

CORONAVIRUS (COVID-19) Update #20

ANMF advocates for uncontested WorkCover claims and calls for further healthcare worker protection measures; maternity services water immersion advice updated; MCH nurse plan to respond to midwifery workforce shortages

ANMF has collated the important links all in one place, so you don't have to go looking. Please bookmark and check this page regularly – anmfvic.asn.au/covid-19

Members with COVID-19-related employment questions can ask via the Member Assistance online inquiry form anmfvic.asn.au/covid-19. Please read the information on our website before submitting a question. Member Assistance is not taking phone inquiries as ANMF staff are working remotely. Members whom ANMF deems have complex inquiries will still have phone contact with staff.

The DHHS Coronavirus Guidance Note on Employment-Related Matters (bit.ly/2UhDSU2) was last updated 20 July.

Latest coronavirus statistics in Victoria

View the latest Victorian statistics via bit.ly/34Et8Ug and the latest national statistics via bit.ly/2RyEXX1

Additional ANMF support for members

To provide additional support to members with urgent issues during this time, an ANMF staff member has been available on Saturdays and Sundays, between 8.45 and 5pm. To reach the on-call weekend contact, call the ANMF office number on 9275 9333.

ANMF advocates for presumptive rights or uncontested WorkCover claims

ANMF (Vic Branch) has written to the Attorney General and Minister for Workplace Safety, Jill Hennessey, seeking a removal of barriers for healthcare workers to access WorkCover if they contract COVID-19.

The Branch wants COVID-19 to become a proclaimed disease in the Workplace Injury Rehabilitation and Compensation Act 2013. This would ensure all healthcare workers who contract COVID-19 would have their

WorkCover claim automatically accepted without requiring proof that their workplace was the source of transmission.

Despite the significant increase in healthcare workers contracting COVID-19 over recent weeks, WorkCover claims have not increased proportionately. While there would be many reasons for this, the Branch believes being ill while dealing with the onerous nature and sometimes oppositional WorkCover system is a significant barrier.

Presumptive rights would mean nurses, midwives and personal carers who contract the disease would have straightforward access to compensation, and payment of reasonable medical and other expenses while recovering.

Given this disease is new, with growing cases of long-term side effects, having a successful and uncontested claim would protect the nursing, midwifery and personal carer workforce into the future.

ANMF recommends any member who contracts COVID-19 to make a WorkCover claim. Any special paid leave provided by your employer does not impact a WorkCover claim.

ANMF is not aware of WorkCover rejecting any healthcare worker's claim.

If you've contracted COVID-19 at work, contact ANMF Member Assistance via <https://anmfvic.asn.au/memberassistance> for advice and referral to Gordon Legal where necessary to assist with your claim.

Read ANMF's letter to Attorney-General Jill Hennessy via <https://bit.ly/32eZh48>

Do you have a personal protective equipment concern?

ANMF continues to advocate and raise and resolve members' issues at the PPE taskforce union consultation meetings. **Members with concerns about PPE should:**

- 1. continue to raise and submit OHS incident reports with your employer as well as speaking directly with your manager**
- 2. involve your Health and Safety Rep if you have one**
- 3. contact ANMF via anmfvic.asn.au/memberassistance (include your report and response if applicable) for further support and advice if after you have raised your concerns they are not addressed by your employer.**

Please see our 'Protocols for entering your home and minimising the risk of infection' poster at the end of this newsflash.

Healthcare worker infection prevention and wellbeing taskforce

As at 23 August 2020, 2693 healthcare workers had contracted COVID-19 with 536 current active cases.

The high number of healthcare worker infections must be addressed urgently to ensure the protection of healthcare workers and their families, to restore confidence in the system and to secure a stable workforce to provide health and aged care services to the Victorian community.

ANMF (Vic Branch) Secretary Lisa Fitzpatrick is a member of the Victorian Government's new taskforce which is meeting weekly to address healthcare worker infections. The diverse representation of all of the impacted

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healthcare professionals, executives, infection control educators, WorkSafe and the health department decision makers mean the taskforce can really make a difference.

ANMF is pressing for immediate and direct actions and interventions that are mandatory across the health and aged care sectors.

More detailed data is needed to understand how healthcare workers are contracting COVID-19 in health and aged care services. Premier Daniel Andrews has advised this significant work is close to being available. This work is urgently needed and ANMF will work with the Victorian Government, Worksafe, employers and our members to respond to what the data tells us about transmission. Until we know more ANMF is calling for:

1. **More transparency** about healthcare worker cases and contact tracing so we learn about how transmission is occurring as soon as possible to prevent further spread.
2. **A consistent approach to infection control and using PPE** reinforced across all health and aged care services, including staff amenities. We want more infection control specialists in the wards so risks and any breaches are identified and fixed quickly.
3. **Consistent and appropriate PPE sizes.** We know N95 mask sizes are inconsistent across brands and not all brands make the small size many nurses require. Manufacture of our own N95 masks and appropriate sizing in South Australia is almost ready and we won't have to rely on overseas companies.
4. **Mandatory fit testing programs.** ANMF is calling for a mandatory fit testing program of N95 masks across all health and aged care services.

The expansion of N95 mask use is also not as simple as it sounds as we are now dealing with nurses and doctors experiencing pressure sores from wearing the masks. All other infection control protocols must be in place as well.

5. **A review of break/ tearooms and measures to prevent transmission risk.** All health and aged care services must review their break/tea rooms and understand how transmission can occur between healthcare workers in these spaces where they understandably try and unwind. ANMF is seeing good examples of staggered break times and external marquees with heating and facilities to enable to staff to social distance and have a safe break close to their ward/unit.

ANMF will also continue to raise members' issues with Health Minister Jenny Mikakos and the Department of Health and Human Services each week and via the Safer Care PPE Taskforce union committee each week. These meetings provide ANMF with an opportunity to receive in-depth information and focus on resolutions for members.

Alert: BYD respirators

Safer Care Victoria issued an alert on 22 August to all Victorian health services about the BYD N95 respirator.

The alert advises staff not to adjust the headband straps on the BYD N95 respirator.

The alert states in full:

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RISK OF STRAP TEAR IN BYD N95 RESPIRATORS

There have been reports from other jurisdictions that small tears may occur when pulling/adjusting the headband straps through the staple points on the BYD N95 respirators.

These small tears at the staple entry point are not always noticeable but have the ability to compromise the integrity of the respirator seal.

Pulling/adjusting the headband straps through the staple points is not recommended in any of the product information manuals and doing so is not in line with product specifications.

NIOSH APPROVAL OF BYD RESPIRATORS

We are following up on concerns from the sector about NIOSH approval of BYD respirators.

When contacted by Health Purchasing Victoria, BYD confirmed there have been no changes in design, raw materials or construction of BYD respirators (Product Model DE2322):

- *between lodging the application and receiving NIOSH approval*
- *since NIOSH testing of respirators began, including the NIOSH test reports dated 23 April 2020.*

These products are listed on the Australian Register of Therapeutic Goods as safe for use. The Department is now seeking clarification with the Therapeutic Goods Administration.

NIOSH approved respirators have been cleared by the Food and Drug Administration (FDA) for use. Further information on BYD testing results and NIOSH approval process can be found [here](https://bit.ly/2Yo5oSr). (<https://bit.ly/2Yo5oSr>)

N95 respirator reminder: what if appropriate fit is not achieved?

ANMF reminds members that WorkSafe Victoria advises irrespective of fit testing, **fit checking** should be undertaken every time someone puts a respirator on. 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.

Maternity services: water immersion advice updated

A message from Nicole Allan, Maternity Services Officer and Kathy Chrisfield, OHS Coordinator

On 17 August 2020 ANMF made a statement in support of the DHHS guidance for suspension of water immersion.

A number of midwife members contacted ANMF and posted on our social media pages understandably concerned and distressed about this loss of choice for women. ANMF understands the level of concern and appreciate our members' views as they advocate passionately for the rights of their women.

It is ANMF's role to advocate for the rights and safety of our midwife members as well as the women in their care. We listened to our members and advocated last week on your behalf and continue to do so.

COVID-19 has created many situations that have challenged evidence-based practice not only for midwifery but also for nursing and occupational health and safety. This evidence-based practice has to be weighed with the evidence (and in some cases, lack thereof) of transmission methods of COVID-19 and what is known of it, and the risk that it poses to midwives, women and the community.

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This means ANMF takes a precautionary approach where there is an unacceptable level of risk, to ensure the safety of our midwives, and our members more broadly, as well as the community. Until the evidence exists that the risk is manageable and safe, we presume that it is not.

Water immersion is undeniably a gold standard choice for women where not contraindicated. The benefits of its use are well documented.

It is also undeniable that wet or damp PPE is no longer protective and poses a risk for midwives, the women and their partner or support person. This risk has been deemed unacceptable at this time and one that threatens the midwives' safety due to higher rate of community transmission of COVID-19.

ANMF acknowledges the United Kingdom's Royal College of Midwives Clinical Briefing Sheet – 'Waterbirth during the COVID-19 pandemic' (29 July 2020) which recommends that "*current evidence does not suggest that there should be a blanket cessation on the use of water in labour or waterbirth for all women.*"

The Royal College of Midwives' guidance also advises individual risk assessments should occur by the woman and the midwife, the environment when water immersion is used should be strictly managed and all women using water immersion in labour should be offered testing.

It states the employer has a responsibility to assess and mitigate the risks whatever the circumstances.

The Department of Health and Human Services made the decision to suspend water immersion in consultation with health advisors, senior midwives and medical staff. The guidelines are under regular review to ensure that the precaution is only in place as long as it is reasonably required.

The DHHS updated its maternity and neonatal care guidance on 18 August which now states water immersion for labour and birth should be suspended in areas of high community transmission. While a slight relaxation ANMF would continue to advise caution to our midwife members. The guidance now states:

"Water immersion for labour and birth – During this period of increased community transmission of coronavirus (COVID-19), as a temporary and precautionary measure, services in areas of high community transmission are advised to suspend the use of water immersion (use of a bath) for labour and birth for all women. Showers can still be used for pain relief, when required, as women can come out of the bathroom for assessment during labour.

PPE is not effective when wet and consequently the use of water immersion during this period presents an unacceptable risk to our vital maternity health care workforce."

Read the COVID-19 maternity and neonatal services guidance (18 August) via <https://bit.ly/3aWCnmc>

As we start a new week the ANMF has requested that a further review be undertaken taking into consideration the most recent information available to the Chief Health Officer.

We, on behalf of ANMF, and as a midwife and an OHS professional respectively continue to advocate for our members, our professions and the women in your care.

Note: Unfortunately, not all communication to the union on this issue was appropriate. ANMF reminds members that communications to union staff and comments and messages on our social media pages can always disagree with ANMF positions but should always be respectful. Abusive comments will be removed.

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MCH uplift action plan to respond to midwifery workforce shortages

Over recent weeks ANMF (Vic Branch) has collaborated with Department of Health and Human Services' (DHHS) and Municipal Association of Victoria (MAV) representatives regarding urgent arrangements to support maternity and newborn services to respond to midwifery workforce shortages arising from COVID 19.

Significant contingency planning has resulted in the MCH Uplift Action Plan which provides a mechanism for a small number of maternal and child health nurses (MCH nurses) to submit an expression of interest to be redeployed from their Local Government Area (LGA) to undertake the role of the domiciliary midwife in the community.

Redeploying MCH nurses to undertake the role of the domiciliary midwife in the community will allow hospital-based midwives to remain in the acute setting to provide care to women and infants during the antenatal, intrapartum and early post-natal periods thus prioritising our most vulnerable women and infants.

In order to practice as an MCH nurse in Victoria, MCH nurses are required to hold current registration with AHPRA as:

1. a registered nurse
2. a registered midwife; and
3. hold an accredited postgraduate degree/diploma (or equivalent) in maternal and child health nursing.

As part of the early planning, MCH coordinators were asked to identify the number of MCH nurses who:

1. worked either casually or part time in midwifery or neonatal settings as well as working in local government as an MCH nurse
2. only work in local government but have worked in midwifery or neonatal settings within the last three years.

MCH nurses from either of these two groups, are considered to be the most appropriate to undertake the surge role of the domiciliary midwife in the community due to their current or recent experience in midwifery and neonatal services.

Further information has been sent via a newsflash to maternal and child health nurse and midwife members.

Implementation of the plan is expected to occur this week at Western Health. Monash Health is in the process of confirming its requirements.

Additional funding for aged care – totals more than \$1 billion

As at 23 August 2020 there were 1616 active COVID-19 cases relating to Victorian aged care facilities. There have been 282 resident deaths in Victoria and 313 nationally.

It has been a challenging and distressing period for aged care nurses and personal care workers and the hospital nurses who have assisted in outbreak facilities and ANMF continues to provide support to these members.

On Friday 21 August Federal Government announced an additional \$171.5 million to boost a new COVID-19 response plan agreed at national cabinet. This means since March, the Federal Government has announced more than \$1 billion additional aged care funding in response to COVID-19.

The residential aged care sector receives \$13 billion a year in Federal Government funding. ANMF continues to demand funding transparency requiring private aged care providers to demonstrate how they spend Federal Government funding.

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The new package includes:

1. \$81 million for additional surge workforce and increased training for aged care workers.
2. \$8.4 million for supplementary payments to include quarantine costs and interstate staff
3. \$50 million to account for additional demand for retention bonus measures, (ANMF understands that this is not new money but rather money announced in March. Eligibility to access the bonus payment has not changed)
4. \$9.1 million for the Victorian Aged Care Response Centre, established with the Victorian Government, to boost their additional workforce while undergoing more training, providing a workforce that could quickly respond to outbreaks in other states;
5. \$12.5 million to support residents and their families with increased availability of grief and trauma support services to assist aged care residents and their families who have experienced a COVID-19 outbreak
6. Supporting more compliance and quality checks on aged care providers by the Aged Care Quality and Safety Commission, checking on preparations and responses to COVID-19 outbreaks.

The funding comes on top of announcements earlier this year totalling more than \$850 million:

May 2020 Federal Government aged care funding announcements:

1. \$205 million support funding for residential aged care providers – approximately \$900 per metropolitan aged care resident and \$1350 per regional resident. Funds intended for additional staff, training, support visitation and connection and personal protective equipment.
2. \$48 million for short-term grants to eligible providers at risk of severe financial difficulty.

March 2020 Federal Government aged care funding announcements

1. \$101.2 million to upskill aged care workers in COVID-19 infection control, boosting staff numbers, support and training when an urgent health response is required, for telehealth consultations for anyone aged over 70 years, onsite pathology, additional funds to enable the Aged Care Quality and Safety Commission to work with providers to improve infection control
2. \$234.9 million announced to pay aged care workers two retention bonuses totalling up to \$1600 (taxable)
3. \$78.3 million to support residential care continuity of workforce supply
4. \$26.9 million to increase the Residential and Home Care Viability Supplements and the Homeless Support Supplement
5. \$92.2 million in additional support to home care providers
6. \$12.3 million to support the My Aged Care service to meet the surge in specific COVID-19 inquiries
7. \$10 million to support and expand a community visitor scheme
8. \$59.3 million for the delivery of prepared meals, food staples and essential daily items for senior residents following COVID-19 restrictions

Read Prime Minister Scott Morrison's media release via <https://bit.ly/2Qfb6lp>

Student members and working student members

ANMF encourages all members to encourage any nursing or midwifery students they know to join ANMF.

Undergraduate nursing and midwifery students and enrolled nursing students are welcomed as ANMF (Vic Branch) members. ANMF has thousands of student members.

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Please direct your friends and fellow nursing and midwifery students to anmfvic.asn.au/join

Special membership category for students who are working

Members are also encouraged to spread the word that ANMF also has hundreds of members in the 'student working' category which includes:

- a) an enrolled nurse studying to be a registered nurse or midwife
- b) a registered undergraduate student of nursing (RUSON) working in an employment model
- c) an enrolled nursing student or undergraduate nursing or midwifery student working as a personal care worker in private aged care.

This membership* category provides professional indemnity insurance, Good Samaritan insurance and employment, professional, workplace health and safety (including WorkCover) and legal advice, support and representation.

*Conditions apply, you must be fully financial and your membership category must reflect your hours (this means if you are working 25 hours or more, you must be paying full-time membership).

Please direct your friends and fellow nursing and midwifery students who are working to anmfvic.asn.au/join

No concern too small or too big: call NMHPV before you feel overwhelmed

Did you know Victorian nurses, midwives, students of nursing and midwifery and aged care personal care workers have access to the independent, free and confidential mental health support, counselling and referral services?

The Nursing and Midwifery Health Program Victoria is run by nurses and provides tailored support for the nursing, midwifery and personal carer workforce in public and private facilities.

Since May the Andrews Government has provided NMHPV an additional \$600,000 so the service can respond to the increased need for its services during the pandemic.

Watch NMHPV Chief Executive Officer Glenn Taylor talk about how they can support you anmfvic.asn.au/nmhpv

To contact NMHPV call 9415 7551 or email admin@nmhp.org.au

Find out more www.nmhp.org.au

National nursing, midwifery and personal care worker COVID-19 survey

The ANMF, in all states and territories, has partnered with the Rosemary Bryant AO Research Centre at the University of South Australia to research the effects the Australian outbreak of COVID-19 has had on the nursing, midwifery, and personal care workforce.

Your experience will assist the ANMF to advocate for more improvements across the country that will lead to better workforce wellbeing, job satisfaction and quality of care.

The national 20-minute survey is open to nurses, midwives and personal care workers in all states and territories.

All members are encouraged to participate in the survey by 31 October. Please share the link with your colleagues.

Take the survey now is.gd/covidandwork

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Don't bring it home: guide to minimise the risk of infection

A reminder that ANMF (Vic Branch) has developed a guide to assist you in relation to returning home from work after a shift.

Job Reps and HSRs are encouraged to print the poster which is part of this PDF newsflash. You can also download the 'Protocols for entering your home and minimising the risk of infection' A4 poster via bit.ly/COVID19-DBIH



Don't bring it home!

Protocols for entering your home and minimising the risk of infection.

- 1**  On entry, remove your shoes and place in a plastic box.
- 2**  Leave your bag, wallet, mobile, keys, etc in a box near the entry.
- 3**  Change out of your clothes immediately and wash them. Use the hottest possible machine wash setting and dryer if you can.
- 4**  Have a shower.
- 5**  Clean items you've brought in and surfaces you've touched.

Remember to wash your hands regularly.

Cleaning tips

 Hot soapy wash, wipe or disinfectant spray (depending on surface) phone cases, keys, ID, lanyard, glasses, etc.

Consider changing in and out of your uniform/scrubs at work.

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