

COVID-19 Town Hall Q&A



October 20, 2020

QUESTIONS AND ANSWERS:

(Please note: the information in this document is accurate as of Friday, October 23. Outstanding questions will be added as answers are received.)

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HUMAN RESOURCES

We are still in a pandemic. Why are we not still being paid pandemic pay? There is no less risk and grocery store employees are still being paid it.

Pandemic pay is a temporary measure set up by the Province of BC to support eligible employees that delivered in-person, front-line care in health, social services and corrections during the 16-week period of March 15 to July 4, 2020. Any further pandemic pay terms will be determined by the Province. Find [more information here](#).

Is the remote working policy still planned to be released on Nov.1st, per the last update? **AND Does Island Health support people who have adapted their practice to be virtual or a hybrid of virtual and in-person. Or, is it seen as a perk they are getting?**

Yes, our work from home practices since March 2020 support this. The formal Work from Home policy is scheduled to be shared with staff/medical staff on November 1st.

Why is there a push to get people back into the office when the work is just as productive from home? Please post more jobs that are WFH.

Island Health has stated that any employees who are currently working at home should continue this practice during the pandemic. All work from home determinations and arrangements need to be made between the employee and their department leader, based on the needs of the department.

I have been directed to attend in-person team meetings, even though they can effectively be done over Zoom. Is this essential?

Please discuss the need to attend in-person with your leader. Effective meeting options exist, however there may be departmental/team reasons for an in-person meeting, which is safe as long as everyone is maintaining appropriate distance and/or wearing a mask.

PUBLIC HEALTH/MEDICAL HEALTH OFFICER

Where do the people who test positive usually catch COVID (i.e. dining out, attending big group gatherings, travelling)?

Dr. Bonnie Henry has recently identified that the surge in new cases has been driven by social gatherings, such as weddings and funerals. Dr. Henry is encouraging us all to avoid inviting guests to social gatherings beyond immediate family or our bubbles of six. Anyone invited to a large gathering is encouraged to decline. Slides 8 & 9 in the following [PHO presentation](#) have some additional information about the proportion of cases by exposure setting and age per epidemic phase.

What is wait time now for COVID testing call centre and time to get an appointment?

As of Friday, October 23, 2020 at 10:00am, there are no wait times to get through to the call centre. Callbacks to book appointments are being made the same day (within work hours) - and most collection sites are booking same-day or within 24 hours.

Please set up a dedicated number for clinicians to call for COVID results. Lab techs in Molecular diagnostics are too busy running the tests to be clerks too.

Patients can access their COVID-19 results through the following options:

- 1. Access test results, 24-48 hours after testing, through [MyHealth](#), a secure website that gives access to your personal health information.*
- 2. [Sign up for results by text message.](#)*
- 3. Call BC's COVID-19 Negative Results Line 24-48 hours after testing at 1-833-707-2792, 8:30 a.m. - 4:30 p.m., 7-days a week.*

Clinicians awaiting lab results for a patient should follow their normal protocols/process of receiving results and should not be calling the Lab directly.

Realistically, do you feel international travel will be allowed by March 31, 2021?

The Government of Canada sets restrictions around international travel to protect the health and safety of Canadians by restricting discretionary international travel. Right now, Canadians can still travel abroad. Travellers need to ensure they know about quarantine restrictions of the destination country, be aware of travel insurance coverage, and build in time for the 14-day quarantine restriction when arriving back in Canada.

We have heard leaders commit to strengthening public health programs to support secondary impacts of COVID response. When will this come to fruition?

Responding to the Secondary Impacts of Covid-19 has been identified as priority work for Public Health in the Island Health Workplan for 2020/21 and work is already underway. Similarly, Public Health currently participates on the Provincial Unintended Consequences Working Group where these conversations are happening at a provincial level.

Schools are letting children return to school while awaiting test results and calling them "Peace of Mind tests" since symptoms decrease. Why is this allowed?

Students with mild symptoms without fever can monitor at home for 24-hours and return to school without further assessment if they symptoms improve. If symptoms include fever or worsen after 24-hours, a health assessment should be conducted to determine if testing is appropriate. Students who receive a COVID-19 test based on recommendations from the health assessment should isolate at home and await the result of the test. If the test result is negative, the student may return to school once symptoms have improved and they feel well enough. If the health assessment does not recommend testing, the student may return to school when symptoms have improved and they feel well enough. For more information, please refer to BCCDC's [Schools web page](#).

Is there a new list of symptoms for children?

You can find the list of symptoms for children on the [BCCDC's Schools page](#) (under 'About COVID').

Is there a minimum age for doing testing? It's cold season and the number of URI's is up so how do we determine if the child has a URI or COVID?

There is not a minimum age to do testing for Covid-19. School-aged children have the option of doing a gargle test.

How busy have flu clinic lineups been? Is it worth waiting for lineups to die down?

Occupational Health immunizations clinics are available between October 19 and November 13 at participating sites, and there are some peer immunizers offering the vaccine at some of our Island Health sites. We understand there is a sense of urgency for people to get their flu vaccine this year, but it's important to note there is still plenty of time get a vaccine. Get more information [here](#).

Will people being tested for COVID be tested for Influenza at the same time now that we are moving into flu season?

No, the public will not be tested for influenza at the same time they are being tested for COVID-19, with the exception of hospitalized patients, residents of Long-Term-Care facilities and Sentinel sites.

Why are we not having full day flu clinics when there is a huge demand for it?

The flu clinics are scheduled between 4 to 6 hours in length and are based on the resources we have available. Timing takes into account a number of considerations:

- *Often our immunizers are attending a number of clinics per day at different facilities*

- *There is generally more than one clinic scheduled per day and the immunizers are assigned to different facilities offering clinics*
- *Providing appropriate breaks for our immunizers is also an important consideration.*

Could we have a sign up process for flu shots at hospital sites? This would help prevent unnecessary queues.

In planning for this year's flu campaign, an appointment-based system was considered. Part of the benefit of having staff flu clinics onsite is that they accommodate direct patient care providers that find it difficult to step away from work due to patient care needs and unpredictable schedules/workflow. Depending on the care setting, some workers may find it difficult to keep appointment times as it is difficult to plan for the release from work. Drop in clinics accommodate all stakeholders within healthcare settings, especially those with unpredictable schedules. Appointment-based systems are being used by public health and many pharmacies, and staff are able to access immunizations there also, if available and convenient.

INFECTION PREVENTION & CONTROL/PPE

Can you please speak to the rumors that wearing a mask will soon be mandatory within all Island Health facilities?

We are expecting new guidelines on masks from the Province and will share that will staff as soon as it is available.

I work in the OR in Victoria. Almost no one here wears a mask or social distances outside of procedures. Not cleaners, nursing, physicians or management. HELP!

Our guidelines state that when within 2-metres of a colleague, client, patient or resident, you must wear a mask. Wearing our PPE in accordance with our [guidelines](#) protects you and others. Across Canada – the majority of health-care workers are infected by colleagues, which is why we are clear on that process. If you have concerns about colleagues who are not abiding by our PPE guidelines, and these concerns are not being addressed, please speak with your leader, or reach out to your local [JOHS committee](#). The responsibility of leaders is to be out and about to support our teams to be safe in the work they are doing. The responsibility of individuals is to know what the guidelines are and to follow those practices.

Why as a medical health office are we not required to wear masks as well as our patients and clients?

You need to wear a mask almost everywhere else u go.

We continue to follow our [PPE guidelines](#), which state that when within 2-metres of a colleague, client, patient or resident, you must wear a mask. If you are unable to distance from people/colleagues, please wear a mask. If you just feel safer in a mask – please wear one.

Can we please make masks mandatory for staffing employees and/or allow them to work from home?

Staff who are able to work from home can do so with the approval of their leader. Working from Home guidelines will be available to staff on November 1st. Staff who work in non-care areas (no interaction with patients, clients, residents, families), but work within 2-metres of their colleagues should wear a mask (including their own non-medical mask - cloth or paper).

What do we do when staff members pull their mask down over their mouths? And why are masks not at all staff entrance doors?

Staff need to take individual responsibility to follow our [PPE guidelines](#) on masking in the workplace. Leaders need to be monitoring their staff and identifying moments for teaching/feedback and compliance. Colleagues can also tactfully remind each other about appropriate use of masks. Regarding boxes of masks at staff entry points, these have been removed because the boxes were being taken repeatedly.

If we are working remotely, are we able to attend our normal office to receive a flu shot from a peer flu champion?

Employees who are working at home or in the community are encouraged to be immunized by a community provider or at a public health clinic. Find a provider [near you](#).

Please confirm the change in policy from '1 mask per day', back to 'change mask when removed (not on desk or arm)' as read in last TH minutes?

To clarify – the policy has not changed. It is 1 mask per day, worn for long periods. HOWEVER, if it has to be removed because it is damp, soiled or you are taking a break (to eat or drink) – or because you were in a patient's room who is on droplet/contact precautions – then it should be disposed of and replaced by a clean mask.

LONG-TERM CARE

Are guidelines in the works to allow Christmas day visiting in LTC facilities?

Island Health's LTC program is working with the Ministry and medical health officers to develop guidance on Christmas events in LTC settings.

Can you please tell us what is being done to address the very real concerns regarding the LTC sites that still have multiple 4-bed wards in use?

The Province has committed funding to replace older LTC facilities with multi-bed bedrooms in BC. Planning is actively underway at Island Health to identify sites for our proposal.

Are the high dose flu vaccine only reserved for seniors in LTC, or can seniors outside of LTC over a specific age qualify?

The high dose flu vaccine is only available for residents in LTC and Assisted Living facilities.

LTC allows 1 person to visit, and residents are allowed off-site with 1 person for essential appointments. Can remote site residents travel 3 hours - or no change?

The guidance on essential health appointments has not changed. Read [more here](#).

COMMUNITY HEALTH SERVICES

Many Island Health services work in patient homes and are currently screening, using PPE, etc., as indicated. Will there be any further/specific guidelines for home visiting?

Current guidelines for screening and PPE use specific to community clinicians and CHWs can be [found here](#). Policies, processes and guidelines will be updated as need arises in partnership with Infection Control, Medical Health Officers and the Ministry of Health.

In community health settings, I don't understand why clients are not wearing a mask when being provided personal care, especially when they are sick.

When people are out in public, we are all asked to wear masks to protect ourselves and others, as it's an uncontrolled environment and difficult to assess the potential for exposures. In Community Health settings, [the symptom checker questions](#) are asked before going into the home to assess the risk for exposure. Staff wear a medical-grade mask routinely and try to minimize contact of less than 2-metres distance with people who are well. If a client has symptoms, staff will use the [PPE Guidelines](#) to determine the appropriate PPE required.

What is the appropriate type of N95 mask to be used by CHW giving care to clients who are using C-pap or BiPAP in the AL or community setting?

The [PPE Guidelines](#) (p. 5) show that the N95 mask is not indicated for clients receiving CPAP or BiPAP in the community routinely, including clients in Assisted Living/Independent Living on the 14-day self-isolation after a hospital admission. The N95 mask is only needed if a client is confirmed or suspected to have COVID-19 illness.

CLINICAL SERVICE DELIVERY

Workload in molecular diagnostics for flu/COVID tests alone is up over 2200% from last year, tech staffing has increased by a mere 33%. This is not sustainable.

Workload has increased significantly. The MDL team is currently doing 10-11 runs per day (compared to 1 run/day last year), and this will expand to 20 runs/day soon. To support this increase in workload, we have more than doubled the staffing and added a significant amount of instrumentation as detailed below:

- *Base staffing:*
 - *Was 5.4FTE MLT – we have added another 5.5MLT*
 - *Was 1.4FTE MLA – we have added another 1.4MLA*
 - *Was 0 Clerks – we have added 5.5FTE*
- *We have added over \$600k in new equipment:*
 - *2 new Biosafety cabinets*
 - *1 Starlet system*
 - *2 extractors*
 - *3 PCRs*
- *We are also doing a renovation to create more space.*

The ED continues to have high volume and acuity with little to no room to work. What is the plan to address this as we move into the 2nd wave of C19 & flu season?

Capacity continues to be a challenge. Lots of people need care but we have to also ensure we are maintaining space to manage potential surge. Plans are underway to manage this and they include the recent opening of two new [high-acuity units](#) - as well as the Hospital at Home program, which will launch in early November.

OPERATIONS & SUPPORT

If someone (staff) has a connection to PPE supplies in another country (factory) is there someone at PHSA that we can connect them with?

*PHSA has a rigorous process for vetting new vendors, manufacturers, and the PPE (or other products) being provided. Please direct anyone that may have a reliable source to [this link](#). They will find a variety of information, and may be directed to the *Becoming a Vendor* tab.*

Can you update us on the status of PPE supply? Reserve masks for HCW and expect people coming to hospital will bring own mask (as they do in grocery stores)?

We are expecting new guidelines on masks from the Province and will share that with staff as soon as it is available. Island Health and PHSA are working to ensure that our PPE supply is robust; however, from time to time we may continue to see interruptions in the global supply chain and are preparing accordingly on the provincial level. Currently, while some items remain on allocation supplies are generally healthy and stock is increasing.

CHS are seeing a real reduction in the gloves that are being sent from stores. This is impacting our Home Support services. What can be done?

Gloves currently remain on allocation. PHSA is currently receiving and expecting large orders that will support a return to non-allocation and allow supply chain to rebuild provincial stockpiles.

Will parking at hospital sites remain free for staff/visitors indefinitely?

The Province of BC suspended all parking fees at health-care facilities to support the COVID-19 pandemic response back in April. It has not been determined when this will be reinstated. That announcement will come from the Province.

Is there an Island Health paid Zoom account that can be used by any employees? I can not host a meeting longer than 40 minutes with a free version.

For Zoom account activation assistance and general inquiries Contact OfficeofVirtualHealth@phsa.ca and/or view [their website](#).