



Department of Medical Affairs

Weekly Physician COVID-19 Updates

COVID-19 Cases at a Glance (HHS)

Site	Number of Positive Cases
HGH	26
JH	32
MUMC	1
St. Peter's	0
WLMH	0
SHF	0
Rehab	0
Total	59

*updated morning of distribution

Whenever possible, please try and restrict movement between sites / areas. Understanding this may not always be possible across all areas / disciplines.

COVID-19 Wards

HGH – 5 West (12 Patients)

JH – F5 (21 Patients)

*updated morning of distribution

COVID-19 ICUs

HGH – ICU (12 Patients)

JH – ICU (11 Patients)

*updated morning of distribution

Critical Care Support

HGH – reduced to **2 COVID ICU's** as of May 14th

JH – reduced to **1 COVID ICU** as of May 14th

PCB Coverage remains the same until May 25th at which point **HGH** will have **PCB DAYS** coverage only and **JH** will have **PCB NIGHTS** coverage only.

G-code modifiers are **applicable** for **days at JH** and **nights at HGH**:

New Funding Alternative – In-Hospital Protected or Pre-Emptive Protected Code Blue

The ministry is also providing a new option for hospitals as an alternative to reactivating their Protected Code Blue or Pre-Emptive Protected Code Blue response team funding.

Hospitals will now have the option to have physicians receive a 30% payment modifier on three Critical Care fee codes G521, G522 and G523 (G-codes) *instead of* activating the Protected Code Blue or Pre-Emptive Protected Code Blue response team funding, under the terms of the earlier Phase 2 agreement.

The G-code modifier will be payable to physicians who perform these services in the hospital for patients requiring resuscitation including endotracheal intubation who are COVID-19 positive or who are treated as at-risk of being COVID-19 positive under local hospital policy.

Physician Redeployment

The decision to launch enhanced medical support will be a collaboration among physician leaders and administrators of a specific unit/department. Final approval must be obtained by the CME and SMO.

MOH Compensation for Non-Clinical COVID-19 Activity

NEW we have received funding for hours submitted for **February and March 2021** and can expect to see deposits over the next (approximately) two weeks

If you have any questions related to payment or account deposits – please email Lori Arbeau at arbealor@hhsc.ca

If you have any questions related to amount to be paid – please email Quinn Kolthof at kolthof@hhsc.ca

Reminder: Please submit May hours by June 10th

**Please see attachment “Funding Application for COVID-19 Non-Clinical Work”*

Vaccination Updates

Vaccine Timeline (Presented by Bruce Squires)

Vaccinations Numbers Update

- **Ontario:** 7.3 million doses administered with 450K of Ontarians fully immunized
- **Hamilton:** 275K administered, including 84K at the HHS Fixed Clinic

*Over 50% of adults in the city of Hamilton Public Health Services region have received at least one dose of a COVID-19 vaccine!

Vaccination Program Province – Wide

- Now open to all adults 18+
- Planning started for vaccinating 12 – 17 year olds

HHS Role

- HHS Fixed Clinic at 293 Wellington still a major vaccination hub
- This long weekend – Urgent Care Clinic converted into vaccine clinic
- This assessment center will be temporarily closed to support this pop up clinic
- Identifying, reaching out / educating patients and families with health conditions
 - Work with Public Health to determine appropriate vaccination clinics and how they would book into those clinics considering both first and second dose
 - Coordinated and aligned approach for adults and pediatric patients
- Continue to organize mobile clinics for inpatients moving to LTC or other facilities

Youth (12 – 17 Years) Vaccination Strategy

- Province will open eligibility through the Provincial Vaccination Appointment Booking tools (online and telephone) as of May 31st
- Public Health and School Boards working together to offer Family Friendly Vaccination Clinics during the weeks of June 14th and 21st
- Particularly focused on youth with high risk health conditions, complex needs and physical or mental disabilities, or self-identified needs (e.g. Needle anxiety, undisclosed health conditions)
- MCH extensively involved in planning and will support operations
- Will also include Indigenous vaccination site and mobile clinics targeted at reaching Black and other racialized youth

Acceleration of Second Dose Interval for Health Care Workers

- Provincial decision to move up (sooner than 4 months) vaccination for “high-risk” healthcare workers
- Eligible HCW being contacted (May 19/20) via text message and email about new appointments
- This applies to all acute care staff in frontline roles caring for COVID-19 patients, and staff and physicians with a high-risk of exposure to COVID-19 and those performing AGMP’s (aerosol generating medical procedures)

- Process in place to rebook if needed via City Public Health phone line (those eligible and who have not been contacted, can start calling Friday)
- All rescheduled second dose appointments will take place at the First Ontario Centre Clinic
- Please fill out voluntary questionnaire on vaccination status

Update: Accelerating the Administration of the Second Dose of the COVID-19 Vaccine for Healthcare Workers

**Please see attachment "Update on accelerating the administration of the second dose of the COVID-19 vaccine for Healthcare Workers"*

HHS Staff

- HHS **required** to follow provincial direction on dose interval – regardless of role and work location
- HHS staff / physicians, including those who are pregnant, and want to be vaccinated can register on the [SJHH/HHS Online Tool](#)
- Registration provides ability to book through provincial Vaccine Appointment Booking System along with other eligible populations
- Being vaccinated does not mean anyone at HHS can relax their PPE and distancing practices

Voluntary and Confidential Reporting of Vaccination Status

Vaccination is a critical measure in the ongoing effort to manage the pandemic. Everyone at HHS who is able to do so is encouraged to receive the vaccine to protect themselves, our patients and families, and their own family members. Hamilton Health Sciences, like many other hospitals, is asking all health care workers to voluntarily and confidentially share their COVID-19 vaccination status. Read more on the [HUB HERE](#)

This is Our Shot T-shirt Campaign

HHS is proud to support the This is Our Shot initiative. HHS has procured 4000 of the [campaign's t-shirts](#). Read more [HERE](#) (Must be in Citrix)

VACCINATION SIGN UP VIA [SJHH/HHS Online Tool](#)

PHYSICIANS MAY USE "0" AS ID NUMBER IF THEY DO NOT HAVE AN HHS ID

CONSENT please bring completed Consent Form (along with Health Card and Hospital ID) to your vaccination appointment. Please find Consent Form [HERE](#)

City Vaccine Hotline (905) – 974 – 9848

Updated FAQ Vaccine Document [HERE](#)

COVID-19 Vaccine After Care Sheet [HERE](#)

Additional COVID-19: Safety, Screening, Reporting, and Vaccinations Info [HERE](#)

HHS HUB News

Highlights from Town Hall (Thursday May 20th)

Operational Update (Presented by Sharon Pierson)

- Regional transfers related to COVID-19 slowing down, as of May 19th:
 - 268 HNHBB region (only 3 more since last week)
 - 88 HHS (same as last week)
- Critical care capacity:
 - Volume remains HIGH
 - Patients in ICU's – 104
 - Patients with COVID-19 related illness in ICU's – 43
 - Patients with COVID-19 related illness on wards – 32
- For now, maintaining additional 38 ICU beds above normal compliment of 88 (126 in total)
- Outbreaks ongoing at JH and St. Peter's
- Continuing to maximize Satellite Health Facility capacity and work with HCC to support expedited access to LTC
- Very early planning for return of approximately 240 staff to their "home" programs
 - Redeployed staff will remain in place and schedules will reflect that until individuals are notified otherwise
- Mobile Health Unit Update on [our website](#)
- **Chief Medical Officer of Health Directive #2 Rescinded**
 - Cautious, gradual resumption of services not expected to require inpatient resources
 - Need to maintain access for COVID-19 patients; other patients requiring urgent time sensitive care; and patients who need access to our specialized regional programs
- Planning underway by groups that did this same work last spring following the first wave
- Ethical approach – taking into account patient condition, implications of delaying care, equity of services and impact on vulnerable populations

Epidemiology Update (Presented by Dr. Dominik Mertz)

National

- National numbers are slowly starting to drop
- MB is the only province seeing an increase at this time but otherwise the country is seeing a downward trajectory in cases

Provincial

- Provincial numbers are coming down and things are finally starting to look better
- Hospital admissions were approximately 2500 at peak and now at about 1500
- ICU numbers demonstrate less of a decrease but do still appear to be on a downward trajectory

- Some patients are requiring a longer stay in ICU which is why it still remains the bottleneck at this time
- Stay-At-Home order has had a positive effect on numbers

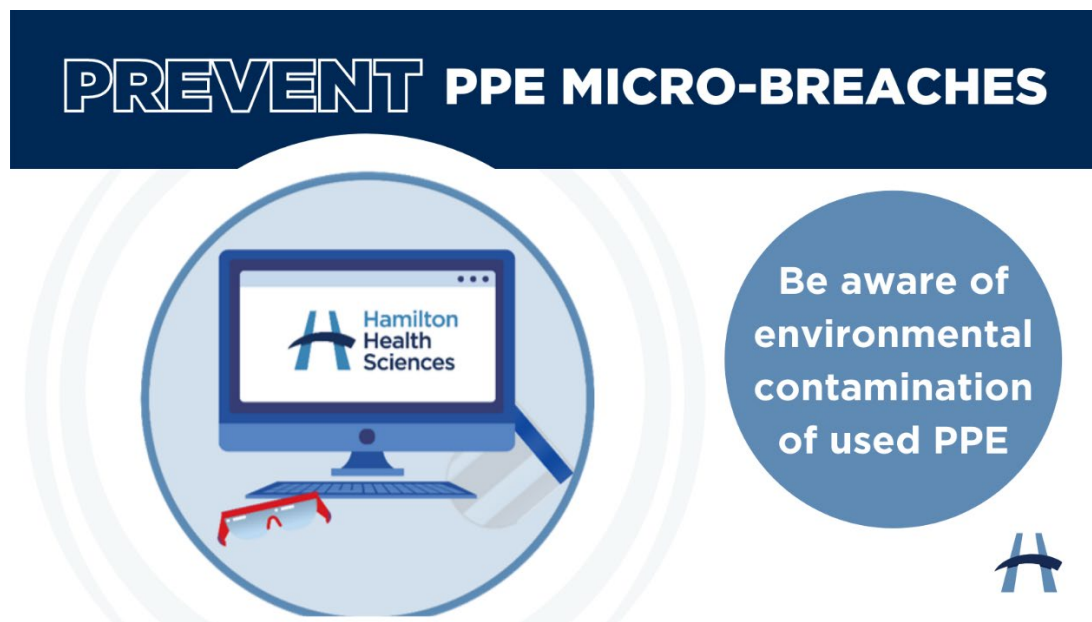
Regional

- Hamilton numbers are not dropping as quickly as rest of province – seem to have plateaued
- This has happened before in previous waves and we will likely see numbers starting to drop very soon especially considering vaccination ramp up
- Hospital ICU – peak was about 160 and while we are still over 100 in the city hope to see numbers come down soon
- There has been no significant decrease in ICU numbers when compared to last week

Link to Town Hall (Thursday, May 20th) [HERE](#)

*all figures are representative of the time of Town Hall presentation / recording

COVID-19 Policies to Review



Additional Information

Provincial Direction to Resume Non-urgent and Non-emergent Surgeries and Procedures

Earlier this week, the provincial government rescinded the [Chief Medical Officer of Health Directive #2](#) to enable the cautious and gradual resumption of hospital clinical services not expected to require inpatient resources.

[Planning is underway at HHS](#) to implement the provincial directions and we are collaborating with our regional hospital partners to that effect. Also aligned with provincial direction, clinically urgent cancer and pediatric surgeries are continuing.

It's critical for physicians and surgeons to know that this DOES NOT mean an immediate return to pre-directive surgical activity. Three key principles must guide our planning:

1. Currently, only procedures/surgeries that do not require inpatient beds may be considered in our ramp up planning provided key conditions are met. This means only certain "same day home or same day overnight" cases may be allowed to go ahead.
2. Our critical care and COVID unit capacity must be maintained and this will make the return of surgical/peri-op nurses and staff a very gradual and staged process over the coming weeks.
3. A multi-disciplinary approach will be used to determine which patient populations will first benefit from the resumption of non-urgent/non-emergent procedures and the timeline for this ramp up.

Physician Chiefs and Heads of Service will lead discussions with their team members to address emerging issues and concerns from surgeons or physicians.

While the provincial decision marks a positive turn in the pandemic, the reality is that our critical care areas are still heavily burdened with severely ill patients who may require longer stays in ICUs and on COVID units. In addition, the demands on HHS regional programs remain high.

This also means that for the time being, most redeployed staff will remain in place and they will return to their home positions over a period of weeks, thus limiting our ability to reopen OR blocks which will NOT occur all at once.

More information will be communicated as decisions about services are confirmed.

We thank you for your collaboration and your continued willingness to support care under extreme pressures.

Project Odyssey Update

Reminder for Odyssey leads: a slide deck that you can use to provide updates about the project at department meetings is now available on the Hub. [Click here to view/download the May 2021 update](#) deck. An appendix deck with stories, social media tiles and videos can be found [here](#). Questions? Contact Alexandra Macgregor at macgregora@hhsc.ca

Find out what's new with Project Odyssey – follow [@BarryLumb](#) on Twitter to check out the latest issue of the Odyssey e-newsletter, including a 2 minute audio update.

NEW: Virtual Care Orientation for Providers & Administrative/Clerk Support – Now Available!

Offering virtual visits is about more than introducing technology - it is about integrating a new way of providing care into a clinical service delivery model. We recognize that many clinics quickly mobilized to provide virtual care during the COVID-19 pandemic. To support our teams, the HHS Virtual Operations team has created a Virtual Visit Playbook. This Playbook is an all-encompassing document for a standard approach to virtual visits at Hamilton Health Sciences HHS. See Playbook [HERE](#) (must login to CITRIX)

The Virtual Care Operations Team is also excited to announce that we are now offering virtual care orientation sessions for staff and physicians. There are two different offerings available on an alternating rotation:

1. Virtual Care Orientation for Providers: designed for those providing care to the patient (e.g. physician, allied health, resident, etc.)
2. Virtual Care Orientation for Administrative Support: designed for any administrative role providing support to the process (e.g. booking clerk, business clerk, system navigator, medical secretary, etc.)

Leaders are also welcome to attend either session. For more information, including dates and how to register, please email VirtualCare@HHSC.CA or visit [The Hub](#)

Ontario Health Insurance Plan Bulletin - COVID-19 Temporary Virtual Palliative Care Services

Further to Bulletin [210403](#) titled 'COVID-19 Temporary Virtual Care Services', the system changes scheduled for May 2021 have been delayed until further notice. The changes impact new fee schedule codes K092, K093, K094 and K095.

Physicians will need to continue to wait to submit these claims until further notice.

Read full [MEMO HERE](#)

Introducing the New Infectious Diseases E-handbook

A new infectious diseases handbook has been co-developed by experts from Hamilton Health Sciences (HHS) and St. Joseph's Healthcare Hamilton (SJHH). Read more [HERE](#)

HHS Response to McMaster IT Security Event

HHS is taking precautionary measures to protect its systems and networks following an [ongoing IT security event at McMaster University](#). Access to university networks and IT systems from within HHS is currently unavailable.

[Read More](#) (Must be in Citrix)

Updated: Resilience Support Toolkit

Updated resilience support materials including posters and videos are now available for leaders, staff and physicians

For more information access the Toolkit [HERE](#)



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