



Fortnightly Communique #16

Wednesday 29th July 2020 5pm

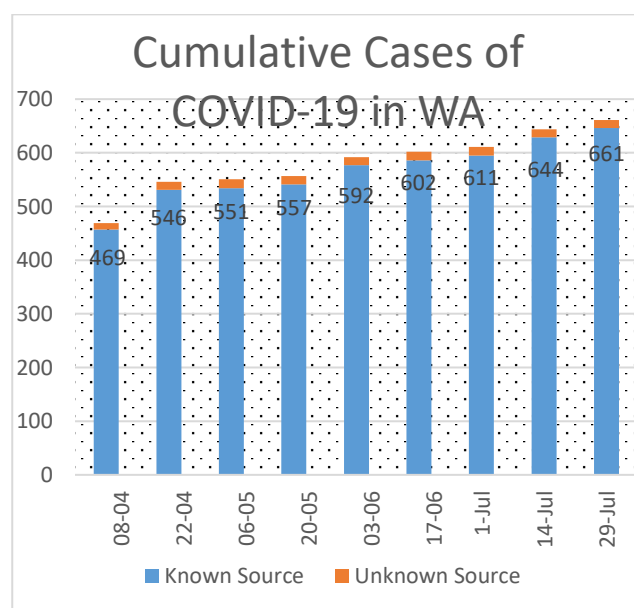
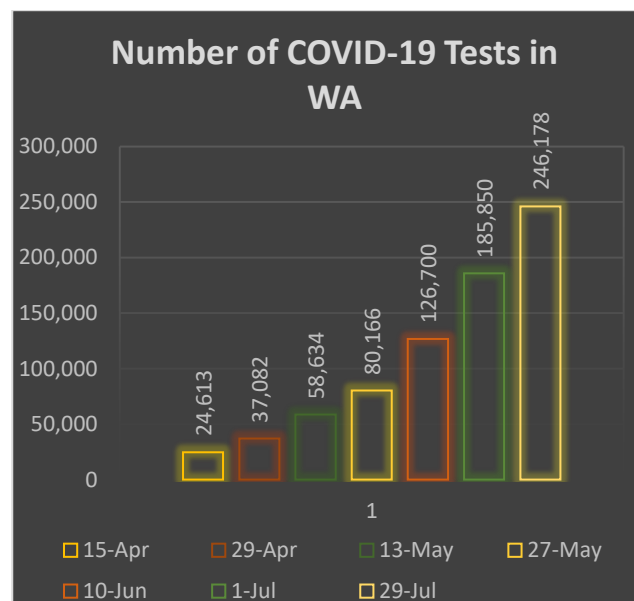
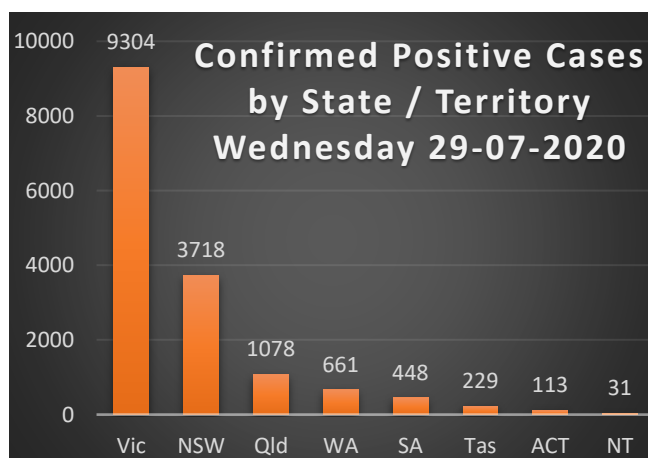
Daily Status, 5pm

There are **15583** cases of COVID-19 in Australia.
5088 new cases in the past 14 days.

Western Australia has had **661** cases – **17** new case in the past 14 days. There is currently **5** active cases and **647** people have recovered.

There are currently **15** unknown sources. No new ACTIVE regional cases. There have been **73** regional cases in total and all have recovered. See chart below for regional breakdown.

Region	Active Cases	Cleared Cases	Total Cases
Kimberley	0	20	20
Pilbara	0	5	5
Mid-West	0	3	3
Goldfields	0	8	8
Wheatbelt	0	12	12
South West	0	16	16
Great Southern	0	9	9
	0	73	73



COVID 19 Member Support Team



Fortnightly Roundup



Another fortnight has passed with WA recording 17 new cases of COVID-19 in the past 14 days. We have recorded 5 cases in the past 7 days with 5 current active cases related to overseas and interstate travel.

On June 27th WA moved in to phase 4 of the 6 phase “roadmap to recovery” and regional boundaries were lifted however, the [restrictions on entering remote Aboriginal Communities](#) remain in place.

Due to the current second wave in Victoria, WA has again put moving to phase 5 on hold at the present time. Phase 5 would see remaining restrictions removed, except WA’s hard border and access to remote Aboriginal communities. It would also see the removal of WA’s 2 square metre rule and the 50 per cent capacity for our major venues.

The new tentative date for Phase 5 will now be Saturday, 15 August. A final decision on whether Phase 5 can proceed on this date will be decided in about 2 weeks’ time.

Current Developments

Tougher border restrictions on Victorian arrivals into WA.

Western Australia's borders are closed to travel from interstate and WA’s border with the east coast have been hardened even further given the serious

situation in Victoria.

You cannot enter WA unless you are an exempt traveller. If you meet the criteria outlined in the [Quarantine \(Closing the Border\) Directions](#), you may apply for an exemption via G2G PASS.

All people entering WA are asked to bring their own masks. This includes essential workers with an exemption to enter WA. If travelling for work, your employer should provide masks. However, it is your responsibility to ensure you have and wear a mask when working in WA. (WA Gov, 29 Jul 20).

More information and a list of exemptions can be found at [WA GOV COVID-19 Travel to WA Site](#).

\$5.5 billion WA recovery plan for WA.

Premier Mark McGowan has released the comprehensive WA Recovery Plan - the next important step in WA's COVID-19 journey that will help drive economic and social recovery across the State, and create a pipeline of jobs for Western Australians.

The unprecedented \$5.5 billion investment will create thousands of local jobs in important sectors such as construction, manufacturing, tourism and hospitality, renewable energy, education and training, agriculture, mining and conservation. More information is available on the [inthistgether.wa.gov.au website](#).

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The voice of our children – COVID-19 resources.

The Secretariat of the National Aboriginal and Islander Child Care (SNAICC) National Voice for our Children have added a variety of COVID-19 resources to their website with a range of resources aimed at children and families, mental health and wellbeing and general health advice during COVID. Check them out [here](#).

Latest Immunisation Coverage Report.

The latest National Centre for Immunisation Research and Surveillance (NCIRS) has identified a need to expand immunisation coverage algorithm at 5 years of age. Assessment of vaccination coverage is important to measure the success of immunisation programs and to inform policy and program changes.

A new NCIRS immunisation coverage report, Coverage at the 2-year and 5-year milestone ages, highlights the consistently lower coverage observed at the 2-year milestone and argues for the need to change the way fully vaccinated coverage is assessed at the 5-year milestone age to better reflect true coverage. Read the full report [here](#).

The Aboriginal Health Council of Western Australia (AHCWA) and its Member Services would like to wish CEO Robby Chibawe and his team at the Puntukurnu Aboriginal Medical Service (PAMS) all the best for the long awaited official opening of the Newman Hub Clinic on Thursday.

A team from AHCWA will be there to help celebrate this wonderful occasion and we wish PAMS all the best for a successful future taking care of the health of the Aboriginal communities in the Pilbara region.

Alcohol Label Warnings.

The Public Health Association of Australia (PHAA) commends the Australian and New Zealand Ministerial Forum on Food Regulation ministers who voted today for [stronger mandatory pregnancy labels on alcohol](#).

The decision will have a lasting impact on future generations of Australian children born without Fetal Alcohol Spectrum Disorder (FASD).

PHAA CEO Terry Slevin commented: “We very much welcome this decision to protect the health and future of thousands of Australian children today through approving stronger and more visible pregnancy health warnings on alcohol.”



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Clinical Information

Continuity of Care: Alcohol Consumption

As Dry July comes to a close, we congratulate all of those who made it through the month without drinking alcohol. During unsettling times like this COVID-19 pandemic, alcohol can be used as a method of “coping” with stress, anger, grief, financial issues, relationships, boredom and to relieve symptoms of other issues such as social and emotional wellbeing and mental health conditions. Alcohol is a depressant which affects your spirit and makes you less connected to your family, community and country. You might feel good or relaxed initially but it can have ongoing health and family impacts if you drink at an unsafe level.

Alcohol can affect your body in many ways and alcohol related illnesses and injuries such as road trauma, violence, falls and accidents can be reduced by drinking at “safe” levels.

Other health risks from drinking alcohol build up over your lifetime. This means the more you drink the greater your risk.



Healthy WA Website

The National Health and Medical Research Council (NHMRC) guidelines for safer alcohol use recommends:

- For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.
- For healthy men and women, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.
- For children and young people under 18 years of age, not drinking alcohol is the safest option.
 - a) Parents and carers should be advised that children under 15 years of age are at the greatest risk of harm from drinking and that for this age group, not drinking alcohol is especially important.
 - b) For young people aged 15–17 years, the safest option is to delay the initiation of drinking for as long as possible.
- Maternal alcohol consumption can harm the developing fetus or breastfeeding baby.
 - a) For women who are pregnant or planning a pregnancy, not drinking is the safest option.
 - b) For women who are breastfeeding, not drinking is the safest option.

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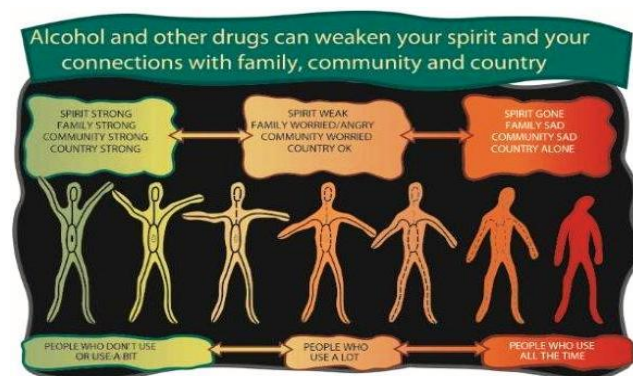
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As health professionals it is our responsibility to:

- **ASK THE QUESTIONS:** Ask about the quantity and frequency of alcohol consumption to detect risky/high-risk drinkers and consider sensitive and age appropriate screening.
- For people with high risk drinking levels Review for comorbid physical or mental health disorders and other chronic disease risk factors
- Offer brief interventions for the reduction of alcohol consumption as first-line treatment.
- Advise pregnant woman that not drinking is the safest option and explain the risks to the unborn child and emphasise the benefits of not drinking
- Advise breast feeding woman that not drinking is the safest option and continue to encourage and support breast feeding
- Promote community-led strategies to reduce alcohol intake by advocating for “dry communities”, health promotion, community development initiatives, school educational sessions, engaging youth to assist with strategies, address cause if able.
- Monitor and treat chronic diseases that may be worsened by consumption of alcohol.
- Explain effects of alcohol on medications if appropriate.
- Refer for more specialised treatment if indicated.

- Discuss mental health and social and emotional wellbeing issues which may be influencing drinking levels and refer if required.

The [Healthy.wa.gov.au](https://www.health.gov.au) website has a lot of information related to drinking alcohol and its effect on Aboriginal people.



Alcohol services for Aboriginal People:

- Your local ACCHS
- Wungening Alcohol and Other Drug Services
- Aboriginal Alcohol and Drug Service
- Headspace

The AHCWA Public Health and Continuous Quality Improvement Team are here to assist all Member Services. If you have any enquiries, or require further information and support please email Public.Health@ahcwa.org

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Member Support Team

Policy and Strategy Team

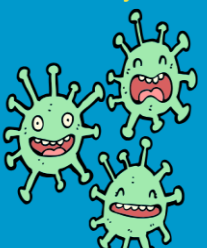
The Policy Team at AHCWA has continued to work on the COVID response and recovery phase by:

- Promoting WA COVID-19 issues on a national platform through NACCHO;
- Continuing to liaise with DPC on local outbreak response plans and broader issues for COVID-19 recovery;
- Providing an Aboriginal youth voice in a Youth Council of WA (YACWA) initiative to look into the impacts of COVID-19 on young people
- Providing feedback to the DoH on the impact of COVID-19 for the implementation of the Sustainable Health Review
- Working with the WA Council of Social Services (WACOSS) and the community services sector to influence the state's COVID-19 recovery plan as it relates to the social determinants of health.

Myth Buster:

The virus that causes COVID-19 is in a family of viruses called Coronaviridae. Antibiotics do not work against viruses. Some people who become ill with COVID-19 can also develop a bacterial infection as a complication. In this case, antibiotics may be recommended by a healthcare provider. There is currently no licensed medication to cure COVID-19. If you have symptoms, call your health care provider or COVID-19 hotline for assistance.

FACT:
COVID-19 is caused by a virus, NOT by bacteria



9 June 2020

