



Provincial Network Minutes February 25th, 2021

Welcome – Michelle B., PN Chair

Approval of:

- February 25th, 2021 Agenda approved as presented
- 'Draft' Briefing Note of February 17th, 2021 approved for circulation and posting

Updates on Take-Aways from the Committee Members

EOC – Eugene

- There will be a presentation on the COVAX Database next week to update what is happening and to acknowledge different people that will be in the database around the morbidities. Also talked about 'rapid testing' becoming available in the sector.
- Eugene did ask whether or not the consent form will go through a 3rd adjustment, however have not heard back from the Public Health units on this to date.
- In some communities they are saying use any consent form and in others they are asking to hold off until a reach out to Developmental Services is done.
- Michelle said there seems to be confusion on the data that needs to be shared and she asked Rupert to provide some guidance to the sector on the different items. There seems to be some growing confusion around the 'asks' from the various sources. Eugene said this is one of the liveliest conversations that take place at the EOC table and believe that they are at a point of moving on.
- Michelle asked if there is any specific messaging that Lorrie/Bryan can share based on their conversations with Rupert, to please do so.

DS Sector Vaccine Preparedness 'Ad-Hoc' Committee – Bryan/Lorrie

- Bryan shared that the working group is trying to ensure links to PHU's are available. There are 3 types of lists:
 - Planning - Ministry, Public Health and others trying to plan to understand quantities and needs
 - Implementation Group – gets the messages out to invite people for vaccination
 - COVAX – what gets loaded
- This is confusing as all 3 have different functions. If health is coming to your site an address is needed to set up an account and a consistent email contact.
- An upcoming webinar will dive into the lived experience and will have some early and interesting data on updates from the 1st vaccine.
- The 2nd vaccine is starting to take place.

MCCSS – Welcome: Rupert Gordon, ADM; Chrisine Kuepfer; Cormin Troje; Jody, Hendry

Rupert shared updates in way of developments and shifts in numbers:

Data

- 112M cases globally and over 500K deaths
- There are still jurisdictions coping with high numbers.
- Canada is running at 53.3 cases/100K
- Interprovincial numbers were shared
- Ontario – 300K cumulative with 17K active and this is going down daily. Showing some significant improvements.
- Age distribution: under 20 is contributing to infections with higher rates concentrated in the 20's – 40's; there is a decline in the 50+ age category; people 90+ are fluctuating.
- Reproduction rate is hovering around '1'; fallen to approximately .8 but since January there has been an upward trend. Important thing is that when at '1', pandemic is neither shrinking nor growing; however at a tipping point at this time.
- DS: cumulative for congregate settings is 470; active sites is 40. Much more predictable than previous and a return to more acceptable levels.
- 687 residential case counts; 33 active
- Staff Cases – 6600; Staff cumulative count 1254; 93 active. Again significant rate of growth over the last month

PPE

- Robust participation at 80%; total of 21M pieces shipped; the MCCSS team continues to work on processing feedback and currently adding 'ordering' information into the system.

Testing

- Positivity rates are averaging around 3%; total test modes around 65K; selective testing for the 'variant' strains. Some data suggests there are some regions that are quite high for the UK variant in the North. The principle concern is that the reproduction rate will grow faster.
- Antigen – a memorandum is out and ministry continues to press concerns with PH. There is noticeable improvement in terms of steps.

Wage Enhancement

- TPA's have been received over 95% of eligible cases.
- MCCSS is working to get resources into the hands of families. Good news is that 15K families have been paid that have made submissions.
- A memo sent from Children's colleagues was received asking for data collection on wage enhancement on the kids side. This is an attempt to catch up on the fine work done in this sector. Kudos to Brad and OASIS for the work on the affect to broaden out the case in terms of recognition, absences, etc. Very helpful evidence and inspiring other parts of the program delivery infrastructure.
- In the Premiers comments yesterday in a briefing that was run, he was lobbying for everyone, everywhere including himself and standing behind people doing great work.

CRRF

- Continue to receive and process applications. Some delays as the process has moved into Transfer Payment Ontario, however the key message is that MCCSS remains with us on these extraordinary costs.

Vaccination

- Continuation of shifting circumstances in this area. Good news on the incoming supplies. People would have seen the province issuing modest changes to phase 1 of the aging population and to mitigating severe impacts.
- National Advisory Committee on Immunization issued the phase 2 prioritization and identifying congregate care pieces.
- Continue to work formally both with leadership groups and project teams on the health side and informally at the community level. Expecting that formal communication will be provided from the ministry as soon as tomorrow that will affirm the importance of the community based efforts and work people are doing as part of Provincial Network and extended partnerships.
- Regional Teams remain an important support and if any gaps are seen, let Rupert and Christine K. know and they will assist as they are focussed on ensuring the path is smoothed at the community planning process level.
- Suggest that PN continues to advocate for people and make a case for the phase 1 opportunities for clients and seniors that we support.
- Continue to address consents and interacting with partners across government to ensure barriers are not raised around managing risks.

HR Items

- Pleased to be moving forward with: Core Competencies; Middle Management Training; Marketing and Recruitment. Christine K. can respond to questions if there are any around this.
- QAM/Bathing Protocols – Kevin Lockwood is open to whatever approach people think makes sense and/or pulling the QAM Ref Group back together. Rupert is happy to take advice via Michelle or he can take to Kevin directly.
- In person compliance reviews: Average number of non-compliance remains around 2 with bathing protocols being one of these.

Corwin Troje, Manager MCCSS

- Corwin shared the outcomes of a review done for the 'After Hours' Urgent Response. Learned there is value in the afterhours specifically with the DSO role and sharing of information with police. Looking at options to maintain the key elements to continue this process.
- The 'go forward' plan will be to scale back and still maintain connection to after hours to assist with problem solving and mitigation.

Q&A on MCCSS Updates

- Brad shared that last evening he learned that 248 people have bookings for the vaccination in Toronto with 500 consenting. OHT in Toronto said staff had to do this themselves. It is the great work of Bryan and Lorrie on the preparations and readiness that was provided by their team. Thank You!
- Brad asked how solid is our link around the Wage Enhancement initiative as far as anything happening long term that would include our sector. Rupert said very connected and in health they have nothing like the DS-HR Strategy that the DS sector does. Feel there has been very good progress over the past few months and that this is still a very important message to continue.

- Jo-Anne asked if any thought has been given to a really robust community piece on the UR afterhours process to a community development piece where DS works collaboratively with existing resources in place and how we can sit at planning tables with other community partners. Rupert said the opportunity to continue to provide an in person presence is part of what MCCSS sees going forward and there is the ability to leverage and ensure that the lead DSO is aware of this.
- Bryan asked how the IPAC Champion roll out is going? Christine K. shared that this is ongoing. Waiting on the North region and follow up is being done. Another struggle is trying to get consistency between the IPAC hubs and how they are interacting. There is a new lead from Ontario Health which is good news. Continuing to persevere and trying to get MCCSS Hub champion to start with baseline work.
- Janet asked if there any update on the Treasury Board internal audits and this sector. Rupert said he understands the enormous amount of time that this has taken up and that the process has been supportive of the broader agenda around DS Reform and opportunities for all to improve. Janet asked how this will roll out across the sector in way of informing of outcomes. Performance metrics would be important to share as well as how it affects our partner organizations and the objectives of people. Rupert said the outcomes piece is *'is there a way of measuring the intended impact'* and what is the right degree of focus to have on this.

Presentation – Yona Lunskey; Kelly Thai; Natasha Kithulegoda

Vaccination Readiness and Staff Mental Health

- Kelly Thai, Women's College Hospital (Student) virtually shared a presentation 'Developing COVID-19 Vaccine Supports for DSW's – Results from an electronic survey

Survey re: COVID Vaccinations: Kelly Thai, Women's College Hospital (student)

- Sought to understand the beliefs that PSW's/DSW's have in regards to the vaccine
- The survey is an extension of a larger COVID-19 vaccine survey focused on Ontario PSW's
- 3571 people completed the survey; majority were women; white; 11% born outside of Canada; most worked in group homes; 70% are unionized in this sector with full time positions
- 81% of the participants are likely to get vaccinated
- 94% of respondents are concerned about their **clients becoming sick**
- 51% of respondents are scared of getting the vaccine because of its potential **side effects**
- 36% of respondents **do not trust** the vaccine because of its fast development
- 9% of respondents believe that the vaccine is **not necessary** because they are in good health
- Information sources are used most for COVID-19 via Social Media Platforms and Public Health Ontario
- PH messaging and education efforts should focus on:
 - Sharing information that **explains vaccine development and safety.**
 - Messaging that the vaccine despite good health will **protect the health of family members and clients.**
 - Increasing vaccine uptake **among younger adults** working in this sector
 - COVID-19 information targeted towards the sector needs to be easily accessible and shared on trusted platforms such as **Facebook and YouTube** to keep the public up to date as new information comes out.
 - Employees in the sector should be encouraged and supported to have conversations with their **trusted healthcare providers** about the vaccine.

Yona shared her kudos to the DS sector for getting this information out far and wide. Further work will be done and holding focus groups for people that are more hesitant to have the vaccine. What they are hearing in the DS sector is not much different than the health sector.

Q&A

- PN members appreciate the great work and felt there were not too many surprises on the outcomes.
- Was there a cut done on racial or ethnicity around the vaccine? Kelly said this was looked at, however still analyzing this data. Asians were more likely to get the vaccine opposed to those that are European and/or white. Yona said to keep in mind that not all these people were in mind at the time the survey was being shared.
- Rupert is curious if the social media data is cut by age and to the extent that there needs to be a particular demographic targeted. Yona said the youngest age group is a small subset and agree that a focus will need to toward this. Kelly has not looked into the platforms used by 'age groups' however it appears that it is the younger subset that are more hesitant.
- Dave F. share that it has been learning experience for Yona in terms of interacting with the unions.
- This presentation/results will go live closer to the time the vaccine is being rolled out in our sector and can look at a few more questions from people that have been vaccinated.
- Michelle asked if there would be interest in the creation of Social Media Posts and are we looking at a central and consistent message across the sector to share this information. Dean will take the survey info to the Education Group and Yona suggested that the Education Group can work with the folks at the Women's College.

Staff Mental Health - Yona

- Outcomes of the 'Staff Mental Health survey were shared by Yona
- 35710 responded to vaccine survey and 900 of these respondents were approached on the 'mental health' survey with only 170 staff responding
- Representation was almost identical to the 1st survey
- There was an increase in MH in clients and an increase in testing of clients
- Asked staff open ended questions about their worries and the top items were: clients onto having enough to do; reduced social connections; work demands on staff; financial impacts of the pandemic
- Social connections: use of technology and engagement was recognized as beneficial
- Asked staff what would be helpful: ongoing acknowledgement from Employer; team check ins; wage premiums; time off; affordable MH services
- What would be helpful to support MH of people with Disabilities: need to be seen, heard and valued; mental health needs to be supported; need to be funded
- MH and coping with stress: across all stakeholder groups; clear communication within and across sectors; inter-sectoral consultation
- ECHO-ONMH – offering a 6 week curriculum addressing the mental health challenges that this population can face during the COVID-19 pandemic. Topics will include: providing virtual mental health supports, depression and anxiety, evaluating suicide risk, facilitating supported decision-making, emergency preparedness and promoting resilience for people with intellectual and developmental disabilities, caregivers and providers.

- The HCARDD COVID Page has self-help booklets available in English and French; lots of blogs and flyers showing ECHO and Family Caregiver Programs starting in March. There are also vaccine videos, etc.
- Michelle encourages all to circulate the resources and programs.
- Yona shared the attached flyer with Christine who circulated to PN members



Course-Flyer_Series_C
ycle 3 Final.pdf

MCCSS, Yona and Guests, left the meeting at 11:42am

Compensation Survey – Janet/Dave

- Janet shared that she sits at the 'Compensation Sector Committee' via OASIS and the goal is to address the Pay Equity legislation and wage impact on the DS Sector. The Wage Gap and Compensation focus is a big issue and the goal is to obtain good data collection and information with a goal to submit data by end of April 2021.
- Dave F. said this is also capturing information on benefits and trying to focus on what the cost/hr is for organizations' cost of delivery. Hoping this data will be viable and sustainable.
- Terri shared that Great Lakes is doing a review of wages for 'specialist' staff and looking at trying to compare with other 'specialists'. Challenges with filling vacancies and impacts of eligibility assessments and serving our clientele population. She feels having the Labour Relations table look at this would be beneficial. Dave said at this time it is a quick turnaround on the 'wage enhancement' piece and when he and Geoff met with Christine K. of MCCSS it was around the \$25/hr pandemic pay and wanting to get this information into the discussion. Janet and Dave will take Terri's questions back and put onto a future agenda. Janet said the hope is that this would feed into the longer term funding reform. ***Keep this item on the 'full day' meeting agenda***
- Michelle asked for agreement from the PN members to support a \$4K contribution toward the OASIS 'Compensation Survey' being done by IntelliStaff. ***Members are in agreement with the \$4K to assist with covering costs associated with the OASIS Compensation Survey.*** OASIS will also be reaching out to other provincial groups as this shows that this is a provincial initiative. Dave said several years ago a request for PE funding was made and this will also go toward this initiative.

Other

Social Media: Michelle informed members that she would like to put forward a budget of \$3K maximum to provide 'sharable messaging' via Social Media for Dean to work with. Members are in agreement with this. Bryan supports, however wants to ensure this can be co-branded by Public Health should we wish to. Members agree.

ConnectAbility & Real XChange – Ann-Marie

- Ann-Marie shared that there is now a way to order hardcopies of 'plain language' resources on RXC. The self-help books can be arranged in bulk ordering to agencies. Connect with Ann-Marie if interested.

- In regards to RXC, there are continuous emails going out from SPPI. The goal is to send a separate email every 2 weeks around highlights and resources to keep the momentum going around identifying 'key and/or new' additions to the site. All are encouraged to connect with Ann-Marie if you would like anything highlighted .

PN-HR – Eugene

DS-HR Forum – Ann-Marie

- Registration is closed as of yesterday; over 400 people attending

MCCSS Funding re: PN HR

- Eugene shared that there is funding available in the range of \$200K-\$300K for work in the PN HR area around mental health. Have some ideas that will be put forward to MCCSS at the end of next week. Heard from CAMH and looking how we can leverage these resources, etc.
- Michelle will put together some information with assistance from PN around mental health, partnerships, etc. Looking at a train the trainer model to assist with encouraging organizations to have a health and wellness training in their organizations, etc. More to come on this as we look at leveraging these resources. Michelle had a call with Yona prior to this meeting and details are being worked out and hoping to meet next week with the Ministry to continue to flush out.

Co-Creation of Community of Practice – Jo-Ann/Chris B.

- Jo-Anne shared that virtual supports are being provided and slide decks are being shared via RXC.

People with Developmental Disabilities and LTC – Shawn

- Work continues with seniors and LTC around inappropriate placement
- Guideline for flowing people from DS into LTC were updated in 2017. No similar guidelines support 'aging in place'. Looking at research led by REENA around this.
- If anyone on this call is actively supporting a younger person in the sector or know of someone recently placed in LTC please reach out to Shawn.
- Michelle said there was a partnership set up for DS and LTC but not sure where the summary data would sit. Monique may have some of the stats around this and could connect Shawn her and some of the other agencies.

Emerging Issues/Questions – All Members

Rapid Testing-COVID

- Ann B. - Confirmed that in her area that DSW's can train and administer COVID tests/ rapid testing. If organizations are looking to do this, Ann can share information with you.
- Eugene shared that there have been conversations within Christian Horizon's and he has been asked to be part of this in collaboration with other organizations where someone goes from setting to setting and administers the 'rapid testing'.
- Michelle had a conversation with Rupert around this as Durham and HKPR have a contract with VON and the nursing staff, however VON has not been doing anything around this. Therefore, looking at what investments can be done to set up mobile rapid testing and a consistent approach.

- Ann B. said it has been difficult to collaborate with their local PHU as her regional office is asking about costs and who will pay, etc. Sunbeam and Ann's organization have been accepted by MOH for the first round as 'early adopters'. Now hearing that a whole new EOI needs to be done.
- Michelle suggested that Ann B. put a quick 'cheat sheet' together and Ann is good with this. Eugene said there are a lot of people invested so let's make sure we bring this back. SPPI were also interested in this. Bryan, Lorrie, Dean, and Michelle have a call with Rupert tomorrow and can discuss this further around collaboration with organizations as this is also Rupert's desire to have collaboration and a seamless process for testing in the simplest way possible.

Next Calls/Meetings:

- PN ***Briefing calls:*** March 10 & 17, 2021 at 2:00 p.m.
(both have been scheduled on your calendars)

Adjournment: 12:30pm