

## Weekly Physician COVID-19 Updates

### COVID-19 Cases at a Glance (HHS)

Site	Number of Positive Cases
HGH	32
JH	48
MUMC	3
St. Peter's	0
WLMH	0
SHF	1
Rehab	1
<b>Total</b>	<b>85</b>

\*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.**

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### COVID-19 Dedicated Wards

HGH – 5 West (24 Patients)

JH – F5 (21 Patients)

JH – E2 (14 Patients)

- **NEW** - JH has 2 COVID-dedicated wards: E2 (half the unit) and F5
  - Total 3 COVID-dedicated wards at HHS
    - 5West at HGH (covered by GIM team)
    - F5 and E2 at JH (covered by GIM and Hospitalists)

\*updated morning of distribution

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### COVID-19 Dedicated ICUs

HGH – ICU South (8 Patients)

JH – Level 1 ICU (9 Patients)

- **NEW** - JH now has a COVID-dedicated ICU: Level 1 (10 beds)
  - Total 2 COVID-dedicated ICUs at HHS
    - ICU South at HGH (covered by intensivists)
    - Level 1 ICU at JH (covered by intensivists)

\*updated morning of distribution

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## Critical Care Support (Updates)

- ICU South continues to have an on-site intensivist at night who will respond to Code Blue calls
- JH ICU continues to have a PCB physician at night who will respond to Code Blue calls

**Critical Care Triage Article** – Dr. Frolic and Dr. Downar are featured in a *National Post* article regarding critical care triage in Ontario. Link to full article [HERE](#).

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## Physician Redeployment

Currently, there is **no identified date to ramp down elective and/or scheduled activity**. Should there be consideration of a ramp down and subsequent redeployment – Medical Affairs will work with physicians to identify opportunities for appropriate redeployment.

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## MOH Compensation for Non-Clinical COVID-19 Activity

**January Funding – please submit hours by February 10<sup>th</sup>**

February Funding – please submit hours by March 10<sup>th</sup>

Submit to Medical Affairs: Tanya Roglich (email on form) or directly to Quinn Kolthof [kolthof@hhsc.ca](mailto:kolthof@hhsc.ca)

*\*Please find Submission Form Attached*

NOTE: December's hours have been submitted for approval and will be sent to the MOH once all approved. Questions about payments can be forwarded to Lori Arbeau [arbealor@hhsc.ca](mailto:arbealor@hhsc.ca)

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## Vaccination Updates

**\*NEW\***

### Vaccine Distribution

- HHS following provincial direction – constantly evolving and having to adapt continuously

- Determined that residents and workers in LTC and high risk retirement homes deemed priority
- Accelerate immunization of LTC and RH residents across Ontario (may include some ALC patients / those about to go into LTC facilities)
- Protect second doses by extending intervals:
  - Pfizer: LTC / RH residents – 21 – 27 days, for all others (including healthcare workers) extend to 35 – 42 days
  - Moderna: maintain at 28 day interval
- Province may reallocate doses across Ontario as needed to meet needs

#### **Vaccine Distribution So Far...**

- Hospital 1<sup>st</sup> Doses (HHS + SJHH) – 6200
- Hospital 2<sup>nd</sup> Doses (HHS + SJHH) – 250
- LTC 1<sup>st</sup> Doses – 4200
- LTC 2<sup>nd</sup> Doses – 1700
- Paramedics / Other 1<sup>st</sup> Doses – 1200
- Paramedics / Other 2<sup>nd</sup> Doses – 250

\*approximate numbers

#### **What's Next For HHS And What We Need From You:**

- **Vaccination Clinic will contact anyone with booked appointments**
  - **First call to cancel existing appointments**
  - **Second call to confirm rebooking (timing TBD)**
- All first doses to hospital HCW are currently paused
- **Second doses (as of Tuesday, January 26<sup>th</sup>) will be administered 35 to 42 days after first dose**
- HCW will receive the vaccine in sequenced order based on the provincial document ["Guidance for Prioritizing HCW's for COVID 19 Vaccine"](#)
- While first doses are paused, HHS reviewing sequencing groups to ensure that everyone who still requires 1<sup>st</sup> dose (those at greatest risk), get it as soon as it becomes available and will ensure that everyone has self-identified their sequencing appropriately
- Please review [FAQ's](#) and revised [Sequencing Group Document](#)
- **Goal remains to vaccinate everyone at HHS who wishes to receive it – timing based on supply**
- Please review *"Vaccination and Accountability"* document attached

#### **Dr. Fiona Smaill (ID and Med Micro)**

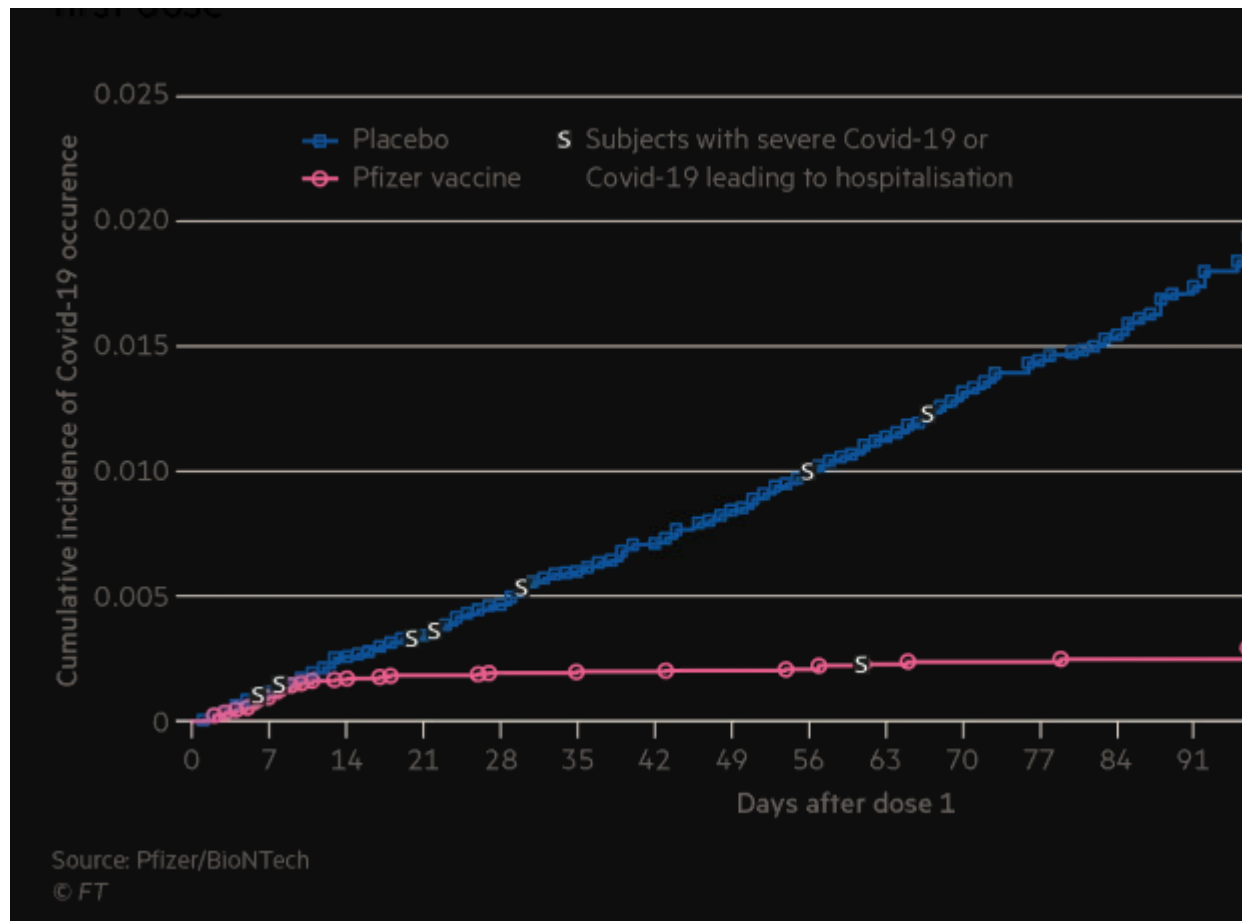
- Health Canada, National Advisory Committee on Immunization, WHO and CDC all say **safe to extend period between the two doses of vaccine**
- NACI advises that while 2<sup>nd</sup> dose should be given according to approved schedule if possible. But may delay 2<sup>nd</sup> dose for logistic/epidemiological reasons for up to 42 days
- Should get same immune response at 42 days than at 21-28 days (21 days was shortest possible period between 2 doses)
- For additional information please click [HERE](#)

We recognize that there is a lot of disappointment and stress associated with the provincial government's edict to save all vaccine doses for long term care, including what we had in reserve for second doses for our front line staff. The recent uncertainty around vaccine delivery nationally has compounded this. While we all recognize that long term care is clearly a priority in Ontario, we also appreciate that our frontline staff continues to be at risk daily owing to this pause in vaccines. Please be assured that we are advocating on your behalf at the provincial tables to rectify this situation. (We also are aware that many of you know colleagues in other places who have received vaccine and there appears to be variation and timing differences in application of the process). We are also looking for answers to these issues.

We are striving to get second vaccine doses as quickly as possible, although an extended time frame out from 21 days to 35-42 days is also an edict from the provincial government. While there is not a lot of evidence here yet, the CDC currently recommends up to 42 days for the second dose. Please see these links to two articles: The first (NEJM) shows the amount of protection from one dose of vaccine : the second looks at the current evidence for delaying the second dose up to 42 days as is currently recommended

1-NEJM(showing amount of protection with one dose) [HERE](#)

2-BCMJ literature review of evidence for delaying second dose of vaccine up to 42 days [HERE](#)



Link to **HHS Vaccination Webinar** for full details [HERE](#) (Tuesday, January 26<sup>th</sup>)

**Provincial vaccination announcement and impact to HHS staff, physicians, residents and learners – see attached document**

**VACCINATION SIGN UP** [HERE](#)

**\*PHYSICIANS MAY USE “0” AS ID NUMBER IF THEY DO NOT HAVE AN HHS ID\***

**NO SHOWS for appointments** – please, if you are unable to attend and need to cancel a vaccination appointment contact: [cancelvac@hhsc.ca](mailto:cancelvac@hhsc.ca)

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

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

**QUESTIONS** related to vaccine please email Dr. Helene Flageole: [flageol@mcmaster.ca](mailto:flageol@mcmaster.ca).

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

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## HHS HUB News

**Highlights from Town Hall (Thursday January 28<sup>th</sup>):**

### **Pandemic Response Planning (Presented by Sharon Pierson)**

- Provincial / Regional Overview
  - Planning as unified health system
  - Maintaining 15% surge capacity & 1/3 of unoccupied critical care capacity for patients from elsewhere
  - Regional transfers

Hospital	Transfers Received
Joseph Brant Hospital	6
St. Joseph's Hospital	7
HHS (General)	5
Niagara Health	3

- Managing more and ongoing outbreaks (JH, HGH, WLMH, SHF)
- Responding to provincial legislation to support other hospitals, LTC and RH in crisis while balancing internal staffing
- Grace Villa – continuing to stabilize, most HHS staff have returned

### **Epidemiology Update (Presented by Dr. Dominik Mertz)**

- Provincially, seem to be past the “holiday peak” and are currently where we were prior to holidays (around the start of December) in terms of rate of infection
- Hospital admissions are overall decreasing across the province and it’s possible we are past the peak of admissions, however ICU’s are currently at peak, perhaps not necessarily increasing
- Hamilton is starting to see trend of COVID-19 diagnosis decrease (lockdown working)
- New modeling will be coming from Provincial Government on January 28<sup>th</sup> which Dr. Mertz will speak to during next week’s Town Hall

#### **Vaccine Updates (Presented by Leslie Gauthier)**

- See “Vaccination Updates” above for information

#### **Mental Health Resources (Presented by Susan Fuciarelli)**

- For information on Mental Health Resources please click [HERE](#) or contact [cassidymi@hhsc.ca](mailto:cassidymi@hhsc.ca)
- *Please see attachment for Mental Health Resources*

Link to Town Hall [HERE](#) (Thursday, January 28<sup>th</sup>)

Please find link to the [HHS HUB here](#) for additional COVID-19 related information.

## **COVID-19 Policies to Review**

### **Transporting Patients Within / Between Facilities With Suspected / Confirmed COVID-19:**

Find Policy [HERE](#)

## **Additional Information**

### **STAR (Special Thanks and Recognition)**

HHS staff, physicians and residents will receive an e-gift card as a token of appreciation for your professionalism, dedication and resiliency in delivering *Best Care for All* during this critical time in our hospital’s history.

Starting Tuesday, January 26, you will receive an email message titled, **HHS Gift Card – Thank You!**, from [recognition@hhsc.ca](mailto:recognition@hhsc.ca) with a unique code and instructions on how you can redeem your e-gift card, and choose from more than 40 participating vendors. You will also have the option to donate the amount of the e-gift card to a charity of your choice through Canada Helps, or donate it back to HHS in support of the HHS Hospital 2 Home program.

Thank you again for your commitment and support this year. We are grateful for all that you have done and wish you a safe and happy New Year.

**Please Continue To Protect Yourself And Your Colleagues**

- Wear your PPE based on your Point of Care Risk Assessment (PCRA)
- Remember physical distancing and proper hand hygiene
- Pay particular attention to break rooms and carpooling (wear your masks)
- Read PPE Task Force Update [HERE](#)

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