



Committee Report

To: Warden Mitch Twolan
Members of the Homes Committee

From: Jill Knowlton,
Acting Director of Long-Term Care Operations

Date: July 2, 2020

Re: Long Term Care Operations Update - Months of May and June, 2020

Staff Recommendation:

The Long-Term Care Operations Update for the months of May and June, 2020 is for information.

Background:

1. Ministry of Long-Term Care (MLTC) Regulatory Compliance

A. Brucelea Haven (BLH)

Brucelea Haven remains in compliance with the LTCHA and associated regulations. The home continues to conduct ongoing audits and Primacare consultants have continued to monitor the home's status including ensuring that the MDS-RAI submissions are complete within timelines (previously subject to 4 Compliance Orders). There have been no onsite Ministry of Long-Term Care (MLTC) inspections during the Pandemic period commencing March 17. Prior to the Pandemic being declared, the Home had been informed that subject to the lifting of the Director's Order ceasing admissions, that the Home would be subject to frequent and ongoing inspections to monitor sustainability of compliance with the LTCHA. Ministry of Long-Term Care Inspections have commenced again, and it is expected that BLH will have in depth inspections commencing at any time.

Primacare had submitted a detailed admissions plan on behalf of the home on March 3, 2020 which was accepted by the MLTC. The requirement of this plan included submission of a detailed staffing analysis and plan for mentoring a permanent Administrator candidate.

Admissions had commenced effective March 16, 2020 at the rate of 3 residents per week. Admissions were interrupted due to COVID-19. Current census is 128. Admissions continue following the approved plan of 3 admissions per week. New admissions must have a recent negative COVID-19 test. This may alter the admission plan as testing results can be delayed at times. New admissions have had high care needs.

The home has not experienced bed offer refusals that other regions have.

GWH Compliance

Gateway Haven (GWH) continues in compliance at this time. Admissions continue based on vacancies with Ontario Health testing and clearance guidance documents being followed.

One MLTC Inspection visit for Critical Incident and Complaint follow up is expected to conclude on June 22, 2020.

Primacare has conducted a detailed audit of compliance at GWH and prepared a *Clinical Program and Gap Analysis* document to guide onsite work over the next 3 months. This work was expected to begin in March, 2020 however was delayed due to the Pandemic. Similar to work done at BLH, all gaps will be addressed using a collaborative approach with the home's leadership team and staff. Primacare consultants expect to be onsite at GWH two to three days per week for the next 3 months to address the required areas. Further work will then be required to ensure compliance with new processes and sustainability. Typically, a 6-month period of auditing, reeducation, and follow up is required to ensure a new process, practice or policy becomes a standard operating procedure.

Ongoing observations identify that each home continues to operate in a siloed approach. It is strongly recommended that a functional structure be put in place to strengthen the relationship between the homes as well to include working collaboratively on new initiatives especially as these relate to quality and risk management. We do understand and expect that there will be significant changes in the LTC sector as an outcome of the Independent Commission into LTC to be held in July, 2020.

2. Pandemic Preparedness and Management

The Homes have been operating under a series of Emergency Orders issued by the MLTC to ensure resident safety yet, allow flexibility to meet the demands of ill residents, outbreaks of infections or reductions in staff. It is expected that the Emergency Orders will remain in place into July, 2020.

As the County begins to move into a sustainability period, the homes have been implementing protocols that achieve all Infection Prevention and Control (IPAC) requirements while concurrently introducing some normalcy into the daily routine. The following protocols have been developed: family visiting; physically distanced dining; small group programs and exercise groups. A state of unnatural confinement will likely continue for all residents for some time and it is important that staff creatively look at ways to increase socialization and necessary connections with families/support systems.

Family visiting commenced during the week of June 15 at both homes. It has been a remarkable experience to welcome families and friends back for outdoor visits. Strict requirements are in place for the visits. A letter of information was created and the weekly Skype calls with families have been used to share the necessary steps for a

visit. Each home now has an online booking platform to assist all visitors in planning and scheduling their visits.

Each resident may have a minimum of one visit per week if they request it. Several physically distanced visiting stations have been set up at both homes to facilitate this.

Preparation for a potential “second wave” of Covid-19 has started. This includes building a 3 month stockpile of Personal Protective Equipment (PPE), purchasing reusable N95 respirators for certain staff, monthly IPAC audits and action plans, daily hand hygiene, PPE use and environmental cleaning audits, ongoing staff, essential visitor and resident screening twice daily, policy revisions and associated education and enhanced environmental cleaning. Universal masking and staff physical distancing remains in place.

COVID-19 touch point calls with all Primacare supported homes have been reduced from 5 days a week to 2 days as the flow of new information slows.

Primacare consultants continue to support the homes 7 days a week regarding any residents with new symptoms, testing advice, and decision making.

Phase One of staff testing has been completed at both homes. BLH did not achieve full staff compliance with testing. Phase Two of testing will occur commencing June 24, 2020. There continues to be community asymptomatic spread of the virus and staff testing is essential to ensure the safety of residents and staff.

3. Master Schedule Change: Gateway Haven

Gateway Haven’s PSW schedule has been revised without additional hours being added. Initial meetings have been held with stakeholders. Proposed start date is September 4, 2020.

4. Staffing

Staffing levels have been stable at both BLH and GWH. Redeployment of library and museum staff has supported entry screening functions, connecting residents to their families/support systems through virtual visits, meal service and feeding assistance.

Resident Support Attendants (RSA) have been introduced as a new position to assist the direct care staff with non-care tasks remain in place at this time while Emergency Orders are in place. Confirmation from the MLTC that this position will remain has not been received yet.

Confirmation that the single site employer directive will remain in place as a policy has not been received yet.

Brucelea Haven has a vacancy in the Environmental Services Manager position. Interviews have begun on June 22, 2020. The BLH Administrator is covering during the recruitment phase.

Brucelea Haven has welcomed one of their Registered Nurses into the Clinical Care Coordinator role.

Recruitment for a permanent Administrator candidate at BLH will commence in June, 2020 and will be a joint process between the County and Primacare. Primacare will prepare an onboarding and mentoring plan.

It is recommended that both Social Work and Chaplain positions be considered at both homes in 2021. Consideration to increasing nursing leadership capacity by adding a second nursing leader at GWH is required.

5. Pandemic Pay

Funding has been received from the MLTC for pandemic pay for frontline employees. Workplace Engagement Services (WES) will be processing this payment retroactive to April 24, 2020 for eligible employees.

6. Pandemic Funding Allocation

The homes will receive additional MLTC funding as part of the \$88 million announced for the extraordinary costs associated with the pandemic and infection control measures. Each Home received an additional \$37,500 in March and April. BLH has received a May funding allocation of \$79,800 and GWH \$32,000. The additional allocation of \$10,000 plus \$200 per bed to BLH was due to their positive outbreak status as of April 30. It is understood that the same funding will be applied to the month of June. As BLH was not in outbreak at the end of May, it is expected their funding allocation to be reduced.

This additional funding is intended to financially support the necessary incremental expenditures and provide flexibility to prevent and contain COVID-19 and is not limited to specific expenditure categories.

7. Minister's Order: Glucagon and Hypoglycemia

Revised policies to be in place effective June 30, 2020. Use of Glucagon and hypoglycemic events are now reportable as a Critical Incident to the MLTC. Primacare consultants have worked with Medisystem Pharmacy to revise the policies and the reporting policies of the homes have been updated. Primacare will ensure the required education and training under the order has occurred and evidence available for inspection. The required review of incidents and evaluation will be added to the functions of the Quality and Professional Advisory Committees.

8. Bruce County - Prospective Operational Plan

Primacare has submitted a Prospective Operational Plan to the Chief Administrative Officer (CAO) dated June 19, 2020. This plan outlines the necessary items for success as the homes transition to self-management.

Summary

The focus for the homes over the next 6 months will be to ensure regulatory compliance is achieved and sustained and to ensure readiness for the second wave of the pandemic, implementation of all Directives and guidance documents, communication with stakeholders and ensuring all IPAC practices are in place and enforced.

Certainty of the workforce, managing and stabilizing operations as we move into the sustainability phase will be a priority focus. Ongoing staff and resident testing are expected.

Expansion of visiting to allow indoor visits as well as welcoming back non-essential services will likely occur in the coming months.

The Commission into LTC will also inform the future.

2021 budget preparation will begin in July for both homes.

We will continue a high level of engagement with both Homes to ensure the ongoing safety of residents and staff.

Financial/Staffing/Legal/IT Considerations:

There are no financial, staffing, legal or IT considerations associated with this report.

Interdepartmental Consultation:

The Chief Administrative Officer was consulted in the completion and submission of this report.

Link to Strategic Goals and Elements:

None

Approved by:

A handwritten signature in black ink, appearing to read 'Sandra Datars Bere', is written over a light gray circular watermark.

Sandra Datars Bere
Chief Administrative Officer