

## Daily Briefing Note April 20, 2020

**Attendees:** Michelle Brooks; Ann Bilodeau; Brad Saunders; Bryan Keshen; Carolynn Morrison; Chris Beesley; David Cohen; David Ferguson; Dean Johnson; James Duncan; Janet Noel-Annable; Lorrie Heffernan; Lisa Holmes; Geoff McMullen; Jo-Anne Demick; Jonathan Bradshaw; Peter Sproul; Steve Finlay; Ann-Marie Binetti; Christine Dubyk

### Opening remarks:

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

- Personal Protective Equipment (PPE – Supply Chain)
- KPMG Planning Opportunity
- Stats on COVID-19
- Other

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

EOC – Update – **Eugene** (discussion deferred)

- Submitted recommended changes to update the 'Guidelines for Group Homes' document

KPMG: **Updates from Group Representatives**

- Alternate Housing – No update
- Workforce Development – No update
- PPE – No update

Post Crisis Fallout – **Dave F.**

- *EAP document was sent to Ann-Marie and Chris B.*
- **Chris B. will be sending a summary update on the 'PN calls' today.**

Shared staffing and working at more than one location – **Brad / All**

- Brad shared that the small group met to discuss the LTC Order for staff to not work in more than one location. For the DS sector, unsure how this would work due to the numbers of staff and locations. Agree there are concerns specific to cross-contamination. How should we consider messaging this to our employees?
- Michelle -should we ask to frame an order to limiting staff to one essential service employer?

- Ann B – agree best to limit to employer language and not limiting to only one location as this could be more problematic. Leave the how to manage your staff to agencies to do so in-house as they are best able.
- Janet N-A asked about the discussion around fast-tracking the OASIS Thursday ‘webinar’ to discuss how to respond/prepare for single employer directives, however not sure what the messaging would be as yet so seemingly put onto the back burner
- Joanne D. has moved to the ‘single employer measure’, however if/once in outbreak, sourcing all staff would be needed. Could LTC be designated for DS as well if it came to this and/or having other programs that may be closed come together to create emergency teams?
- Bryan feels that this depends on the environment across the Province, and if no immediate risk and/or positives, you do not necessarily need to change. SWAT solution would be more beneficial than utilizing 3<sup>rd</sup> party agencies.
- ***Michelle will circle back with Christine K. around the SWAT Team approach that had been discussed on the KPMG- Workforce development calls.***
- Brad asked what a SWAT Team would look like and what would they do. You lose staff in 14-day increments. Not sure if we are clear on what we mean by SWAT. Some hear this would be Health coming in. Some feel that both Health and emergency staffing pools would be required and depending on the situation being faced.
- Ann B. is hoping the KPMG information will be shared soon as this will address some of this discussion.
- ***Michelle – will pull something together today or tomorrow in way of a communique and share for feedback to get something out to the sector***

#### Frontline Experiences – ***All***

- Bryan inquired about the stats from MCCSS. Michelle confirmed that MCCSS is trying to get this information to us as frequently as possible but currently trying address how to retrieve the info from SOReI. Bryan feels this would be beneficial for MCCSS to do in hand with Health.
- Bryan shared that testing has been expedited and has proven to be very helpful; staff can aggressively go forward and be tested.
- Janet N-A is having a different experience and depending on who is contacted at Public Health and where in the province they are at. Unless there are symptoms, some Public Health departments are saying that no testing is needed. There is also a different perspective from Public Health allowing self-isolation at work and not being off for 14 days.
- Janet asked about the MCCSS procurement survey that is voluntary and what is the PN role on procurement needs. A concern was raised around if there is a ‘shortage’ once a Ministry repository is initiated, will our sector be the last to receive PPE and only if it is available?
- Ann B. shared that the portal for reporting PPE for reimbursement almost requires a F/T staff to figure out. Many have not received reimbursement on the costs associated with PPE. There are agencies that went ahead and sourced their own PPE’s and due to the

shortages and that fact that many manufacturers were told to only provide to health care organizations. Joanne is providing numbers and informing the Ministry that their stock is from local businesses, etc.

***Michelle will connect with MCCSS on the following:***

- Look at recommendation around best practice and preparing for potential of a single employer mandate
- Follow up with Christine K. around toolkit and response team and where KPMG timing is
- Enquire with MCCSS on PPE, survey and what the intent of this is
- Passport Guidelines and revisions.
- Staff access to support people when in hospitals

**3) Other**

- Janet asked if there is a breakout at site, should employees be self-isolating due to the different information coming from Public Health? ***This will be left with the work of the EOC Table and via Eugene.***
- Bryan: KPMG Housing talked about supporting staff/families. Reena has booked a hotel for staff in outbreak locations or working in these locations and became COVID positive and where they do not want to impact their families. Now close to 50 staff currently housed in the hotel and/or wanting rooms.
- Dave F. will be presenting at the Thursday OASIS webinar. Dave said if you have something that is 'employee related' send his way.
- Peter S. feels that we may want to do something similar to how LTC did a news release to highlight the work of their staff, etc. This may be good for DS to highlight via some kind of Public Relations strategy.
- ***Next PN call is April 23, 2020 10am – 1pm***