

# PORCUPINE HEALTH UNIT

## Medical Officer of Health Report to the Board of Health



**We Are Public Health - Nous sommes la santé publique**  
σαα᾿ βααβΓΔΕ᾿ ΓΔΛΠΡ·Δ᾿ ΓΓ·∇ Δ·∇σβ᾿ ΔΓ

Prepared by:  
Dr. Lianne Catton  
Medical Officer of Health – Chief Executive Officer  
March 25, 2021

## MEDICAL OFFICER OF HEALTH UPDATE

### PHU COVID-19 RESPONSE

#### Porcupine Health Unit Status

*This table was updated on **Thursday, March 25, 2021, at 10:30 a.m.***

<b>Total Tests Completed*</b>	81,522
<b>Number of cases**</b>	347
<b>Active cases</b>	3
<b>Out of region cases</b>	0
<b>Resolved***</b>	308
<b>Recovered</b>	319
<b>Deceased</b>	25

\*Of which PHU is aware. Data has a 2-day lag and is extracted from the Ministry of Health VA Tool.

\*\*Number of confirmed cases, to date, including active, out of region, and resolved.

\*\*\*Number of recovered cases plus the number of deceased cases.

Testing data includes testing from community assessment centres and other health care settings, as well as targeted surveillance initiatives, such as in long-term care homes. Data is current with a 2-day lag.

The PHU is currently in the yellow-protect zone of the Provincial Framework. Regardless of colour or level, ongoing action and vigilance are required to limit potential impacts of another wave, further tragic outcomes, and especially to limit any potential spread of Variants of Concern (VOCs). Significant increases seen in previous weeks within other Northern regional health units and presence of variants of concern – PHSD in Lockdown, THU in yellow, NBPSDHU in yellow.

A class order under Section 22 of the HHPA came into effect on Friday February 26th. This requires individuals to self-isolate as per provincial guidance and PHU recommendation when individuals are required to isolate based on symptoms, being a case, or an identified high risk or close contact. This has been done in other regions across the province. Enforcement measures would always be a last resort as the team works with individuals to ensure they understand, and that they have the supports necessary to remain in isolation as required. Examples include but are not limited to groceries and prescription medication.

#### Current Provincial Status

The COVID-19 Response Framework provides a regional approach based on local context to adjust and tighten public health restrictions in response to COVID-19 trends, surges, and waves in their areas. The framework categorizes public health unit regions into five levels: Green-Prevent, Yellow-Protect, Orange-Restrict, Red-Control, and Lockdown being a measure of last and urgent resort.

Numbers continue to stabilize somewhat however there is much caution and concern as the numbers of positive screens for VOCs increases and we saw the latest modelling predicts another surge and with predominantly VOC.

## MEDICAL OFFICER OF HEALTH UPDATE

### PHU COVID-19 RESPONSE (cont'd)

#### Current Provincial Status (cont'd)

##### Provincial trends:

- Outbreaks have occurred in workplaces, schools, and long-term care facilities.
- Often staff break and lunch time are higher risks, as are informal times before or after sports or events or week.
- Continue to see private social gatherings a significant source of transmission.

##### Opportunity to learn from these trends in transmission elsewhere and prepare locally

- Limit close contacts to household members.
- Continue to support and promote PH measures in all settings.
- Expanded support for businesses and workplaces – implementation of the measures.
- Ongoing IPAC support for LTCH, RH and congregate living settings.

#### Vaccine Update

- Everyone is a priority and will have the opportunity to receive a vaccine if they consent to, however, there is not enough vaccine to immunize everyone at the same time. The PHU is following the Provincial and Ministry Guidance and working with community partners to identify individuals at highest risk of infection and severe illness and outcomes and to those who work in high-risk populations and vulnerable people. Vaccination is dependent on the supply of vaccines, and the provincial framework is implemented locally in an ethical and equitable manner across our vast geography.
- The PHU is currently in Phase 1 of the province's COVID-19 Vaccine Distribution Plan. Health Unit regions across the province are in different stages within Phase 1 or within the province's COVID-19 Vaccine Distribution Plan. As of March 22, the PHU has provided 7,467 doses of vaccine with 6,712 individuals receiving their first dose and 755 individuals have received two doses. The PHU continues to use Moderna and is prepared to receive and utilize other vaccines should the need or opportunity arise. All vaccines are safe and effective, and Moderna is a good option for the PHU due to implications for storage, handling, and the significant travel across the PHU.
- This does not include Operation Remote Immunity (ORI) which has been a tremendous success in vaccinating communities across the James and Hudson Bay Coast, in collaboration with ORNGE, WAHA and community partners. This initiative includes Moosonee and PHU staff has been working with these and other local partners to vaccinate community members in Moosonee.
- Vaccine Clinics have been provided across the region for the following groups in Phase 1:
  - Long term care Home (LTCH) and High-risk retirement home residents (HRRH), and First Nation Elders – first and second dose clinics provided.
  - Alternative Level Care (ALC) patients with a confirmed transfer to a LTCH, RH or other congregate living, as well as ALC patients who are eligible based on age.

## MEDICAL OFFICER OF HEALTH UPDATE

### PHU COVID-19 RESPONSE (cont'd)

#### Vaccine Update (cont'd)

- Highest Priority Health Care Worker, followed by Very High priority Health Care Workers, in accordance with the Ministry of Health's guidance on Health Care Worker Prioritization.
- Adults 80 years of age and older.
- Staff, residents and caregivers in retirement homes and other congregate care settings for seniors (i.e., assisted living).
- Adults who are recipients of chronic home care services.
- Highest priority health care workers in accordance with the Ministry of Health's guidance on Health Care Worker Prioritization.
- Indigenous adults in First Nation communities as well as urban Indigenous adults
  - An urban Indigenous clinic in Timmins at the Mountjoy arena on March 17 went extremely well. This clinic was a collaborative effort, in partnership with Misiway Milopemahtesewin Community Health Centre, Metis Nation of Ontario, Mushkegowuk Council, Wabun Tribal Council, the Timmins Native Friendship Centre and other partners.
- Vaccine clinics are planned or upcoming for the following groups:
  - Very High Priority, High and moderate priority health care workers in accordance with the Ministry of Health's guidance on Health Care Worker Prioritization
  - Urban Indigenous adults 18+
  - 1<sup>st</sup> dose for individuals over 18 in First Nation communities
  - Ongoing eligibility for all phase 1 priority groups continues for clinics
- Although the province has announced vaccine clinics for adults who are 75 years and older yesterday, the PHU is not scheduling clinic for this age group yet. Once more vaccine is received and groups in Phase 1 have been vaccinated, the PHU will move to Phase 2 of the plan, starting with the adults who are 75 years and older.
- PHU Vaccination Program Planning:
  - In collaboration with the Regional Advisory Task Force, decisions about the sequencing of vaccine distribution throughout the district continues within each phase and each population group identified by the provincial government to align with the principles of Ontario's COVID-19 Vaccine Distribution Task Force's Ethical framework for COVID-19 vaccine distribution.
  - Continued co-development of vaccine program with Taykwa Tagamou, Mattagami, Wahgoshig, Hornepayne and Constance Lake First Nations.
  - The COVID-19 Vaccine Urban Indigenous Engagement table continues to meet to plan meaningful engagement and mindful access to vaccination across the region for all.

## MEDICAL OFFICER OF HEALTH UPDATE

### PHU COVID-19 RESPONSE (cont'd)

#### Vaccine Update (cont'd)

- Planning continues for more mass immunization clinics throughout the health unit district in anticipation of increased vaccine deliveries and broader eligible populations.
- Community partner support remains key for the success of the vaccine program across the region and will enable ongoing increased capacity at clinics.

Pharmacies in Southern Ontario are giving AstraZeneca to adults who are 60 to 64 years old. The plan is to expand this initiative to the rest of Ontario. There are no pharmacies in the PHU region at this time, but we do expect expansion of this into the North and look forward to this added opportunity for vaccine access in our region.

Ontario, based on the strong recommendations from the National Advisory Committee on Immunization (NACI), is extending the timeline for the second dose of vaccine up to four months after the first dose for most groups. At this time, Long-term care home, retirement home, Elder Care residents and Assisted Living facilities as well as remote and isolated First Nations communities will continue to receive a second dose using the previously recommended interval. All health units and regions must follow the direction provided for dosing intervals. Extending the interval between doses for up to four months will allow Ontario to rapidly accelerate its vaccine rollout and maximize the number of people receiving a first dose. Evidence suggests this will result in a reduction in infections, symptomatic disease, hospitalization, and ICU admissions.

#### Communications

Continued daily updates and key messages being shared on social media channels in French and English, as well as through email lists. The PHU continues to invite community partners and municipalities to share this information, updates, and key messages within their channels, either by sharing PHU posts and emails directly; or through the development of their own messages with the information provided.

Regular media videoconference updates are planned every two weeks and additional times as needed to address urgent items. Otherwise, pertinent updates, trends, local data and updated guidance and recommendations are provided through weekly teleconferences hosted by the PHU and also at local emergency control group/pandemic response tables with municipalities and Indigenous communities across the region.

#### Case Bulletin Updates

Epidemiology summaries continue to be posted weekly, and there will be a weekly post sharing pertinent trends from the PHU, other health units and the province overall. Protection of personal health information remains a critical role of the PHU throughout the pandemic for all cases and contacts. Any pertinent information regarding a public health risk or exposure is shared as deemed necessary. Again, community members are reminded of the need to follow the measures to reduce the risk and act as though exposure is possible and probable every day with every interaction, regardless of case announcements.

## MEDICAL OFFICER OF HEALTH UPDATE

### PHU COVID-19 RESPONSE (cont'd)

#### Contact Tracing

PHU case and contact tracing team (CCM) capacity has been increased to ensure ongoing timely follow up with cases for investigation and contact tracing. The PHU continues to meet provincial targets of reaching cases and close (high risk) contacts within 24 hours over 90% of the time. The addition of the provincial CCM database has improved efficiency for record keeping and reporting. The PHU continues to staff two shifts, 7 days a week to respond to the needed response to cases. Availability of staff to respond to the lab results remains critical in controlling the spread of covid-19 in PHU communities.

#### Schools

The PHU school team continues to work closely with all schools through their principals. Screening protocols for students and parents, return to school protocol for parents and schools, and ongoing education regarding active screening for school staff and teachers continues to be shared.

School nurses have been visiting schools to conduct a walk-through and review the School Infection Prevention and Control (IPAC) checklist from Public Health Ontario (PHO) and answer questions and share opportunities to strengthen measures that reduce the risk for the school community. This proactive walk-through was offered to all schools, and so far, 22 have been conducted. In addition to 9 more formal IPAC assessments with both the school nurse and a public health inspector in response to cases.

Dr. Catton and the manager of the school team continue to host weekly teleconferences with Dr. Corneil from Timiskaming Health Unit and their school lead, and Directors of Education (DOE) from all Boards of Education across the PHU. This continues to be an excellent opportunity to share pertinent trends, updated guidance, answer questions and review concerns, while ensuring consistency. There will be another communication shared in collaboration with all school boards across the PHU shortly.

#### COVID-19 In the Workplace

The workplace team continues to engage with chambers, BIA's, workplaces, and businesses across the PHU via weekly email blasts, ongoing social media posts and resources shared on the website. There is tremendous gratitude for the ongoing work and sacrifices in implementing the precautions to protect staff, clients, customers, and communities.

#### COVID-19 INFECTION PREVENTION AND CONTROL (IPAC)

Ongoing weekly meetings with Acute and primary care partners; as well as LTCH/RH across the region include review of recommendations, guidance, and ongoing strategies to strengthen IPAC measures. Audits, review of PPE, donning and doffing, public health measures have all been recommended as ongoing response to the pandemic and preparation for other waves. Hiring and program development planning for the IPAC Hub and Spoke Program is ongoing.

## MEDICAL OFFICER OF HEALTH UPDATE

### PHU COVID-19 RESPONSE (cont'd)

#### PHU Staff Support

The PHU remains committed to the precautions to protect all staff and clients, and appreciates the ongoing commitment to these measures, policies, and protocols in all PHU offices. Weekly all staff videoconference updates continue. Regular review of the public health measures in offices continues.

These measures remain:

- Daily screening via the email survey sent to all staff and staying home with any symptoms;
- wearing masks - whenever up from personal workspace, and especially anytime distancing is a challenge; and always in public spaces of the PHU;
- distancing a minimum of 2m from others, including at break and lunch times;
- increased use of electronic meeting options;
- following PPE policies for client interactions;
- daily cleaning of workstations;
- enhanced cleaning overall;
- frequent handwashing;
- cough and sneeze etiquette;
- increased staff working from home, reducing numbers in offices;
- staggering lunches and breaks;
- limits for numbers in rooms; posters stickers and visual cues for distancing and masking in all areas.

The management team continues to work diligently to support all PHU team members throughout the pandemic. The professionalism of all team members to respond to the ongoing pandemic - with extra hours, evening and weekend work, frequent changes in what they do, where they work, and how work is done at the PHU – has been incredible and is so greatly appreciated. Their dedication to protecting the population throughout this time is immeasurable. However, there is a recognition of the toll this has for the team, similar to all sectors and all PHU communities. Supporting mental health and wellness is important and continues to be a focus for the team, and a workplace wellness committee continues to work to support the team.

### ONTARIO PUBLIC HEALTH STANDARDS

While the ongoing response to the COVID-19 pandemic and now the Vaccine program continue to demand increasing staff resources, the PHU team is also responding to other urgent and emergent public health protection issues and work continues in many other public health programs.



## MEDICAL OFFICER OF HEALTH UPDATE

### ONTARIO PUBLIC HEALTH STANDARDS (cont'd)

#### Environmental Health

Public health inspectors continue to respond to complaints and complete routine compliance inspections in settings public health is responsible for such as personal services settings, food service settings. However, there is also increased demand with respect to complaints related to COVID-19 regulations and measures in settings across the region. There is ongoing work meeting the standards for health protection.

#### Dental Services

- Services continue for the Fluoride Varnish Program and staff have seen 27 children in January.
- Ontario Seniors Dental Care Program (OSDCP) continues to grow and support service provision.
- Most dental staff still providing COVID-19 response support on the phone lines, vaccine delivery and CCM.

#### Opioid Response

There continues to be an internal team responding to the ongoing opioid crisis and working on the broader drug strategy and opioid response with partners.

The Opioid Emergency Response Task Force and the emergency response plan continues to serve the region well, has provided timely information to partners and the public across the region, and continues to be adapted as need to support respond to this ongoing emergency in this region. The PHU continues to share alerts widely and monitor closely the local and provincial trends, local data is shared publicly on the PHU website. Social media posts continue several times a week in French and English to promote mental health, reducing stigma, overdose prevention, recognition as well as access to and use of naloxone.

Continue to expand distribution of naloxone across the region with other agencies and partners – includes support for policy development, training for staff as well as client use, other harm reduction messages and record keeping and reporting. Alerts from other regions regarding increases in deaths related to a black or maroon coloured fentanyl have been shared and the region remains in a state of enhanced surveillance.

The team continues to work in the pillars of prevention, harm reduction, and emergency response and is supportive of the important ongoing work in addictions and treatment services with community partners. It is hoped that all of these pillars will come together and further contribute to a comprehensive community drug strategy, so integral to long term planning to address substance use across the region.



## MEDICAL OFFICER OF HEALTH UPDATE

### **ONTARIO PUBLIC HEALTH STANDARDS** (cont'd)

#### Opioid Response (cont'd)

The Timmins and Area Drug Strategy Steering Committee (TADS) met earlier this month to continue to review the process of drug strategy development, priorities, and next steps, recognizing that while the opioid crisis is a public health emergency, the interconnectedness of contributing factors requires a much more comprehensive and multi-sector approach with many partners. Discussions and planning continue with the sub-group tables, which includes overdose prevention/consumption treatment site/safe supply, as well as an Anti-stigma group.

#### COVID-19 Expenses Human Resources

Continues to be monitored closely and reported to Ministry as required. This includes Case and Contact Management; salaries and benefits; other COVID Related Expenditures (Travel, Supplies/Equipment/Communications/Other Operating), and COVID-19 Vaccine program related expenses.

#### Human Resources

The demand for human resources required to address all this work is tremendous. The PHU continues to look to expand the team for the ongoing and increasing needs for the COVID-19 response, these ongoing public health program needs, and the growing COVID-19 vaccine program.

Respectfully Submitted,  
Lianne Catton, M.D., CCFP-EM, MPH  
Medical Officer of Health/Chief Executive Officer  
Porcupine Health Unit