



CASE STUDY: Melaleuca Home for the Aged experienced a COVID-19 outbreak

Simone Collins has been the Chief Executive Officer of Melaleuca for the last three years. She has provided a firsthand account of their battle against COVID-19.

Prior to the outbreak there was a lot of preparation at Melaleuca. We reviewed our outbreak management plan and made sure it was up to date with the latest COVID-19 information. We revisited our infection control training, and educated all staff on their roles should we have a positive case. We reminded staff about donning and doffing of personal protective equipment (PPE). We tried to prepare, as much as we could. However, it's a whole new level when you actually have to implement your plans.

On the morning of 16th April, one of our staff members advised us they had tested positive to COVID-19. That morning during clinical rounds, one resident was displaying minor symptoms - sneezing and a sore throat. Because of the confirmed case and resident with symptoms, we immediately implemented our COVID-19 management plan. We contacted the relevant authorities. It did feel surreal that it was actually happening.

We notified our staff, residents and their families that day as well. We called the first contact of each of the residents and explained the circumstance. We followed up with a formal letter. People appreciated the early phone contact. Knowing we had activated our management plan so quickly greatly eased concerns. All staff went into outbreak management mode straight away. We quarantined the other residents to their rooms for their own safety.

On the morning of 17 April, I received a call from the Minister for Aged Care, Senator the Hon Richard Colbeck. It was a bit of a surprise hearing from him. I realised we had high level support for what we were dealing with. That afternoon a shipment of face masks arrived. The Department had also arranged for testing of all staff and residents. Having the testing so quickly available relieved some of the concern of staff and residents.

On 18 April at 10pm we found out one resident had tested positive. Twenty-three staff were in quarantine. The resident, who had been with us for about 14 months, transferred to Launceston General Hospital. They sadly passed away a few days

later. All of our residents have underlying medical conditions so they are all very vulnerable to COVID-19. We knew the implementation of our outbreak management plan was critical in saving lives.

The Australian Government Department of Health appointed a coordinator for me to contact directly for staffing and PPE needs. I'm not overstating it when I say the support was fabulous. One of our team also participated in daily meetings with a number of agencies. These included the Australian Government Department of Health, the Aged Care Quality and Safety Commission, Tasmanian Public Health Unit (PHU) and the Tasmanian Department of Premier and Cabinet. These meetings ensured a coordinated approach.

Once the virus hit, we went through our outbreak supply of personal protective equipment (PPE) very, very quickly. Staff going into the rooms of 46 residents multiple times a day requires a lot of PPE.

Communicating with our staff was a big priority for us from the beginning. They had legitimate concerns about their safety, the safety of their families and the people they cared for. We made sure we communicated with them every day, providing access to information and resources to do their job. We shared the PPE training videos with all staff reminding them of the best donning and doffing practices. We had all the relevant information posters at each station detailing the best practice procedures to follow.

We had some staff who, because of their fears or personal circumstances, chose not to work during this period. When you're already extremely stretched on staffing, that created extra pressure. To help us, the Department of Health arranged for workforce support through Aspen Medical. They arrived off the boat on 19 April - three days after our first positive test. They provided two registered nurses who supported us in the following 12 days. They were also able to recruit an Enrolled Nurse, whose support was vital. Through Mabel, we were able to recruit four extended care assistants for the period my staff were in quarantine.

The emotional load and rollercoaster for leaders once there has been an outbreak is very hard. You are thrust into a whole new world of decisions and consequences, with many people who need your support.

I was fortunate to have a brilliant Clinical Care Director to support me. I was also able to acknowledge that I needed, and asked for, support - which came thick and fast.

This experience has taught us that preparation is key. Make sure staff are aware of their roles and responsibilities and have completed infection control training. You have to be very diligent.

Communication with staff and families is also key. We found the vast majority of families were supportive of what we were doing because we kept them informed. You

have that relationship with them so they can trust you because you've informed them along the way. And it has to be timely information.

Despite the seriously difficult circumstances we faced at Melaleuca, it was incredibly helpful to have the immediate support of the Department of Health. This helped us access the additional resources we needed. I would say to other Aged Care Providers unfortunate enough to experience an outbreak, make sure you reach out for help straight away. And of course, make sure you are very well prepared before anything does happen.

Advice to RACF providers:

When there is an outbreak, immediately contact your Public Health Unit (PHU) and the Australian Government Department of Health. The state PHU will assist with infection control management and contact tracing. The Department of Health will appoint a case manager and assist with workforce supports and PPE. Providers facing an outbreak should provide regular updates on their PPE needs to avoid shortages.

Timeline of COVID-19 outbreak

16 April	First staff member tests positive One resident found to have symptoms Provider notifies all staff, residents and their family members 5 staff go into quarantine
17 April	Shipment of face masks arrives COVID-19 testing available for all staff and residents
18 April	A resident tests positive and transfers to hospital Another 17 staff go into quarantine
19 April	Workforce support arrives: two RNs
20 April	Australian Government Department of Health appoints a coordinator to support Melaleuca CEO
21 April	Further staff arrive: one Enrolled Nurse and four Extended Care Assistants