



Committee Report

To:	Chair and Members of the Committee of Management
Committee Date:	September 22, 2020
Subject / Report No:	LTCR-CM-27-20
Title:	LTC COVID 19 Update
Prepared by:	Jennifer Cornell, Director of Long-Term Care
Reviewed by:	Kim Wingrove, Chief Administrative Officer
Lower Tier(s) Affected:	
Status:	

Recommendation

- 1. That report LTCR-CM-27-20 regarding a Long-Term Care COVID-19 Status Update be received for information.**
- 2. That Infection Prevention and Control resources be included in the 2021 Long Term Care Budget for Council's consideration.**

Executive Summary

Reflecting over the last 6 months and the many changes and challenges for the Community and our homes, it is evident that our teams are resilient and quickly adapt to the changes necessary to ensure that we continue to protect and support the residents, families and the community. We currently do not have any COVID-19 cases or outbreaks at any of the three homes.

Updates

Interval surveillance testing of staff and active screening continues to be a ministry requirement for early detection of COVID 19 and on July 16th the Ministry of Long Term Care released a memo stating interval testing would continue until further notice. The memo recommended that all long term care staff should have the opportunity to be tested twice a month. All three homes have provided bimonthly testing for July, August and dates are scheduled for this month as well.

Infection Prevention and Control (IPAC) has been instrumental in our homes remaining COVID free. We are currently working on expanding the focus of IPAC within the homes

and exploring the opportunity for an IPAC champion at each home. This position will play a crucial role in IPAC preparedness, interval testing, Influenza, and continued IPAC education.

Our Finance and Human Resources departments have worked diligently to distribute the pandemic pay the first and second installments to our frontline staff. Our staff have been encouraged to take their vacations and take time for their own wellbeing. Throughout COVID our leadership teams have been providing 7 days a week coverage with leaders rotating working weekends. As we move into a new normal we have gradually reduced the number of managers on-site over the weekend. At the beginning of July each home reduced their weekend coverage to two managers. On August 14th our Director of Care and Associate Director of Care resumed their on-call rotation which would allow for one manager to be on call at each home. Our teams are prepared to resume on site coverage immediately if the situation changes. Emergency Support Workers continue to assist the homes in all departments and our last redeployed staff member has returned to their department.

As the community reopened, our residents are venturing out to their appointments with PPE and actively screened upon their arrival home. Our dietitian, physiotherapist, occupational therapist, footcare and haircare services are back to regular routines.

Virtual, window and outdoor visits have been very successful. On July 15 it was announced that indoor visits could resume effective July 22. The MOLTC policy outlined the guidelines/requirements that were necessary for both the home and the visitor before visits could restart. The homes quickly expanded their visiting policy, organized indoor stations, created an education booklet and IT worked closely with the homes to expand our screening and online booking tool. On July 24th, all three locations were accommodating indoor visits. Outdoor visits no longer require a negative COVID test, but it is mandatory that our indoor visitors attest to a negative COVID 19 test within the 14 days of their visit. Families have been looking forward to indoor visits for quite some time and provided feedback on a Virtual Family Meeting that they would love to be able to hug their loved one. Through discussions with Public Health our homes were allowed to offer visitors the opportunity to hug their loved one for 30 seconds at the beginning and end of their indoor visit as long as all the recommended precautions noted are followed;

Special consideration: In response to requests we have consulted with Public Health who continues to recommend you maintain physical distancing and to avoid handshake and hugging but if you must hug your loved one at the beginning and end of your indoor visit you may embrace for less than 30 seconds (the shorter, the lower the risk of transmission). Please note hand hygiene must occur before and after embrace and any direct contact increases the risk of

transmission. Request to be noted on electronic booking tool when scheduling your indoor visit.

We also heard from families that children need the opportunity to visit their loved one. In response our visiting policy was changed and states the second visitor can be a school aged child if accompanied by an adult.

A Committee was developed to create a care partnership program as an essential component of resident centered care and our Colour It philosophy that would address their physical care, mental and overall wellbeing. The team developed a Designated Care Partner (DCP) Program that was reviewed by our clinical team, family council and by Public Health. To ensure risks are balanced, our homes agreed that a Pilot Project would allow us to monitor the program and slowly grow. On July 31st we received approval from Public Health and introduced the program to frontline staff and residents. The pilot allows for two Designated Care Partners that are chosen by the resident. There are also requirements for participating, the partner must agree to be a committed partner, complete mandatory education and attest to a negative test with the 14 days of each visit. Our first Designated Care Partner visits started the week of August 10th. To expand the program, we sent a survey to resident's contacts to gather feedback on the type of visits they are using and to see the interest for participating in the DCP program. August 28th the Ministry of Long Term Care released a memo allowing short term and temporary absences. On September 2nd new [Visiting Guidelines](#) were released which included a Caregiver definition that was very similar to our DCP with the exception of allowing two (2) caregivers at one time. Our homes are well prepared and ready to implement the updated visiting protocols. On September 8th a Virtual Family Meeting was held to go over the visiting guidelines and answer questions. A chart has been developed to assist in clarifying the requirements for each type of visit available.

Partnerships

During COVID 19 collaborative efforts have been very beneficial to the homes in our area and work is continuing; our area has formed a Regional IPAC committee with representatives from all healthcare sectors to create IPAC capacity at a local level, develop a toolkit for quick access and a process to trigger support from Ontario Health when necessary. Recently our homes have joined forces with Hotel De Grace, Bruyere and Kate Ducak, Gerontology Consultant to work together and evaluate the care partnership and our Designated Care Partner program. As we work through the process, I will keep the committee informed of the progress. Going forward work continues on new strategies, managing and monitoring PPE supplies and ensuring ongoing communication. We are thankful for the continued support from the CAO, Senior Management team and the staff in all departments.

Appendices and Attachments

[Grey County Visiting Charts](#)