



# Coronavirus (COVID-19)

RACGP Victoria update webinar  
Wednesday 11 November 2020

**For the latest information**  
[www.dhhs.vic.gov.au/coronavirus](http://www.dhhs.vic.gov.au/coronavirus)





# COVID-19 and cancer care

Presentation – RACGP + DHHS Webinar

Tuesday 11<sup>th</sup> November 2020

Dr Andrew Haydon

Medical Oncologist, Alfred Health

Member, Victorian Cancer Expert Reference Group for COVID-19

Co-Chair Victorian Cancer COVID-19 Network

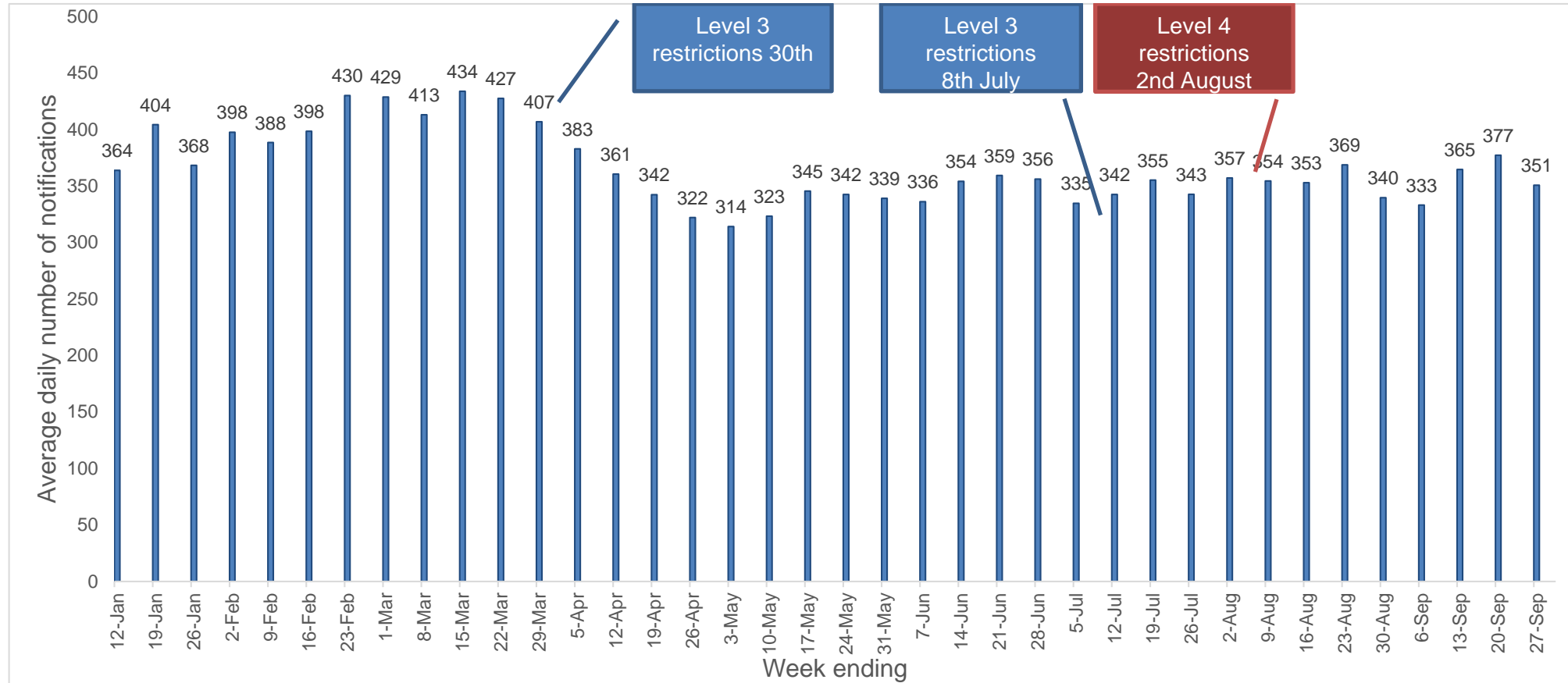
Co-Clinical Director, Southern Melbourne Integrated Cancer Service

# E-Path

- An automated pathology reporting system
- Identifies cancer-related reports from laboratory IT systems and transmits them to the Victorian Cancer Registry.
- As soon as a report is signed off by pathologist, E-Path at VCR receives the copy of report (if selectable and reportable).
- Approximately 94% of pathology submitted in Victoria use E-Path.
- Has a very high sensitivity in detecting cancer reports >99%
- Over the past 12 months E-Path has been improved to improve specificity of reporting (reduce duplicates)

# E-Path Monitoring Console: average daily notifications

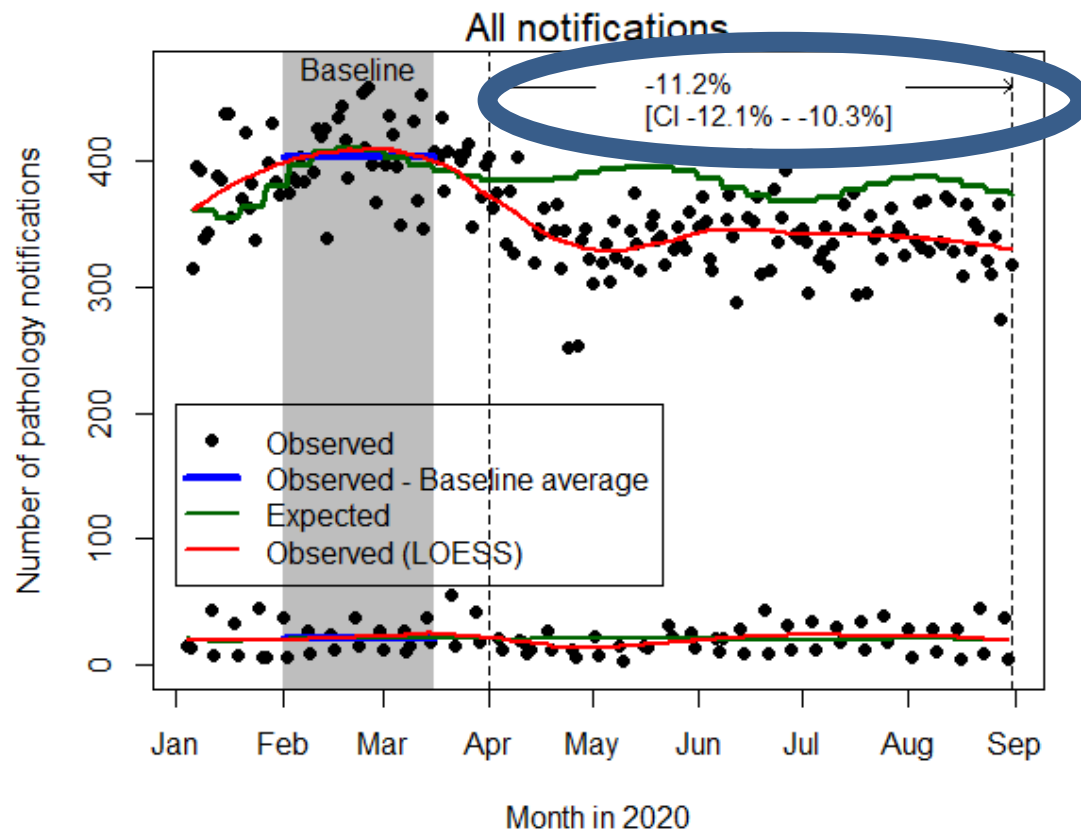
(includes specimens received within 1 week of specimen taken date)



**IN CONFIDENCE**

OFFICIAL: Sensitive

# Overall reduction in notifications



Baseline period to scale incidence data to notification data = Feb 1<sup>st</sup> – March 16<sup>th</sup>

For the period April 1<sup>st</sup> and August 31<sup>st</sup>:

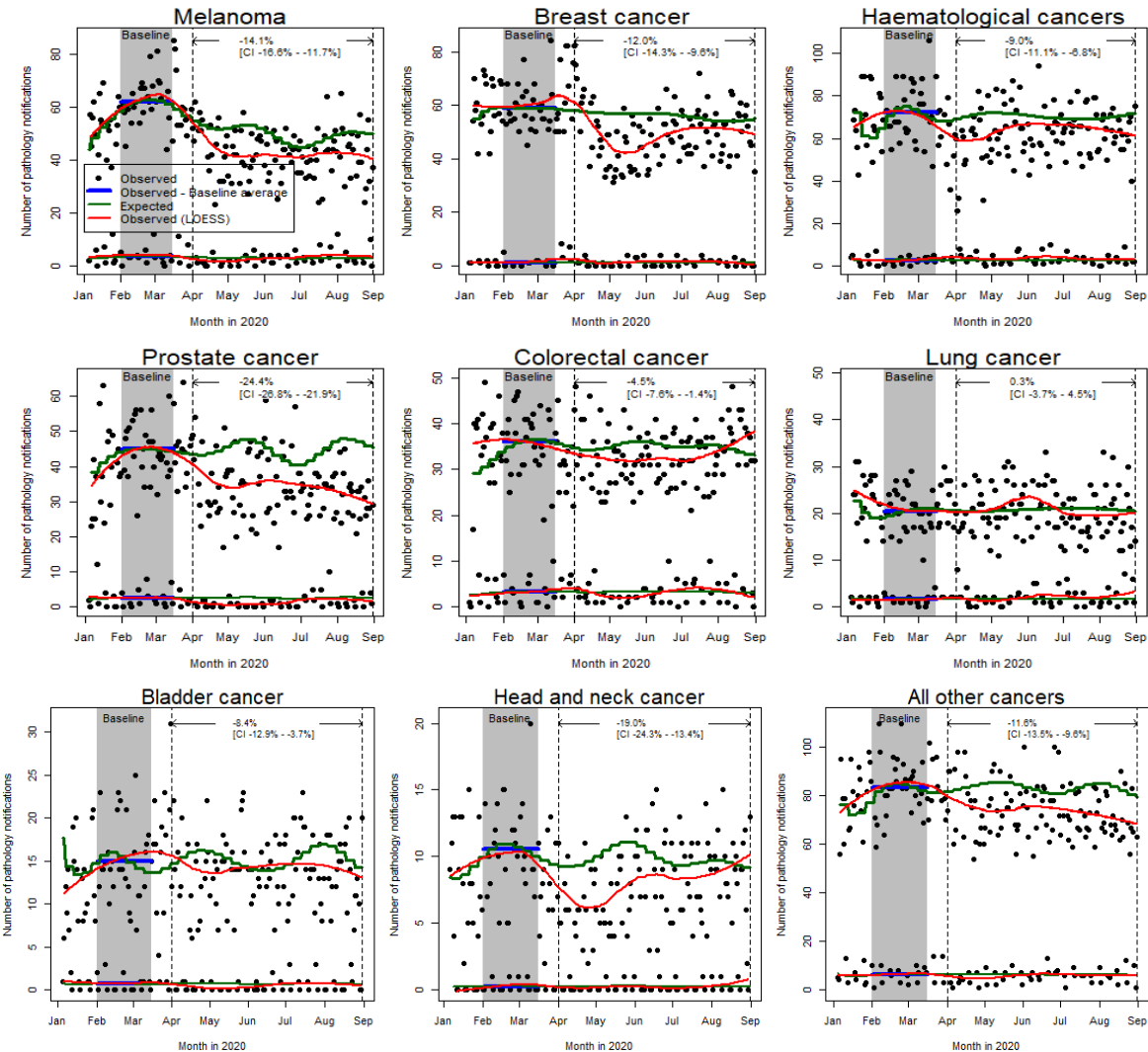
**11.2% reduction** in pathology notifications [95% confidence interval -12.1 to -10.3%]

**4654** fewer pathology notifications than expected

## Reasons for reduced notifications

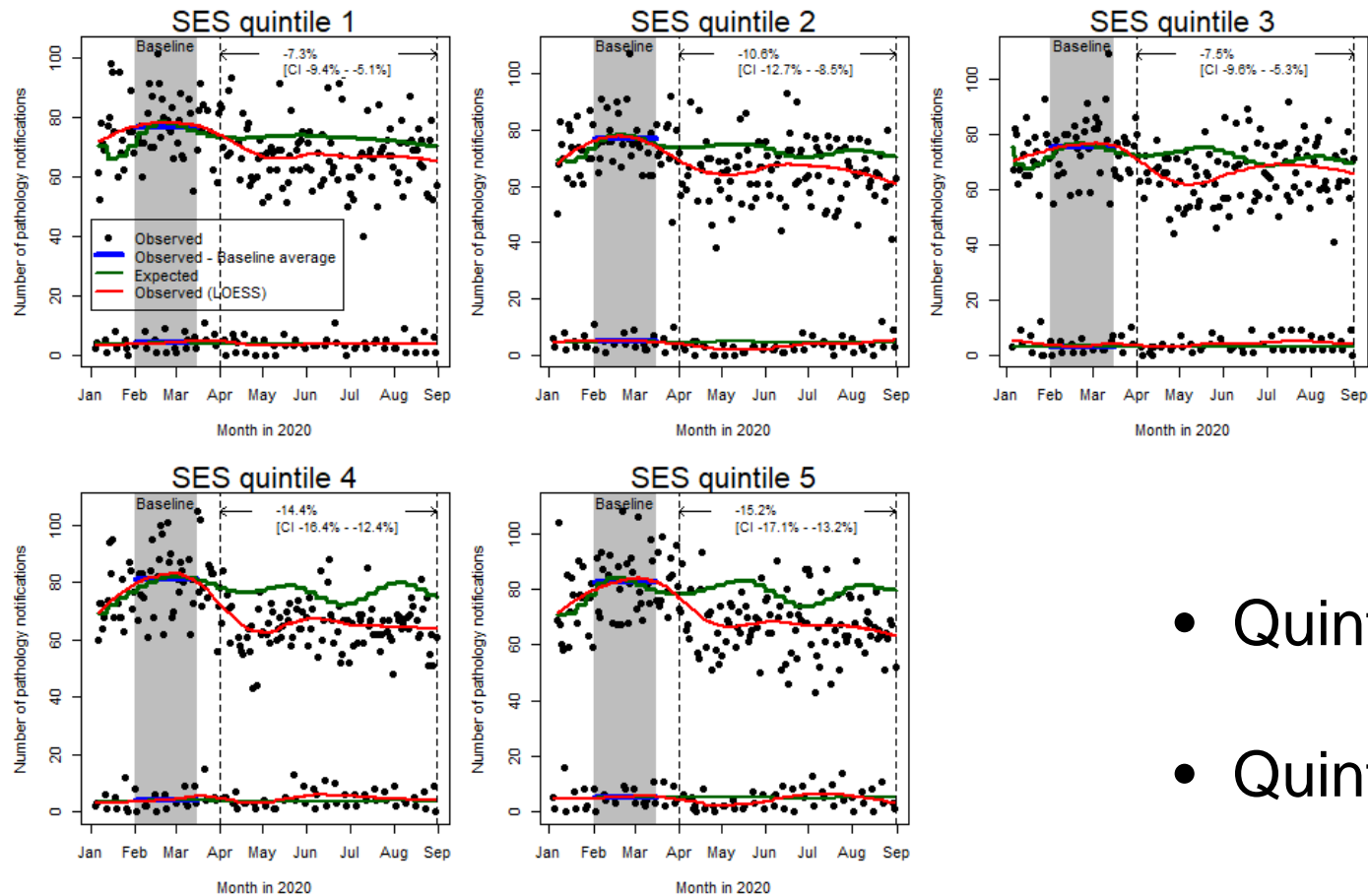
- Reduction in primary care consultations
- Reduced imaging and pathology investigations
- Some impact screening

# Trends in cancer diagnosis



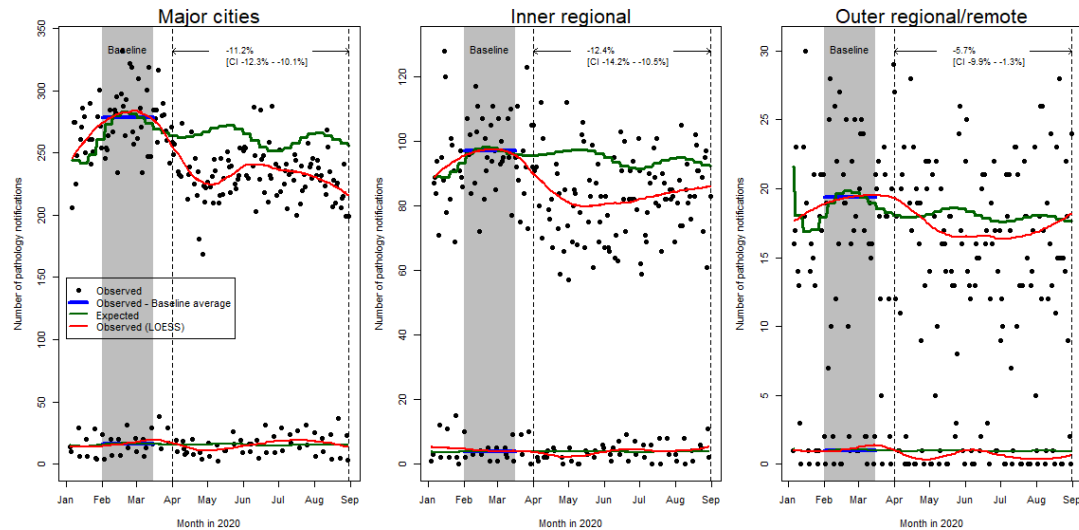
- Melanoma shows has a large seasonal drop in diagnoses after March. Drop off in notifications still notable
- Breast cancer drop off associated with closure of BreastScreen services and then some return of services
- Prostate cancer notifications continue to decline (24.4% decline for period 1<sup>st</sup> April to 31<sup>st</sup> August 2020)
- Colorectal cancer notifications seem to be recovering
- Lung cancer notifications not impacted
- Lower numbers of bladder and head and neck cancer notifications
- Head and neck cancer notifications appear to show some recovery. Clinicians advise this may be impacted by reduced dental consults

# Socio-economic status



- Quintile 1= most disadvantaged
- Quintile 5= least disadvantaged

# Victoria Overview



- **Notable decline in Melbourne which is not recovering**
- **Inner regional is showing some recovery**
- **Low numbers in outer regional/remote Victoria**



# Conclusion

- COVID-19 has been associated with decline in cancer notifications
- This will equate to decline in detection of cancer diagnoses
- Impact on cancer stage migration at diagnosis not yet known
- Decline is most obvious in those aged >50 years, residing in inner Melbourne and in highest socioeconomic groups

# Recommendations

- Urgent public health information campaign to strongly encourage the community to see their primary care provider and be appropriately investigated
- Essential to plan for increase cancer workload over the next 12 months
- Evidenced based clinical guidelines to prioritise activity
- Category 1 cancer surgery must be maintained

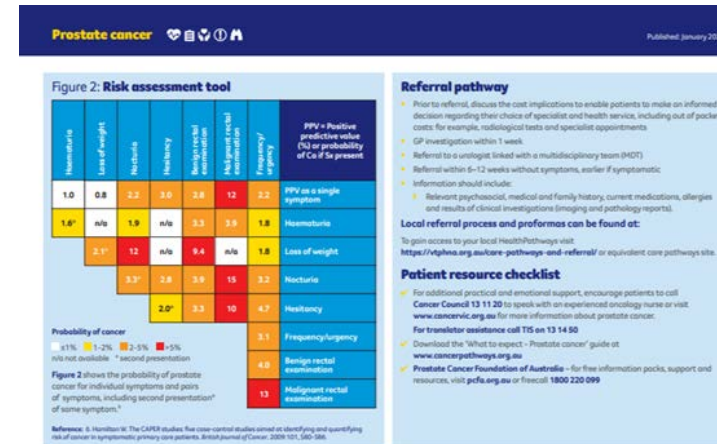
# Actions underway



## ❖ Public Health Campaign



## ❖ Cancer Health Pathways



## ❖ I-PACED - Implementing pathways for early diagnosis



# COVID-19

Presentation – RACGP + DHHS Webinar

Tuesday 11<sup>th</sup> November 2020

Dr Clare Looker

Deputy Public Health Commander COVID-19 (Case, Contact and Outbreak Management)

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Health Protection Branch | Regulation, Health Protection and Emergency Management Division  
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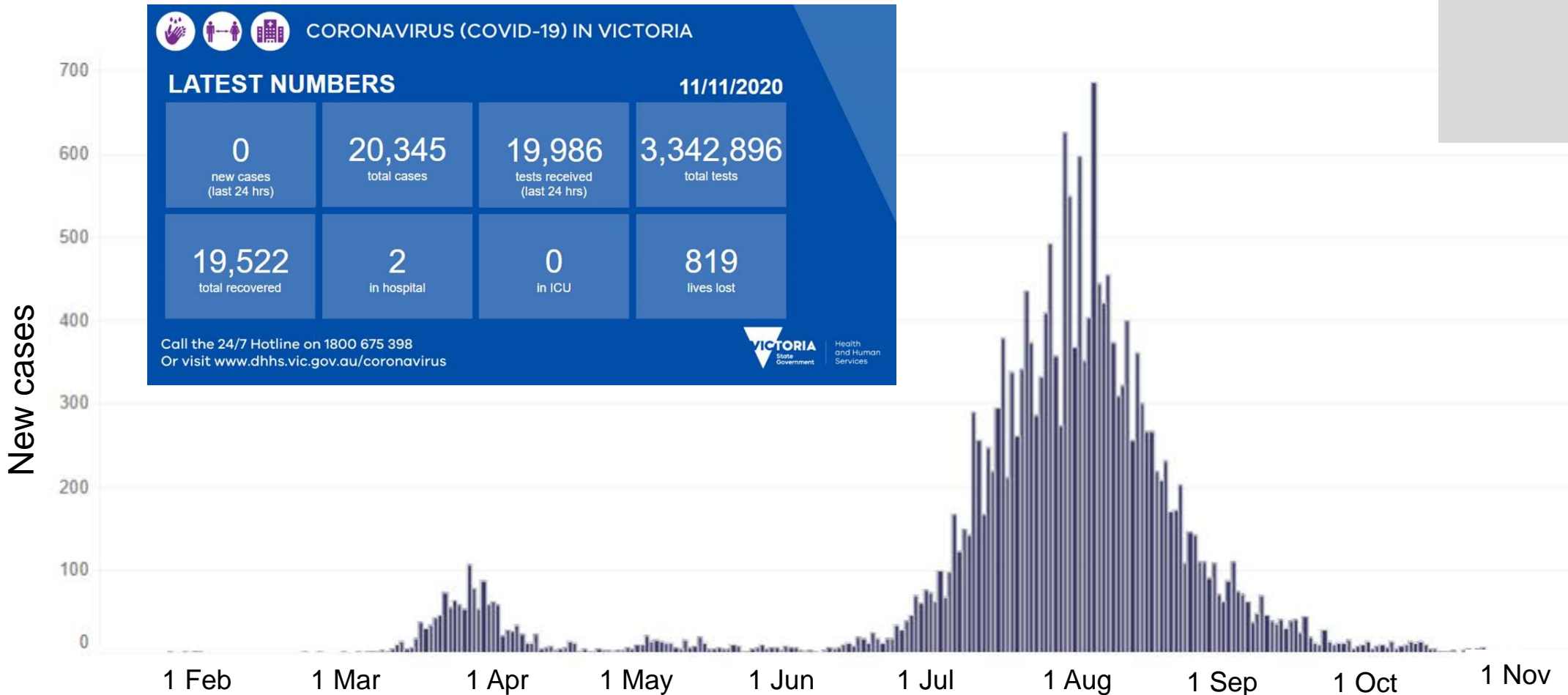
# Situation in Victoria

**14-day average**

Metro: 0.3

Regional: 0

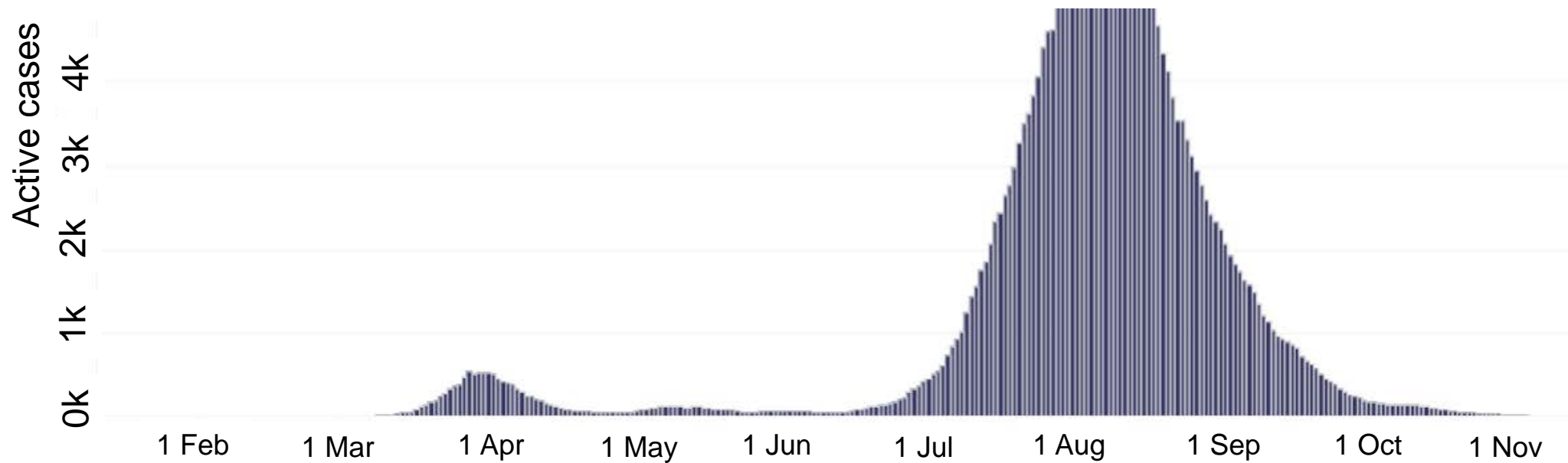
As at 11 November



# Transmission of COVID-19

## Mode of transmission

|   |           |
|---|-----------|
| Acquired in Australia - unknown source      | 0 case(s) |
| Acquired overseas                           | 0 case(s) |
| Source of acquisition - under investigation | 0 case(s) |
| Acquired in Australia - contact with a case | 4 case(s) |



# Victoria's roadmap for reopening

STAY SAFE  
STAY OPEN

COVIDSafe  
principles



Wear a face mask



Physical distancing  
(1.5 metres)



Good hand hygiene



Don't go to work unwell



Cough and sneeze into  
tissue or elbow

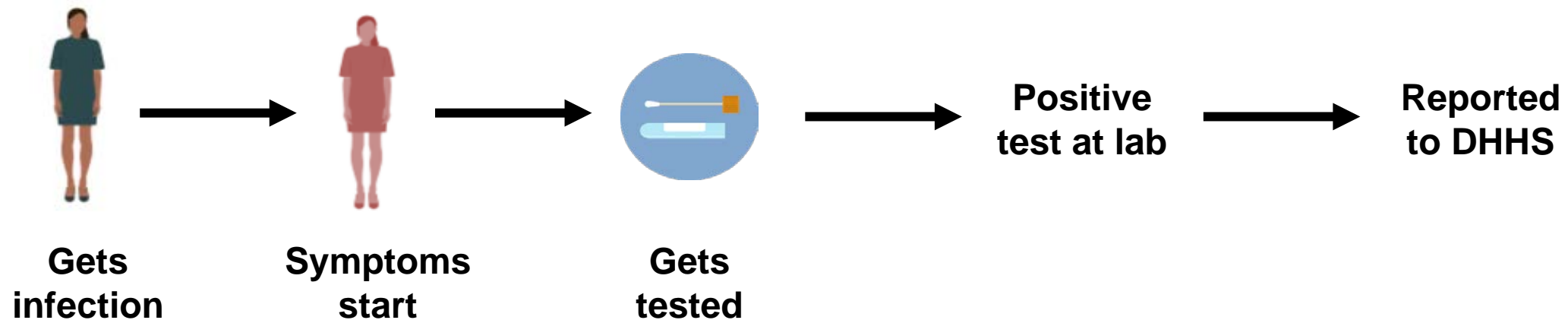


Outdoor activities

- Victoria's roadmap for reopening provides safe, steady and sustainable steps for our path out of restrictions and into COVID Normal
- As restrictions ease it is more important than ever that we act every day to keep ourselves and others safe. These actions below can help protect you from coronavirus (COVID-19).
- Third Step restrictions apply across Victoria. The same restrictions apply in regional Victoria and metropolitan Melbourne.
- Moving to the Last Step and then to COVID Normal will be require meeting 'trigger points' based on case numbers

# Finding coronavirus (COVID-19)

- Testing and contact tracing
  - For people who test positive – isolation stops further transmission.
  - For close contacts – quarantine stops transmission prior to symptoms starting.
  - People with infection are infectious usually **1 to 2 days before symptoms start**.
- Symptoms can start around **5 to 6 days** (up to 14 days) after infection.
- Delays can occur when seeking help and getting tested, at the lab, or in reporting.





# A focus on Healthcare Worker Infection Prevention and Control

There has been active collaboration between partner organisations including the RACGP to collate infection prevention and control resources and determine a list of recommended resources.

## Self-assessment checklists – Safe work

- [Worksafe Victoria checklist](#)
- [Safe Work Australia Checklist - COVID-19](#)

## Infection prevention and control resources

- [RACGP infection prevention and control](#)
- [National COVID-19 Clinical Evidence Taskforce](#)
- [Information for Victorian Health Services](#)
- [Business Victoria COVID-safe workplace](#)

## Daily Attestation

It is recommended that primary care providers require all practice staff (clinical and non-clinical) to complete a daily attestation.

**Staff should confirm that they are free from symptoms related to COVID-19 and have not had contact with a confirmed case of COVID-19 in the previous 14 days.**

- Daily attestation reminds staff to consider their health and reinforces that workers must not attend a provider's premises for work unless they are safe to do so.
- Ensures continuity of general practice operations including supporting the community to feel that it is safe to return to face-to-face care.
- Mitigates the potential implications of a COVID-19 confirmed case affiliated with the practice.
- Can be integrated into service processes for recording presence at the workplace.



# Thank you

**Coronavirus (COVID-19) Roadmap to reopening**  
[www.vic.gov.au/roadmap](http://www.vic.gov.au/roadmap)

**For the latest information**  
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**Information is available in 50+ community languages at**  
[www.dhhs.vic.gov.au/translations](http://www.dhhs.vic.gov.au/translations)