

Regular Board Meeting April 27, 2020

PRESENT

K. Pristanski, Chair

N. Gladun, Vice Chair

D. Murray,

President & CEO

S. Jean, Executive Director

FHT/Community Services

R. Beatty, Director

J. Foulds, Director

G. Mackenzie, Director

E. Wawia

C. Covino, CNE/COO

L. Haskell, CFO

E. Rutherford

J. Jean, Recorder

REGRETS

Dr. R. Dhaliwal, COS

Dr. D. Scott, FHT Lead

Dr. R. Foulds, President,

Medical Staff

The following staff provided a presentation to the Board on COVID-19 measures and procedures that have taken place at NDMH since it was declared a Pandemic on March 11. 2020.

C. Covino

L. Haskell

S. Jean

M. Boudreau

L. Imhoff

S. Normore

M. Constantineau

L. Ratz

L. Berube

C. Turpin

J. Jean, Recorder

Due to the restrictions imposed at NDMH at the time, Board members attended the meeting via videoconference / teleconference.

Each Board member received a copy of the presentation via email in advance of the meeting.

- K. Pristanski, Board Chair opened the meeting by welcoming everyone and thanking the staff for their dedication and commitment to the health and safety of our patients and residents.
- D. Murray led the presentation by providing a brief description of COVID-19 and historical respiratory illnesses. Key public health measures timeline, current status, the epidemic curve and a snapshot of LTC COVID-19 related deaths was discussed.

The remainder of the presentation was shared amongst the staff who were in attendance.

C. Covino

- Incident Management Team
- COVID-19 Pandemic Team
- Information Sources
- COVID-19 Most Used Resources
- Multitude of Reporting Requirements

OPERATIONS

S. Jean (Family Health Team)

- Assessment Centre
- COVID Hot Line
- Ministry Reporting
- Helping the Community (grocery stores / food hampers)
- FHT Reassignment of duties

C. Covino (Beardmore Health Centre)

- Patient virtual appointments
- Staff screening / temperature checks
- Community Education
- NP attending Pandemic meetings
- PPE

M. Boudreau (NDMH)

- Personal Protective Equipment
 - o Allocation
 - Mask allocation plan
- Simulations
- Question/Answer Sessions for Staff
- Policies/Procedures
- Phase I Surge Plan

HUMAN RESOURCES

C. Covino

- Project Lead reassignment
- Support from Health Records, Physio and Business Office staff
- Application to RNAO for additional nursing staff
- Explored "working from home" if required
- Weekend COvid-19 Screeners hired
- Limited work locations
- Decreased volumes in Acute/ER

LOGISTICS

L. Ratz

- PPE Inventory
- Escalation Roles and Responsibilities

- PPE and Critical Supplies Escalation Process
- Equipment Purchases (housekeeping cart, vital signs machines, UMANO beds, tray tables, medication carts, bedside tables glucometers, isolation carts)
- High Flow Oxygen System
- Ventilator
- Tavish Masks

FINANCE/ADMINISTRATION

L. Haskell

- Pandemic Costs incurred to April 16 \$77,168.96
- Surge Plan Costs incurred to April 16 \$51,492.63

PLANNING

S. Normore

- Visitor restrictions
- Housekeeping department received an additional 4 hours per day for cleaning high touch are as
- Public Health Ontario documents utilized as best practices
- April 5th Ecolab provided on site inspection to ensure correct concentration of cleaning product
- Increased vigilance
- Housekeeping staff notified of suspected COVID-19
- ER staff instructed on cleaning ER department during off hours
- LTC initiated active screening for all residents (temperatures and symptoms daily)
- Active screening of staff (temperatures daily on arrival and departure)

C. Turpin

 Pharmacy - ensuring adequate medication inventory for Acute/ER and LTC. Drugs are on allocation and many backordered. Medication stock increasing for COVID-19 related illness

L. Berube

LTC Residents visiting from a distance. Social distancing at meals.

S. Normore

 Lab currently experiencing renovation and displaced several times. Currently taking outpatient labs by appointment. Swabs turn around time between 3-7 days.

- 109 swabs taken thus far (6 positive results on 5 patients). Results for 10 swabs pending.
- Current swab stock includes 145 nasal pharyngeal swabs, 252 vital culture kits for a total of 397 swabs.

M. Constantineau

 JHSC infection prevention and control education including 88 fit tests completed, donning and doffing competency

L. Imhoff

 NDMH has always used best practices for PPE but staff required refresh in use, care and degree of protection that PPE provides in order to re establish their confidence and competence

C. Covino

- Long Term Care Action Plan Key supports required for LTC include infection prevention and control, personal protective equipment, staffing and testing. Specialty Supports include:
 - O Designated link to palliative care supports, and Public Health
 - o Enhanced medical support through programs like virtual physician rounding
 - Community geriatrician and primary support at a local level
 - o Back up Nursing/PSW/health care worker teams and enhanced behavioural supports

COMPETING PRIORITY

S. Normore / C. Covino

March 19 gastro outbreak declared on LTC involving 17 residents and 22 staff

MEDIA AND COMMUNICATIONS

C. Covino

 Included public service announcements, radio interviews, TV interview, communication with townships and first nations via signage, intranet and facebook

LESSONS LEARNED

C. Covino

- Embrace technology
- Virtual visiting
- Importance of communication internally and externally
- Management of risk
- Multiple reporting

- Separate pandemic supply
- Pandemic plan

WHAT IS BEING DELAYED

C. Covino

- Strategic Plan
- Quality Improvement Plan
- Long Term Care application
- Urgent Care
- Accreditation Canada (Worklife Pulse survey / policy and procedure review)
- Renovations (Safe Room / Lab)
- Cyber Security Penetration exercise
- College of Nurses submission
- Board By Law review
- French Language Services requirements
- Patient Transfer initiative
- Root Cause Analysis for Safe Medication Practices training
- Hospital/Police Committee to be established

COMMUNITY SUPPORT

C. Covino

 Nipigon and its neighboring communities have supported the Hospital in multiple ways during the COVID-19 pandemic. Equipment, treats, food.

This concludes the presentation.

- D. Murray stated that Ontario Health has just announced that until such time that the Pandemic as been brought under control in Long Term Care Homes, Acute Care facilities will not return to business as usual.
- K. Pristanski thanked the staff for the excellent and informative presentation. He opened the lines for questions requesting that each member limit to 3 questions. Although there were no questions, every Director took the opportunity to thank the staff for their outstanding efforts.
- K. Pristanski asked if the Hospital is yet aware of the \$4 an hour pandemic pay increase for front-line workers, plus the \$250 bonus per month for those working over 100 a month. C. Covino stated that she has received this information this morning and is in contact with the unions.

lax V-1

ADJOURNED - 12:15 pm

Kal Pristanski, Board Chair

David Murray, Chief Executive Officer