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From: Medical Staff Association
Sent: Wednesday, February 09, 2022 11:50 AM
To: Medical Staff Association
Subject: Physician Newsletter - February 4, 2022
Attachments: COVID-Guidance_staff-physicians-chart-2022.02.03.pdf

Importance: High

From: Stacey Michael Dr.
Sent: Monday, February 07, 2022 7:23 AM
Subject: Physician Newsletter - February 4, 2022
Importance: High

Friday, February 4, 2022



Department of Medical Affairs

Physician Updates

PLEASE NOTE: All hyperlinks are ONLY accessible through Citrix

COVID-19 Positive Cases at a Glance (HHS)*

| Site | Number of Positive Cases | ICU | Ward |
|--------------|--------------------------|-----|------|
| HGH | 65 | 8 | 57 |
| JH | 58 | 6 | 52 |
| MUMC | 6 | 0 | 6 |
| St. Peter's | 5 | | |
| WLMH | 4 | | |
| SHF | 0 | | |
| Rehab | 10 | | |
| Total | 148 | | |

*updated morning of Feb 4 /22

Critical Care Support at HGH & JH

Starting **January 4 at 0700**, the critical care supports below have been put in place at HHS. The current plan is to continue this model for the month of February.

1700-0700 at JH

- **In-house PCB physician** covering the site*

1700-0700 at HGH

- **In-house nighttime ICU physician** covering the designated COVID ICU (South)
- Nighttime ICU physician will respond to site needs (covering usual PCB calls)

*Reminder that physicians are **not be permitted to submit G-code modifier during the time of PCB coverage**. As such, a **G-code modifier cannot be applied at the JH between 1700-0700**.

HHS Staff and Physicians Affected by COVID

(Information and numbers from January 31, 2022)

Number of absences R/T COVID: 62

Number of staff in isolation: 233

Number of Redeployed staff: 328

Sources for redeployment:

- UCC staff
 - Project Odyssey staff
 - OR staff
 - Pain Clinic staff
 - HIU staff
-

Recently Updated: COVID-19 Steps for Staff and Physicians

Self-isolation, testing and return to work guidelines are attached or available here: [Read More](#)

Accelerated Return to Work for COVID+ Staff

In follow-up to the issue of Return to Work after COVID, please use the following guidelines:

Physicians who test COVID positive, who are triple vaccinated, who are asymptomatic and have negative RATs on days 6 and 7, may be able to return to work on or after day 7 of self-isolation if the following are met:

- 1. There is a clinical need on the service due to workforce shortages that requires that physician to work**
 - 2. The Chief of the Department confirms the need for that physician to return to work**
 - 3. The Chief of the Department has informed the CME, EVP (Academic)**
-

In accordance with provincial guidance and in response to on-going clinical pressures, HHS is proceeding with its return-to-work protocol for staff who have tested positive for COVID. These measures will be implemented on a case-by-case basis, with priority given to staff at the lowest risk for early return to work,

and only after specific testing requirements have been met.

[Read More](#)

Rob MacIsaac Update

Yesterday, in light of a decreasing trend in the number of COVID-19 cases and hospitalizations across Ontario, the province's Chief Medical Officer of Health issued a revision to Directive [#2](#) outlining a gradual, cautious resumption to some hospital services previously paused. This includes: diagnostic imaging, cancer screening, scheduled ambulatory care, and non-urgent/emergent pediatric care. The requirement to continue to cease all other non-urgent and non-emergent services remains in effect.

Unfortunately, our reality in Hamilton and across our region remains highly pressured. We're still feeling the burden of the Omicron wave and continue to see an inordinately high demand for hospital care. This week at HHS alone:

- Overall adult acute inpatient occupancy exceeded 110%, with most adult acute sites close to 120%. For context, the generally accepted "ideal" maximum occupancy for an acute care hospital is between 85-90%.
- Adult intensive care unit capacity exceeded 95%.
- Acute pediatric occupancy at McMaster Children's Hospital is sitting at/around 100%.
- Surgical activity is proceeding at 53% of pre-pandemic volumes. 75% is the minimum activity level needed to maintain access to urgent and emergent care.

The situation is consistent across the Hamilton-Niagara-Haldimand-Brant-Burlington (HNHBB) region. As of Feb. 1:

- Regional adult acute occupancy is 105%.
- Intensive care unit capacity is 90%.
- HNHBB hospitals have transferred 21 critical care patients since Jan. 1, 2022 to other regions to create more in-region capacity. We've enacted a shared approach to enabling transfers on an as-needed basis, focusing on patients who are the most medically suitable for transfer. Patient transfers are very challenging situations but, unfortunately, we're left with no other option as critical care patient volumes remain high.

Provincial modelling: We're not out of the woods yet

Yesterday, the Ontario Science Table (OST) published its latest report outlining near-term projections for COVID-19 in the province.

Although there are many indications that we've passed the peak of the Omicron wave, the OST cautions that the easing of restrictions on Jan. 31 may see hospitalization rates across Ontario continue at high levels.

Furthermore, a plateau in vaccine uptake and waning population immunity against the COVID-19 virus may lead to a resurgence of cases province-wide in late winter/early spring.

Of note, the report highlights that vaccination continues to be highly effective in preventing severe outcomes. It shows that individuals who are unvaccinated or partially vaccinated have a six-fold risk of being hospitalized due to COVID-19, and a twelve-fold risk of requiring ICU care.

Overall, the OST suggests that Ontario’s hospital will experience prolonged occupancy challenges, including in its ICUs, in the weeks and months to come.

We’ll proceed with extreme caution

Given all of this, HHS is not yet in a position to resume paused services on a significant scale. Although we have initiated ramp-up planning, we will proceed very cautiously with service resumption and will coordinate our efforts across all sites and programs. We must be confident that we can maintain access to urgent and emergent care.

On a positive note, we’re seeing fewer and fewer staff and physicians in isolation due to COVID – a trend we hope will continue given staffing challenges we’ve been facing. In addition, we continue to aggressively recruit new healthcare workers to join our team. We’ve on-boarded more than 450 new employees since December. Staffing will be a critical factor in determining our ramp up plan.

Preparation for Possible Protests

It is expected that protesters opposed to public health measures will gather in downtown Toronto and the Queen’s Park area this weekend. There are many rallying points for convoys to form across the GTA. It is possible that some of these rallying points could be in the Hamilton area. These actions could make travel on area highways and roads more difficult.

Hamilton Health Sciences (HHS) denounces any and all intimidation of healthcare workers, patients or visitors to hospitals across Ontario and Canada during protests regarding public health mandates. Everyone should feel safe and be able to make their way to and from hospitals unimpeded and free of harassment.

[Read More](#)

West End Clinic: “PCR testing only”

The assessment clinic at the HHS West End Clinic (WEC, located at 690 Main Street West, Hamilton) will shift its operations to only provide COVID PCR testing to [eligible individuals](#), [including healthcare workers](#) (HCW), beginning on January 17, 2022.

- HCWs and their **household members who are symptomatic** will be able to book online for testing at the West End Clinic or the SJHH testing centre (1565 Upper James Street, Hamilton, the former Future Shop location).
 - Appointments [can be booked online](#).
 - The clinic will operate seven days a week from 9 am to 5 pm.

NOTE: the assessment clinic will remain open at the WEC site despite the temporary closure of the Urgent Care Centre at the same location.

Asymptomatic healthcare worker (HCW) COVID-19 PCR testing: new on-site self-collection process

What's new

Beginning Monday, January 24, **asymptomatic healthcare workers (HCWs)** who are on outbreak units and are required to undergo regular point prevalence testing, or those who have experienced a high-risk COVID-19 exposure, will begin a new on-site self-collection process.

HCWs will continue to first contact **Employee Health Services (EHS)**, and will then be directed, if required, to follow this self-collection process. Identified HCWs are to complete the test and drop it off at one of the designated drop-off locations listed below instead of going to an assessment centre. Asymptomatic HCWs who self-collect can continue to work on their unit while awaiting their results.

NB: Symptomatic HCWs will continue to follow the [existing process, booking](#) an appointment at the West End Assessment Centre for a PCR test

What's the process?

Identified asymptomatic HCWs who require testing will:

- Obtain oral / nasal swab from their site's pick up/drop-off location
- **Accurately complete the requisition form provided in the kit (this is imperative)**
- Manually write on white label on the swab container in pen:
 - two identifiers: Name (as identified on your Health Card) and DOB (must be in format: day/month/year)
 - specimen collection date: (also in format: day/month/year)
- Self-collect oral and nasal specimen using process outlined in attached "Oral-Nasal Swab Instructions" and video: [Oral + Nasal Swab Instructions - YouTube](#)
- Proceed to designated drop-off location – there is no time limit between swab and drop-off

Locations

| Site | Pick up/Drop off location | Dates/Time |
|------------------------------|---------------------------|---|
| Hamilton General Hospital | Patient Registration | Mon-Fri 0800-2300. After hours and weekends, can leave specimen in the drop box. |
| Juravinski Hospital | Patient Registration | Mon-Fri 0800-2300. After hours and weekends, can leave specimen in the drop box. |
| McMaster Children's Hospital | Patient Registration | Mon-Fri 0800-2300. After hours and weekends, can leave specimen in the drop box. |
| St. Peter's Hospital | Centre for Healthy Aging | Mon-Fri 0800-1600. |

| | | |
|--------------------------------|--|--|
| | | After house and weekends, please bring specimen to an acute care site. |
| West Lincoln Memorial Hospital | Report to the switchboard office for the label. The self-collection kits will be located in the Computer Lab room (adjacent to the lab) | Mon-Fri 0800-1500. After hours and weekends, staff bring to the ED. |
| Satellite Health Facility | To be determined week of January 24 | To be determined week of January 24 |
| Urgent Care Clinic | Assessment Centre *Drop off only* | 7 days a week 0900-1700. |

For In-Patients: Mobile Vaccination Team

The mobile vaccination team consists of certified healthcare workers administering COVID 19 vaccine to inpatients at HHS sites. The team provides 1st, 2nd and 3rd doses and soon will be administering 4th dose boosters to eligible inpatients.

The team offers Pfizer and Moderna vaccines based on patient eligibility and vaccine supply.

When are the clinics held?

Clinics are held at each site on a weekly basis:

- Satellite Health Facility: Thursday morning (cutoff time for notification Tuesdays before 2 pm)
- Juravinski Hospital: Thursday afternoon (cutoff time for notification Tuesdays before 2pm)
- St. Peter's Hospital: Friday morning (cutoff time for notification Wednesdays before 2pm)
- Hamilton General Hospital: Friday afternoon (cutoff time for notification Wednesdays before 2pm)

What does the mobile vaccination team need PRIOR to vaccination day?

- Completed Consent form, Screening Form AND Order Set Form placed on the patient chart
- COVID-19 vaccination orders must be transcribed onto patient medication profile as a one-time order **PRIOR** to the arrival of the vaccination team on the ward

What can you do to facilitate vaccinations?

- Work with your teams to identify inpatients that are eligible for COVID vaccination or booster doses (refer to Ministry of Health website for recommendations to timing of subsequent doses)
- High priority patients include: ALC to long term care/retirement home/congregate settings, long term stay patients; however, ALL eligible patients should be identified
- Priority will be given to patients requiring 1st or 2nd doses of vaccine series
- Complete the screening tool to identify eligible inpatients early as it is challenging to accommodate same day vaccination requests
- Complete consent form and COVID-19 vaccine orderset and place on patient chart

- Contact your clinical pharmacist or main pharmacy when you have identified eligible inpatients or if have any questions

Reporting Your Booster – Use Chrome

Everyone at HHS who is eligible and able to do so, is encouraged to receive the booster vaccine (third dose of the COVID vaccine).

Once they have received a third dose, staff and physicians are invited to update their COVID-19 vaccination status.

Healthcare workers can [report their booster shot HERE](#)

Important note

Staff and physicians should use the Google Chrome browser to access the Employee Health Services Online Reporting Tool (CORITY). Internet Explorer is no longer supported by the platform.

Here's the full URL if you need to import the link into another browser:

<https://hhsc.my.cority.com/#/questionnaire/medicalpublicqrhstandaloneportal?questionnaireId=361>

Just copy and paste

New Resource for Parents and Caregivers: ParentsHomework.ca

[Parentshomework.ca](#) offers reliable resources to families with the facts about the COVID-19 vaccine, a curated list of frequently asked questions specific to the five to 11 age group, and helps parents “talk to a tutor” through the SickKids COVID-19 Vaccine Consult Service. This resource was created by the Children's Health Coalition, a collective of children's health organizations across Ontario, including McMaster Children's Hospital.

Feeling overwhelmed? Try this...

Dr. Jennifer McTaggart, clinical director of acute services and psychologist in MCH's Child & Youth Mental Health Program, shares quick, valuable tips on the link below.

<https://youtu.be/92sN-YH8Gks>

Chris Hadfield Gives Shout-out to HHS and Odyssey

HHS is less than 120 days from launching Epic, and it's been a journey like few others. One person who knows a thing or two about navigating complexity and change is Colonel Chris Hadfield. The Canadian astronaut made a special guest appearance at Project Odyssey's Go-Live Readiness Assessment (GLRA) 120 yesterday.

[Watch Col. Hadfield's message to HHS staff and physicians on the Hub.](#)

[Learn More](#) about the GLRA 120.

Technical Dress Rehearsal for Epic Devices

A technical dress rehearsal (TDR) to test all devices that will use Epic begins with a small pilot at McMaster University Medical Centre **starting Monday**.

[Read More about the TDR](#)

If you have any questions related to training, please email ProviderEpicTraining@hhsc.ca

January 27th Town Hall Recording Available

Rob MacIsaac, President and CEO, and senior leaders give updates on Operations, EDI and Project Odyssey. The video has been segmented into presentations for your viewing convenience.

[Watch the Full Video](#)



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