

COVID-19 Town Hall Q&A



July 14, 2020

QUESTIONS AND ANSWERS:

(Please note: the information in this document is accurate as of Tuesday, July 21, 2020)

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HUMAN RESOURCES

Remote Working:

When will the work-from-home polices be released? AND When will the option for existing employees working successfully remotely, have their positions permanently changed to work partially or completely remotely?

Most importantly, if you are working remotely now, please continue to do so until instructed to return to the office environment by your leader. Site Safety plans need to be signed off before any employee who has been working remotely returns to an office environment. Through conversation and your questions, we also recognized that there are situations where employees may need to return to the office full or part time such as:

- *Health and Safety issues*
- *No suitable space at home to work*
- *Specialized equipment is required and is only accessible in the office*

These are exceptions to the directive to continue to work remotely, and if you feel they apply to you, please work with your leader to ensure a safe return to the office. Leaders should create a ticket in [ARCHIBUS](#) and it will be reviewed and prioritized.

Formal policies and procedures for remote work, including our approach to working remotely post-pandemic are being developed. In the interim, if you have questions about your working environment, please speak with your leader. See [update here](#).

Pandemic Pay:

When will we receive pandemic pay? AND What is the eta for the HR memo re: pandemic pay eligibility? Key support staff will need to know if they are eligible or not. AND If you work in an eligible

role for pandemic pay and work remotely, will pandemic pay be given as your work supports others in the department. **AND** Some management staff (e.g., providence health care), who are working at home are asking for COVID hazard pay when many staff within sites are not receiving it – why? **AND** Will we have notice of which pay period pandemic pay will be added onto? So we can make overtime payout adjustments etc., for tax purposes.

Island Health is coordinating pandemic pay eligibility and timing of payment with other Health Authorities and the Ministry of Health. Information will be provided as soon as it is available. Please visit: bccovid19temporarypandemicpay.com for information about the process and eligibility.

T2200:

Can we please have information on whether VIHA will issue T2200 forms for home offices? **AND Will there be anything coming from HR in regards to possible tax deductions for staff who have been working from home since March?**

We have received several questions regarding the issuing of tax forms for those that have been working remotely. According to the [CRA rules regarding claiming work-space-home expenses](#), you need to have been working from home 50% of the time or more in a calendar year. In anticipation of a number of employees meeting that threshold, we are working to develop a process to provide confirmation letters to allow employees who meet the criteria to claim eligible expenses when you file your 2020 taxes next year. We will share more information on this as soon as we identify a suitable process.

PUBLIC HEALTH/MEDICAL HEALTH OFFICER

Current Statistics:

Is there any update on that dashboard that was being developed to show specifically what areas were active COVID-19 transmission locations? **AND Why are cases not broken down by specific cities on island. Is it just that no one has done it or to stave panic in areas?**

We do not release lists of communities where people with known or suspected COVID-19 infection live out of respect for their confidentiality and privacy. It is important that people not be afraid to get tested because of stigma or panic, otherwise infections may go undetected.

People with known or suspected COVID-19 are instructed to isolate and are monitored, and any known contacts they have come into contact with are followed-up with. Our [new dashboard](#) (updated every Monday) does provide the number of cases in our North, Central and South Island regions.

When can someone be tested with no appointment required, no referral required - just like at Burnaby Central Park COVID-19 assessment centre?

Currently Island Health is not offering walk-in testing. At this time, any physician or nurse practitioner can order a test for a patient with cold, influenza or COVID-19-like symptoms based on their clinical judgment. Or if a person does not have a primary care provider, they can call Island Health's COVID-19 Call Centre to be assessed to determine if they need testing: COVID-19 Call Centre: 1-844-901-8442 (Mon-Sat 8:30 a.m. - 4:30 p.m. closed Sun). Our COVID-19 Call Centre can experience high call volumes. Information on the location of testing (collection) sites, can be found online: www.bccdc.ca/health-info/diseases-conditions/covid-19/testing

Staff Testing:

Can staff book online for a COVID test? The process to book an appointment by phone is an hour or longer. **AND Why are same day COVID testing appointments not available for healthcare workers? It can take 2-3 days to get an appointment.**

Currently Island Health is not offering online bookings for staff. Staff are also required to get a referral through their primary care physician, or through the call centre. The COVID-19 Call Centre number is: 1-844-901-8442 (Mon-Sat 8:30 a.m. - 4:30 p.m. closed Sun). Our COVID-19 Call Centre can experience high call volumes, but Island Health is working to reduce the length of wait times for calls.

Gulf Island COVID testing is limited to the local population, so tourists are expected to travel to the nearest testing site in Comox – a 4 sailing wait. Is this appropriate?

Yes, tests are booked at the nearest available testing (collection) site. Information on the location of the testing (collection) sites can be found on the BCCDC website: www.bccdc.ca/health-info/diseases-conditions/covid-19/testing

The curve has flattened. Why are we still being told to social distance and wear masks since the sole claim of these measures were to flatten the curve?

COVID-19 will remain in the viral ecosystem for some time to come, so our focus needs to be on how we deliver excellent health and care in this new reality, while continuing to thrive in our communities. Life isn't stopping because of COVID, so even while we normalize this reality as much as possible, we must remain vigilant to avoid a resurgence of cases in our communities.

Is 811 still the number to call to set an appointment for a COVID-19 test? A friend tried 811 with no luck. She called IH staff number, and after 2 days she got an appointment.

B.C. has expanded testing to find new cases and prevent spread of COVID-19 in the community. While anyone can get tested, some symptoms can also be signs of other conditions or medical issues and you may need to seek medical care. If you are unsure whether to seek medical care or get tested, contact your health care provider, call 8-1-1 or use the BC COVID-19 Self-Assessment Tool at the following link: <https://bc.thrive.health>.

Please provide guidance re: safe socializing. I'm trying to be an example as an Island Health staff person, but many family & friends have too many close contacts. There are different interpretations of one's bubble.

COVID-19 symptoms can be mild, making it very easy to spread the virus to those that we're close to. That's why it's so important that we all stay away, stay home, skip those parties, skip that travel if we're not feeling 100% well. We need to commit to the principle of fewer faces and bigger spaces, stay away from higher-risk environments, avoid closed in spaces when visiting, and keep your group small (inside or out). The Province has social distancing guidelines [available here](#).

At a town hall several weeks ago, automation for COVID screening calls was mentioned. Is there an update on when this may be coming?

If an individual has no symptoms, they do not require a test. A medical health officer or clinician may also decide whether a person requires testing. You can use the self-assessment tool at bc.thrive.health to help determine if you need further assessment for COVID-19 testing by a healthcare provider or at a local collection centre. You can complete this assessment for yourself, or on behalf of someone else, if they are unable to.

I have a friend who is traveling between the US and Canada without forced quarantine (exempt from quarantine act). At specific recommendations for him or I?

The continued global movement of goods and people and the ongoing delivery of essential services will be important for Canada's response to COVID-19. Several categories of people are exempted from this order because they provide critical services, if they have no symptoms. Unless you are exempt, all travelers returning to Canada are required by law to self-isolate for 14 days. Information about essential travelers can be found in Section D, page 5 of the Travellers and Employers Order on the [Provincial Health Officer's website](#).

Any idea when we will be able to drive inter-provincially? For example can we drive to Alberta yet to see family?

The message has been clear from both Dr. Henry and our premier: this summer, stay home. Parks are only accepting camping reservations from BC residents, so the emphasis is on staycations, and that where possible, people do not travel unless absolutely necessary. Information about travelling to Alberta can be [found here](#). When you hit the open roads this summer, you are not leaving COVID-19 behind. Consider the health and safety of people in your bubble, and whether you want to take any extra risks. If you decide to travel, take the same health and safety precautions you do at home. If you are feeling sick, stay home. No exceptions. If symptoms develop while travelling, self-isolate immediately and contact 8-1-1 for guidance and testing.

INFECTION PREVENTION & CONTROL/PPE

Masks & Physical Distancing:

I'm curious why physicians are not wearing face masks when they're not able to maintain physical distancing from other clinical staff? AND In recent weeks, Island Health has encouraged staff to wear face masks when unable to maintain physical distancing measures. Why are staff not doing it? AND I recently started wear a mask while at work as I can't always ensure physical distancing. Others are not doing this. What can be done? AND Why have no attempts been made at social distancing for us front line workers? No new work stations, no barriers, no spacing out...

At this point in time, all sites are expected to have a plan in place to ensure physical distancing and infection prevention requirements are being followed. Staff can speak with their leaders, their JOHS Committee representative or Island Health's infection, prevention and control office for information and support. intranet.viha.ca/departments/infection_prevention/Pages/default.aspx

Visitor Masks:

Why has Island Health not put a notice out to the public, similar to BC ferries, that everyone must wear a mask when visiting our facilities? AND Why no mandatory masks in care facilities? I'm front line, and so many people come through with no mask, and I and others do not feel safe. AND Being directed to see non-urgent clients in a small room (no window/no physical distance). Is this an Island-wide directive? Can we require clients to wear masks? AND Lots of talk, but no action on protecting front line workers. No public (or employee) mandatory masking. WHY? AND Despite repeated suggestions from physicians working in community/public health, why isn't the MoH mandating masks for indoor public spaces? AND You say masks are unnecessary in facilities since people are screened at the door. Screening will not pick up those who are pre-symptomatic. Why no masks?

At this time, we are not asking asymptomatic clients/patients to wear a mask. If a client/patient requests a mask, please provide them with a mask. In keeping with WorkSafeBC requirements, staff should continue physical distancing whenever possible. When unable to maintain 2 meters distance, or create a physical barrier, staff are required to wear a mask. It is important to physically distance or put a barrier between patients who can't be 2m apart.

Why?

- *Patients are being screened for risk of COVID-19 (numerous times in some cases).*
- *The risk of asymptomatic transmission is extremely low.*
- *Staff wearing a mask provides protection for both patient and staff from large droplet transmission.*

Most masks aren't designed to filter viruses (false sense of security) but they restrict O2 intake and cause CO2 retention. Why are we told to wear them?

We wear masks in the ORs to protect patients against surgical site infections caused by the surgeon and team's respiratory-carried organisms that sit in their nasal and throat cavity. We also rely on medical grade surgical/procedure masks to protect staff/medical staff who are caring for patients on additional precautions. We do this through every flu season and the 2009 pandemic influenza.

In 2009 there was research to show that the surgical/procedure masks were as effective as N95 masks in protecting staff against large respiratory droplets. The second bullet of the overall findings in the [WHO report](#) recently published states: Current evidence suggests that transmission of SARS-CoV-2 occurs primarily between people through direct, indirect, or close contact with infected people through infected secretions such as saliva and respiratory secretions, or through their respiratory droplets, which are expelled when an infected person coughs, sneezes, talks or sings. When clinical staff are doing procedures that create smaller aerosols, they are asked to wear a fit-tested N95 mask.

I'm required to sit less that 6ft from coworkers all day. We aren't provided disposable masks. We aren't allowed to wear cloth masks. Why?

At this time, we will be providing medical-grade masks for all masking requirements within Island Health. We don't require people coming into our facilities to mask up because we screen them at the door. If a person is symptomatic, they should be wearing a mask. If they are not, a mask is not required.

What are the options for staff who need to wear masks but can't tolerate even the sensitive masks due to reactive airway type issues?

For unique concerns like this, please connect with our Occupational Health & Safety department via: OHSPrevention@viha.ca or reach out to your [local JOHS Committee representative](#) for support.

A number of staff are having allergic reactions to the masks (sensitive skin masks also). Is a face shield the only other option for these staff members?

The continuous, extended and repetitive use of personal protective equipment (PPE), including masks, gloves and safety glasses/goggles, may cause adverse skin reactions. Please see: [Prevention & Treatment Recommendations PPE Skin Injury](#)

Can you please respond to "detection of viral RNA may not indicate the presence of infectious virus or that COVID 19 is the causative agent for clinical symptoms," as stated by the CDC?

This molecular test does not always detect viable virus, only the signature of the virus or remnants of the RNA. Early in the infection, molecular detection correlates to viable (live) virus. Studies demonstrate that in most infected persons, viable virus can only be cultured until approximately day 5-9. In some immunocompromised patients, live virus can be detected longer.

COMMUNITY HEALTH SERVICES

Not all CHWs in the community are wearing masks for home visits. How can this be enforced?

All Community Health Services staff must wear a mask when providing care in a client home or clinic setting. If any CHS staff member is made aware of a breach of this policy, please tell your supervisor. The supervisor will then follow up to ensure our staff and clients are protected.

How can CHS get more support for PPE precautions?

The Community Health Services COVID-19 Response leadership team meets regularly with CHS directors and managers from across the Island. If there are specific PPE supports that are needed, please raise these with your supervisor so they can escalate within our emergency operations structure.

COPD patients, high-risk for COVID-19, are costing \$\$\$\$\$. When is Island Health going to fund Respiratory Care in the Community to start decreasing these dollars?

Our focus is on preventative care and chronic disease management to improve quality of care. Existing services targeting COPD:

- *Respiratory rehabilitation clinic in Victoria;*
- *Community RTs in Victoria and Nanaimo;*
- *Home Health Monitoring for COPD is now available across the health authority, which includes education, coaching and connection with Primary Care Provider in regards to Flare Up Action Plan;*

The Community/Primary Care/ED work stream is addressing issues ongoing to improve services for those with chronic health conditions.

SERVICE DELIVERY

Are we getting a High Risk assessment clinic in Westshore area? Where and When?

We do not have a definitive answer to this question, but we can say that work is underway to confirm a location. Information will be shared with staff as plans are confirmed.

With the recent increase of numbers seen in emergency departments, is there plans to increase staffing baselines, especially if a second wave of COVID hits?

We are running at about 90-95% capacity at most sites and we know ED volumes have returned to near-normal and there are concerns at EDs. We are moving forward with high-acuity units and enhancing critical care capacity this fall at RJH/VGH and NRGH. The hospital-at-home model will be initiated at VGH in September and will also support high-acuity patients.

ORs at over 100% capacity to catch up, is the plan to come down to 100% after the catch-up is complete? There isn't a phase 4 that shows this.

The increases in surgery are permanent. We are expanding by having some later slates, and some evening and weekend slates depending on the sites. When COVID struck we had just completed our 5-year plan for increases required to serve the residents of Vancouver Island. We adapted based on the impact of the slow down, but are now accelerating our 5-year plan.

OPERATIONS & SUPPORT

Can Island Health procure extra PPE (e.g. surgical masks and N95) to allow employees the opportunity to purchase and use in the community?

The Provincial Health Services Authority (PHSA) conducts procurement for all health authorities in British Columbia, including the supply of Personal Protective Equipment. With the unprecedented draw on PPE due to COVID-19 their efforts are concentrated on ensuring that staff and patients have the right PPE to stay safe within our facilities. We are unable to provide or sell PPE for general community use.

No hand sanitizer in wall dispensers. The substitute product leaves buildup on skin. When can we get health-care quality sanitizer back to do our jobs SAFELY?

Demand on the global supply chain has affected our supply of alcohol-based hand rubs, and currently there is a shortage of refills for our wall mounted stations. Both alternative products, and our regular supply remains available in other sizes. Some of these products utilize different formulas, but all are health-care quality and meet all standards required to ensure that they are safe and effective in maintaining hand hygiene. Having alcohol-based hand rub readily available where it is needed is key to maintaining and improving hand hygiene. The alternate supplies, together with our regular pump bottle products, come in various sized bottles and with different labels, often making them harder to spot than the usual wall-mounts, but please keep looking and create a standard spot for sanitizer in your unit/area, and if more is needed, please make sure you order according to your unit's current process.

Will we have a stabilization of supply chain access to gloves? Still very limited amounts arriving in CHS and increases HSS foot traffic in and out of bldg.

The unprecedented draw on PPE due to COVID-19 has created interruptions and fluctuations within global supply chains. PHSA continues to be active in sourcing products that meet required standards, and have been able to secure a large commitment for gloves. Although it is anticipated that this will stabilize supply in the near future, there is not yet a set timeline and we may continue to see limited availability of certain sizes in the short-term.

Has there been any update to how long the free parking on the hospital sites might last? And when this changes and goes back to paid parking, how would we know?

There are no new updates on parking fees at this time. This decision will be announced by the Minister of Health for all BC Health Authorities once determined. Following that, Island Health's Parking Services post in The Weekly with any additional updates or changes to our parking program, if applicable.

OTHER

During education sessions can staff sign a waiver, stating if they contract COVID and think it was from that session they cannot sue the educator or hospital?

During the provincial State of Emergency, the Minister of Public Safety and Solicitor General has authorized the Protection Against Liability (Covid-19) Order to ensure that a person is not liable for damages resulting, directly or indirectly, to Covid-19, if those persons provide those services (including education/training or direct care) or reasonably believe they are providing those services, in accordance with all applicable emergency and public health guidance. Island Health adheres to guidelines enforced by the Provincial Health Officer and the Minister of Health, to ensure the safety of our staff and patients. Therefore, a waiver is not required and is unnecessary.

Why do Gulf Island short term vacation rentals NOT required to adhere to the hotel sector regulations re: COVID precautions and cleaning?

The following [WorksafeBC protocols](#) offer guidance for the accommodation industry, including hotels, motels, backcountry operators, lodges, RV parks, cabins, and hostels. These employers may also benefit from reviewing protocols related to office space, food and drink services, retail services, and parks.

The COVID-19 website often does not open the subtitles properly, it is also difficult to find proper polies and procedures. Will this be reorganized?

There are 2 ways to find all of the COVID-19-related policies, procedures, protocols and guidelines.

1. COVID-19 Intranet site's [Procedures, Protocols and Guidelines View](#)
2. Access the [Policies & Procedures](#) Intranet page, in the COVID-19 Category

If you find that the site functions different than how you would expect, or how it has functioned for you in the past, please [contact us](#). We can then work with you to gather more details about your specific question. We are always looking for ways to improve the functionality of the site! If you have any additional questions or feedback, please [contact us](#).

Any campaigns in the works to push non ER patients to use urgent care or virtual clinics to take the burden off ER departments to allow for social distancing?

While there is not a coordinated island-wide campaign to encourage non ED patients to use urgent care or virtual clinics, there is work happening in specific areas. The Cowichan Medical Staff Association, Cowichan Valley Division of Family Practice and Geo 3 leadership have jointly funded a 'Right Care, Right Place, Right Time' campaign in the Cowichan Valley. It includes three videos showing how and when to use GP/NP offices, urgent care clinics and the ED. The videos and poster are available online and ads will appear in local media. Geo 2 leadership in Nanaimo has requested their own version of the poster and plan to share it. If you would like something similar for your ED, please speak with your site director who can liaise with Andrew Leyne in Communications.