



AHCWA
Aboriginal Health Council
of Western Australia

COVID 19 Member Support Team

Weekly Communique #8

Wednesday 13th May, 2020 5pm

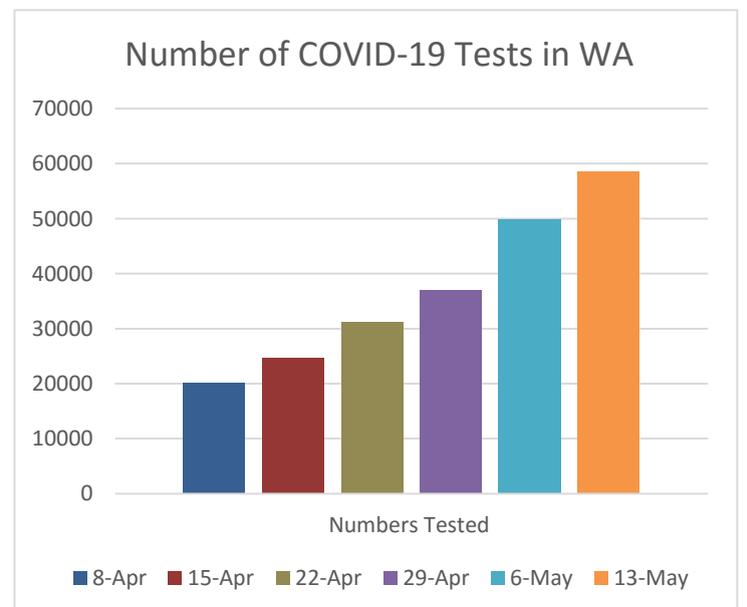
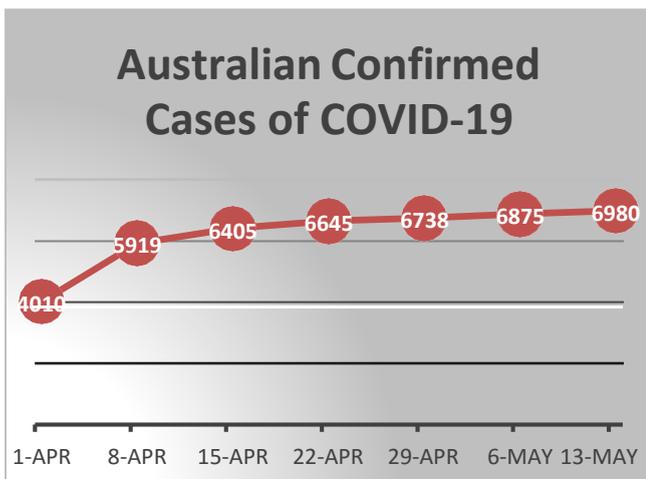
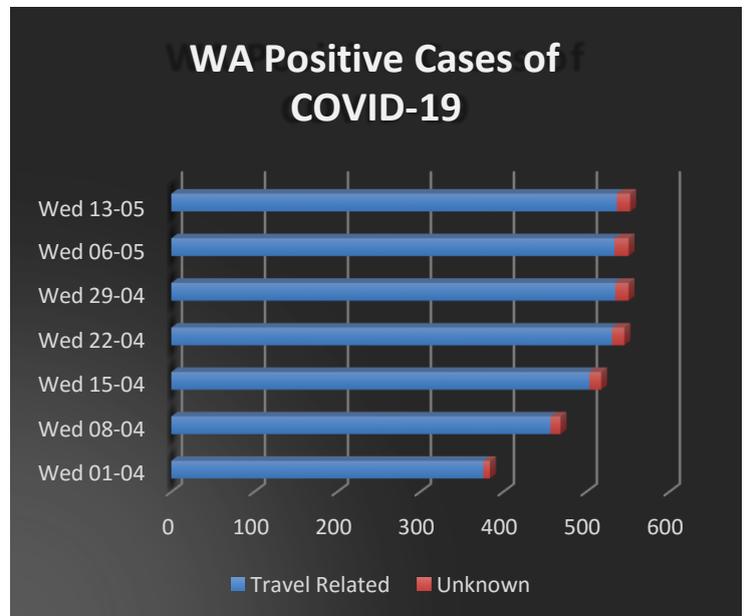


Daily Status 5pm

There are **6975** cases of COVID-19 in Australia. **9** new cases since 5 pm yesterday.

Western Australia has had **553** cases – **0** new case since 5 pm yesterday. There are currently **6** active cases and **538** people have recovered. There are currently **16** unknown sources. No new regional cases. There have been **64** regional cases in total, **63** have recovered. See chart below for regional breakdown.

Region	Active Cases	Cleared Cases	Total Cases
Kimberley	0	18	18
Pilbara	0	5	5
Mid-West	0	3	3
Goldfields	1	7	8
Wheatbelt	0	10	10
South West	0	11	11
Great Southern	0	9	9
	1	63	64



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Weekly Roundup

WA has recorded only 2 new cases in the past week which have both been related to travel or contact from travelers. The total is now 553 positive cases and 16 of these are unknown sources. Testing has increased and there has been 58, 634 people tested in WA since the commencement. The National Cabinet met last Friday and released the four step Road Map for easing of restrictions with WA releasing the State version of this on Sunday. All details related to the Road Map for WA has been in the AHCWA COVID-19 updates and can be found on the wa.gov website [here](#).

The next phase of the 4 phase roadmap begins on Monday 18th May.

Current Developments

Aboriginal groups say coronavirus should not delay new closing the gap targets

The pandemic should not be used by governments as a reason to delay the [new agreement on closing the gap targets](#), a coalition of more than 50 Aboriginal peak organisations has warned ahead of the next scheduled meeting in June.

The Coalition of Peaks said the “quick and decisive” efforts of Aboriginal and Torres Strait Islander health organisations has kept Covid-19 from devastating communities so far, and shows that strong partnerships with governments make a big difference to Aboriginal health and safety.

But the virus has [exposed the inequality](#) between Indigenous and non-Indigenous people on many fronts, the lead convenor of the Coalition of Peaks, Pat Turner, said. “Covid-19 doesn’t discriminate so the gap in potential outcomes is a result of the structural inequity that exists in Australia.”

Proposal to lift coronavirus Bio-security travel restrictions for remote communities in NT

AMSANT Peak Health and NT land councils back proposal to lift coronavirus Bio-security travel restrictions for remote communities as early as June 5.

CEO of Aboriginal Medical Services Alliance NT (AMSANT), John Paterson, expressed [support for the relaxation of the Biosecurity measures in the Northern Territory](#).

“We would need to ensure that strong border controls are maintained and that fully resourced and detailed national, jurisdictional and local outbreak plans are in place that ensure integration and coordination between the NT and Commonwealth governments”.

“It is important that we remain cautious in our approach, we don’t want to see COVID-19 entering one of our communities. Both Indigenous communities and the Government see this as critical”



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Drive through influenza vaccine clinic for over 65's

Influenza is a highly contagious viral infection that can cause severe illness and life-threatening complications. People aged 65 years and over are at higher risk of serious complications from influenza.

Vaccination is the best defense against influenza, providing protection to both the individual and others in the community.

A [drive through influenza vaccination clinic](#)

operating out of the Crown Perth car park in Burswood, will allow people to remain in their car while they are immunised.

The clinic will be open from 9.30am to 2.30pm, Tuesday May 19 to Friday May 22. No bookings are required.

Sport equipment scheme to help at-risk kids in the Kimberley and Pilbara

The State Government will help fund a scheme to [provide second-hand sporting equipment for at-risk children and youth](#) in underserviced communities in the Kimberley and Pilbara.

The funding will help in the delivery of the donated equipment which will aim to keep children fit and healthy while in social isolation.

Policy and Advocacy

The AHCWA Policy and Advocacy Team are still working hard in the COVID-19 space to assist in improving the COVID-19 response for Aboriginal people and their communities across the state.

They continue to represent AHCWA on the WA Department of Communities Taskforce for Remote Communities and Homelessness, and WACOSS meetings.

Formal advocacy re assisting ACCHS with funding for COVID-19 expenses, and lobbying State Government to respond to urgent contingency needs of Aboriginal Communities, such as workforce planning and isolation requirements continues and are being raised with NACCHO at a National level.

An overview from AHCWA, representing our member services outlining the issues our services are facing has been presented to the WA Director at the Australian Department of Health John Tunney.

PPE for Community Services Staff Grant

The Department of Finance has just released the [FaCS May 2020 Special Edition Bulletin](#), detailing information on PPE for community services staff. The bulletin covers: who is eligible for PPE, how to access it and how to manage urgent needs.



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The Department of Health has also issued [guidelines](#) developed by Infection Prevention and Control experts, that provide comprehensive assurance to service providers as to when PPE should be used in the delivery of community services.

If your staff are providing front line services during the COVID-19 pandemic and you meet the criteria detailed in the bulletin, you can submit an expression of interest for PPE using the [COVID-19 PPE request template](#).

This may be useful for some of the Member Services who have a Community Service attached to their ACCHS for access to PPE.

Clinical Information:

COVID-19 Infection Control Training and Contact Tracing Course

The Australian Government have added to their released COVID-19 Infection Control Training and are now offering new courses available for free enrolment.

The website [COVID-19 Infection Control Training](#) currently has 3 courses available and more modules to be released soon.

You are required to create a log in on the

link page, but the access to the courses following that are easy to find and navigate.

The Available courses for enrolment currently include:

- Infection Control Training – COVID-19
- COVID 19 - Indigenous Health Module 1 - Introduction to COVID-19 Epidemiology
- **COVID 19 - Indigenous Health Module 2 - Contact Tracing *****

Courses that are “coming soon” include:

- COVID 19 - Indigenous Health Module 3 - Conducting interview with our mob
- COVID 19 - Indigenous Health Module 4 - Using Personal Protective Equipment in remote communities
- COVID 19 - Indigenous Health Module 5 - Line Listing and data management for COVID-19

More in depth contact tracing course can be found at [Queensland Government Online Contact Tracing Course](#) and contact tracing information and guidelines can also be found in the ASHM [Australasian Contact Tracing Manual](#).

***This is the contact tracing course that has been mentioned at the Clinical Leadership / ACCHS Public Health meeting. We encourage all ACCHS Clinical Staff to participate in a contact tracing



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course as it is beneficial to the service to have employees with these skills as this can relate to STI and BBV's tracing outside of COVID-19. It also allows you to have a better understanding of the process so that if you are asked by a community member "what happens" you will have the answers.

Continuity of Care

Immunisation

There are current concerns emerging nationally that routine childhood immunisations numbers are dropping due to the COVID-19 pandemic.

Immunisation protect individuals and the community from vaccine preventable diseases (VPDs). If scheduled vaccine doses are missed or delayed, or overall vaccination coverage rates are diminished, there is a risk of resurgence of some well-controlled VPDs or outbreaks of some VPDs, such as measles, during and/or after the COVID-19 pandemic. This will put further strain on the healthcare system.

Immunisation providers will need to adapt their procedures and practice to comply with measures in place, including physical distancing, to reduce the transmission of COVID-19. This is to ensure that immunisation services can continue to be conducted safely

without exposing healthcare workers, children, their caregivers and the wider community to undue risk.

The [National guiding principles for maintaining immunisation services during the COVID-19 Pandemic](#) outlines the importance of and some practical solutions to maintaining routine childhood immunisations and conducting influenza vaccination clinics.

The Western Australian CDCD Directorate Immunisation provider update [COVID-19 Maintaining Immunisation Services](#) also outline recommendations for ensuring safe and continuing immunisation provision of service with the key messages including:

- Continuing to provide vaccinations to the community during the COVID-19 pandemic is vital.
- Robust hand-hygiene, clinic cleaning, and disinfection are central to prevent the spread of COVID-19.
- Providers should ensure that social distancing is maintained in all areas of their clinic.
- Vaccination appointment times should be staggered to avoid crowding in clinic areas.
- If walk in clinics for immunisation services are provided they need to ensure adequate social distancing measures can



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still be implemented during periods of peak attendance.

- Staff and clients with symptoms of a respiratory infection should not to attend the clinic.
- Additional precautions should be undertaken for medically vulnerable clients

Influenza vaccines are very important during this time, and specific dedicated clinics and opportunistic vaccinations should occur.

Information for ACCHS in WA to order their influenza and pneumococcal vaccines can be found [here](#).

Due to the COVID-19 pandemic it is recommended that all eligible age cohorts are vaccinated as soon as practicable after receipt of vaccines.

It is vital to ensure that immunisations are being entered into your Patient Information Systems for uploading to the Australian Immunisation Register.

The AHCWA COVID-19 Members Support Team is here to assist all Member Services. If you have any enquiries, or require further information and support please email Public.Health@ahcwa.org

Myth Buster

No. There is no evidence that regularly rinsing the nose with saline has protected people from infection with the new coronavirus.

There is some limited evidence that regularly rinsing the nose with saline can help people recover more quickly from the common cold. However, regularly rinsing the nose has not been shown to prevent respiratory infections.

Can regularly rinsing your nose with saline help prevent infection with the new coronavirus?



Please remember to keep reminding your mob that although restrictions are starting to ease, they still need to maintain 1.5 m distance, wash hands frequently with soap and water for 20 seconds, cough and sneeze into their elbow or tissues and dispose of tissues straight away, stay home if they are sick and keep kids home from school if they are sick too. We need to maintain these basic precautions to stop the spread.