

COVID-19 Town Hall Q&A



January 12, 2021

QUESTIONS AND ANSWERS:

The information in this document is accurate as of Friday, January 15, 2021. Note: Communications may edit the tone/tenor of questions as written, if they could be offensive/unsafe for others.

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HUMAN RESOURCES

Are we going to continue getting Pandemic Pay?

The pandemic pay program was a federal/provincial program. We’re not aware of any continuation of that program at this time.

Are staff supposed to work remotely or go to their work site? The information is not consistent.

Early in the pandemic, staff who were able to work effectively at home – with no impact to their departmental output – were asked to do so. The intent was to reduce the number of staff in all work areas and create more space for the individuals and patients that need to be there. Many staff chose to return to their at-work environments in the summer, but were once again asked to work at home if possible in November when our cases increased. Human Resources has repeatedly stated that staff working at home should remain at home for the duration of the pandemic – and following the pandemic, can work with their leader to formalize that arrangement, if it is working and appropriate. It is important to have these conversations with your leader as there may be reasons why some roles can work at home and some roles cannot.

Is there any update on when union (HEU, HSA) employees working from home, successfully; can change it to a permanent situation for working remotely, like NC?

Our Working from Home policy, outside of pandemic operations, will be phased in. Initially, non-contract employees who were sent home during our pandemic response will be able to work with their leaders to reach Working from Home agreements. Island Health will engage with our union partners in the coming months to look at expanding the policy to include eligible union members. Bargaining unit employees who have been working at home because of the pandemic should continue to do so, and should review

the [Home Worksite Inspection Checklist](#) to ensure your home office is safe, appropriate and sufficiently protects confidentiality. Read more about our new [Work from Home policy](#) here.

PUBLIC HEALTH/MEDICAL HEALTH OFFICER

VACCINE: (PLEASE ALSO SEE OUR [VACCINE FAQs](#) FOR COMMON QS & AS)

How many anaphylactic reactions have happened on the Island since the vaccine has started to be administered?

None. We are prepared to manage anaphylaxis at all vaccine clinics.

Will Drs. Henry and Stanwick be receiving their second dose at the 21-28 day interval, or the interval of 35-42 days?

Dr.s Henry and Stanwick will be getting their booster shot the week of day 35.

Why are priority immunization clinics not full each day?

A clinics could be cancelled if our anticipated supply of vaccine did not arrive as scheduled, or there were multiple appointment cancellations.

When do you estimate that staff who do not provide patient care will receive the vaccine?

This will vary depending on where staff work. Most Island Health staff will be vaccinated by the end of Phase 2 (March) – but if not then, they will have the opportunity to get vaccinated after that. Everyone who wants a vaccination will be done this year.

A clinic has called our area (ICU) two days in a row to offer us extra vaccines, why is this happening?

We do not waste any vaccine. If a clinic is finished with scheduled appointments and there is vaccine remaining that needs to be used, we will ask the nearest group of prioritized staff to send who is available to get their vaccine.

I want to get the vaccine but only if I can get it at the manufacturer's recommended dosing schedule. Can I put it off until I can be guaranteed this?

Please [read more](#) about second doses and recommendations here. Island Health will be providing booster doses the week of day 35 for all.

The set-up of the COVID vaccine clinic at VGH did not have good physical distancing, why?

There is limited space at VGH, but we were able to ensure the stations were appropriately spaced, appointments were staggered and seating has ample space. Appropriate PPE and sanitation methods are mandatory at all clinics.

When are home and community care clients who are all high risk receiving the COVID vaccine?

Home support clients are included in Phase 2 of the [prioritization plan](#). Community Health Workers who work in Assisted Living will be vaccinated in Phase 1 and the majority of Community Health Services staff will be vaccinated in Phase 2.

Public Health/MHO General:

What are the quarantine restrictions for those who travel from another province (i.e. Alberta) to British Columbia?

At this time, BC has not imposed any quarantine expectations for people travelling from other provinces, however Dr. Bonnie Henry has strongly requested that people not travel outside of their own communities. Travel decisions in BC are made at the Provincial level and changes are announced by Dr. Henry.

Why are recent school exposures not listed on the Island Health exposures lists?

School exposure notices are shared on our [public website](#). These notices are added once the school has had an opportunity to connect with families and faculty – so there may be a slight time lag before posting to allow this process to happen.

INFECTION PREVENTION & CONTROL/PPE

Can we revisit the goggles policy for home support? A lot of tasks we do should not require the use of goggles, yet we're told to always wear them.

We need to continue to take all recommended precautions to protect ourselves during the pandemic, so that we can continue to provide care to the people we serve. Goggles must be worn in accordance with our [PPE guidelines](#).

BCCDC says, "...smaller droplets are light, and they can float in the air for a longer time. Because of this, smaller droplets may collect in enclosed spaces." Why No AB precautions?

BCCDC provided this clarification, however their advice on what PPE is required for health and care professionals has not changed. Activities like intubation and other AGMPs create tiny particles that can hang in the air longer. Environmental factors (i.e. ventilation) can make it different for how long particles – large or small - stay in the air. Regular medical-grade masks protect us from COVID exposure – with exceptions as noted in our [PPE guidelines](#), where an N95 mask is required.

LONG-TERM CARE

In LTC, are we to focus on the quality of life or longevity of life? Residents have no quality of life due to the lockdown.

This is a challenging situation and we recognize the impact on residents and families. We're following provincial orders and understand how challenging this is for them. We're hoping to see some relief following vaccination of LTC staffing and residents. Vancouver Coastal is already seeing some positive benefits in their care homes following the vaccination of residents and staff.

CLINICAL HEALTH SERVICES

In Hospice, how do we go about getting the sputum test for patients who are unable to do the nasopharyngeal swab due to tumors, etc.?

Please connect with your buyer through your normal process as there may be supplies available in our inventory.

We have an indoor mask mandate for all staff and patients, but [this article](#) says there's a shortage.

What is the advice?

The intent of [the article](#) is to reinforce the importance of utilizing your PPE appropriately, and general conservation, so as not to create unnecessary wastage. The masking policy for staff and patients has not changed.

I would like an update on the visiting policy at our local hospitals please?

There have not been any changes to the visitor policy at acute sites at this time.