



Committee Report

To:	Chair and Members of the Committee of Management
Committee Date:	February 16, 2021
Subject / Report No:	LTCR-CM-05-21
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 adopted by Committee as presented; Endorsed by County Council February 25, 2021 per Resolution CC26-21;

Recommendation

1. That report **LTCR-CM-05-21** regarding a **Long-Term Care COVID-19 Status Update** be received for information.

Executive Summary

We are now 343 days into the COVID-19 pandemic, our care communities have stayed strong and maintained vigilance to ensure our residents, caregivers and staff are safe and well prepared in the case of an outbreak. Infection Prevention and Control (IPAC) measures continue to be in place, and we have implemented additional resources. An IPAC lead has been assigned at each location and is responsible for supporting IPAC audits, education, to addition to our IPAC measures we are currently recruiting for Surveillance Support staff this to assist with the roll out of Rapid Antigen Testing. The Director of Care and Associate Director of Care along with the IPAC lead will be completing Essentials in Infection Prevention and Control through IPAC Canada. All staff will also be completing Public Health's IPAC Core Competencies modules through our eLearning platform. We continue to order weekly PPE supplies to maintain a minimum 8-week supply.

Updates

Vaccination

Public Health provided information related to the COVID-19 vaccine preparation and phased in approach. Data was provided to Public Health and each location has been providing vaccine education to residents, families and staff as they complete consents. The rollout of vaccine has been a phased approach and the doses received will be divided throughout the 19 long term care homes in Grey Bruce. On January 19th and 20th Stephanie O’Krafka and Andrea Jackson, Consultant Pharmacists from CareRX, joined the family and staff virtual meetings to provide additional education and answer any questions related to the COVID-19 vaccines. Public Health notified Rockwood Terrace regarding the arrival of the Moderna vaccine on January 25th for all Rockwood Terrace residents. The vaccine was received at 2:00 p.m. and the vaccination clinic started immediately, and 84 residents were vaccinated. Lee Manor was notified of a small shipment and vaccinated 22 residents on 1st floor on January 28th. Grey Gables residents received their vaccinations on Saturday, February 6th and 67 residents were vaccinated followed by Lee Manor on Sunday, February 6th and the remaining 123 residents were vaccinated. This is extremely welcome news as we work towards the road to recovery.

Testing

Our care communities continue to test staff and Designated Care Partners (DCP) weekly and testing is available throughout the week to accommodate staff schedules. Through surveillance testing, both Lee Manor and Rockwood Terrace have experienced indeterminate COVID-19 results. In collaboration with Public Health, no outbreaks were declared but additional infection prevention and control measures were implemented immediately. Tray service was also provided to the home areas affected. The individuals were all asymptomatic and directed to self-isolate. Retesting was completed and within days we received confirmation that all indeterminate cases were confirmed to be negative.

Rapid Antigen testing was introduced in January and our long term care communities have received Rapid Antigen Testing kits which have proven to be very beneficial at our three homes to assist in the surveillance testing process. It was announced on January 27th that all long term care homes are required to transition to Rapid Antigen testing for staff and DCP surveillance. Our region is required to be operational by February 22nd. This will require all team members to be tested 2-3 times a week and DCPs upon each visit. Additional human resources are necessary to successfully operationalize rapid antigen testing to be available 7 days per week with extended hours. Internal and external recruitment efforts are underway. Additionally, each home must set up an appropriate space to conduct rapid antigen testing. The space must be accessible, large enough to allow for safe distancing of individuals and allow space for individuals waiting for results. The teams are being extremely creative to find an appropriate space

that meets the specific criteria that will not negatively impact residents or take away from their living areas.

The Ministry of Long Term care also notified long term care homes (see linked memo dated February 4, 2021) that mandatory Third Party Oversight of active screening is now required at the screening stations. Funding has been provided to support this. Current service provider Fairmont Security will take on this role at all three locations to ensure full compliance.

Visiting and DCP Program

On January 15, 2021 we received clarification regarding visiting. General visits were restricted on December 26, 2020 and due to the lockdown measures in place window visits were also restricted and we quickly notified families of this change. Our Colour It Connect Virtual Visit program continues, and each location has increased the number of virtual visits to ensure family and friends have the opportunity to connect with their loved one. On January 22, we received additional clarification that long term care homes could reintroduce window visits if they could be accommodated. Our homes, reviewed the risks and agreed that due to the new variant and to support the lockdown measures our window visits would remain suspended.

Our Designated Care Partner program continues to grow, and we currently have 318 active DCPs. The only change to our DCP program is that only one DCP may visit at one time due to the lockdown. We continue to meet with the Evaluation Collaborative group along with Canadian Foundation for Healthcare Improvement (CFHI) LTC+ Acting on Pandemic Learning Together Program. In early January we met with James Cronklin from LTC+ and he provided an overview of the research project. It was noted that as we work through the process the committee will increase to include additional members, residents, families/DCPs and frontline staff members. To collect additional data, it is anticipated that an additional survey will be released at the end of February, and again in May and September. Updates will be provided as we work through the process.

On January 26th, Jessie Checkley from the CFHI Essential Together Program, interviewed the Director of Long Term Care to discuss how the County of Grey developed and rolled out the Designated Care Partner Program. During the interview, successes, milestones and learning moments were reviewed. We are very pleased that our program is being recognized highlighting the positive impact for our residents and our communities as well as highlighting the collaborative work involved.

Staffing

Due to the lockdown measures, there has been an increase in leaves due to daycare or school restrictions. Recruitment of staff continues, and educational opportunities are being introduced to the ESWs and CSAs to further their career in healthcare.

Funding

Funds have been received from the Ministry of Long Term Care for each care community to support the implementation of the Third Party Oversight for screening requirements. The County has received additional COVID containment and prevention funding up to December 2020. As well, additional COVID containment and prevention funding has been received that will fully cover all the COVID costs incurred for the period April to June 2020.

Each of the care communities have also received IPAC Training and Personnel Funding that will support the costs of the IPAC lead in each home, as well as the IPAC specialized training for all staff.

Partnerships

Work continues with partnerships at both regional and local levels. The Grey Bruce Long Term Care Committee, Public Health and partners meetings continues every two weeks. Regular meetings continue with the Southwest Region Pandemic Planning, Wave 2 Response and the Grey Bruce Integrated Health Coalition, these groups play a critical role in ongoing pandemic planning and preparation.

With new variant concerns, our three care communities have been in close contact with Public Health and our hospital partners to coordinate 3rd party IPAC Risk Assessments. These assessments have helped to identify any areas that require improvement or modifications. Educational sessions are currently being organized to help support hospital staff who have volunteered to support LTC Homes in crisis. Both strategies will support positive relationships allowing for a more nimble and prepared staff crisis response. Going forward work continues on outbreak strategies, implementing new COVID educational resources/toolkit, managing and monitoring PPE supplies. We continue to be thankful for the support from the CAO, Senior Management team and the staff in all departments, we recognize that we are in this together as we Colour It for our residents, families, staff and communities.

Appendices and Attachments

January 19th Virtual Family Meeting – COVID-19 Vaccine Presentation

- [Virtual Family Meeting – CareRX Vaccine Presentation](#)

January 27, 2021 – Associate Deputy Minister Memo: Enhancing the Protection for LTC Homes Through Rapid Antigen Testing and 3rd Party Oversight:

- [MLTC Associate DM Memo](#)
- [Rapid Antigen Testing FAQs](#)

February 4, 2021 – Associate Deputy Minister Memo: Updates to Enhancing the Protection for LTC Homes:

- [MLTC Assoc DM Memo Update: Enhancing the Protection for LTC Homes](#)
- [CMOH Letter to Medical Officers of Health Antigen testing in LTC Homes](#)
- [Updated Rapid Antigen Testing FAQ's](#)

February 5, 2021 - Associate Deputy Minister Memo: Updated Rapid Antigen Testing FAQ Document:

- [Updated Rapid Antigen Testing FAQs v2.0](#)

February 9, 2021 – Directive #5

Directive #5 remains the provincial baseline standard for provision of personal protective equipment for hospitals, long term care homes and retirement homes. Please see the attachments below

- [Memo from the Chief Medical Officer of Health](#)
- [Directive # 5](#)