



NOVA SCOTIA

OFFICE OF THE PREMIER

PO BOX 726
HALIFAX, NOVA SCOTIA
B3J 2T3

November 12, 2020

Dear [REDACTED]

Re: You are entitled to part of the information you requested - 2020-01129-PRE

The Office of the Premier received your application for access to information under the Freedom of Information and Protection of Privacy Act (FOIPOP) on July 13, 2020.

In your application, you requested a copy of the following records:

Request for all briefing notes and correspondence including the Premier, Premier's Executive Assistant, Communications Officers for the Office and Deputy Minister regarding Northwood long term care for the period from January 1, 2020 to June 1, 2020.

You are entitled to part of the records requested. However, we have removed some of the information from this record according to subsection 5(2) of the Act. The severed information is exempt from disclosure under the Act for the following reason:

- Section 14(l): advice by or for a public body or minister.
- Section 15(l)(k): information the release of which is harmful to the security of a system.
- Section 16: Solicitor-client privilege.
- Section 20(l): information the release of which would be an unreasonable invasion of privacy.

In addition, material unrelated to the scope of your request has been removed and marked as not responsive. You have the right to ask for a review of this decision by the Information Access and Privacy Commissioner (formerly the Review Officer). You have 60 days from the date of this letter to exercise this right. If you wish to ask for a review, you may do so on Form 7, a copy of which is attached. Send the completed form to the Information Access and Privacy Commissioner, P.O. Box 181, Halifax, Nova Scotia B3J 2M4.

Please be advised that a de-identified copy of this disclosure letter and the attached response to your FOIPOP application will be made public after 14 days. The package will be posted online at <https://informationaccessnovascotia.ca>. The letter will not include your name, address or any other personal information that you have supplied while making your application under FOIPOP.

Please contact Arilea Sill at 902-424-3787 or by e-mail at Arilea.Sill@novascotia.ca, if you need further assistance regarding this application.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Laura Lee Langley', written in a cursive style.

Laura Lee Langley
Deputy Minister, Office of the Premier

Attach.

Munroe, Laurel

From: Delorey, Randy M
Sent: March 22, 2020 9:47 AM
To: Munroe, Laurel
Subject: FW: For approval: DHW media call - CBC - LTC

For discussion - response reflects from Continuing Care team and current status, no insight into today's changes. I've told Shannon to hold pending feedback as we prepare for 11:00 event.

Laurie is aware.

Randy Delorey
Minister, Health & Wellness
Minister, Gaelic Affairs

-- Sent from my mobile device

From: Kerr, Shannon <Shannon.Kerr@novascotia.ca>
Sent: Sunday, March 22, 2020 12:17:18 PM
To: Delorey, Randy M <HonRandy.Delorey@novascotia.ca>; Cascadden, Sandra <Sandra.Cascadden@novascotia.ca>; Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; MacPhail, Mark V <Mark.MacPhail@novascotia.ca>; Hamm, Michael <Michael.Hamm@novascotia.ca>; Aubut, Ted P <Ted.Aubut@novascotia.ca>
Cc: Fairbairn, Heather J <Heather.Fairbairn@novascotia.ca>; Walsh, Tara A <Tara.Walsh@novascotia.ca>; Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; Langille, Paula D <Paula.Langille@novascotia.ca>; Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>
Subject: For approval: DHW media call - CBC - LTC

Good morning,

We've received the following media call. Please see the response below for approval.

Vicki has reviewed and approved.

Thanks,

Shannon

Outlet: CBC

Reporter's name: [REDACTED] **20(1)**

Topic: LTC

Deadline: as soon as possible

Strategy: MRA to email response

Reporter's questions: I'm hoping you can give me some more information about the restrictions in long-term care facilities amid COVID-19. The provincial government has said that all long-term care facilities must be closed to visitors. I received a phone call today from a woman who says her grandmother is in the independent living area at Northwood Manor, and she is allowed visitors. The woman is concerned because the independent living area is connected to the long-term care facility, they share elevators and hallways, and occasionally nurses. I'm hoping for some clarification on why independent living areas within long-term care facilities do not need to follow the no-visitor restrictions put in place by the provincial government.

Response: [Redacted]

[Redacted]

14(1)

Munroe, Laurel

From: Thibeau, Tina D
Sent: March 22, 2020 4:53 PM
To: Munroe, Laurel
Cc: Matheson, Chrissy L; Kerr, Shannon; Shannon, Kristina M; Walsh, Tara A; Fairbairn, Heather J; Harrison, Dan J; Preeper, Andrew R; Aubut, Ted P
Subject: Re: For approval: DHW media call - CBC - LTC

On it now

Sent from my iPhone

On Mar 22, 2020, at 4:22 PM, Munroe, Laurel <Laurel.Munroe@novascotia.ca> wrote:

Does anyone have info on where this landed?

On Mar 22, 2020, at 10:57 AM, Thibeau, Tina D <Tina.Thibeau@novascotia.ca> wrote:

Thanks I've let folks in the room . We will discuss in more detail after the presser .

Sent from my iPhone

On Mar 22, 2020, at 9:50 AM, Matheson, Chrissy L <Chrissy.Matheson@novascotia.ca> wrote:

Minister of Health is requesting review of this ASAP before the 11 am.

Please advise.

Sent from my iPhone

On Mar 22, 2020, at 9:38 AM, Kerr, Shannon
<Shannon.Kerr@novascotia.ca> wrote:

Hi Chrissy,

We've received the following media call. Please see the response below for approval.

The Minister has asked that this go to Tina / Laurel now before the 11am presser, as I understand a broader discussion is underway.

Thanks,

Shannon

Outlet: CBC

Reporter's name: [REDACTED] 20(1)

Topic: LTC

Deadline: as soon as possible

Strategy: MRA to email response

Reporter's questions: I'm hoping you can give me some more information about the restrictions in long-term care facilities amid COVID-19. The provincial government has said that all long-term care facilities must be closed to visitors. I received a phone call today from a woman who says her grandmother is in the independent living area at Northwood Manor, and she is allowed visitors. The woman is concerned because the independent living area is connected to the long-term care facility, they share elevators and hallways, and occasionally nurses. I'm hoping for some clarification on why independent living areas within long-term care facilities do not need to follow the no-visitor restrictions put in place by the provincial government.

Response: [REDACTED]

14(1)

Munroe, Laurel

From: Walsh, Tara A
Sent: April 19, 2020 3:41 PM
To: Munroe, Laurel; Shannon, Kristina M; MacDonald, Donna; Thibeau, Tina D
Cc: Harrison, Dan J; Preeper, Andrew R; MacQueen, Jenna; Poirier, Adele
Subject: Draft release for review

Importance: High

Will need approval from Rob, NSHA and Northwood. Please advise ASAP. [REDACTED]
[REDACTED]

14(1)

14(1)

14(1)

Tara Walsh
Managing Director
Communications Nova Scotia
902-424-5083
902-471-1022
tara.walsh@novascotia.ca

Munroe, Laurel

From: Walsh, Tara A
Sent: April 19, 2020 4:48 PM
To: Munroe, Laurel; Shannon, Kristina M; MacDonald, Donna; Thibeau, Tina D
Cc: Harrison, Dan J; Preeper, Andrew R; MacQueen, Jenna; Poirier, Adele
Subject: RE: Draft release for review

Here it is:

COVID-19/HEALTH/WELLNESS--More Support for Northwood

Government and the Nova Scotia Health Authority (NSHA) are working to help Northwood implement an emergency plan to respond to the COVID-19 outbreak at its Halifax Campus.

Starting today, April 19, recovered patients are being moved offsite, additional staff are coming in from across the province, and residents are being tested and treated onsite at the facility.

"Residents and families with loved ones at Northwood can be assured that we are on this," said Premier Stephen McNeil. "I want to thank all of the health-care workers and everyone volunteering to support Northwood during this critical time. Our health-care unions have been very supportive and are working hard to ensure their workers are also protected. Thank you is not enough for what you, the front-line workers, are doing."

The emergency plan includes:

- NSHA and Department of Health and Wellness onsite at Northwood to support its response
- establishing a Northwood COVID-19 Recovery Unit at a local hotel to care for recovered residents; first resident moved today, April 19
- equipment to support recovery unit donated by Shannex, including electric beds, tables and other supplies
- support from many organizations to ensure sufficient staff to care for residents, manage operations and relieve current staff. Includes NSHA, college and university students in related programs, Victorian Order of Nurses, Red Cross, Emergency Health Services, government staff and staff from other long-term care facilities
- redeploying the Halifax Infirmary COVID-19 unit to Northwood to treat COVID-19 positive residents onsite
- establishing a team onsite to conduct testing for COVID-19

"I want residents, families and staff to know that we're here to support them and work with them to bring the virus under control at this facility," said Dr. Robert Strang, Nova Scotia's chief medical officer of health. "Northwood is an excellent operator and I have confidence in their work. But this is a very large facility, the virus is circulating broadly, many staff and residents have tested positive and they need our help."

Nova Scotia has recorded nine deaths related to COVID-19 and a total of 675 positive test results. Confirmed cases range in age from under 10 to over 90. Eleven individuals are currently in hospital, four of those in ICU. Two hundred individuals have now recovered and their cases of COVID-19 are considered resolved. Cases have been identified in all parts of the province. A map and graphic presentation of the case data is available at <https://novascotia.ca/coronavirus/data> .

If you have two or more of the following symptoms, visit <https://811.novascotia.ca/> to determine if you should call 811 for further assessment:

- fever
- new or worsening cough
- sore throat
- runny nose
- headache

Nova Scotians can find accurate, up-to-date information, handwashing posters and fact sheets at <https://novascotia.ca/coronavirus> .

Quotes:

"We are so grateful for the support we've received from our health-care colleagues, so we can continue to focus on the care of our residents. With the emergency measures that are being put in place, these additional resources will help our team focus on what is most important – providing quality care for our residents. We remain committed to ensuring those in our care continue to receive the best care possible."

- Janet Simm, CEO, Northwood

Quick Facts:

- testing numbers are updated daily at <https://novascotia.ca/coronavirus>
- a state of emergency was declared under the Emergency Management Act on March 22 and extended to May 3
- the Halifax Campus of Northwood has 485 residents and 600 staff

Additional Resources:

Government of Canada: <https://canada.ca/coronavirus>

Government of Canada toll-free information line 1-833-784-4397

Northwood: <https://nwood.ns.ca/>

The Mental Health Provincial Crisis Line is available 24/7 to anyone experiencing a mental health or addictions crisis, or someone concerned about them, by calling 1-888-429-8167 (toll free).

Kids Help Phone is available 24/7, by calling 1-800-668-6868 (toll-free).

For help or information about domestic violence 24/7, call 1-855-225-0220 (toll-free).

-30-

Media Contact: COVID-19 Media Line
902-424-3310
Email: COVID19media@novascotia.ca

From: Munroe, Laurel <Laurel.Munroe@novascotia.ca>

Sent: April 19, 2020 4:32 PM

To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; MacDonald,

Donna <Donna.C.MacDonald@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>
 Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; MacQueen, Jenna <Jenna.MacQueen@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
 Subject: RE: Draft release for review

Just flip back edited and I will approve.

From: Walsh, Tara A <Tara.Walsh@novascotia.ca>
Sent: April 19, 2020 4:31 PM
To: Munroe, Laurel <Laurel.Munroe@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; MacDonald, Donna <Donna.C.MacDonald@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>
Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; MacQueen, Jenna <Jenna.MacQueen@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
Subject: RE: Draft release for review

Being edited. Rob, NSHA and Northwood approved. Do you need to see again or just send?

From: Munroe, Laurel <Laurel.Munroe@novascotia.ca>
Sent: April 19, 2020 4:30 PM
To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; MacDonald, Donna <Donna.C.MacDonald@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>
Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; MacQueen, Jenna <Jenna.MacQueen@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
Subject: RE: Draft release for review

Super

From: Walsh, Tara A <Tara.Walsh@novascotia.ca>
Sent: April 19, 2020 4:30 PM
To: Munroe, Laurel <Laurel.Munroe@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; MacDonald, Donna <Donna.C.MacDonald@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>
Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; MacQueen, Jenna <Jenna.MacQueen@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
Subject: RE: Draft release for review

Here is the quote from Northwood:

"We are so grateful for the support we've received from our health care colleagues, so we can continue to focus on the care of our residents. With the emergency measures that are being put in place, these additional resources will help our team focus on what is most important - providing quality care for our residents. We remain committed to ensuring those in our care continue to receive the best care possible."

- Janet Simm, CEO, Northwood

From: Munroe, Laurel <Laurel.Munroe@novascotia.ca>
Sent: April 19, 2020 4:05 PM
To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; MacDonald,

Donna <Donna.C.MacDonald@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>
Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; MacQueen, Jenna <Jenna.MacQueen@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
Subject: RE: Draft release for review

A few edits ... if you can get a quote ASAP from Northwood, sure.

From: Walsh, Tara A <Tara.Walsh@novascotia.ca>
Sent: April 19, 2020 3:41 PM
To: Munroe, Laurel <Laurel.Munroe@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; MacDonald, Donna <Donna.C.MacDonald@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>
Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Preeper, Andrew R <Andrew.Preeper@novascotia.ca>; MacQueen, Jenna <Jenna.MacQueen@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
Subject: Draft release for review
Importance: High

Will need approval from Rob, NSHA and Northwood. Please advise ASAP. Do we want a quote from Northwood? Not sure how long that would take is the issue.

14(1)

COVID-19/HEALTH/WELLNESS—More Support for Northwood





14(1)

Tara Walsh
Managing Director
Communications Nova Scotia
902-424-5083
902-471-1022
tara.walsh@novascotia.ca

Shannon, Kristina M

From: Strang, Robert
Sent: April 22, 2020 5:07 PM
To: Walsh, Tara A; Lagasse, Jeannine; Munroe, Laurel; Aubut, Ted P; Shannon, Kristina M; Thibeau, Tina D; Delorey, Randy M; Orrell, Kevin
Cc: Harrison, Dan J; Poirier, Adele
Subject: RE: NSGEU follow up

Thank you Tara and it is important to have this. [REDACTED]
 [REDACTED]

14(1)

Rob

From: Walsh, Tara A <Tara.Walsh@novascotia.ca>
Sent: April 22, 2020 4:22 PM
To: Strang, Robert <Robert.Strang@novascotia.ca>; Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; Munroe, Laurel <Laurel.Munroe@novascotia.ca>; Aubut, Ted P <Ted.Aubut@novascotia.ca>; Shannon, Kristina M <Kristina.Shannon@novascotia.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>; Delorey, Randy M <HonRandy.Delorey@novascotia.ca>; Orrell, Kevin <Kevin.Orrell@novascotia.ca>
Cc: Harrison, Dan J <Dan.Harrison@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>
Subject: NSGEU follow up
Importance: High

Hi all. Sharing the follow up we received from NSHA on the claims made by NSGEU.

From: Silver, Kim <Kim.Silver@novascotia.ca>
Sent: April 22, 2020 4:17 PM
To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>; Harrison, Dan J <Dan.Harrison@novascotia.ca>; Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Langille, Paula D <Paula.Langille@novascotia.ca>; Earle, Lynda inc#478781 kg <Lynda.Earle@nshealth.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Knowles, Ruby M <Ruby.Knowles@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; COVID19CC <COVID19CC@novascotia.ca>
Subject: Vetting of NSGEU release re: Northwood
Importance: High

20(1)

The NSGEU release was reviewed with Patsy Rawding of NSHA Infection Control. She is one of the infection control practitioners onsite at Northwood (since Sunday). [REDACTED]
 [REDACTED]
 [REDACTED].

14(1)

Concerns outlined by union:

- Lack of infection control measures to protect vulnerable seniors and front line workers
 - IPAC response: very good, good processes, tight measures, screening of visitors, sanitizer
- Lack of appropriate PPE available on both units:
 - Very solid supplies, some needs to be out of reach of residents
- Lack of consistent, thorough cleaning of these units

- No concerns with cleanliness, (products not the same as NSHA, but equally good)
- **Clustering of both negative and positive seniors together on some units, making it confusing as to who is positive or negative**
 - Yes, had to be done—we know who is positive and negative, but treating all as if positive. Not able to move patients in LTE as easily as in acute. Right PPE used for each.
- **Lack of patient armbands to identify which patients require medications**
 - Not how it works in LTC. This is not a hospital setting.
- **Lack of “clean rooms” (a space that is not accessible to patients where staff can safely don PPE without risk of contamination)**
 - Not true, this is a residential space so yes, crowded compared to hospital rooms. There are appropriate places for donning/doffing on entering units.
- **And lack of garbage receptacles to properly dispose of contaminated PPE, so workers must carry them through the unit, potentially contaminating “clean” areas.**

Demands:

- **Allow these workers access to N95 masks, as these are COVID-positive units**
 - Not required, only during no aerosol generating procedures.
- **Ensure PPE supplies are available at the entrance of each room, so staff are able to safely respond to a patient in crisis;**
 - No - you are wearing ppe in the unit, not room by room. Best practice with this volume of patients (supported by literature). Also safer for staff—the more don and doff you do, greater risk of self-contamination.
- **An increased and sustained presence of Infection Control to educate staff and ensure protocols are being followed**
 - Two Infection Control Practitioners on site since Sunday, greater than the ratio you would see in hospital.
- **Allow these units to develop a model of care and staff appropriately for patient ratio and acuity**
 - The model is appropriate for ltc with well documented/established care model.
- **Removal of humidifiers from all patient rooms**
 - Not aerosol generating, no risk.
- **Ensure units are deep-cleaned by housekeeping and then maintained with regular cleanings per day**
 - The site is extremely clean; focus on high touch areas and bathrooms.
- **Establish clean rooms for donning PPE, charting and breaks**
 - Not required on unit, procedures in place to accommodate safe donning/doffing, dedicated space for breaks etc.
- **And provide yellow bags to ensure contaminated PPE is disposed of properly and ensure there are sufficient receptacles in each patient room.**
 - This garbage does not need to go in yellow bags.

Pages 16 - 17 withheld, s. 16

Munroe, Laurel

From: Munroe, Laurel
Sent: April 26, 2020 3:39 PM
To: Matheson, Chrissy L
Cc: MacInnis, Marla J; Harrison, Dan J; Aubut, Ted P
Subject: Re: DHW Media Inquiry: NSGEU Northwood Concerns

Good here.

On Apr 26, 2020, at 3:31 PM, Matheson, Chrissy L <Chrissy.Matheson@novascotia.ca> wrote:

Hi laurel,

Any concerns?

Sent from my iPhone

On Apr 26, 2020, at 3:29 PM, MacInnis, Marla J <Marla.MacInnis@novascotia.ca> wrote:

*****Approved by Minister Delorey, legal and labour relations**

20(1) Media: [REDACTED], allNovaScotia.com

Topic: NSGEU Northwood Concerns

Background: https://nsgeu.ca/home_page/update-on-conditions-at-northwood-manor/21566/

Question: The NSGEU is telling its members that Minister Delorey exceeded his legal authority last week when he ordered members to work at Northwood. What's the minister's response to this claim? Please provide a comment.

Deadline: 5pm

Strategy: MRA to respond via email

Message: We stand with all Nova Scotians when we say thank you to the frontline healthcare workers who have stepped into Northwood to assist in fighting this deadly disease. Government is committed to providing Northwood with the resources that it needs to care for our loved ones. Authority for these actions can be found in the Health Authorities Act.

Marla MacInnis

Media Relations Advisor, Province of Nova Scotia
Transportation and Infrastructure Renewal
t: 902-424-1750 | c: 902-499-6428 | e: marla.macinnis@novascotia.ca

Grant, Doris M

From: Grant, Doris M
Sent: April 27, 2020 1:26 PM
To: Bragg, Courtney L
Subject: FW: Premier's Office Update
Attachments: Reopening Deck v2 short form EH + CD edits 20200426 2013.pdf

For Laurie

From: Strang, Robert <Robert.Strang@novascotia.ca>
Sent: April 27, 2020 12:18 PM
To: Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; Delorey, Randy M <HonRandy.Delorey@novascotia.ca>; Orrell, Kevin <Kevin.Orrell@novascotia.ca>; Watson-Creed, Gaynor <Gaynor.Watson-Creed@novascotia.ca>; Langley, Laura Lee <LauraLee.Langley@novascotia.ca>; Graham, Laurie B <Laurie.Graham@novascotia.ca>
Cc: Health and Wellness Minister <Health.Minister@novascotia.ca>; Martin, Thomasina <Thomasina.Martin@novascotia.ca>
Subject: RE: Premier's Office Update

Please use this revised slide deck for our 3 pm briefing.

Rob

From: Strang, Robert
Sent: April 27, 2020 11:10 AM
To: Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; Delorey, Randy M <HonRandy.Delorey@novascotia.ca>; Orrell, Kevin <Kevin.Orrell@novascotia.ca>; Watson-Creed, Gaynor <Gaynor.Watson-Creed@novascotia.ca>; Langley, Laura Lee <LauraLee.Langley@novascotia.ca>; Graham, Laurie B <Laurie.Graham@novascotia.ca>
Cc: Health and Wellness Minister <Health.Minister@novascotia.ca>; Martin, Thomasina <Thomasina.Martin@novascotia.ca>
Subject: RE: Premier's Office Update

Here is the slide deck for this briefing.

Rob

-----Original Appointment-----

From: Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>
Sent: April 26, 2020 11:48 AM
To: Lagasse, Jeannine; Delorey, Randy M; Orrell, Kevin; Strang, Robert; Watson-Creed, Gaynor; Langley, Laura Lee; Graham, Laurie B
Cc: Health and Wellness Minister; Martin, Thomasina
Subject: Premier's Office Update
When: April 27, 2020 3:00 PM-4:30 PM (UTC-04:00) Atlantic Time (Canada).
Where: Conference Call Number below



 Jeannine is moderator 

15(1)(k)



Planning for A New Normal: Considerations for Nova Scotia

OCMOH, 27 APRIL 2020

CONFIDENTIAL - OFFICIAL DISTRIBUTION



Part 1: COVID-19 Epidemic Curves

PREPARED BY: DEPT. HEALTH & WELLNESS

PREPARED ON: 27 APRIL 2020

CONFIDENTIAL – DO NOT DISTRIBUTE



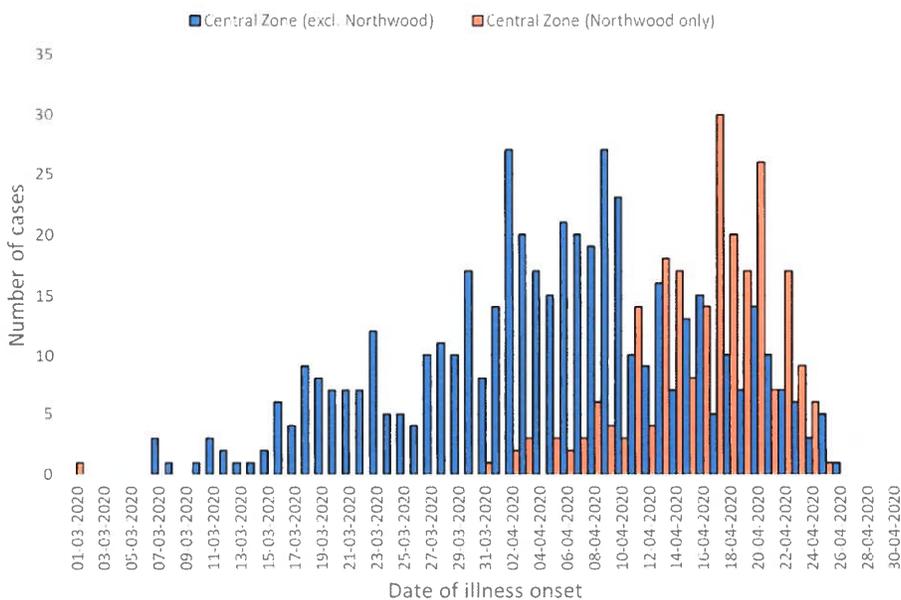
Data notes

- ▶ Data source:
 - ▶ Panorama – confirmed and probable cases of COVID-19
- ▶ Data valid to:
 - ▶ 27 April 2020, 07:00
- ▶ Definitions:
 - ▶ Date of illness onset: the first of either symptom onset, laboratory specimen collection, date reported, and clinical diagnosis
 - ▶ Community Cluster: Clusters are developed on aggregated census dissemination areas (DA) intended to align as close as possible with community activity. Each unit has approximately 3000-34000 people. The 54 Community Clusters aggregate to the 14 Community Health Networks which in turn aggregate to the 4 Health Zones.

Not Responsive

Pages 25 - 28 Not Responsive

Figure: All Central Zone cases of COVID-19 by association with the Northwood long-term care facility outbreak (n=485 vs n=236)



Not Responsive

Pages 30 - 53 Not Responsive

Shannon, Kristina M

From: Strang, Robert
Sent: April 29, 2020 2:47 PM
To: Walsh, Tara A
Cc: Delorey, Randy M; Orrell, Kevin; Lagasse, Jeannine; Elliott-Lopez, Vicki; Munroe, Laurel; Shannon, Kristina M; Thibeau, Tina D
Subject: Re: Northwood presser notes

Thank you. This is helpful.

Rob

Sent from my iPhone

On Apr 29, 2020, at 2:27 PM, Walsh, Tara A <Tara.Walsh@novascotia.ca> wrote:

Seemed to go well again. Not many questions.

From: Poirier, Adele <Adele.Poirier@novascotia.ca>
Sent: April 29, 2020 1:36 PM
To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Harrison, Dan J <Dan.Harrison@novascotia.ca>
Cc: Rankin, Carole E <Carole.Rankin@novascotia.ca>
Subject: Northwood presser notes

Janet's opening remarks attached

John MacPhee, CH

Resident caught from roommate, are positive and still together?

Josie – we are separating when we can
 Often other person is actually positive and if move, risk of infecting another
 But are now putting positive, negative separate

Total staff?

Josie – It varies. Today staffing extremely good through all support from external agencies

Vickie – about 200 people in schedule including all support from all areas. Also close to about 80 in cue to begin working.

(Taryn Grant, CBC – same question)

Natasha P CTV

Is there more govt could have done to prevent?

Josie – did work in advance, all preventative measure in place before mandated, April 5 first case likely came in before

Expect to see decrease

14 day incubation period

Could we have done any more? Not that aware of. Other nursing homes taking same precautions, no cases

It was in community, came in before masks were put on

Janet – Asymptomatic staff got through screening questions in place at the time.

How many staff out with covid?

Joesie – about 70 but also 40 recovered and returning to work

Olivier Lefebvre RC

How many deaths in April covid and non covid?

Janet – even if at end of life, if covid positive, we've been told to include in count

Josie – today 22 deaths. Medical director reviewing all deaths, work with MOH to determine true cause of death

More cases or reached peak?

Some floors with positive and negative (not same room) but with incubation period, expect to see more cases

Yesterday swabbed 66 and found 4-5 asymptomatic cases

More you swab, more you'll find cases

Taryn

Why staff fluctuating so much, why come in from outside HRM?

Vicki – call went out to assist, health system staff in central region and across province who responded NSHA, other facilities, new hires, etc

Collective effort from different health care professionals across prov

Additional housekeeping support and others

Alicia D Global

7 floors unaffected, is that still the case?

Josie – found one case on a floor, moved off

2nd floor with 6 new cases

Still have 7 floors unaffected

How many LTC vs other residents?

Janet – 208 LTC resident cases, none in apartments or other facilities

20 new cases due to last week's extensive testing?

Josie - Some tested negative and reswabbed

Retested a lot of floors, within 3 days some turn positive

Can you track how spreading?

Josie – another challenge, don't know how exposed
Initially could do contact tracing
In one case tested 70, no positive, came in before

Janet – constant battle, continues to challenge, look every day to new strategies to respond

Taryn

When will it be under control?

Josie – MOH has to declare over

Olivier

Would non covid patients be better at home?

Josie – a lot of people have significant needs, can't ambulate, many co morbidities, dementia
Some residents are 98, children in 70s, can't care for them

?? RC

Do you swab residents every day?

Josie – meeting with MOH, will direct
Staff every Tuesday and Thursday

Alicia

How many in LTC

Josie – capacity for 485
Because of vacant beds had 469 when outbreak began

Taryn

Fed and prov say LTC will be re examined, how will you re examine?

Josie – lots of lessons learned, our structure and how we give meds etc
Extremely good practices but will evaluate all, pp outbreak situations
Have been able to contain influenza, GI, this virus is different
Key players working with us, there will be lessons learned
If it does come back how to we better position ourselves

What do quickly to prepare for second wave?

Josie – we are building capacity for private rooms
As have vacancy or move to recovery, use that room wisely

Adèle Poirier, BPR, MPA
Communications Advisor
Department of Health and Wellness
902-430-0997

<JANET SIMM - Press Conference Remarks - April 28_3 - CLEAN (002).docx>

Grant, Doris M

From: Lagasse, Jeannine
Sent: May 4, 2020 6:26 PM
To: Graham, Laurie B; Langley, Laura Lee
Cc: Delorey, Randy M; Orrell, Kevin; Strang, Robert; MacDonald, Donna; Walsh, Tara A
Subject: FW: Timelines for COVID19 Response in LTC
Attachments: RK MacDonald Outbreak Timeline (1).docx; Magnolia Outbreak Timeline.docx; Timeline for Communication to LTC Facilities.docx; Northwood Situation Updates Apr 20-May 2, 2020.pdf

Categories: To Courtney

Attached please find the Timeline Documents that have been completed to date and the Daily Situation Updates from Northwood EOC. The Northwood specific timeline is still under development. Should be able to send it later tonight. I have not had the opportunity to review these versions.

Below is draft messaging for Northwood prepared by CNS.

Updates to all documents will continue. Wanted you to have what is done now. Please provide feedback if you would like anything additional.

Jeannine

Northwood Messaging
May4

14(1)

Messages:

Talking Points:



14(1)

Pages 61 - 66 Not Responsive

Timeline for COVID19 LTC Response in NS

December 2019

Cases of what would become known as COVID-19 were reported in Wuhan, China

January

31 NS launched a website dedicated to the latest information about the coronavirus

February

5 Memo to LTC: Novel Coronavirus (2019-nCoV)

28 News release: COVID-19 areas expanded

March

9 Memo to LTC: COVID19 update, visitor restrictions (travel-related) and handwashing posters

New National Screening Protocols for COVID-19 (not LTC-specific)

15 Announcement: First 3 cases in NS (travel-related)

Announcement: LTC facilities closed to visitors, self isolation with recent travel, social distancing

16 Memo to LTC: Direction to track and report C19 expenses to DHW for preparedness & response

17 Announcement: NSHA/IWK announce health system measures

18 Memo to LTC: PPE Supplies and Tracking Sheet to identify pressures on PPE supplies, assess need, track and report supply and need

Announcement: new virtual care options for doctors and pharmacists

19 Memo to LTC: Restrictions Criteria for Compassionate Exception (End-of-life)

22 State of Emergency declared

26 Announcement: Alternate telephone assessment line set up for continuing care sector staff, facilities notified

27 Memo to LTC from OCMOH: COVID-19 Active Surveillance Actions in Nursing Homes

First positive test in LTC (resident at RK MacDonald) [[RK Timeline](#)]

Estimated date of infection for first death in LTC (based on 3-week incubation)

Announcement: purchase of 800 iPads for LTCF for communication with families

28 First Magnolia staff member tests positive [[Magnolia timeline](#)]

- 31 Memo to LTC: DHW coordinating purchase of washable isolation gowns with Northwood
Survey to determine rollout of iPads, including connectivity
Memo to LTC: Survey to determine rollout of iPads, including connectivity

April

- 1 First two positive residents at Magnolia
- 5 First two positive staff members at Northwood
EHS Assessments Unit announced for areas of HRM and CBRM – can be used for a cluster in in-home testing, such as in LTC
- 6 Announcement: OCMOH Directive for LTC issued, including cleaning, monitoring of residents and staff, testing, and reporting; shared with LTC sector
Northwood begins masking employees. No supply concerns identified.
Memo to LTC: Urgent requests for PPE – Process and Distribution Model with HANS
- 7 *First COVID-19 death in NS (EZ)*
First 5 positive residents at Northwood.
Announcement: Removal of travel as a requirement for testing
- 8 *PHAC Infection Prevention and Control (IPAC) Guidelines for LTC: working in multiple care settings; masking; testing for atypical patients (see note below)*
- 9 Memo to LTC: vacant bed survey & financial assessment policy variance for waitlisted clients
Announcement: public list of symptoms for screening expanded
Memo to LTC: solution to vulnerable sector checks issue for potential employees
- 11 NS direction re: testing for atypical patients
- 12 Memo to LTC: update to OCMOH Directive reflecting expansion of symptoms; updated OCMOH Directive shared with sector and posted online
Posted to NSHA Hub: CC Laboratory & Pathology FAQ
- 13 Announcement: masking protocol for LTC; protocol, process to order masks/order form and masking poster/video shared with LTC.
- 14 Announcement: pandemic modeling for NS
- 17 Announcement: first deaths in LTC (Northwood)
Memo to LTC: urgent request for short-term staffing support at Northwood

- 19 Announcement: supporting Northwood with emergency plan
- 23 Memo to LTC and online posting: OCMOH Directive update re: working in multiple LTC facilities
- 24 Memo to LTC: Updated IPAC Guidelines for Long-term Care
Posted to NSHA Hub: NSHA Medical Support Service for LTC Medical Directors/Physician
- 25 Posted on NSHA Hub: COVID-19: Recommendations for the Use of CPAP or BiPAP Therapy for Obstructive Sleep Apnea or Hypoventilation Disorders in Long Term Care
- 27 Memo to LTC: Home First funding to support in-house home care in assisted living facilities
- 28 Memo to LTC & home oxygen providers: Home Oxygen program exception to support LTC residents; funding for staffing of isolation units
- 30 Memo to LTC: update on iPads; questions re: administration of iPads
Clinical Pathway for Long Term Care posted on NSHA Hub

May

- 1 Updated IPAC Guidelines for LTC

NOTES

- PHAC develops evidence-informed infection prevention and control guidelines and recommendations to complement provincial and territorial public health efforts in monitoring, preventing, and controlling healthcare-associated infections. When national guidelines are released, each jurisdiction needs to assess the applicability, feasibility and implications of adopting these guidelines within their jurisdiction. If a decision to follow the guidelines is made, there then needs to be communication with all relevant stakeholders before formal adoption and implementation. There is no requirement for provincial/territorial jurisdictions to adopt national guidelines.
- There have been weekly meetings with DHW CC, NSHA and all LTCF since date, with updates and Q&As. The MOH assigned to Continuing Care and members of NSHA IPAC have participated on the calls, and additional calls occur with DHW Public Health and NSHA IPAC to address questions and concerns. These calls are being combined to reduce meeting requirements for the sector and better coordinate guidance from PH and IPAC.



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-20
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945-1700h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: Two check in meetings held today at 0945 and 1630h. Participants included representatives from NSHA, Northwood and DHW.			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, & Northwood Site Leadership team			

Agenda
<p>1. Medical</p> <ul style="list-style-type: none"> a. Care plans and goals of care remain a focus. Total number of infected residents (as of 0945h meeting) is 111. Triage patients for care based on acuity and care goals. EHS Paramedics onsite and assisting with resident visual checks and assessments. NPs also onsite and managing oxygen needs. Analytics required to assist with identification of resident status and prioritization of resident placement/movement to available care areas. b. Analytics modelling, dashboard – Access to Northwood EMR for analytics team received around 4pm today – should have update for 0945 meeting tomorrow. Hoping to be able to provide something better than the current PDF report, but options may be limited. c. Need to create ‘round times’ and will require nurse to assist with these virtual rounds. Josie meeting with teams today to create assignments. d. Swabbing team arrived today. Josie meeting with team to get swabbing completed. e. Physician remuneration – acceptance of remuneration agreement has been received from DHW. Additional discussions to occur re funding models for regular, covid, and hotel care.



NSHA Incident Management System

2. Operations

- a. Clinical care – First shifts for deployed teams. Teams functioning well. Work flow processes continue to evolve.
- b. Infection control – NSHA IPAC team (lead – Patsy) onsite. Working with NHSA and Northwood staff on processes. Josie working with teams to implement process changes for outbreak management.
- c. Working with MOH to swab all residents and staff.

3. Communications

- a. Overall strategy – Press conference held today. Went well. Video of conference will be posted on website. Working on proactive messaging for other situations as they arise. Also monitoring social media.
- b. Connection with Families – have approximately 300 families to contact. Calls began today. Need assistance with answering emails from families. Vickie from DHW will make a request for resources from department to assist.
- c. Secure HUB to store client information not yet complete, but have been in contact with the correct people to make this happen.
- d. Those staff who are calling NSHA OHS line to request swabbing should be redirected to Northwood hub for contact information to arrange on-site swabbing.

4. Human Resources

- a. Clinical Staff – Received list of 40 potential people for hire, some are students. Will be working to actively hire them into system.
- b. Request for assistance from Occupational Health nurses to assist with staff who are ill. Angela escalated to NSHA EOC. Contacts provided to Caroline for follow-up as required.
- c. 59 people from 8.4 now scheduled for single shifts or assignments
- d. Medical students cannot work until job description and clear understanding of who is hiring them is established. Caroline will forward student's information to Todd Howlett– Todd will contact student(s) to explain situation and to put on hold until clarified.
- e. Critical staffing shortage for tonight. Need 6 more RNs. Randi and Caroline working together to address gaps and find solution.
- f. Challenges with scheduling and coordination of all components. Natalie from staffing to provide additional assistance. No additional requests for assistance at this time. Includes clinical, housekeeping (22 required), procurement (delivery of PPE) and other support staff. It was identified that 22 housekeepers are needed. Working on this.

5. Logistics (Supplies, PPE, Equipment, Finance)

- a. Received large order of masks this morning.
- b. Head and foot covers arriving tomorrow
- c. Ten O2 concentrators received

6. Offsite Location –

- a. 3 patients settled in hotel
- b. Working through any issues before transitioning additional patients



NSHA Incident Management System

<ul style="list-style-type: none"> c. Working on physician coverage – good for other staff d. Using external cleaning company as hotel will not support cleaning <p>7. Care by Family Proposal – Family assistance program started first pilot this morning – identified gaps. Regrouping to make changes before continuing with program</p> <p>8. Risks/Open items – no additional items to add</p>
<p>OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)</p> <ul style="list-style-type: none"> • NSHA to coordinate meetings for Tuesday and Wednesday via teleconference at 0945 and 1630h. • Team priorities within next 24-48 hours: <ul style="list-style-type: none"> ○ Obtain required analytics to support clinical planning and processes ○ Confirm physician scheduling and shifts. ○ Develop plan for restorative care processes ○ Confirm process for physician virtual rounds ○ Work to improve coordination of available and secured staffing resources. ○ Secure staffing resources for contacting resident families



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-21
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945-1700h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: Two check in meetings held today at 0945 and 1630h. Participants included representatives from NSHA, Northwood and DHW.			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, & Northwood Site Leadership team			

Agenda
<p>1. Medical</p> <ul style="list-style-type: none"> a. Model of care for hotel patients being developed. Patients will have continuity of care by physician from Northwood facility. Trying to get coverage from Dartmouth Blue Group (Care by Design) for overnight b. Staff from Blue Group will need access to EMR for information and charting purposes – When physicians are identified, information should be provided to Barry and Melody as they have process in hand to get this access. c. Developing pathways around COVID units - getting leadership pieces in place d. There will be a meeting at 7am tomorrow at the Hotel site to give oversight and make sure clinical content is in place as this is an active care unit. e. Now have 120 cases identified. Four floors swabbed yesterday, waiting on results. MOH has requested that everyone in building be swabbed. Unsure at this time if that includes NSHA staff. f. Randi advised more RNs available from NSHA to complete swabbing. Randi and Josie will work to put 2 more RNs in place to get swabbing of all residents completed. g. Analytics - Matt meeting with vendor tonight or tomorrow, hopeful vendor can create dashboards, as this is being done in other



NSHA Incident Management System

provinces. NSHA analytics staff continuing to work on creating an interim solution.

2. Operations

- a. Critical staffing shortages for next 12-24 hours. 386 open (unfilled) shifts from now until weekend. Volunteer system is not working. Need a new strategy. Smaller working group of NSHA, Northwood, and DHW met at 11am today to work to develop a staffing plan that is as robust as possible.
- b. NSHA IPAC team have been very helpful with putting more processes in place and doing education. Identifying practices that can be shared with other nursing homes if they should also experience outbreaks.

3. Communications

- a. Established process for Q&A and script for calls to families
- b. 20 emails received into Northwood email, currently working on triaging those for response.
- c. Case numbers from DHW will be posted to website later today.
- d. FAQ on website being updated.
- e. Communication from CEO sent to all staff acknowledging staff who are ill. Working on communication on worst case scenario if staff member passes.

4. Human Resources

- a. Still looking for housekeeping and procurement staff. Need approximately 4 people per day to move supplies to units. Request has been sent to CZ – 2 people have been identified, looking for 2 more.
- b. Randi from NSHA has been working to find available staff by freeing up 4 staff who have 0.8 or 1.0 FTE with NSHA and are already casual status with Northwood.
- c. Noted the importance of new staff coming from other settings attending orientation to help them to understand the difference in providing care in a LTC setting.
- d. Critical shortage for tonight. Need a minimum of 3 RNs and 3-4 CCAs.
- e. Kitty will connect with Josie (and/or her managers) and Vickie to problem solve for this evening and tomorrow. Caroline and kitty will provide update back to group by 7pm.

5. Logistics (Supplies, PPE, Equipment, Finance)

- a. PPE flowing in, distributing to units. Adequate supply for right now. Working on ordering for long term.
- b. Swabbing team ran out of swabs today. Randi will arrange for staff to bring swabs with them tomorrow. Another 100 people to be swabbed tomorrow.

6. Offsite Location – Received 2 new residents, now have 3 in total. All have settled in well.

7. Care by Family Proposal – Still regrouping and working on model. Hope to have new approach ready to roll out soon



NSHA Incident Management System

8. Risks/Open items – Focus of 1630h meeting to be on staffing

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Next meeting Wednesday via teleconference at 0945 and 1630h.
- Team priorities within next 24-48 hours:
 - **Main priority: Address critical staffing shortage for tonight and tomorrow**
 - Work to improve system for coordination of staffing resources.
 - Nursing staff
 - Support staff
 - Staffing resources for contacting resident families
 - Clarify role and process for medical students
 - Obtain required analytics to support clinical planning and processes
 - Confirm physician scheduling and shifts
 - Develop plan for restorative care processes
 - Confirm process for physician virtual rounds
 - Continue with process for staff and resident swabbing as per MOH directive.
 - Continue to review and revise IPAC processes.



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-22
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945-1700h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
<p>Purpose: Two check in meetings held today at 0945 and 1630h. Participants included representatives from NSHA, Northwood and DHW.</p> <p>Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, & Northwood Site Leadership team</p>			

Agenda
<p>1. Medical</p> <ul style="list-style-type: none"> a. Total cases 134, 9 deaths b. Meeting was held at Hotel site this morning. Have coverage model in place using Care by Design. Continuity of care being provided by Northwood physician c. Request for administrative resources to support the metrics input. Dr Howlett will work with Dr Clark to identify someone to support. d. Job description of LPN to be used to deploy medical students. e. Analytics has prepared a dashboard which has been sent to Dr Clark to review. This dashboard has been built using manual data at this time. Matt has connected with vendor, and is working to design a custom screen in the EMR that will produce the report that is needed. This may mean a slight change to charting in EMR for nursing staff - Matt will connect in with Josie and Margaret about this. <p>2. Operations</p> <ul style="list-style-type: none"> a. Overnight was managed with small staff that they had available. b. Floor are staffed for tonight. Staffing is looking more favorable at this time for the days ahead.



NSHA Incident Management System

- c. Schedules are built. New staff coming into schedules full time. Getting list compiled of those willing to work overtime.

3. Communications

- a. Have staff in place to make calls with families.
- b. Official statement will be going out to media in response to statement from NSGEU today. Updates being made to website.
- c. Vickie from NSHA meeting with HR and labor relations in response to NSGEU statement

4. Human Resources

- a. Need housekeeping urgently – short 22 housekeepers. NSHA working to assist.
- b. 75 staff swabbed yesterday – 11 positive which includes 8 CCA's, 2 LPN's, 1 dietary aid, and 1 RN that will have to be swabbed again as result was indefinite.
- c. Of the 43 staff infected, 34 of those are CCA's. There is question as to whether they many require more PPE training. Suggested that it would be a good time to offer refresher as they are coming back into workforce. Tammy from NSHA IPAC will work with Caroline to arrange
- d. Bus service set up between NW and staff staying at hotel – this will help with parking issue
- e. Alex from DHW requested list of staff who are off work for reasons other than COVID – she and Caroline will work together to attempt to transition these staff back into workforce

5. Logistics (Supplies, PPE, Equipment, Finance) - No request for assistance at this time

6. Offsite Location – No request for assistance at this time

7. Care by Family Proposal – had an opportunity to regroup today. Proposing a small, focused reboot tomorrow for clinical team.

8. Risks/Open items – No additional issues identified today

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Next meetings Thursday and Friday via teleconference at 0945 and 1630h.
- Team priorities within next 24-48 hours (see Incident/Event Board on next page)



**NSHA Incident Management System
Northwood Manor - Incident/Event Board**

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	April 22 @ 0945h: Analytics dashboard sent to B. Clark. Request for analytics assistant. T. Howlett to follow-up. April 22 @ 1645h: Dashboard to be shared with Josie and Janet (Matt and Margaret). Working with vendor to develop a custom screen for extraction of required data elements.	In Progress
14	2020-04-21	1630h	Communications	Response to NSGEU Media Release	Communication Team	High	Comms team sending official statement in response to media release	In Progress
9	2020-04-21	0945h	IPAC	Reviewing and revising multiple processes.	Patsy Rawding and IPAC team	Moderate	April 21: IPAC team onsite and working with staff re process improvements. Going well.	In Progress
12	2020-04-22	1630h	IPAC	Develop process for reviewing IPAC procedures for employee group most affected with positive cases (CCA)	Tammy and Patsy	Moderate		
2	2020-04-20	0945h	Medical	Confirm physician scheduling and shifts.	Barry Clarke	High	April 22: Coverage model in place. Continuity of care processes in place. Utilizing physicians who are familiar with residents. Exploring job description for LPN to deploy medical students (T. Howlett)	In Progress
3	2020-04-20	0945h	Medical	Develop plan for restorative care processes	Barry Clarke and Maria	Moderate		In Progress
7	2020-04-21	0945h	Medical	Charting process - hotel - Blue Team	Barry Clarke	Moderate	April 21: Meeting scheduled on site at 0700h april 22. April 22: Meeting held and went well with providers. Able to utilize physicians who are familiar with residents for care.	In Progress

Signature: _____



NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
5	2020-04-20	0945h	OHSW & People	Work to improve coordination of available and secured staffing resources: Nursing, Support, Medical Students.	Caroline Campbell, Randi Munroe, Jill Flinn	High	April 20: Situation improved but still several gaps. April 21: Upwards of 100 people deployed. Staffing process continues to require review. Vulnerable levels for this evening. Team meeting at 1100h to assess and problem solve. DHW representative to join 1100h meeting as well. April 22 @ 1630h: Much progress made today. Process also in place to provide virtual orientation to those onboarding.	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify. April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria	Not Started
10	2020-04-21	1630h	OHSW & People	Critical staffing levels for evening of April 21. Group convening to address.		High	April 21: Contingency planning in place for evening shift.	Complete
11	2020-04-22	1630h	OHSW & People	List of employees currently off work	Alex and Caroline	Moderate	Caroline to provide list to Alex	Not Started
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate		In Progress
10	2020-04-21	1630h	Operations	Resident swabbing	Randi Munroe and Josie Ryan	Moderate	April 21: Swabbing team going well. Will assess if additional staff needed. April 22: continues to go well. Additional staff on site today.	In Progress

Signature: _____

2 of 3



**NSHA Incident Management System
Northwood Manor - Incident/Event Board**

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
6	2020-04-20	0945h	Resident Families	Secure staffing resources for contacting resident families	Wendy McVeigh	Moderate	April 22 @ 0945h: Continuing Care completed 18 calls Monday went well- generated process questions which we sorted and had general orientation with all 36 callers yesterday with Linda Verlinden participating. Today will have training on Point Click Care (NW Electronic Records) for CC's only who are RN's and they will be starting calls today for COVID positive families.	In Progress
13	2020-04-22	1630h	Resident Families	Care by Family Proposal		Moderate	Program reviewed and revised. Will initiate small pilot.	Not Started

Signature: _____



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-23
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945-1700h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: Two check in meetings held today at 0945 and 1630h. Participants included representatives from NSHA, Northwood and DHW.			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, & Northwood Site Leadership team			

Agenda	
1. Medical	<ul style="list-style-type: none"> a. Matt sent dashboard to Josie, Janet and Dr Clarke for review. Working with vendor, mock up completed. Matt to connect with Jennifer Tucker at Northwood to discuss impacts to charting for nursing staff. Once dashboard is stood up, it will be updated on a daily basis. b. Physicians starting on-call tomorrow. This will allow nurses to call for orders etc. c. Need identified to determine critical staffing levels for each of the floors. Josie to provide those numbers within next 24 -48 hours. NSHA analytics staff ready to assist as needed. d. NSHA working on Kronos to be able to view number of staff scheduled vs number of staff who reported for shift. It was recommended to also include the number of staff required.
2. Operations/Staffing	<ul style="list-style-type: none"> a. Staffing is covered for this evening. NP on site today. Seven residents moved to recovery unit at hotel, preparing for more admissions to this unit on Saturday. b. NSHA IPAC has been working towards providing list of recommendations and education. Have some structures to put in place, and also



NSHA Incident Management System

some suggestions for Level 1 side as well. Staff very receptive to information provided.

- c. 105 staff were swabbed today. Have received word from MOH that Northwood can swab NNSA staff. NW waiting for approval from NNSA occupational health for same.

3. Communications

- a. Media briefing scheduled for tomorrow. Vickie from NNSA to join Janet from Northwood for this press conference
- b. Media requests that were received today have been deferred to tomorrow.
- c. FAQ have been updated
- d. Lots of positive feedback received around communication with families
- e. Unifor and NSNU sending joint message to all members supportive of Northwood
- f. Joint message from Janet and Vickie was sent out to all Northwood and NNSA CZ staff

4. Logistics (Supplies, PPE, Equipment, Finance) - No request for assistance at this time

- 5. **Offsite Location** – Residents are doing well. There is a call out to home support agencies across the province looking for staff to come work in unit full time to support of influx of residents. Currently drawing on Northwood’s home support staff at this time.

6. Care by Family Proposal – Working through planning for the possibility of allowing compassionate visits.

- 7. **Risks/Open items** – DHW has been successful with HRCE, and have sent early childhood educators to CZ redeployment centre. NS Hearing & Speech staff also ready to assist with mealtime for residents.

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Next meeting Friday via teleconference at 0945 and 1630h.
- Team activities and priorities noted on attached Incident/Event Board (following pages). Three (3) tasks/items now “complete”.



NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	<p>April 22 @ 0945h: Analytics dashboard sent to B. Clark. Request for analytics assistant. T. Howlett to follow-up.</p> <p>April 22 @ 1645h: Dashboard to be shared with Josie and Janet (Matt and Margaret). Working with vendor to develop a custom screen for extraction of required data elements.</p> <p>Apr 23: Matt to connect with Jennifer Tucker to review nursing flow process re EMR. Option available from vendor re aggregate level dashboard (Janet to follow-up).</p>	In Progress
14	2020-04-21	1630h	Communications	Response to NSGEU Media Release	Communication Team	High	<p>Comms team sending official statement in response to media release</p> <p>Apr 23: statement drafted by Karen and sent out. Janet did Information Morning today. FAQ has been updated on website. FAQ for call in questions has been updated. Planning for online press conference tomorrow with Janet, Josie and Vickie. Communications to begin incorporating messaging to address belief that all cases were contracted at work.</p>	In Progress
16	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	<p>Apr 23: question from DHW if paramedics are still required to assist with rounding. Still needed. May need to increase based on number of new cases.</p>	In Progress
9	2020-04-21	0945h	IPAC	Reviewing and revising multiple processes.	Patsy Rawding and IPAC team	Moderate	<p>April 21: IPAC team onsite and working with staff re process improvements. Going well.</p> <p>Apr 23: Significant progress. Will be ongoing. Noting issue as complete and will continue to monitor.</p>	Complete

Signature: _____

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**NSHA Incident Management System
Northwood Manor - Incident/Event Board**

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
12	2020-04-22	1630h	IPAC	Develop process for reviewing IPAC procedures for employee group most affected with positive cases (CCA)	Tammy and Patsy	Moderate	Apr 23: Continuing to work on IPAC processes and procedures. Focusing on education. Identifying strategies for targeted education.	In Progress
2	2020-04-20	0945h	Medical	Confirm physician scheduling and shifts.	Barry Clarke	High	April 22: Coverage model in place. Continuity of care processes in place. Utilizing physicians who are familiar with residents. Exploring job description for LPN to deploy medical students (T. Howlett) Apr 23: Physicians starting on-call tomorrow.	In Progress
3	2020-04-20	0945h	Medical	Develop plan for restorative care processes	Barry Clarke and Maria	Moderate	Apr 23: work in progress for restorative care process	In Progress
7	2020-04-21	0945h	Medical	Charting process - hotel - Blue Team	Barry Clarke	Moderate	April 21: Meeting scheduled on site at 0700h april 22. April 22: Meeting held and went well with providers. Able to utilize physicians who are familiar with residents for care. Apr 23: Blue team will be starting at COVID restorative hotel. Charting access in place for those working at hotel.	Complete

Signature: _____



NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
5	2020-04-20	0945h	OHSW & People	Work to improve coordination of available and secured staffing resources: Nursing, Support, Medical Students.	Caroline Campbell, Randi Munroe, Jill Flinn	High	<p>April 20: Situation improved but still several gaps.</p> <p>April 21: Upwards of 100 people deployed. Staffing process continues to require review. Vulnerable levels for this evening. Team meeting at 1100h to assess and problem solve. DHW representative to join 1100h meeting as well.</p> <p>April 22 @ 1630h: Much progress made today. Process also in place to provide virtual orientation to those onboarding.</p> <p>Apr 23: Staffing levels good for this evening. Discussion re working towards quantifying levels. Progress continues to be made with scheduling. Josie to send critical levels to Randi and Jill. Analytics support available if required.</p>	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	<p>Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify.</p> <p>April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria</p> <p>Apr 23: Continuing to swab staff today. MOH confirmed ok to include NSHA staff. Josie awaiting call from CZ OHSW (A. Keenan).</p>	In Progress
10	2020-04-21	1630h	OHSW & People	Critical staffing levels for evening of April 21. Group convening to address.		High	<p>April 21: Contingency planning in place for evening shift.</p>	Complete
11	2020-04-22	1630h	OHSW & People	List of employees currently off work	Alex and Caroline	Moderate	<p>Caroline to provide list to Alex</p> <p>Apr 23: List has been provided to Alex. Plan is to work through list and make calls today</p>	In Progress

Signature: _____

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NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
17	2020-04-23	1645h	OHSW & People	DHW sourcing of external resources for available deployment	Cindy Cruikshank	Moderate	April 23: Sourcing human resources from HRCE and NS Hearing and Speech.	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	Apr 23: Josie and Barry working through this.	In Progress
10	2020-04-21	1630h	Operations	Resident swabbing	Randi Munroe and Josie Ryan	Moderate	April 21: Swabbing team going well. Will assess if additional staff needed. April 22: continues to go well. Additional staff on site today. Apr 23: 30 new cases including 8 residents, 14 staff. Most are asymptomatic. Swabbing team on site tomorrow. Will assess need for additional swabbing.	In Progress
15	2020-04-23	0945h	Operations	Offsite security		Moderate	Apr 23: have been in contact with security company, hoping to have 24/7 security in place by tonight	In Progress

Signature: _____

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NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/ Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
6	2020-04-20	0945h	Resident Families	Secure staffing resources for contacting resident families	Wendy McVeigh	Moderate	April 22 @ 0945h: Continuing Care completed 18 calls Monday went well- generated process questions which we sorted and had general orientation with all 36 callers yesterday with Linda Verlinden participating. Today will have training on Point Click Care (NW Electronic Records) for CC's only who are RN's and they will be starting calls today for COVID positive families. Apr 23: currently have 35 callers who have been oriented, including Care Coordinators from across the province. Callers started yesterday. Will have report by end of day with how many people have been contacted.	In Progress
13	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	Program reviewed and revised. Will initiate small pilot. Apr 23: have proposal on how this may move forward. Current priority is to focus on process for compassionate visitation.	In Progress

Signature: _____

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NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-24
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945-1700h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
<p>Purpose: Two check in meetings held today at 0945 and 1630h. Participants included representatives from NSHA, Northwood and DHW.</p> <p>Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, & Northwood Site Leadership team</p>			

Agenda
<p>1. Medical – Dr Robert Strang joined the morning call to provide an overview of revised LTC guidelines: When staff who have been brought in from another facility to support an outbreak go back to their home organization, ideally they would be off work for 14 days of self-isolation. It is recognized that this is extremely challenging, and is creating a barrier to getting assistance from staff in other areas of the health system. Therefore, staff can continue to come to work under the following guidelines:</p> <ul style="list-style-type: none"> • Screening and temperature checks at least twice during shift • Wearing a mask while at work • Close adherence to hand hygiene • Staff who become unwell, will be put off work right away. <p>When at home, these staff should monitor themselves carefully, stay at home as much as they can, and minimize trips outside the home. This directive applies to all staff including VON, NSHA, and HRCE who have been redeployed to a LTC facility.</p> <p>2. Operations/Staffing</p> <p>a. Staff numbers for tonight are being reviewed, especially CCAs. A number of sick calls being received. Josie and Caroline working on</p>



NSHA Incident Management System

staffing and will loop back with Randi if additional resources needed.

3. Risks/Open items – Check-in completed for all open tasks. See incident board for updates

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Next meetings Saturday and Sunday via teleconference at 1400h
- Team activities and priorities noted on attached Incident/Event Board (following pages).



NSHA Incident Management System

Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	<p>April 22 @ 0945h: Analytics dashboard sent to B. Clark. Request for analytics assistant. T. Howlett to follow-up.</p> <p>April 22 @ 1645h: Dashboard to be shared with Josie and Janet (Matt and Margaret). Working with vendor to develop a custom screen for extraction of required data elements.</p> <p>Apr 23: Matt to connect with Jennifer Tucker to review nursing flow process re EMR. Option available from vendor re aggregate level dashboard (Janet to follow-up).</p> <p>Apr 24: Matt waiting on decision from NW about new charting process. Janet confirmed decision to Matt by noon</p>	In Progress
1630h	Communications	Response to NSGEU Media Release	Communication Team	High	<p>Comms team sending official statement in response to media release</p> <p>Apr 23: statement drafted by Karen and sent out. Janet did Information Morning today. FAQ has been updated on website. FAQ for call in questions has been updated. Planning for online press conference tomorrow with Janet, Josie and Vickie.</p> <p>Communications to begin incorporating messaging to address belief that all cases were contracted at work.</p> <p>Apr 24: focus today will be press conference. Response to NSGEU went out. Working on website updates and monitoring social media.</p>	Complete
0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	<p>Apr 23: question from DHW if paramedics are still required to assist with rounding. Still needed. May need to increase based on number of new cases.</p> <p>Apr 24: Still needed at this time</p>	In Progress



NSHA Incident Management System

0945h	IPAC	Reviewing and revising multiple processes.	Patsy Rawding and IPAC team	Moderate	April 21: IPAC team onsite and working with staff re process improvements. Going well. Apr 23: Significant progress. Will be ongoing. Noting issue as complete and will continue to monitor.	Complete
1630h	IPAC	Develop process for reviewing IPAC procedures for employee group most affected with positive cases (CCA)	Tammy and Patsy	Moderate	Apr 23: Continuing to work on IPAC processes and procedures. Focusing on education. Identifying strategies for targeted education. Apr 24: continuing to work on processes and education	In Progress
0945h	Medical	Confirm physician scheduling and shifts.	Barry Clarke	High	April 22: Coverage model in place. Continuity of care processes in place. Utilizing physicians who are familiar with residents. Exploring job description for LPN to deploy medical students (T. Howlett) Apr 23: Physicians starting on-call tomorrow. Apr 24: update will be provided on afternoon call	In Progress
0945h	Medical	Develop plan for restorative care processes	Barry Clarke and Maria	Moderate	Apr 23: work in progress for restorative care process Apr 24: update will be provided on afternoon call	In Progress
0945h	Medical	Charting process - hotel - Blue Team	Barry Clarke	Moderate	April 21: Meeting scheduled on site at 0700h April 22. April 22: Meeting held and went well with providers. Able to utilize physicians who are familiar with residents for care. Apr 23: Blue team will be starting at COVID restorative hotel. Charting access in place for those working at hotel.	Complete



NSHA Incident Management System

0945h	OHSW & People	Work to improve coordination of available and secured staffing resources: Nursing, Support, Medical Students.	Caroline Campbell, Randi Munroe, Jill Flinn	High	<p>April 20: Situation improved but still several gaps.</p> <p>April 21: Upwards of 100 people deployed. Staffing process continues to require review. Vulnerable levels for this evening. Team meeting at 1100h to assess and problem solve. DHW representative to join 1100h meeting as well.</p> <p>April 22 @ 1630h: Much progress made today. Process also in place to provide virtual orientation to those onboarding.</p> <p>Apr 23: Staffing levels good for this evening. Discussion re working towards quantifying levels. Progress continues to be made with scheduling. Josie to send critical levels to Randi and Jill. Analytics support available if required.</p> <p>Apr 24: Streamlining process has improved. Staffing ok so far for today, depending on number of sick calls received. Expecting to bring in external hires next week. NS Hearing & Speech volunteer list expected soon. Office of immigration now allowing international students to work full time. Working with STFX nursing program for new hires.</p>	In Progress
0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	<p>Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify.</p> <p>April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria</p> <p>Apr 23: Continuing to swab staff today. MOH confirmed ok to include NSHA staff. Josie awaiting call from CZ OHSW (A. Keenan).</p> <p>Apr 24: Swabbing continued yesterday, including some NSHA staff. 234 residents and 284 staff swabbed to date. Notified of 7 positive staff so far today. Process in place to crosscheck positive staff with upcoming schedules to close that gap.</p>	In Progress
1630h	OHSW & People	Critical staffing levels for evening of April 21. Group convening to address.		High	<p>April 21: Contingency planning in place for evening shift.</p>	Complete



NSHA Incident Management System

1630h	OHSW & People	List of employees currently off work	Alex and Caroline	Moderate	Caroline to provide list to Alex Apr 23: List has been provided to Alex. Plan is to work through list and make calls today Apr 24: second list of staff received by DHW this morning, working through that now. Approximately 50 staff on various leaves of absence.	In Progress
1645h	OHSW & People	DHW sourcing of external resources for available deployment	Cindy Cruikshank	Moderate	April 23: Sourcing human resources from HRCE and NS Hearing and Speech. Apr 24: no update today	In Progress
0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	Apr 23: Josie and Barry working through this. Apr 24: Work is underway, continuing to refine processes.	In Progress
1630h	Operations	Resident swabbing	Randi Munroe and Josie Ryan	Moderate	April 21: Swabbing team going well. Will assess if additional staff needed. April 22: continues to go well. Additional staff on site today. Apr 23: 30 new cases including 8 residents, 14 staff. Most are asymptomatic. Swabbing team on site tomorrow. Will assess need for additional swabbing. Apr 24: 234 residents swabbed since Monday. 169 residents positive	In Progress
0945h	Operations	Offsite security		Moderate	Apr 23: have been in contact with security company, hoping to have 24/7 security in place by tonight Apr 24: established as of 5pm last evening	



NSHA Incident Management System

0945h	Resident Families	Secure staffing resources for contacting resident families	Wendy McVeigh	Moderate	<p>April 22 @ 0945h: Continuing Care completed 18 calls Monday went well- generated process questions which we sorted and had general orientation with all 36 callers yesterday with Linda Verlinden participating. Today will have training on Point Click Care (NW Electronic Records) for CC's only who are RN's and they will be starting calls today for COVID positive families.</p> <p>Apr 23: currently have 35 callers who have been oriented, including Care Coordinators from across the province. Callers started yesterday. Will have report by end of day with how many people have been contacted.</p> <p>Apr 24: 175 calls made by NSHA group in last 2 days. All are assigned, continuing to work through list. NW reviewing processes for internal and external teams. Will bring groups together Monday to discuss.</p>	In Progress
1630h	Resident Families	Care by Family Proposal	Janet	Moderate	<p>Program reviewed and revised. Will initiate small pilot.</p> <p>Apr 23: have proposal on how this may move forward. Current priority is to focus on process for compassionate visitation.</p> <p>Apr 24: no additional information today.</p>	In Progress
0945h	OHSW & People	Review weekend staffing today		High	<p>Apr 24: Weekend staffing to be reviewed this morning. Will provide report at 1630h call today</p>	In Progress
1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	<p>Apr 24: Trying to minimize non-covid staff going into work in covid areas, need guidelines from IPAC. Vickie and Randi will draft official request to EOC and request rapid response.</p>	In Progress
1630h	Communications	Communication regarding media at NW site	Karen and Adele	Moderate	<p>Apr 24: Reporters lurking in front of NW building questioning covid status of bodies as they are being removed. Karen will reach out to Adele at DHW Communications for assistance for messaging to address this issue.</p>	In Progress



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-25
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1400h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: One check in meeting held today at 1400h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda	
1. Medical	<ul style="list-style-type: none"> a. Dr Clark on site today, things are going well. Additional resources coming on Monday. Challenge continues to be staffing. b. 7 new cases of residents today who are all on same floor. All residents and approximately 200 staff have been swabbed. Josie working with MOH and Shelly McNeil for further swabbing recommendations. c. Ruby from DHW advised that memo for staff regarding Dr Strang's message around LTC guidelines and returning to work will be finalized today. d. Dr Ken Rockwood and team will be at Northwood tomorrow to draw bloods for research study.
2. Operations/Staffing	<ul style="list-style-type: none"> a. 5 new Covid positive staff today b. Work continues to fill staffing gaps. Total of 82 staff out of rotation for various reasons.



NSHA Incident Management System

- c. Require 6 additional staff for tonight and 10 for tomorrow. IWK may be able to provide 1 RN for tonight. Need is for assistance with feeding and hydration. Jennifer Tucker will check with NSHA staff who are already on shift today to see if they are willing to work OT until 11 to help cover the gap. Jill/Randi will stay in touch through today as calls continue to find staff for weekend
- d. There are 'non-nursing' staff from NSHA and IWK that can be mobilized to assist with feeding, hydration etc.
- e. Impact of low staffing – when staffing numbers are lower, the residents care is prioritized, however, teams are doing the best they can. Supervisors are completing assessments as able. Staff continue to provide basic care, meals and hydration
- f. Additional work is needed to maximize getting staff back that are eligible for work isolation. Caroline to reach out to Barbara at IWK for assistance with this.
- g. Demand continues to grow for FaceTime with families. Having professional staff to assist would be helpful. Randi can find people on CZ deployment list who could assist with this. Randi will make this a priority for tomorrow.
- h. List of staff who are off sick has gone to occupational health. Most absences are legitimate, however some required callback. Working through this list. Staff who are calling in sick need to be referred to occupational health to be assessed for symptoms and need for swabbing

3. **Risks/Open items** – Check-in completed for all open tasks. See incident board for updates

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Next meeting Sunday via teleconference at 1400h
- Team activities and priorities noted on attached Incident/Event Board (following pages).



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
	2020-04-25	1400h	Communications	Communication around restorative unit patient protocols	Josie/Shelly McNeil	Moderate	Apr 25: questions coming from unions about positive covid case being transferred to restorative unit. Cindy to assist with communication that this only happens in patients where the virus is non-transmissible.	In Progress
	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	Apr 25: Demand continues to grow for FaceTime with families. Having professional staff to assist would be helpful. Randi will work tomorrow on identifying staff on CZ deployment list who could assist with this.	In Progress
	2020-04-25	1400h	Communications	Calls to families	Communication Team	Low	Apr 25: FAQ to be updated to reflect NOK and SDM will receive patient update calls	In Progress
16	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	Apr 23: question from DHW if paramedics are still required to assist with rounding. Still needed. May need to increase based on number of new cases. Apr 24: Still needed at this time Apr 25: Still needed at this time. 177 current cases, although some residents who are improving may not need. IPAC working with EHS around PPE use.	In Progress
12	2020-04-22	1630h	IPAC	Develop process for reviewing IPAC procedures for employee group most affected with positive cases (CCA)	Tammy and Patsy	Moderate	Apr 23: Continuing to work on IPAC processes and procedures. Focusing on education. Identifying strategies for targeted education. Apr 24: continuing to work on processes and education Apr 25: work continues with education and developing processes.	In Progress
	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	Apr 24: Trying to minimize non-covid staff going into work in covid areas, need guidelines from IPAC. Vickie and Randi will draft official request to EOC and request rapid response. Apr 25: has been submitted to EOC. Awaiting response/guidelines.	In Progress



NSHA Incident Management System

5	2020-04-20	0945h	OHSW & People	Work to improve coordination of available and secured staffing resources: Nursing, Support, Medical Students.	Caroline Campbell, Randi Munroe, Jill Flinn	High	<p>April 20: Situation improved but still several gaps. April 21: Upwards of 100 people deployed. Staffing process continues to require review. Vulnerable levels for this evening. Team meeting at 1100h to assess and problem solve. DHW representative to join 1100h meeting as well. April 22 @ 1630h: Much progress made today. Process also in place to provide virtual orientation to those onboarding. Apr 23: Staffing levels good for this evening. Discussion re working towards quantifying levels. Progress continues to be made with scheduling. Josie to send critical levels to Randi and Jill. Analytics support available if required. Apr 24: Streamlining process has improved. Staffing ok so far for today, depending on number of sick calls received. Expecting to bring in external hires next week. NS Hearing & Speech volunteer list expected soon. Office of immigration now allowing international students to work full time. Working with STFX nursing program for new hires. Apr 25: much work continues on staffing plans. Josh from NSHA to work with new staff coming on board to help orientate. Tip sheets and mini roll descriptions being developed for new staff. IWK offered to collaborate with NW to support onboarding of IWK staff at the site</p>	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	<p>Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify. April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria. Apr 23: Continuing to swab staff today. MOH confirmed ok to include NSHA staff. Josie awaiting call from CZ OHSW (A. Keenan). Apr 24: Swabbing continued yesterday, including some NSHA staff. 234 residents and 284 staff swabbed to date. Notified of 7 positive staff so far today. Process in place to crosscheck positive staff with upcoming schedules to close that gap. Apr 25: All staff have been swabbed. Some areas may need to be reswabbed next week, Josie to check in with MOH. NSHA looking for 2 nurses to assist with swabbing Monday, Tues and Thurs.</p>	In Progress



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17	2020-04-23	1645h	OHSW & People	DHW sourcing of external resources for available deployment	Cindy Cruikshank	Moderate	<p>April 23: Sourcing human resources from HRCE and NS Hearing and Speech.</p> <p>Apr 24: no update today</p> <p>Apr 25: DHW reaching out to home support agencies for support, any identified staff will be sent directly to NW. Allied health professionals also being contacted to request volunteers. Publically funded Hearing & Speech practitioners are being deployed by CZ deployment centres. Question around privately funded SLP, and how they would be paid. Cindy to follow up.</p>	In Progress
	2020-04-24	0945h	OHSW & People	Review weekend staffing today		High	<p>Apr 24: Weekend staffing to be reviewed this morning. Will provide report at 1630h call today</p> <p>Apr 25: Staffing still an issue for the weekend. Current gap of 6 staff for tonight and 10 for tomorrow. NW, NSHA & IWK continue to work collaboratively to identify staff who can be deployed.</p>	In Progress
	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Whynot	Moderate	<p>Apr 25: Need to work on getting staff back who are eligible for work isolation. Caroline to reach out to Barbara at IWK for assistance with this.</p>	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	<p>Apr 23: Josie and Barry working through this.</p> <p>Apr 24: Work is underway, continuing to refine processes.</p> <p>Apr 25: working with clinical leaders and physicians. Process is being refined.</p>	In Progress
10	2020-04-21	1630h	Operations	Resident swabbing	Randi Munroe and Josie Ryan	Moderate	<p>April 21: Swabbing team going well. Will assess if additional staff needed.</p> <p>April 22: continues to go well. Additional staff on site today.</p> <p>Apr 23: 30 new cases including 8 residents, 14 staff. Most are asymptomatic. Swabbing team on site tomorrow. Will assess need for additional swabbing.</p> <p>Apr 24: 234 residents swabbed since Monday. 169 residents positive</p> <p>Apr 25: Josie checking with MOH for recommendation around reswabbing of floors.</p>	In Progress
	2020-04-25	1400h	Operations	Tracking Covid results for Staff	Caroline/Josie	Low	<p>Apr 25: Excel spreadsheet being used for tracking covid results for staff. May need to find a better system to track. NW to reach out to NSHA analytics, if assistance required.</p>	In Progress



NSHA Incident Management System

6	2020-04-20	0945h	Resident Families	Secure staffing resources for contacting resident families	Wendy McVeigh	Moderate	<p>April 22 @ 0945h: Continuing Care completed 18 calls Monday went well- generated process questions which we sorted and had general orientation with all 36 callers yesterday with Linda Verlinden participating. Today will have training on Point Click Care (NW Electronic Records) for CC's only who are RN's and they will be starting calls today for COVID positive families. Apr 23: currently have 35 callers who have been oriented, including Care Coordinators from across the province. Callers started yesterday. Will have report by end of day with how many people have been contacted. Apr 24: 175 calls made by NSHA group in last 2 days. All are assigned, continuing to work through list. NW reviewing processes for internal and external teams. Will bring groups together Monday to discuss. Apr 25: staff is making calls today for covid positive residents. NOK or substitute decision maker being contacted.</p>	In Progress
13	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	<p>Program reviewed and revised. Will initiate small pilot.</p> <p>Apr 23: have proposal on how this may move forward. Current priority is to focus on process for compassionate visitation.</p> <p>Apr 24: no additional information today.</p> <p>Apr 25: still focusing on compassionate care for now, this needs to happen first and will help to ready for Care by Family.</p>	In Progress
1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	<p>April 22 @ 0945h: Analytics dashboard sent to B. Clark. Request for analytics assistant. T. Howlett to follow-up.</p> <p>April 22 @ 1645h: Dashboard to be shared with Josie and Janet (Matt and Margaret). Working with vendor to develop a custom screen for extraction of required data elements.</p> <p>Apr 23: Matt to connect with Jennifer Tucker to review nursing flow process re EMR. Option available from vendor re aggregate level dashboard (Janet to follow-up).</p> <p>Apr 24: Matt waiting on decision from NW about new charting process. Janet confirmed decision to Matt by noon</p>	Complete



NSHA Incident Management System

							Apr 25: New assessment screen has been approved for use, ready to proceed with dashboard.	
14	2020-04-21	1630h	Communications	Response to NSGEU Media Release	Communication Team	High	<p>Comms team sending official statement in response to media release</p> <p>Apr 23: statement drafted by Karen and sent out. Janet did Information Morning today. FAQ has been updated on website. FAQ for call in questions has been updated. Planning for online press conference tomorrow with Janet, Josie and Vickie.</p> <p>Communications to begin incorporating messaging to address belief that all cases were contracted at work.</p> <p>Apr 24: focus today will be press conference. Response to NSGEU went out. Working on website updates and monitoring social media.</p> <p>Apr 25: some comments from media that families aren't getting updates, these people are not NOK and therefore would not be eligible to get this information. FAQ to be updated to reflect this as a reminder.</p>	Complete
	2020-04-24	1630h	Communications	Communication regarding media at NW site	Karen and Adele	Moderate	<p>Apr 24: Reporters lurking in front of NW building questioning covid status of bodies as they are being removed. Karen will reach out to Adele at DHW Communications for assistance for messaging to address this issue. Apr 25: Follow up has been completed. Standard response has been developed.</p>	Complete



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9	2020-04-21	0945h	IPAC	Reviewing and revising multiple processes.	Patsy Rawding and IPAC team	Moderate	<p>April 21: IPAC team onsite and working with staff re process improvements. Going well.</p> <p>Apr 23: Significant progress. Will be ongoing. Noting issue as complete and will continue to monitor.</p>	Complete
7	2020-04-21	0945h	Medical	Charting process - hotel - Blue Team	Barry Clarke	Moderate	<p>April 21: Meeting scheduled on site at 0700h April 22.</p> <p>April 22: Meeting held and went well with providers. Able to utilize physicians who are familiar with residents for care.</p> <p>Apr 23: Blue team will be starting at COVID restorative hotel. Charting access in place for those working at hotel.</p>	Complete
2	2020-04-20	0945h	Medical	Confirm physician scheduling and shifts.	Barry Clarke	High	<p>April 22: Coverage model in place. Continuity of care processes in place. Utilizing physicians who are familiar with residents.</p> <p>Exploring job description for LPN to deploy medical students (T. Howlett)</p> <p>Apr 23: Physicians starting on-call tomorrow.</p> <p>Apr 24: update will be provided on afternoon call</p> <p>Apr 25: Work continues. Dr Clark is onsite, and Blue Group on call. Maria working on one student to be deployed. Process now established.</p>	Complete
3	2020-04-20	0945h	Medical	Develop plan for restorative care processes	Barry Clarke and Maria	Moderate	<p>Apr 23: work in progress for restorative care process</p> <p>Apr 24: update will be provided on afternoon call</p> <p>Apr 25: process has been established.</p>	Complete
10	2020-04-21	1630h	OHSW & People	Critical staffing levels for evening of April 21. Group convening to address.		High	<p>April 21: Contingency planning in place for evening shift.</p>	Complete



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11	2020-04-22	1630h	OHSW & People	List of employees currently off work	Alex and Caroline	Moderate	<p>Caroline to provide list to Alex</p> <p>Apr 23: List has been provided to Alex. Plan is to work through list and make calls today</p> <p>Apr 24: second list of staff received by DHW this morning, working through that now. Approximately 50 staff on various leaves of absence.</p> <p>Apr 25: all calls have been completed.</p>	Complete
15	2020-04-23	0945h	Operations	Offsite security		Moderate	<p>Apr 23: have been in contact with security company, hoping to have 24/7 security in place by tonight</p> <p>Apr 24: established as of 5pm last evening</p>	Complete



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-26
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1400h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: One check in meeting held today at 1400h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda	
1. Medical	<ul style="list-style-type: none"> a. Regrouped and have developed a new operating plan. Manor, Centre, Hotel are linked however can consolidate Centre as best they can, keeping positive and negative patients separate. Keeping staff separated too as much as possible. Trying to use physical structures to advantage. Hope is that it will make a difference in next 2 weeks.
2. Operations/Staffing	<ul style="list-style-type: none"> a. Staffing for today is really good. Managers were deployed to do med pass, as were short 3 RNs b. Two more positive staff today - 1 housekeeping, 1 CCA – total 75 staff positive now c. Need 1 LPN and 10 CCAs for tonight. Also short facility supervisor for tonight – this is a priority and will be covered. d. Will have to offer OT to cover tonight. NSHA has LPNs or RNs who can work OT. Also, will connect with staff already on site about extending their shifts to cover gaps. Lots of new hires tomorrow and Tuesday. e. SLPs coming in to help with communication with families, meals and hydration – 1 coming tomorrow, 2 more on the way. f. Need for housekeeping staff – 7 being trained Monday at NSHA, hoping they will be deployed Tues/Weds.



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<p>g. IWK has 5 or 6 RNs who can help out</p> <p>h. NSHA has 3 medical students to hire in – job description hasn't been developed. Maria will engage others to develop and will connect with Randi and Jill to do hires.</p> <p>i. Have learned that there may be an RN working in both Covid ward at DGH and at NW. Caroline Randi and Jill will connect offline about this as a potential resource.</p> <p>j. Staff required for swabbing. Exploring possibility of SLPs and/or medical students filling this role.</p> <p>3. Communications - Families questioning why military is not being called in to assist. Communications team to develop messaging and FAQ.</p> <p>4. Logistics (Supplies, PPE, Equipment, Finance) - Still have supplies. Will reach out it start to see a decline.</p> <p>5. Offsite Location - Two residents moving today, for a total of five. Two more moving tomorrow, and hoping for steady stream the rest of the week. Staffing is solid, have had help from a couple of home support agencies.</p> <p>6. Risks/Open items – Check-in completed for all open tasks. See incident board for updates</p>
<p>OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)</p> <ul style="list-style-type: none"> • Meetings will continue this week Monday-Friday at 0945h and 1630h via teleconference. • Team activities and priorities noted on attached Incident/Event Board (following pages). There are 20 items remaining open; 10 items closed.



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	<p>Apr 23: Josie and Barry working through this.</p> <p>Apr 24: Work is underway, continuing to refine processes.</p> <p>Apr 25: working with clinical leaders and physicians. Process is being refined.</p> <p>Apr 26: no update today</p>	In Progress
5	2020-04-20	0945h	OHSW & People	Work to improve coordination of available and secured staffing resources: Nursing, Support, Medical Students.	Caroline Campbell, Randi Munroe, Jill Flinn	High	<p>April 20: Situation improved but still several gaps.</p> <p>April 21: Upwards of 100 people deployed. Staffing process continues to require review. Vulnerable levels for this evening. Team meeting at 1100h to assess and problem solve. DHW representative to join 1100h meeting as well.</p> <p>April 22 @ 1630h: Much progress made today. Process also in place to provide virtual orientation to those onboarding.</p> <p>Apr 23: Staffing levels good for this evening. Discussion re working towards quantifying levels. Progress continues to be made with scheduling. Josie to send critical levels to Randi and Jill. Analytics support available if required.</p> <p>Apr 24: Streamlining process has improved. Staffing ok so far for today, depending on number of sick calls received. Expecting to bring in external hires next week. NS Hearing & Speech volunteer list expected soon. Office of immigration now allowing international students to work full time. Working with STFX nursing program for new hires.</p> <p>Apr 25: much work continues on staffing plans. Josh from NNSA to work with new staff coming on board to help orientate. Tip sheets and mini roll descriptions being developed for new staff. IWK offered to collaborate with NW to support onboarding of IWK staff at the site</p> <p>Apr 26: work continues on staffing. NSHA has RNs, LPNs, CCAs, medical students being onboarded, NW has recruited 20 new staff. SLPs coming in to assist.</p>	In Progress



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6	2020-04-20	0945h	Resident Families	Secure staffing resources for contacting resident families	Wendy McVeigh	Moderate	<p>April 22 @ 0945h: Continuing Care completed 18 calls Monday went well- generated process questions which we sorted and had general orientation with all 36 callers yesterday with Linda Verlinden participating. Today will have training on Point Click Care (NW Electronic Records) for CC's only who are RN's and they will be starting calls today for COVID positive families.</p> <p>Apr 23: currently have 35 callers who have been oriented, including Care Coordinators from across the province. Callers started yesterday. Will have report by end of day with how many people have been contacted.</p> <p>Apr 24: 175 calls made by NSHA group in last 2 days. All are assigned, continuing to work through list. NW reviewing processes for internal and external teams. Will bring groups together Monday to discuss.</p> <p>Apr 25: staff is making calls today for covid positive residents. NOK or substitute decision maker being contacted.</p> <p>Apr 26: SLPs may assist with this on go-forward basis once on site/units.</p>	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	<p>Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify.</p> <p>April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria</p> <p>Apr 23: Continuing to swab staff today. MOH confirmed ok to include NSHA staff. Josie awaiting call from CZ OHSW (A. Keenan).</p> <p>Apr 24: Swabbing continued yesterday, including some NSHA staff. 234 residents and 284 staff swabbed to date. Notified of 7 positive staff so far today. Process in place to crosscheck positive staff with upcoming schedules to close that gap.</p> <p>Apr 25: All staff have been swabbed. Some areas may need to be reswabbed next week, Josie to check in with MOH. NSHA looking for 2 nurses to assist with swabbing Monday, Tues and Thurs.</p> <p>Apr 26: Josie following up with MOH tomorrow for plans for further swabbing.</p>	In Progress



NSHA Incident Management System

11	2020-04-21	1630h	Operations	Resident swabbing	Randi Munroe and Josie Ryan	Moderate	<p>April 21: Swabbing team going well. Will assess if additional staff needed.</p> <p>April 22: continues to go well. Additional staff on site today.</p> <p>Apr 23: 30 new cases including 8 residents, 14 staff. Most are asymptomatic. Swabbing team on site tomorrow. Will assess need for additional swabbing.</p> <p>Apr 24: 234 residents swabbed since Monday. 169 residents positive</p> <p>Apr 25: Josie checking with MOH for recommendation around reswabbing of floors.</p> <p>Apr 26: waiting on recommendation from MOH. Resources for swabbing to be assessed following clarification from MOH re next steps</p>	In Progress
13	2020-04-22	1630h	IPAC	Develop process for reviewing IPAC procedures for employee group most affected with positive cases (CCA)	Tammy and Patsy	Moderate	<p>Apr 23: Continuing to work on IPAC processes and procedures. Focusing on education. Identifying strategies for targeted education.</p> <p>Apr 24: continuing to work on processes and education</p> <p>Apr 25: work continues with education and developing processes.</p> <p>Apr 26: following up with MOH tomorrow for plans for further swabbing.</p>	In Progress
14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	<p>Program reviewed and revised. Will initiate small pilot.</p> <p>Apr 23: have proposal on how this may move forward. Current priority is to focus on process for compassionate visitation.</p> <p>Apr 24: no additional information today.</p> <p>Apr 25: still focusing on compassionate care for now, this needs to happen first and will help to ready for Care by Family.</p> <p>Apr 26: planning for reboot on Tuesday.</p>	In Progress



NSHA Incident Management System

17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	<p>Apr 23: question from DHW if paramedics are still required to assist with rounding. Still needed. May need to increase based on number of new cases.</p> <p>Apr 24: Still needed at this time</p> <p>Apr 25: Still needed at this time. 177 current cases, although some residents who are improving may not need. IPAC working with EHS around PPE use.</p> <p>Apr 26: still required at this time. Will continue to check in every day on this item. Josie will advise if no longer needed</p>	In Progress
19	2020-04-23	1645h	OHSW & People	DHW sourcing of external resources for available deployment	Cindy Cruikshank	Moderate	<p>Apr 23: Sourcing human resources from HRCE and NS Hearing and Speech.</p> <p>Apr 24: no update today</p> <p>Apr 25: DHW reaching out to home support agencies for support, any identified staff will be sent directly to NW. Allied health professionals also being contacted to request volunteers. Publically funded Hearing & Speech practitioners are being deployed by CZ deployment centres. Question around privately funded SLP, and how they would be paid. Cindy to follow up.</p> <p>Apr 26: DHW has identified a number of SLP, who have been referred through to CZ deployment</p>	In Progress
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	<p>Apr 24: Trying to minimize non-covid staff going into work in covid areas, need guidelines from IPAC. Vickie and Randi will draft official request to EOC and request rapid response.</p> <p>Apr 25: has been submitted to EOC. Awaiting response/guidelines.</p> <p>Apr 26: plans for cohorting staff. Ideas for signage etc. NSHA and NW to be aligned in approach</p>	In Progress
21	2020-04-24	0945h	OHSW & People	Review weekend staffing today		High	<p>Apr 24: Weekend staffing to be reviewed this morning. Will provide report at 1630h call today</p> <p>Apr 25: Staffing still an issue for the weekend. Current gap or 6 staff for tonight and 10 for tomorrow. NW, NSHA & IWK continue to work collaboratively to identify staff who can be deployed.</p> <p>Apr 26: staffing levels good for today. Need one LPN, ten CCAs, and one supervisor for tonight. Work will continue throughout the day to fill these gaps</p>	In Progress



NSHA Incident Management System

22	2020-04-25	1400h	Communications	Communication around restorative unit patient protocols	Josie/Shelly McNeil	Moderate	Apr 25: questions coming from unions about positive covid case being transferred to restorative unit. Cindy to assist with communication that this only happens in patients where the virus is non-transmissible. Apr 26: no update today	In Progress
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	Apr 25: Demand continues to grow for FaceTime with families. Having professional staff to assist would be helpful. Randi will work tomorrow on identifying staff on CZ deployment list who could assist with this. Apr 26: bringing in SLPs both public and private who can do this work	In Progress
24	2020-04-25	1400h	Communications	Calls to families	Communication Team	Low	Apr 25: FAQ to be updated to reflect NOK and SDM will receive patient update calls Apr 26: no update today	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Whynot	Moderate	Apr 25: Need to work on getting staff back who are eligible for work isolation. Caroline to reach out to Barbara at IWK for assistance with this. Apr 26: Completed. Some RNs returning tomorrow. Will ask Shelley James for numbers of how many were called and how many are coming back. Report to be provided tomorrow.	In Progress
26	2020-04-25	1400h	Operations	Tracking Covid results for Staff	Caroline/Josie	Low	Apr 25: Excel spreadsheet being used for tracking covid results for staff. May need to find a better system to track. NW to reach out to NSHA analytics, if assistance required. Apr 26: no update today	In Progress
27	2020-04-26	1400h	Medical	Job description for medical students	Maria	Moderate	Apr 26: Maria to work on developing job description for medical students. Will connect engage with others as required to develop and will connect with Randi and Jill for hiring process	In Progress
28	2020-04-26	1400h	Communications	Military for assistance	Communication Team	Moderate	Apr 26: Families are seeing Military being brought in to assist in other provinces. Questioning why this isn't happening at NW. Communications team to develop messaging and FAQ around this issue.	In Progress
29	2020-04-26	1400h	Medical	Patient transfers between buildings	Dr Clarke	High	Apr 26: Trying to use physical structures as an advantage to keep patients separated, ie no more Manor/Centre connection. Keep positive and negative patients separate. Keeping staff separated in these areas as much as possible as well	In Progress



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30	2020-04-26	1400h	Incident Team	Structure and Process for Incident Management Team	Angela	Moderate	Apr 26: Team to continue with twice daily meetings. Will continue to assess process and structure	In Progress
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NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-27
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945 - 1630h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
<p>Purpose: Two check-in meetings held today at 0945h and 1630h. Participants included representatives from NSHA, Northwood, DHW and IWK</p> <p>Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team</p>			

Agenda
<p>1. Medical</p> <ul style="list-style-type: none"> a. One new Covid positive resident, for a total of 179 b. NSHA Analytics continues to work on dashboard. New assessment screen has been activated. Vendor working on a couple of issues. Matt hopes to have resolved by tomorrow. There is a need for administrative or clinical staff to do data entry to support use of dashboard. Could possibly come from CZ deployment centre. Matt will connect with Josie and Dr Clark to discuss. <p>2. Operations/Staffing</p> <ul style="list-style-type: none"> a. Completely covered for staff on all floors for day shift today. Short LPNs for feeding time 3-7, also short CCAs for evening. Need 9 CCAs and 1RN for tonight. Good for LPNs and RNs overnight. Generally staffing is good right now. b. No swabbing team today. Tuesday and Thursday staff swabbing clinics will be covered by NSHA. c. Awaiting approval of training process and documentation for Medical Students and SLPs who can be deployed to do swabbing. d. No new positive staff today. Total remains at 71. Of the 71 positive staff, 13 have returned to work. 43 have earliest return to work dates this week. Will reach out to each of them to ensure they are asymptomatic and can return to work



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<ul style="list-style-type: none"> e. Cindy from DHW provided clarification that SLPs from private practice would need to be hired by NW directly, others will go through CZ deployment centre. f. NSHA continuing to work on hiring med students. Have approval to have allied health professionals do swabbing. Hope to have ready by Wednesday g. Waiting on housekeeping staff coming from NSHA – in NSHA orientation today <p>3. Communications</p> <ul style="list-style-type: none"> a. Working on responding to any outstanding family emails today b. NSGEU raised concerns around disposal of garbage – Communication has been developed and will be added to FAQ. c. Q&A updated today and responded to questions from social media <p>4. Logistics (Supplies, PPE, Equipment, Finance) – experiencing issues with disposable shoe cover supply. Steve NW and Patsy NSHA will connect to resolve this issue.</p> <p>5. Offsite Location – Two residents to be transferred to hotel today. Two that were transferred yesterday settled in nicely. 4 residents to be transferred to recovery unit tomorrow instead of 2.</p> <p>6. Risks/Open items – Check-in completed for all open tasks. See incident board for updates</p>
<p>OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)</p> <ul style="list-style-type: none"> • Meetings will continue this week Monday-Friday at 0945h and 1630h via teleconference. • Team activities and priorities noted on attached Incident/Event Board (following pages). There are 18 items remaining open; 14 items closed.



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	<p>April 22 @ 0945h: Analytics dashboard sent to B. Clark. Request for analytics assistant. T. Howlett to follow-up.</p> <p>April 22 @ 1645h: Dashboard to be shared with Josie and Janet (Matt and Margaret). Working with vendor to develop a custom screen for extraction of required data elements.</p> <p>Apr 23: Matt to connect with Jennifer Tucker to review nursing flow process re EMR. Option available from vendor re aggregate level dashboard (Janet to follow-up).</p> <p>Apr 24: Matt waiting on decision from NW about new charting process. Janet confirmed decision to Matt by noon</p> <p>Apr 25: New assessment screen has been approved for use, ready to proceed with dashboard.</p> <p>Apr 27: new assessment screen activated. Vendor is working out some issues. Matt expects to hear from them tomorrow. Josie, Dr Clark and matt will connect</p>	In Progress
31	2020-04-27	1630h	Analytics	Support required for data entry for Dashboard	Matt Murphy/Josie/Dr Clark	Moderate	<p>Apr 27: staff needed for data entry to support new dashboard. Could possibly draw on administrative or clinical staff from CZ deployment. Angela to confirm with T. Howlett if this resource has been sourced (as per item#1). If not, Matt will connect with Josie and Dr Clark. Resource needed to ensure data provides support for real-time decision making</p>	In Progress
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	<p>Apr 25: Demand continues to grow for FaceTime with families. Having professional staff to assist would be helpful. Randi will work tomorrow on identifying staff on CZ deployment list who could assist with this.</p> <p>Apr 26: bringing in SLPs both public and private who can do this work</p> <p>Apr 27: have messaging developed. Happening on limited basis at the moment. Can increase when SLPs come on board.</p>	In Progress



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
24	2020-04-25	1400h	Communications	Calls to families	Communication Team		<p>Apr 25: FAQ to be updated to reflect NOK and SDM will receive patient update calls</p> <p>Apr 26: no update today</p> <p>Apr 27: made 320 calls last week. Progressing well, meeting with callers today to make sure they are no outstanding issues.</p>	In Progress
32	2020-04-27	1630h	Communications	Aligning data with DHW	Communication Team	Moderate	<p>Apr 27: number of positive cases being reported does not match the province's numbers. Working through aligning data and developing messaging re same.</p>	In Progress
17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	<p>Apr 23: question from DHW if paramedics are still required to assist with rounding. Still needed. May need to increase based on number of new cases.</p> <p>Apr 24: Still needed at this time</p> <p>Apr 25: Still needed at this time. 177 current cases, although some residents who are improving may not need. IPAC working with EHS around PPE use.</p> <p>Apr 26: still required at this time. Will continue to check in every day on this item. Josie will advise if no longer needed</p> <p>Apr 27: Paramedics still required. Currently 200 cases of positive residents. 25% of them would be considered recovered</p>	In Progress
30	2020-04-26	1400h	Incident Team	Structure and Process for Incident Management Team	Angela	Moderate	<p>Apr 26: Team to continue with twice daily meetings. Will continue to assess process and structure</p> <p>Apr 27: Angela will connect with Vickie, Josie and Janet to develop go forward plan</p>	In Progress



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	<p>Apr 24: Trying to minimize non-covid staff going into work in covid areas, need guidelines from IPAC. Vickie and Randi will draft official request to EOC and request rapid response.</p> <p>Apr 25: has been submitted to EOC. Awaiting response/guidelines.</p> <p>Apr 26: plans for cohorting staff. Ideas for signage etc. NSHA and NW to be aligned in approach</p> <p>Apr 27: Josie and Randi met today. Have plan in place. Work is ongoing</p>	In Progress
27	2020-04-26	1400h	Medical	Job description for medical students	Maria	Moderate	<p>Apr 26: Maria to work on developing job description for medical students. Will connect engage with others as required to develop and will connect with Randi and Jill for hiring process</p> <p>Apr 27: job descriptions are being worked on</p>	In Progress
29	2020-04-26	1400h	Medical	Patient transfers between buildings	Dr Clarke	High	<p>Apr 26: Trying to use physical structures as an advantage to keep patients separated, i.e. no more Manor/Centre connection. Keep positive and negative patients separate. Keeping staff separated in these areas as much as possible as well</p> <p>Apr 27: have engaged with MOH to discuss details. Have swabbing and staffing strategies to support</p>	In Progress



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
5	2020-04-20	0945h	OHSW & People	Work to improve coordination of available and secured staffing resources: Nursing, Support, Medical Students.	Caroline Campbell, Randi Munroe, Jill Flinn	High	<p>April 20: Situation improved but still several gaps.</p> <p>April 21: Upwards of 100 people deployed. Staffing process continues to require review. Vulnerable levels for this evening. Team meeting at 1100h to assess and problem solve. DHW representative to join 1100h meeting as well.</p> <p>April 22 @ 1630h: Much progress made today. Process also in place to provide virtual orientation to those onboarding.</p> <p>Apr 23: Staffing levels good for this evening. Discussion re working towards quantifying levels. Progress continues to be made with scheduling. Josie to send critical levels to Randi and Jill. Analytics support available if required.</p> <p>Apr 24: Streamlining process has improved. Staffing ok so far for today, depending on number of sick calls received. Expecting to bring in external hires next week. NS Hearing & Speech volunteer list expected soon. Office of immigration now allowing international students to work full time. Working with STFX nursing program for new hires.</p> <p>Apr 25: much work continues on staffing plans. Josh from NHSA to work with new staff coming on board to help orientate. Tip sheets and mini roll descriptions being developed for new staff. IWK offered to collaborate with NW to support onboarding of IWK staff at the site</p> <p>Apr 26: work continues on staffing. NSHA has RNs, LPNs, CCAs, medical students being onboarded, NW has recruited 20 new staff. SLPs coming in to assist.</p> <p>Apr 27: Several initiatives in place and embedded within additional event board items (e.g. #19, 25, #27, etc.). Will assess status tomorrow.re closing this item.</p>	In Progress



NSHA Incident Management System

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8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	<p>Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify.</p> <p>April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria</p> <p>Apr 23: Continuing to swab staff today. MOH confirmed ok to include NSHA staff. Josie awaiting call from CZ OHSW (A. Keenan).</p> <p>Apr 24: Swabbing continued yesterday, including some NSHA staff. 234 residents and 284 staff swabbed to date. Notified of 7 positive staff so far today. Process in place to crosscheck positive staff with upcoming schedules to close that gap.</p> <p>Apr 25: All staff have been swabbed. Some areas may need to be reswabbed next week, Josie to check in with MOH. NSHA looking for 2 nurses to assist with swabbing Monday, Tues and Thurs.</p> <p>Apr 26: Josie following up with MOH tomorrow for plans for further swabbing.</p> <p>Apr 27: Tuesday & Thursday clinics will be covered. Working on getting process in place to train med students and SLPs to swab. IWK has a guideline for non-clinical staff to do swabbing. Shared those guidelines, and can assist with training. Todd/Annette/Josie working on this</p>	In Progress



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
19	2020-04-23	1645h	OHSW & People	DHW sourcing of external resources for available deployment	Cindy Cruikshank	Moderate	<p>April 23: Sourcing human resources from HRCE and NS Hearing and Speech.</p> <p>Apr 24: no update today</p> <p>Apr 25: DHW reaching out to home support agencies for support, any identified staff will be sent directly to NW. Allied health professionals also being contacted to request volunteers. Publically funded Hearing & Speech practitioners are being deployed by CZ deployment centres. Question around privately funded SLP, and how they would be paid. Cindy to follow up.</p> <p>Apr 26: DHW has identified a number of SLP, who have been referred through to CZ deployment</p> <p>Apr 27: waiting for training to be complete. Internal pilot with NSHA tomorrow re training allied health professionals for swabbing.</p>	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Whynot	Moderate	<p>Apr 25: Need to work on getting staff back who are eligible for work isolation. Caroline to reach out to Barbara at IWK for assistance with this.</p> <p>Apr 26: Completed. Some RNs returning tomorrow. Will ask Shelley James for numbers of how many were called and how many are coming back. Report to be provided tomorrow.</p> <p>Apr 27: Of the 71 positive staff, 13 have returned to work. 43 have earliest return to work this week. Will reach out to each of them to ensure they are asymptomatic so that they can return.</p>	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	<p>Apr 23: Josie and Barry working through this.</p> <p>Apr 24: Work is underway, continuing to refine processes.</p> <p>Apr 25: working with clinical leaders and physicians. Process is being refined.</p> <p>Apr 26: no update today</p> <p>Apr 27: looking at tools. Josie to connect with Barry.</p>	In Progress



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
11	2020-04-21	1630h	Operations	Resident swabbing	Randi Munroe and Josie Ryan	Moderate	<p>April 21: Swabbing team going well. Will assess if additional staff needed.</p> <p>April 22: continues to go well. Additional staff on site today.</p> <p>Apr 23: 30 new cases including 8 residents, 14 staff. Most are asymptomatic. Swabbing team on site tomorrow. Will assess need for additional swabbing.</p> <p>Apr 24: 234 residents swabbed since Monday. 169 residents positive</p> <p>Apr 25: Josie checking with MOH for recommendation around reswabbing of floors.</p> <p>Apr 26: waiting on recommendation from MOH. Resources for swabbing to be assessed following clarification from MOH re next steps.</p> <p>Apr 27: Medical students and SLP being onboarded who can do swabbing however will need training</p>	In Progress
26	2020-04-25	1400h	Operations	Tracking Covid results for Staff	Caroline/Josie		<p>Apr 25: Excel spreadsheet being used for tracking covid results for staff. May need to find a better system to track. NW to reach out to NSHA analytics, if assistance required.</p> <p>Apr 26: no update today</p> <p>Apr 27: spreadsheet has been completed. Will assess status re "closing" task tomorrow.</p>	In Progress
14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	<p>Program reviewed and revised. Will initiate small pilot.</p> <p>Apr 23: have proposal on how this may move forward. Current priority is to focus on process for compassionate visitation.</p> <p>Apr 24: no additional information today.</p> <p>Apr 25: still focusing on compassionate care for now, this needs to happen first and will help to ready for Care by Family.</p> <p>Apr 26: planning for reboot on Tuesday.</p> <p>Apr 27: training scheduled for first volunteer tomorrow, first shift will be Wednesday</p>	In Progress



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-28
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	0945 - 1630h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: Two check-in meetings held today at 0945h and 1630h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda
<p>1. Medical</p> <ul style="list-style-type: none"> a. 208 residents positive, over 1100 swabbed since last Monday. Swabbing strategy in place as recommended by MOH. b. 150 residents expected to meet criteria for recovered, as defined by MOH, by end of week c. Swabbing 2 more floors today in Centre, and will move positives off these floors. Have started cohorting residents. Working on keeping staff segregated in Manor as much as possible. d. Planning for recovery floor on 1 Centre. Need for private rooms in Centre, as preparation for second wave e. Hotel should be at capacity by next Monday. <p>2. Operations/Staffing</p> <ul style="list-style-type: none"> a. Staffing in place for today and tonight. Have some CCA shortages, but this is being managed. b. Staff swabbing continued today. So far 8 staff are recovered and have returned. 40 scheduled to return this week c. NSHA continuing with hires. Housekeepers starting training tomorrow and will be ready for schedules on Friday.



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d. Cindy from DHW has confirmed that LTC aides can now do personal care and will be classified as PCWs.

3. Communications

- a. Working on preparing for press conference for tomorrow with Janet, Josie and Vickie
- b. Continuing to reply to email messages and social media.
- c. Letter for MLAs around Homecare approved and ready to go.
- d. Updated staff messaging on hub
- e. FAQ has been updated

4. **Logistics (Supplies, PPE, Equipment, Finance)** – no update today

5. **Offsite Location** – 10 residents now at hotel. Three more scheduled to be transferred tomorrow.

6. **Risks/Open items** – Check-in completed for all open tasks. See incident board for updates

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Meetings will continue this week Monday-Friday at 0945h and 1630h via teleconference.
- Team activities and priorities noted on attached Incident/Event Board (following pages). There are 15 items remaining open; 18 items closed.



NSHA Incident Management System

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	<p>April 22 @ 0945h: Analytics dashboard sent to B. Clark. Request for analytics assistant. T. Howlett to follow-up.</p> <p>April 22 @ 1645h: Dashboard to be shared with Josie and Janet (Matt and Margaret). Working with vendor to develop a custom screen for extraction of required data elements.</p> <p>Apr 23: Matt to connect with Jennifer Tucker to review nursing flow process re EMR. Option available from vendor re aggregate level dashboard (Janet to follow-up).</p> <p>Apr 24: Matt waiting on decision from NW about new charting process. Janet confirmed decision to Matt by noon</p> <p>Apr 25: New assessment screen has been approved for use, ready to proceed with dashboard.</p> <p>Apr 27: new assessment screen activated. Vendor is working out some issues. Matt expects to hear from them tomorrow. Josie, Dr Clark and matt will connect</p> <p>Apr 28: Matt working with NW and vendor on permissions. Continuing with process to launch dashboard</p>	In Progress
31	2020-04-27	1630h	Analytics	Support required for data entry for Dashboard	Matt Murphy/Josie/Dr Clark	Moderate	<p>Apr 27: staff needed for data entry to support new dashboard. Could possibly draw on administrative or clinical staff from CZ deployment. Angela to confirm with T. Howlett if this resource has been sourced (as per item#1). If not, Matt will connect with Josie and Dr Clark. Resource needed to ensure data provides support for real-time decision making.</p> <p>Apr 28: Janet to follow up with Barry regarding required resources for both clinical/vitals and for data entry.</p>	In Progress



NSHA Incident Management System

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23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	<p>Apr 25: Demand continues to grow for FaceTime with families. Having professional staff to assist would be helpful. Randi will work tomorrow on identifying staff on CZ deployment list who could assist with this.</p> <p>Apr 26: bringing in SLPs both public and private who can do this work</p> <p>Apr 27: have messaging developed. Happening on limited basis at the moment. Can increase when SLPs come on board.</p> <p>Apr 28: starting to get SLPs onboarded, and ipads are being distributed.</p>	In Progress
24	2020-04-25	1400h	Communications	Calls to families	Communication Team	Low	<p>Apr 25: FAQ to be updated to reflect NOK and SDM will receive patient update calls</p> <p>Apr 26: no update today</p> <p>Apr 27: made 320 calls last week. Progressing well, meeting with callers today to make sure they are no outstanding issues.</p> <p>Apr 28: Process ongoing. Also now calling families for recovery unit</p>	In Progress
32	2020-04-27	1630h	Communications	Aligning data with DHW	Communication Team	Moderate	<p>Apr 27: number of positive cases being reported does not match the province's numbers. Working through aligning data and developing messaging re same.</p> <p>Apr 28: adding language to website to explain difference in reporting is due to different points of time for reporting.</p>	In Progress



NSHA Incident Management System

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17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	<p>Apr 23: question from DHW if paramedics are still required to assist with rounding. Still needed. May need to increase based on number of new cases.</p> <p>Apr 24: Still needed at this time</p> <p>Apr 25: Still needed at this time. 177 current cases, although some residents who are improving may not need. IPAC working with EHS around PPE use.</p> <p>Apr 26: still required at this time. Will continue to check in every day on this item. Josie will advise if no longer needed</p> <p>Apr 27: Paramedics still required. Currently 200 cases of positive residents. 25% of them would be considered recovered</p> <p>Apr 28: still required. Will reassess once med students are onboarded. Continue to monitor</p>	In Progress
30	2020-04-26	1400h	Incident Team	Structure and Process for Incident Management Team	Angela	Moderate	<p>Apr 26: Team to continue with twice daily meetings. Will continue to assess process and structure</p> <p>Apr 27: Angela will connect with Vickie, Josie and Janet to develop go forward plan</p> <p>Apr 28: Angela to follow up today. Meeting scheduled for April 29.</p>	In Progress
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	<p>Apr 24: Trying to minimize non-covid staff going into work in covid areas, need guidelines from IPAC. Vickie and Randi will draft official request to EOC and request rapid response.</p> <p>Apr 25: has been submitted to EOC. Awaiting response/guidelines.</p> <p>Apr 26: plans for cohorting staff. Ideas for signage etc. NSHA and NW to be aligned in approach</p> <p>Apr 27: Josie and Randi met today. Have plan in place. Work is ongoing</p> <p>Apr 28: Josie recieved documents from Randi with guidelines. Should have ready today.</p>	In Progress



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27	2020-04-26	1400h	Medical	Job description for medical students	Maria	Moderate	<p>Apr 26: Maria to work on developing job description for medical students. Will connect engage with others as required to develop and will connect with Randi and Jill for hiring process</p> <p>Apr 27: job descriptions are being worked on</p> <p>Apr 28: work continues on job description and role for med students. Emphasized the med students are not to participate in medical/clinical activities. Role description to focus on "clinical helper".</p>	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	<p>Does requirement for staff swabbing include NSHA staff. Vickie and Josie to connect to clarify.</p> <p>April 22: Josie and Patsy to connect re contacting MOH re recommendations for staff swabbing criteria</p> <p>Apr 23: Continuing to swab staff today. MOH confirmed ok to include NSHA staff. Josie awaiting call from CZ OHSW (A. Keenan).</p> <p>Apr 24: Swabbing continued yesterday, including some NSHA staff. 234 residents and 284 staff swabbed to date. Notified of 7 positive staff so far today. Process in place to crosscheck positive staff with upcoming schedules to close that gap.</p> <p>Apr 25: All staff have been swabbed. Some areas may need to be reswabbed next week, Josie to check in with MOH. NSHA looking for 2 nurses to assist with swabbing Monday, Tues and Thurs.</p> <p>Apr 26: Josie following up with MOH tomorrow for plans for further swabbing.</p> <p>Apr 27: Tuesday & Thursday clinics will be covered. Working on getting process in place to train med students and SLPs to swab. IWK has a guideline for non-clinical staff to do swabbing. Shared those guidelines, and can assist with training. Todd/Annette/Josie working on this</p> <p>Apr 28: Randi working on schedules with physios and SLPs for orientation to do swabbing. IWK has offered to assist.</p>	In Progress



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19	2020-04-23	1645h	OHSW & People	DHW sourcing of external resources for available deployment	Cindy Cruikshank	Moderate	<p>April 23: Sourcing human resources from HRCE and NS Hearing and Speech.</p> <p>Apr 24: no update today</p> <p>Apr 25: DHW reaching out to home support agencies for support, any identified staff will be sent directly to NW. Allied health professionals also being contacted to request volunteers. Publically funded Hearing & Speech practitioners are being deployed by CZ deployment centres. Question around privately funded SLP, and how they would be paid. Cindy to follow up.</p> <p>Apr 26: DHW has identified a number of SLP, who have been referred through to CZ deployment</p> <p>Apr 27: waiting for training to be complete. Internal pilot with NSHA tomorrow re training allied health professionals for swabbing.</p> <p>Apr 28: Cindy will follow up with Randi about others who could fit into the CCA 'helper' role</p>	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Whynot	Moderate	<p>Apr 25: Need to work on getting staff back who are eligible for work isolation. Caroline to reach out to Barbara at IWK for assistance with this.</p> <p>Apr 26: Completed. Some RNs returning tomorrow. Will ask Shelley James for numbers of how many were called and how many are coming back. Report to be provided tomorrow.</p> <p>Apr 27: Of the 71 positive staff, 13 have returned to work. 43 have earliest return to work this week. Will reach out to each of them to ensure they are asymptomatic so that they can return.</p> <p>Apr 28: have 8 recovered and returning to work, 40 more scheduled to return</p>	In Progress



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4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	<p>Apr 23: Josie and Barry working through this.</p> <p>Apr 24: Work is underway, continuing to refine processes.</p> <p>Apr 25: working with clinical leaders and physicians. Process is being refined.</p> <p>Apr 26: no update today</p> <p>Apr 27: looking at tools. Josie to connect with Barry.</p> <p>Apr 28: Josie working with Barry, developing strategy</p>	In Progress
33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	<p>Apr 28: Will assess need and define strategy to address increasing numbers of recovered residents. Options to consider include internal units and/or external space.</p>	In Progress
14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	<p>Program reviewed and revised. Will initiate small pilot.</p> <p>Apr 23: have proposal on how this may move forward. Current priority is to focus on process for compassionate visitation.</p> <p>Apr 24: no additional information today.</p> <p>Apr 25: still focusing on compassionate care for now, this needs to happen first and will help to ready for Care by Family.</p> <p>Apr 26: planning for reboot on Tuesday.</p> <p>Apr 27: training scheduled for first volunteer tomorrow, first shift will be Wednesday</p> <p>Apr 28: proceeding as noted above. Training went well, will start tomorrow, then train another person and will expand as required.</p>	In Progress



NSHA Incident Management System

Status and Update Meeting			
Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-29
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1700h
Scribe Name (Print)	Natalie Miletic	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: Two check-in meetings held today at 0945h and 1630h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda	
1. Medical	<ul style="list-style-type: none"> a. 216 residents positive. Results for swabbing conducted yesterday on 2 presumed unaffected floors at the Centre: 66 residents swabbed, 4 have tested positive: one is located in a triple room. Residents who have tested positive are asymptomatic. b. NW going back through data to identify any staff who previously tested positive that may have been a carrier. c. A number of floors will be classified as recovered in the coming days. d. New testing strategy being implemented. Residents being reswabbed every 5 days for negative in manor. If there is a positive in a shared room, roommates will be swabbed on a 24-48 hour basis (as per guidance from MOH) e. Manor to become a recovery unit, further details to be finalized by tomorrow morning.
2. Operations/Staffing	<ul style="list-style-type: none"> a. Staffing in place for today and tonight. b. Results of staff swabbing: 63 staff swabbed yesterday, 6 are positive, 11 are recovered, more returning to work. c. Dalhousie has accepted the final version of the job description. Two students available for orientation tomorrow. Maria available to



NSHA Incident Management System

assist with orientation process and answer questions that the medical students may have. There are 4 students anticipated to start in the coming days.

- d. Physio resources are required for recovery units. Need response from IPAC re hallway use for physiotherapy sessions. Specific requests for resources to be forwarded to NSHA (Randi and/or Jill).
- e. Focus for the next few days will be on CCA staffing for the weekend. Throughout day today, secured an additional 5 CCAs from Friday to Sunday.

3. Communications

- a. Continuing to call resident families, daily for those who have tested positive, weekly for those who are negative.
- b. Now allowing one family visit per day, but will required full PPE to be put on by family members
- c. Press conference held today went well. Video will be posted to the website along with the update for today which may include staff recovery results.

4. Logistics (Supplies, PPE, Equipment, Finance) - no update today

5. Offsite Location - 13 residents in hotel; 3 transferred today; 2 transferring tomorrow. Capping the number of beds in the recovery unit to 29 to comply with licensing requirements re 24/7 RN coverage when in excess of 30 beds.

6. Risks/Open items - Check-in completed for all open tasks. See incident board for updates

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Group has agreed to change the meeting frequency starting tomorrow. There will be only 1 meeting a day. Meetings tomorrow morning at 0945h will continue. Friday onwards will look into booking a daily meeting mid afternoon.
- Team activities and priorities noted on attached Incident/Event Board (following pages). Please note that attached event board has been abbreviated for ease of reference. Historical activity has been removed on the attached but will be maintained in original documents. There are 16 items remaining open; 3 new items have been added; 20 items closed.



NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	Apr 27: new assessment screen activated. Vendor is working out some issues. Matt expects to hear from them tomorrow. Josie, Dr Clark and matt will connect Apr 28: Matt working with NW and vendor on permissions. Continuing with process to launch dashboard Apr 29: Matt continues to work with vendor to find solutions to pdf format for printing.	In Progress
31	2020-04-27	1630h	Analytics	Support required for data entry for Dashboard	Matt Murphy/Josie/Dr Clark	Moderate	Apr 27: staff needed for data entry to support new dashboard. Could possibly draw on administrative or clinical staff from CZ deployment. Angela to confirm with T. Howlett if this resource has been sourced (as per item#1). If not, Matt will connect with Josie and Dr Clark. Resource needed to ensure data provides support for real-time decision making. Apr 28: Janet to follow up with Barry regarding required resources for both clinical/vitals and for data entry. Apr 29: no additional updates to report.	In Progress
36	2020-04-29	0945h	Analytics	symptomatic vs asymptomatic	Josie		Apr 29: begin to compile data of resident testing to note symptomatic vs asymptomatic. Assistance provided by DHW epidemiologist.	In Progress
24	2020-04-25	1400h	Communications	Calls to families	Communication Team		Apr 27: made 320 calls last week. Progressing well, meeting with callers today to make sure they are no outstanding issues. Apr 28: Process ongoing. Also now calling families for recovery unit Apr 29: Process ongoing. Daily calls for covid positive residents, weekly for covid negative. Have moved to family visits in the recovery unit - full PPE.	In Progress
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	Apr 27: have messaging developed. Happening on limited basis at the moment. Can increase when SLPs come on board. Apr 28: starting to get SLPs on boarded, and iPad are being distributed. Apr 29: Noted during family calls many families are inquiring on when the system will be in place.	In Progress

Signature: _____

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NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
34	2020-04-29	0945h	Communica tions	Residents being removed from care be families	Josie / Murray	Moderate	Apr 29: Quantify number and develop a communications and support strategy for NW population.	In Progress
17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	Apr 27: Paramedics still required. Currently 200 cases of positive residents. 25% of them would be considered recovered Apr 28: still required. Will reassess once med students are on boarded. Continue to monitor Apr 29: Still required. Continue to monitor.	In Progress
30	2020-04-26	1400h	Incident Team	Structure and Process for Incident Management Team	Angela	Moderate	Apr 26: Team to continue with twice daily meetings. Will continue to assess process and structure Apr 27: Angela will connect with Vickie, Josie and Janet to develop go forward plan Apr 28: Angela to follow up today. Meeting scheduled for April 29. Apr 29: Meeting help today, discussed change in frequency of meetings. IMT agreed to 1 meeting a day instead of 2.	In Progress
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	Apr 27: Josie and Randi met today. Have plan in place. Work is ongoing Apr 28: Josie received documents from Randi with guidelines. Should have ready today. Apr 29: Additional IPAC support on site today to provide support with evolving epidemiology.	In Progress
27	2020-04-26	1400h	Medical	Job description for medical students	Maria	Moderate	Apr 27: job descriptions are being worked on Apr 28: work continues on job description and role for med students. Emphasized the med students are not to participate in medical/clinical activities. Role description to focus on "clinical helper". Apr 29: Dalhousie has accepted the final version of the job description. Offer has been sent to medical students, Two available for orientation tomorrow. Further discussion (Josie and Randi) re other potential candidates.	In Progress

Signature: _____

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NSHA Incident Management System
Northwood Manor - Incident/Event Board

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
35	2020-04-29	0945h	Medical	Research Protocols	Ken Barry and Janet	Moderate	Apr 29: Identified need to clarify research protocols and to provide messaging for family inquiries re same.	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Why not	Moderate	Apr 27: Of the 71 positive staff, 13 have returned to work. 43 have earliest return to work this week. Will reach out to each of them to ensure they are asymptomatic so that they can return. Apr 28: have 8 recovered and returning to work, 40 more scheduled to return Apr 29: 63 staff swabbed, 6 are positive, 11 are recovered, more returning to work.	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	Apr 27: Tuesday & Thursday clinics will be covered. Working on getting process in place to train med students and SLPs to swab. IWK has a guideline for non-clinical staff to do swabbing. Shared those guidelines, and can assist with training. Todd/Annette/Josie working on this Apr 28: Randi working on schedules with physios and SLPs for orientation to do swabbing. IWK has offered to assist. Apr 29: trained 5 people within the NSHA PACs. Scheduled training for another group for Friday. Will use same approach for training SLP and PTS for NW swabbing.	In Progress
33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	Will assess need and define strategy to address increasing numbers of recovered residents. Options to consider include internal units and/or external space. Apr 29: Continuing to assess strategy for additional internal recovery units. Barry and Josie meeting to assess in response to new cases.	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	Apr 27: looking at tools. Josie to connect with Barry. Apr 28: Josie working with Barry, developing strategy Apr 29: still ongoing, continue to monitor.	In Progress

Signature: _____

3of8



**NSHA Incident Management System
Northwood Manor - Incident/Event Board**

#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	Apr 27: training scheduled for first volunteer tomorrow, first shift will be Wednesday Apr 28: proceeding as noted above. Training went well, will start tomorrow, then train another person and will expand as required. Apr 29: Continuing to monitor. Noted that pilot is one person and one family for today. Will reevaluate on Friday to begin training for next person.	In Progress

Signature: _____



NSHA Incident Management System

Status and Update Meeting

Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-04-30
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1700h
Scribe Name (Print)	Natalie Miletic	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: One check-in meeting held today at 0945h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda
<ol style="list-style-type: none"> 1. Medical <ol style="list-style-type: none"> a. Total number to date of resident positives: 216; Total number to date of staff positives: 80. b. There is a new swabbing directive from the MOH- Will require 2 negative swabs from all individuals before they can be moved to the recovery unit. c. MOH office (epidemiologist) is providing support re symptomatic vs asymptomatics residents who are positive. List to bes sent to NW and NW to confirm details. d. Noted that necessary documentation for clarification of research portocols has been received. Item marked as complete (#35). 2. Operations/Staffing <ol style="list-style-type: none"> a. Some shortages on staffing for tonight. Currently short 11 CCAs and 4 LPNS for the night shift. b. Projected weekend staff shortages for dietary, will discuss solutions at 1100h HR meeting today. May be able to utilize kitchen staff for meal delivery. c. Of the 40 staff scheduled to return to work, 23 workers have had sick leave extended until mid-next week.



NSHA Incident Management System

<p>d. Orientation for medical students begins today. Discussed items for inclusion: Swabbing training, data entry, point of contact for students.</p> <p>e. RN Clinical leader notes that the Care by Family pilot went well. Pilot family member excited to continue working today.</p> <p>f. Orientation process has begun for Medical Students. Noted that if students have any concerns/ issues to contact Maria and/or Caroline. Item marked as complete (#27).</p> <p>g. Incident meetings have been updated to once daily. Weekend meetings to be assessed tomorrow. Item marked as complete (#30).</p> <p>3. Communications</p> <p>a. Further discussion re provincial issue of residents being removed from LTCF by families. DHW has drafted a provincial memo; Continuing Care is drafting a internal memo. Fro Northwood, total Numbers: 1 in Bedford; 7 in Halifax site. Item marked as complete (#34).</p> <p>4. Logistics (Supplies, PPE, Equipment, Finance) - no update today.</p> <p>5. Offsite Location – 12 residents in hotel.</p> <p>6. Risks/Open items - Check-in completed for all open tasks. See incident board for updates</p>
<p>OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)</p> <ul style="list-style-type: none"> Group has agreed to change the meeting frequency starting tomorrow. Meetings will continue tomorrow at 1400h. Team activities and priorities noted on attached Incident/Event Board (following pages). Please note that attached event board has been abbreviated for ease of reference. Historical activity has been removed on the attached but will be maintained in original documents. There are 12 items remaining open; 24 items closed. Today closed items: #27 (Job descriptions), #35 (Research protocols), #34 (Families removing residents – provincial issue), #30 (Incident Management Team process)



NSHA Incident Management System

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1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	Apr 28: Matt working with NW and vendor on permissions. Continuing with process to launch dashboard Apr 29: Matt continues to work with vendor to find solutions to pdf format for printing. Apr 30: No additional updates.	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	Apr 28: Josie working with Barry, developing strategy Apr 29: still ongoing, continue to monitor. Apr 30: Exploring how the black group is progressing with their coverage in NW. Janet to send video clip to Maria on the use of point care click.	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	Apr 28: Randi working on schedules with physios and SLPs for orientation to do swabbing. IWK has offered to assist. Apr 29: trained 5 people within the NSHA PACs. Scheduled training for another group for Friday. Will use same approach for training SLP and PTS for NW swabbing. Apr 30: RNs to be on site this afternoon in clinic. Will discuss process for training others (Caroline/Randi). IWK has offered additional resources if required.	In Progress
14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	Apr 28: proceeding as noted above. Training went well, will start tomorrow, then train another person and will expand as required. Apr 29: Continuing to monitor. Noted that pilot is one person and one family for today. Will reevaluate on Friday to begin training for next person. Apr 30: RN clinical leader noted that pilot went well. Family member is excited about returning today.	In Progress
17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	Apr 28: still required. Will reassess once med students are on boarded. Continue to monitor Apr 29: Still required. Continue to monitor. Apr 30: Still required. Continue to monitor	In Progress



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#	Date (YYYY-MM-DD)	Time (24hr)	Theme/ Group	Title/Description	Assigned to	Priority High, Moderate, Low	Status Updates/Comments -Each new comment must start with a date -Include the date that activity was completed	Current Status Complete, In Progress, Not Started
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	Apr 28: Josie received documents from Randi with guidelines. Should have ready today. Apr 29: Additional IPAC support on site today to provide support with evolving epidemiology. Apr 30: additional resources remain on site today.	In Progress
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	Apr 28: starting to get SLPs on boarded, and iPad are being distributed. Apr 29: Noted during family calls many families are inquiring on when the system will be in place. Apr 30: additional ipads now available, as well as additional staff (4 additional people). Process well established. Will verify current status.	In Progress
24	2020-04-25	1400h	Communications	Calls to families	Communication Team		Apr 28: Process ongoing. Also now calling families for recovery unit Apr 29: Process ongoing. Daily calls for covid positive residents, weekly for covid negative. Have moved to family visits in the recovery unit - full PPE. Apr 30: no additional updates	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Why not	Moderate	Apr 28: have 8 recovered and returning to work, 40 more scheduled to return Apr 29: 63 staff swabbed, 6 are positive, 11 are recovered, more returning to work. Apr 30: of the 40 scheduled to return to work, 23 workers have had sick leave extended until mid next week.	In Progress
31	2020-04-27	1630h	Analytics	Support required for data entry for Dashboard	Matt Murphy/Josie/Dr Clark	Moderate	Apr 28: Janet to follow up with Barry regarding required resources for both clinical/vitals and for data entry. Apr 29: no additional updates to report. Apr 30: Support in place for data entry. Beginning to orientate more med students. Caroline sending contact info of med students to Maria and Melody. Maria to reach out to President of med student association to further explain the volunteer opportunity.	In Progress



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33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	Apr 29: Continuing to assess strategy for additional internal recovery units. Barry and Josie meeting to assess in response to new cases. Apr 30: Continuing to assess strategy but focusing on internal options at this time.	In Progress
36	2020-04-29	0945h	Analytics	symptomatic vs asymptomatic	Josie		Apr 29: begin to compile data of resident testing to note symptomatic vs asymptomatic. Assistance provided by DHW epidemiologist. Apr 30: MOH office (epidemiologist) will send NW a list, NW to confirm list.	In Progress



NSHA Incident Management System

Status and Update Meeting

Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-05-01
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1700h
Scribe Name (Print)	Natalie Miletic	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: One check-in meeting held today at 1400h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda
<ol style="list-style-type: none"> 1. Medical <ol style="list-style-type: none"> a. Total residents positive: 218; Total staff positive: 81. b. Training of internal resources for staff swabbing went well. Currently positioned to sustain swabbing processes with no additional requests for resources. c. Noted that required support for data entry for Dashboard has been filled by the medical student rotation. Item marked as complete (#31). d. Although virtual rounds are not yet occurring, there is a well-established on-call system in place. Good support with NP resource onsite and contacting external physicians on an as needed basis. More consideration being put into consolidating rounds in the near future. 2. Operations/Staffing <ol style="list-style-type: none"> a. Staffing in place for tonight. Some shortages with LPNs and CCAs. Overall, current projection for staffing tonight and over the weekend is positive. b. Results of staff swabbing: 103 swabbed yesterday. 15 staff have been cleared to come back to work as of today.



NSHA Incident Management System

- c. IPAC support remains in place. Going well. Additional strategies to be assessed after weekend.
- d. Care by Family - pilot progressing well. There will be a debrief meeting today at 4pm. There is another family in queue to begin work on another floor from Mon-Friday.

3. Communications

- a. 239 FaceTime video chats have been completed during the month of April. Noted that team has an established process and working through requests. Caroline to touch base on designating one iPad to Hospice unit for video chats.
- b. Currently making 70-75 phonecalls to families daily. Noted that the process is well established. Item is marked as complete (#24).
- c. Communications team working on a new video update this weekend.

4. Logistics (Supplies, PPE, Equipment, Finance) - no update today.

5. Offsite Location – 16 residents will be in the hotel by end of day today. Hotel beds capped at 29 re. RN licensing requirements. Once at capacity, recovery units to be established in-house.

6. Risks/Open items - Check-in completed for all open tasks. See incident board for updates.

OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)

- Meetings will continue tomorrow at 1400h. Group to reassess need of Sunday check-in meeting tomorrow.
- Team activities and priorities noted on attached Incident/Event Board (following pages). Please note that attached event board has been abbreviated for ease of reference. Historical activity has been removed on the attached but will be maintained in original documents. There are 10 items remaining open; 26 items closed. Today closed items: # 24 (calls to families); #31 (Support required for data entry for Dashboard).



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1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	Apr 29: Matt continues to work with vendor to find solutions to pdf format for printing. Apr 30: No additional updates. May 1: connecting with Vendor to confirm the functionality of new screen.	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	Apr 29: still ongoing, continue to monitor. Apr 30: Exploring how the black group is progressing with their coverage in NW. Janet to send video clip to Maria on the use of point care click. May 1: Current on-call process working well with NP and on-call physician coverage. As we continue to progress, will explore processes for expanding and consolidating rounds.	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	Apr 29: trained 5 people within the NSHA PACs. Scheduled training for another group for Friday. Will use same approach for training SLP and PTS for NW swabbing. Apr 30: RNs to be on site this afternoon in clinic. Will discuss process for training others (Caroline/Randi). IWK has offered additional resources if required. May 1: successful clinic yesterday 103 staff swabbed, good support from NSHA staff. Currently positioned to sustain swabbing processes with no additional requests for resources.	In Progress
14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	Apr 29: Continuing to monitor. Noted that pilot is one person and one family for today. Will reevaluate on Friday to begin training for next person. Apr 30: RN clinical leader noted that pilot went well. Family member is excited about returning today. May 1: Care by Family Pilot progressing well. There will be a debrief meeting today at 4pm. There is another family in queue to begin work on another floor from Mon-Friday.	In Progress



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17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	Apr 29: Still required. Continue to monitor. Apr 30: Still required. Continue to monitor. May 1: Med students and SLPs are being trained to assist in the near future. Continue to monitor.	In Progress
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	Apr 29: Additional IPAC support on site today to provide support with evolving epidemiology. Apr 30: additional resources remain on site today. May 1: IPAC support remains in place. Good progress. Reassessing on Monday	In Progress
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	Apr 29: Noted during family calls many families are inquiring on when the system will be in place. Apr 30: additional iPad now available, as well as additional staff (4 additional people). Process well established. Will verify current status. May 1: 239 FaceTime video chats have been completed to date. Noted that team has an established process and working through requests. Caroline to touch base on designating one iPad to Hospice unit for video chats.	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Why not	Moderate	Apr 29: 63 staff swabbed, 6 are positive, 11 are recovered, more returning to work. Apr 30: of the 40 scheduled to return to work, 23 workers have had sick leave extended until mid-next week. May 1: 15 staff have been cleared to come back to work as of today. Next update will be provided on Monday	In Progress



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33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	<p>Apr 29: Continuing to assess strategy for additional internal recovery units. Barry and Josie meeting to assess in response to new cases.</p> <p>Apr 30: Continuing to assess strategy but focusing on internal options at this time.</p> <p>May 1: 16 residents will be in the hotel by end of day today. Hotel beds capped at 29 re. Once capacity reached, recovery units to be established internally.</p>	In Progress
36	2020-04-29	0945h	Analytics	Symptomatic vs asymptomatic	Josie	Low	<p>Apr 29: begin to compile data of resident testing to note symptomatic vs asymptomatic. Assistance provided by DHW epidemiologist.</p> <p>Apr 30: MOH office (epidemiologist) will send NW a list, NW to confirm list.</p> <p>May 1: no additional updates today.</p>	In Progress



NSHA Incident Management System

Status and Update Meeting

Zone Location (EZ, CZ, NZ, WZ, NSHA)	NSHA	Event	COVID19
Response Level (EOC, IMT, CP)	IMT	Operational Cycle Date (YYYY-MM-DD)	2020-05-02
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1600h
Scribe Name (Print)	Natalie Miletic	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: One check-in meeting held today at 1400h. Participants included representatives from NSHA, Northwood, DHW and IWK			
Attendees: NSHA Operations, IPAC, Health Services, Communications, Medicine, Emergency Preparedness, Continuing Care, Analytics, DHW, IWK and Northwood Site Leadership team			

Agenda

1. **Medical**
 - a. Total residents positive: 220; Total staff positive: 85
 - b. No swabbing activity scheduled for this weekend. Swabbing clinic to re-commence next week.
 - c. Paramedics for rounding are still required for this weekend. Will be reassessed by early next week.
2. **Operations/Staffing**
 - a. There were 10 book offs this morning that have created staffing challenges for this weekend.
 - b. For this evening, LPNs are covered; in need of 5 RNs; short 10 CCAs for the evening and night shifts. NW have reached out to VON and NW staff to work overtime. Further actions include reaching out to other agencies.
 - c. To assist NW staffing shortage, NSHA is waiting on confirmation of additional 2 RNs to assist for the weekend.
 - d. Mitigation plan discussed, noted that staffing for today's evening and night shifts are above critical levels.
 - e. There is more concern about staffing for Sunday in which NW is in need of 22 staff to fill gaps.



NSHA Incident Management System

<p>3. Communications</p> <ul style="list-style-type: none"> a. Video being developed to notify families that the “FaceTime with Families” service is available. b. Currently monitoring media after the release of a new news article. Communications team developing response as needed. (Item #37) <p>4. Logistics (Supplies, PPE, Equipment, Finance)</p> <ul style="list-style-type: none"> a. Concerns made with regards to the medication supply vendor changing practices and preparing for shortages. NW has been asked to provide Vickie S. a list of medications. <p>5. Offsite Location – 16 are in the recovery unit.</p> <p>6. Risks/Open items - Check-in completed for all open tasks. See incident board for updates.</p>
<p>OTHER COMMENTS/ISSUES (ANY OTHER MEDIA, SAFETY, OR OTHER ISSUES THAT NEED TO BE REVIEWED?)</p> <ul style="list-style-type: none"> • Meetings will continue Monday, May 4, 2020 at 1400h. Group has agreed to cancel Sunday’s meeting and opt for a staffing status e-mail update after the HR 1100h meeting tomorrow (May 3). • Team activities and priorities noted on attached Incident/Event Board (following pages). Please note that attached event board has been abbreviated for ease of reference. Historical activity has been removed on the attached but will be maintained in original documents. There are 12 items remaining open; 26 items closed. 2 new added items: #37 (Monitoring Media); #38 (Monitoring Medication Supplies)



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1	2020-04-20	0945h	Analytics	Obtain required analytics to support clinical planning and processes	Matt Murphy	High	Apr 30: No additional updates. May 1: Connecting with Vendor to confirm the functionality of new screen. May 2: No additional updates.	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	Apr 30: Exploring how the black group is progressing with their coverage in NW. Janet to send video clip to Maria on the use of point care click. May 1: Current on-call process working well with NP and on-call physician coverage. As we continue to progress, will explore processes for expanding and consolidating rounds. May 2: No additional updates.	In Progress
8	2020-04-21	0945h	OHSW & People	Staff swabbing	Vickie Sullivan and Josie Ryan	Moderate	Apr 30: RNs to be on site this afternoon in clinic. Will discuss process for training others (Caroline/Randi). IWK has offered additional resources if required. May 1: successful clinic yesterday 103 staff swabbed, good support from NSHA staff. Currently positioned to sustain swabbing processes with no additional requests for resources. May 2: No swabbing activity this weekend. Swabbing clinics to start-up again next week in which NW internal staffing will only be required.	In Progress



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14	2020-04-22	1630h	Resident Families	Care by Family Proposal	Janet	Moderate	<p>Apr 30: RN clinical leader noted that pilot went well. Family member is excited about returning today.</p> <p>May 1: Care by Family Pilot progressing well. There will be a debrief meeting today at 4pm. There is another family in que to begin work on another floor from Mon-Friday.</p> <p>May 2: Debrief completed in which some improvements were suggested and implemented. The family volunteer has been informed of changes. Will commence with planned training of second family on Monday.</p>	In Progress
17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	<p>Apr 30: Still required. Continue to monitor.</p> <p>May 1: Med students a SLPS are being trained to assist in the near future. Continue to monitor.</p> <p>May 2: Still required for this weekend. To make a decision early next week.</p>	In Progress
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	<p>Apr 27: Josie and Randi met today. Have plan in place. Work is ongoing</p> <p>Apr 28: Josie received documents from Randi with guidelines. Should have ready today.</p> <p>Apr 29: Additional IPAC support on site today to provide support with evolving epidemiology.</p> <p>Apr 30: additional resources remain on site today.</p> <p>May 1: IPAC support remains in place. Good progress. Reassessing on Monday.</p> <p>May 2: No additional updates. Currently evaluating ongoing support, to report early next week.</p>	In Progress



NSHA Incident Management System

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33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	<p>Will assess need and define strategy to address increasing numbers of recovered residents. Options to consider include internal units and/or external space.</p> <p>Apr 29: Continuing to assess strategy for additional internal recovery units. Barry and Josie meeting to assess in response to new cases.</p> <p>Apr 30: Continuing to assess strategy but focusing on internal options at this time.</p> <p>May 1: 16 residents will be in the hotel by end of day today. Hotel beds capped at 29 re. Once capacity reached, recovery units to be established internally.</p> <p>May 2: Work is continuing to be completed. Will have more to report on Monday.</p>	In Progress
36	2020-04-29	0945h	Analytics	Symptomatic vs asymptomatic	Josie	Low	<p>Apr 29: begin to compile data of resident testing to note symptomatic vs asymptomatic. Assistance provided by DHW epidemiologist.</p> <p>Apr 30: MOH office (epidemiologist) will send NW a list, NW to confirm list.</p> <p>May 1: no additional updates today.</p> <p>May 2: Received information last night, list currently being developed.</p>	In Progress
37	2020-05-02	1400h	Communications	Monitoring media	Communications Team	Low	<p>May 2: Noted recent news article, NW communications and CNS Comms to prepare a response as needed. Will monitor.</p>	In Progress
38	2020-05-02	1400h	Logistics/Supplies	Monitoring Medication Supplies	Vickie/ Laura	Moderate	<p>May 2: Concerns noted with regards to medication supply. Vendor is changing practices and preparing for shortages. NW has been asked to provide Vickie a list of medications to investigate if this is vendor specific or broader issue.</p>	In Progress

Munroe, Laurel

From: Walsh, Tara A
Sent: May 4, 2020 6:31 PM
To: Munroe, Laurel
Subject: Fwd: Timelines for COVID19 Response in LTC
Attachments: RK MacDonald Outbreak Timeline (1).docx; ATT00001.htm; Magnolia Outbreak Timeline.docx; ATT00002.htm; Timeline for Communication to LTC Facilities.docx; ATT00003.htm; Northwood Situation Updates Apr 20-May 2, 2020.pdf; ATT00004.htm

Jeannine just sent this.

Sent from my iPhone

Begin forwarded message:

From: "Lagasse, Jeannine" <Jeannine.Lagasse@novascotia.ca>
To: "Graham, Laurie B" <Laurie.Graham@novascotia.ca>, "Langley, Laura Lee" <LauraLee.Langley@novascotia.ca>
Cc: "Delorey, Randy M" <HonRandy.Delorey@novascotia.ca>, "Orrell, Kevin" <Kevin.Orrell@novascotia.ca>, "Strang, Robert" <Robert.Strang@novascotia.ca>, "MacDonald, Donna" <Donna.C.MacDonald@novascotia.ca>, "Walsh, Tara A" <Tara.Walsh@novascotia.ca>
Subject: FW: Timelines for COVID19 Response in LTC

Attached please find the Timeline Documents that have been completed to date and the Daily Situation Updates from Northwood EOC. The Northwood specific timeline is still under development. Should be able to send it later tonight. I have not had the opportunity to review these versions.

Below is draft messaging for Northwood prepared by CNS.

Updates to all documents will continue. Wanted you to have what is done now. Please provide feedback if you would like anything additional.

Jeannine

Northwood Messaging

May4

14(1)

Messages:



Talking Points:

14(1)