

COVID-19 update 137 - 26/08/2020

Great news! Yesterday, we discharged the only remaining COVID-19 patient from our virtual ward, bringing the total number of recovered patients in our Metro North catchment to 344.

Latest update

Overnight, Queensland recorded one additional case of COVID-19, which is the 11th case related to the Brisbane Youth Detention Centre cluster. This case was a known contact and has been in quarantine since being identified as a contact.

There has not yet been any identified community transmission as a result of the original five cases from the Brisbane Youth Detention Centre. There is still a risk we could see community transmission over the next week, as we know the original cases were out in the community before returning a positive result. Please be patiently vigilant.

If you have any symptoms, no matter how mild, and particularly if you live or work in the areas impacted by the cluster, please come forward to be tested.

Managing fever clinic demand

Over the past 24 hours, we provided a record number of tests through our Metro North fever clinics, including the new Community Assessment Clinic in Redcliffe Showgrounds who tested over 100 people before 11am. Well done team!

We will continue to direct as many resources as needed to support our fever clinics to meet this increased demand. We are monitoring the activity daily and have plans in place to deploy staff when required.

Testing turnaround

The high levels of activity in our fever clinics is fantastic news, as we know that testing is the best strategy to identify possible cases of COVID-19. However, it does mean there is a slightly longer wait time for test results. The pathology staff that sit behind the testing are working hard to deliver the results as quickly as possible (thankyou ②). People presenting for testing at our Metro North fever clinics are generally receiving their results within a 48-hour period.

Correct mask wearing

Supporting staff to wear masks appropriately was a key theme in <u>this morning's vidcast</u>. I'd like to refer you to the <u>step-by-step guide</u> online which shows you how to apply and remove your mask, and when you need to perform hand hygiene during the process. There is also a list of <u>FAQs</u> available, providing answers to a number of questions that have been asked during our daily vidcasts. These FAQs will be updated regularly.

Given the many questions related to masks today, I'd like to clarify some information around eating and drinking while wearing masks. You are encouraged to leave the room and go to a place where you can maintain physical distance to remove your mask safely and eat and drink. I know this a major change for many of you, but our current situation requires we adjust the way we go about our day to day. We are encouraging managers locally to support you to have more breaks for hydration and eating.

Please be reminded that for a large group of our staff, this may be their first time wearing masks, particularly over long periods of time. It will take practice before we get it right! For those of you who are experienced mask wearers, I encourage you to support the non-clinical staff in your area by

demonstrating the correct techniques and sharing any tips or tricks you have for making the experience a little more comfortable.

PPE for clinical staff – a note on protective eyewear

The <u>Director General / Chief Health Officer memo</u> requires that if you are providing routine care within 1.5m of a non-COVID patient, you are to wear a level 2 surgical mask and protective eyewear. Protective eyewear can be worn continuously, even between patients, so long as they are not soiled. If protective eyewear is removed, it should be cleaned (if reusable) or discarded.

If you normally wear glasses, then you need to wear protective eyewear over your glasses. There are many different types of protective eyewear that fit comfortably over glasses for you to use. If your protective eyewear is reusable, please clean them yourself with a Clinell wipe and keep for use throughout the day before returning to centralised storage areas. If you are not sure how to clean your protective eyewear, please just ask.

COVID-19 leave provisions

While testing rates are high, it is likely that you know or live with someone who has been recently tested. If a family member that you reside with has been tested and is able to be adequately isolated at home, the household contacts can go about their normal business (if well) whilst that family member is waiting for results - that includes coming to work.

If the tested person is unable to be adequately isolated at home away from the rest of the family, then all people in the household need to isolate together until test results are negative.

I have devised the isolation plan for my family (and we have now activated it 6 times so far this year) and I encourage you to do this too. You never know when you might need it.

If you are required to stay away from work for any COVID-19 related reason, please consult with the <u>Metro</u> <u>North COVID-19 Guide to Leave Provisions</u> and the <u>Queensland Health COVID-19 myHR leave codes</u> <u>factsheet</u> on the extranet. These documents provide a range of scenarios related to COVID-19 leave, such as when you are sick, required to quarantine, when a family member is sick and when you are waiting for a test. They are regularly reviewed and updated.

If you are in any doubt about if you should come to work, please contact your line manager before coming to work.

Encouraging each other

There is no doubt we are seeing amazing comradery and cooperation across Metro North as we adapt the way we work - thank you! However, there are some reports of staff not demonstrating kindness or respect when being asked to do the right thing. This is disappointing.

Please support each other! Please be kind! Please do the right thing! Wash your hands, practice physical distancing as much as you can when outside your own home, wear your mask at work and stay at home when you are sick.

Again, thank you for being brave and adaptable in the face of continuous change. This is unchartered territory, but together I'm confident we can tackle any challenge that comes our way.

Kind regards, Dr Elizabeth Rushbrook Metro North Incident Commander

| | | Patients bei | FEVER Clinics | | | | |
|-----|---------------------------|--------------------|-----------------------------|--|--------------------|-------------------|--------|
| | Total In-patients ICU Pts | | | | | | |
| | | | | Total cases | | Presentations | |
| HHS | ICU-NOT Ventilated | ICU- Ventilated | Virtual Ward / HITH / | managed by HHS (including recovered) *** | # of clinics | Last 24 hrs | TOTAL^ |

Metro North HHS - Overview of Cases*

| | | | or similar | | | | | |
|---------------|---|---|---------------|---|-----|---|------|--------|
| MN TOTAL 0 | 0 | 0 | 1 | 3 | 344 | 5 | 1664 | 72,627 |

*With effect 26 August 2020, 1000 **Metro North has three recorded deaths (one person a return traveller into NSW, who passed away in NSW)

*** These numbers reflect the cases being managed by Metro North.