

Monday 1 August 2022

## CORONAVIRUS (COVID-19)

### Update #74

#### Branch operations, aged care and public sector winter responses

#### COVID data Monday 1 August

	new cases	patients in hospital**	ICU	deaths	3 doses***
VIC	7115	768	43	21	69.2%
NSW	9471	2323	69	7	69%
QLD	4303	782	24	-	64.3%
SA	2364	346	11	9	70%
NT	229	49	1	55	75%

At the time of publication data was not available for Western Australia, Tasmania or ACT.

\*\* does not include hospital in the home programs, or Victoria's COVID pathway program or similar

\*\*\* of those eligible (16+)

Victorian Government COVID data <https://bit.ly/3c3zkgw>

Australian Government COVID data <https://bit.ly/3Ou3c3j>

'The Age' COVID data centre (a state-by-state snapshot) <https://bit.ly/3zjqTa3>

#### Branch operations

As previously advised, the majority of Branch staff are working from home in line with the Victorian Government recommendations to slow the transmission of COVID-19 and reduce the pressure on our health and aged care systems. This decision is also intended to maintain a workforce able to support our members.

ANMF organisers and other staff are attending some smaller meetings at workplaces following strict COVIDsafe protocols. However, larger member meetings are being held online.

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Job Rep training continues face-to-face using COVIDsafe protocols. Health and Safety Rep training is continuing in a combination of face-to-face and online formats.

The Education Centre continues to provide a program of online and face-to-face classes. The ANMF Library is open.

The upcoming Working Hours, Shifts and Fatigue Conference on Friday 5 August (register via <https://anmfvic.asn.au/WHSF2022> ) and the Enrolled Nurse Study Day on Friday 12 August (register via <https://anmfvic.asn.au/ENSSD> ) will be face-to-face.

Participants will be notified if there are any changes.

Changes to Branch operations and contact details are on our website [www.anmfvic.asn.au](http://www.anmfvic.asn.au)

## **Australian Defence Force support extended in private aged care**

Private residential aged care continues to bear the brunt of COVID-19 with 1064 active outbreaks across the country as at 29 July 2022. Outbreaks are occurring at 344 NSW aged care facilities, 218 facilities in Victoria, 231 in Queensland and 127 in South Australia. This includes 6360 aged care COVID-positive residents (including 2457 in NSW, 1430 in Victoria, 1197 in Queensland and 351 in Western Australia). There are 3456 aged care staff with COVID. Weekly aged care outbreak reports can be viewed via <https://bit.ly/3J9IBjt>

The Federal Government has extended the Australian Defence Force surge workforce assisting private aged care facilities impacted by COVID-19 until 30 September 2022. Each of the 12 ADF teams comprise six personnel (two clinical and four general duties). The ADF support is in addition to civilian surge workforce support.

Despite the vulnerability of residents, private aged care employers continue to reduce staff hours and roster inadequate staff in this sector. Further, despite being into our third year of this pandemic, some private aged care employers continue to refuse to implement N95 mask fit testing programs, against WorkSafe Victoria guidance and Australian Standards.

ANMF notes the Federal Albanese Government introduced legislation into the Australian Parliament on 27 July to begin the implementation of royal commission recommendations including 24/7 registered nurses (this is already in place in approximately 87% of Victorian private aged care EBAs) and 214 daily resident care minutes (which will become a ratio).

## **Residential aged care winter plan**

The Federal Government has released new guidance to support residential aged care facilities manage COVID and other respiratory illnesses during winter. The plan includes resources to support aged care providers prepare, respond and recover from COVID and/or influenza outbreaks. In addition, the Victorian Department of Health is releasing its Local Public Health Units (LPHUs) Guidance relating to preparedness and outbreak management in high-risk settings. This important document links LPHUs, the Department of Health and aged care providers in real time for greater support, guidance and escalation where required.

Read the 'Winter Plan – a guide for residential aged care providers' via <https://bit.ly/3b3HZiP>  
More information about managing an outbreak in a residential aged care <https://bit.ly/3b9sxSf>

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## Public health services winter plan: stage 3 and extended team models

**On 1 August there are 1844 public sector healthcare workers, mostly nurses and midwives, furloughed due to COVID.** ANMF conservatively estimates a similar number of staff are on personal leave to care for an ill family member or are sick themselves or are managing their own fatigue and burnout.

The majority of Victorian public healthcare services have now been declared at **stage 3** of the Department of Health's 'Health System Winter Response' due to the severe staff constraints and daily COVID hospitalisations of between 800 and 900. In recent days this number has declined and is now under 800.

Public health employers have started notifying their employees, the Department of Health and ANMF about their **stage 3** responses including the implementation of the statewide extended team-based models, COVID streaming models and elective surgery reductions.

Employers should be communicating with staff about the changes and the rationale for the need to move to extended team-based models during these continuing difficult weeks ahead, though this will be obvious to many of our members who see firsthand the gaps on shifts of registered and enrolled nurses and midwives. ANMF also expects senior managers to be in close contact with their staff and assisting practically where they can, to ensure they have a real understanding of the pressures nurses and midwives are under and the impact of the decisions they make.

ANMF has been holding members' meetings at some major workplaces, where required, to discuss the extended team models and other issues members wish to raise.

### Health System Winter Response Plan - four stages

The Victorian Department of Health's 'Health System Winter Response' plan is designed to ensure the care of an increasing number of COVID and non-COVID patients. It will be in place through winter.

Members will be familiar with the four-stage response plan which is very similar to the 2021-22 summer outbreak strategy and the October 2021 acute surge model guidance.

A health service's stage and response depend on a number of factors including but not limited to:

1. the number of COVID patients
2. the impact of staff furlough and personal leave (none to low, moderate, severe or critical) on rosters
3. a qualitative and quantitative risk assessment must also occur, using a range of Department of Health data including demand on admitted, emergency and ambulance services.

Read the Victorian Department of Health's **Health System Winter Response Factsheet which includes the matrix to determine the level of stress on the health system** via <https://bit.ly/3zJgqVG>

### Majority of health services at stage 3

The majority of health services are now at **stage 3**, which is declared when amongst other considerations there are between 801 and 1400 COVID hospitalisations and moderate workforce constraints.

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Under **stage 3**, health services are to make local decisions about how to manage non-urgent patients in emergency departments, non-urgent elective surgery and utilising private hospital support to maintain planned care.

The Health System Winter Response Plan also includes extended team-based models when ratios cannot be met on the forward roster with registered and enrolled nurses and midwives and in consultation with the ANMF and its members. Other strategies include increasing telehealth and utilising existing funded modular emergency department units, additional APOT/HASM crews, rapid offload, telehealth and referring low acuity patients to alternative non-emergency services.

Under **stage 3** health services may consider cancelling staff leave, although **ANMF has not been contacted by members advising that their leave has been cancelled under this stage 3 declaration**. However, should it occur, members in this position can contact ANMF Member Assistance for advice via <https://anmfvic.asn.au/memberassistance>

### **Extended team-based models must be a last resort**

Extended team-based models where required are a last resort option to ensure the safest patient care possible in the context of severe workforce constraints due to staff furloughing and other personal leave. The team-based model of nursing and midwifery includes RUSONs (Registered Undergraduate Students of Nursing) and RUSOMs (Registered Undergraduate Students of Midwifery) as part of the direct care team.

Extended team-based models can be implemented in areas including medical, surgical, sub-acute, rehabilitation, haematology, oncology, neurology, cardiac, short stay and mental health.

Extended team-based models can be implemented in postnatal. Birthing suites must continue to staff midwives.

Before implementing an extended team model, a health service:

1. Must make best efforts aim to roster to ratios and meet the requirements of the *Safe Patient Care Act 2015*.
2. Must continue to develop rosters based on the applicable ratios.
3. Must exhaust all usual methods to fill a shift that is vacant due to unplanned leave including using the supplementary roster, exploring bank, pool and agency nurses, offer reasonable overtime to registered and enrolled nurses.
4. If the health service is unable to fill the shift, a RUSON or RUSOM can be included in the ratio. The RUSON or RUSOM must only undertake the activities in their position description and role which are listed via <https://bit.ly/3JmbHMW>.

Ideally RUSONs and RUSOMs are always rostered above ratios as they were previously. ANMF continues to acknowledge the extraordinary work our RUSONs and RUSOMs. The acceleration of this student employment model continues to be the silver lining of the pandemic. We also acknowledge the extended team-based model places additional pressure, work and responsibility on the experienced registered nurses and midwives.

Extended team-based models are an emergency response only and must be continually reviewed and removed as soon as workforce constraints allow. Once health services move back to **stage 2** ratios should be in place in most areas.

## What is stage 4 in the Health System Winter Response Plan?

**Stage 4** is the most extreme level in the plan. The **stage 4** declaration criteria are based on having between 800 and 2000+ COVID hospitalisations and severe or critical workforce constraints.

In **stage 3 and 4**, the Department of Health can initiate public-private pandemic plans to maintain planned care.

**Stage 4** can also include the use of more private hospitals for COVID patients.

Under **stage 4**, the department can centralise decision making and implement a local, regional or state emergency response. This can include calling a code brown which would be a last resort response to severe or critical workforce constraints and between 1401—2000+ COVID-19 patients in hospital. ANMF believes a code brown is largely symbolic but sends a strong signal to the community about the seriousness of the outbreak and the extreme pressure on the health system.

## What about ratios?

This Omicron outbreak comes 30 months into the pandemic. It is overlaid by an unprecedented health workforce weariness compounded by the 'will this ever end?' question we are all asking.

The winter outbreak, severity of respiratory infections, delayed care and staff furlough and personal leave are making staffing ratios on the forward roster extremely challenging in many wards of some health services.

Between 1999 and 2015, ANMF members together with their union have fiercely campaigned for, fought for and defended Victoria's public sector nurse/ midwife patient ratios culminating in the Andrews Government passing the *Safe Patient Care Act 2015*. This was followed by two amendments to improve ratios and introduce new ones. Victoria continues to be one of the few places in the world to have mandated, minimum ratios.

We assure members the extended team-based models will not be in place a day longer than necessary and we will return to our important ratio improvement schedule (see <https://anmfvic.asn.au/ratiotimeline>).

***In the event you believe that registered nurses and midwives are available to fill vacancies but are being refused work by their employer please make contact with ANMF and provide us with the details so that we can raise it promptly with the employer and also notify the Department of Health.***

## Redeployment

ANMF is again receiving inquiries from members understandably anxious about redeployment.

Employers are able to redeploy nurses and midwives from their usual clinical area to other parts of the healthcare service to manage COVID patient hospitalisations and non-COVID patient pressures. **It is still expected that employers will provide orientation and support as part of redeployment.**

Everyone understands this is a once in a century crisis. The Nursing and Midwifery Board of Australia (NMBA) continues to acknowledge 'COVID-19 is posing unprecedented challenges to the health system, health practitioners and the wider community.'

NMBA fact sheets and information provide clarification and support for nurses and midwives working in the COVID-19 context. This communication reiterates the importance of maintaining professional standards and standards of care. The nursing and midwifery workforce is highly skilled at changing clinical practice context and reflecting on and assessing practice, competence and scope.

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These NMBA fact sheets are available via <https://bit.ly/2JEU9Cn>

During peak COVID-19 response periods nurses and midwives, as always, will rely on clear, accessible, and up-to-date local policies, procedures and clinical practice guidelines. Employers must make these materials and education available so that nurses and midwives can appropriately assess their scope of practice. Employers must also communicate with members on legislative requirements, current context of practice, authorisation, and organisation support. The NMBA advise that:

*‘Scope of practice should be managed between health practitioners, their employers, supervisors and colleagues. Health services can rotate nursing and midwifery staff as necessary, but must ensure that they are working in roles that they have been educated in, trained in and are competent in. Where appropriate, they will also need to be receiving adequate supervision.’* Source: Nursing and Midwifery Board, Ahpra, Fact Sheet Nurses and/or midwives changing their clinical context of practice in response to COVID-19.

## Local agreements

Where proposed by employers, and supported by members, ANMF entered into short-term local agreements with a small number of healthcare services which were unable to meet ratios on the forward roster. These agreements, which included a \$45 per-shift stipend, were made under section 36 of the *Safe Patient Care Act 2015* and ended on 31 July 2022. These agreements provided members with some additional payment and employers were required to provide additional staffing information to ANMF. This provided further transparency about the staff restraints preventing employers from meeting ratios.

## Public sector winter bonus payments

The Victorian Government’s winter recognition and retention bonus will be paid to all staff employed by public health services, Forensicare and Ambulance Victoria. The payment of up to \$3000 which equates to about \$60 per shift like the previous surge allowance paid in 2021-22.

Part-time, casual and new staff employed on or after 1 July, who are still employed on 30 September 2022, will be eligible for a pro-rata equivalent of the payment. Payment of up to \$1500 will occur over two pay periods around 15 August and 30 September. The first payment will be made towards the end of August.

Health services have been asked to confirm with their employees when the payment will be made. Health services have also been asked to consider paying the two amounts in a non-pay week.

**More information about the winter bonus implementation via <https://anmfvic.asn.au/winterbonus>**

**What about private acute?** We agree with our members that nurses and midwives in every sector, including those in GP medical clinics, deserve a recognition and retention payment. ANMF has repeatedly called on private acute employers to make a similar payment to their members. The question of taxpayers funding this bonus instead of private employers continues to be a vexed one. Some private employers are offering retention payments of up to \$6000 to some of their staff.

**What about private aged care?** The Federal Government has paid four retention payments worth up to \$3200 to private aged care nurses and personal care workers since the start of the pandemic. Full-time aged care registered nurses will receive \$3700 and part-time and casual nurses will receive \$2700 if they work for the same private or public aged care provider between 1 November 2021 and 31 October 2022. A second payment is available for

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registered nurses who work for the same provider between 1 November 2022 and 31 October 2023. ANMF has not been able to secure the extension of this payment to enrolled nurses.

## Public sector winter surge meal and refreshment program

In addition to the winter retention bonus the Andrews Government is also funding the provision of meals and snacks for night duty staff in public healthcare services. Staff working night shift or double shifts are to be prioritised. Health services were required to apply for the funding and the meals/ snack program which will run from July to December.

Importantly this program is **not** about a meal allowance payment, but actually providing meals to staff to make their shift a little easier.

ANMF understands some public health services have extended this program to their PM shift staff.

Read more information about the implementation of this program via <https://bit.ly/3BBrGF5>

## Claim all overtime and change of shift and meal allowances

We are in another challenging period and we know members are filling in the gaps of their furloughed colleagues.

A reminder to members to claim all of the overtime and change of roster and meal allowances you are entitled to.

Public sector members should refer to recent newsflashes to ensure they are claiming all their entitlements.

- Overtime newsflash <https://anmfvic.asn.au/overtime>
- Change of shift newsflash <https://anmfvic.asn.au/changeofroster>
- Meal allowance newsflash <https://anmfvic.asn.au/mealbreaks>

All other members should check their EBA entitlements via their Member Portal page

<https://members.anmfvic.asn.au/> or seek advice from Member Assistance via

<https://anmfvic.asn.au/memberassistance>

## Book your fourth dose if eligible

The Australian Technical Advisory Group on Immunisation recommends that adults aged 50 to 64 years have a fourth COVID-19 vaccine.

Adults aged 30 to 49 can also receive a winter booster COVID-19 vaccine dose, however ATAGI says the 'benefit for people in this age group is less certain'.

If eligible you can receive a fourth dose three months after your third dose or after having a COVID infection that has occurred after your third dose.

**Public sector special leave for vaccination:** public sector members can access special leave to have their fourth dose. This includes four hours special paid leave to have the vaccine (including travel time) and two days special paid leave if you are unwell following the vaccine. The Victorian Department of Health's 'Coronavirus Guidance Note on Employment-Related Matters' encourages employers to consider extending this leave to casual employees. Read the guidance via <https://bit.ly/2UhDSU2>

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ANMF strongly encourages local government, private and not-for-profit employers to follow the Victorian Department of Health's special paid leave guidance, but it is not enforceable.

Free COVID vaccines are available at vaccination hubs, pharmacies and GPs.

Fourth dose booking information <https://www.coronavirus.vic.gov.au/get-vaccinated>

## Free respiratory clinics – spread the word

The Victorian Government has opened two additional free GP respiratory clinics at the Royal Children's Hospital and Monash Children's Hospital.

Members are encouraged to spread the word to family and friends about the more than 50 free respiratory clinics across Victoria designed to ease the pressure on emergency departments and GP medical clinics.

These clinics:

1. are for people that are unwell with mild respiratory symptoms (such as coughing, runny nose, fever) or other COVID-19 symptoms (such as nausea, vomiting, diarrhoea)
2. offer face-to-face assessments (including testing) and immediate support for respiratory illnesses (such as influenza, COVID-19, asthma, hay fever)
3. provide care for people with COVID-19, including by telehealth (can be accessed even if you do not live close by to the clinic)
4. are staffed by general practitioners and nurses
5. are free for everyone (babies, children and adults), with or without a Medicare card.

### Locations and appointment information

- North Western Melbourne <https://bit.ly/3NZWe5F>
- South Eastern Melbourne <https://bit.ly/3yXI8hY>
- Eastern / North Eastern Melbourne <https://bit.ly/3OZ5kBa>
- Gippsland <https://bit.ly/3yWvvTi>
- Western Victoria <https://bit.ly/3yXiysi>
- Murray (Central Victoria, Goulburn Valley, North East and North West Victoria) <https://bit.ly/3z7rtYB>

New clinics are also expected to open soon in Mildura and Warnambool.

More information, including an interactive location map via <https://bit.ly/3yABbRu>

## Caring for people with COVID-19

The National COVID-19 Clinical Evidence Taskforce is continually updating its website with the latest evidence-based clinical guidelines and information about vaccines and antiviral medications. It has recently updated its recommendations regarding the monitoring and markers of clinical deterioration. Visit their website <https://covid19evidence.net.au/>

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## Free emergency accommodation for healthcare workers

The Victorian Government is providing alternative accommodation at the Victorian Quarantine Hub for nurses, midwives and personal care workers who cannot isolate at home. More details via <https://bit.ly/3ztGHXP>

## Workers compensation claim reminder

If you test positive to COVID-19 or believe you have been impacted psychologically, ANMF strongly recommends you make a WorkCover claim. Read COVID-19 update 66 for details <https://bit.ly/3fOtBtB>

## P2/N95 mask fit testing

All nurses, midwives and personal care workers should participate in their workplace fit testing program as a matter of urgency to ensure you, your family and your patients, clients and residents are protected. If you are a new employee fit testing a P2/N95 mask should have been part of your induction.

Each P2/N95 mask fit test takes between 30 and 45 minutes to complete and requires specialist equipment and an appropriately skilled person to conduct the fit test.

Staff need to be retested at least every 12 months or sooner if different masks are in use. If this is not happening in your workplace ANMF advises members to complete a VHIMS or incident report and complete an online ANMF member assistance form via <https://anmfvic.asn.au/memberassistance>

Irrespective of fit testing, fit checking should be undertaken every time someone puts a P2/N95 respirator on. WorkSafe Victoria advises that if the appropriate fit is not achieved, the respirator is not providing adequate protection. In these circumstances someone who can achieve an appropriate fit should undertake the procedure or delay the procedure until an appropriate fit can be achieved.

## Victorian Department of Health employment advice

The Victorian Department of Health's **Coronavirus Guidance Note on Employment-Related Matters** – provides advice on leave, including special paid leave, **vaccination leave (including two days if you are unwell after your fourth dose)** and redeployment. ANMF encourages all employers to follow this guidance, however, recognise that enforcement is limited to public sector employers only.

Read the guidance, updated on 26 May 2022, via <https://bit.ly/2UhDSU2>

## Pandemic leave disaster payment

ANMF welcomed the Federal Albanese Government's announcement on 16 July that the Pandemic Leave Disaster Payment would be extended to 30 September 2022. This \$750 payment is available for workers who are unable to work due to self-isolation, quarantine or caring. Importantly, you must have exhausted your personal (sick) leave entitlements, including pandemic (special) leave or leave to care for another person. Details and applications via <https://bit.ly/3Q0mjDm>

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## Need ANMF advice or support?

Members can complete an online Member Assistance inquiry form via [anmfvic.asn.au/memberassistance](https://anmfvic.asn.au/memberassistance) (scroll to the bottom of the page for the button).

## COVID-19 stressed? You're only human

The pandemic marathon continues. If the winter outbreak is causing you stress, anxiety or trauma please consider contacting the Nursing and Midwifery Health Program Victoria. The NMHPV is run by nurses and midwives who understand what you are going through. Don't wait until you hit crisis point before you seek help.

Phone 9415 7551 (business hours) or email [admin@nmhp.org.au](mailto:admin@nmhp.org.au)

*(Please note the NMHPV is a counselling support service, they cannot provide employment advice – for this advice complete an ANMF member assistance form.)*

## Selfcare and wellness resources

If you are stressed, eating too much, drinking too much or isolating yourself from your family and friends, but you are not ready to call the Nursing and Midwifery Health Program there are resources that may help you make some changes to improve your health and wellbeing during this challenging period via

<https://anmfvic.asn.au/covidselfcare>

## Important COVID-19 links for nurses, midwives and personal care workers

ANMF continues to collate the important links all in one place, so you don't have to go looking. Please bookmark and check this page regularly – <https://anmfvic.asn.au/COVID-19>

## Got a colleague not receiving ANMF emails?

Let them know they can re-subscribe via <https://anmfvic.asn.au/resubscribe>

## Encourage your colleagues to join ANMF

Let them know they can join via <https://www.anmfvic.asn.au/join>

**ANMF Job Reps and Health and Safety Reps are encouraged to display this newsflash on their workplace noticeboard.**

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