COVID-19) using the *COVID-19 screening tool for residential aged care services*, including taking daily observations - especially temperature.
- Defer routine medical appointments and medical investigations or the non-essential movement of residents in and out of the RACF and consider alternatives such as telehealth consultations.
- Minimise non-essential transfers of residents.
- Consider whether communal dining should continue, taking into account whether all infection prevention control precautions can be maintained at all times, including physical distancing, hand hygiene and, cleaning of high-touch surfaces.
- Cohort resident groups with dedicated staff to minimise potential transmission.

### For staff, workers and visitors

- Discourage non-essential visitors, staff and volunteers.
- Introduce a dedicated staffing model across the service in order to cohort staff groups to minimise transmission risk.

- Where possible, minimise staff members (clinical or non-clinical) working across different units or sites to minimise impact if there is an outbreak.
- Keep a record of staff who work across other sites or workplaces to assist with contact tracing, should there be a positive case or cases of coronavirus (COVID-19).
- Review and consider limiting staff planned leave to allow for workforce surge capacity.
- Limit non-essential staff meetings and consider alternatives such as teleconferencing.
- Postpone routine educational meetings or conduct via other methods such as video conferencing or webinars.

#### **For the facility**

- Reinforce the importance of infection prevention and control precautions.
- Implement daily to twice daily environmental cleaning and disinfection in accordance with case and contact management guidelines [Coronavirus disease 2019: Case and contact management guidelines for health services and general practitioners](#).
- Review supplies of disposable crockery and cutlery, as this may be advised to be used in the event of a positive case or cases of coronavirus (COVID-19).
- Complete a stock take of all consumables, including Personal Protective Equipment (PPE), (eye protection, masks, non-sterile gloves and gowns), hand hygiene products (including alcohol-based hand rub), testing swabs and cleaning supplies.
- Consider asking staff who are not required on site to work from home when they are not required in person.
- Review that there are appropriate signs in place at the entrances and other strategic locations within the RACF to inform residents, staff and visitors of the infection prevention and control requirements.
- Ensure regular, clear and transparent communication about the enhanced outbreak management strategy and actions is provided to all residents, families, staff, regular visitors and volunteers.

#### **In addition, it is recommended that the following escalation measures be considered**

- Quarantine all new admission/readmissions from hospitals in metropolitan Melbourne or Mitchell Shire for 14 days in a single room with ensuite (where possible). Strategies for providing support to the resident while in quarantine will need to be implemented, including a risk assessment and consultation with their medical practitioner.
- Prepare for additional resident emergency leave requests from family members.

## **What are the recommendations for the use of masks in RACFs?**

- For staff, clinical visitors and workers in RACFs in metropolitan Melbourne and Mitchell Shire, where there are no positive cases of coronavirus (COVID-19), it is recommended that they wear single use face masks (surgical masks) when they have a role that involves interaction and contact with residents. Under these circumstances:
  - wash your hands before and after putting on the mask.
  - do not touch the front of your mask while putting it on, wearing it or taking it off. The mask must cover the mouth and nose.
  - masks should not be worn for more than four hours. They should be changed before four hours if the mask is soiled, contaminated, damaged or damp.
  - if masks are removed, they must be immediately disposed of. Masks must be removed during breaks. Masks must not be pulled down to eat or drink or worn around the neck.
- Staff must undertake a risk assessment as to whether other PPE is required when providing care to residents. Please refer to [PPE Guidance for residential aged care](#).
- For staff who are working in a RACF where there is an outbreak, or where they are working with a coronavirus (COVID-19) positive resident, please refer to [PPE Guidance for residential aged care](#).
- For visitors who are coming from the restricted areas of metropolitan Melbourne and Mitchell Shire, to visit RACFs not within restricted areas, facilities should consider recommending all visitors wear their own face

mask/cloth mask at the RACF. If they do not have one, or a suitable face mask, the RACF should consider providing a single use face mask for visitors to wear while visiting. Visitors are required to comply with any staff directions around PPE requirements while attending the RACF. Visitors must continue to practice physical distancing, coughing and sneezing etiquette and hand hygiene while at the RACF.

- Residents who are leaving the RACF may wish to wear a single use mask/cloth mask for their protection. This is particularly the case if they are unable to physically distance.

For further advice refer to the *Coronavirus (COVID-19), Plan for the Victorian Aged Care Sector*

<https://www.dhhs.vic.gov.au/aged-care-sector-coronavirus-disease-covid-19>

## What should RACFs in the restricted areas of metropolitan Melbourne and Mitchell Shire change about entry to the facility?

RACFs in restricted areas should communicate that visiting is discouraged, unless essential. Visitors are permitted when required for care giving, and for compassionate reasons in accordance with the [Care Facilities Directions](#).

## Are there any restrictions on who can be admitted or transferred to a residential aged care facility?

No. There are no restrictions on residents from restricted areas being admitted or transferred to RACFs. RACFs should consider whether new admissions/readmissions/transfer should be quarantined for 14 days if they are coming from a restricted area.

## Are there any restrictions on staff or essential workers who live in restricted areas?

No. There are no restrictions on staff or essential workers from restricted areas attending work where this is required in person. All workers must be screened, and any workers who are unwell must not work. Any worker who has COVID-19 symptoms, no matter how mild, must be tested, and cannot return to work until they have received a negative result. Those who can work from home, should work from home.

## Should RACFs restrict visits from people from restricted areas?

Visitors from restricted areas should be discouraged except where the visits are for care giving and compassionate reasons. While all RACFs should discourage visitors from restricted areas, they should refer to the permissible reasons for visits outlined in the [Care Facilities Directions](#)

The [Care Facilities Directions](#) should be followed, and if any change is required, that will become a requirement through the action of the Directions. Facilities should consider recommending that all visitors from restricted areas wear their own face mask/cloth mask while attending a RACF that is not within a restricted area. If they do not have one, or a suitable face mask, the RACF should consider providing a single use face mask for visitors to wear while visiting. Visitors are required to comply with any staff directions around PPE requirements while attending the RACFs. Visitors must continue to practice physical distancing, respiratory etiquette and hand hygiene within the RACFs.

Visitors from restricted areas, who pass screening are not required to show evidence that they have been tested as a condition of their visitation.

RACFs should not request evidence of a visitor's address in order to prevent entry. If there is concern about behaviour in breach of restrictions, RACFs should follow the suggested process in the [COVID-19 Residential Aged Care Facilities Plan for Victoria](#), and explain that the consequences of non-compliance places the health and safety of residents, staff and the community at risk. As a last resort, the matter should be referred to Victoria Police.

## What restrictions should be in place for RACFs situated within restricted areas?

RACFs within restricted areas should communicate that visiting is discouraged, unless essential. Visitors are permitted when required for care giving, and for compassionate reasons in accordance with the [Care Facilities Directions](#).

## Is testing for coronavirus (COVID-19) mandatory for staff or visitors from restricted areas to enter RACFs?

No. Staff and visitors from restricted areas, are not required to be tested, and are not required to show evidence that they have been tested as a condition of their employment or visitation. Visitor entry to the facility is determined by the [Care Facilities Directions](#).

Workers and visitors who undergo asymptomatic testing are able to continue to work while they await their test results. Visitors and workers who are symptomatic who have a test **must not** work and **must stay at home** while they await the results of their test.

## What screening should RACFs have in place?

Symptom and temperature screening should remain in place in all facilities, as detailed in the [Care Facilities Directions](#).

- Coronavirus (COVID-19) screening in RACFs includes:
  - That they have not arrived in Australia from overseas in the last 14 days, and
  - That they have not had known contact in the last 14 days with a person who is a confirmed case of coronavirus (COVID-19), and
  - They do not have a temperature over 37.5 degrees, or symptoms of acute respiratory infection (fever, sore throat, cough, shortness of breath or other respiratory symptoms), and
  - That they have not been diagnosed with coronavirus (COVID-19) and not yet been given clearance from isolation, and
  - That they meet the Influenza vaccination requirements.

Staff and visitors from restricted areas who are not required to be tested and are not required to show evidence that they have been tested as a condition of their employment or visitation. Visitor entry is determined by the [Care Facilities Directions](#).

Unwell people must not enter the RACF and get tested.

Daily screening of residents for symptoms of coronavirus (COVID-19) should be implemented utilising [COVID-19 screening tool for residential aged care services](#). This should include taking daily observations, and resident temperatures.

## Are there any changes to Person Protective Equipment (PPE) guidelines?

While the guidelines have not changed, as above, there are now recommendations about mask usage in RACFs for staff, clinical visitors and workers with client contact.

For more information see [Access to PPE for Residential Aged Care Facilities in Victoria](#) and [PPE Guidance for residential aged care](#).

## Where can I get more information?

The Victorian and Commonwealth governments have developed COVID-19 aged care specific websites with resources and guidelines.

The situation and action required is changing rapidly. We recommend you regularly check these websites, and subscribe to updates:

### **Department of Health and Human Services (Victoria)**

<https://www.dhhs.vic.gov.au/aged-care-sector-coronavirus-disease-covid-19>

<https://www.coronavirus.vic.gov.au>

<https://www.dhhs.vic.gov.au/coronavirus-covid-19-daily-update>

### **Department of Health (Commonwealth)**

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/coronavirus-covid-19-advice-for-the-health-and-aged-care-sector>

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/advice-for-people-at-risk-of-coronavirus-covid-19/coronavirus-covid-19-advice-for-people-in-aged-care-facilities>