





# Daily Briefing Agenda April 1, 2020

**Invitees from PN; OASIS; CLO**: Michelle Brooks; Ann Bilodeau; Brad Saunders; Bryan Keshen; Carolynn Morrison; David Ferguson; Dean Johnson; Janet Noel-Annable; Lorrie Heffernan; Lisa Holmes; Geoff McMullen; Jo-Anne Demick; Don Walker; Jonathan Bradshaw; Peter Sproul; Steve Finlay; AnnMarie Binetti; Christine Dubyk

Invitees from MCCSS: Laura Summers; Christine Kuepfer

### **Opening remarks**

## 1) Updates from MCCSS and progress reports on take-aways:

- Personal Protective Equipment (PPE Supply Chain)
- LTC Protocols/Correspondence
- KPMG Planning Opportunity
- Other

Christine K. - No updates or feedback at this time. Awaiting on Health and their approval process. MCCSS has become aware that a change in PPE usage has been issued but seeking clarification on one of the items. MCCSS is following up and flagging via their channels. Getting clarification on this.

### 2) Updates on take-aways from the Committee Members:

EOC – **Eugene** – Deferred. Michelle shared that she was only present for a portion of this mornings' call but her impression from when she joined was that he had went well. Discussions had were pertaining to clarification around 'key priorities and background. It was confirmed on the call that this would be taken away and feedback to be provided.

### Workforce/Staffing – All

- Lorrie Heffernan received a call from OPSEU asking what the plan was around wage enhancements and understands that 'other' sectors are also receiving letters.
- Dave F. updated on discussions around clarity of 'essential; and DS requests to be treated the same as Health and LTC. It was indicated that a letter would be put together supporting this and at minimum around PPE. Also indicated that Minister Elliott informed that a large shipment of PPEs is in transit with millions of dollars being put into PPE with a total of 2 billion Federally. Message is one of reassurance and will take our request for 'change of status' forward.

- Janet N-A Reiterated the concerns around employees who work for more than one
  organization and movement between these work locations. CH is looking at adjusting
  schedules and rotating staff to remain in the home. As much as possible trying to have
  employees only go to the CH homes/ agencies.
- Ann B received a challenge from the Union in terms of what agency obligations are. In the
  Union world this could be an issue. Healthcare workers are encouraged to not stop working.
   Put on agenda for April 2 tomorrow.
- COVID-19 Health Care Worker Multi-Employer Recommendations <a href="https://www.oha.com/Bulletins/COVID-19%20HR%20Guidance%20-%20HCW%20Multi-employer%20March%2030%202020.pdf">https://www.oha.com/Bulletins/COVID-19%20HR%20Guidance%20-%20HCW%20Multi-employer%20March%2030%202020.pdf</a>
- Members stressed that this has been the ask for the past week or so and unless we are under a
  particular order from Health, we need to choose and act accordingly and based on a case by
  case circumstance. Any change to mitigate this risk is needed.
- Jo-Anne D. shared that her organization employs a 1<sup>st</sup> year nursing student who works at the hospital as a screener and comes into contact with anyone entering the hospital. He was given the choice of having another work assignment within Joanne's agency and chose to remain with DS.
- Michelle through the University of Delaware, an 'Intertwined' video was shared: https://youtu.be/0arO30m7i2U
- Christine K. shared that the Joint H&S and Labour Relations committees are the obvious place
  to hold these conversations and understand that the bargaining units have been trying to work
  with agencies around this.

# SSAH and Messaging to Families

 Christine K. will circle back and get confirmation on whether SSAH messaging will be going out from the Regional Office around communication to families and the "canned" message to be added to DSO websites.

#### Essential Status – SIL – Peter S.

• Dave F. touched on 'essential' earlier on this call. Peter appreciates quicker turn around on this and for staff in group living situations and said this needs to be looked at for 'other' living arrangements such as: SIL. *Christine K. will circle back with Laura on this.* 

### Planning for Alternate Residential Settings – All

- There is a group currently working on a plan. KPMG is doing a preliminary learning curve to understand who the cohorts and needs are. Bryan provided a 'lived' experience on his call with KPMG and some HR ideas and concerns. KPMG will try to get back tomorrow with first thoughts on this.
- Peter S. said that KPMG seems to be more focussed on the 'alternative housing' than the 'staffing/hr challenges'. Christine K. said Laura is leading the 'alternative housing' and Christine K. is leading the 'staffing/hr' component with KPMG and will follow up on this to ensure understanding around the segregation of the two items.

## Frontline Experiences – All

- Brad S. Brad, Sandy and Bryan learned with their review of the New York experience that NY DS staff was not aware of many of the supported people that had underlying respiratory issues. Brad is looking at this and will share a tool by the end of the week. People that are non-verbal is often an early indicator of 'gastral/intestinal/stomach' problems. These were identified within their team, however not published. Another was that isolation homes were set up and they had their own health clinic and a long-established partnership with nursing staff, in addition to DS staff.
- Health: There have been a few different experiences in connecting with health. Joanne D. did not receive any assistance via correspondence from Public Health; however, Peter S. received very good information. Dave F. heard that PH would come onsite and would have PPE if a positive case identified. It is interesting how the information across the Province from PH varies. Ann B is going through a live situation now with a positive case and health sent a letter to each of the employees that had contact which outlines what to do. Ann-B. will condense and share if interested. Ann-Marie B. will assist with these templates and take out any site-specific information.
- Ann-Marie Binetti is still collecting resources from various agencies and breaking this down via HR; PPE, etc. onto the COVID-19 website implemented earlier. Would like to encourage people to look at the site and will send a reminder email.

#### 3) Issues/ Risks:

- Jo-Anne D. had a question around 'bilingual' information and will be creating a couple of
  messages in French to push out to agencies. Michelle asked if anyone has an in-house
  communications coordinator that could be leveraged. Brad/CLT does, however this is pretty
  involved around their specific organizational processes. Brad shared the following link:
  <a href="https://cltoronto.ca/covid-19-staff-resources/">https://cltoronto.ca/covid-19-staff-resources/</a>
- 4) Significant Decisions: Based on Recommendations from Take-Aways & Today's Conversations

Adj: 2:50pm