



Privacy Office
Legal Services
Centennial 1-031
1276 South Park Street
Halifax NS B3H 2Y9
Telephone: (902)473-2869
Fax: (902)473-7850

July 23, 2020

Lucas Wide

Sent via email

Dear Lucas Wide:

Re: Application Received and transferred – OUR FILE# NSHA-2020-22 and 2020-23:

On May 14, 2020, Nova Scotia Health Authority (NSHA) received your request under the Freedom of Information and Protection of Privacy (FOIPOP) Act for the following records:

2020-22

all records, documents and communications related to COVID-19 outbreak at Northwood Manor in Halifax between March 1 and May 4 2020

2020-23

all records, documents, communications related to re-assignment of workers from unit 8.4 of Halifax Infirmary to Northwood Manor in Halifax between March 1 and May 4 2020.

Attached / Enclosed, please find a copy of the records located in response to your request. Portions of these records have been withheld pursuant to sections 14 (advice to public body), 16 (solicitor-client privilege), 17 (financial or economic interests), and 20 (personal information), 212 (confidential information) of the FOIPOP Act. We are now closing your application with our office.

Should you have any questions or comments, please do not hesitate to contact me at the address or telephone number provided above.

You have the right to seek a review with the Review Officer within 60 days of receiving this decision. Complete details of the process are outlined on the website of the Office of the Information & Privacy Commissioner: <https://foipop.ns.ca/request-a-review>

Sincerely,

Fola Adeleke

For: The Privacy Office
Nova Scotia Health Authority

c/c: to file

From: [Smith, Alexandra \(Health\)](#)
To: [LeBlanc, Angela](#); [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); [Purcell, Angela L](#); [Howlett, Todd](#); [REDACTED] [Cruickshank, Cindy J](#); [REDACTED] [Knowles, Ruby M](#); [Lagasse, Jeannine](#); [Elliott-Lopez, Vicki](#); [Murphy, Matthew](#); [Monroe, Randi](#); [REDACTED] [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#);
Cc: [Melvin, Kate](#); [REDACTED]
Subject: article referenced on call
Date: Saturday, May 2, 2020 2:26:52 PM

https://www.thechronicleherald.ca/news/ns-government-delayed-implementing-federal-covid-19-guidelines-for-long-term-care-homes-444709/?fbclid=IwAR0NsRKVbLCWssCfb5diiVceAZWCH_ACpxYmmL0lOSzfltt-fm1At7c8oIE#Xqze-rj795g.twitter

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

From: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>

Sent: April 30, 2020 4:05 PM

To: LeBlanc, Angela; McCormick, Bethany; Zwerling, Isabelle; Rockwood, Kenneth; Rawding, Patsy A; Tschupruk, Cheryl; Miletic, Natalie; Carr, Brendan; Clarke, Barry; Connell, Katherine; Hawkesworth, Theresa; McVeigh, Wendy; Alexiadis, Maria; Stevenson, Colin; Stevens, Susan; Tate, Natalie; Elliott Rose, Annette; MacDonald, Madonna; Purcell, Angela L; Howlett, Todd; [REDACTED] Cruickshank, Cindy J; Smith, Alexandra (Health); [REDACTED] Knowles, Ruby M; Lagasse, Jeannine; Elliott-Lopez, Vicki; Murphy, Matthew; Monroe, Randi; [REDACTED] Flinn, Jill; MacDonald, Tammy; Sullivan, Vickie; Proffitt, Joshua G; [REDACTED] 'Natasha Handspiker'

Cc: Melvin, Kate; Margaret Szabo; Leslie Bellefontaine; Bernadette Mitchell-McDonald; Linda Verlinden; Murray Stenton; Terri Sarty; Lisa Carr

Subject: NSHA and Northwood Joint Meeting

When: May 2, 2020 2:00 PM-2:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 9059011

As per discussion today (April 30), we will have one check-in meeting per day in the afternoon this weekend.

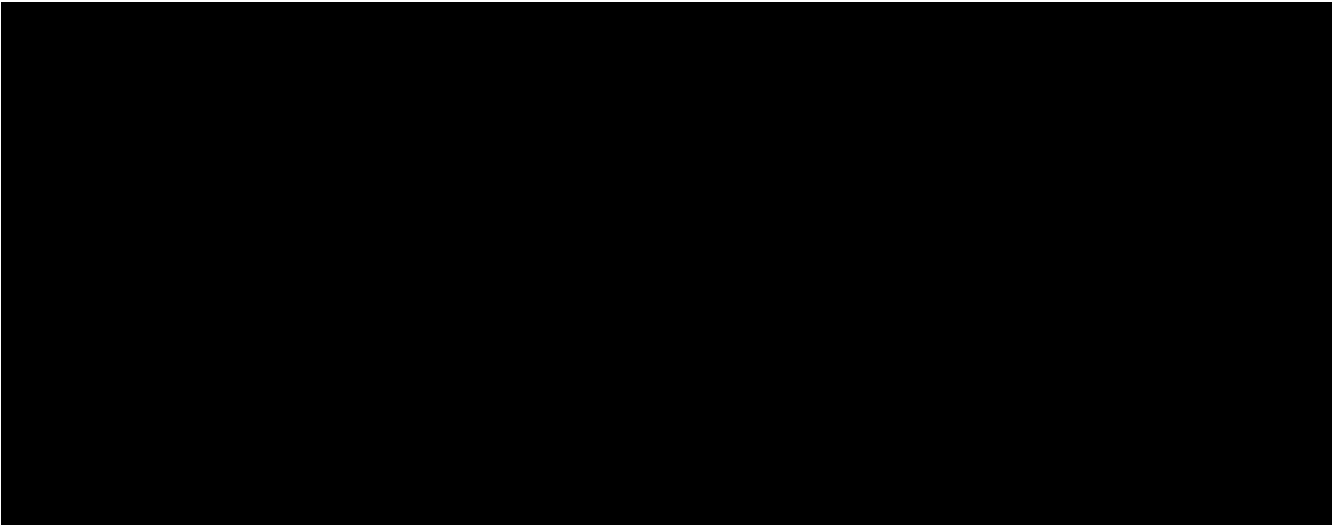
[REDACTED]
[REDACTED]
Mod: Angela LeBlanc

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From: [Stevens, Susan](#)
To: [Carr, Brendan](#)
Subject: confidential
Date: Saturday, April 18, 2020 10:50:56 PM

s 21 (b) (c) (i)



See you in the morning
Susan

From: [McCormick, Bethany](#)
To: [Tschupruk, Cheryl](#); [LeBlanc, Angela](#); [McVeigh, Wendy](#); [Bransfield, Angela](#); [Rodier, Pascal](#); [Hawkesworth, Theresa](#)
Cc: [Stevens, Susan](#); [Tate, Natalie](#); [Sullivan, Vickie](#); [Monroe, Randi](#)
Subject: Emailing - COVID19 Situation Report, Northwood and NSHA - April 19 2020.pdf
Date: Sunday, April 19, 2020 8:18:26 PM

For you information

Attached is the situation report for Northwood and NSHA check-in today.
I am confirming the process to share this with Northwood in the morning.

Bethany
NSHA



Bethany McCormick, BSc.OT., MSc, CHE, CFHI Extra Fellow
Senior Director, Strategy, Planning & Performance
25 Bay Street Antigonish,
Office: 902-867-4500 ext 4257
Cell: [REDACTED]
bethany.mccormick@nshealth.ca
www.nsha.ca

Administrative Assistant:
Natalie Tate, 902-867-4500 ext 4718
natalie.tate@nshealth.ca

From: [Emergency Operations Center, NS Health Authority](#)
To: [MacIsaac, Eileen](#); [Grant, Krista L](#); [Hawkesworth, Theresa](#)
Cc: [Stevens, Susan](#); [MacDonald, Madonna](#); [Boutilier, Nicole](#)
Subject: FW: Article-Northwood was
Date: Saturday, May 2, 2020 2:39:30 PM

Plus Eileen who is comms today – for our awareness
Plus Madonna and Nicole FYI

From: Emergency Operations Center, NS Health Authority
Sent: Saturday, May 2, 2020 2:35 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>
Cc: Stevens, Susan <susan.stevens@nshealth.ca>
Subject: FW: Article-Northwood was

I understand, Janet and NW comms, with work with CNS to proactively prep a response to this article.

From: Smith, Alexandra (Health) [<mailto:Alexandra.Smith@novascotia.ca>]
Sent: Saturday, May 2, 2020 2:26 PM
To: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Zwerling, Isabelle <Isabelle.Zwerling@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>; Miletic, Natalie <Natalie.Miletic@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Clarke, Barry <Barry.Clarke@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Tate, Natalie <Natalie.Tate@nshealth.ca>; Elliott Rose, Annette <Annette.ElliottRose@iwk.nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Purcell, Angela L <Angela.Purcell@novascotia.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; [REDACTED] <[REDACTED]> Cruickshank, Cindy J <Cindy.Cruickshank@novascotia.ca>; [REDACTED] <[REDACTED]> Knowles, Ruby M <Ruby.Knowles@novascotia.ca>; Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>; [REDACTED] <[REDACTED]> Flinn, Jill <Jill.Flinn@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>; [REDACTED] <[REDACTED]> 'Natasha Handspiker' <[REDACTED]>
Cc: Melvin, Kate <Kate.Melvin@nshealth.ca>; Margaret Szabo <[REDACTED]> Leslie Bellefontaine <[REDACTED]> Bernadette Mitchell-McDonald <[REDACTED]> Linda Verlinden <[REDACTED]> Murray Stenton

<[REDACTED] Terri Sarty <[REDACTED] Lisa Carr <[REDACTED]

Subject: Article-Northwood was

https://www.thechronicleherald.ca/news/ns-government-delayed-implementing-federal-covid-19-guidelines-for-long-term-care-homes-444709/?fbclid=IwARONsrKVbLCWssCfb5diiVceAZWCH_ACpxYmmL0IOSzfltt-fm1At7c8oIE#.Xqze-rj795g.twitter

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From: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>

Sent: April 30, 2020 4:05 PM

To: LeBlanc, Angela; McCormick, Bethany; Zwerling, Isabelle; Rockwood, Kenneth; Rawding, Patsy A; Tschupruk, Cheryl; Miletic, Natalie; Carr, Brendan; Clarke, Barry; Connell, Katherine; Hawkesworth, Theresa; McVeigh, Wendy; Alexiadis, Maria; Stevenson, Colin; Stevens, Susan; Tate, Natalie; Elliott Rose, Annette; MacDonald, Madonna; Purcell, Angela L; Howlett, Todd; [REDACTED] Cruickshank, Cindy J; Smith, Alexandra (Health); [REDACTED] Knowles, Ruby M; Lagasse, Jeannine; Elliott-Lopez, Vicki; Murphy, Matthew; Monroe, Randi; [REDACTED] Flinn, Jill; MacDonald, Tammy; Sullivan, Vickie; Proffitt, Joshua G; [REDACTED] 'Natasha Handspiker'

Cc: Melvin, Kate; Margaret Szabo; Leslie Bellefontaine; Bernadette Mitchell-McDonald; Linda Verlinden; Murray Stenton; Terri Sarty; Lisa Carr

Subject: NSHA and Northwood Joint Meeting

When: May 2, 2020 2:00 PM-2:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 9059011

As per discussion today (April 30), we will have one check-in meeting per day in the afternoon this weekend.

[REDACTED]
Mod: Angela LeBlanc

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From: [Sullivan, Vickie](#)
To: [Connell, Katherine](#); [Rawding, Patsy A](#); [Flinn, Jill](#); [Monroe, Randi](#)
Cc: [McVeigh, Wendy](#); [Stevens, Susan](#)
Subject: FW: FOR FEEDBACK RE: Northwood MOA (20-04-18-01)
Date: Monday, April 20, 2020 6:02:37 PM
Importance: High

Please see attached MOA for review and feedback. It is to cover our arrangements with Northwood. I think it is broader than the provision of acute care within the facility and would agree for practices typically done in acute care, we would follow NSHA policies and procedures, and provide direction for same. We are also providing care that would typically be provided in long term care so think we would take guidance from NW – for example, medication admid and documentation believe we are using their systems. How do we capture this?

Kitty & Patsy – can you take a look and let me know your thoughts? Need to get this back in am, so would appreciate your feedback by 9 am.

Susan and Wendy – think you are also reviewing, so would welcome your thoughts

Vickie

S 16

From: Legal Services, NSHA
Sent: Monday, April 20, 2020 4:31 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; Munden, Martina <Martina.Munden@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Legal Services, NSHA <NSHA.LegalServices@nshealth.ca>
Subject: RE: FOR FEEDBACK RE: Northwood MOA (20-04-18-01)



Lesley Sawers | Legal Counsel, Legal Services | Nova Scotia Health Authority

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s 16



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett: (902) 491-5877
Marsham.bennett@nshealth.ca

From: Legal Services, NSHA

Sent: Monday, April 20, 2020 3:27 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; Munden, Martina
<Martina.Munden@nshealth.ca>; Legal Services, NSHA <NSHA.LegalServices@nshealth.ca>

Subject: FOR FEEDBACK RE: Northwood MOA (20-04-18-01)

Importance: High

S 16

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[REDACTED]

Lesley Sawers | Legal Counsel, Legal Services | Nova Scotia Health Authority

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S 16

[REDACTED]

S 16



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
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Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Munden, Martina
Sent: Monday, April 20, 2020 1:33 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Legal Services, NSHA
<NSHA.LegalServices@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Subject: RE: Northwood MOA (20-04-18-01)

S16

General Counsel, Legal Services

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From: Stevenson, Colin
Sent: Monday, April 20, 2020 11:08 AM
To: Munden, Martina <Martina.Munden@nshealth.ca>; Legal Services, NSHA
<NSHA.LegalServices@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Subject: Northwood MOA

S16

Thank you



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877

| Marsham.bennett@nshealth.ca

From: [Sullivan, Vickie](#)
To: [Stevens, Susan](#); [McVeigh, Wendy](#)
Subject: FW: Northwood update
Date: Monday, April 20, 2020 7:03:07 PM

So you are aware of work done today

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: MacQuarrie, Cindy
Sent: Monday, April 20, 2020 5:08 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Casault, Cathy Ann <CathyAnn.Casault@nshealth.ca>
Cc: Connell, Katherine <Katherine.Connell@nshealth.ca>; Hudson, Shawna <Shawna.Hudson@nshealth.ca>
Subject: RE: Northwood update

Thanks for the update Cathy Ann. Vickie and Kitty, IPPL will continue to support this until it is determined that the support is no longer required. In addition to the education plan that is already established, we may want to consider:

1. IPAC Coach program (Sheri R and Tammy MD Co-leading)
2. Access to OP3 (public facing)
3. Access to COVID Hub (public facing)

Cathy Ann, I look forward to receiving updates on how this evolves. Please do not hesitate to reach out if there is anything I can do to assist. Thank you all!!

Sincerely,

Cindy MacQuarrie RN MN
Senior Director
Interprofessional Practice and Learning
Nova Scotia Health Authority
Cell [REDACTED]

From: Sullivan, Vickie
Sent: Monday, April 20, 2020 4:09 PM

non responsive

From: [Baker, Barb](#)
To: [Boran, Jan](#); [DeCoste, Wendy](#); [Delorey, Jennifer](#); [Dollimount, Jill](#); [Doucette, Crissy](#); [Fieldhouse, Paul](#); [Harvey, Monika](#); [Higgins, Jennifer](#); [Kerr, Joyce](#); [Lamb, Margie](#); [Lee-Ross, Melissa](#); [MacLean, Kimberly](#); [McLean, Maureen](#); [Meagher, Angela \(CC\)](#); [Munro, Joanne](#); [Newlands, Jane](#); [Steeves-Dorey, Lexie](#); [Stevens, Suzanne H](#); [Stilwell, Cynthia](#); [Wadden, Paula](#)
Cc: [Latta, Robin](#); [Zwerling, Isabelle](#); [Higdon, Michele](#); [Jenkins, Bob](#); [Keenan, Glenda](#); [McVeigh, Wendy](#); [Scales, Mark](#); [Stevens, Susan](#); [Hawkesworth, Theresa](#)
Subject: FYI: Update on Northwood Family Communication
Date: Wednesday, April 22, 2020 1:18:56 PM

Hi everyone,

Wanted to let you know where we are on the Northwood Family Communication Strategy.

- We are working with a total of 35 callers and have assigned 8 of them as COVID callers (calling family members of residents positive for COVID). In the chart below, the yellow are COVID callers and the green are those assigned non-COVID calls. You'll see not everyone has call assignments yet. We have started (generally) with an assignment of 10 families/residents for each caller.
- The change for us to make COVID calls is based on Northwood's need for support as the numbers have expanded. They have a handful of people making hundreds of calls (including only two nurses making COVID calls on a daily basis).
- Non-COVID callers
 - Were given their lists early this morning and will start making calls today.
 - Will make calls once or twice a week (more if family requests) during regular business hours. After hours/weekend calls needed by the family for this group will be addressed by NW.
 - Time commitment is likely an average one hour a day (if they made the calls all in one day, assuming an assignment of approx. 10).
- COVID callers
 - Will be getting their assignments shortly and also start making calls today.
 - They have been given read-only access to NW's electronic chart (PointClickCare) to have most recent information available before calling the family member/next of kin.
 - They have been directed to document the calls in SEAScape; at a future time, we will have them print/create a report of the notes and send to NW. (NW doesn't need them daily or regularly. They will chart them later.)
 - This group of callers will likely be required to make calls on weekends. (If family indicates they don't need the calls on the weekends, they won't need to.) We have indicated to them to work with their manager on how their time will be managed/covered.
 - Time commitment will be greater as these are daily calls but NW tells us they tend to be pretty quick calls. As with many of our client families, I'm sure the conversations and needs vary. So perhaps an hour a day.
- For both groups of callers, you'll want to stay connected on how much time this is taking them and the impact to their regular caseload.

- I've heard from a couple of you that additional staff have come forward. As you can see, I think we'll be okay for a while. As numbers shift at NW, our call assignments will also shift but I think we'll be fine with the number of people we have. The COVID calls need to be made by RNs which is why we've tracked that.

I have attached the documents I've shared with the callers, FYI. We had an orientation session with all callers yesterday afternoon and another this morning for just the COVID callers. Robin is supporting the coordination and dissemination of daily updates from NW and the balance of call assignments. Isabelle will be the ongoing contact for the callers and you on this; I am just helping to get it up and going. I'll be stepping back soon.

Please let me know if you have any questions.

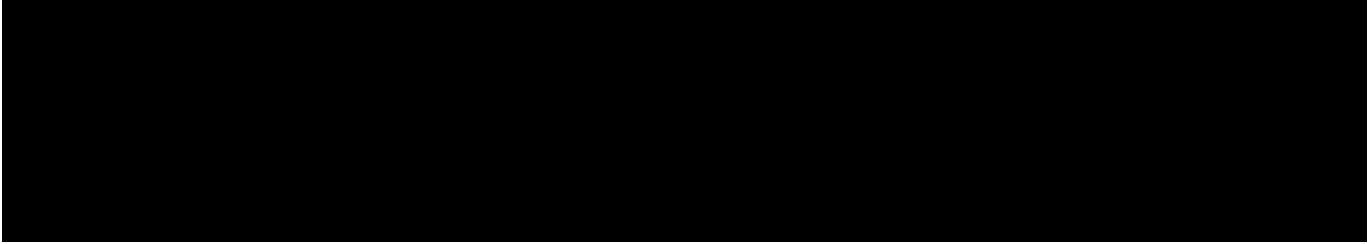
B.

<u>Central Zone</u>	Email	# of Clients assigned	Nurses	Call Assignment
Brenda MacIsaac	BrendaL.MacIsaac@nshealth.ca	<u>9</u>	X	COVID-positive
Andrea Perry	Andrea.Perry@nshealth.ca	-		hold on assigning
Lynda Culley	Lynda.Culley@nshealth.ca	-		hold on assigning
Krista Buchanan	Krista.Buchanan@nshealth.ca	<u>5</u>		non-COVID, initial call group
Heather Leither	Heather.Leither@nshealth.ca	<u>6</u>		non-COVID, initial call group
Marjorie Ryan	Marjorie.Ryan@nshealth.ca	<u>10</u>	X	COVID-positive
Hilary Goulding	Hilary.Goulding@nshealth.ca	<u>6</u>		non-COVID, initial call group
<u>Western Zone</u>		-		
Tracy Bezanson	Tracy.Bezanson@nshealth.ca	-	X	
Sherry Squires-Murphy	Sherry.Squires-Murphy@nshealth.ca	-	X	
Sarah Leathley-Brittain	Sarah.Leathley-Brittain@nshealth.ca	<u>10</u>	X	COVID-positive
Chris Ivany	Chris.Ivany@nshealth.ca	-	X	
Jennifer Hayes	Jennifer.Hayes@nshealth.ca	<u>10</u>	X	COVID-positive

Linda O'Connell	Linda.OConnell@nshealth.ca	<u>10</u>	X	non-COVID
Chantel Cunningham	Chantel.Cunningham@nshealth.ca	-	X	
Tracy Cousins	Tracy.Cousins@nshealth.ca	<u>10</u>	X	COVID-positive
Jennifer Doucet	Jennifer.Doucet@nshealth.ca	<u>10</u>	X	non-COVID
Karine Smith	Karine.Smith@nshealth.ca	<u>10</u>		non-COVID
Karen Bennett	KarenA.Bennett@nshealth.ca	<u>10</u>		non-COVID
Marnie Oatway	Marnie.Oatway@nshealth.ca	<u>10</u>		non-COVID
Eastern Zone	-	-		
Erin McNeil	Erin.McNeil@nshealth.ca	<u>10</u>	X	non-COVID
Kimberly Brown	Kimberly.Brown2@nshealth.ca	<u>10</u>	X	non-COVID
Brenda Burton	Brenda.Burton@nshealth.ca	<u>9</u>	X	non-COVID
Evelyn Doyle	Evelyn.Doyle@nshealth.ca	-	X	
Carolyn Peters	Carolyn.Peters2@nshealth.ca	-	X	
Maxine England	Maxine.England@nshealth.ca	-	X	
Leona Wilneff	Leona.Wilneff@nshealth.ca	<u>8</u>	X	COVID-positive
Brenda Etheridge	Brenda.Etheridge@nshealth.ca	<u>0</u>	X	COVID-positive
Northern Zone	-	-		
Kelda Hagell	Kelda.Hagell@nshealth.ca	-	X	
Karen MacAulay	Karen.MacAulay@nshealth.ca	-	X	
Mary Anne Johnston	MaryAnne.Johnston@nshealth.ca	-	X	
Jennifer Loucks	Jennifer.Loucks@nshealth.ca	<u>9</u>		non-COVID
Ruth Slack	Ruth.Slack@nshealth.ca	-	X	
Shalyn Murphy	Shalyn.Murphy@nshealth.ca	<u>9</u>		non-COVID
Kathy Smith	Kathy.Smith@nshealth.ca	-	X	
Gillian Neilson	Gillian.Neilson@nshealth.ca	<u>0</u>	X	COVID-positive

From: [MacDonald, Madonna](#)
To: [Sullivan, Vickie](#); [Stevens, Susan](#)
Subject: lifted this from another document going through EOC

S 21

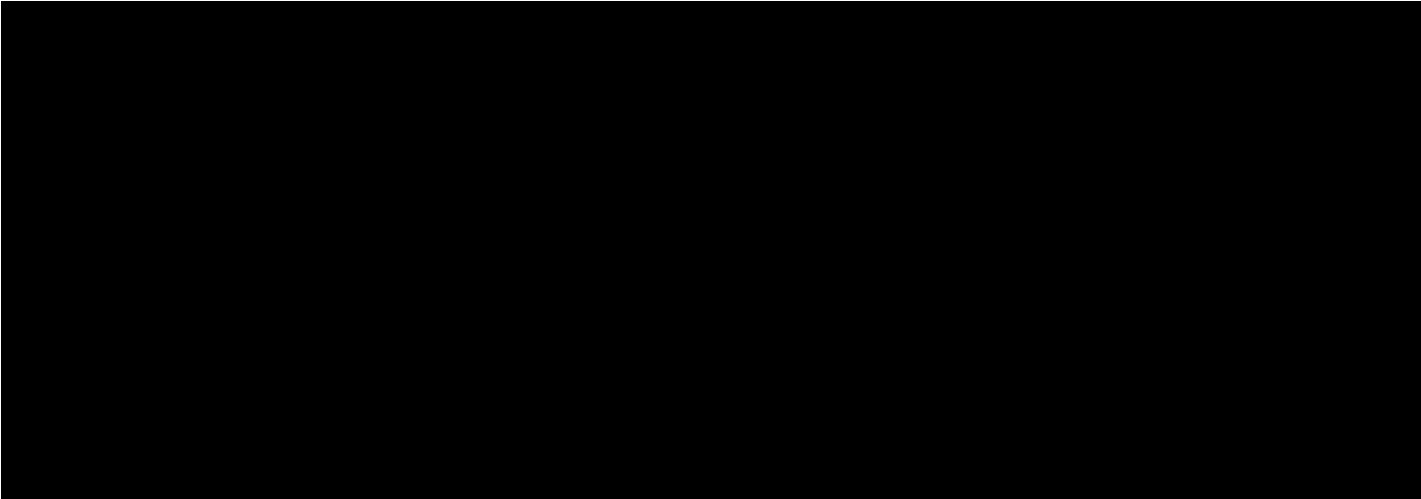



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From: [Sullivan, Vickie](#)
To: [Sawers, Lesley](#); [Legal Services, NSHA](#)
Cc: [Stevenson, Colin](#); [Stevens, Susan](#); [Connell, Katherine](#); [Rawding, Patsy A](#)
Subject: MOA with Northwood.v3
Date: Tuesday, April 21, 2020 11:35:56 AM

S16



Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: 
Email: vickie.sullivan@nshealth.ca

From: [Miletic, Natalie](#)
To: [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L"](#); [Howlett, Todd](#); [REDACTED]; ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [REDACTED]; [Knowles, Ruby M](#); ["jeannine.lagasse@novascotia.ca"](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [Monroe, Randi](#); [REDACTED]; [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#); [REDACTED]
Cc: [LeBlanc, Angela](#)
Subject: MSHA and Northwood Joint Meeting - Situation Update
Date: Friday, May 1, 2020 4:24:07 PM

Good afternoon,

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Our next check-in is at 1400h tomorrow (Saturday)

Kind regards,
Natalie



Natalie Miletic La Delfa
Administrative Assistant to Angela LeBlanc
Enterprise Risk Management & Emergency Preparedness
South West Nova Scotia, Yarmouth Regional Hospital
60 Vancouver Street, Yarmouth NS B5A 2P5
902.742.3542 Ext. 1604 | Natalie.Miletic@nshealth.ca

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From: [McCormick, Bethany](#)
To: [McVeigh, Wendy](#)
Cc: [Stevens, Susan](#)
Subject: Names for Read Only Access to PCC at Northwood.xlsx
Date: Sunday, April 19, 2020 6:36:40 PM
Importance: High

Wendy,

To gain access to the electronic documentation system at Northwood, an email address for each staff member.

I have moved your list into a spreadsheet, please complete the column for email addresses.

This information can be shared with Northwood, and they will set up staff tomorrow am.

The email address for the contacts at Northwood are included in the excel sheet. They will offer an orientation session.

Bethany

From: [LeBlanc, Angela](#)
To: [Emergency Operations Center, NS Health Authority](#)
Cc: [McVeigh, Wendy](#); [Stevens, Susan](#)
Subject: Northwood - request for assistance/guidance
Date: Monday, April 20, 2020 10:31:20 AM

Good morning,

We just had our check-in with Northwood this morning. We will provide a summary by end of day but wanted to reach out with one specific ask. Their Human Resources lead (Caroline) noted a significant concern with their ability to provide support and follow-up for their staff members who are positive and ill. They noted they have some very ill individuals and are concerned about not having the OH resources to check in with those that are at home and in hospital. They are also concerned about the level of acuity/illness with 1-2 hospitalized individuals. I was uncertain re available resources so bringing forward to EOC for guidance.

Thanks

Angela



Angela LeBlanc BScHEd CPHRM

Director, Enterprise Risk Management
& Emergency Preparedness - NSHA
60 Vancouver Street, Yarmouth NS B5A 2P5

Office: 902-742-3542 Ext. 1437 | Cell: [REDACTED]
angela.leBlanc@nshealth.ca

Administrative Assistant:

Natalie Miletic, 902-742-3542 Ext. 1604
natalie.miletic@nshealth.ca

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From: [Stevens, Susan](#)
To: [Stevenson, Colin](#)
Subject: Northwood staffing
Date: Friday, April 17, 2020 11:58:36 AM

Wendy is on a call now with NW. They have 42 positive residents. 160 staff off - not clear if all those are COVID related. MOH is working with them to bring back staff using work self-isolation. They urgently need 15 RNS and LPNs for 12 hour nights and 6 hour 12 hour days. They also need 12-15 CCAs for 12 hour days and nights.



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Senior Director, Continuing Care
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susan.stevens@nshealth.ca
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From: [Stevenson, Colin](#)
To: [Boutillier, Nicole](#); [MacDonald, Madonna](#); [Sullivan, Vickie](#); [Stevens, Susan](#); [Bond, Paula](#); [Tomblin Murphy, Gail](#); [Carr, Brendan](#); [Howlett, Todd](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [McCormick, Bethany](#); [LeBlanc, Angela](#); [Grant, Krista L](#); [Spinney, Derek](#)
Cc: [Emergency Operations Center, NS Health Authority](#)
Subject: Northwood Support / Response
Date: Saturday, April 18, 2020 7:58:25 PM

Northwood Update:

- The Ask:
 - o Want Critical Incident response team to be established; on the ground; co-led with NSHA/Northwood
- Scenario
 - o Outbreak at Northwood – assumption is that vast majority of residents have been exposed; minimum further transmission; but assume that it is widespread; moving from containment to management;
 - o Will need to:
 - Manage care of those that require it – clinical care teams within facility; staffing requirements (clinical requirements and direction); need to escalate the level of care that is required there.
 - Use staff we have trained up already and have them transition to this location for care delivery
 - Medical staff – have 25 physicians in CZ that could step in to support the resident's in facility
 - Step in to provide care on the site – acute medical issues become managed by the NSHA team (operational control)
 - Consider it a ward hospital with 400 beds
 - Support and ancillary services – cleaning; food service (support as required)
 - Logistics management – supplies; PPE; equipment
 - What do they have;
 - What do they need and intake
 - Staffing – there are opportunities to invoke and pull triggers as necessary to allow for direction of staff versus volunteer;
 - Coordination / intake of new staff (Jill and Randi)
 - PSC to support if needed
 - Secondary Site – rooms are established and equipment in process of being moved; determination of who is moving; will start tomorrow morning; (Holiday Inn in Dartmouth); Need to support this.
 - Communications – public and family member response (National PR on deck); will need conduit in to the organization for information and direct

communications support for calling families

What do we need tonight:

1. Medical strategy (Nicole, Maria, Todd)
2. Todd Hatchette re testing of all of Northwood (Nicole to call)
3. Vickie – identify who is needed to support tomorrow on care assessment; bring team members in to help identify and move equipment?
4. Notify legal and insurer (Colin)
5. Notify privacy (Colin)
6. Notify Barry (Maria)
7. Connections on communication – Susan; Theresa; John (connect with comms team at Northwood)
8. Street Address (Wendy)

Tomorrow Focus:

1. Team to assess: CEO; Medical (Maria/Todd); Zone ED (Vickie); IMT Point (Bethany; Pascal; Susan); IPAC; MOH (Claudia); Communications (Krista)

What do we need; What can we bring:

- o Space - Use their board room / ball room for this.
- o Communications – phones; internet; phone numbers
- o Resources to support:
 - Clinical staffing
 - Medical / triage / decision making
 - Staffing support
 - Logistics – supply movement
 - Resident Transfer
 - Communications link to National
- o



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Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: [Tate, Natalie](#)
To: [LeBlanc, Angela](#); [McCormick, Bethany](#); [REDACTED]; [Sullivan, Vickie](#); [Monroe, Randi](#); [Rawding, Patsy A](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [Carr, Brendan](#); [Stevenson, Colin](#); [Rockwood, Kenneth](#); [Alexiadis, Maria](#); [Clarke, Barry](#); "jeannine.lagasse@novascotia.ca"; [Murphy, Matthew](#); [Stevens, Susan](#); [McVeigh, Wendy](#); [Proffitt, Joshua G](#); "[Elliott-Lopez, Vicki](#)"; "[Purcell, Angela L](#)"; "[Smith, Alexandra \(Health\)](#)"; [Flinn, Jill](#); "[Cruickshank, Cindy J](#)"; [REDACTED]; [MacDonald, Tammy](#); [REDACTED]; [Howlett, Todd](#); [Tschupruk, Cheryl](#); [Flinn, Jill](#)
Subject: NSHA and Northwood Joint Meeting - Situation Report
Date: Friday, April 24, 2020 6:50:45 PM

Good evening everyone

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Many thanks,
Natalie



Natalie Tate
Assistant to Bethany McCormick
Senior Director, Strategy, Planning and Performance
Quality & System Performance
25 Bay Street
Antigonish, NS B2G 2G5
Office: 902-867-4500 ext 4718
www.nshealth.ca

From: [Tate, Natalie](#)
To: [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [McCormick, Bethany](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L"](#); [Howlett, Todd](#); ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [Knowles, Ruby M](#); ["jeannine.lagasse@novascotia.ca"](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [LeBlanc, Angela](#); [Monroe, Randi](#); [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#);
Subject: NSHA and Northwood Joint Meeting - Situation Update
Date: Tuesday, April 28, 2020 6:51:46 PM

Good evening everyone,

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Many thanks,
Natalie



Natalie Tate
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Senior Director, Strategy, Planning and Performance
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25 Bay Street
Antigonish, NS B2G 2G5
Office: 902-867-4500 ext 4718
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From: [Tate, Natalie](#)
To: [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L"](#); [Howlett, Todd](#); ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [Knowles, Ruby M](#); [jeannine.lagasse@novascotia.ca](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [LeBlanc, Angela](#); [Monroe, Randi](#); [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#);
Subject: NSHA and Northwood Joint Meeting - Situation Update
Date: Monday, April 27, 2020 6:41:19 PM

Good evening everyone,

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Many thanks,
Natalie



Natalie Tate
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Senior Director, Strategy, Planning and Performance
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Office: 902-867-4500 ext 4718
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From: [Miletic, Natalie](#)
To: [Elinn, Jill](#); [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L"](#); [Howlett, Todd](#); [REDACTED]; ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [Knowles, Ruby M](#); ["jeannine.lagasse@novascotia.ca"](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [Monroe, Randi](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#); [REDACTED]
Cc: [Melvin, Kate](#); [REDACTED]; [REDACTED]; [REDACTED]; [LeBlanc, Angela](#)
Subject: NSHA and Northwood Joint Meeting - Situation Update
Date: Monday, May 4, 2020 4:36:48 PM

Good afternoon,

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Our next check-in is on Tuesday, May 5 at 1400h.

Kind regards,
Natalie



Natalie Miletic La Delfa
Administrative Assistant to Angela LeBlanc
Enterprise Risk Management & Emergency Preparedness
South West Nova Scotia, Yarmouth Regional Hospital
60 Vancouver Street, Yarmouth NS B5A 2P5
.....
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From: [Miletic, Natalie](#)
To: [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L."](#); [Howlett, Todd](#); [REDACTED]; ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [Knowles, Ruby M](#); ["jeannine.lagasse@novascotia.ca"](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [Monroe, Randi](#); [REDACTED]; [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#); [REDACTED]
Cc: [REDACTED]; [eBlanc, Angela](#)
Subject: NSHA and Northwood Joint Meeting - Situation update
Date: Saturday, May 2, 2020 3:58:21 PM

Good afternoon,

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Our next check-in is on Monday, May 4 at 1400h.

Kind regards,
Natalie



Natalie Miletic La Delfa
Administrative Assistant to Angela LeBlanc
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From: [Tate, Natalie](#)
To: [McCormick, Bethany](#); ["Purcell, Angela L."](#); [Howlett, Todd](#); ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [Zwerling, Isabelle](#); [Knowles, Ruby M](#); ["jeannine.lagasse@novascotia.ca"](#); [Rockwood, Kenneth](#); ["Elliott-Lopez, Vicki"](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Murphy, Matthew](#); [LeBlanc, Angela](#); [Monroe, Randi](#); [Carr, Brendan](#); [Clarke, Barry](#); [Flinn, Jill](#); [Connell, Katherine](#); [MacDonald, Tammy](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Sullivan, Vickie](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Proffitt, Joshua G](#); [Stevens, Susan](#); [Elliott Rose, Annette](#)
Subject: NSHA and Northwood Joint Meeting - Weekend Situation Update
Date: Saturday, April 25, 2020 5:28:30 PM

Good evening everyone

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Many thanks,
Natalie



Natalie Tate
Assistant to Bethany McCormick
Senior Director, Strategy, Planning and Performance
Quality & System Performance
25 Bay Street
Antigonish, NS B2G 2G5
Office: 902-867-4500 ext 4718
www.nshealth.ca

From: [Tate, Natalie](#)
To: [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L"](#); [Howlett, Todd](#); ["Cruickshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); [McCormick, Bethany](#); [Knowles, Ruby M](#); ["jeannine.lagasse@novascotia.ca"](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [LeBlanc, Angela](#); [Monroe, Randi](#); [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#); [REDACTED]
Subject: NSHA and Northwood Joint Meeting - Weekend Situation Update
Date: Sunday, April 26, 2020 4:42:14 PM

Good afternoon everyone

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Many thanks,
Natalie



Natalie Tate
Assistant to Bethany McCormick
Senior Director, Strategy, Planning and Performance
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25 Bay Street
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Office: 902-867-4500 ext 4718
www.nshealth.ca

From: [Stevens, Susan](#)
To: [Stevenson, Colin](#); [Carr, Brendan](#)
Subject: NW situation
Date: Friday, April 17, 2020 9:38:40 AM

Vicki Elliott-Lopez reached out to Madonna last night
Vickie Sullivan, Madonna, Wendy and I were on a call last night with Janet Simm
They need to move residents out to create capacity to deal with outbreak
Waiting for meeting with DHW later today to discuss possibilities



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
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Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
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From: [MacDonald, Madonna](#)
To: [Stevens, Susan](#)
Cc: [Sullivan, Vickie](#); [McVeigh, Wendy](#)
Subject: Re: confidential
Date: Thursday, April 16, 2020 9:10:00 PM



Vicki is going to extend the invite to you. Many thanks.

Madonna MacDonald

On Apr 16, 2020, at 9:07 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

For your review and edit

Hi Vicki

Thanks for reaching out about the Northwood situation and proposal. We understand the need for Northwood to create capacity within their north end campus to help contain the outbreak and we want to be part of the discussions to find the best and safest solution to do this. We have had some preliminary discussions this evening and need to better understand the residents and their care needs who are being considered for relocation as this will determine the best environment for them. We would really like to meet with Northwood, DHW and Dr. Strang to better understand what is being contemplate and how we might assist with finding solutions. We understand there is a meeting planned in the morning and I would respectfully ask that members of our acute care and continuing care teams be invited to participate.

Thanks

Madonna

<image001.jpg>

Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA
Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: [MacDonald, Madonna](#)
To: [Sullivan, Vickie](#)
Cc: [Stevens, Susan](#); [McVeigh, Wendy](#)
Subject: Re: confidential
Date: Thursday, April 16, 2020 9:16:05 PM

The meeting is for two tomorrow now.

Madonna MacDonald

On Apr 16, 2020, at 9:09 PM, Sullivan, Vickie <Vickie.Sullivan@nshealth.ca> wrote:

Looks good Susan – one small edit below

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stevens, Susan
Sent: Thursday, April 16, 2020 9:07 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: confidential
Importance: High

For your review and edit

Hi Vicki

Thanks for reaching out about the Northwood situation and proposal. We understand the need for Northwood to create capacity within their north end campus to help contain the outbreak and we want to be part of the discussions to find the best and safest solution to do this. We have had some preliminary discussions this evening and need to better understand the residents and their care needs who are being considered for relocation as this will determine the best environment for them. We would really like to meet with Northwood, DHW and Dr. Strang to better understand what is being contemplated and how we might assist with finding solutions. We understand there is a meeting planned in the morning and I would respectfully ask that

members of our acute care and continuing care teams be invited to participate.

Thanks

Madonna

<image001.jpg>

Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA
Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
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From: [Stevens, Susan](#)
To: [Hawkesworth, Theresa](#); [Grant, Krista L](#)
Subject: RE: Covid-19 at Northwood - URGENT!
Date: Tuesday, April 21, 2020 11:24:07 AM

Yes please. Louise is off today. Alexandra Doucette is covering.

From: Hawkesworth, Theresa
Sent: Tuesday, April 21, 2020 11:23 AM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: RE: Covid-19 at Northwood - URGENT!

Thanks to you both. I will definitely connect with them before responding but wanted to have a draft in place first. Susan Once they've had a chance to review do you want me to work with Louise to send the response from your email? Theresa

From: Stevens, Susan
Sent: Tuesday, April 21, 2020 11:20 AM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>
Subject: RE: Covid-19 at Northwood - URGENT!

I am fine with the response. I wonder if this person has a relationship with Northwood we might want to know about before responding – hence my suggestion to contact Karen. But fine either way.
Thanks
Susan

From: Grant, Krista L
Sent: Tuesday, April 21, 2020 11:11 AM
To: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Keenan, Glenda <Glenda.Keenan@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: RE: Covid-19 at Northwood - URGENT!

Thank you Theresa – I made a few edits...

From: Hawkesworth, Theresa
Sent: Tuesday, April 21, 2020 10:41 AM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Keenan, Glenda <Glenda.Keenan@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Cc: Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: RE: Covid-19 at Northwood - URGENT!

Hi Susan,
I haven't shared the question or response with Northwood as of yet as this one came into our

(we are listening email not the new Northwood@nshealth address) so worked with Heather Hanson to draft a response from our perspective. Let me know if you have any concerns or suggestions, Theresa

Dear [REDACTED],

Thank you for your emails dated April 17 and 19. Northwood, as you acknowledge, is experiencing a healthcare emergency as a result of the COVID-19. With both residents and staff impacted, Northwood's resources have been stretched to manage a growing situation, but we can tell you that a number of supports are now in effect.

As a longstanding provider of senior's care, Northwood is caring for our most vulnerable population and all healthcare partners recognize the importance of their work. As a result of this situation the healthcare community has rallied around them to support the residents and staff through this difficult time.

Effective April 17, Nova Scotia Health Authority (NSHA) and the Department of Health and Wellness are onsite to support Northwood's emergency plan. Staff from the Halifax Infirmary COVID-19 unit have been redeployed to Northwood to assist treating COVID-19 positive residents and a COVID-19 Recovery Unit has been established at a local hotel to care for recovered residents. Onsite testing is also underway.

To address some of the concerns you mention, we want you to know that a number of organizations are supporting Northwood by providing personal protective equipment, staffing support, healthcare equipment and volunteers to manage this situation.

This is a rapidly changing situation and Northwood and their healthcare partners know there is more to do.

At NSHA, we are with supporting Northwood and will remain with them through this situation. The safety of their residents and all staff is a priority for everyone involved.

Sincerely,

From: Stevens, Susan

Sent: Monday, April 20, 2020 11:32 PM

To: Keenan, Glenda <Glenda.Keenan@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Covid-19 at Northwood - URGENT!

Theresa can you raise this with Krista and Karen re a response?

Susan

From: Keenan, Glenda
Sent: Monday, April 20, 2020 1:53 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: FW: Covid-19 at Northwood - URGENT!

FYI...this came into NSHA We Are Listening email over weekend...

From: Young, Cathryn
Sent: Monday, April 20, 2020 1:38 PM
To: Keenan, Glenda <Glenda.Keenan@nshealth.ca>
Subject: FW: Covid-19 at Northwood - URGENT!

FYI ...

Only two comments received from the NSHA email address today.
Both messages were sent over the weekend and both are from the same individual.
Thought you would want to see these ASAP.

Cat

From: We Are Listening
Sent: Monday, April 20, 2020 10:02 AM
To: Young, Cathryn <Cathryn.Young@nshealth.ca>; 'covid19CC@novascotia.ca' <covid19CC@novascotia.ca>
Subject: FW: Covid-19 at Northwood - URGENT!

From: [REDACTED] [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Friday, April 17, 2020 8:33 PM
To: We Are Listening <WeAreListening@nshealth.ca>
Subject: Covid-19 at Northwood - URGENT!

You aren't listening to the front line staff. Management for some reason wants you to believe they have everything under control. Those working understaffed and without necessary equipment would disagree.

I have a family member who works as an LPN daily with fewer than necessary staff to care for the general population. She starts with a full compliment and before the day starts she is required to send staff to Covid-19 floors. Her residents can't get showers on a regular basis. Bare minimum is being done for them. When asked about temperatures she reported she had no working thermometer. Only when she said it was time to talk to the media did someone find them one thermometer with one package of probes.

For the record, some group came in to donate masks and face shields. The office staff is

wearing the face shields. LPN's and personal care workers are not getting that equipment.

Today they sent home potential staff because no one had time to do an orientation. They wouldn't allow them to stay and do basic stuff like hydration.

Management is completely out of touch with the realities on the floors and yet they are reporting everything is fine.

Someone needs to go in and see what is really happening not take Josie Ryan or Janet Simms at their word.

It is critical. The staff that are there won't last much longer. They are physically and emotionally drained at the end of each shift.

Do something!

[REDACTED]

From: We Are Listening

Sent: Monday, April 20, 2020 12:43 PM

To: Young, Cathryn <Cathryn.Young@nshealth.ca>; 'covid19CC@novascotia.ca' <covid19CC@novascotia.ca>

Subject: FW: Northwood



Ann Keddy

Senior Communications Advisor

34 Prince Arthur Street

Amherst, NS B4H 1V6

Office: 902-661-7129

Cell: [REDACTED]

www.nshealth.ca

From: [REDACTED] [[mailto:\[REDACTED\]](mailto:[REDACTED])]

Sent: Sunday, April 19, 2020 10:10 AM

To: We Are Listening <WeAreListening@nshealth.ca>

Subject: Northwood

No one is listening. Things have been urgent there for a while.

Northwood is now saying the staff is devastated. They unknowingly brought the virus into the facility. It is on Management, The province and Public Health called for 14 days of self-isolation on March 14 after travel outside the province. I know someone who called Northwood on her return after seeing the signs at the border. She was told to report to work. It didn't apply to essential workers. She was away on vacation not crossing the border for critical work. She has not become ill but maybe others who were exposed got the same message and reported to work.

Northwood has been saying one thing to Public Health and the media but doing entirely different things in the facility!

[REDACTED]

non responsive

From: [Sullivan, Vickie](#)
To: [McCormick, Bethany](#); [Stevens, Susan](#)
Subject: RE: critical staffing levels at Northwood
Date: Friday, April 24, 2020 6:14:50 PM

We are drafting question for EOC re the below issue re staff deployment ; understand from Tammy that it is with HR and OH but we will send so it can be followed up

Have a good weekend everyone

From: McCormick, Bethany
Sent: Friday, April 24, 2020 6:13 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: RE: critical staffing levels at Northwood

issue to be escalated to nsha eoc is to achieve clarity of movement of staff between northwood and non-covid locations in CZ. Staff are willing to go but need OHS clearance.

NW was offering their staff overtime, and would be reaching to Vickie and Randi is more escalation needed.

Tonight ok - now that shelter in place lifted, weekend is greater concern

Bethany McCormick
Senior Director, Strategy, Planning & Performance
25 Bay Street Antigonish,
Office: 902-867-4500 ext 4257
Cell: [REDACTED]
bethany.mccormick@nshealth.ca
www.nsha.ca

Administrative Assistant:
Natalie Tate, 902-867-4500 ext 4718
natalie.tate@nshealth.ca

From: Stevens, Susan
Sent: Friday, April 24, 2020 5:59 PM
To: Sullivan, Vickie; McCormick, Bethany
Subject: critical staffing levels at Northwood

Hi Vickie, Bethany

Wendy advised me after the afternoon call that Northwood's staffing situation is critical again tonight. She indicated the situation was being escalated to the NSHA EOC. Is there anything I can do to assist?

Susan

Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care



Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: [Sullivan, Vickie](#)
To: [Stevens, Susan](#); [McCormick, Bethany](#)
Subject: RE: critical staffing levels at Northwood
Date: Friday, April 24, 2020 6:15:29 PM

Stay safe

Thanks for everything

From: Stevens, Susan
Sent: Friday, April 24, 2020 6:13 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: RE: critical staffing levels at Northwood

Ok. Thanks. If I can be of any assistance, please let me know.
Susan

From: McCormick, Bethany
Sent: Friday, April 24, 2020 6:13 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: RE: critical staffing levels at Northwood

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25 Bay Street Antigonish,
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Sent: Friday, April 24, 2020 5:59 PM
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Susan



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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From: [Sullivan, Vickie](#)
To: [Stevens, Susan](#)
Subject: RE: DHW CC Division Request for Assistance ASAP
Date: Thursday, April 16, 2020 7:18:08 PM

Thank you

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stevens, Susan
Sent: Thursday, April 16, 2020 7:17 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

Yes just talking with Wendy to get an update – will call you shortly



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
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From: Sullivan, Vickie
Sent: Thursday, April 16, 2020 7:17 PM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>; MacDonald, Madonna

<madonna.macdonald@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Subject: RE: DHW CC Division Request for Assistance ASAP

Madonna and I just spoke.

Susan – can you give me a call please

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Carr, Brendan

Sent: Thursday, April 16, 2020 7:09 PM

To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Subject: Re: DHW CC Division Request for Assistance ASAP

Thank you Madonna, I support and defer to Vickie and Susan.
Brendan

Sent from my iPhone

On Apr 16, 2020, at 6:50 PM, MacDonald, Madonna
<madonna.macdonald@nshealth.ca> wrote:

Just off phone with Vicki Elliott Lopez who with Rob Strang has been given a task of Northwood containment planning.

They want to create a division of residents and are asking if we have space anywhere I.e. camp hill vets to cohort residents who have turned negative post illness.

I am calling Vickie re number of available beds but want to be sure you are all aware of discussion and provide advice / input prior to me responding.

Madonna MacDonald

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From: [MacDonald, Madonna](#)
To: [Stevens, Susan](#)
Subject: Re: DHW CC Division Request for Assistance ASAP
Date: Thursday, April 16, 2020 7:31:35 PM

Hi Susan

Yes sure. There may be limited to no capacity on VAC and as Vickie indicates the VAC Med director would need to weigh in.

Should you me Vickie have a call with Wendy?

Madonna MacDonald

On Apr 16, 2020, at 6:52 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

Hi Madonna

I need to copy in Wendy McVeigh as she has been working closely with Northwood re their outbreak. Do you want to speak to her directly?

Susan

From: MacDonald, Madonna
Sent: Thursday, April 16, 2020 6:51 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: DHW CC Division Request for Assistance ASAP

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From: [MacDonald, Madonna](#)
To: [Stevens, Susan](#)
Cc: [Bond, Paula](#); [Sullivan, Vickie](#)
Subject: Re: DHW CC Division Request for Assistance ASAP
Date: Friday, April 17, 2020 8:07:53 PM

Thanks to you both and Wendy for your work on this file.

Madonna MacDonald

On Apr 17, 2020, at 7:48 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

We met with DHW and Northwood twice today re their proposal. Premier and Dr. Strang directed us all to make it happen. Northwood is holding 42 rooms in a wing of the Lord Nelson hotel. They plan to staff with their home care team and LTC nurses. They are receiving equipment from Shannex. Dr. Barry Clarke will make physician coverage arrangements. They are talking about moving 3 people on Monday and then following with up to 10 people initially. Tomorrow are 1030am DHW licensing staff, OFM officials, Public health and other government inspectors will be onsite with Northwood staff to see what is possible.

Nothing initially for us to do. We have offered care coordinator support for family communications if needed and anything else they feel we can help with. Will keep you posted as things unfold over the weekend.

The staffing situation at the Halifax campus remains critical though after our 330pm call today more NSHA staff had come forward to work tonight and over the weekend. DHW issued a province wide call for staff from all nursing homes and home care agencies as well.

From: Bond, Paula
Sent: Friday, April 17, 2020 9:38 AM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

I agree Vickie and Susan should help come up with a recommendation

From: Carr, Brendan
Sent: Thursday, April 16, 2020 7:09 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>;
~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>;
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From: [Stevens, Susan](#)
To: [Sullivan, Vickie](#); [MacDonald, Madonna](#)
Subject: RE: DHW CC Division Request for Assistance ASAP
Date: Saturday, April 18, 2020 5:14:07 PM

Yes. Please send to Wendy as well. thanks



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From: Sullivan, Vickie
Sent: Saturday, April 18, 2020 5:13 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

Okay – let's plan to talk in early pm – does 1 work?

From: MacDonald, Madonna
Sent: Saturday, April 18, 2020 4:55 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Re: DHW CC Division Request for Assistance ASAP

Let's start with that and the national/ provincial guides

Madonna MacDonald

On Apr 18, 2020, at 4:50 PM, MacDonald, Madonna <madonna.macdonald@nshealth.ca> wrote:

There was another as well.

Madonna MacDonald

On Apr 18, 2020, at 4:37 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

Is this the one you were thinking of Madonna? If we are going to talk about workers working in multiple settings I wonder if IPAC and Public Health should be invited?

From: MacDonald, Madonna
Sent: Saturday, April 18, 2020 10:01 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

What works for you? Not between 930 to 12 based on what we all have booked already. Should we share the rapid review Gail's team did? Or do folks have it?

From: Sullivan, Vickie
Sent: Saturday, April 18, 2020 9:02 AM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

Hi Susan

First thank you. I am wondering if it would be helpful for us to have further discussions with Randi and Jill Flinn who have been leading our staff deployment as they had some thoughts about staffing

Have a good Saturday

Vickie

From: Stevens, Susan
Sent: Friday, April 17, 2020 7:49 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

We met with DHW and Northwood twice today re their proposal. Premier and Dr. Strang directed us all to make it happen. Northwood is holding 42 rooms in a wing of the Lord Nelson hotel. They plan to staff with their home care team and LTC nurses. They are receiving equipment from

Shannex. Dr. Barry Clarke will make physician coverage arrangements. They are talking about moving 3 people on Monday and then following with up to 10 people initially. Tomorrow are 1030am DHW licensing staff, OFM officials, Public health and other government inspectors will be onsite with Northwood staff to see what is possible.

Nothing initially for us to do. We have offered care coordinator support for family communications if needed and anything else they feel we can help with. Will keep you posted as things unfold over the weekend.

The staffing situation at the Halifax campus remains critical though after our 330pm call today more NSHA staff had come forward to work tonight and over the weekend. DHW issued a province wide call for staff from all nursing homes and home care agencies as well.

From: Bond, Paula
Sent: Friday, April 17, 2020 9:38 AM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nsaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

I agree Vickie and Susan should help come up with a recommendation

From: Carr, Brendan
Sent: Thursday, April 16, 2020 7:09 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nsaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: DHW CC Division Request for Assistance ASAP

Thank you Madonna, I support and defer to Vickie and Susan.
Brendan

Sent from my iPhone

On Apr 16, 2020, at 6:50 PM, MacDonald, Madonna <madonna.macdonald@nshealth.ca> wrote:

Just off phone with Vicki Elliott Lopez who with Rob

Strang has been given a task of Northwood containment planning.

They want to create a division of residents and are asking if we have space anywhere I.e. camp hill vets to cohort residents who have turned negative post illness.

I am calling Vickie re number of available beds but want to be sure you are all aware of discussion and provide advice / input prior to me responding.

Madonna MacDonald

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<3d_LTC and Home Care Supports.docx>

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From: [Sullivan, Vickie](#)
To: [Stevens, Susan](#)
Cc: [Stevenson, Colin](#)
Subject: Re: Feedback from NW
Date: Saturday, May 2, 2020 3:37:54 PM

Hi Colin

Susan and I had discussion re email below and perhaps we can arrange a time on Monday to have further conversation

Best regards

Vickie

Sent from my iPhone

On May 2, 2020, at 2:59 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

Hi Colin, Vickie

Sharing some information from one of my team members deployed to Northwood to provide resident care. Things certainly are improving, but these concerns confirm for me we need a mechanism in place with DHW to identify resident care and safety and staff support and safety in homes with outbreaks and an ongoing monitoring mechanism. I continue to raise this at various DHW tables. We also sent this as a request to DHW through our EOC but their response did not address our request. I requested our EOC resubmit our request to DHW, not sure if that happened. This feedback was from last week. Hearing again today on the call staffing is falling at times below critical levels. Very concerning. Appreciate your thoughts and advice.

Thanks

Susan

Just spoke with one of our employees who continues on-site at NW. She relayed that availability of PPE is much better than it had been though access to sinks is still troublesome (likely due to age of building / design).

She reported that staffing continues to be a challenge as the residents are "so sick and care is so much more now so 3 CCAs in evening for 30 residents. Some nights, none of the CCAs know them." She has been helping them as she is getting to know residents well. Also reported that she is working on a unit (6 Centre) where there are 23 positive residents, while 6 are reportedly negative. Many positive residents wandering about and sharing a room with residents who are +ve. Some negative residents also wander about. Understandably, she worries about spread of the virus. Care is reportedly getting heavier as residents are more unwell. Reportedly three CCAs on in morning from 7-8:30 to get all residents cleaned up and ready for breakfast for 8:30 breakfast time. Reporting residents "likely haven't had a bath in a week as their hair is all greasy". "They are often wet but do get changed". Most residents in bed and

unable to help themselves. Also reports significant delays in pick-up of dirty laundry and emptying of garbage. Reportedly garbage cans are overflowing and at one point yesterday, there were no bed pans or fitted sheets available on the unit. She was also concerned about lack of communication about what is going on the floor (e.g. Reporting deaths of residents – a resident passed shortly after she left one evening and didn't learn until end of shift the next day that he had in fact passed and never did make to an isolation room to see his one family member before passing.). Sensing a lack of "direct patient staff support".

<image001.jpg>

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From: [Stevens, Susan](#)
To: [Grant, Krista L](#)
Subject: RE: heads up
Date: Tuesday, April 21, 2020 3:42:49 PM

Perfect! Thank you!!!

From: Grant, Krista L
Sent: Tuesday, April 21, 2020 3:42 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: heads up

Agree – I have sent an email to Karen with that offer!

From: Stevens, Susan
Sent: Tuesday, April 21, 2020 3:41 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: RE: heads up

Excellent! I think it would shore up Northwood and give families some reassurance/confidence that Northwood is not in this alone. Brendan has a very supportive presence.

From: Grant, Krista L
Sent: Tuesday, April 21, 2020 3:35 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: heads up

Thanks Susan – yes I think that is definitely something we should consider! You are an amazing communications ambassador😊

From: Stevens, Susan
Sent: Tuesday, April 21, 2020 3:19 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: heads up

Talking with Janet Simm. They are doing two press conferences a week. She was telling me some of the positive reaction families are giving them about NSHA involvement and reassurance this has brought. I suggested she think about whether having someone from NSHA (like Brendan) at one to speak to what we are doing to support them, joint efforts, etc. and if interested discuss with you and Karen.

Told her I was just thinking out loud and might be a good idea or a bad one. Not wanting it to appear like we have taken over but rather supportive.

Just FYI.



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From: [Sullivan, Vickie](#)
To: [Emergency Operations Center, NS Health Authority](#)
Cc: [Stevens, Susan](#)
Subject: Re: iPads for use at Northwood
Date: Sunday, April 19, 2020 3:22:25 PM

Ten iPads delivered from HI Covid unit

Sent from my iPhone

> On Apr 19, 2020, at 1:46 PM, Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca> wrote:

>

> FYI; this is in the works.

>

> -----Original Message-----

> From: McCormick, Rob

> Sent: Sunday, April 19, 2020 1:40 PM

> To: Nemirovsky, Andrew <Andrew.Nemirovsky@nshealth.ca>; MacDonald, Sandy <Sandy.MacDonald@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

> Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; MacLean, Jim <Jim.MacLean@nshealth.ca>

> Subject: RE: iPads for use at Northwood

>

> Perfect.

>

> Thanks Andrew

>

> -----Original Message-----

> From: Nemirovsky, Andrew

> Sent: Sunday, April 19, 2020 1:38 PM

> To: McCormick, Rob <Rob.McCormick@nshealth.ca>; MacDonald, Sandy <Sandy.MacDonald@nshealth.ca>

> Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; MacLean, Jim <Jim.MacLean@nshealth.ca>

> Subject: RE: iPads for use at Northwood

>

> Hey Rob,

>

> We've got this moving already. Dr. Miller is going to pick them up at 8.3 at the HI and take them over to Northwood. The instructions are on them and we've provided the right contacts on the Virtual Care team to Dr. Miller in case they need anything urgently.

>

> These will come back to the HI once Northwood gets theirs through DHW, but that will likely be a week or so but my team will keep track of that.

>

> Andrew

>

> -----Original Message-----

> From: McCormick, Rob

> Sent: Sunday, April 19, 2020 1:31 PM

> To: MacDonald, Sandy <Sandy.MacDonald@nshealth.ca>; Nemirovsky, Andrew <Andrew.Nemirovsky@nshealth.ca>

> Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; MacLean, Jim <Jim.MacLean@nshealth.ca>

> Subject: FW: iPads for use at Northwood

>

> Hi Guys;

>

> We just received a request for IPAD's (see below). We are trying to get a number. Do we have devices that can be deployed? If so, what is involved to have the devices deployed and aprx how long will it take? If a purchase is required, how long will that take?

>

> Thanks Rob

>

> -----Original Message-----

> From: Emergency Operations Center, NS Health Authority

> Sent: Sunday, April 19, 2020 1:20 PM

> To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacDonald, Madonna

<madonna.macdonald@nshealth.ca>; Jamieson, Keltie <Keltie.Jamieson@nshealth.ca>; McCormick, Rob <Rob.Mccormick@nshealth.ca>

> Cc: Monroe, Randi <Randi.Monroe@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

> Subject: RE: iPads for use at Northwood

>

> We will investigate and get back to you.

> Can you identify how many are requested.

>

> -----Original Message-----

> From: Sullivan, Vickie

> Sent: Sunday, April 19, 2020 1:18 PM

> To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Jamieson, Keltie

<Keltie.Jamieson@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

> Cc: Monroe, Randi <Randi.Monroe@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

> Subject: iPads for use at Northwood

>

> Good day

>

> A team has been working at Northwood today to help support them. One of the items that was identified as being helpful to support communication between residents and families is iPads so hoping you can help

>

> Thanks

>

> Vickie

>

> Sent from my iPhone

From: [Stevens, Susan](#)
To: [McCormick, Bethany](#)
Subject: RE: lessons learned from Northwood
Date: Friday, May 1, 2020 2:49:30 PM

DHW's expectation is that NSHA (you) is leading the lessons learned



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From: McCormick, Bethany
Sent: Friday, May 1, 2020 2:47 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: lessons learned from Northwood

Yes. This will occur. If northwood needs support to organize we will assist to lead. Otherwise we will certainly be a participant.

This typically occurs a bit of time post incident resolution.

Bethany McCormick BScOT MSc CHE , CFHI Extra Fellow; NSHA Senior Director - Strategy Planning & Performance

mobile: [REDACTED]

Sent from iPhone

On Apr 30, 2020, at 11:01 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

Hi Bethany
DHW asked today (Ruby) if we/you would be organizing a formal lessons learned/debrief of the Northwood response for future planning/response preparations.
Susan

<image001.jpg>

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From: [Stevens, Susan](#)
To: [Grant, Krista L](#); [Hawkesworth, Theresa](#); [Dobson, Jaimee](#)
Cc: [McVeigh, Wendy](#)
Subject: RE: MEDIA RELEASE: Immediate Action Required to Protect Seniors & Workers at Northwood Manor – NSGEU
Date: Wednesday, April 22, 2020 2:02:42 PM

Thanks. Copying Wendy. Let us know if we can assist.

Susan

From: Grant, Krista L

Sent: Wednesday, April 22, 2020 1:57 PM

To: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Dobson, Jaimee <Jaimee.Dobson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Subject: Fwd: MEDIA RELEASE: Immediate Action Required to Protect Seniors & Workers at Northwood Manor – NSGEU

FYI

Sent from my iPhone

Begin forwarded message:

From: "Stone, Joanne" <joanne.stone@nshealth.ca>

Date: April 22, 2020 at 1:51:53 PM ADT

To: "Ungar, Tracey" <Tracey.Ungar@nshealth.ca>, "MacNeil, Tom" <TomA.MacNeil@nshealth.ca>, "Read, Carolin" <Carolin.Read@nshealth.ca>, "Piers, Geoff W" <Geoff.Piers@nshealth.ca>, "Nickerson, Anita" <Anita.Nickerson@nshealth.ca>, "Johnson, Andrea" <Andrea.Johnson@nshealth.ca>, "Grant, Krista L" <KristaL.Grant@nshealth.ca>, "[REDACTED]" <[REDACTED]> "Stevenson, Colin" <Colin.Stevenson@nshealth.ca>, "MacDonald, Tammy" <Tammy.MacDonald@nshealth.ca>, "Sullivan, Vickie" <Vickie.Sullivan@nshealth.ca>

Subject: MEDIA RELEASE: Immediate Action Required to Protect Seniors & Workers at Northwood Manor – NSGEU

<https://nsgeu.ca/media-releases/media-release-immediate-action-required-to-protect-seniors-workers-at-northwood-manor/21550/>

Sent from my iPhone

From: [McVeigh, Wendy](#)
To: [Stevens, Susan](#)
Subject: Re: Northwood
Date: Sunday, April 26, 2020 10:37:23 PM

Thank you Susan

Sent from my iPhone

On Apr 26, 2020, at 7:30 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

Things went ok last night. Randi said they mandated nurses to stay and work OT. There were shortages for tonight but plans were discussed and Janet and Josie said today was much better and things were ok for tonight. They were going to institute OT and Randy too. I will follow up with Colin and Vickie re your email from last night and I will keep pushing for licensing to go and check on things and also the process to decide when staging is too low and other measures like military need to be taken.

Sent from my iPhone

From: [McVeigh, Wendy](#)
To: [Stevens, Susan](#)
Subject: Re: Northwood campus
Date: Wednesday, April 15, 2020 11:00:42 AM

Yes all doing well at this time

Sent from my iPhone

On Apr 15, 2020, at 11:00 AM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

A total of 31+ residents – just want to make sure that is accurate before I report at EOC

<image001.jpg>

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From: [Stevens, Susan](#)
To: [MacDonald, Madonna](#)
Subject: RE: Northwood Home Care COVID situation
Date: Thursday, April 2, 2020 3:59:45 PM

non responsive

Continuing Care documents are here – scroll down the page
<http://www.cdha.nshealth.ca/coronavirus>

The LTC Clinical Pathway has been circulated in draft I believe (by Maria) to LTC physicians and medical directors. I don't believe it has been finalized. We have shared it with DHW and met with them this week. It did not go well. We're regrouping and re-strategizing.

Let me know if you need anything else or have questions.
Susan

From: MacDonald, Madonna
Sent: Thursday, April 2, 2020 12:31 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: Northwood Home Care COVID situation

Hi Susan

Are there any LTC documents approved for circulation and if so where can one find them? What ever came of the algorithm the MCAC did? Feeling disconnected after a day☺

From: Stevens, Susan

Sent: Thursday, April 2, 2020 12:30 PM

To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>

Subject: Northwood Home Care COVID situation

Public Health alerted Northwood Home Care of a home environment they are serving has a COVID positive family member. This is not the client but a family member who resides with an active NW client. CCAs are providing service daily in this home. We are arranging a call with all NSHA partners, Northwood and DHW this afternoon to respond to this situation.



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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Mumford Professional Centre
6960 Mumford Road, Suite 2069
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coopération.

From: [MacDonald, Madonna](#)
To: [Stevens, Susan](#); [Sullivan, Vickie](#)
Subject: RE: Northwood relocation plan update
Date: Saturday, April 18, 2020 4:03:34 PM

That's good to hear. If only we had more staff!

From: Stevens, Susan
Sent: Saturday, April 18, 2020 3:57 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: Northwood relocation plan update

Hi Vickie, Madonna

Just got an email that one of the Dartmouth hotels is a go – great news. Will keep you posted as we hear more details.

Susan



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From: [Stevens, Susan](#)
To: [Sullivan, Vickie](#); [McCormick, Bethany](#)
Subject: RE: Northwood today
Date: Sunday, May 3, 2020 2:52:00 PM

Agree with all comments in the email trail



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:51 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Yes we can - just sent another email as Susan and I had spoken yesterday after call and hoping to also have further conversation with Colin tomorrow

Sent from my iPhone

On May 3, 2020, at 2:48 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

Vickie – is this something that Randi and Jill could begin to draft, with input from Wendy and NW?

From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:34 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Agreed

Sent from my iPhone

On May 3, 2020, at 1:47 PM, McCormick, Bethany
<Bethany.McCormick@nshealth.ca> wrote:

I think we need to describe the staffing experience and lessons from northwood.

Need to frame up problem and recommendations,

We need to understand and clarify if NSHA is part of the longer term LTC solution or only during the active outbreak, and when is the time for us to step back, and how.

A few key pieces of the puzzle:

Level of baseline staffing levels pre covid,

Staff Levels at start if outbreak in the LTCF?

Levels of staff now?

When are those on isolation expected back ? Expected return to work dates. ?

Who is working on the longer term FTE issue and how?

- What hiring practices are in place by Northwood and DHW now to deal with the longer terms?

Bethany

From: Sullivan, Vickie

Sent: Sunday, May 3, 2020 1:24 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>

Subject: Fwd: Northwood today

FYI

See below

think this speaks to a need for a staffing recovery plan for NW as understand beyond number booking off, they have had a number of resignations

Vickie

Sent from my iPhone

Begin forwarded message:

From: "Monroe, Randi" <Randi.Monroe@nshealth.ca>
Date: May 3, 2020 at 12:23:23 PM ADT
To: "Sullivan, Vickie" <Vickie.Sullivan@nshealth.ca>
Cc: "Flinn, Jill" <Jill.Flinn@nshealth.ca>
Subject: Northwood today

Hi,

Great efforts by everyone yesterday my moved Northwood into above critical- but below normal staffing. It looks good for today and tonight. We have several new people coming into lines tomorrow, so things are looking good.

Today we talked about staffing the recovery unit at the hotel, as they have had some more resignations. I believe we have a solution for next two weeks, but we did talk about the need to start pulling out staff back and start being in the new hires from pooled postings.

Cheers,
Randi

Sent from my iPhone

From: [McVeigh, Wendy](#)
To: [Stevens, Susan](#)
Subject: RE: Northwood
Date: Saturday, April 18, 2020 3:47:02 PM

Perfect will do.



[Visit NSHA Continuing Care web page](#)

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

 I support inclusion

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
<https://novascotia.ca/coronavirus/>

From: Stevens, Susan
Sent: Saturday, April 18, 2020 3:46 PM
To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: RE: Northwood
Importance: High

Yes have her call me anytime and I work with her and our coms team to help out.



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From: [Stevens, Susan](#)
To: [Carr, Brendan](#)
Subject: RE: Northwood
Date: Saturday, April 18, 2020 3:35:21 PM

Thanks Brendan. EHS is sending in paramedics to do twice daily rounds and work with the nurse managers and care teams. Staffing is still an issue – we’ve reached out to see what additional support we can provide. We’re hearing communications with families is also an issue so I have asked Wendy to reiterate our offer to have care coordinators help with that.
Susan

From: Carr, Brendan
Sent: Saturday, April 18, 2020 3:07 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood

Thank you Susan
If they need people to support their staff I am happy to pitch in.

Brendan

Sent from my iPhone

On Apr 18, 2020, at 2:38 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

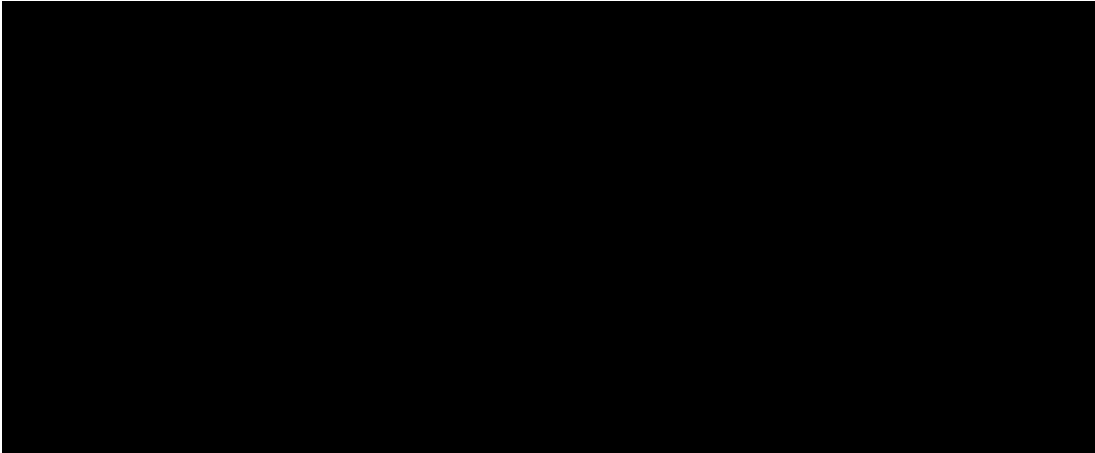
Hi Brendan

No problem at all. There are two parts to the Northwood situation. Their staffing situation is extremely challenging today and over the weekend. Wendy, my director just gave me an update. They now have 71 positive residents. Several are near the end of their lives. It is very sad. DHW had a call with them earlier today to explore EHS deployment. DHW didn’t include us but did reach out afterwards - we are confirming with NW and DHW if there is anything we need to do today to support Northwood. We put a call out across all zones yesterday for RNs, LPNs and CCAs. DHW put a call out last evening to NHs and HC agencies across the province.

The second part of their story is the proposed relocation of 5-10 recovered residents to an alternate site. Janet originally proposed Inn on the Lake but yesterday proposed the Lord Nelson. DHW is leading this work with them as it is really with government inspectors (licensing, environment, public health, fire marshal) to determine a safe location. They met with NW staff at the Lord Nelson Hotel this morning but determined it was not an appropriate care setting. They are trying to organize similar inspections of the Westin, Best Western and Holiday Inn for this afternoon. I have given Madonna and Vickie a heads up that we may get an ask later today or tomorrow about using space at the Rehab Centre. I am doubtful, but hope to be proven wrong, that they will find a

hotel safe for the delivery of nursing home level care. They had hoped to begin relocating 3 residents on Monday. We have offered any assistance we can in this effort. Please reiterate this with Janet.

S 14



Janet, Josie, Leslie – her whole team are top notch. They need our support and whatever resources/assistance we can give them. A reach out from you will go a long way today.

Don't hesitate to give me a call or send a note if you want to discuss further or want to discuss anything at any time.

Thank you Brendan
Susan

<image001.jpg>

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Fellow
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From: Carr, Brendan
Sent: Saturday, April 18, 2020 2:01 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>

Subject: Northwood

Hi Susan

I apologize if you are trying to get a much needed break today. I am reaching out to check in on Northwood, wondering if there is anything I can do to help the situation. I would like to reach out to Janet Simms do you have her contact info?

Thanks

Brendan

From: [Stevens, Susan](#)
To: [Carr, Brendan](#)
Subject: RE: Northwood
Date: Saturday, April 18, 2020 2:11:28 PM

Will respond shortly just on a call re NW with my director

From: Carr, Brendan
Sent: Saturday, April 18, 2020 2:01 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Northwood

Hi Susan

I apologize if you are trying to get a much needed break today. I am reaching out to check in on Northwood, wondering if there is anything I can do to help the situation.
I would like to reach out to Janet Simms do you have her contact info?

Thanks

Brendan

non responsive

From: [LeBlanc, Angela](#)
To: [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); "Purcell, Angela L."; [Howlett, Todd](#); [REDACTED] "Cruikshank, Cindy J"; "Smith, Alexandra (Health)"; [REDACTED] [Knowles, Ruby M](#); [jeannine.lagasse@novascotia.ca](#); "Elliott-Lopez, Vicki"; [Murphy, Matthew](#); [Monroe, Randi](#); [REDACTED] [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua](#)
Cc: [Miletic, Natalie](#)
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update
Date: Wednesday, April 29, 2020 6:59:15 PM
Attachments: [Northwood COVID-19 Situation Report - NSHA and NSHA - April 29 2020.pdf](#)

Hello all,

Please see attached update for today. Please advise if any errors or omissions.

Thanks!

Angela

Angela LeBlanc BScHEd CPHRM

Director, Enterprise Risk Management

& Emergency Preparedness - NSHA

60 Vancouver Street, Yarmouth NS B5A 2P5

.....
Office: 902-742-3542 Ext. 1437 | Cell: [REDACTED]

angela.leBlanc@nshealth.ca

Administrative Assistant:

Natalie Miletic, 902-742-3542 Ext. 1604

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From: [LeBlanc, Angela](#)
To: [McCormick, Bethany](#); [REDACTED]; [REDACTED]; [Sullivan, Vickie](#); [Monroe, Randi](#); [Rawding, Patsy A](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [Carr, Brendan](#); [Tate, Natalie](#); [Stevenson, Colin](#); [Rockwood, Kenneth](#); [Alexiadis, Maria](#); [Clarke, Barry](#); ["jeannine.lagasse@novascotia.ca"](#); [Murphy, Matthew](#); [Stevens, Susan](#); [McVeigh, Wendy](#); [REDACTED]; [MacDonald, Tammy](#); [REDACTED]; [Howlett, Todd](#); [Tschupruk, Cheryl](#); [Flinn, Jill](#)
Cc: [Proffitt, Joshua G](#); ["Elliott-Lopez, Vicki"](#); ["Purcell, Angela L"](#); ["Smith, Alexandra \(Health\)"](#); [Flinn, Jill](#); ["Cruickshank, Cindy J"](#)
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update
Date: Thursday, April 23, 2020 6:26:50 PM
Attachments: [Northwood COVID-19 Situation Report - Revised and Ref'd - April 23, 2020.pdf](#)

Good morning all,

Please find attached the meeting notes from today. Incident Event Board included to help track progress with actions and priorities. You will note some comments in red font on the Incident Event board. The red is used simply to distinguish the new comments applicable to today's meetings. Please advise if any errors or omissions.

Many thanks,

Angela

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

From: McCormick, Bethany

Sent: April-19-20 6:25 PM

To: McCormick, Bethany; [REDACTED]; [REDACTED]; Sullivan, Vickie; Monroe, Randi; Rawding, Patsy A; Connell, Katherine; Hawkesworth, Theresa; Carr, Brendan; Tate, Natalie; Stevenson, Colin; Rockwood, Kenneth; Alexiadis, Maria; LeBlanc, Angela; Clarke, Barry; 'jeannine.lagasse@novascotia.ca'; Murphy, Matthew; Stevens, Susan; McVeigh, Wendy; [REDACTED]; MacDonald, Tammy; [REDACTED]; Howlett, Todd; Tschupruk, Cheryl

Cc: Proffitt, Joshua G; 'Elliott-Lopez, Vicki'; 'Purcell, Angela L'; 'Smith, Alexandra (Health)'; Flinn, Jill; 'Cruickshank, Cindy J'

Subject: NSHA and Northwood Joint Meeting - Situation Update

When: April-23-20 4:30 PM-5:00 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 7905414

NSHA and Northwood Joint Meeting

Chair: NSHA leader

Purpose: Situation Update meeting

Agenda:

1. Medical

- a. Care plans and goals of care
 - b. Analytics modelling, dashboard
 - c. Physician remuneration
 - 2. Operations
 - a. Clinical care
 - b. Infection control
 - 3. Communications
 - a. Overall strategy
 - b. FAQ
 - c. Connection with Families
 - 4. Human Resources
 - a. Clinical Staff
 - b. Support Staff
 - 5. Logistics (Supplies, PPE, Equipment, Finance)
 - 6. Offsite Location
 - 7. Care by Family Proposal
 - 8. Additional risks/Open items
-

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From: [REDACTED]
To: [LeBlanc, Angela](#); [McCormick, Bethany](#); [REDACTED]; [Sullivan, Vickie](#); [Monroe, Randi](#); [Rawding, Patsy A](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [Carr, Brendan](#); [Tate, Natalie](#); [Stevenson, Colin](#); [Rockwood, Kenneth](#); [Alexiadis, Maria](#); [Clarke, Barry](#); ["jeannine.lagasse@novascotia.ca"](#); [Murphy, Matthew](#); [Stevens, Susan](#); [McVeigh, Wendy](#); [REDACTED]; [MacDonald, Tammy](#); [REDACTED]; [Howlett, Todd](#); [Tschupruk, Cheryl](#); [Flinn, Jill](#)
Cc: [REDACTED]
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update
Date: Wednesday, April 22, 2020 1:49:22 PM

This is so disappointment.

<https://nsgeu.ca/media-releases/media-release-immediate-action-required-to-protect-seniors-workers-at-northwood-manor/21550/>

From: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>
Sent: April 22, 2020 7:58 AM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Janet Simm <[REDACTED]>
Josie Ryan <[REDACTED]> Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Connell, Katherine <Katherine.CConnell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Tate, Natalie <Natalie.Tate@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Clarke, Barry <Barry.Clarke@nshealth.ca>; 'jeannine.lagasse@novascotia.ca' <jeannine.lagasse@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Wendy McVeigh <wendy.mcveigh@nshealth.ca>; [REDACTED] <[REDACTED]> MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Paul Carey <[REDACTED]> Howlett, Todd <Todd.Howlett@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>
Cc: Kathleen Gentile <[REDACTED]> Linda Verlinden <[REDACTED]> Terri Sarty <[REDACTED]> 'Karen White' <[REDACTED]> Murray Stenton <[REDACTED]> Natasha Handspiker <[REDACTED]> Shelley James <[REDACTED]> Margaret Szabo <[REDACTED]>
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update

Good morning all,
Please see meeting notes from yesterday. Please advise if any errors or omissions. At 0945h we will focus on the list of team priorities (noted on bottom section of attached).
Thanks
Angela

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

From: McCormick, Bethany
Sent: April-19-20 6:22 PM
To: McCormick, Bethany; [REDACTED]; [REDACTED] Sullivan, Vickie; Monroe, Randi; Rawding, Patsy A; Connell, Katherine; Hawkesworth, Theresa; Carr, Brendan; Tate, Natalie; Stevenson, Colin; Rockwood, Kenneth; Alexiadis, Maria; LeBlanc, Angela; Clarke, Barry;

'jeannine.lagasse@novascotia.ca'; Murphy, Matthew; Stevens, Susan; McVeigh, Wendy;
[REDACTED] MacDonald, Tammy; [REDACTED] Howlett, Todd; Tschupruk,
Cheryl

Cc: 'Kathleen Gentile'; 'Linda Verlinden'; 'Terri Sarty'; 'Karen White'; 'Murray Stenton'; 'Natasha Handspiker'; 'Shelley James'; 'Margaret Szabo'

Subject: NSHA and Northwood Joint Meeting - Situation Update

When: April-22-20 9:45 AM-10:15 AM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 7905414

NSHA and Northwood Joint Meeting

Chair: NSHA leader

Purpose: Situation Update meeting

Agenda:

Medical

Care plans and goals of care

Analytics modelling, dashboard

Physician remuneration

Operations

Clinical care

Infection control

Communications

Overall strategy

FAQ

Connection with Families

Human Resources

Clinical Staff

Support Staff

Logistics (Supplies, PPE, Equipment, Finance)

Offsite Location

Care by Family Proposal

Additional risks/Open items

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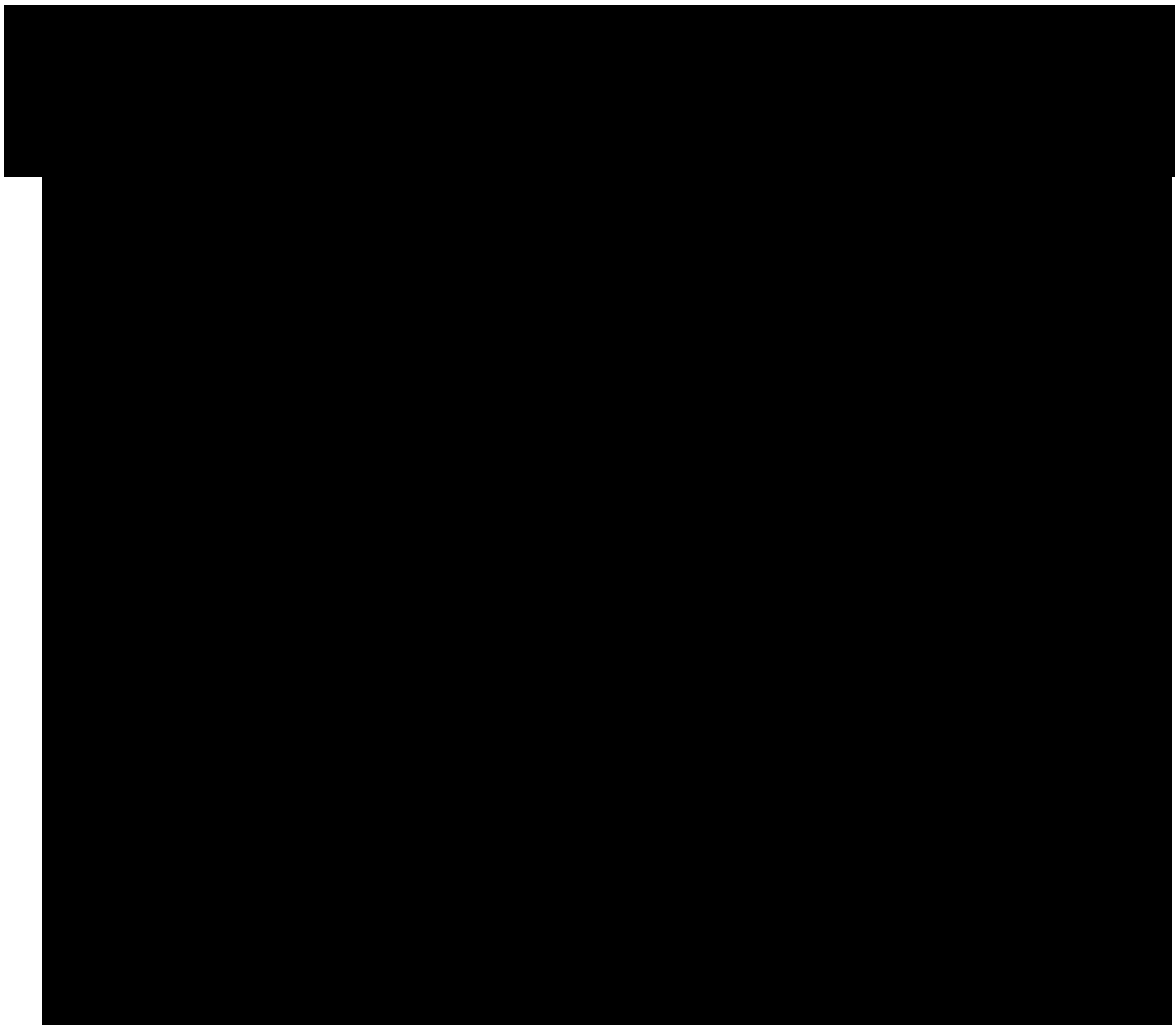
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From: [LeBlanc, Angela](#)
To: [REDACTED]; [Sullivan, Vickie](#); [McCormick, Bethany](#); [REDACTED]; [Monroe, Randi](#); [Rawding, Patsy A](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [Carr, Brendan](#); [Tate, Natalie](#); [Stevenson, Colin](#); [Rockwood, Kenneth](#); [Alexiadis, Maria](#); [Clarke, Barry](#); ["jeannine.lagasse@novascotia.ca"](#); [Murphy, Matthew](#); [Stevens, Susan](#); [McVeigh, Wendy](#); [REDACTED]; [MacDonald, Tammy](#); [REDACTED]; [Howlett, Todd](#); [Tschupruk, Cheryl](#)
Cc: [Proffitt, Joshua G](#)
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update
Date: Tuesday, April 21, 2020 8:07:27 PM

Thank you Janet. Appreciate the update (and the incredible effort and commitment) re overnight supports.

Angela

non responsive



From: LeBlanc, Angela [<mailto:Angela.LeBlanc@nshealth.ca>]
Sent: April 21, 2020 7:25 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Janet Simm <[REDACTED]>; Josie Ryan

<[REDACTED]> Monroe, Randi <Randi.Monroe@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Tate, Natalie <Natalie.Tate@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Clarke, Barry <Barry.Clarke@nshealth.ca>; 'jeannine.lagasse@novascotia.ca' <jeannine.lagasse@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Wendy McVeigh <wendy.mcveigh@nshealth.ca>; [REDACTED] <[REDACTED]> MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Paul Carey <[REDACTED]> Howlett, Todd <Todd.Howlett@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>

Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>

Subject: RE: NSHA and Northwood Joint Meeting - Situation Update

Thank you Vickie and teams. Please let me know if there is value in reconvening as a group or if preference is to continue to monitor with current resources.

Angela

From: Sullivan, Vickie

Sent: April-21-20 7:11 PM

To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>; [REDACTED] <[REDACTED]> [REDACTED] <[REDACTED]> Monroe, Randi <Randi.Monroe@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Tate, Natalie <Natalie.Tate@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Clarke, Barry <Barry.Clarke@nshealth.ca>; 'jeannine.lagasse@novascotia.ca' <jeannine.lagasse@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; [REDACTED] <[REDACTED]> MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; [REDACTED] <[REDACTED]> Howlett, Todd <Todd.Howlett@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>

Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>

Subject: RE: NSHA and Northwood Joint Meeting - Situation Update

Good evening

Kitty, Carolin, and me met; reviewed with Josh the staffing on 11Manor and 1 Centre and have freed up the 2 NW staff (CCAs) assigned to those units. This has been communicated to the facility supervisor Jeremy and staff will be sent elsewhere. Likewise any NW staff assigned to those two units should be deployed elsewhere from now onwards. We will continue to work with staff on those two units to ensure they can work independently without tapping into NW resources. There

are still calls out to agency staff, but we have had no confirmation of staff for tonight at this point.

Vickie & Kitty

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

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

From: McCormick, Bethany

Sent: Sunday, April 19, 2020 6:25 PM

To: McCormick, Bethany; [REDACTED] [REDACTED] Sullivan, Vickie; Monroe, Randi; Rawding, Patsy A; Connell, Katherine; Hawkesworth, Theresa; Carr, Brendan; Tate, Natalie; Stevenson, Colin; Rockwood, Kenneth; Alexiadis, Maria; LeBlanc, Angela; Clarke, Barry; 'jeannine.lagasse@novascotia.ca'; Murphy, Matthew; Stevens, Susan; McVeigh, Wendy; [REDACTED] MacDonald, Tammy; [REDACTED] Howlett, Todd; Tschupruk, Cheryl

Cc: Proffitt, Joshua G

Subject: NSHA and Northwood Joint Meeting - Situation Update

When: Tuesday, April 21, 2020 4:30 PM-5:00 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 7905414

NSHA and Northwood Joint Meeting

Chair: NSHA leader

Purpose: Situation Update meeting

Agenda:

Medical

Care plans and goals of care

Analytics modelling, dashboard

Physician remuneration

Operations

Clinical care

Infection control

Communications
Overall strategy
FAQ
Connection with Families
Human Resources
Clinical Staff
Support Staff
Logistics (Supplies, PPE, Equipment, Finance)
Offsite Location
Care by Family Proposal
Additional risks/Open items

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From: [Read, Carolin](#)
To: [Stone, Joanne](#); [Grant, Krista L](#); [Ungar, Tracey](#); [Piers, Geoff W](#); [Stevens, Susan](#)
Cc: [Johnston, LesleyAnne](#); [MacIsaac, Eileen](#)
Subject: RE: UPDATE message northwood urengt for tonights message
Date: Friday, April 17, 2020 4:12:34 PM
Attachments: [image.png](#)

Northwood is looking for licensed staff RN/LPN and CTA to assist in supporting the care of the their residents; Contact person at Northwood is [REDACTED] Northwood is open to staff coming in groups or pairs and will work with volunteers to provide an orientation on arrival to the facility. They are looking for 12 hour shifts however would be open to any help

From: Stone, Joanne
Sent: Friday, April 17, 2020 4:01 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>
Subject: RE: UPDATE message northwood urengt for tonights message

We discussed on the sit call today adding a message to tonight's covid message about staff volunteering to do paid work at Northwood if travel is required we would pay in accordance with travel policy

Carolin is there a specific ask you can send (types, hours etc) and who to contact if interested?

From: Grant, Krista L
Sent: Friday, April 17, 2020 3:56 PM
To: Stone, Joanne <joanne.stone@nshealth.ca>
Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>
Subject: UPDATE message

Hi Joanne – we can put message in tonight's UPDATE for LTC staffing support – please send me a paragraph of key points that are required!

Thanks so much.
K

Krista Grant
Chief, Public Engagement & Communications
Office: 902-491-5812

From: [Stevens, Susan](#)
To: [Grant, Krista L](#)
Subject: RE: UPDATE message northwood urengt for tonights message
Date: Friday, April 17, 2020 7:23:36 PM
Attachments: [image.png](#)

s 20

How are you doing? Hope you're taking good care of yourself.
Susan

From: Grant, Krista L
Sent: Friday, April 17, 2020 4:31 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: UPDATE message northwood urengt for tonights message

I have been thinking of you – hope you get a little downtime😊

From: Stevens, Susan
Sent: Friday, April 17, 2020 4:27 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: RE: UPDATE message northwood urengt for tonights message

Thanks!

From: Grant, Krista L
Sent: Friday, April 17, 2020 4:26 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>
Subject: RE: UPDATE message northwood urengt for tonights message

Yes we can make that change and note the call out for those zones.

K

From: Stevens, Susan
Sent: Friday, April 17, 2020 4:25 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>

Subject: RE: UPDATE message northwood urengt for tonights message

We are wanting to put the ask out in Western, Central and Northern zone. Can we remove the line
As you may be aware, Northwood is experiencing unusual staff shortages due to COVID related
absences over the next week.

From: Grant, Krista L

Sent: Friday, April 17, 2020 4:20 PM

To: Read, Carolin <Carolin.Read@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>;
Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers,
Geoff W <Geoff.Piers@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>

Subject: RE: UPDATE message northwood urengt for tonights message

What should the email be as the one below is specific to NZ.

Thanks

From: Read, Carolin

Sent: Friday, April 17, 2020 4:19 PM

To: MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>;
Grant, Krista L <KristaL.Grant@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers,
Geoff W <Geoff.Piers@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>

Subject: RE: UPDATE message northwood urengt for tonights message

Yes that would be great.

From: MacIsaac, Eileen

Sent: Friday, April 17, 2020 4:05 PM

To: Stone, Joanne <joanne.stone@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Read,
Carolin <Carolin.Read@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W
<Geoff.Piers@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>

Subject: RE: UPDATE message northwood urengt for tonights message

Hi – this is the message received in Northern Zone. Can we rewrite this for the update?
E.

ATTENTION ALL REGISTERED NURSES, LICENSED PRACTICAL NURSES AND CCAs

Urgent immediate need for RNs, LPNs and CCAs at Northwood Nursing home in Halifax.

As you may be aware, Northwood is experiencing unusual staff shortages due to COVID related absences over the next week.

Please contact the Northern Zone Redeployment Centre at nzdeploy@nshealth.ca to express your interest.

If you accept shifts at Northwood, you will continue to be an NSHA employee and a member of your respective union. You will be paid for mileage and/or lodging as well as other expenses as covered under our Travel Policy.

If you accept shifts at Northwood, you will continue to be able to accept shifts at NSHA.

Thank you,

From: Stone, Joanne
Sent: Friday, April 17, 2020 4:01 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>
Subject: RE: UPDATE message northwood urengt for tonights message

We discussed on the sit call today adding a message to tonight's covid message about staff volunteering to do paid work at Northwood if travel is required we would pay in accordance with travel policy

Carolin is there a specific ask you can send (types, hours etc) and who to contact if interested?

From: Grant, Krista L
Sent: Friday, April 17, 2020 3:56 PM
To: Stone, Joanne <joanne.stone@nshealth.ca>
Cc: Johnston, LesleyAnne <LesleyAnne.Johnston@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>
Subject: UPDATE message

Hi Joanne – we can put message in tonight's UPDATE for LTC staffing support – please send me a paragraph of key points that are required!

Thanks so much.
K

Krista Grant

Chief, Public Engagement & Communications
Office: 902-491-5812



From: [Boutillier, Nicole](#)
To: [McVeigh, Wendy](#)
Cc: [Stevenson, Colin](#); [MacDonald, Madonna](#); [Sullivan, Vickie](#); [Stevens, Susan](#); [Bond, Paula](#); [Tomblin Murphy, Gail](#); [Carr, Brendan](#); [Howlett, Todd](#); [Alexiadis, Maria](#); [McCormick, Bethany](#); [LeBlanc, Angela](#); [Grant, Krista L](#); [Spinney, Derek](#)
Subject: Re: update re swabbing: Northwood Incident Management Team - CRITICAL
Date: Saturday, April 18, 2020 9:29:12 PM

Hi all,

Update from Todd Hatchette. Todd, Ian and Glen went over to Northwood tonight to do some swabbing. They did another 60 residents tonight. He felt there was a lot of residents moving about on the units. He is on standby for help with swabbing or any lab services we may require.

Nicole

Sent from my iPhone

On Apr 18, 2020, at 8:22 PM, McVeigh, Wendy <Wendy.McVeigh@nshealth.ca> wrote:

Hello All,

I spoke with Dr. Jennifer Cram, MOH (included in this e-mail) and Ann Morgan, assigned Public Health Nurse. As of 1800 there are 80 positive COVID residents. There have been over 400 swabs completed with some residents being swabbed 2-3 times. Not all residents of NW have been swabbed. There remains some floors with no swabbing as no symptoms exist.

Dr. Cram does not believe swabbing is required tonight. She is meeting with Dr. Strang and the other MOH at 0830 and will have further direction post this call. Dr. Cram you may have additional details to share.

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6



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<Picture (Device Independent Bitmap)
1.jpg>

[Visit NSHA Continuing Care web
page](#)

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
<https://novascotia.ca/coronavirus/>

From: [Kempkens, Daniela](#)
To: [McVeigh, Wendy](#); [Stevenson, Colin](#); [Boutilier, Nicole](#); [MacDonald, Madonna](#); [Sullivan, Vickie](#); [Stevens, Susan](#); [Bond, Paula](#); [Tomblin Murphy, Gail](#); [Carr, Brendan](#); [Howlett, Todd](#); [Alexiadis, Maria](#); [McCormick, Bethany](#); [LeBlanc, Angela](#); [Grant, Krista L](#)
Cc: [Spinney, Derek](#); [Broesch, James](#)
Subject: RE: update re swabbing: Northwood Incident Management Team - CRITICAL
Date: Sunday, April 19, 2020 11:40:38 AM

Good morning everyone,

My name is Daniela Kempkens, I am the Medical Officer of Health who took over this outbreak a few days ago from a colleague.

We are currently in the process of gathering any outstanding information so that we can adopt the testing strategy to the rapidly changing situation. If you have any questions or suggestions in the meantime, please let me know.

In addition, if you are planning any meetings please consider me taking part from a public health perspective.

Best regards,

Daniela

Daniela Kempkens, MD, MPH, FRCPC

Regional Medical Officer of Health Eastern Zone

Public Health Eastern, Nova Scotia Health Authority

23 Bay Street, Antigonish Health & Wellness Centre, Suite 2N

Antigonish, NS B2G 2G7

Office: 902-563-2420

Fax: 902-563-0508

daniela.kempkens@nshealth.ca

From: Cram, Jennifer

Sent: Saturday, April 18, 2020 8:42 PM

To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula

<Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; Kempkens, Daniela <Daniela.Kempkens@nshealth.ca>; Broesch, James <James.Broesch@nshealth.ca>

Subject: RE: update re swabbing: Northwood Incident Management Team - CRITICAL

Thank you so much for your support of the Northwood at this difficult time. I'm not the MOH that follows this facility regularly, so while I don't have full details, I do know that the testing strategy has been aggressive, and if applicable, iterative, with repeated testing of residents. Typically, if there is a single case on a unit the entire unit is then swabbed. There is also swabbing based on the units where positive staff have worked while infectious (included up to 2 days before symptom onset). The director of the facility could certainly provide more specific details. As Wendy mentioned, there is a meeting tomorrow with the lead MOH supporting this facility, myself and Dr. Strang. The ongoing testing strategy will be one of the topics covered. Wendy – perhaps I could have Dr. Daniela Kempkens connect back to you tomorrow? She will be the MOH on-call and also has been following this outbreak.

Have a good night,

Jennifer Cram

<< OLE Object: Picture (Device Independent Bitmap) >>

Dr. Jennifer Cram MD MPH FRCPC

Medical Officer of Health

Western Zone

821 St. George Street
Annapolis Royal, NS B0S 1A0

Email: Jennifer.cram@nshealth.ca

From: McVeigh, Wendy

Sent: Saturday, April 18, 2020 8:22 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett,

Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Cram, Jennifer <Jennifer.Cram@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>

Subject: update re swabbing: Northwood Incident Management Team - CRITICAL

Hello All,

I spoke with Dr. Jennifer Cram, MOH (included in this e-mail) and Ann Morgan, assigned Public Health Nurse. As of 1800 there are 80 positive COVID residents. There have been over 400 swabs completed with some residents being swabbed 2-3 times. Not all residents of NW have been swabbed. There remains some floors with no swabbing as no symptoms exist.

Dr. Cram does not believe swabbing is required tonight. She is meeting with Dr. Strang and the other MOH at 0830 and will have further direction post this call. Dr. Cram you may have additional details to share.

<< OLE Object: Picture (Device Independent Bitmap) >>

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Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

<< OLE Object: Picture (Device Independent Bitmap) >> **I support inclusion**

Office/Cell:



Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 6:44 PM

To: Stevenson, Colin; Boutilier, Nicole; MacDonald, Madonna; Sullivan, Vickie; Stevens, Susan; Bond, Paula; Tomblin Murphy, Gail; Carr, Brendan; Howlett, Todd; McVeigh, Wendy; Alexiadis, Maria; McCormick, Bethany; LeBlanc, Angela; Grant, Krista L

Cc: Spinney, Derek

Subject: Northwood Incident Management Team - CRITICAL

When: Saturday, April 18, 2020 7:00 PM-7:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Conference Call

Importance: High

Conference Number

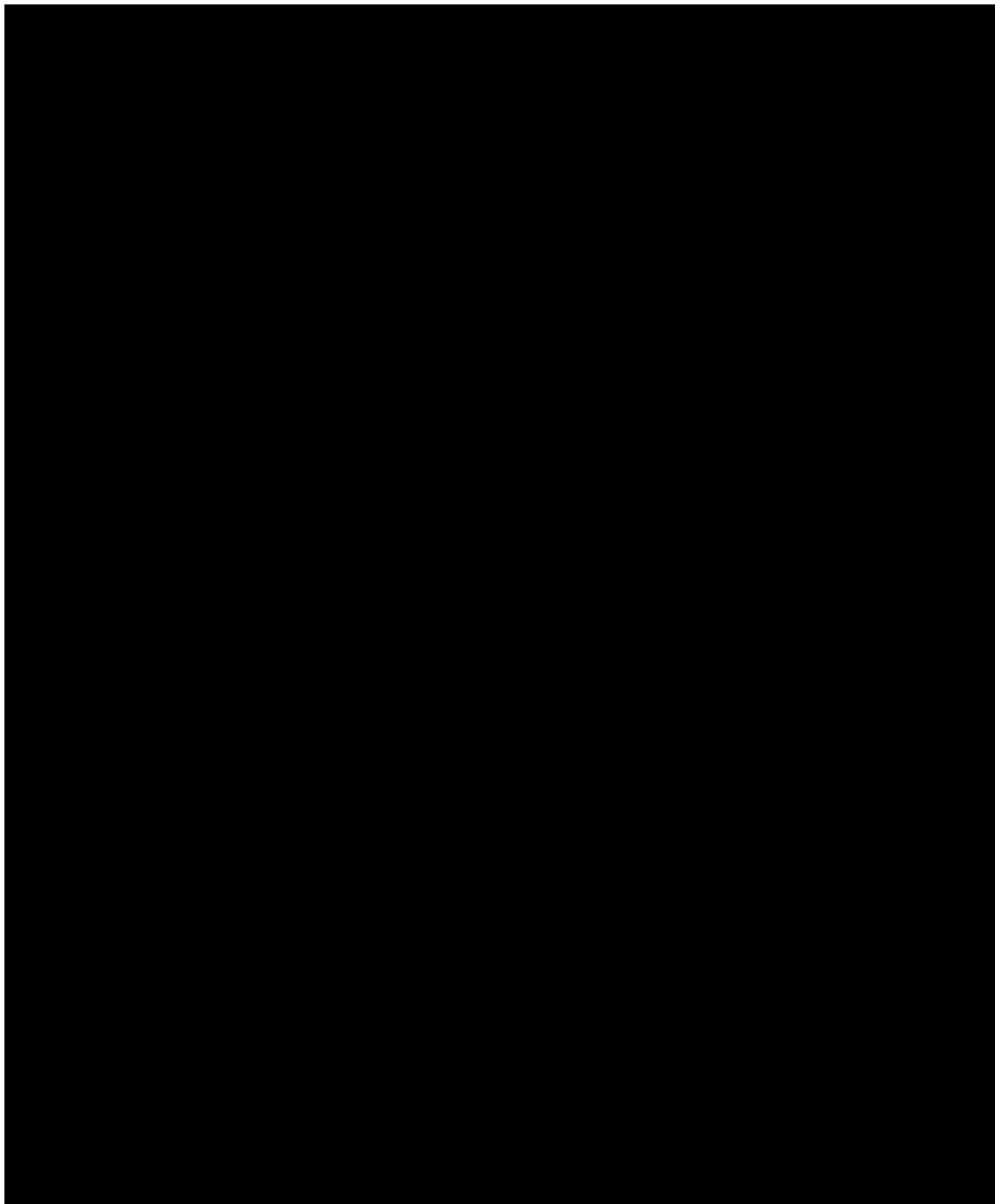
1-855-453-6962

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non responsive



From: Grant, Krista L

Sent: Saturday, April 18, 2020 10:15 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>;

Gillis, John W <JohnW.Gillis@nshealth.ca>

Subject: RE: update

Thanks Susan. Yes Karen and I have committed to chat again tomorrow morning.

Also if MLAs are calling we can support some of that by connecting with government to get message to them. I know they want to connect/find out info and offer support but it's actually not helpful in crisis situations when Janet's focus needs to be internal. I can offer that support via Karen.

K

From: Stevens, Susan

Sent: Saturday, April 18, 2020 10:10 PM

To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Subject: update

Just finished speaking with Janet. Brendan had called her and she was relieved and welcoming of our help. She is aware we are coming in to set up IMT and bringing in clinical and care resources.

In terms of communications, it sounds like Krista she wants you to work through Karen – said you'd already been in touch with Karen and she had sent you their plans/documents. Sounds like they have a well thought out plan for communicating with the COVID positive residents and also those who are palliative. She said where they need help is with the many many inquiries from all the other families wanting to know how their mom or dad are – specific information not general messages. She said if we have clinical staff they would give us access to point click care so they could look at the resident's chart and provide information. Wendy let's think about that and how we might be able to help. I think we should still mobilize our team and be ready to start making calls of different kinds tomorrow. I mentioned Krista having you connect with Murray and Linda but she didn't respond so think maybe you should continue to connect with Karen. We'll know more in the morning. She is also getting lots of calls from MLAs and members of the public – Janet is handling these herself. Not sure if she wants some help with those but thinking we could offer some assistance. I told her we want to be in the background supporting them not out front. She is welcoming the help.

Thanks to you all. I will connect with you in the morning once I have a better sense of the lay of the land. Krista I'd suggest you connect again with Karen in the morning. Make sense?

Have a good night and thanks to you all

Susan

Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre



6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: [McVeigh, Wendy](#)
To: [Stevens, Susan](#)
Subject: Re: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths
Date: Wednesday, April 15, 2020 8:28:01 PM

Based on my contact with Josie their team via Steve from NW is ordering all supplies. Steve and I are meeting tomorrow to figure this out and see if I can replicate for other facilities. Will keep you posted

Sent from my iPhone

On Apr 15, 2020, at 8:23 PM, Stevens, Susan <Susan.Stevens@nshealth.ca> wrote:

FYI

From: Stevens, Susan
Sent: Wednesday, April 15, 2020 4:14 PM
To: Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>
Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>
Subject: RE: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

Hi Ken

The homes should contact my zone directors not me when they have a COVID situation. We're not doing mass purchasing yet please. Let's give Colin a couple of days to see what NSHA can do in terms of repurposing existing equipment or purchasing new. In the meantime we will work with each home to ensure they have the equipment they need when they have a COVID situation just as we have been doing with the oxygen concentrators.

Thanks

Susan

<image001.jpg>

Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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From: Rockwood, Kenneth

Sent: Wednesday, April 15, 2020 4:09 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>

Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>

Subject: RE: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

Thanks

Good all around

I will let them know to contact you re the authorization in due course and to just get on with purchasing now.

Ken

From: Stevens, Susan

Sent: Wednesday, April 15, 2020 4:06 PM

To: Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>

Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>

Subject: RE: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

Hi Ken

Agreed re the SWAT teams – Colin and I discussed this Wednesday night. Shelly how do we move this forward?

I am assuming 10L ringers are a reference to IV equipment? Colin was following up with Keltie and I believe inpatient units to determine if we could come up with a standard list of IV equipment most suitable for long term care and then determining if NSHA has surplus to loan and/or whether we could purchase (bill DHW) and provide to LTC. I will follow up with him re progress. In the meantime, my directors can authorize payment from my home first budget for NHs to purchase IV equipment case by case until we get a better process in place.

Susan

From: Rockwood, Kenneth

Sent: Wednesday, April 15, 2020 3:56 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>

Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>

Subject: RE: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

And time to discuss a SWAT team strategy (hence Shelly copied).

Ken

From: Rockwood, Kenneth

Sent: Wednesday, April 15, 2020 3:53 PM

To: Stevens, Susan <susan.stevens@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>

Subject: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

Forty cases and counting...

I got them 10L Ringers yesterday but that's not gonna hold. Susan you had mentioned something about the Home First program or some such.

ken

Kenneth Rockwood, MD, FRCPC, FRCP

Senior Medical Director for Acute Care, Nova Scotia Health Authority

Professor of Medicine (Geriatric Medicine & Neurology)

Kathryn Allen Weldon Professor of Alzheimer Research

Dalhousie University

Halifax, NS B3H 2E1

From: [McVeigh, Wendy](#)
To: [Rockwood, Kenneth](#)
Cc: [McNeil, Shelly](#); [Stevens, Susan](#); [Saulnier, Jenna](#); [Alexiadis, Maria](#); [Andrew, Melissa](#)
Subject: Re: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths
Date: Wednesday, April 15, 2020 11:27:13 PM

Let me take this away Ken and see what I can figure out.

Wendy

Sent from my iPhone

On Apr 15, 2020, at 11:09 PM, Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca> wrote:

Thanks Shelly.

Yes. In addition to the virtual physician back-up the needs are for:

1. Collecting vital signs on the COVID-19 +ve residents, now spread out over 4 floors at Northwood. Talking to Barry tonight he is expecting upwards of 70 cases. Today he was able to get bid vital signs on only 17 of his 40 patients. Inasmuch as this can mostly be automated (oximeter, electronic thermometer, BP machine when heart rate high) this can be done by anyone trained in how to use the machinery - some clinical research personnel (eg psychometrists, kinesiologists) might fill that gap.
 2. IPAC support for ongoing monitoring.
 3. Hands-on LPN support. (He reckons two more.)
 4. A nurse to travel between the four Flores answering questions and facilitating communications. Today the staff were too busy to answer phones.
 5. An experienced admin person (sounds like a great job for a research coordinator, hence Melissa copied) to extract and collate chart data for decision- making (including vital signs). So an RN, two LPNs, someone to do vital signs, and a coordinator. He has an NP and good physician back-up for hands-on.
- If they used donated high-grade PPE that might also work.

Ken

Sent from my iPhone

On Apr 15, 2020, at 22:56, McNeil, Shelly <Shelly.McNeil@nshealth.ca> wrote:

Hi Ken

I know that you have assembled a team of physicians in GIM, palliative medicine and geriatrics to provide phone backup support to clinicians in LTCF. I presume when you refer to SWAT teams you are thinking of a team that would actually go into the LTCF to assist on site?

I suspect the most significant need will be for LPN and RN in that context. Is the not a plan to increase staffing in LTCF and/or to redeploy staff to a facility if there is an outbreak?

I am happy to arrange a call to discuss. Let me know who you feel should be there
Thanks
Shelly

Sent from my iPhone

On Apr 15, 2020, at 7:34 PM, McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca> wrote:

Jenna
Could you arrange a Skype call with Maria Alexiadis tomorrow.
Please include content of email
Thank you

Sent from my iPhone

On Apr 15, 2020, at 5:51 PM, Stevens, Susan
<Susan.Stevens@nshealth.ca> wrote:

Hi Maria
I am looping in Wendy as she is working with Northwood on their situation and was going to connect with all of you re an interim solution and information to inform the solution Colin is working on. Wendy can you follow up with Maria?
Thanks
Susan

From: Alexiadis, Maria
Sent: Wednesday, April 15, 2020 5:48 PM
To: Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>
Subject: RE: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths
Importance: High

I just spoke with Stephanie Connidis and she will put me in contact with the nurse manager for the Hospice here...she does the ordering and buying.

Stephanie feels that anything more than s/c administration of fluids is warranted in this group and she said that to do hypodermoclysis is a skill that is easily taught and performed and part of the scope of practice for LPNs.

Do you want me to proceed to get this info?

Maria

<image001.jpg>

Maria Alexiadis BSc, MD
Head, Department of Family Practice, Nova Scotia
Health Authority
Mumford Professional Centre
6960 Mumford Road, Suite 0265 (Main Floor)
Halifax NS B3L 4P1
Office: 902-487-0202
Fax: 902-454-7107
Email: maria.alexiadis@nshealth.ca

for scheduling requests, contact:
Alexa McCrae, Administrative Assistant
Phone: 902-487-0209
Email: alexa.mccrae@nshealth.ca

From: Rockwood, Kenneth

Sent: Wednesday, April 15, 2020 4:09 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Alexiadis, Maria
<Maria.Alexiadis@nshealth.ca>

Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>

Subject: RE: We need a way for Northwood to buy IV Ringers Saline,
Normal saline, and tubing, butterflies, venous caths

Thanks

Good all around

I will let them know to contact you re the authorization in due course and
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Sent: Wednesday, April 15, 2020 4:06 PM

To: Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis,
Maria <Maria.Alexiadis@nshealth.ca>

Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>

Subject: RE: We need a way for Northwood to buy IV Ringers Saline,
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Shelly how do we move this forward?

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Cc: McNeil, Shelly <Shelly.McNeil@nshealth.ca>
Subject: RE: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

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Sent: Wednesday, April 15, 2020 3:53 PM
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Subject: We need a way for Northwood to buy IV Ringers Saline, Normal saline, and tubing, butterflies, venous caths

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Senior Medical Director for Acute Care, Nova Scotia Health Authority
Professor of Medicine (Geriatric Medicine & Neurology)
Kathryn Allen Weldon Professor of Alzheimer Research
Dalhousie University
Halifax, NS B3H 2E1

From: [McVeigh, Wendy](#)
To: [LeBlanc, Angela](#); [Monroe, Randi](#); [REDACTED]; [MacDonald, Tammy](#); "[Elliott-Lopez, Vicki](#)";
[REDACTED]; [Hawkesworth, Theresa](#); [Stevens, Susan](#); [REDACTED];
[REDACTED]; [Connell, Katherine](#); [Sullivan, Vickie](#); [Alexiadis, Maria](#); [Rawding, Patsy A](#); [McCormick, Bethany](#); [Howlett, Todd](#); "[Jeannine.lagasse@novascotia.ca](#)"; [Carr, Brendan](#); [Stevenson, Colin](#); [Murphy, Matthew](#);
"[Smith, Alexandra \(Health\)](#)"; [Proffitt, Joshua G](#); [Elinn, Jill](#); [MacDonald, Madonna](#); "[Knowles, Ruby M](#)"; [Tate, Natalie](#); [REDACTED]; [REDACTED]; [Saulnier, Jenna](#); "[Cruikshank, Cindy J](#)"; [REDACTED]; [REDACTED];
[REDACTED]; [Elliott Rose, Annette](#); [Melvin, Kate](#); [REDACTED]; [Clarke, Barry](#); [Tschupruk, Cheryl](#); [Zwerling, Isabelle](#); [REDACTED]; [Miletic, Natalie](#); [Rockwood, Kenneth](#); "[Purcell, Angela L](#)"
Cc: [Hurd, Alison](#); [Kennedy, Shelby](#); [REDACTED]; [Langille, Paula D](#)
Subject: Update Cancel reoccurring NSHA & Northwood Joint Meetings
Date: Thursday, May 14, 2020 1:06:50 PM
Importance: High

Good afternoon everyone,

As we continue to see the Northwood COVID outbreak evolve it is important to review our ongoing response structure and reoccurring meetings. Based on discussions today with Janet Simm, Vickie Sullivan and Susan Stevens we are cancelling our daily NSHA & Northwood calls effective today. A cancellation notice will be sent shortly. These meetings will be replaced with reoccurring M/W/F meetings with a smaller membership representing NSHA, Northwood, IWK and DHW. This group will continue to review outbreak related matters and coordinate timely response.

The HR Deployment working group will continue to meet daily at 1100 to review staffing related matters and Northwood will continue to submit a daily report including imminent staffing issues for the next 24-48 hours.

In closing, I want to thank you all for your ongoing support and efforts throughout this outbreak. Your response is outstanding.

Kind regards,

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

I support inclusion

Office/Cell: [REDACTED]

Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Saulnier, Jenna **On Behalf Of** McVeigh, Wendy

Sent: Tuesday, May 05, 2020 4:25 PM

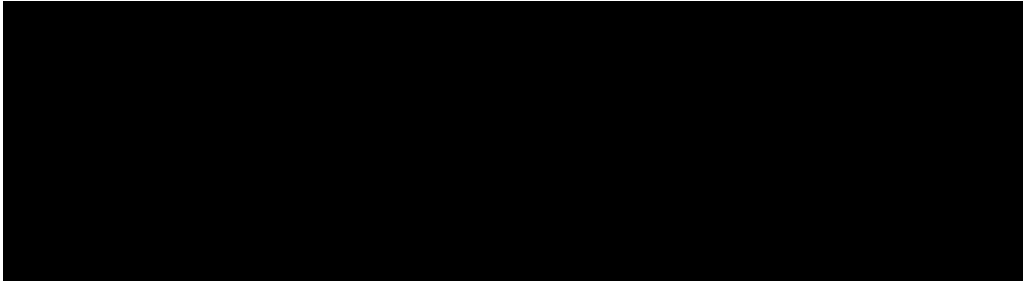
To: McVeigh, Wendy; LeBlanc, Angela; Monroe, Randi; Bernadette Mitchell-McDonald; MacDonald, Tammy; 'Elliott-Lopez, Vicki'; Linda Verlinden; Murray Stenton; Hawkesworth, Theresa; Stevens, Susan; [REDACTED] [REDACTED] Connell, Katherine; Sullivan, Vickie; Alexiadis, Maria; Rawding, Patsy A; McCormick, Bethany; Howlett, Todd; 'jeannine.lagasse@novascotia.ca'; Carr, Brendan; Stevenson, Colin; Murphy, Matthew; 'Smith, Alexandra (Health)'; Proffitt, Joshua G; Flinn, Jill; MacDonald, Madonna; Knowles, Ruby M; Tate, Natalie; [REDACTED] Lisa Carr; Saulnier, Jenna; 'Cruickshank, Cindy J'; Margaret Szabo; 'Natasha Handspiker'; Elliott Rose, Annette; Melvin, Kate; Terri Sarty; Clarke, Barry; Tschupruk, Cheryl; Zwerling, Isabelle; Leslie Bellefontaine; Miletic, Natalie; Rockwood, Kenneth; 'Purcell, Angela L'

Cc: Hurd, Alison; Kennedy, Shelby; 'Karen White'; Langille, Paula D

Subject: NSHA & Northwood Joint Meeting

When: Occurs every day effective 2020/05/09 until 2020/05/31 from 2:00 PM to 2:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference



From: [Stevens, Susan](#)
To: [Stevenson, Colin](#); [Stone, Joanne](#); [Piers, Geoff W](#); [McVeigh, Wendy](#); [Gorman, Louise](#)
Subject: urgent meeting to discuss staffing requirements at Northwood
Date: Friday, April 17, 2020 12:12:05 PM
Importance: High

Louise is sending a 1230-1pm appointment – we need to meet ASAP

Thanks

Susan



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
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DRAFT Scripting for Northwood Family Communication for COVID-positive residents

KEY MESSAGES

- Our priority is the safety of residents and staff.
- As you know, Northwood has an outbreak of COVID-19 impacting many residents and staff. Sadly, several residents have died from COVID-19.
- Northwood is following direction and advice from Public Health related to the care provided to those affected and is working with Nova Scotia Health Authority and the Department of Health and Wellness to ensure there is sufficient staff to care for residents and manage operations. The NSHA COVID clinical team as well as our Family Practice and Geriatrics physicians are working closely with the Northwood clinical team.
- We are committed to keeping staff, residents and families informed about all developments related to COVID-19 and how we will continue to ensure everyone receives the care they need.

Phone Script:

Good afternoon / morning.

My name is [first name]. I am a XXXX with NSHA. I am calling to speak with [name of family member / substitute decision maker].

You may be aware that the Nova Scotia Health Authority is working very closely with Northwood. I'm calling to give you an update on how (name of resident) is doing. There don't seem to be any changes with your XXXX (add any relevant details that are available). If there are changes, the nursing team will call you with an update.

Over the next few weeks, I will be calling you every day to let you know how your XXXX is doing. If you have questions, please feel free to call me and I will get the information for you.

I know this situation is upsetting and that you are concerned about your loved one. Please know that the team at Northwood is doing everything they can to protect the health and safety of your XXXXX and all residents and staff. Public Health is involved and is providing direction and support in managing the situation. Our physicians are also working closely with the doctors and nurses at Northwood.

We are committed to keeping you updated on the situation. You can go to the Northwood website at <https://nwood.ns.ca/information-updates/> for daily updates and there will also be regular media briefings and I will contact you again tomorrow.

Is there something specific you are concerned about that I can find out for you? Is there a time of day that works best for you? I will do my best to connect then. In the meantime if you have questions or concerns please contact me at ... [phone number]. Is there anything else you would like to discuss with me today?

Thank you for your support during this time. It is appreciated.

DRAFT Questions & Answers for Northwood Family Communication

How did COVID-19 get into Northwood?

While we can't say for certain, we expect it may have been brought into the facility by employees who were not exhibiting symptoms of the virus.

We unfortunately had a number of staff working in our Halifax facility who had not travelled and were either symptom free or mild symptoms not known to be associated with infection of the virus. They exhibited none of the tell-tale signs and continued to work. These individuals may have been exposed in their homes and communities. They were not aware of the fact that they were spreading the virus and they are devastated by this. It reinforces the critical nature of the Public Health orders. The choices that we make in our home and our communities may impact us all, including the vulnerable individuals living at Northwood's Halifax Campus.

Why is my loved one in the same room/on the same floor with someone who is positive? Are individuals who are COVID-19 positive residents being isolated?

Measures have been put in place to separate residents and limit contact within the overall capacity and layout of the facility.

In the planning and preparation for COVID-19, Northwood prepared a 20-unit, single room unit. With increasing numbers on other floors, a second COVID-19 unit was created with an additional 23 beds. With additional spread throughout the building, we are now isolating individuals within their rooms on their units at this time. Measures have been put in place to separate residents and limit contact within the overall capacity and layout of the facility. A treatment unit has been created for residents with COVID-19.

Unfortunately, given the spread and experience with testing if an individual who has not been tested is sharing a room with a COVID positive resident we have to assume that co-resident is positive until testing can confirm their status. We then determine the ability to separate within our capacity.

Can I come and get my parent/loved one and bring them home with me?

Family members are permitted to remove their loved ones under certain conditions, but it is not recommended. Please contact Linda Verlinden to discuss.

If my loved one becomes ill with COVID-19 will I be able to see them?

Unfortunately, we are not able to allow visitors at this time. Exceptions may be made for compassionate reasons. Needs to be confirmed. Until confirmed, direct specific requests to Linda Verlinden.

How will I know if my loved one gets COVID-19?

Someone from Northwood will contact you to discuss your loved one's test results and care plan.

What are you doing to make sure there are enough staff to look after my loved one?

Northwood's resources have been stretched to manage a growing situation, but we can tell you that a number of supports are now in effect. Northwood has received support from a number of organizations including NSHA, EHS, VON and the Red Cross to ensure there is sufficient staff to care for residents and manage operations.

What are you doing to screen staff to make sure they are healthy before they come to work?

We are screening all staff when they arrive at the facility, which includes temperature checks at least once daily and if they start to have symptoms in the workplace, they go home immediately. We have a detailed script of screen questions that are updated when needed. Staff who have any signs or symptoms of illness are required to stay home and call occupational health prior to coming to work.

What are you doing to screen residents to make sure they don't have COVID-19?

We are closely monitoring all residents. This includes daily assessment for symptoms and temperature checks to identify any resident with COVID-19 symptoms and we provide testing if any symptoms are identified.

How will you prevent my parent/ loved one from catching COVID-19?

We have implemented strict isolation measures to protect residents. We are following guidelines provided by Public Health and Nova Scotia Health Authority. Good hand and respiratory hygiene, regular health screening of staff and residents, social distancing, and rigorous environmental disinfection are all key measures. All staff are issued and have received training on the appropriate use of PPE.

Are residents being moved into hotels?

A COVID-19 Recovery Unit has been set up at the Holiday Inn where residents who have recovered from COVID-19 are being moved to a local hotel that meets health and safety requirements.

Will COVID-19 positive residents be transferred to hospital?

The COVID-19 unit at the Halifax Infirmary has been relocated to Northwood to help support the acute care needs of residents on site. Northwood's Medical Director is working with a team of physicians to assess residents and determine the best environment for treatment. We are able to complete testing and treatment for COVID-19 onsite.

What are you doing to ensure the safety of residents?

Northwood has implemented isolation measures to protect residents. All employees are screened on entry and self-screening symptoms of illness every day, and we are continually monitoring and testing residents. Care providers are equipped with the necessary personal protective equipment (PPE). Increased infection control measures are in place to help mitigate the spread of the disease. We are continually reviewing processes to determine if more can be done. Employees are also trained in exceptional hand hygiene and health habits as they support those in our care.

Do employees have access to personal protective equipment (PPE)?

All of our staff have the personal protective equipment (PPE) they need to support our residents.

Why is Northwood's Halifax Long Term Care Facility been hit so hard by the COVID-19 virus?

We have a team working with public health analyzing the data. We're hoping that the data will give us information about how we got here and how we respond going forward. The long term care industry is used to communal living and we have expertise in preventing infections and outbreaks. This is part of what we do every day however the characteristic and behavior of this virus has never been seen.

Instructions for calling families of non-COVID residents:

- You will be given the full resident master list that includes all caller assignments. From this list, you will be able to tell if there are COVID-positive people on the unit(s) of residents you have been assigned (these are the highlighted names).
 - The next of kin listed is their first “emergency contact” on record.
 - If you need help with the list, contact Robin.Latta@nshealth.ca
- Make calls at least once a week, unless family requests more frequent or you identify need for more frequent contact. Be sensitive to family members who you feel may benefit from more frequent contact. Offer to call twice a week. Recognize that you may not have new information but the reassurance of a call may be helpful for some.
 - Calls should be able to be kept to Monday-Friday during regular business hours.
 - Provide the family member your contact information but be sure to include information on what hours you will be available to receive and make calls.
 - If a family requests contact beyond these hours, inform Linda Verlinden that such contact has been requested.
- Use the script provided, adjusting wording as necessary based on your judgment but keeping to the key messages.
- The Q&As can be used to inform and support your responses to questions that come up.
 - Common questions are about having COVID and non-COVID people on same floor (or in same room). Be familiar with that response.
- If the family member asks specifics about the care or health status of their loved one, give them the name and phone number of the appropriate Northwood staff member as noted below. You can be clear that you do not have access to their chart.
 - **Social Workers** for clinical and resident-specific care questions (e.g. if family wants to take them home, care tasks performed, etc.)

▪ Sylvia Colley-Ewing	1,2,3 Centre / 10,11 Manor floors	454-3334
▪ John O’Keefe	4,6 Centre	454-3355
▪ Pamela Hartling	5Centre / 3,4,7,8,9 Manor floors	454-3333
▪ Nancy McLeod	7,8,9 Centre / 5,6 Manor floors	454-3365
 - **Client Relations Coordinator & Navigator** for non-clinical, facility related questions (e.g. can I deliver items to my family member)

▪ Linda Verlinden	902-478-9794	<div style="background-color: black; width: 150px; height: 1.2em; display: inline-block;"></div>
-------------------	--------------	--
 - **Unit** for other related clinical information (not preferred method as units are having difficulty in being able to answer the phones)
 - Nursing contact information available separately on *NW Nursing Quick List*
- First thing every morning, you will receive an email from Robin Latta with an updated master list which will include new COVID-positive cases and other do not call residents/families.
 - You will need to review the names of your resident list each day before making calls.

Calling Northwood Families: Information for Callers

April 22, 2020

- Do not call families of people on your list who are newly COVID-positive. They will be contacted by someone else who has access to the resident's chart.
 - The morning email will also include a do not call list for other reasons (e.g. palliative, went home with family, etc.).
- Throughout the day, you may receive an additional email(s) from Robin if someone on your list has tested positive for COVID-19. Do not call these families.
- Someone else (Northwood staff or volunteer) will likely have already made calls to the family. Keep this in mind. There may also be cases where they have had recent contact based on a call they made to the unit or someone else at Northwood. We won't always be able to identify when multiple calls will be made.
- At the end of each day, document the calls in the communication log through this survey link: [Northwood Family Contact Tracking](#)
 - Includes: date, name, resident group, number of calls, outstanding issues.
 - These will be reviewed on a daily basis and information reported as necessary.
 - Additional documentation of the non-COVID calls is not required.
 - Only add issues that you were not able to address or did not refer directly to Northwood. This will avoid duplication of effort.
 - Do not include identifying information (resident or family) in the survey. We will contact you directly if there is a specific issue that needs follow up.
- Access to Northwood's electronic health record (PointClickCare) is not required.
- Messages about the resident being non-COVID positive should be provided in the context that this is the information you have at the time. If their loved one subsequently tests positive, they will be contacted directly by someone else (from Northwood).
- Northwood is providing virtual connections for families to talk with their loved one. Have the family call 902-719-7523 to leave their name and number and then Northwood staff will call them back.

Northwood contact information:

Linda Verlinden

Client Relations Coordinator & Navigator

Phone: 902-478-9794

Email: [REDACTED]

Up to date information on Northwood's situation and response:

<https://nwood.ns.ca/information-updates/>

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)	2020-04-19
Site (No Abbreviations)	Northwood Halifax Campus	Operational period (24hrs)	1200h – 1700h
Scribe Name (Print)	Natalie Tate	Position, Department & Contact Information	Scribe
Incident/Event	2019 Novel Coronavirus (2019-nCoV)		
IMT Updates			
Purpose: Situational Awareness checkin meeting with Northwood and NSHA.			
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. Care plans and goals of care – met with Drs Miller and Shetty and developed plans for goals of care, how referrals will be done, and a communication plan. Drs Miller and Shetty have been given access to Northwood data systems. b. Analytics modelling, dashboard – Matt Murphy to connect with Josie/Jennifer to get access to data from EMR c. Physician remuneration – Maria to continue to work with Grayson 2. Operations <ul style="list-style-type: none"> a. Clinical care – working on patient flow. Have discharged 1 patient, 15 on unit, however more cases today. b. Infection control - Developing plan for medication pathway. c. Educator from NSHA coming in tomorrow. Northwood will give NSHA staff access to their hub to access policies/procedures. Educator will work with staff tomorrow to establish this. d. Shuttle bus will be running tomorrow e. Two swabbers have been identified for tomorrow. Adequate supply of swabs on hand for the next couple of days.

- f. Staff and a manger from NSHA will be at Northwood tonight to assist, and will continue to have a presence to support, as needed.
- g. NSHA staff will have virtual orientation this evening, which will include safety plans, fire protocols etc.
- h. Adequate supply of PPE on hand, and is accessible to staff. Need to continue to educate staff around N95

3. Communications

- a. Overall strategy – script completed. Press conference at 1pm tomorrow. Release has been sent to media. Starting tomorrow, will be reporting new cases, deaths, and recovered patients with data from DHW
- b. NSHA has established email northwood@nshealth.ca for families to use to interact/ask questions.
- c. FAQ – needs to be finalized.
- d. Janet CEO, and Karen is preparing for media tomorrow. .
- e. Connection with Families – Need to finalize script and FAQs. Team has been identified, and is ready to start calls. Family contact lists will be provided to NSHA this evening.
- f. There is still a need to identify two RNs to make calls to families for patients with positive results.
- g. Continuing Care needs a contact from IT to establish a secure hub to store client information. Also need a form and process for tracking calls made to families. Bethany to connect Continuing Care and IT together.

4. Human Resources

- a. Clinical Staff – staff in place for tonight. One RN student starting tonight. Staffing plan not yet confirmed for tomorrow night. There is a need for more RNs.
- b. Support Staff – staff from NSHA procurement to help manage supplies

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

6. Offsite Location – First resident is at hotel, family was there to greet / wave to her. More equipment being moved over tonight. Have access to 36 rooms, 5 have already been equipped. More residents will be moved tomorrow morning

7. Care by Family Proposal – close to being finalized. Will share and communicate plan to NSHA when completed for assistance.

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

- Janine from DHW confirmed that all required documents have been signed by minister.
- NSHA to coordinate meetings for tomorrow via teleconference at 0945, 1300 and 1630h.

Daily Data

May 14, 2020

Occupancy Rate ~ Halifax Campus	
Occupancy Rate ~ Off Site Recovery Unit (total capacity 25)	25/25
# of vacant beds ~ Halifax Campus (total capacity 485) <i>Note: These numbers are in real time.</i>	78
# of residents in isolation <i>tested positive (cumulative)?</i> <i>Note: publically reported today – not real time</i>	234
Active Cases <i>Note: publically reported today – not real time</i>	27
Total # of residents recovered (cumulative) <i>Note: This includes the numbers in the recovery unit. These numbers are in real time.</i>	162
Total # of staff positive Northwood (cumulative) <i>Note: publically reported today – not real time</i>	97 staff total (2 new)
Active staff cases <i>Note: publically reported today – not real time</i>	15
# of NW staff/boots on the ground in place today (just # not types of staff)	Total: 240 Nursing: 164 Food: 35 Enviro: 37 Other: 4
# of staff/boots on the ground from other organizations deployed/in place today	Total: 61 Nursing: 54 Food: 2 Enviro: 2 Other: 3
# of NW staff return to work today <i>Note: These numbers are in real time and may fluctuate through out the day</i>	0
# of NW staff expected to return to work tomorrow <i>Note: These numbers are in real time and may fluctuate through out the day</i>	3

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

1. Medical

- Care plans and goals of care remain a focus. Total number of infected residents (as of 0945h meeting) is 111. Triaging 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.
- 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.
- Need to create ‘round times’ and will require nurse to assist with these virtual rounds. Josie meeting with teams today to create assignments.
- Swabbing team arrived today. Josie meeting with team to get swabbing completed.
- Physician remuneration – acceptance of remuneration agreement has been received from DHW. Additional discussions to occur re funding models for regular, covid, and hotel care.

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

- c. Working on physician coverage – good for other staff
- d. Using external cleaning company as hotel will not support cleaning

7. Care by Family Proposal – Family assistance program started first pilot this morning – identified gaps. Regrouping to make changes before continuing with program

8. Risks/Open items – no additional items to add

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

- NSHA to coordinate meetings for Tuesday and Wednesday via teleconference at 0945 and 1630h.
- Team priorities within next 24-48 hours:
 - 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

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
<p>1. Medical</p> <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. <p>2. Operations/Staffing</p> <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 being working towards providing list of recommendations and education. Have some structures to put in place, and also

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 NSHA staff. NW waiting for approval from NSHA occupational health for same.

3. Communications

- a. Media briefing scheduled for tomorrow. Vickie from NSHA 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 NSHA 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: _____

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: _____

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: _____

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	<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>	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>	In Progress

Signature: _____

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:</p> <p>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>

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

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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	Complete

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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

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			
<p>Purpose: One check in meeting held today at 1400h. 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. 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. <p>2. Operations/Staffing</p> <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.

- 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).

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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
	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

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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

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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. 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

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							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.</p> <p>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</p> <p>Communications for assistance for messaging to address this issue.</p> <p>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	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
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
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. Apr 24: update will be provided on afternoon call Apr 25: Work continues. Dr Clark is onsite, and Blue Group on call. Maria working on one student to be deployed. Process now established.	Complete
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 Apr 24: update will be provided on afternoon call Apr 25: process has been established.	Complete
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

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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

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
<p>1. Medical</p> <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. <p>2. Operations/Staffing</p> <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. [REDACTED] – 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.

<ul style="list-style-type: none"> g. IWK has 5 or 6 RNs who can help out 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. 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. j. Staff required for swabbing. Exploring possibility of SLPs and/or medical students filling this role. <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.
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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
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 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> <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

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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>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>	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

NSHA Incident Management System

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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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			
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. 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

- 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 NHA – in NSHA orientation today

3. Communications

- 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

4. Logistics (Supplies, PPE, Equipment, Finance) – experiencing issues with disposable shoe cover supply. Steve NW and Patsy NSHA will connect to resolve this issue.

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.

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 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	Low	Apr 25: FAQ to be updated to reflect NOK and SDM will receive patient update calls Apr 26: no update today Apr 27: made 320 calls last week. Progressing well, meeting with callers today to make sure they are no outstanding issues.	In Progress
32	2020-04-27	1630h	Communications	Aligning data with DHW	Communication Team	Moderate	Apr 27: number of positive cases being reported does not match the province's numbers. Working through aligning data and developing messaging re same.	In Progress
17	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. Apr 26: still required at this time. Will continue to check in every day on this item. Josie will advise if no longer needed Apr 27: Paramedics still required. Currently 200 cases of positive residents. 25% of them would be considered recovered	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	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

#	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
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	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> <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

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.

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

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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

#	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
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

#	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	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

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
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

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> <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

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	Apr 23: Josie and Barry working through this. Apr 24: Work is underway, continuing to refine processes. Apr 25: working with clinical leaders and physicians. Process is being refined. Apr 26: no update today Apr 27: looking at tools. Josie to connect with Barry. Apr 28: Josie working with Barry, developing strategy	In Progress
33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	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.	In Progress
14	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. Apr 24: no additional information today. Apr 25: still focusing on compassionate care for now, this needs to happen first and will help to ready for Care by Family. Apr 26: planning for reboot on Tuesday. 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.	In Progress

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, [REDACTED]. 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

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	<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> <p>Apr 29: Matt continues to work with vendor to find solutions to pdf format for printing.</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> <p>Apr 29: no additional updates to report.</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>	In Progress
24	2020-04-25	1400h	Communications	Calls to families	Communication Team	Low	<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> <p>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.</p>	In Progress
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	<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 on boarded, and iPad are being distributed.</p> <p>Apr 29: Noted during family calls many families are inquiring on when the system will be in place.</p>	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
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. Apr29: Meeting held 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: _____

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: _____

3 of 8

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	<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> <p>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.</p>	In Progress

Signature: _____

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
<p>1. Medical</p> <ul 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 be sent to NW and NW to confirm details. d. Noted that necessary documentation for clarification of research protocols has been received. Item marked as complete (#35). <p>2. Operations/Staffing</p> <ul 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

- d. Orientation for medical students begins today. Discussed items for inclusion: Swabbing training, data entry, point of contact for students.
- e. RN Clinical leader notes that the Care by Family pilot went well. Pilot family member excited to continue working today.
- 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).
- g. Incident meetings have been updated to once daily. Weekend meetings to be assessed tomorrow. Item marked as complete (#30).

3. Communications

- 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).

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

5. Offsite Location – 12 residents in hotel.

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. 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

#	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 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

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	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	Low	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

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
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	Low	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

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
<p>1. Medical</p> <ul 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. <p>2. Operations/Staffing</p> <ul 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.

- 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).

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	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

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
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

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
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

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
<p>1. Medical</p> <ul style="list-style-type: none"> 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. <p>2. Operations/Staffing</p> <ul style="list-style-type: none"> 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.

3. Communications

- 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)

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

- 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.

5. Offsite Location – 16 are in the recovery unit.

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 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)

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	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

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
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

#	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
23	2020-04-25	1400h	Communications	FaceTime with Families	Josie/Randi Munroe	Moderate	<p>Apr 30: additional iPad now available, as well as additional staff (4 additional people). Process well established. Will verify current status.</p> <p>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</p> <p>May 2: As of last night all video chat request have been completed. Process is well established with the Resident Comfort Assistance team. Currently developing a video to notify families that this services is available. Designated Hospice iPad is being set up by IT and waiting on delivery.</p>	In Progress
25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Why not	Moderate	<p>Apr 30: of the 40 scheduled to return to work, 23 workers have had sick leave extended until mid-next week.</p> <p>May 1: 15 staff have been cleared to come back to work as of today. Next update will be provided on Monday</p> <p>May 2: Total 85 staff, 4 more positives. Staff that are cleared to come back to work are being called/ scheduled in accordingly.</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
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

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)	2020-05-04
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
<p>1. Medical</p> <ul style="list-style-type: none"> a. Total residents positive: 220; Total staff positives: 87, 2 new CCAs since yesterday. 25 recovered staff and are back at work. b. Staff swabbing clinics are set up on Tuesday at 0700h as well as one in the evening. Next Clinic is scheduled on Thursday of this week. All swabbing clinics are run by NW internal staffing. Item is marked as complete (#8) c. Noted today that there is specific criteria that all positive cases need to meet in order to be considered recovered. As of today, there are 48 cases classified as recovered with a projected 70 individuals that will meet the recovered criteria by end of week. These numbers are in addition to the 18 currently at the external recovery site (hotel). <p>2. Operations/Staffing</p> <ul style="list-style-type: none"> a. Staffing is in place for tonight and tomorrow morning. b. Care by family initiative is going well, second family has begun working has been on the floors. The Team will continue to monitor the program as it continues to be rolled-out. Item is marked as complete (Item # 14). c. NW to begin development of a strategy for releasing some of the NSHA staff that has been deployed to NW. Vickie S. will coordinate a

meeting with Janet and Josie.

3. Communications

- a. 13 video chats were completed on Saturday with families, demand for this service is expected to grow. NW to connect with IT re delivery of Hospice iPad.
- b. NW considering an ask for additional person to join in press conference this Wednesday to address article referencing provincial response. Continue to monitor until strategy has been formalized.
- c. FaceTime interview to be conducted today with one of the residents who will be turning 100.
- d. Continue to receive media requests, but treating most with the previously developed Q&A.

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

- a. NSHA and the Vendor have connected re- medication supplies. There are ongoing shortages of specific drugs, NSHA Pharmacy and Vendor will work together to ensure appropriate supplies. Marked as complete.

5. Offsite Location – 18 are in the recovery unit with 4-5 moving today. The 29 bed recovery unit is expected to be filled by Wednesday/Thursday of this week. Internal space planning is underway, it is expected to have multiple recovery units available between the various sites.

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 1400h via teleconference.
- 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; 29 items closed. 1 new added item: #39 (Strategy for releasing staff). Today's closed items: #8 (staff Swabbing); #14 (Care by Family Proposal); # 38 (Monitoring Medication Supplies).

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	May 1: Connecting with Vendor to confirm the functionality of new screen. May 2: No additional updates. May 4: New screen has been built, however reports are showing no data. Janet to connect with Jennifer, Jennifer to reach out to Matt re operationalizing data entry to optimize information flow.	In Progress
4	2020-04-20	0945h	Operations	Confirm process for physician virtual rounds	Barry Clarke and Josie Ryan	Moderate	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. May 4: No additional updates.	In Progress
17	2020-04-23	0945h	EHS	Paramedics for rounding	Cindy Cruikshank	Moderate	May 1: Med students a SLPS are being trained to assist in the near future. Continue to monitor. May 2: Still required for this weekend. To make a decision early next week. May 4: To report on this tomorrow.	In Progress
20	2020-04-24	1630h	IPAC	Guidelines for staff moving from non-covid to Covid work areas	Vickie and Randi	Moderate	May 1: IPAC support remains in place. Good progress. Reassessing on Monday. May 2: No additional updates. Currently evaluating ongoing support, to report early next week. May 4: No additional updates.	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
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25	2020-04-25	1400h	OHSW & People	Contacting staff on work isolation	Caroline/Barbara Why not	Moderate	<p>May 1: 15 staff have been cleared to come back to work as of today. Next update will be provided on Monday</p> <p>May 2: Total 85 staff, 4 more positives. Staff that are cleared to comeback to work are being called/ scheduled in accordingly.</p> <p>May 4: Total of 87 positives; 25 recovered and are back at work. Expecting this number to increase over the next few days.</p>	In Progress
33	2020-04-28	0945h	Operations	Assessing need for additional recovery space/capacity	Janet / Branden / Barry / Josie	Moderate	<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> <p>May 4: 18 are in the recovery unit with 4-5 moving today. The 29 bed recovery unit is expected to be filled by Wednesday/Thursday of this week. Internal space planning is underway, it is expected to have multiple internal recovery units available.</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
36	2020-04-29	0945h	Analytics	Symptomatic vs asymptomatic	Josie	Low	May 1: no additional updates today. May 2: Received information last night, list currently being developed. May 4: List is to assist with identifying those who formally meet the case definition for "recovered". As of today, there are 48 cases classified as recovered with a projected 70 individuals that will meet the recovered criteria by end of week. This is in addition to the 18 currently at the external recovery unit (hotel).	In Progress
37	2020-05-02	1400h	Communications	Monitoring media	Communications Team	Low	May 2: Noted recent news article, NW communications and CNS Comms to prepare a response as needed. Will monitor. May 4: Additional person may be asked to join in press conference this Wednesday to address article referencing provincial response. Continue to monitor until strategy has been formalized. Also, a FaceTime interview to be conducted today with one of the residents who will be turning 100.	In Progress
39	2020-05-04	1400h	Operations	Strategy for releasing staff	Janet/ Janet/ Vickie S.	Low	May 4: NW to begin development of a strategy for releasing some of the NSHA staff that has been deployed to NW. Vickie S. will coordinate a meeting with Janet and Josie.	In Progress

Deployment Information

Date: as of 0900 on May 4th 2020

Pooled Posting		
	Hired	Onboarding
NP		1
RN	29	43
LPN	2	16
Clerical*		
Support*		

* Do not have access yet

Northwood The table below does not include 8.4 staff. Active planning underway to withdraw the 8.4 staff this week

Current Unit profile: *Head Count*

Clerical		RN		RCA		CTA		LPN		Housekeeping	
Pooled Posting	8	6B	1	Hearing & Speech	4	HRCE	4	6A	1	External	4
		Neurology	1	Pooled Posting	2	EXT	7	Neurology	1		
		Western zones	3			Neuro surg	2	Rehab	2		
		Northern zone	7			ED	1	EXT	1		
		MGMT	2			WZ	2	IWK	2		
		ED	2			NZ	2	Northern Zone	2		
		PACU	1			Nursing homes	2				
		Pooled posting	9			Primary care	1				
		IWK	12			Rehab	1				
		Veterans	1								
		DGH	2								
		Critical care	1								
		Inspired	1								
8		43		6		22		9		4	
0/8 NSGEU		8/43 NSGEU		0/6 NSGEU		5/22 CZ		4/9 NSGEU		0/4 NSGEU	

LTCA		Continuing Care		Agency							
External	9	Callers	33	RN	3						
Rehab	3	RN	1	LPN	3						
Western zone	3	LPN	1	CTA	10						
NZ	1	RCA	2		1						
Primary Care	1										
DGH	1										
18		37		17							
5/ 18 CZ											

Two groups of callers:

Non-COVID – families of residents who have not tested positive for COVID-19

COVID – families of residents who have tested positive for COVID-19

Who is doing the calling?

Non-COVID Northwood staff

NSHA CC staff: units: 1C, 8C, 9C and 7M, 8M, 9M, 10M (C= Centre, M=Manor)

COVID Northwood staff

NSHA CC staff

What are the supports available to complete the calls?

Instructions for Calling Families (non-COVID, COVID)

Script (non-COVID, COVID)

Q&As

Resident Lists

Communications Log (survey)

Northwood Nursing Quick List

Pilot Group

A group of three callers made calls to families of non-COVID residents yesterday. We tweaked support materials based on their feedback.

Today's Focus

Non-COVID calls

Tomorrow Morning Focus

COVID calls

Next Steps

After the call

- I will send you the draft supporting materials for non-COVID calls.
- I will schedule

Tomorrow morning:

- Robin will send you the master list with the resident assignments
- A second session for COVID callers, including process details, and PCC overview
- PCC access information for COVID callers will be shared

From: [McVeigh, Wendy](#)
To: [Sullivan, Vickie](#)
Cc: [Stevens, Susan](#)
Subject: RE: concern: Northwood update
Date: Tuesday, April 21, 2020 6:27:22 AM

Thank you Vickie



[Visit NSHA Continuing Care web page](#)

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

 I support inclusion

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
<https://novascotia.ca/coronavirus/>

From: Sullivan, Vickie
Sent: Tuesday, April 21, 2020 6:22 AM
To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: concern: Northwood update

Hi Wendy

We are also hearing concerns and have heard from the unions as well. So let's plan to connect this am

Vickie

Sent from my iPhone

On Apr 21, 2020, at 1:00 AM, McVeigh, Wendy <Wendy.McVeigh@nshealth.ca> wrote:

Thank you Vickie for the tremendous support you and team have provided.
Unfortunately, I continue to receive reports of great concern for patient care.

I am sorry to burden you both with this but I am thinking we need to have an urgent call in the morning to discuss.

Wendy

<image001.jpg>

Wendy McVeigh

[Visit NSHA Continuing Care web page](#)

Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

<image003.jpg> **I support inclusion**

Office / Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

From: Sullivan, Vickie

Sent: Monday, April 20, 2020 7:03 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>

Subject: FW: Northwood update

So you are aware of work done today

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: MacQuarrie, Cindy

Sent: Monday, April 20, 2020 5:08 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Casault, Cathy Ann
<CathyAnn.Casault@nshealth.ca>

Cc: Connell, Katherine <Katherine.Connell@nshealth.ca>; Hudson, Shawna
<Shawna.Hudson@nshealth.ca>

Subject: RE: Northwood update

Thanks for the update Cathy Ann. Vickie and Kitty, IPPL will continue to support this until it is determined that the support is no longer required. In addition to the education plan that is already established, we may want to consider:

1. IPAC Coach program (Sheri R and Tammy MD Co-leading)
2. Access to OP3 (public facing)

3. Access to COVID Hub (public facing)

Cathy Ann, I look forward to receiving updates on how this evolves. Please do not hesitate to reach out if there is anything I can do to assist. Thank you all!!

Sincerely,

Cindy MacQuarrie RN MN
Senior Director
Interprofessional Practice and Learning
Nova Scotia Health Authority
Cell [REDACTED]

From: Sullivan, Vickie
Sent: Monday, April 20, 2020 4:09 PM
To: Casault, Cathy Ann <CathyAnn.Casault@nshealth.ca>
Cc: Connell, Katherine <Katherine.Connell@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; Hudson, Shawna <Shawna.Hudson@nshealth.ca>
Subject: Re: Northwood update

Thank you Cathy Ann for your team's support; Dr Clark is medical director and know physician support has been provided to him. Kitty - I know you are going down to NW; can you clarify physician coverage with Josie and Barry please

Sent from my iPhone

On Apr 20, 2020, at 3:58 PM, Casault, Cathy Ann <CathyAnn.Casault@nshealth.ca> wrote:

Hi Kitty,

Just spoke with Shawna who is at Northwood with Breagh & Josh. They have come up with a plan to help make things a little safer and more efficient. This plan was mainly developed with input from the staff working on both the 1st & 11th floor. Trish Bilski is also available to the staff should they have any questions about enacting the residents plan of care.

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- ? No access to patient information that would be needed to provide safe care i.e. swallowing difficulties, mobility difficulties, code status, medication, allergies, etc.
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- ? IPPL team will work with Joanne, CNE from Northwood to plan a unit orientation that can be provided to staff coming to the facility for the first time.

Outstanding questions,

Physician coverage – team understood that HMU physician team was being deployed with them? Is this the case?

Thanks,
Cathy Ann

Cathy Ann Casault, RN, BScN, MHS
Director of Interprofessional Practice and Learning
Central Zone of the Nova Scotia Health Authority
Cell [REDACTED]

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From: [McVeigh, Wendy](#)
To: [Sullivan, Vickie](#)
Cc: [Stevens, Susan](#)
Subject: RE: concern: Northwood update
Date: Tuesday, April 21, 2020 6:27:22 AM

Thank you Vickie



[Visit NSHA Continuing Care web page](#)

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

 I support inclusion

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
<https://novascotia.ca/coronavirus/>

From: Sullivan, Vickie
Sent: Tuesday, April 21, 2020 6:22 AM
To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: concern: Northwood update

Hi Wendy

We are also hearing concerns and have heard from the unions as well. So let's plan to connect this am

Vickie

Sent from my iPhone

On Apr 21, 2020, at 1:00 AM, McVeigh, Wendy <Wendy.McVeigh@nshealth.ca> wrote:

Thank you Vickie for the tremendous support you and team have provided.
Unfortunately, I continue to receive reports of great concern for patient care.

I am sorry to burden you both with this but I am thinking we need to have an
urgent call in the morning to discuss.

Wendy

<image001.jpg>

Wendy McVeigh

[Visit NSHA Continuing Care web page](#)

Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

<image003.jpg> **I support inclusion**

Office / Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

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<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
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From: Sullivan, Vickie
Sent: Monday, April 20, 2020 7:03 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: FW: Northwood update

So you are aware of work done today

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

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Cindy MacQuarrie RN MN
Senior Director
Interprofessional Practice and Learning
Nova Scotia Health Authority
Cell [REDACTED]

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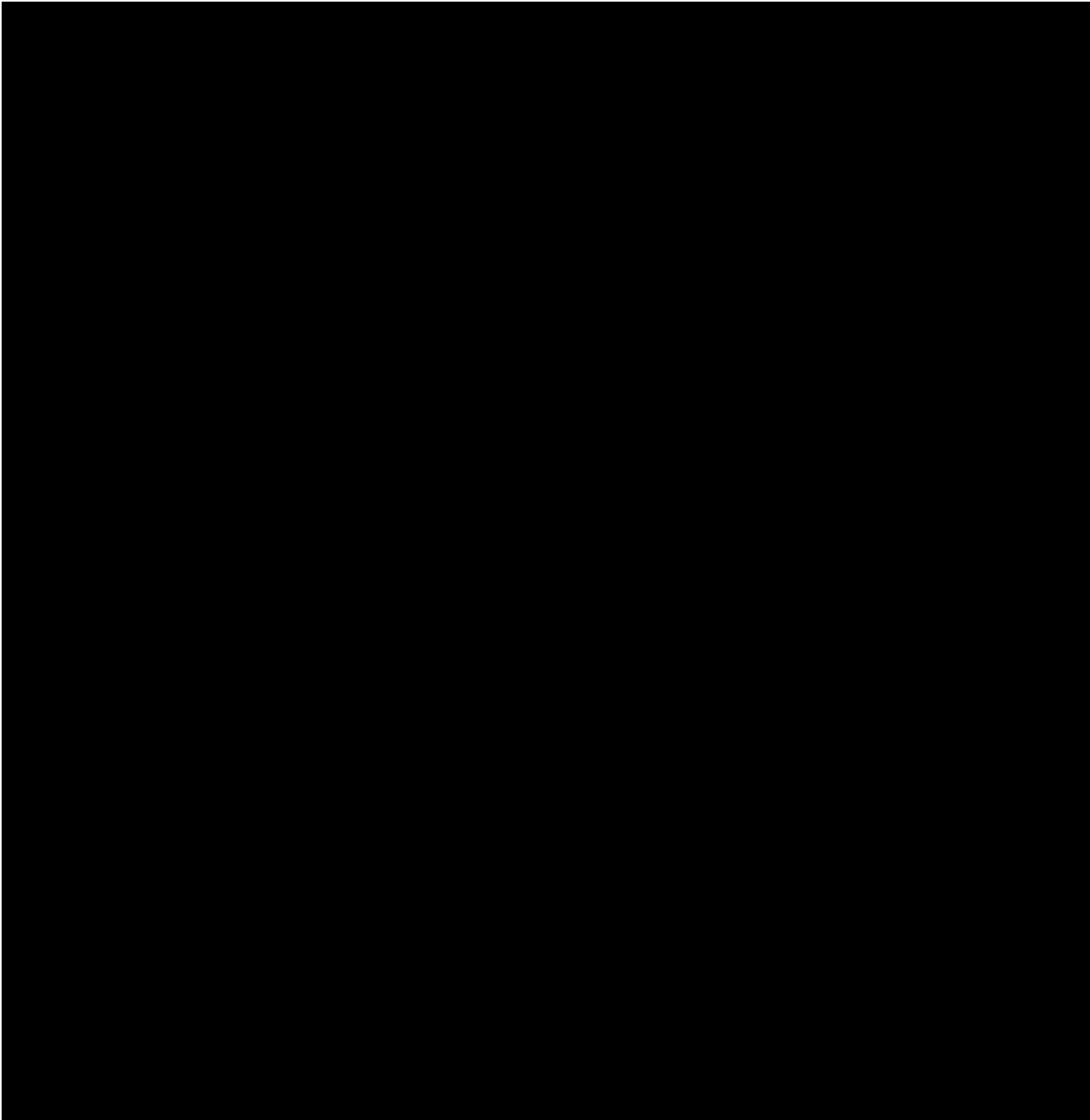
Thanks,
Cathy Ann

Cathy Ann Casault, RN, BScN, MHS
Director of Interprofessional Practice and Learning
Central Zone of the Nova Scotia Health Authority
Cell [REDACTED]

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non responsive



From: Grant, Krista L

Sent: Tuesday, April 28, 2020 9:45 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Hi Vickie – I received this regarding Janet's comments - the tone is 'encouraged' without being too optimistic (acknowledging people are losing loved ones).

Key themes:

- Appreciation for the diversity of support from the healthcare sector (medical students, speech therapists, etc.)
- Thanking donors and mentioning the foundation (they have received a lot of gifts and donations from the community, like meals for staff)
- Tackling the tenant questions head on since it keeps coming up
- A plea to landlords to allow for short term leases for healthcare workers looking for accommodation in the city

In discussing with team, I think similar to last time, your role is there in a supportive way to answer questions about operations and NSHA so no specific key messaging.

Thanks again – appreciate you stepping in to support with the media.

K

From: Sullivan, Vickie

Sent: Tuesday, April 28, 2020 7:17 PM

To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Thanks all – sounds good

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Grant, Krista L

Sent: Tuesday, April 28, 2020 7:06 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Hi Vickie,

I emailed Karen who is supporting Janet to see what or if Janet will be highlighting anything specific. If it's just an update I think our main messages from the other day and the fact that our support and resources that we have brought forward are having a positive impact on the care and treatment of the residents.

Once I hear back from Karen I will let you know and I leave to John to add and I have cc'd Theresa who may also have something to add as I know she's been involved in calls today too.

K

From: Sullivan, Vickie

Sent: Tuesday, April 28, 2020 6:59 PM

To: Gillis, John W <JohnW.Gillis@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Subject: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
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Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

non responsive

From: Grant, Krista L

Sent: Thursday, April 23, 2020 2:56 PM

To: Murray Stenton <[REDACTED]>

Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>

Subject: RE: Joint letter

Murray/Caroline,

Can you send this out to all staff asap? Thank you.

April 23, 2020

Despite recent claims regarding the working conditions at Northwood we want to assure you that the safety of the residents and the employees remains our top concern and primary focus. All employees working at Northwood receive the personal protective equipment recommended by both the World Health Organization and expert Infection Prevention and Control Clinicians in Nova Scotia. Northwood has a solid supply of personal protective equipment to keep both employees and residents safe.

Safe work environments and strong infection prevention and control practices are important in every health care setting, and especially those with a COVID-19 outbreak. Safety and infection control are so important that two infection prevention and control practitioners are on site daily to support Northwood's efforts. There are appropriate and safe spaces for staff to don and doff their PPE without risk of contamination.

As always, we encourage employees to raise any concerns they have with their onsite manager immediately so they can be addressed in a timely manner.

We sincerely thank you for the work you are doing to support the Northwood family. Our residents are benefiting from the care and support you are providing and your continued efforts to work together to provide quality care in a safe environment.

Sincerely,

Janet Simm and Vickie Sullivan on behalf of
Northwood and NSHA Leadership Teams

non responsive

non responsive

From: Sullivan, Vickie
Sent: Wednesday, April 29, 2020 3:25 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: FW: NHSA deployments APR 29

Hi Paula

Thought I would share this with you – the amount of deployment that has happened across the zone is remarkable, with over 500 staff deployed to support our covid response including Northwood. Randi and Jill have done a tremendous amount of work and as noted by Jill, it validates her fatigue.

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]

non responsive

From: Sullivan, Vickie
Sent: Monday, May 4, 2020 5:36 PM
To: Stevens, Susan <susan.stevens@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: RE: Northwood staffing

Hi Susan & Colin

I have reached out to Janet and Josie and will be meeting with them and some of their team along with Jill/Randi and Kitty tomorrow to review their clinical plan along with the staffing

I believe Jill and Randi have the deployment tracked by day so will ask them what we have

Vickie

From: Stevens, Susan
Sent: Monday, May 04, 2020 4:00 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: RE: Northwood staffing

Thanks Vickie. Do we have or could we get a report showing the total number of NSHA staff deployed to Northwood each day since April 20? I think this would be very informative too.

Susan



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
[REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: Sullivan, Vickie
Sent: Monday, May 4, 2020 1:43 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: FW: Northwood staffing
Importance: High

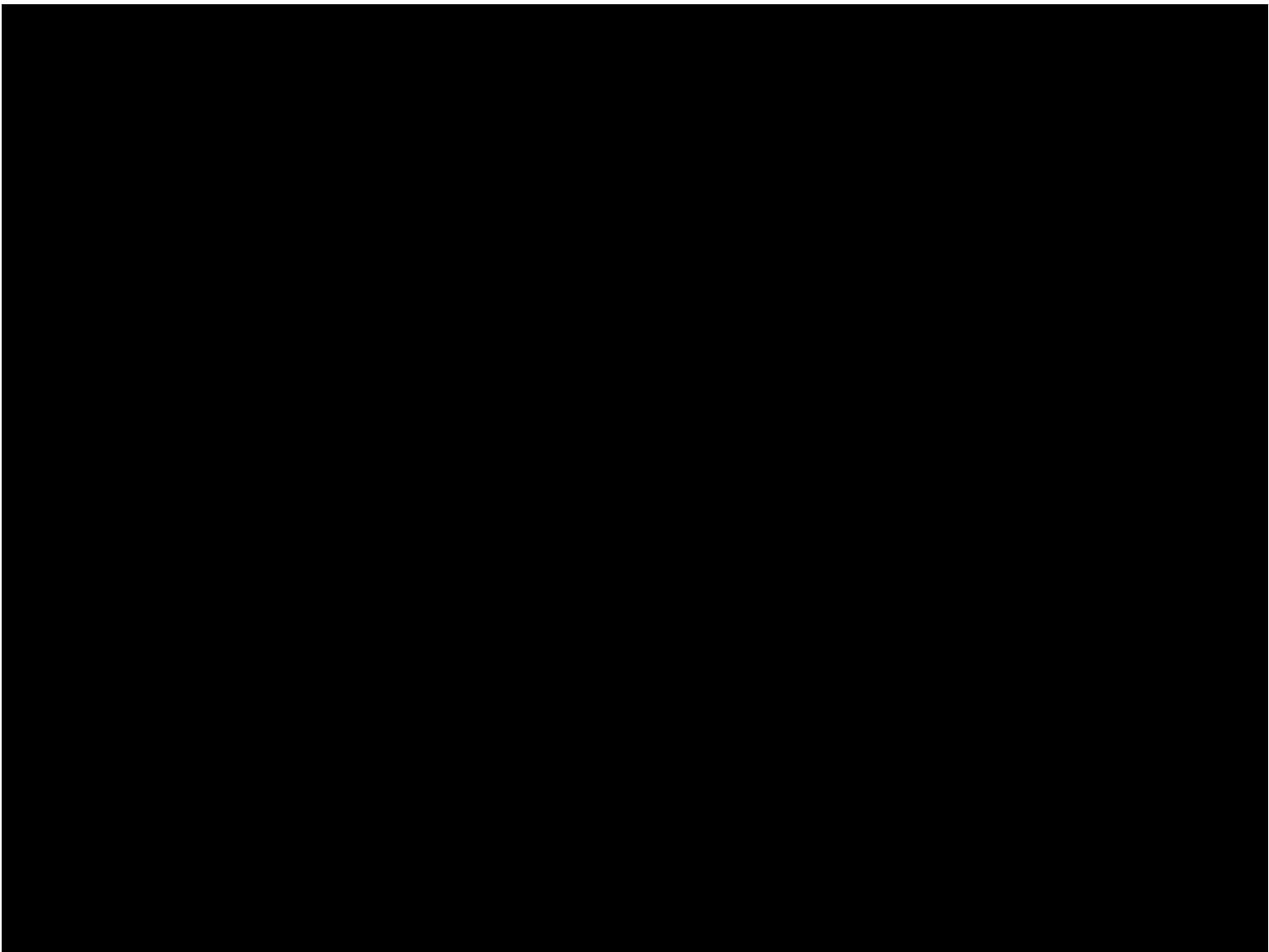
Please see attached to get understanding of staff deployed

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Flinn, Jill
Sent: Monday, May 4, 2020 12:25 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>
Subject: Northwood staffing
Importance: High

Attached is a tally of staff currently at Northwood for the update meeting today

non responsive



From: Stevenson, Colin

Sent: Saturday, April 18, 2020 7:58 PM

To: Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna

<madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Spinney, Derek <Derek.Spinney@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Subject: Northwood Support / Response

Northwood Update:

- The Ask:

- Want Critical Incident response team to be established; on the ground; co-led with NSHA/Northwood
- Scenario
 - Outbreak at Northwood – assumption is that vast majority of residents have been exposed; minimum further transmission; but assume that it is widespread; moving from containment to management;
 - Will need to:
 - Manage care of those that require it – clinical care teams within facility; staffing requirements (clinical requirements and direction); need to escalate the level of care that is required there.
 - Use staff we have trained up already and have them transition to this location for care delivery
 - Medical staff – have 25 physicians in CZ that could step in to support the resident's in facility
 - Step in to provide care on the site – acute medical issues become managed by the NSHA team (operational control)
 - Consider it a ward hospital with 400 beds
 - Support and ancillary services – cleaning; food service (support as required)
 - Logistics management – supplies; PPE; equipment
 - What do they have;
 - What do they need and intake
 - Staffing – there are opportunities to invoke and pull triggers as necessary to allow for direction of staff versus volunteer;
 - Coordination / intake of new staff (Jill and Randi)
 - PSC to support if needed
 - Secondary Site – rooms are established and equipment in process of being moved; determination of who is moving; will start tomorrow morning; (Holiday Inn in Dartmouth); Need to support this.
 - Communications – public and family member response (National PR on deck); will need conduit in to the organization for information and direct communications support for calling families

What do we need tonight:

1. Medical strategy (Nicole, Maria, Todd)
2. Todd Hatchette re testing of all of Northwood (Nicole to call)
3. Vickie – identify who is needed to support tomorrow on care assessment; bring team members in to help identify and move equipment?
4. Notify legal and insurer (Colin)
5. Notify privacy (Colin)

6. Notify Barry (Maria)
7. Connections on communication – Susan; Theresa; John (connect with comms team at Northwood)
8. Street Address (Wendy)

Tomorrow Focus:

1. Team to assess: CEO; Medical (Maria/Todd); Zone ED (Vickie); IMT Point (Bethany; Pascal; Susan); IPAC; MOH (Claudia); Communications (Krista)

What do we need; What can we bring:

- o Space - Use their board room / ball room for this.
- o Communications – phones; internet; phone numbers
- o Resources to support:
 - Clinical staffing
 - Medical / triage / decision making
 - Staffing support
 - Logistics – supply movement
 - Resident Transfer
 - Communications link to National
- o



Colin Stevenson, BSc., MHA, CHE
 Vice President – Health Services, Quality and System Performance
 Nova Scotia Health Authority
 90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
 Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
 Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

non responsive

Email: vickie.sullivan@nshealth.ca

From: Stevens, Susan

Sent: Sunday, May 3, 2020 2:52 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McCormick, Bethany
<Bethany.McCormick@nshealth.ca>

Subject: RE: Northwood today

Agree with all comments in the email trail



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
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[REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
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From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:51 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Yes we can - just sent another email as Susan and I had spoken yesterday after call and hoping to also have further conversation with Colin tomorrow

Sent from my iPhone

On May 3, 2020, at 2:48 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

Vickie – is this something that Randi and Jill could begin to draft, with input from Wendy and NW?

From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:34 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Agreed

Sent from my iPhone

On May 3, 2020, at 1:47 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

I think we need to describe the staffing experience and lessons from northwood.

Need to frame up problem and recommendations,

We need to understand and clarify if NSHA is part of the longer term LTC solution or only during the active outbreak, and when is the time for us to step back, and how.

A few key pieces of the puzzle:

Level of baseline staffing levels pre covid,

Staff Levels at start if outbreak in the LTCF?

Levels of staff now?

When are those on isolation expected back ? Expected return to work dates. ?

Who is working on the longer term FTE issue and how?

- What hiring practices are in place by Northwood and DHW now to deal with the longer terms?

Bethany

From: Sullivan, Vickie

Sent: Sunday, May 3, 2020 1:24 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>

Subject: Fwd: Northwood today

FYI

See below

think this speaks to a need for a staffing recovery plan for NW as understand beyond number booking off, they have had a number of resignations

Vickie

Sent from my iPhone

Begin forwarded message:

From: "Monroe, Randi" <Randi.Monroe@nshealth.ca>

Date: May 3, 2020 at 12:23:23 PM ADT

To: "Sullivan, Vickie" <Vickie.Sullivan@nshealth.ca>

Cc: "Flinn, Jill" <Jill.Flinn@nshealth.ca>

Subject: Northwood today

Hi,

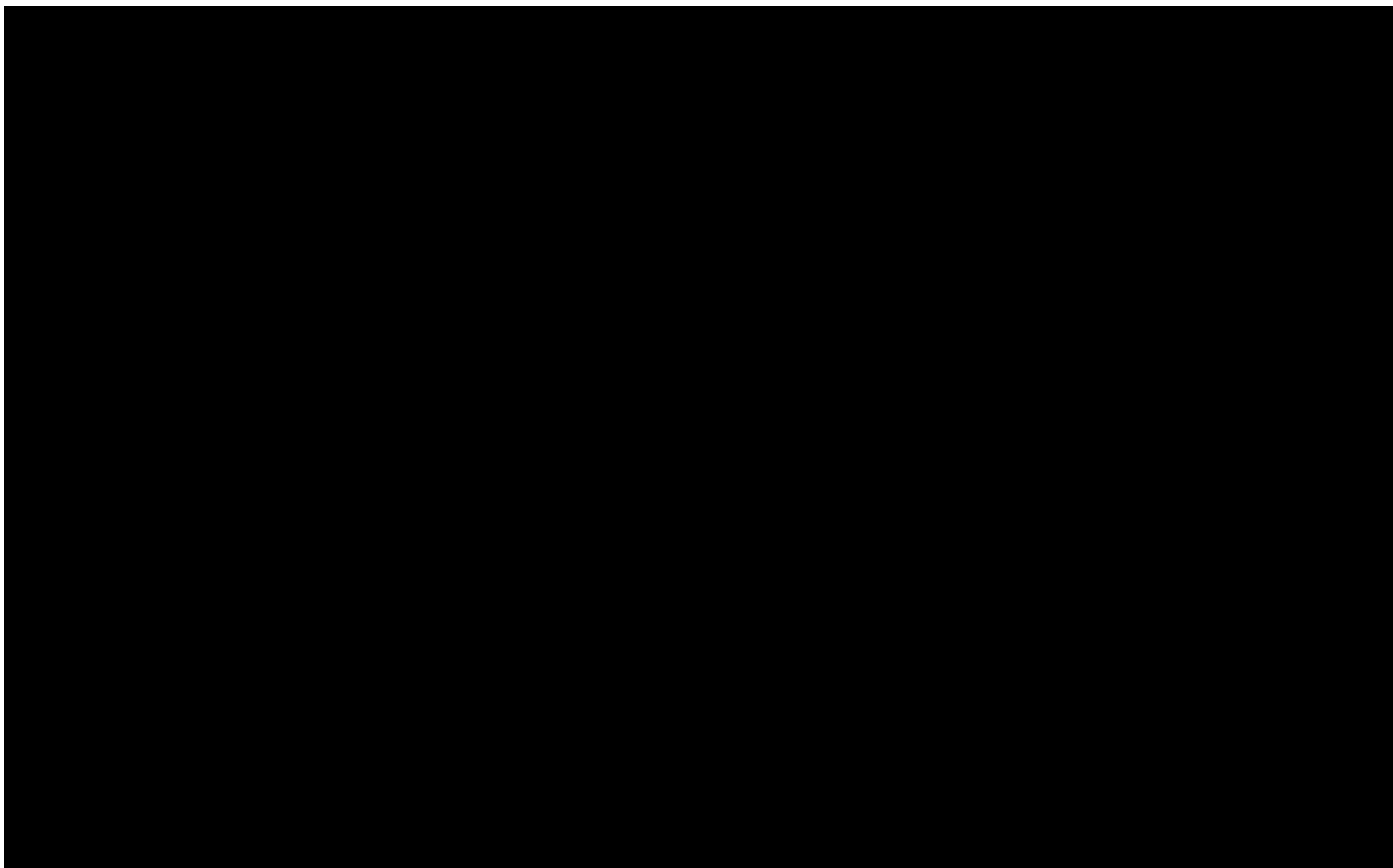
Great efforts by everyone yesterday my moved Northwood into above critical- but below normal staffing. It looks good for today and tonight. We have several new people coming into lines tomorrow, so things are looking good.

Today we talked about staffing the recovery unit at the hotel, as they have had some more resignations. I believe

we have a solution for next two weeks, but we did talk about the need to start pulling out staff back and start being in the new hires from pooled postings.

Cheers,
Randi

Sent from my iPhone

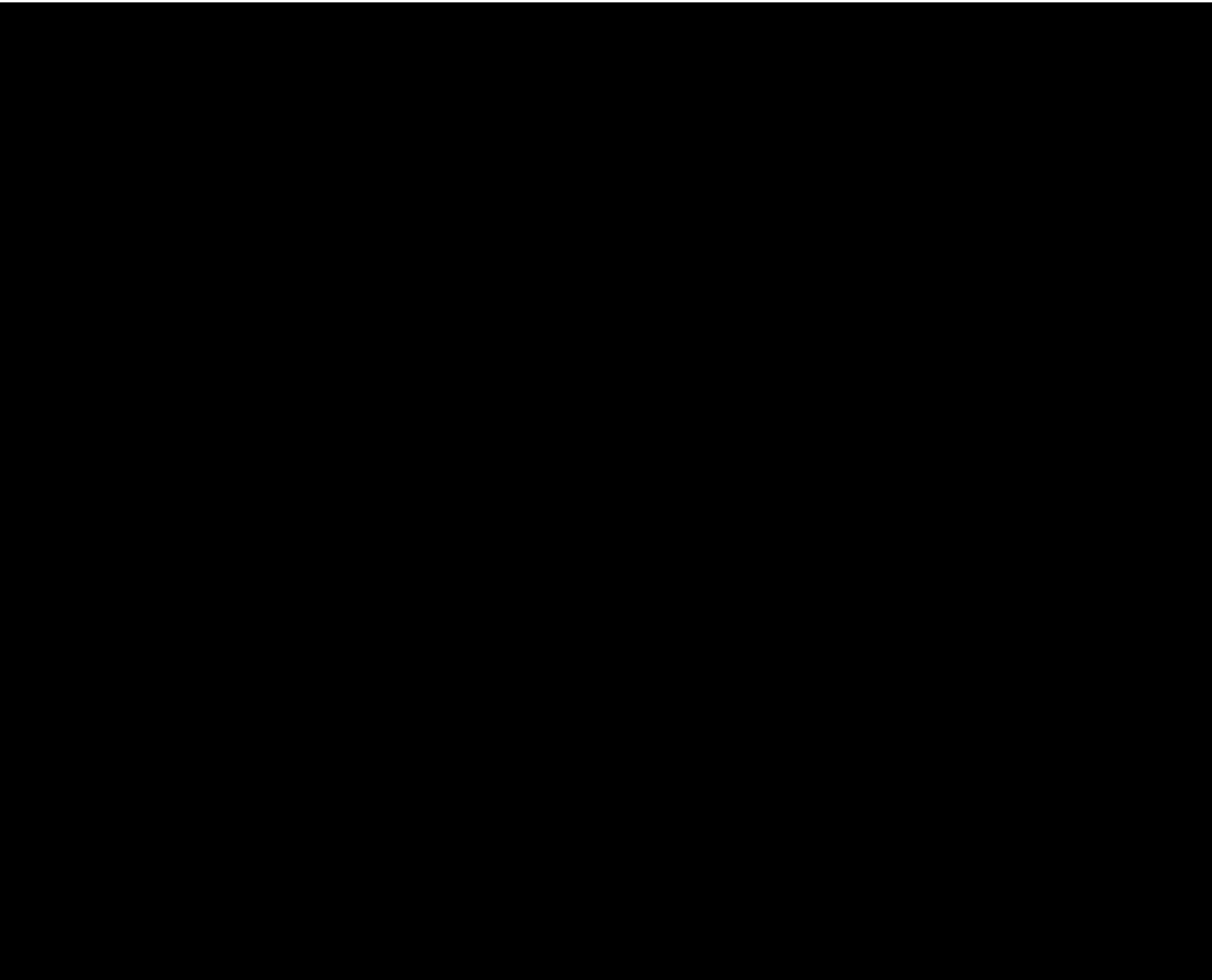


From: Sullivan, Vickie
Sent: Tuesday, April 21, 2020 8:54 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: Northwood tonight

Talked with both Josie and Janet after we talked - Josie just pulled a couple of the RNS who are coming in tonight they are strong/ skilled staff. They were reassuring. Some of her team are staying for the night and they will take turns sleeping and getting breaks just so we can keep going for the long haul. She knows we are here to help as we can

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca



From: Emergency Operations Center, NS Health Authority
Sent: Sunday, April 26, 2020 12:59 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>
Cc: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>
Subject: RE: Northwood

Vickie

Thank you for this information, if the supply chain or PPE team leaders are needed in part of the FU – I assume Patsy will pull them into the review. If assistance for EOC is needed please advise.

CC: to Angela as FYI – as she is leading the 2pm call w Northwood

Bethany
NSHA EOC Manager

From: Sullivan, Vickie
Sent: Sunday, April 26, 2020 12:50 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>
Subject: FW: Northwood
Importance: High

FYI – so you are aware

Patsy is following up on below concerns and will be back in touch. Tracey Ungar will respond back to Trish and Jason when we hear back from Patsy; will update you following

Victoria L. Sullivan, BN, RN, MHS, CON(C)
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Central Zone, Nova Scotia Health Authority
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Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Sunday, April 26, 2020 11:44 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Northwood
Importance: High

Hi Vickie,

I have been contacted by our nurses at NW this am. They are finding the masks that are provided uncomfortable and then they started to examine the packaging of the masks. I have provided you the packing of what they are being provided, this product is from China. There is no information on the packaging to tell then what is the level of the protection of the mask. I have also included a picture of the box of the products that are supplied at NSHA. **I thought they were being provided the same protection. This is very concerning to me, especially for the nurses working on 1 Center, the dementia unit, where the patients are roaming. I would have thought if NW could not**

provide the level of protection to our nurses that they obtained at NSHA, then NSHA would have provided the appropriate masks for them.

They were also dropped off N95 masks, also produced in China. They have holes in the masks, and they will be insuring that no one wears them. For one they would have to be fit tested again, these are from Wuhan and not the type of N95 provided by NSHA. Those N95 masks at NSHA, there are two types of N95, the duck bill and the cone. However, these look like very poor quality, as they took a picture wearing one with a surgical mask underneath and it was still gapping on the side.

The nurses are requesting that they be provided with the information of the level of protection of the mask that is being provided. They would like to see some literature as well about these masks, as they are concerned and how many microns is each mask and the quality of the mask itself. For example are they 80,120 or 160 microns, I will assume they are not 120 and certainly not 160.

I look forward to hearing from you and I will be forwarding my email of the nurses' concerns to NSGEU.

Thanks, Trish

Trish MacDonald
Employee Relations Officer
NSGEU
255 John Savage Ave
Dartmouth, Nova Scotia B3B 0J3

Phone 902.424.4063 | Toll-Free 1.877.556.7438 | Fax 902.424.4832

nsgeu.ca



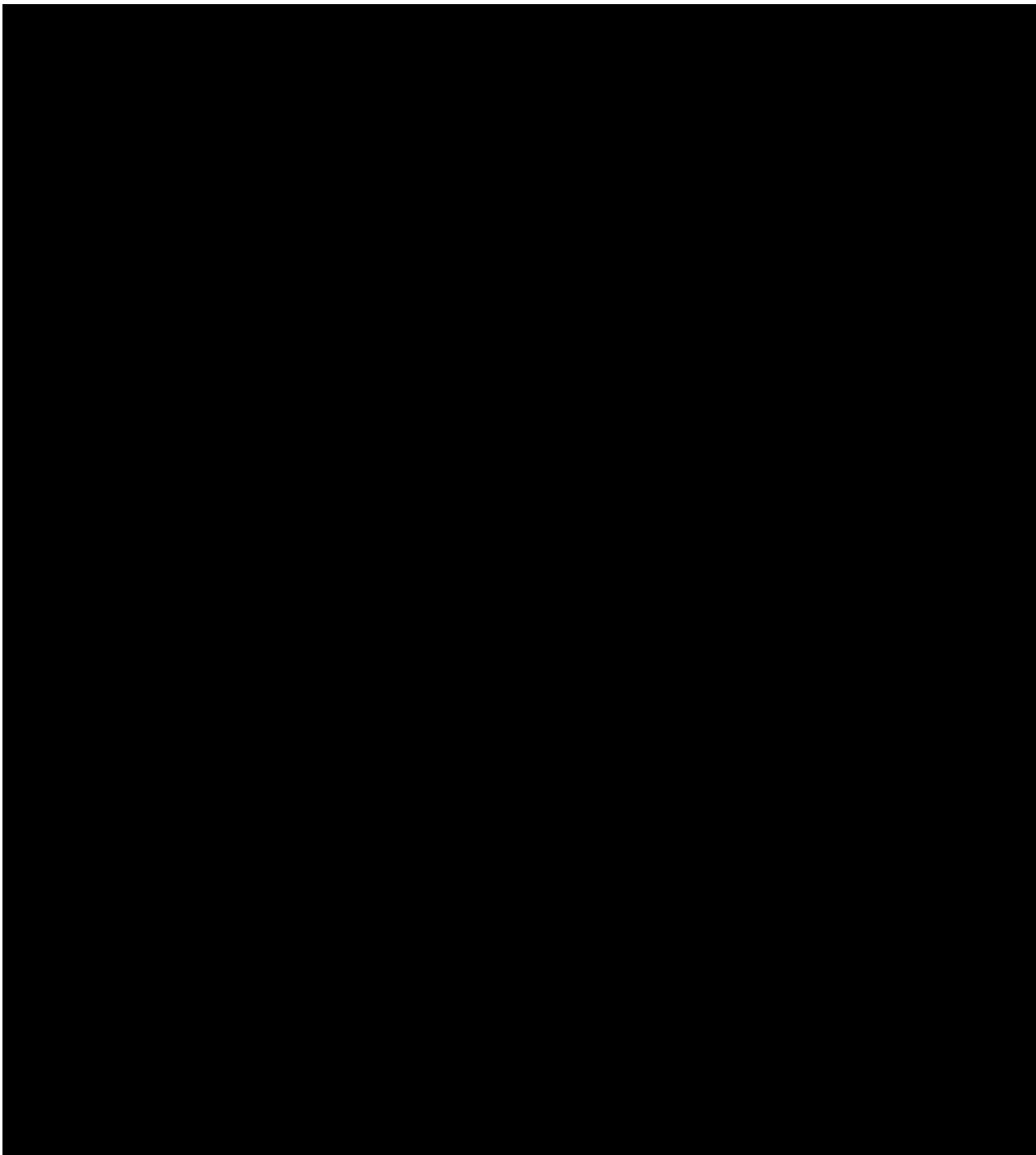
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non responsive



From: Sullivan, Vickie

Sent: Sunday, April 26, 2020 8:00 PM

To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; O'Handley, Jennifer <Jennifer.OHandley@nshealth.ca>

Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>

Subject: FW: Northwood

Please see response to Trish. Josh, Kitty and Liz were copied on the response. In talking with Patsy, the question about different masks has been raised in Western as well, so think it will only be a matter of time before other areas will also ask the question. It was referenced in the q & a when the masking policy was implemented at NSHA but sending out a reminder would likely be timely and helpful to increase staffs' awareness that we have a variety of masks in circulation and it will provide reassurance that all meet the required standards. I will send separate email to Alex and copy Bethany, Madonna and Theresa

Any questions, let me know

Vickie

Victoria L. Sullivan
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Office (902) 491-5880; [REDACTED]

From: Sullivan, Vickie
Sent: Sunday, April 26, 2020 7:49 PM
To: 'Trish MacDonald' <[REDACTED]>
Cc: Proffitt, Joshua G <[REDACTED]> Connell, Katherine
<Katherine.CConnell@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>
Subject: RE: Northwood

Dear Trish,

I am writing in follow-up to the questions about the masks at Northwood plus other questions about NSHA masks and FIT testing. The following people were consulted to respond to these questions: Patsy Rawding, Manager for Infection Control, Procurement at Northwood, Evan Cheung, Director of Supply Chain Operations, and Angela Keenan, Manager Occupational Health Safety & Wellness.

- Procedural/Surgical masks – the minimum standard for droplet protection is 60 mm Hg (this measures fluid resistance – see definition below). There are several different masks in circulation right now and Infection Control has worked with procurement to ensure all makes and models of surgical masks being brought in meet or exceed the required standards.
- Regarding procedural/surgical masks, NSHA has received and distributed several different models from several different suppliers. Most of what is currently being distributed is from our usual supplier PriMED. Some models are not the same as the ones that we typically use. Some of the federal shipments that have arrived are also PriMED masks. All procedural/surgical masks distributed meet or exceed ASTM Level 1 standards (they are a minimum of 80 mm Hg or higher).
- Regarding procedural/surgical masks at Northwood, Northwood also has several types of procedural/surgical masks in use. Some of the masks do not show the fluid resistance level on the box itself. Patsy reviewed all types of procedural/surgical masks at Northwood with their procurement and then, connected with Aaron Munro in our NSHA procurement as the NSHA has also purchased the same brands of masks and had reviewed the technical information to ensure they met the standard. All masks being used by Northwood meet the ASTM standard or the European equivalent EN 14683. All

were found to be 80mm Hg or above. These are also being used at the NSHA as well. Northwood also received a shipment of masks from the federal supply.

- Most masks do come from China and/or parts of them come from China and they may be assembled in a different country. A Staff Masking FAQ has been attached, please refer to question 9 which speaks to why some masks may look different than others.
- Additional disposable gowns have been supplied to Northwood from the DHW stockpile.
- N95 masks are not required by staff at Northwood as they are and will not be performing Aerosol Generating Medical Procedures.
- All 3M N95 masks used by NSHA meet NIOSH N95 standards. So does the Harley L-188. Both are listed as approved respirators on the CDC site.
https://www.cdc.gov/niosh/npptl/topics/respirators/disp_part/n95list1.html
- 3M N95 masks currently in circulation within NSHA include: models 1860, 1860s, 1870, 1870+ & 8210. We did receive a shipment of Chinese N95 masks (Harley L-188) but we have not yet FIT tested staff to this model. OHSW continues to work with Procurement and the Provincial PPE Working Group to identify suitable N95's to ensure that staff have the right PPE, for the right job, at the right time. A FAQ regarding the FIT testing strategy has been attached to this email.

Josh is available to respond to any questions and can review this information with staff tomorrow. We will also be requesting that the information about the various masks be shared again in the next COVID 19 update so other staff who see unfamiliar supplies have this information as well.

If you have questions and/or require additional information, please let us know.

Kind regards

Vickie

Fluid Resistance: Fluid resistance reflects the surgical mask's ability to minimize the amount of fluid that could transfer from the outer layers through to the inner layer as the result of a splash or spray. ASTM specifies testing with synthetic blood at pressures of 80, 120, or 160 mm Hg to qualify for low, medium, or high fluid resistance. These pressures correlate to blood pressure: 80 mm Hg = venous pressure (Level 1), 120 mm Hg = arterial pressure (Level 2), and 160 mm Hg (Level 3) correlates to potential high pressures that may occur during trauma, or surgeries that include high pressure irrigation such as orthopedic procedures.

Victoria L. Sullivan
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Office (902) 491-5880; [REDACTED]

From: Sullivan, Vickie

Sent: Sunday, April 26, 2020 1:26 PM

To: 'Trish MacDonald' <[REDACTED]>

Subject: RE: Northwood

Will do

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director

Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Sunday, April 26, 2020 1:23 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: RE: Northwood

Can you please verify to me if this is the shipment that arrived in Halifax last week? Is this the supplies from China that we are now using for everyone? I was told the ICU nurses on 5.2 had to all be refit tested, as they the supplier was new. Can you please tell me what is the name of the supplier for the new masks , both surgical with the microns that are being supplied to staff and the N95 masks.

Thanks, Trish

From: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Sent: April 26, 2020 11:49 AM
To: Trish MacDonald <[REDACTED]>
Subject: RE: Northwood

Thanks Trish – will follow-up with IPAC and get back to you

Vickie

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Sunday, April 26, 2020 11:44 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Northwood
Importance: High

Hi Vickie,

I have been contacted by our nurses at NW this am. They are finding the masks that are provided uncomfortable and then they started to examine the packaging of the masks. I have provided you the packing of what they are being provided, this product is from China. There is no information on the packaging to tell then what is the level of the protection of the mask. I have also included a picture of the box of the products that are supplied at NSHA. **I thought they were being provided**

the same protection. This is very concerning to me, especially for the nurses working on 1 Center, the dementia unit, where the patients are roaming. I would have thought if NW could not provide the level of protection to our nurses that they obtained at NSHA, then NSHA would have provided the appropriate masks fro them.

They were also dropped off N95 masks, also produced in China. They have holes in the masks, and they will be insuring that no one wears them. For one they would have to be fit tested again, these are from Wuhan and not the type of N95 provided by NSHA. Those N95 masks at NSHA, there are two types of N95, the duck bill and the come. However, these look like very poor quality, as they took a picture wearing one with a surgical mask underneath and it was still gapping on the side.

The nurses are requesting that they be provided with the information of the level of protection of the mask that is being provided. They would like to see some literature as well about these masks, as they are concerned and how many microns is each mask and the quality of the mask itself. For example are they 80,120 or 160 microns, I will assume they are not 120 and certainly not 160.

I look forward to hearing from you and I will be forwarding my email of the nurses' concerns to NSGEU.

Thanks, Trish

Trish MacDonald
Employee Relations Officer
NSGEU
255 John Savage Ave
Dartmouth, Nova Scotia B3B 0J3

Phone 902.424.4063 | Toll-Free 1.877.556.7438 | Fax 902.424.4832

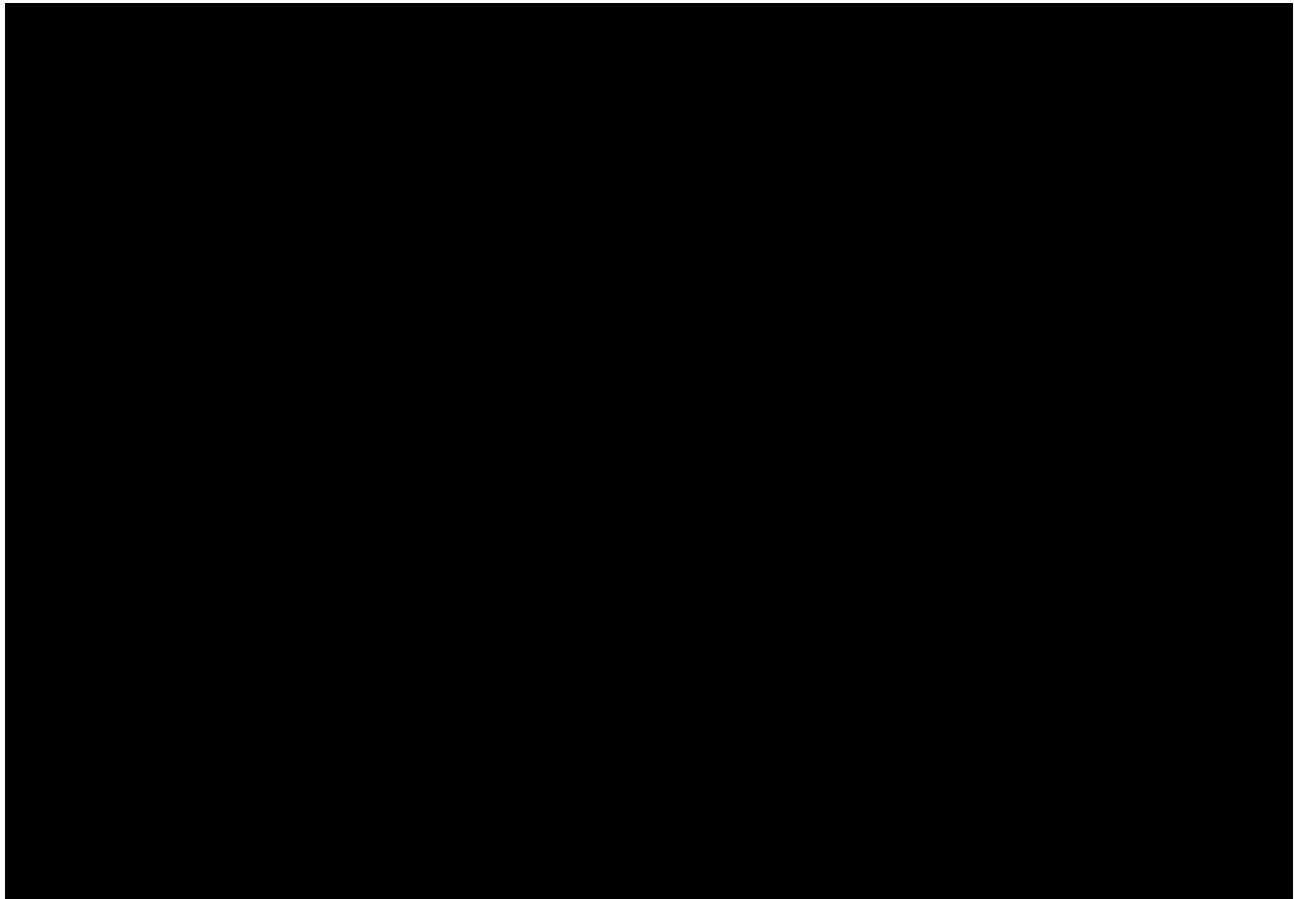
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From: Sullivan, Vickie

Sent: Wednesday, April 22, 2020 7:25 PM

To: Bond, Paula <Paula.Bond@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>

Subject: Northwood

Good evening Paula & Todd

Was at NW this evening –

- had a much better day today, clinically, NP from ED added to clinical team, now 3 NPs, to support patient care along with Barry
- staffing for nights much better than last night with a few extra registered staff which is welcomed and needed given the acuity across the building; down some unlicensed staff
- staffing tomorrow – better than today
- swabbing staff twice weekly; more staff off today who tested positive. The largest number of staff off are CCAs. Looking for increased education for this group for PPE, so will follow-up with Patsy on how this can be supported
- will be moving approx. 7 residents who have recovered to hotel over weekend; other residents will be moved to COVID units based on criteria that has been developed by the Medical Team

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
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1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

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From: LeBlanc, Angela [<mailto:Angela.LeBlanc@nshealth.ca>]

Sent: April 21, 2020 7:25 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Janet Simm <[REDACTED]> Josie Ryan <[REDACTED]> Monroe, Randi <Randi.Monroe@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Tate, Natalie <Natalie.Tate@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Clarke, Barry <Barry.Clarke@nshealth.ca>; 'jeannine.lagasse@novascotia.ca' <jeannine.lagasse@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Wendy McVeigh <wendy.mcveigh@nshealth.ca>; [REDACTED] <[REDACTED]> MacDonald, Tammy <Tammy MacDonald@nshealth.ca>; Paul Carey <[REDACTED]> Howlett, Todd <Todd.Howlett@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>

Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>

Subject: RE: NSHA and Northwood Joint Meeting - Situation Update

Thank you Vickie and teams. Please let me know if there is value in reconvening as a group or if preference is to continue to monitor with current resources.

Angela

From: Sullivan, Vickie

Sent: April-21-20 7:11 PM

To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>; [REDACTED]
<[REDACTED]> [REDACTED] <[REDACTED]> Monroe, Randi
<Randi.Monroe@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Connell, Katherine
<Katherine.CConnell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>;
Carr, Brendan <Brendan.Carr@nshealth.ca>; Tate, Natalie <Natalie.Tate@nshealth.ca>; Stevenson,
Colin <Colin.Stevenson@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>;
Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>;
Clarke, Barry <Barry.Clarke@nshealth.ca>; 'jeannine.lagasse@novascotia.ca'
<jeannine.lagasse@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Stevens,
Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>;
[REDACTED] <[REDACTED]> MacDonald, Tammy
<Tammy.MacDonald@nshealth.ca>; [REDACTED] <[REDACTED]> Howlett, Todd
<Todd.Howlett@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>
Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update

Good evening

Kitty, Carolin, and me met; reviewed with Josh the staffing on 11Manor and 1 Centre and have freed up the 2 NW staff (CCAs) assigned to those units. This has been communicated to the facility supervisor Jeremy and staff will be sent elsewhere. Likewise any NW staff assigned to those two units should be deployed elsewhere from now onwards. We will continue to work with staff on those two units to ensure they can work independently without tapping into NW resources. There are still calls out to agency staff, but we have had no confirmation of staff for tonight at this point.

Vickie & Kitty

Victoria L. Sullivan, BN, RN, MHS, CON(C)
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Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

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

From: McCormick, Bethany

Sent: Sunday, April 19, 2020 6:25 PM

To: McCormick, Bethany; [REDACTED] [REDACTED] Sullivan, Vickie; Monroe, Randi; Rawding, Patsy A; Connell, Katherine; Hawkesworth, Theresa; Carr, Brendan; Tate, Natalie; Stevenson, Colin; Rockwood, Kenneth; Alexiadis, Maria; LeBlanc, Angela; Clarke, Barry; 'jeannine.lagasse@novascotia.ca'; Murphy, Matthew; Stevens, Susan; McVeigh, Wendy; [REDACTED] MacDonald, Tammy; [REDACTED] Howlett, Todd; Tschupruk, Cheryl

Cc: Proffitt, Joshua G

Subject: NSHA and Northwood Joint Meeting - Situation Update

When: Tuesday, April 21, 2020 4:30 PM-5:00 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 7905414

NSHA and Northwood Joint Meeting

Chair: NSHA leader

Purpose: Situation Update meeting

Agenda:

Medical

Care plans and goals of care

Analytics modelling, dashboard

Physician remuneration

Operations

Clinical care

Infection control

Communications

Overall strategy

FAQ

Connection with Families

Human Resources

Clinical Staff

Support Staff

Logistics (Supplies, PPE, Equipment, Finance)

Offsite Location

Care by Family Proposal

Additional risks/Open items

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From: Sullivan, Vickie
Sent: Sunday, April 26, 2020 9:05 PM
To: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>
Cc: Mitchell, Alex <Alex.Mitchell@nshealth.ca>; Bedford, Lewis <Lewis.Bedford@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>
Subject: RE: PPE - question about the procedural/surgical masks

Thanks Theresa – greatly appreciated

Vickie

From: Hawkesworth, Theresa
Sent: Sunday, April 26, 2020 8:52 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: Mitchell, Alex <Alex.Mitchell@nshealth.ca>; Bedford, Lewis <Lewis.Bedford@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; MacDonald, Madonna

<madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>;
Stone, Joanne <joanne.stone@nshealth.ca>

Subject: Re: PPE - question about the procedural/surgical masks

Thanks Vickie,

I will flag for tomorrow's update and connect with Margaret in the morning, Theresa

Sent from my iPhone

On Apr 26, 2020, at 8:16 PM, Sullivan, Vickie <Vickie.Sullivan@nshealth.ca> wrote:

Hi Alex & Lewis

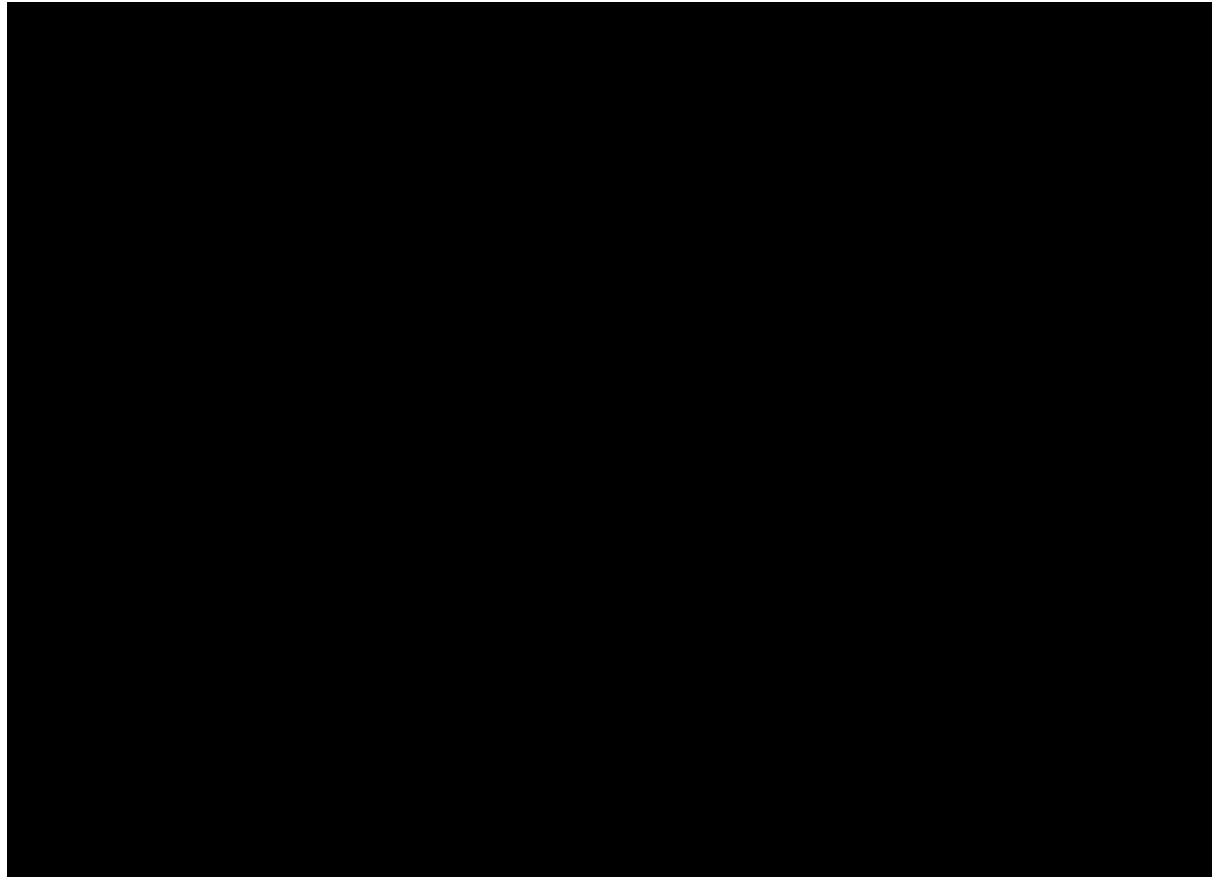
A question arose today about the various makes and models of procedural/surgical masks and whether they met required standards as the labelling on some of the new products does not include this information. While the issue was a question from a NSHA staff located at Northwood, the same make and models exist in NSHA. In talking with Patsy, I understand this same question has been asked by staff in Western. I know in the Q & A about masking there was a reference to different masks in this, with reassurance that all met standards, but would ask that a reminder be included in tomorrow's COVID 19 communication to increase staffs' awareness that they will see different makes and models of procedural/surgical masks and all meet the required standards.

Thanks so much

Vickie

Victoria L. Sullivan
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Office (902) 491-5880; [REDACTED]

non responsive



From: Sullivan, Vickie
Sent: Friday, April 24, 2020 1:58 PM
To: Stone, Joanne <joanne.stone@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Cc: Flinn, Jill <Jill.Flinn@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>
Subject: RE: Progress on Polled posting

Thank you for everything; this is incredible

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stone, Joanne
Sent: Friday, April 24, 2020 1:06 PM

To: Bond, Paula <Paula.Bond@nshealth.ca>

Cc: Flinn, Jill <Jill.Flinn@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>

Subject: Re: Progress on Polled posting

Agree thank you to everyone involved in making this happen. Great work

Sent from my iPhone

On Apr 24, 2020, at 12:57 PM, Bond, Paula <Paula.Bond@nshealth.ca> wrote:

I want to say a Hugh thank you to everyone, what you guys are accomplishing in such short lengths of time is short of a miracle.

P

From: Flinn, Jill

Sent: Friday, April 24, 2020 12:55 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>

Cc: Bond, Paula <Paula.Bond@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Subject: RE: Progress on Polled posting

Hi Vickie

Your email is timely as Geoff and I just got off the phone having reviewed the hire process. The recruitment team has made huge progress in paring down the hire timeline even in the past 24 hour. This is why we see such a significant number of people in the numbers provided below. They have cut out everything but the bare minimum required to ensure we know who we have brought in, that they have a license and are not on our 'do not rehire' list. HR is releasing names for scheduling prior to completion of onboarding (ie setting up banking and payroll etc) and health screen (where safe and appropriate).

Timelines depend a bit on new employees returning calls, but Geoff's team have even brought in people to follow up and shorten this phase as well.

Jill

From: Sullivan, Vickie

Sent: Friday, April 24, 2020 12:18 PM

To: Stone, Joanne <joanne.stone@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>

Cc: Bond, Paula <Paula.Bond@nshealth.ca>; Stevenson, Colin
<Colin.Stevenson@nshealth.ca>

Subject: Progress on Polled posting

Good afternoon

First, thank you to all of you for the work you are doing on the pooled posting. Can you confirm the length of time from onboarding to hire so we understand when this staff will be available to deploy?

With thanks

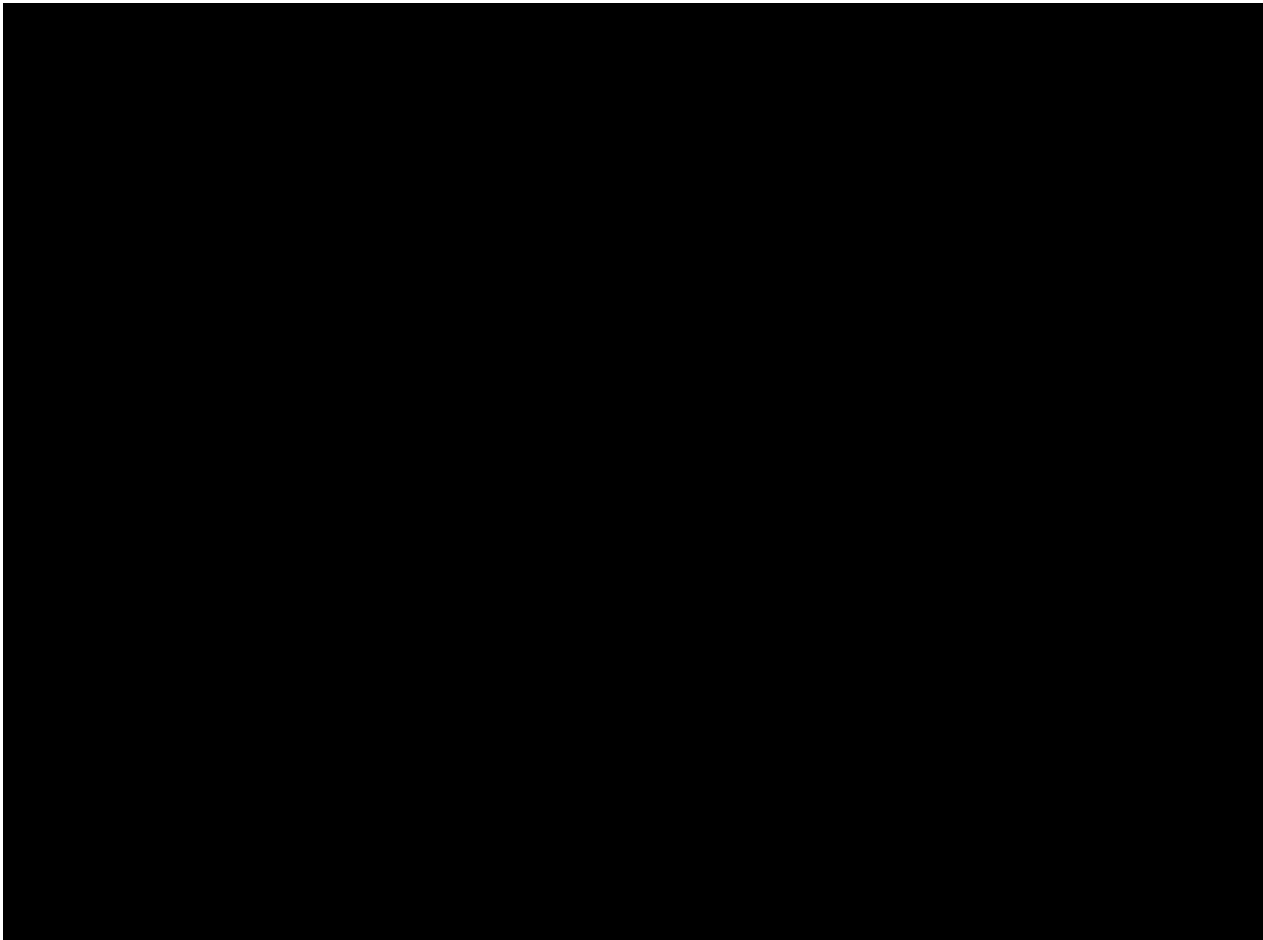
Vickie

Progress on pooled posting

To give you a sense of the movement on the pooled posting for RNs
4 hired
47 in the onboarding process
28 new offers sent out

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

non responsive



From: Sullivan, Vickie

Sent: Friday, April 24, 2020 12:18 PM

To: Stone, Joanne <joanne.stone@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>

Cc: Bond, Paula <Paula.Bond@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Subject: Progress on Polled posting

Good afternoon

First, thank you to all of you for the work you are doing on the pooled posting. Can you confirm the length of time from onboarding to hire so we understand when this staff will be available to deploy?

With thanks

Vickie

Progress on pooled posting

To give you a sense of the movement on the pooled posting for RNs

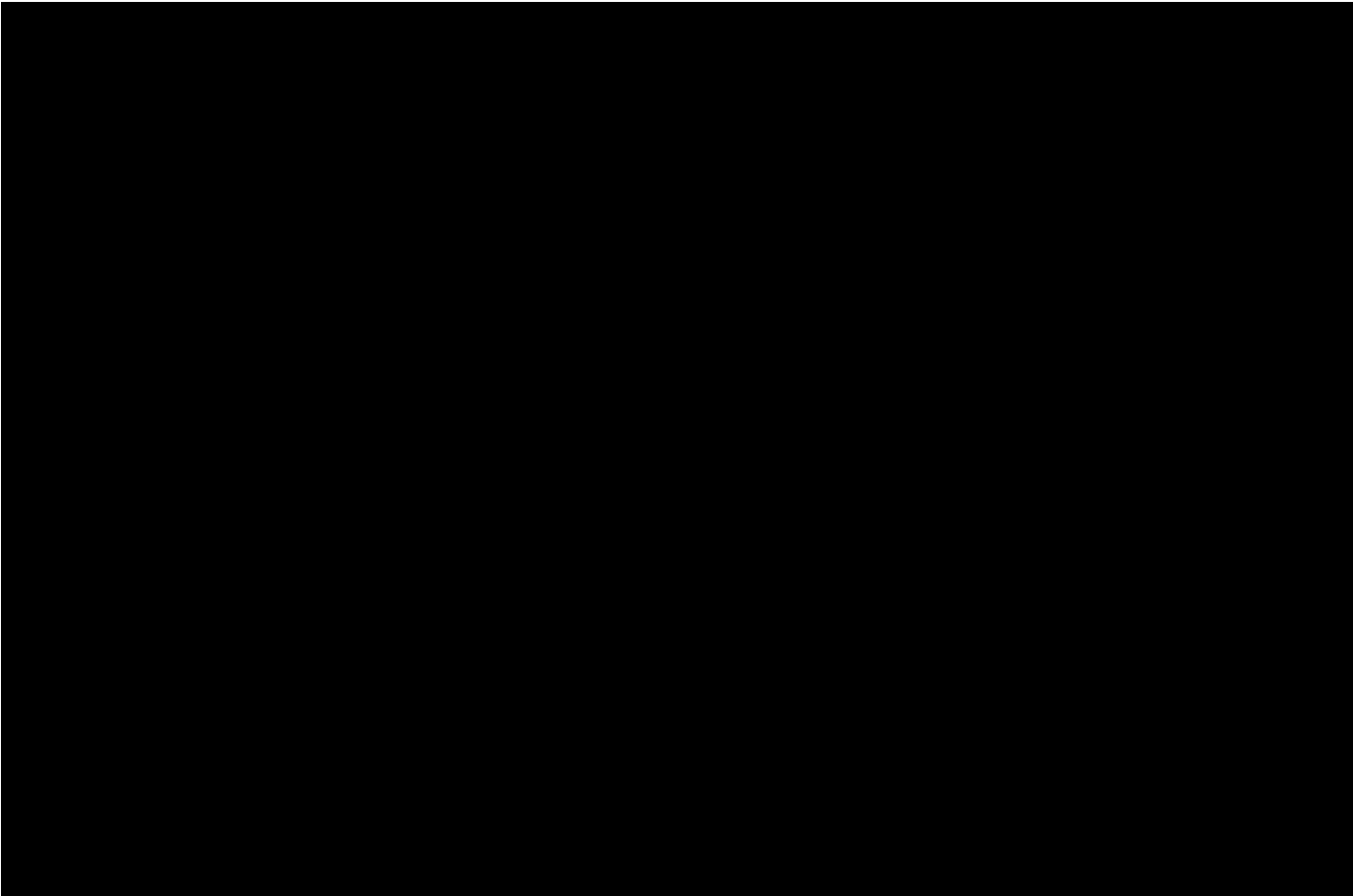
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1796 Summer Street
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B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

non responsive



From: Sullivan, Vickie
Sent: Friday, April 24, 2020 10:30 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Cc: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: RE: REQUEST FOR ACTION: Provincial Response Planning for LTC

Thanks Colin

Progress on pooled posting

To give you a sense of the movement on the pooled posting for RNs
4 hired
47 in the onboarding process
28 new offers sent out

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street

Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stevenson, Colin
Sent: Friday, April 24, 2020 10:10 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: FW: REQUEST FOR ACTION: Provincial Response Planning for LTC

Please note that you will be receiving an invite to attend a LTC provincial response meeting with DHW.

Thank you

Colin



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Emergency Operations Center, NS Health Authority
Sent: Friday, April 24, 2020 10:05 AM
To: Veale, Jonathan <Jonathan.Veale@novascotia.ca>
Cc: COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Knowles, Ruby M <Ruby.Knowles@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Orrell, Kevin <Kevin.Orrell@novascotia.ca>; Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Batstone, Angie <Angie.Batstone@novascotia.ca>; Grimm, Christine Z <Christine.Grimm@novascotia.ca>
Subject: RE: REQUEST FOR ACTION: Provincial Response Planning for LTC

Please include the following individuals in this meeting:

- Vickie Sullivan
- Susan Stevens
- Maria Alexiadis
- Colin Stevenson
- Nicole Boutilier
- Paula Bond

The agenda is appropriate.

Thanks

From: Veale, Jonathan [<mailto:Jonathan.Veale@novascotia.ca>]
Sent: Tuesday, April 21, 2020 5:34 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Knowles, Ruby M <Ruby.Knowles@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Orrell, Kevin <Kevin.Orrell@novascotia.ca>; Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Batstone, Angie <Angie.Batstone@novascotia.ca>; Grimm, Christine Z <Christine.Grimm@novascotia.ca>
Subject: REQUEST FOR ACTION: Provincial Response Planning for LTC

Dear NSHA EOC:

Over the past few days we have learned from the implementation of the LTC clinical pathways at Northwood. DHW has reflected that we should revisit our planning assumptions and discuss any shifts or add-ons to the LTC clinical pathways. By way of this message, we are requesting a subsequent discussion about the provincial response plan to LTC. Essentially we are looking to revalidate our planning assumptions and response plans.

Action: We are looking for confirmation on participating in this discussion and feedback on the agenda.

Timeline: Meeting on Friday or Monday

Proposed Agenda

- Discussion of lessons learned from current outbreaks (i.e. Northwood)
 - Clinical approach
 - HHR/HR – clinical, IPAC, OHS, site coordination, administration, etc.
 - Supply and PPE
- Reflection questions/discussion:
 - **Quality/Clinical Pathways.** Our planning assumption that we will face an surge in hospitals may need to be revisited as we flatten the curve and observe low volumes/occupancy in hospitals. It also appears that this wave of the pandemic will impact LTC more than hospital settings. What is the appropriate

approach to caring for (COVID19) residents in LTC? Is our transfer policy still appropriate?

- **Sustainability/Capacity.** NSHA is leading/supporting on 8 LTC outbreaks. What is NSHA's capacity should this increase? How might we improve the sustainability of our collective approach?
- **Integration/Whole System Approach.** We have effectively converted Northwood into a hospital annex. Is this approach suitable elsewhere (other zones)? Should we be looking at identifying other locations to "hospitalizing LTC" and hotels for recovered patients? Previously we discussed converting RCF to LTC, given the current approach is this still recommended?

non responsive

From: Sullivan, Vickie

Sent: Thursday, April 23, 2020 12:48 PM

To: Matthews, Wanda <Wanda.Matthews@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>

Subject: RE: Requested info

Hi Wanda

Thanks for the information

Can you also advise number of RNs/LPNs this would equate to meet the rotational needs as outlined below

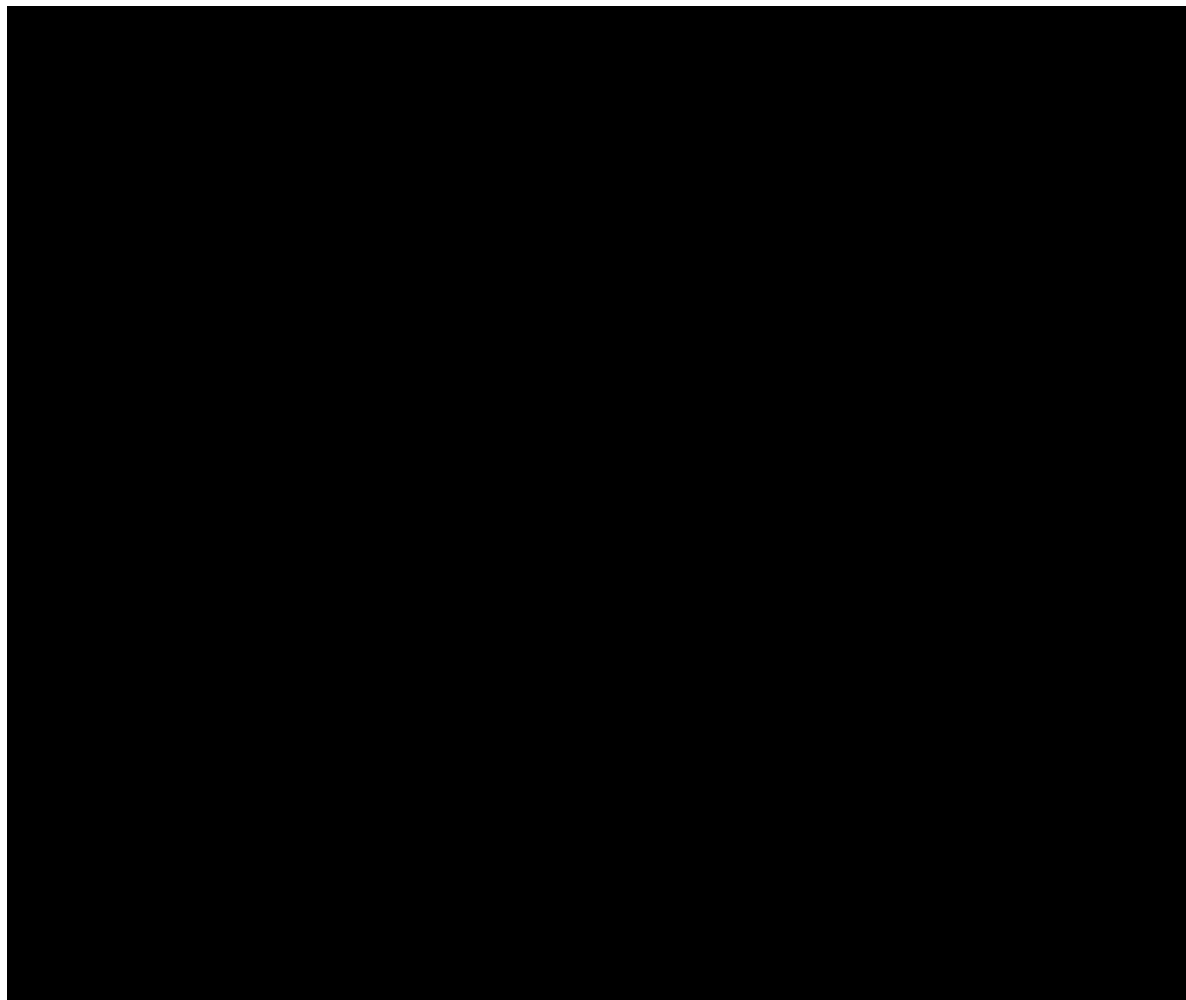
Thanks

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7

Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Matthews, Wanda
Sent: Thursday, April 23, 2020 12:36 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Requested info
non responsive



W:

Good morning. The following employees names were forwarded for deployment to support Northwood.

S 20

Northwood Support	Home unit/site	Role	Deployment start date
[REDACTED]	VRH	[REDACTED]	Declined to come
[REDACTED]	VRH	[REDACTED]	Needs an RN Buddy shift. Need to book.
[REDACTED]	VRH	[REDACTED]	April 20 th
[REDACTED]	VRH	[REDACTED]	April 20 th
[REDACTED]	VRH	[REDACTED]	April 21 st

[REDACTED]	DGH	[REDACTED]	Manager would not release.
[REDACTED]	DGH	[REDACTED]	April 20 th
[REDACTED]	VRH	[REDACTED]n	Declined to come
[REDACTED]	YRH	[REDACTED]	April 26 th scheduled
[REDACTED]	YRH	[REDACTED]	April 22 nd

Kind Regards,

Wanda



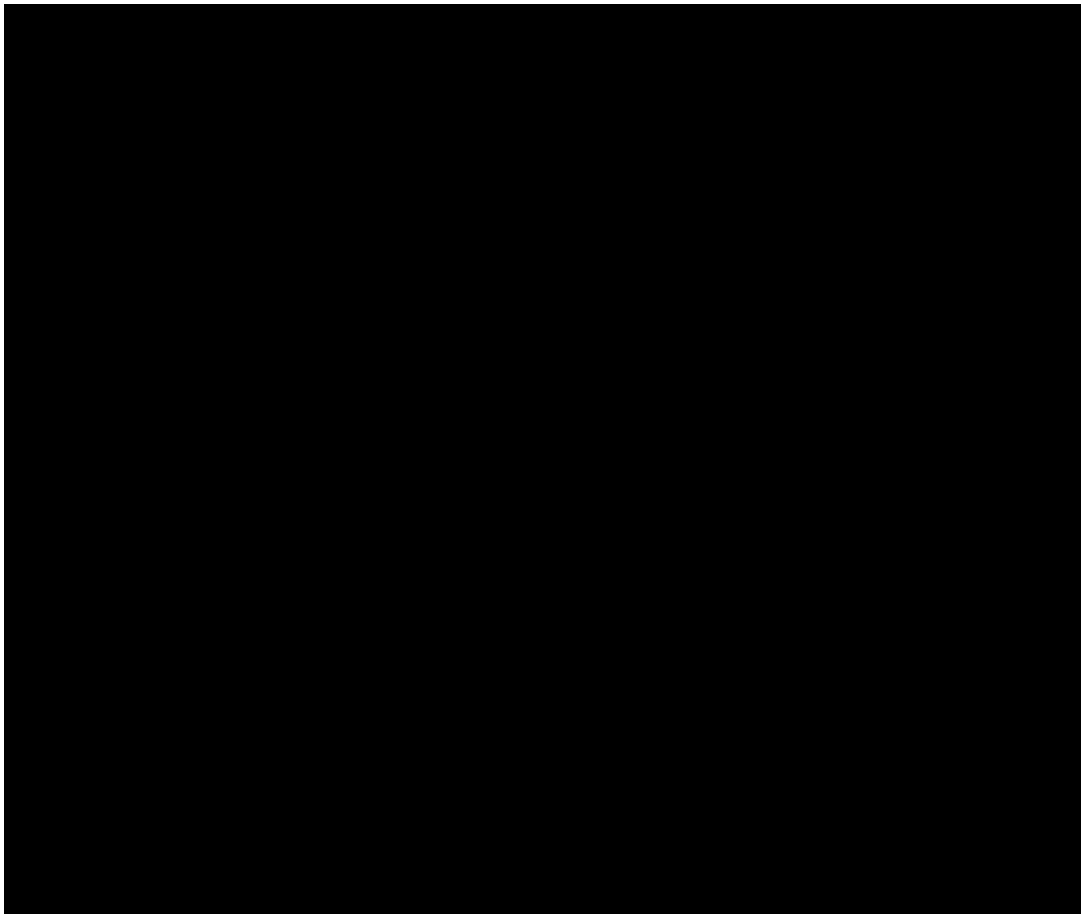
Wanda Matthews, BBA, CPA, CA
 Western Zone Operations Executive Director
 5 Chipman Drive
 Kentville, NS B4N 3V7
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 [REDACTED]
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Executive Assistant: Valerie Parker | 902.679.3765

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non responsive



From: Sullivan, Vickie
Sent: Thursday, April 23, 2020 2:26 PM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <Kristal.Grant@nshealth.ca>
Subject: FW: Response to questions about new unit at Northwood

Hi

Here was the response back to the union sent on Tuesday pm. Have also attached the email from the previous evening which outlined the concerns.

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]

Email: vickie.sullivan@nshealth.ca

From: Ungar, Tracey

Sent: Tuesday, April 21, 2020 5:13 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Connell, Katherine <Katherine.CConnell@nshealth.ca>; Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>

Cc: Piers, Geoff W <Geoff.Piers@nshealth.ca>; O'Handley, Jennifer <Jennifer.OHandley@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>

Subject: Response to questions about new unit at Northwood

Hi All

Please see our response below. This was a group effort and is longer than a high level summary but reflects activity to date.

For the record, the union did share with me that the staff on the moved unit appreciate the support that they are receiving from Josh.

Tracey

From: Ungar, Tracey

Sent: Tuesday, April 21, 2020 5:09 PM

To: 'Jason MacLean' <[REDACTED]>

Cc: Trish MacDonald <[REDACTED]>

Subject: RE: Action needed ASAP at Northwood.

Hi Jason and Trish

Please see our responses below.

In the initial 24 hours of relocating staff from 8.4 to Northwood (NW), in accordance with the Ministerial Directive, there has been a tremendous amount of work accomplished. NSHA employees are currently providing care to residents on two units as follows:

- 11 Manor; 11th floor unit with a capacity of 16 and an occupancy of 12
- 1 Centre; 1st floor unit with a capacity of 22-23 beds and is fully occupied

In an effort to provide you with an overview of actions taken to date, we can summarize as follows:

Staffing/Management/HR:

- Health Services Manager is on site and has shared his contact information with employees if needed during evenings and/or overnight
- Both units have Charge Nurse assigned, based on a long week/short week rotation and work will continue around defining roles on the unit. There will not be an additional short

assignment added.

- Additional support is available from the NW Facility Supervisor, IPAC, Professional Practice, etc
- The unit aide from 8.4 has been relocated to NW and clerical support will be there as of tomorrow
- There is space available for staff to enjoy rest breaks
- NW has offered accommodations and meals
- Getting process in place to ensure staff have access to the COVID hub for reference and information
- Setting up charting process, interim measures have been put in place while we arrange for access to electronic system
- There is no provision for 'danger pay' within the collective agreement

IPAC/OHSW Issues:

- Ongoing efforts to ensure appropriate level of PPE remain available
- Designated space available for safe donning and doffing.
- PPE stock is being maintained for easy access by staff and inaccessible by residents
- Now have adequate supply of sanitizer
- NW uses a microfiber system for cleaning; this is different than NSHA employees are used to but in compliance with facility standard
- IPAC team working with Northwood staff to review PPE best practices
- IPAC signage will be used as reminders for staff
- Employees will continue to be swabbed in compliance IPAC and OHWS protocols

Practice Issues:

- Second CNE reassigned so support can be provided to each unit Work being done with the NW Educator to develop orientation that will be used for staff coming to facility for the first time
- NW and NSHA are working together to ensure all on same page with provision of care
- Wrist bands will be used for residents who are not in private rooms (where they can be easily identified) or when a resident is identified as needing one (ie. if resident wanders)

We are working to support employees, recognizing that this new work environment is quite different than what they are used to at the Halifax Infirmary. As employees have questions and concerns, they should raise any issue directly with their HSM so that it can be addressed in a timely manner.

Given our joint goal is to support Northwood in the provision of safe care in their response to COVID19, we recommend that a regular meeting be arranged in order to discuss questions or concerns that have not been able to be resolved directly with the HSM. It is important to

remember and acknowledge that we are all doing our best to support safe quality care in a constantly changing environment during this pandemic crisis.

Tracey



Tracey Ungar, CPHR
People Services Director Employee and Labour Relations and
Northern Zone Operations
Colchester East Hants Health Centre
600 Abenaki Road
Truro, NS B2N 5A1
Office: 902-893-5554 ext 42134
[REDACTED]
www.nshealth.ca

From: Jason MacLean [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Monday, April 20, 2020 3:47 PM
To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>; [REDACTED] King, Rollie B
<Rollie.King@novascotia.ca>; Robert.Strang@novascotia.ca
Cc: Robin MacLean <[REDACTED]> Jo-Ann Bailey <[REDACTED]> Lynette Johnson
<[REDACTED]> Trish MacDonald <[REDACTED]>
Subject: Action needed ASAP at Northwood.

This information is what we've obtained from our members as reported to us by our ERO Trish MacDonald. I would appreciate a response to this today. Please acknowledge receipt of this.

We are conducting two calls this evening with both shifts going on and coming of the floors at Northwood. These workers need protection.

Here is what needs to be in place at NW:

1. You need strong nurses in be in Charge. They have their present CN Michelle, she needs to continue in her role. In addition, another RN there is Rowena, she needs to be one as well.
2. Andrea Jenkins is a casual RN with over 20 years of nursing I believe. I have spoken to her and she is willing to work in a short assignment and also be in a charge role. **She will work Monday-Friday or shift work but no nights. So either have here in charge are use her as the Resource Nurse who can go to the different units and help nurses who have questions or issues and help problem solve,**
3. These nurses will get things organised , as I don't know how many units there are, but they need to get armbands on the patients so they can identify them, determine who is a CODE

and who is not. They have no kardexes with patient information, these are documents that give quick detail about patients and what their needs are for care and deficits and if they require full or partial care. They will schedule proper breaks for the nurses on the day shifts. There should also be a designated nurse charge on each unit for the night shifts, just like their unit if working at NSHA.

4. These Charge Nurses can look after staffing and ensuring the model of care they require and staff according with the NW workers that are there and keep the flow of care and update families with questions and concerns. This is lacking greatly, family are not being kept informed.
5. They need to have an educator on site with them , as well as an Infection Control there on a regular basis until things are set up and staff are NW staff are educated and following NSHA infection control protocols. After that they should be at least on site daily to assist and answer questions. If they are off site they need to be accessible by pager to the staff.
6. The staff need to have a contact person on nights in case there are issues and it be on every unit telling them who they are to contact. For instance will his be the Bed Manager at the HI site or the manager on Call with NSHA, contacted through Locating.
7. They need our housekeepers on site, as it seems like the place needs a complete overhaul. There needs to be deep cleaning done initially and then cleaning coming through several times a day on each unit and restocking wipes, doing another clean and getting rid of the biohazard wastes of the PPES on a regular basis.
8. Does each unit have a ward clerk, if not this is something to consider for a least a clerk for two units, as they will need help.
9. They need to have the proper PPEs at all time. I have suggested that they be wearing N95 masks covered with a surgical mask, the surgical can be discarded and they could wear the N95 for the day, as the surgical mask will protect the N95. Then need to ensure they have face shields, as there is lots of coughing going on.
10. Each unit needs to have a clean space that they can change into clean PPEs each shift and a dirty space to get out of these clothes. They also need to get cotton scrubs , as they have provided them with polyester and they are too hot to work in and ensure that they are available.
11. They also need a designated clean space to chart, and it needs to maintain clean, as this was not being followed. No one is to be in that area with dirty PPEs on.
12. The patients that are on the dementia floor need to be kept in their rooms, not running around the unit and touching the PPEs that nursing and other HC workers will be using
13. They will need sitters for some of the dementia patients or are they planning on using their CCAs to sit with these patients
14. Hotel accommodations, as they don't want to go home to their families
15. A list of casuals that are willing to work there, knowing that once they work there, they should not be working back in acute care. It will be too risky for them to come back to acute.

255 John Savage Ave
Dartmouth, Nova Scotia B3B 0J3



Phone 902-424-4063 | Toll-Free 1.877.556.7438 | Fax 902-484.6333

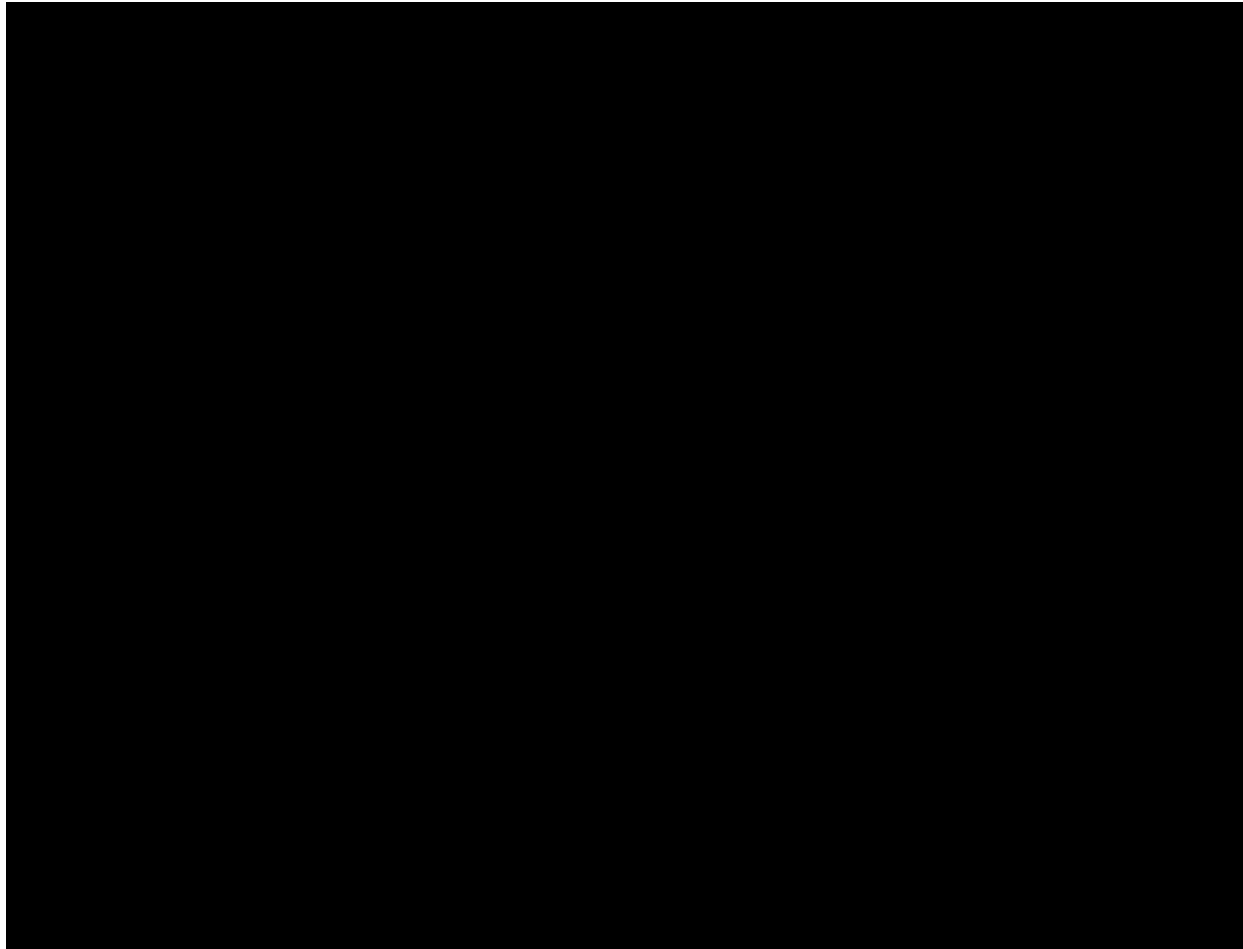
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non responsive



From: Sullivan, Vickie
Sent: Monday, May 4, 2020 8:58 AM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Cc: Butt, Brian <Brian.Butt@nshealth.ca>
Subject: Summary of current state

Hi Paula

Please see summary below of current state. From a planning perspective, an understanding of our ongoing role for supporting Northwood and other LTC facilities will have to be known and considered.

Let me know if you need additional information and/or have any questions.

Vickie

-

[Current state](#)

502 staff deployed to support the various components of CZ COVID 19 response, with

approximately 200 of these supporting Northwood.

- Staff deployed from areas where activity was reduced (Peri Op, ambulatory, inpatient units & Rehab & Supportive care services).
- Closed 5B at VG to free up staff to be deployed to DGH to support secondary assessment and inpatient unit.
- Staff from 8.4 deployed to Northwood (approx. 50); another 150 plus deployed to Northwood
- Staff from VG and HI being deployed to support some opened capacity at 8.4 (ILI low risk plus one line for HMU)

Fifty five LTC patients moved to LTC facilities; 26 transferred Non Veterans transferred to Veterans in March; LTC flow has slowed significantly, with 122 patients waiting for LTC placement in the zone currently, with utilization of CTU, Veterans and Community & Rural Sites maximized.

Dialysis, radiation therapy and chemotherapy continued

Ambulatory reduced; transitioned a number of visits to virtual care

ORs reduced

- VG – 5 (10 hour days) VG & HI – running higher than 35%, likely operating between 40-45%
- HI – 6 (10 hour days)
- 2B Ophthalmology – 1 Waitlist (less than 25%)
- DGH – 1; open 2nd if required
- Hants – closed

Physicians have also been deployed to support the various components

- Do we have numbers

Primary Assessment Centres

- Three Primary Assessment Centres (HI, Kearney Lake & Hugh Bell)
- Temporary Assessment Centres to support swabbing in community clusters (5 ; 2 remain operational)
- Drive through (behind DGH)
- Trifacilities (alternating clinics at each site)

Secondary Assessment Centres

- HI
- DGH (Staff from VG 5B deployed)

COVID Inpatient Units

- Hi
 - 8.3 (this is usually ortho short stay unit)

- 8.4 - entire staff deployed to Northwood COVID Units on April 19, 2020; opened capacity for ILI (6 beds) + 15 beds for HMU – staff from VG & HI being deployed to support this capacity
- DGH
 - 5 E (24 beds that are not staffed; closed beds on 3 East & West to support these beds to open; Staffed through EOI & VG 5B staff)

3IMCU

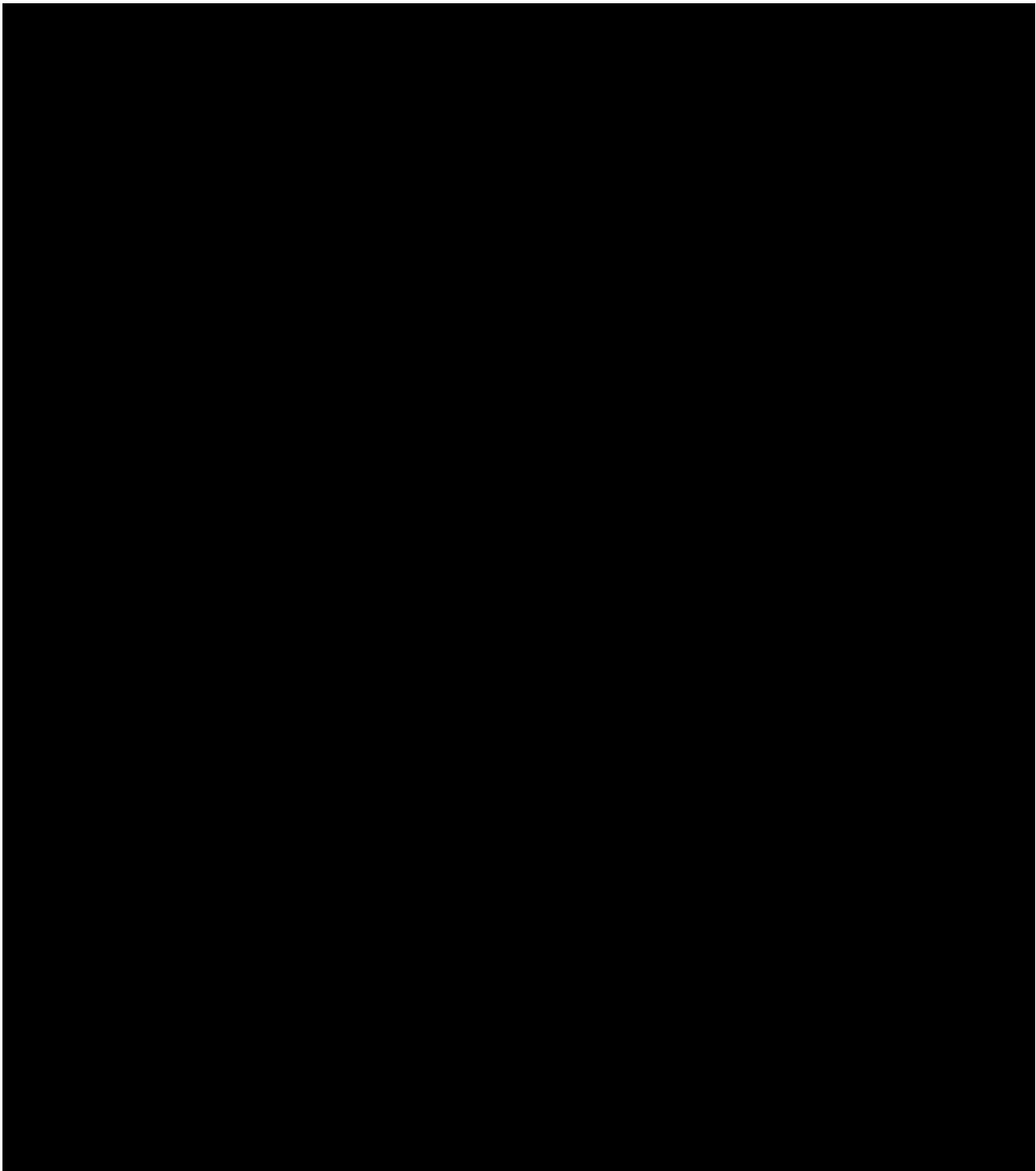
Critical Care

- 5.2
- CCU
- PACU A
- PACU B

Airway Management Team (QEII)

Victoria L. Sullivan, BN, RN, MHS, CON(C)
 Operations Executive Director
 Central Zone, Nova Scotia Health Authority
 Halifax Infirmary 2-2121
 1796 Summer Street
 Halifax, NS
 B3H 3A7
 Office: 902-491-5880; [REDACTED]
 Email: vickie.sullivan@nshealth.ca

non responsive



From: Cram, Jennifer

Sent: Saturday, April 18, 2020 8:42 PM

To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr,

Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>;
Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany
<Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant,
Krista L <Kristal.Grant@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; Kempkens, Daniela
<Daniela.Kempkens@nshealth.ca>; Broesch, James <James.Broesch@nshealth.ca>

Subject: RE: update re swabbing: Northwood Incident Management Team - CRITICAL

Thank you so much for your support of the Northwood at this difficult time. I'm not the MOH that follows this facility regularly, so while I don't have full details, I do know that the testing strategy has been aggressive, and if applicable, iterative, with repeated testing of residents. Typically, if there is a single case on a unit the entire unit is then swabbed. There is also swabbing based on the units where positive staff have worked while infectious (included up to 2 days before symptom onset). The director of the facility could certainly provide more specific details. As Wendy mentioned, there is a meeting tomorrow with the lead MOH supporting this facility, myself and Dr. Strang. The ongoing testing strategy will be one of the topics covered. Wendy – perhaps I could have Dr. Daniela Kempkens connect back to you tomorrow? She will be the MOH on-call and also has been following this outbreak.

Have a good night,

Jennifer Cram

Dr. Jennifer Cram MD MPH FRCPC

Medical Officer of Health

Western Zone

821 St. George Street
Annapolis Royal, NS B0S 1A0

Email: Jennifer.cram@nshealth.ca

From: McVeigh, Wendy

Sent: Saturday, April 18, 2020 8:22 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole
<Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>;
Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>;
Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail
<Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett,
Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>;

McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela
<Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Cram, Jennifer
<Jennifer.Cram@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>

Subject: update re swabbing: Northwood Incident Management Team - CRITICAL

Hello All,

I spoke with Dr. Jennifer Cram, MOH (included in this e-mail) and Ann Morgan, assigned Public Health Nurse. As of 1800 there are 80 positive COVID residents. There have been over 400 swabs completed with some residents being swabbed 2-3 times. Not all residents of NW have been swabbed. There remains some floors with no swabbing as no symptoms exist.

Dr. Cram does not believe swabbing is required tonight. She is meeting with Dr. Strang and the other MOH at 0830 and will have further direction post this call. Dr. Cram you may have additional details to share.

<< OLE Object: Picture (Device Independent Bitmap) >>

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

<< OLE Object: Picture (Device Independent Bitmap) >> **I support inclusion**

Office/Cell: 

Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

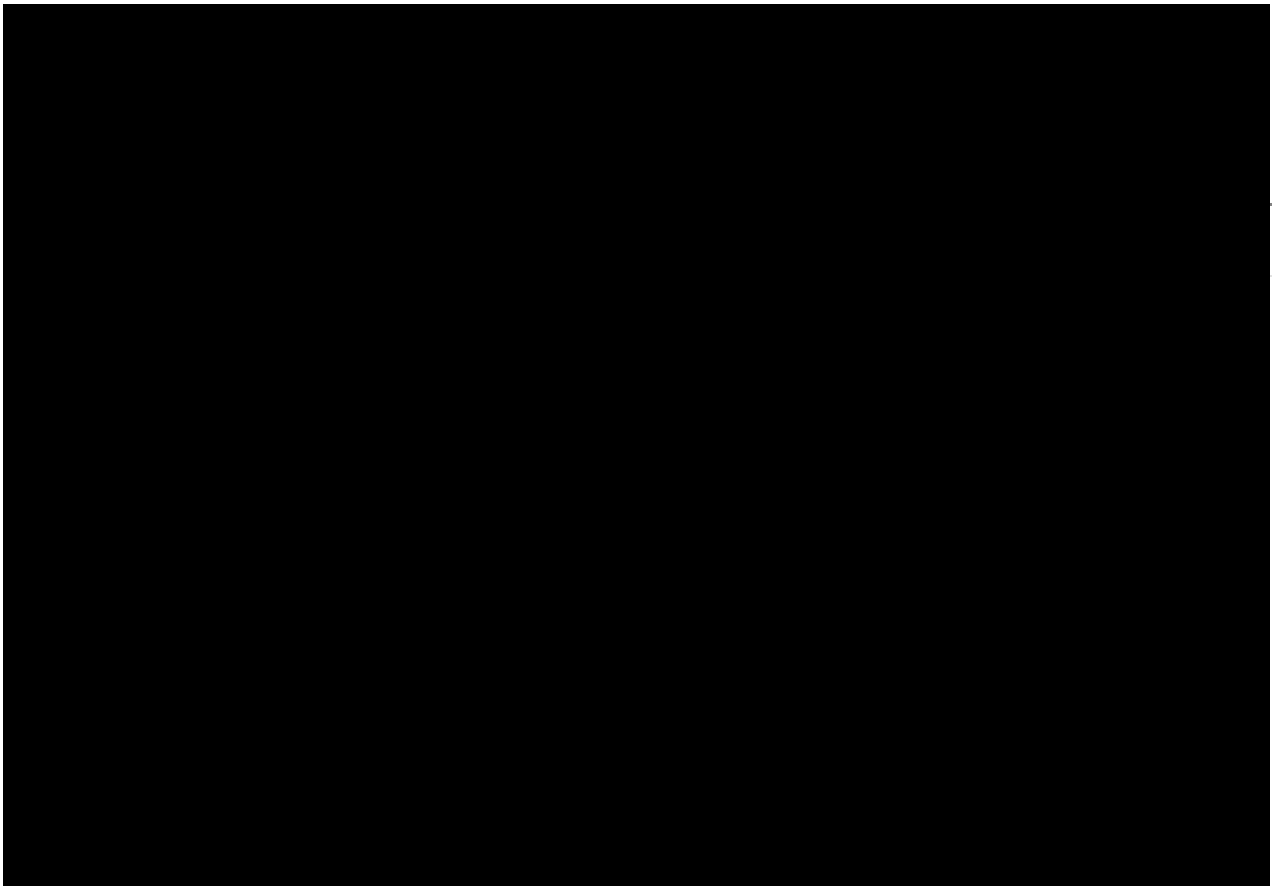
Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>



From: Grant, Krista L
Sent: Thursday, April 23, 2020 5:45 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: FW: Zoom link for practice call and press conference

Hi Vickie – Theresa and John worked on some key messaging below for the news conference tomorrow. If you need anything else specific please let me know.

K

From: Hawkesworth, Theresa
Sent: Thursday, April 23, 2020 5:03 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>
Subject: RE: Zoom link for practice call and press conference

John and I tag teamed... I think Vicki will know the number (highlighted below) but if not I can track that down. If you're ok I'll flip to Vicki, Theresa

Messaging

Our team at NSHA has been working collaboratively with our colleagues at Northwood as they respond to a COVID-19 outbreak at their Halifax campus – offering assistance through our emergency preparedness, planning, analytics, medical, clinical, infection control and other teams.

Our collective priority is the safety of residents and staff. Safe work environments and strong infection prevention and control practices are important in every health care setting, and especially those with a COVID-19 outbreak.

Staff and physicians have mobilized to provide help to the facility-based care team. We currently have **more than 100???** staff including nurses, infection control, continuing care staff and rehab therapists working at Northwood. We have relocated a COVID-19 Unit from the QEII Halifax Infirmary to Northwood to help support the acute care needs of residents. Residents with COVID-19 are being treated onsite and testing is also being conducted there. In addition, several NSHA physicians in geriatrics, family practice and COVID units are providing consultation to the physicians at Northwood.

Staff who have been relocated to Northwood are working in a different setting than they're accustomed to and with a different patient

population. We understand that they would be unaccustomed to the model of care and some of the differences they've been experiencing--but it's the right model for the people being cared for. We are working to support employees and want to thank everyone who is providing care and support to the residents.

From: Grant, Krista L

Sent: Thursday, April 23, 2020 4:02 PM

To: Gillis, John W <JohnW.Gillis@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

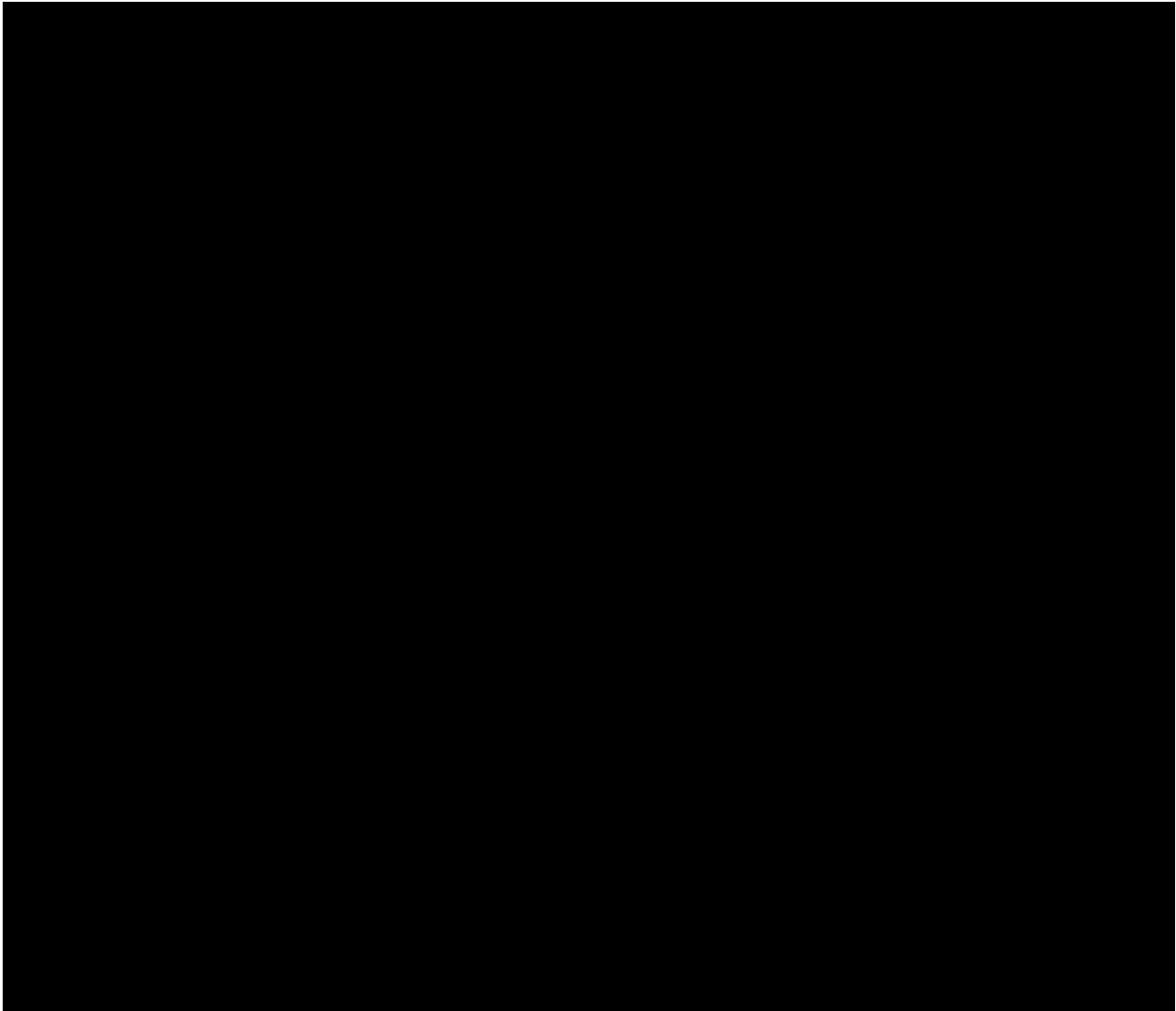
Subject: FW: Zoom link for practice call and press conference

Can we send Vickie – KMs that she should try to hit for tomorrow's news conference at 1pm.

Many thanks

K

non responsive



Deployment Information

Date: as of 0900 on May 4th 2020

Pooled Posting		
	Hired	Onboarding
NP		1
RN	29	43
LPN	2	16
Clerical*		
Support*		

* Do not have access yet

Northwood The table below does not include 8.4 staff. Active planning underway to withdraw the 8.4 staff this week

Current Unit profile: *Head Count*

Clerical		RN		RCA		CTA		LPN		Housekeeping	
Pooled Posting	8	6B	1	Hearing & Speech	4	HRCE	4	6A	1	External	4
		Neurology	1	Pooled Posting	2	EXT	7	Neurology	1		
		Western zones	3			Neuro surg	2	Rehab	2		
		Northern zone	7			ED	1	EXT	1		
		MGMT	2			WZ	2	IWK	2		
		ED	2			NZ	2	Northern Zone	2		
		PACU	1			Nursing homes	2				
		Pooled posting	9			Primary care	1				
		IWK	12			Rehab	1				
		Veterans	1								
		DGH	2								
		Critical care	1								
		Inspired	1								
8		43		6		22		9		4	
0/8 NSGEU		8/43 NSGEU		0/6 NSGEU		5/22 CZ		4/9 NSGEU		0/4 NSGEU	

LTCA		Continuing Care		Agency							
External	9	Callers	33	RN	3						
Rehab	3	RN	1	LPN	3						
Western zone	3	LPN	1	CTA	10						
NZ	1	RCA	2		1						
Primary Care	1										
DGH	1										
18		37		17							
5/ 18 CZ											

Deployment Information

Date: as of 1300 on April 27th 2020

Pooled Posting		
	Hired	Onboarding
RN	11	64
LPN	2	14
Clerical*		
Support*		

** Do not have access yet*

Currently Scheduled & working in Northwood

	NSHA	Pool posting/	Continuing Care	IWK	Agency & other	Other Zones	Discipline total
CNE	2						2
IPAC	2						2
RN	15	1	1	5	1	3	26
LPN	3	1	1	2	4	1	12
CTA	3	1			5	1	10
Clerk		3					3
Aide							0
Stores clerk		1					1
Housekeeper		1					1
Swabbers	2						2
Helper/comfort	2		2			3	7
LTC assist	2	5			4		11
NW Callers			33				33
Facility Total	31	13	37	7	14	8	110
Total (all agencies)	110	<i>* plus 8.4 staff which accounts for an additional 50 FTE</i>					



Expanded FIT testing model for N95 respirators: Frequently Asked Questions

NSHA is introducing an expanded FIT testing model for N95 respirators to ensure that staff who are working with COVID-suspect or confirmed cases and who may need to perform aerosol-generating procedures are **FIT tested to a variety of N95 respirators**.

We are making this change to ensure that those staff and physicians who need N95s will be able to receive and start using their supply without delay.

Please read the questions and answers below to learn more about this change and what it means for you.

- **Why is NSHA introducing an expanded FIT testing model for N95 respirators?**

Many respirators are manufactured overseas. We're well aware that global markets could shift and change; many countries are limiting exports. As a result, we are launching an expanded fit testing model to ensure staff are fit tested to all procured models.

Our biggest challenge has been in purchasing 1870+ models. Knowing that a significant number of health care workers have been FIT tested to this model, we are expanding FIT testing to include 1870 and 1860 models, which we have in stock. A third model, Harley L-188, has been procured but has not yet arrived.

Recognizing many health care workers were fit tested to the 1870+ we will be quickly expanding the FIT test model to include these new respirators. If you were previously FIT tested to an 1870+ and you work in a high-consumption area such as COVID units, Critical Care, Respiratory Therapy, Anesthesia, Emergency, Airway teams, etc., Occupational Health, Safety and Wellness will be working with your leadership to coordinate additional FIT testing. Refer to your FIT testing card to confirm on which N95 model you were FIT tested.

- **When will staff and physicians in my area be FIT tested?**

FIT testing will start in areas most affected by COVID and where aerosol-generating medical procedures (AGMP) are most likely to occur, beginning in Central Zone this week (April 14), and then rolling out to other zones. As we have dates and areas confirmed, we will reach out to managers with more details.

- **If I was FIT tested before, do I need to be FIT tested again? How will I know?**

If you were FIT tested before for an 1870+ N95 respirator, you will now need to be FIT tested for the 1870 and 1860. This will ensure you have the option to use all available respirators. Please refer to your FIT testing card to confirm the model on which you were FIT tested.



- **Is there a shortage of N95s respirators?**
No. We are happy to report a significant volume of N95 respirators have been procured. While this is good news, we must continue to adhere to PPE guidelines to ensure that our supply is available to see us through a prolonged response.
- **Why don't we fit all health care workers for N95 respirators?**
Use of N95 respirators is based on infection prevention and control guidelines for communicable disease management. Given COVID-19 is spread by droplets and is not an airborne virus, N95s are still to be used only for aerosol generating medical procedures. Staff who are working in patient care areas are to wear a procedure mask.

Healthcare Worker Masking Guidelines during COVID-19 Pandemic

Frequently Asked Questions (FAQ)

****PLEASE NOTE: This information was originally shared April 7, 2020 and was last updated April 14, 2020. The information is subject to change.***

After careful consideration and in alignment with many other health care facilities across Canada, the Nova Scotia Health Authority (NSHA) will be implementing a new practice around masking of its health care workers (HCW) during the COVID-19 pandemic. Specifically, physicians and staff working in or moving through patient care areas will be asked to wear a procedure mask throughout their entire shift at all sites. One (1) procedure mask per shift will be distributed by unit/team leadership to the HCW. Unit managers will have access to additional masks should they be required.

For information regarding the distribution/collection of masks at the start of your shift, please contact your manager or designate.

1. Which staff members should wear masks?

- Any HCWs who have any face-to-face (direct) or indirect contact with patients in a patient care area should wear a mask. If you are uncertain if you are included in this definition, please contact your manager.
- Staff members who do not work in patient areas and are not patient-facing do not require masks. They are asked to work at home whenever possible, practice social distancing when at work, perform hand hygiene regularly, and not come to work when ill.
- Masks should only be worn on days when working in a patient care area.

2. Why are we being asked to wear the same mask throughout the day?

- Several other provinces have seen a rapid increase in the prevalence of COVID-19 in their communities, leading to outbreaks at long-term care homes and exposures in hospitals. As we begin to see increasing community spread in Nova Scotia (NS), we want to be ahead of this situation.
- Some staff have been coming to work with mild symptoms, which they do not necessarily perceive to be an infection, or coming to work well and then developing mild upper respiratory tract infection symptoms while on duty. This poses a safety risk to our patients and other staff that can result in significant exposures and require quarantine/isolation of staff.
- We are therefore taking increased measures to ensure the continued safety of staff and patients.
- Given the expected challenge in maintaining our supply of PPE, this strategy, if used well, may conserve our supply of procedure masks while enhancing the safety of patients and HCWs.
- If your mask becomes soiled or wet (including sweaty) throughout your

shift, your manager will have a supply of additional masks.

3. We have been asked to wear a mask at all times during our shift. When can I remove the mask?

- The mask should be removed whenever a staff member is taking a break, eating a meal, or using the restroom. Social distancing (2 metres) **MUST** be maintained at all times when not wearing a mask.
- Remove the mask using the straps, fold lengthwise from top to bottom (with the front (patient-facing) side in and the side that will be against your face out) ([see video](#))
 - The mask should be stored in a safe place in a clean, dry paper bag labeled with your name). **The bag should be discarded after each use.**
 - A personal locker – If readily available, the mask may be stored in a locker with a hook. Pay close attention not to contaminate the mask in this space.
 - Make sure that the mask can be clearly identified as yours: put your name on the bag before use
- Meticulous hand hygiene should occur before and after removing your mask and before putting the mask back on the face.

4. When is it appropriate to DISCARD my mask and use a new one?

If your mask gets soiled during the course of your shift, you can request an additional mask as needed. Your mask should be discarded and replaced when:

- Visibly soiled.
- It makes direct contact with a patient.
- It becomes so moist/humid that its integrity is affected (this includes sweat).

5. How can I tell if my mask is soiled and should be discarded?

- If the mask is directly exposed to respiratory droplets (saliva/cough/sneeze).
- If you touch the mask accidentally with visibly soiled hands, it should be replaced.
- If your mask is soaked with sweat.
- Note: If the mask is covered with a face shield that was properly placed to completely cover the face, the mask is protected from these droplets.

6. How often should I discard and replace the paper bag in which I'm storing my mask?

The paper bag should be discarded after each use.

7. What if I get a mask that doesn't fit properly?

It's important that your mask fits you properly so that it doesn't fall off. Please talk to your supervisor if you've been given a mask that does not fit properly.

8. Why are we not giving patients masks?

Patients are screened upon admission for respiratory symptoms and risk factors. Those who are suspected or confirmed to have COVID-19 are put on droplet and contact precautions. Given the potential for PPE shortage, we have elected not to provide inpatients with masks for source control unless they are out of their rooms for necessary medical tests and procedures.

9. Why are different kinds and colours of procedure masks being provided to NSHA staff? Do all of these masks meet the same quality standards?

NSHA has been following a number of different leads to secure personal protective equipment such as procedure masks. It's important to note that Supply Chain **only** follows up on PPE that adheres to very specific and rigorous [Health Canada Standards](#). You can rest assured that any PPE supplied by NSHA meets these safety standards, regardless of whether there are slight differences in appearance or colour.

10. Can I bring my OWN procedure masks?

No. At this time, NSHA does not support personnel bringing in their own supply of masks. Our procedure masks are controlled for quality and we cannot be sure that masks coming from elsewhere meet our quality standards without additional evaluation.

11. Can health care workers wear homemade masks at work?

No. Health care workers are advised to wear surgical masks, as we cannot validate the efficacy of homemade masks in preventing the spread of infection.

12. Do I need to replace my mask after entering a Contact Isolation room?

No. If you have not met any of the above criteria to discard the mask, you do NOT need to replace the procedure mask. Perform diligent hand hygiene after exiting the room.

13. What if I need to be present during an aerosol-generating medical procedure (AGMP) with a patient who has been identified as a suspect or confirmed COVID-19 case?

- Perform hand hygiene and remove your procedure mask (place in dedicated bag/storage area – see above).
- Don a fit-tested N95 Respirator and whichever PPE is required based on additional precautions posted outside the room (read signage carefully, may include gloves/gown/face shield).

- Upon leaving the room, doff PPE appropriately. After performing hand hygiene, re-don your procedure mask.

14. What do I do if I walk into a droplet precautions room?

- Don eye protection (e.g.: goggles, face shield)
 - If a face shield is used, the procedure mask can continue to be used as the face shield acts as a barrier preventing the mask from being exposed to respiratory droplets.
 - If goggles are used, the procedure mask you are wearing will need to be discarded and a clean one put on. You will need to have a clean mask available outside the room to be available when the old mask is removed just before you leave the droplet precautions room.
- Disposable face shields are to be discarded after use; reusable face shields are to be cleaned and disinfected after each use. As the situation evolves, the reuse of disposable face shields will be re-evaluated and will be communicated to staff if instructions change.
 - When exiting the room, doff PPE in prescribed order (gloves, gown, hand hygiene, eye protection, mask, hand hygiene). Do not forget to disinfect goggles or the reusable face shields if used.
- Don your assigned procedure mask after performing hand hygiene.

15. Does the one mask per shift apply to perioperative staff?

Perioperative staff will continue their regular practice of using one mask **per patient case** in surgery, changing to a new mask between cases.

16. How else can I protect myself?

- Avoid touching the mask unless necessary for donning/doffing and then , only by the straps
- Ensure you are wearing the procedure mask appropriately
 - The mask should fully cover your mouth and nose
 - Pull the mask down to cover your chin
 - Press down to mold the metallic strip over the bridge of your nose.
- Do not partially remove the mask by pulling down under your chin. The mask is either fully on, or fully off. Do not hang the mask around your neck or from your ear.
- Avoid touching the mask at all times.
- If you must readjust the mask, or are donning/doffing for the reasons described above, ensure you perform hand hygiene immediately before and after doing so. Do not adjust the mask with a gloved hand.
- Clean your hands before and after touching the mask for any reason.
- Clean your hands before and after every patient contact.
- Do NOT come to work when ill. Contact Occupational Health as soon as possible if you do become ill.

17. What else do I need to think about?

- Do NOT attempt to sanitize/clean the procedure mask.
- If you have discarded your allocated mask, report to the unit where you acquired your mask at the beginning of the shift to request a new one.

29-Apr	The number of staff deployed internally to support new covid clinics/units	The number of staff deployed to support external LTC facilities	The number of resources available to be deployed
VRH	64	3	48
SMH	6		5
ACHC	0		3
YRH	43	2	6
DGH	3	1	1
RWH	3		0
SSRH	41		17
QGH	0		1
FMH	3		8
	163	6	89

Out of scope



From: Grant, Krista L

Sent: Tuesday, April 28, 2020 9:45 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Hi Vickie – I received this regarding Janet’s comments - the tone is ‘encouraged’ without being too optimistic (acknowledging people are losing loved ones).

Key themes:

- Appreciation for the diversity of support from the healthcare sector (medical students, speech therapists, etc.)
- Thanking donors and mentioning the foundation (they have received a lot of gifts and donations from the community, like meals for staff)
- Tackling the tenant questions head on since it keeps coming up
- A plea to landlords to allow for short term leases for healthcare workers looking for accommodation in the city

In discussing with team, I think similar to last time, your role is there in a supportive way to answer questions about operations and NSHA so no specific key messaging.

Thanks again – appreciate you stepping in to support with the media.

K

From: Sullivan, Vickie

Sent: Tuesday, April 28, 2020 7:17 PM

To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Thanks all – sounds good

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Grant, Krista L

Sent: Tuesday, April 28, 2020 7:06 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Subject: RE: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Hi Vickie,

I emailed Karen who is supporting Janet to see what or if Janet will be highlighting anything specific. If it's just an update I think our main messages from the other day and the fact that our support and resources that we have brought forward are having a positive impact on the care and treatment of the residents.

Once I hear back from Karen I will let you know and I leave to John to add and I have cc'd Theresa who may also have something to add as I know she's been involved in calls today too.

K

From: Sullivan, Vickie

Sent: Tuesday, April 28, 2020 6:59 PM

To: Gillis, John W <JohnW.Gillis@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Subject: Any key messages for tomorrow's Press Conference with Northwood I should be trying to incorporate in my answers

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
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B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 7:58 PM

To: Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Spinney, Derek <Derek.Spinney@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Subject: Northwood Support / Response

Northwood Update:

- The Ask:

- Want Critical Incident response team to be established; on the ground; co-led with NSHA/Northwood
- Scenario
 - Outbreak at Northwood – assumption is that vast majority of residents have been exposed; minimum further transmission; but assume that it is widespread; moving from containment to management;
 - Will need to:
 - Manage care of those that require it – clinical care teams within facility; staffing requirements (clinical requirements and direction); need to escalate the level of care that is required there.
 - Use staff we have trained up already and have them transition to this location for care delivery
 - Medical staff – have 25 physicians in CZ that could step in to support the resident's in facility
 - Step in to provide care on the site – acute medical issues become managed by the NSHA team (operational control)
 - Consider it a ward hospital with 400 beds
 - Support and ancillary services – cleaning; food service (support as required)
 - Logistics management – supplies; PPE; equipment
 - What do they have;
 - What do they need and intake
 - Staffing – there are opportunities to invoke and pull triggers as necessary to allow for direction of staff versus volunteer;
 - Coordination / intake of new staff (Jill and Randi)
 - PSC to support if needed
 - Secondary Site – rooms are established and equipment in process of being moved; determination of who is moving; will start tomorrow morning; (Holiday Inn in Dartmouth); Need to support this.
 - Communications – public and family member response (National PR on deck); will need conduit in to the organization for information and direct communications support for calling families

What do we need tonight:

1. Medical strategy (Nicole, Maria, Todd)
2. Todd Hatchette re testing of all of Northwood (Nicole to call)
3. Vickie – identify who is needed to support tomorrow on care assessment; bring team members in to help identify and move equipment?
4. Notify legal and insurer (Colin)
5. Notify privacy (Colin)

6. Notify Barry (Maria)
7. Connections on communication – Susan; Theresa; John (connect with comms team at Northwood)
8. Street Address (Wendy)

Tomorrow Focus:

1. Team to assess: CEO; Medical (Maria/Todd); Zone ED (Vickie); IMT Point (Bethany; Pascal; Susan); IPAC; MOH (Claudia); Communications (Krista)

What do we need; What can we bring:

- o Space - Use their board room / ball room for this.
- o Communications – phones; internet; phone numbers
- o Resources to support:
 - Clinical staffing
 - Medical / triage / decision making
 - Staffing support
 - Logistics – supply movement
 - Resident Transfer
 - Communications link to National
- o



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 Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

Out of scope



From: Emergency Operations Center, NS Health Authority

Sent: Sunday, April 26, 2020 12:59 PM

To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Cc: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>

Subject: RE: Northwood

Vickie

Thank you for this information, if the supply chain or PPE team leaders are needed in part of the FU – I assume Patsy will pull them into the review. If assistance for EOC is needed please advise.

CC: to Angela as FYI – as she is leading the 2pm call w Northwood

Bethany
NSHA EOC Manager

From: Sullivan, Vickie
Sent: Sunday, April 26, 2020 12:50 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>
Subject: FW: Northwood
Importance: High

FYI – so you are aware

Patsy is following up on below concerns and will be back in touch. Tracey Ungar will respond back to Trish and Jason when we hear back from Patsy; will update you following

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
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Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Sunday, April 26, 2020 11:44 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Northwood
Importance: High

Hi Vickie,

I have been contacted by our nurses at NW this am. They are finding the masks that are provided uncomfortable and then they started to examine the packaging of the masks. I have provided you the packing of what they are being provided, this product is from China. There is no information on the packaging to tell then what is the level of the protection of the mask. I have also included a picture of the box of the products that are supplied at NSHA. **I thought they were being provided the same protection. This is very concerning to me, especially for the nurses working on 1 Center, the dementia unit, where the patients are roaming. I would have thought if NW could not**

provide the level of protection to our nurses that they obtained at NSHA, then NSHA would have provided the appropriate masks for them.

They were also dropped off N95 masks, also produced in China. They have holes in the masks, and they will be insuring that no one wears them. For one they would have to be fit tested again, these are from Wuhan and not the type of N95 provided by NSHA. Those N95 masks at NSHA, there are two types of N95, the duck bill and the cone. However, these look like very poor quality, as they took a picture wearing one with a surgical mask underneath and it was still gapping on the side.

The nurses are requesting that they be provided with the information of the level of protection of the mask that is being provided. They would like to see some literature as well about these masks, as they are concerned and how many microns is each mask and the quality of the mask itself. For example are they 80,120 or 160 microns, I will assume they are not 120 and certainly not 160.

I look forward to hearing from you and I will be forwarding my email of the nurses' concerns to NSGEU.

Thanks, Trish

Trish MacDonald
Employee Relations Officer
NSGEU
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Out of scope



From: Sullivan, Vickie

Sent: Sunday, April 26, 2020 8:00 PM

To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; O'Handley, Jennifer <Jennifer.OHandley@nshealth.ca>

Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>

Subject: FW: Northwood

Please see response to Trish. Josh, Kitty and Liz were copied on the response. In talking with Patsy, the question about different masks has been raised in Western as well, so think it will only be a matter of time before other areas will also ask the question. It was referenced in the q & a when the masking policy was implemented at NSHA but sending out a reminder would likely be timely and helpful to increase staffs' awareness that we have a variety of masks in circulation and it will provide reassurance that all meet the required standards. I will send separate email to Alex and copy Bethany, Madonna and Theresa

Any questions, let me know

Vickie

Victoria L. Sullivan
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Office (902) 491-5880; [REDACTED]

From: Sullivan, Vickie
Sent: Sunday, April 26, 2020 7:49 PM
To: 'Trish MacDonald' <[REDACTED]>
Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>
Subject: RE: Northwood

Dear Trish,

I am writing in follow-up to the questions about the masks at Northwood plus other questions about NSHA masks and FIT testing. The following people were consulted to respond to these questions: Patsy Rawding, Manager for Infection Control, Procurement at Northwood, Evan Cheung, Director of Supply Chain Operations, and Angela Keenan, Manager Occupational Health Safety & Wellness.

- Procedural/Surgical masks – the minimum standard for droplet protection is 60 mm Hg (this measures fluid resistance – see definition below). There are several different masks in circulation right now and Infection Control has worked with procurement to ensure all makes and models of surgical masks being brought in meet or exceed the required standards.
- Regarding procedural/surgical masks, NSHA has received and distributed several different models from several different suppliers. Most of what is currently being distributed is from our usual supplier PriMED. Some models are not the same as the ones that we typically use. Some of the federal shipments that have arrived are also PriMED masks. All procedural/surgical masks distributed meet or exceed ASTM Level 1 standards (they are a minimum of 80 mm Hg or higher).
- Regarding procedural/surgical masks at Northwood, Northwood also has several types of procedural/surgical masks in use. Some of the masks do not show the fluid resistance level on the box itself. Patsy reviewed all types of procedural/surgical masks at Northwood with their procurement and then, connected with Aaron Munro in our NSHA procurement as the NSHA has also purchased the same brands of masks and had reviewed the technical information to ensure they met the standard. All masks being used by Northwood meet the ASTM standard or the European equivalent EN 14683. All

were found to be 80mm Hg or above. These are also being used at the NSHA as well. Northwood also received a shipment of masks from the federal supply.

- Most masks do come from China and/or parts of them come from China and they may be assembled in a different country. A Staff Masking FAQ has been attached, please refer to question 9 which speaks to why some masks may look different than others.
- Additional disposable gowns have been supplied to Northwood from the DHW stockpile.
- N95 masks are not required by staff at Northwood as they are and will not be performing Aerosol Generating Medical Procedures.
- All 3M N95 masks used by NSHA meet NIOSH N95 standards. So does the Harley L-188. Both are listed as approved respirators on the CDC site.
https://www.cdc.gov/niosh/npptl/topics/respirators/disp_part/n95list1.html
- 3M N95 masks currently in circulation within NSHA include: models 1860, 1860s, 1870, 1870+ & 8210. We did receive a shipment of Chinese N95 masks (Harley L-188) but we have not yet FIT tested staff to this model. OHSW continues to work with Procurement and the Provincial PPE Working Group to identify suitable N95's to ensure that staff have the right PPE, for the right job, at the right time. A FAQ regarding the FIT testing strategy has been attached to this email.

Josh is available to respond to any questions and can review this information with staff tomorrow. We will also be requesting that the information about the various masks be shared again in the next COVID 19 update so other staff who see unfamiliar supplies have this information as well.

If you have questions and/or require additional information, please let us know.

Kind regards

Vickie

Fluid Resistance: Fluid resistance reflects the surgical mask's ability to minimize the amount of fluid that could transfer from the outer layers through to the inner layer as the result of a splash or spray. ASTM specifies testing with synthetic blood at pressures of 80, 120, or 160 mm Hg to qualify for low, medium, or high fluid resistance. These pressures correlate to blood pressure: 80 mm Hg = venous pressure (Level 1), 120 mm Hg = arterial pressure (Level 2), and 160 mm Hg (Level 3) correlates to potential high pressures that may occur during trauma, or surgeries that include high pressure irrigation such as orthopedic procedures.

Victoria L. Sullivan
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Office (902) 491-5880; [REDACTED]

From: Sullivan, Vickie

Sent: Sunday, April 26, 2020 1:26 PM

To: 'Trish MacDonald' <[REDACTED]>

Subject: RE: Northwood

Will do

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director

Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Sunday, April 26, 2020 1:23 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: RE: Northwood

Can you please verify to me if this is the shipment that arrived in Halifax last week? Is this the supplies from China that we are now using for everyone? I was told the ICU nurses on 5.2 had to all be refit tested, as they the supplier was new. Can you please tell me what is the name of the supplier for the new masks , both surgical with the microns that are being supplied to staff and the N95 masks.

Thanks, Trish

From: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Sent: April 26, 2020 11:49 AM
To: Trish MacDonald <[REDACTED]>
Subject: RE: Northwood

Thanks Trish – will follow-up with IPAC and get back to you

Vickie

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Sunday, April 26, 2020 11:44 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Northwood
Importance: High

Hi Vickie,

I have been contacted by our nurses at NW this am. They are finding the masks that are provided uncomfortable and then they started to examine the packaging of the masks. I have provided you the packing of what they are being provided, this product is from China. There is no information on the packaging to tell then what is the level of the protection of the mask. I have also included a picture of the box of the products that are supplied at NSHA. **I thought they were being provided**

the same protection. This is very concerning to me, especially for the nurses working on 1 Center, the dementia unit, where the patients are roaming. I would have thought if NW could not provide the level of protection to our nurses that they obtained at NSHA, then NSHA would have provided the appropriate masks fro them.

They were also dropped off N95 masks, also produced in China. They have holes in the masks, and they will be insuring that no one wears them. For one they would have to be fit tested again, these are from Wuhan and not the type of N95 provided by NSHA. Those N95 masks at NSHA, there are two types of N95, the duck bill and the come. However, these look like very poor quality, as they took a picture wearing one with a surgical mask underneath and it was still gapping on the side.

The nurses are requesting that they be provided with the information of the level of protection of the mask that is being provided. They would like to see some literature as well about these masks, as they are concerned and how many microns is each mask and the quality of the mask itself. For example are they 80,120 or 160 microns, I will assume they are not 120 and certainly not 160.

I look forward to hearing from you and I will be forwarding my email of the nurses' concerns to NSGEU.

Thanks, Trish

Trish MacDonald
Employee Relations Officer
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From: Sullivan, Vickie

Sent: Wednesday, April 22, 2020 7:25 PM

To: Bond, Paula <Paula.Bond@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>

Subject: Northwood

Good evening Paula & Todd

Was at NW this evening –

- had a much better day today, clinically, NP from ED added to clinical team, now 3 NPs, to support patient care along with Barry
- staffing for nights much better than last night with a few extra registered staff which is welcomed and needed given the acuity across the building; down some unlicensed staff
- staffing tomorrow – better than today
- swabbing staff twice weekly; more staff off today who tested positive. The largest number of staff off are CCAs. Looking for increased education for this group for PPE, so will follow-up with Patsy on how this can be supported
- will be moving approx. 7 residents who have recovered to hotel over weekend; other residents will be moved to COVID units based on criteria that has been developed by the Medical Team

Vickie

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<madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>;
Stone, Joanne <joanne.stone@nshealth.ca>

Subject: Re: PPE - question about the procedural/surgical masks

Thanks Vickie,

I will flag for tomorrow's update and connect with Margaret in the morning, Theresa

Sent from my iPhone

On Apr 26, 2020, at 8:16 PM, Sullivan, Vickie <Vickie.Sullivan@nshealth.ca> wrote:

Hi Alex & Lewis

A question arose today about the various makes and models of procedural/surgical masks and whether they met required standards as the labelling on some of the new products does not include this information. While the issue was a question from a NSHA staff located at Northwood, the same make and models exist in NSHA. In talking with Patsy, I understand this same question has been asked by staff in Western. I know in the Q & A about masking there was a reference to different masks in this, with reassurance that all met standards, but would ask that a reminder be included in tomorrow's COVID 19 communication to increase staffs' awareness that they will see different makes and models of procedural/surgical masks and all meet the required standards.

Thanks so much

Vickie

Victoria L. Sullivan
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Office (902) 491-5880; [REDACTED]

Out of scope



From: Sullivan, Vickie

Sent: Thursday, April 23, 2020 2:26 PM


To: Carr, Brendan <Brendan.Carr@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Subject: FW: Response to questions about new unit at Northwood

Hi

Here was the response back to the union sent on Tuesday pm. Have also attached the email from the previous evening which outlined the concerns.

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; 

Email: vickie.sullivan@nshealth.ca

From: Ungar, Tracey

Sent: Tuesday, April 21, 2020 5:13 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Connell, Katherine <Katherine.CConnell@nshealth.ca>; Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>

Cc: Piers, Geoff W <Geoff.Piers@nshealth.ca>; O'Handley, Jennifer <Jennifer.OHandley@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>

Subject: Response to questions about new unit at Northwood

Hi All

Please see our response below. This was a group effort and is longer than a high level summary but reflects activity to date.

For the record, the union did share with me that the staff on the moved unit appreciate the support that they are receiving from Josh.

Tracey

From: Ungar, Tracey

Sent: Tuesday, April 21, 2020 5:09 PM

To: 'Jason MacLean' <[REDACTED]>

Cc: Trish MacDonald <[REDACTED]>

Subject: RE: Action needed ASAP at Northwood.

Hi Jason and Trish

Please see our responses below.

In the initial 24 hours of relocating staff from 8.4 to Northwood (NW), in accordance with the Ministerial Directive, there has been a tremendous amount of work accomplished. NSHA employees are currently providing care to residents on two units as follows:

- 11 Manor; 11th floor unit with a capacity of 16 and an occupancy of 12
- 1 Centre; 1st floor unit with a capacity of 22-23 beds and is fully occupied

In an effort to provide you with an overview of actions taken to date, we can summarize as follows:

Staffing/Management/HR:

- Health Services Manager is on site and has shared his contact information with employees if needed during evenings and/or overnight
- Both units have Charge Nurse assigned, based on a long week/short week rotation and work will continue around defining roles on the unit. There will not be an additional short

assignment added.

- Additional support is available from the NW Facility Supervisor, IPAC, Professional Practice, etc
- The unit aide from 8.4 has been relocated to NW and clerical support will be there as of tomorrow
- There is space available for staff to enjoy rest breaks
- NW has offered accommodations and meals
- Getting process in place to ensure staff have access to the COVID hub for reference and information
- Setting up charting process, interim measures have been put in place while we arrange for access to electronic system
- There is no provision for 'danger pay' within the collective agreement

IPAC/OHSW Issues:

- Ongoing efforts to ensure appropriate level of PPE remain available
- Designated space available for safe donning and doffing.
- PPE stock is being maintained for easy access by staff and inaccessible by residents
- Now have adequate supply of sanitizer
- NW uses a microfiber system for cleaning; this is different than NSHA employees are used to but in compliance with facility standard
- IPAC team working with Northwood staff to review PPE best practices
- IPAC signage will be used as reminders for staff
- Employees will continue to be swabbed in compliance IPAC and OHWS protocols

Practice Issues:

- Second CNE reassigned so support can be provided to each unit Work being done with the NW Educator to develop orientation that will be used for staff coming to facility for the first time
- NW and NSHA are working together to ensure all on same page with provision of care
- Wrist bands will be used for residents who are not in private rooms (where they can be easily identified) or when a resident is identified as needing one (ie. if resident wanders)

We are working to support employees, recognizing that this new work environment is quite different than what they are used to at the Halifax Infirmary. As employees have questions and concerns, they should raise any issue directly with their HSM so that it can be addressed in a timely manner.

Given our joint goal is to support Northwood in the provision of safe care in their response to COVID19, we recommend that a regular meeting be arranged in order to discuss questions or concerns that have not been able to be resolved directly with the HSM. It is important to

remember and acknowledge that we are all doing our best to support safe quality care in a constantly changing environment during this pandemic crisis.

Tracey



Tracey Ungar, CPHR
People Services Director Employee and Labour Relations and
Northern Zone Operations
Colchester East Hants Health Centre
600 Abenaki Road
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Office: 902-893-5554 ext 42134
[REDACTED]
www.nshealth.ca

From: Jason MacLean [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Monday, April 20, 2020 3:47 PM
To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>; [REDACTED] King, Rollie B
<Rollie.King@novascotia.ca>; Robert.Strang@novascotia.ca
Cc: Robin MacLean <[REDACTED]> Jo-Ann Bailey <[REDACTED]> Lynette Johnson
<[REDACTED]> Trish MacDonald <[REDACTED]>
Subject: Action needed ASAP at Northwood.

This information is what we've obtained from our members as reported to us by our ERO Trish MacDonald. I would appreciate a response to this today. Please acknowledge receipt of this.

We are conducting two calls this evening with both shifts going on and coming of the floors at Northwood. These workers need protection.

Here is what needs to be in place at NW:

1. You need strong nurses in be in Charge. They have their present CN **20.Perso** she needs to continue in her role. In addition, another RN there is **20.Pers** she needs to be one as well.
2. **20.Personal** is a casual RN with over 20 years of nursing I believe. I have spoken to her and she is willing to work in a short assignment and also be in a charge role. **She will work Monday-Friday or shift work but no nights. So either have here in charge are use her as the Resource Nurse who can go to the different units and help nurses who have questions or issues and help problem solve,**
3. These nurses will get things organised , as I don't know how many units there are, but they need to get armbands on the patients so they can identify them, determine who is a CODE

and who is not. They have no kardexes with patient information, these are documents that give quick detail about patients and what their needs are for care and deficits and if they require full or partial care. They will schedule proper breaks for the nurses on the day shifts. There should also be a designated nurse charge on each unit for the night shifts, just like their unit if working at NSHA.

4. These Charge Nurses can look after staffing and ensuring the model of care they require and staff according with the NW workers that are there and keep the flow of care and update families with questions and concerns. This is lacking greatly, family are not being kept informed.
5. They need to have an educator on site with them , as well as an Infection Control there on a regular basis until things are set up and staff are NW staff are educated and following NSHA infection control protocols. After that they should be at least on site daily to assist and answer questions. If they are off site they need to be accessible by pager to the staff.
6. The staff need to have a contact person on nights in case there are issues and it be on every unit telling them who they are to contact. For instance will his be the Bed Manager at the HI site or the manager on Call with NSHA, contacted through Locating.
7. They need our housekeepers on site, as it seems like the place needs a complete overhaul. There needs to be deep cleaning done initially and then cleaning coming through several times a day on each unit and restocking wipes, doing another clean and getting rid of the biohazard wastes of the PPES on a regular basis.
8. Does each unit have a ward clerk, if not this is something to consider for a least a clerk for two units, as they will need help.
9. They need to have the proper PPEs at all time. I have suggested that they be wearing N95 masks covered with a surgical mask, the surgical can be discarded and they could wear the N95 for the day, as the surgical mask will protect the N95. Then need to ensure they have face shields, as there is lots of coughing going on.
10. Each unit needs to have a clean space that they can change into clean PPEs each shift and a dirty space to get out of these clothes. They also need to get cotton scrubs , as they have provided them with polyester and they are too hot to work in and ensure that they are available.
11. They also need a designated clean space to chart, and it needs to maintain clean, as this was not being followed. No one is to be in that area with dirty PPEs on.
12. The patients that are on the dementia floor need to be kept in their rooms, not running around the unit and touching the PPEs that nursing and other HC workers will be using
13. They will need sitters for some of the dementia patients or are they planning on using their CCAs to sit with these patients
14. Hotel accommodations, as they don't want to go home to their families
15. A list of casuals that are willing to work there, knowing that once they work there, they should not be working back in acute care. It will be too risky for them to come back to acute.

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Out of scope



From: Sullivan, Vickie
Sent: Monday, May 4, 2020 8:58 AM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Cc: Butt, Brian <Brian.Butt@nshealth.ca>
Subject: Summary of current state

Hi Paula

Please see summary below of current state. From a planning perspective, an understanding of our ongoing role for supporting Northwood and other LTC facilities will have to be known and considered.

Let me know if you need additional information and/or have any questions.

Vickie

-

[Current state](#)

502 staff deployed to support the various components of CZ COVID 19 response, with

approximately 200 of these supporting Northwood.

- Staff deployed from areas where activity was reduced (Peri Op, ambulatory, inpatient units & Rehab & Supportive care services).
- Closed 5B at VG to free up staff to be deployed to DGH to support secondary assessment and inpatient unit.
- Staff from 8.4 deployed to Northwood (approx. 50); another 150 plus deployed to Northwood
- Staff from VG and HI being deployed to support some opened capacity at 8.4 (ILI low risk plus one line for HMU)

Out of scope




COVID Inpatient Units

- Hi
 - 8.3 (this is usually ortho short stay unit)

- 8.4 - entire staff deployed to Northwood COVID Units on April 19, 2020; opened capacity for ILI (6 beds) + 15 beds for HMU – staff from VG & HI being deployed to support this capacity
- DGH
 - 5 E (24 beds that are not staffed; closed beds on 3 East & West to support these beds to open; Staffed through EOI & VG 5B staff)

Out of scope



Victoria L. Sullivan, BN, RN, MHS, CON(C)
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Email: vickie.sullivan@nshealth.ca

Out of scope



From: Cram, Jennifer

Sent: Saturday, April 18, 2020 8:42 PM

To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr,

Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>;
Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany
<Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant,
Krista L <Kristal.Grant@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; Kempkens, Daniela
<Daniela.Kempkens@nshealth.ca>; Broesch, James <James.Broesch@nshealth.ca>

Subject: RE: update re swabbing: Northwood Incident Management Team - CRITICAL

Thank you so much for your support of the Northwood at this difficult time. I'm not the MOH that follows this facility regularly, so while I don't have full details, I do know that the testing strategy has been aggressive, and if applicable, iterative, with repeated testing of residents. Typically, if there is a single case on a unit the entire unit is then swabbed. There is also swabbing based on the units where positive staff have worked while infectious (included up to 2 days before symptom onset). The director of the facility could certainly provide more specific details. As Wendy mentioned, there is a meeting tomorrow with the lead MOH supporting this facility, myself and Dr. Strang. The ongoing testing strategy will be one of the topics covered. Wendy – perhaps I could have Dr. Daniela Kempkens connect back to you tomorrow? She will be the MOH on-call and also has been following this outbreak.

Have a good night,

Jennifer Cram

Dr. Jennifer Cram MD MPH FRCPC

Medical Officer of Health

Western Zone

821 St. George Street
Annapolis Royal, NS B0S 1A0

Email: Jennifer.cram@nshealth.ca

From: McVeigh, Wendy

Sent: Saturday, April 18, 2020 8:22 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole
<Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>;
Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>;
Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail
<Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett,
Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>;

McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela
<Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Cram, Jennifer
<Jennifer.Cram@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>

Subject: update re swabbing: Northwood Incident Management Team - CRITICAL

Hello All,

I spoke with Dr. Jennifer Cram, MOH (included in this e-mail) and Ann Morgan, assigned Public Health Nurse. As of 1800 there are 80 positive COVID residents. There have been over 400 swabs completed with some residents being swabbed 2-3 times. Not all residents of NW have been swabbed. There remains some floors with no swabbing as no symptoms exist.

Dr. Cram does not believe swabbing is required tonight. She is meeting with Dr. Strang and the other MOH at 0830 and will have further direction post this call. Dr. Cram you may have additional details to share.

<< OLE Object: Picture (Device Independent Bitmap) >>

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

<< OLE Object: Picture (Device Independent Bitmap) >> **I support inclusion**

Office/Cell: 

Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 6:44 PM

To: Stevenson, Colin; Boutilier, Nicole; MacDonald, Madonna; Sullivan, Vickie; Stevens, Susan; Bond, Paula; Tomblin Murphy, Gail; Carr, Brendan; Howlett, Todd; McVeigh, Wendy; Alexiadis, Maria; McCormick, Bethany; LeBlanc, Angela; Grant, Krista L

Cc: Spinney, Derek

Subject: Northwood Incident Management Team - CRITICAL

When: Saturday, April 18, 2020 7:00 PM-7:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Conference Call

Importance: High

Out of scope

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Out of scope

From: Grant, Krista L
Sent: Thursday, April 23, 2020 5:45 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: FW: Zoom link for practice call and press conference

Hi Vickie – Theresa and John worked on some key messaging below for the news conference tomorrow. If you need anything else specific please let me know.

K

From: Hawkesworth, Theresa
Sent: Thursday, April 23, 2020 5:03 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>
Subject: RE: Zoom link for practice call and press conference

John and I tag teamed... I think Vicki will know the number (highlighted below) but if not I can track that down. If you're ok I'll flip to Vicki, Theresa

Messaging

Our team at NSHA has been working collaboratively with our colleagues at Northwood as they respond to a COVID-19 outbreak at their Halifax campus – offering assistance through our emergency preparedness, planning, analytics, medical, clinical, infection control and other teams.

Our collective priority is the safety of residents and staff. Safe work environments and strong infection prevention and control practices are important in every health care setting, and especially those with a COVID-19 outbreak.

Staff and physicians have mobilized to provide help to the facility-based care team. We currently have **more than 100???** staff including nurses, infection control, continuing care staff and rehab therapists working at Northwood. We have relocated a COVID-19 Unit from the QEII Halifax Infirmary to Northwood to help support the acute care needs of residents. Residents with COVID-19 are being treated onsite and testing is also being conducted there. In addition, several NSHA physicians in geriatrics, family practice and COVID units are providing consultation to the physicians at Northwood.

Staff who have been relocated to Northwood are working in a different setting than they're accustomed to and with a different patient

population. We understand that they would be unaccustomed to the model of care and some of the differences they've been experiencing--but it's the right model for the people being cared for. We are working to support employees and want to thank everyone who is providing care and support to the residents.

From: Grant, Krista L

Sent: Thursday, April 23, 2020 4:02 PM

To: Gillis, John W <JohnW.Gillis@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

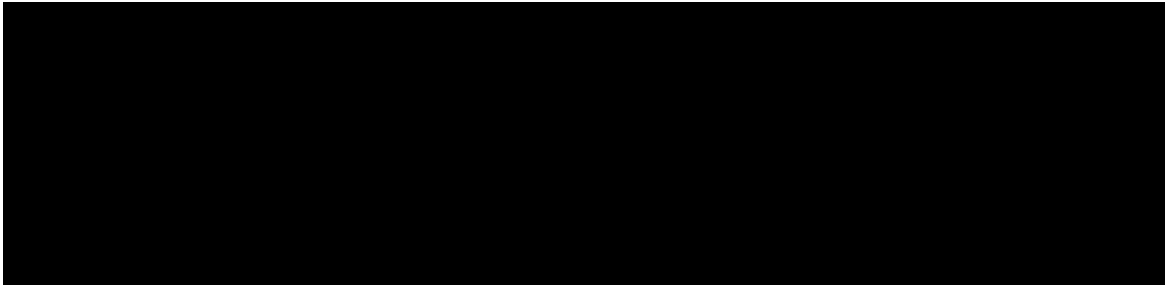
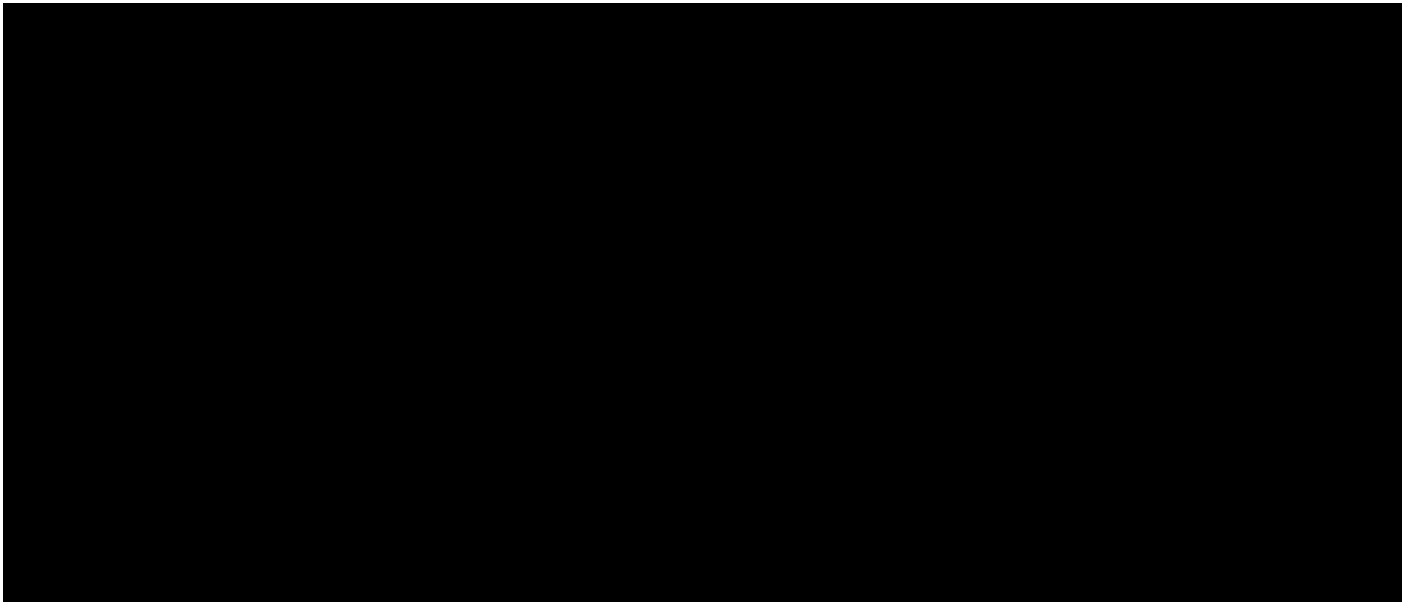
Subject: FW: Zoom link for practice call and press conference

Can we send Vickie – KMs that she should try to hit for tomorrow's news conference at 1pm.

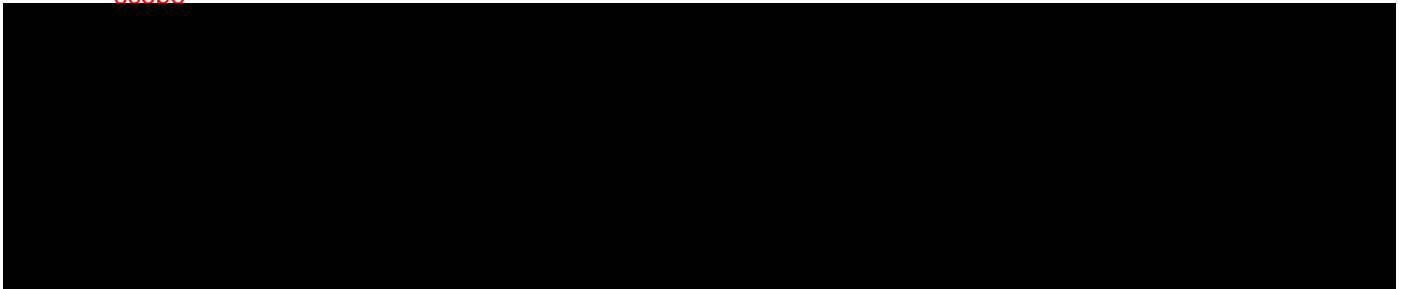
Many thanks

K

non responsive



scope





Expanded FIT testing model for N95 respirators: Frequently Asked Questions

NSHA is introducing an expanded FIT testing model for N95 respirators to ensure that staff who are working with COVID-suspect or confirmed cases and who may need to perform aerosol-generating procedures are **FIT tested to a variety of N95 respirators**.

We are making this change to ensure that those staff and physicians who need N95s will be able to receive and start using their supply without delay.

Please read the questions and answers below to learn more about this change and what it means for you.

- **Why is NSHA introducing an expanded FIT testing model for N95 respirators?**

Many respirators are manufactured overseas. We're well aware that global markets could shift and change; many countries are limiting exports. As a result, we are launching an expanded fit testing model to ensure staff are fit tested to all procured models.

Our biggest challenge has been in purchasing 1870+ models. Knowing that a significant number of health care workers have been FIT tested to this model, we are expanding FIT testing to include 1870 and 1860 models, which we have in stock. A third model, Harley L-188, has been procured but has not yet arrived.

Recognizing many health care workers were fit tested to the 1870+ we will be quickly expanding the FIT test model to include these new respirators. If you were previously FIT tested to an 1870+ and you work in a high-consumption area such as COVID units, Critical Care, Respiratory Therapy, Anesthesia, Emergency, Airway teams, etc., Occupational Health, Safety and Wellness will be working with your leadership to coordinate additional FIT testing. Refer to your FIT testing card to confirm on which N95 model you were FIT tested.

- **When will staff and physicians in my area be FIT tested?**

FIT testing will start in areas most affected by COVID and where aerosol-generating medical procedures (AGMP) are most likely to occur, beginning in Central Zone this week (April 14), and then rolling out to other zones. As we have dates and areas confirmed, we will reach out to managers with more details.

- **If I was FIT tested before, do I need to be FIT tested again? How will I know?**

If you were FIT tested before for an 1870+ N95 respirator, you will now need to be FIT tested for the 1870 and 1860. This will ensure you have the option to use all available respirators. Please refer to your FIT testing card to confirm the model on which you were FIT tested.



- **Is there a shortage of N95s respirators?**
No. We are happy to report a significant volume of N95 respirators have been procured. While this is good news, we must continue to adhere to PPE guidelines to ensure that our supply is available to see us through a prolonged response.
- **Why don't we fit all health care workers for N95 respirators?**
Use of N95 respirators is based on infection prevention and control guidelines for communicable disease management. Given COVID-19 is spread by droplets and is not an airborne virus, N95s are still to be used only for aerosol generating medical procedures. Staff who are working in patient care areas are to wear a procedure mask.

Healthcare Worker Masking Guidelines during COVID-19 Pandemic

Frequently Asked Questions (FAQ)

****PLEASE NOTE: This information was originally shared April 7, 2020 and was last updated April 14, 2020. The information is subject to change.***

After careful consideration and in alignment with many other health care facilities across Canada, the Nova Scotia Health Authority (NSHA) will be implementing a new practice around masking of its health care workers (HCW) during the COVID-19 pandemic. Specifically, physicians and staff working in or moving through patient care areas will be asked to wear a procedure mask throughout their entire shift at all sites. One (1) procedure mask per shift will be distributed by unit/team leadership to the HCW. Unit managers will have access to additional masks should they be required.

For information regarding the distribution/collection of masks at the start of your shift, please contact your manager or designate.

1. Which staff members should wear masks?

- Any HCWs who have any face-to-face (direct) or indirect contact with patients in a patient care area should wear a mask. If you are uncertain if you are included in this definition, please contact your manager.
- Staff members who do not work in patient areas and are not patient-facing do not require masks. They are asked to work at home whenever possible, practice social distancing when at work, perform hand hygiene regularly, and not come to work when ill.
- Masks should only be worn on days when working in a patient care area.

2. Why are we being asked to wear the same mask throughout the day?

- Several other provinces have seen a rapid increase in the prevalence of COVID-19 in their communities, leading to outbreaks at long-term care homes and exposures in hospitals. As we begin to see increasing community spread in Nova Scotia (NS), we want to be ahead of this situation.
- Some staff have been coming to work with mild symptoms, which they do not necessarily perceive to be an infection, or coming to work well and then developing mild upper respiratory tract infection symptoms while on duty. This poses a safety risk to our patients and other staff that can result in significant exposures and require quarantine/isolation of staff.
- We are therefore taking increased measures to ensure the continued safety of staff and patients.
- Given the expected challenge in maintaining our supply of PPE, this strategy, if used well, may conserve our supply of procedure masks while enhancing the safety of patients and HCWs.
- If your mask becomes soiled or wet (including sweaty) throughout your

shift, your manager will have a supply of additional masks.

3. We have been asked to wear a mask at all times during our shift. When can I remove the mask?

- The mask should be removed whenever a staff member is taking a break, eating a meal, or using the restroom. Social distancing (2 metres) **MUST** be maintained at all times when not wearing a mask.
- Remove the mask using the straps, fold lengthwise from top to bottom (with the front (patient-facing) side in and the side that will be against your face out) ([see video](#))
 - The mask should be stored in a safe place in a clean, dry paper bag labeled with your name). **The bag should be discarded after each use.**
 - A personal locker – If readily available, the mask may be stored in a locker with a hook. Pay close attention not to contaminate the mask in this space.
 - Make sure that the mask can be clearly identified as yours: put your name on the bag before use
- Meticulous hand hygiene should occur before and after removing your mask and before putting the mask back on the face.

4. When is it appropriate to DISCARD my mask and use a new one?

If your mask gets soiled during the course of your shift, you can request an additional mask as needed. Your mask should be discarded and replaced when:

- Visibly soiled.
- It makes direct contact with a patient.
- It becomes so moist/humid that its integrity is affected (this includes sweat).

5. How can I tell if my mask is soiled and should be discarded?

- If the mask is directly exposed to respiratory droplets (saliva/cough/sneeze).
- If you touch the mask accidentally with visibly soiled hands, it should be replaced.
- If your mask is soaked with sweat.
- Note: If the mask is covered with a face shield that was properly placed to completely cover the face, the mask is protected from these droplets.

6. How often should I discard and replace the paper bag in which I'm storing my mask?

The paper bag should be discarded after each use.

7. What if I get a mask that doesn't fit properly?

It's important that your mask fits you properly so that it doesn't fall off. Please talk to your supervisor if you've been given a mask that does not fit properly.

8. Why are we not giving patients masks?

Patients are screened upon admission for respiratory symptoms and risk factors. Those who are suspected or confirmed to have COVID-19 are put on droplet and contact precautions. Given the potential for PPE shortage, we have elected not to provide inpatients with masks for source control unless they are out of their rooms for necessary medical tests and procedures.

9. Why are different kinds and colours of procedure masks being provided to NSHA staff? Do all of these masks meet the same quality standards?

NSHA has been following a number of different leads to secure personal protective equipment such as procedure masks. It's important to note that Supply Chain **only** follows up on PPE that adheres to very specific and rigorous [Health Canada Standards](#). You can rest assured that any PPE supplied by NSHA meets these safety standards, regardless of whether there are slight differences in appearance or colour.

10. Can I bring my OWN procedure masks?

No. At this time, NSHA does not support personnel bringing in their own supply of masks. Our procedure masks are controlled for quality and we cannot be sure that masks coming from elsewhere meet our quality standards without additional evaluation.

11. Can health care workers wear homemade masks at work?

No. Health care workers are advised to wear surgical masks, as we cannot validate the efficacy of homemade masks in preventing the spread of infection.

12. Do I need to replace my mask after entering a Contact Isolation room?

No. If you have not met any of the above criteria to discard the mask, you do NOT need to replace the procedure mask. Perform diligent hand hygiene after exiting the room.

13. What if I need to be present during an aerosol-generating medical procedure (AGMP) with a patient who has been identified as a suspect or confirmed COVID-19 case?

- Perform hand hygiene and remove your procedure mask (place in dedicated bag/storage area – see above).
- Don a fit-tested N95 Respirator and whichever PPE is required based on additional precautions posted outside the room (read signage carefully, may include gloves/gown/face shield).

- Upon leaving the room, doff PPE appropriately. After performing hand hygiene, re-don your procedure mask.

14. What do I do if I walk into a droplet precautions room?

- Don eye protection (e.g.: goggles, face shield)
 - If a face shield is used, the procedure mask can continue to be used as the face shield acts as a barrier preventing the mask from being exposed to respiratory droplets.
 - If goggles are used, the procedure mask you are wearing will need to be discarded and a clean one put on. You will need to have a clean mask available outside the room to be available when the old mask is removed just before you leave the droplet precautions room.
- Disposable face shields are to be discarded after use; reusable face shields are to be cleaned and disinfected after each use. As the situation evolves, the reuse of disposable face shields will be re-evaluated and will be communicated to staff if instructions change.
 - When exiting the room, doff PPE in prescribed order (gloves, gown, hand hygiene, eye protection, mask, hand hygiene). Do not forget to disinfect goggles or the reusable face shields if used.
- Don your assigned procedure mask after performing hand hygiene.

15. Does the one mask per shift apply to perioperative staff?

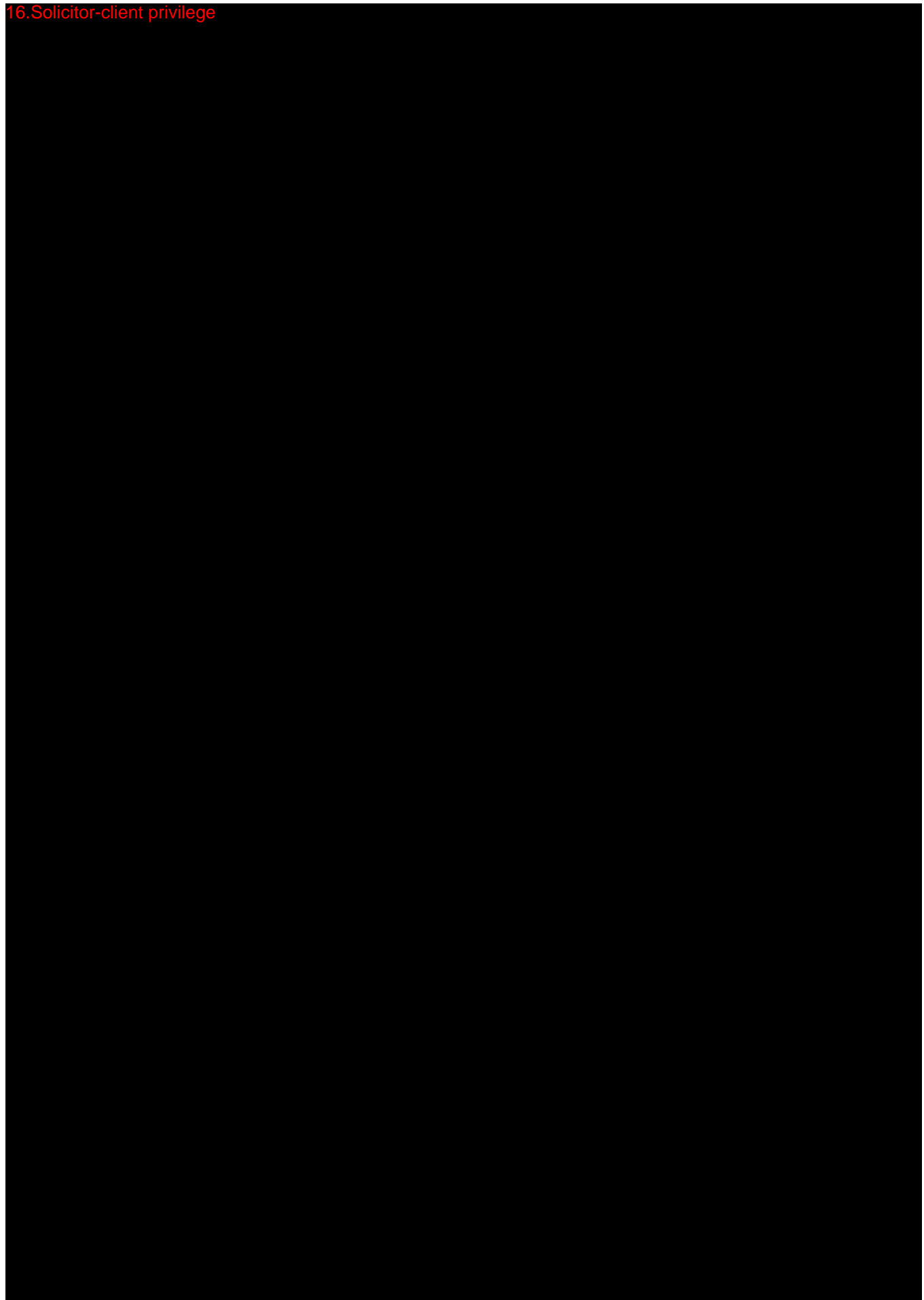
Perioperative staff will continue their regular practice of using one mask **per patient case** in surgery, changing to a new mask between cases.

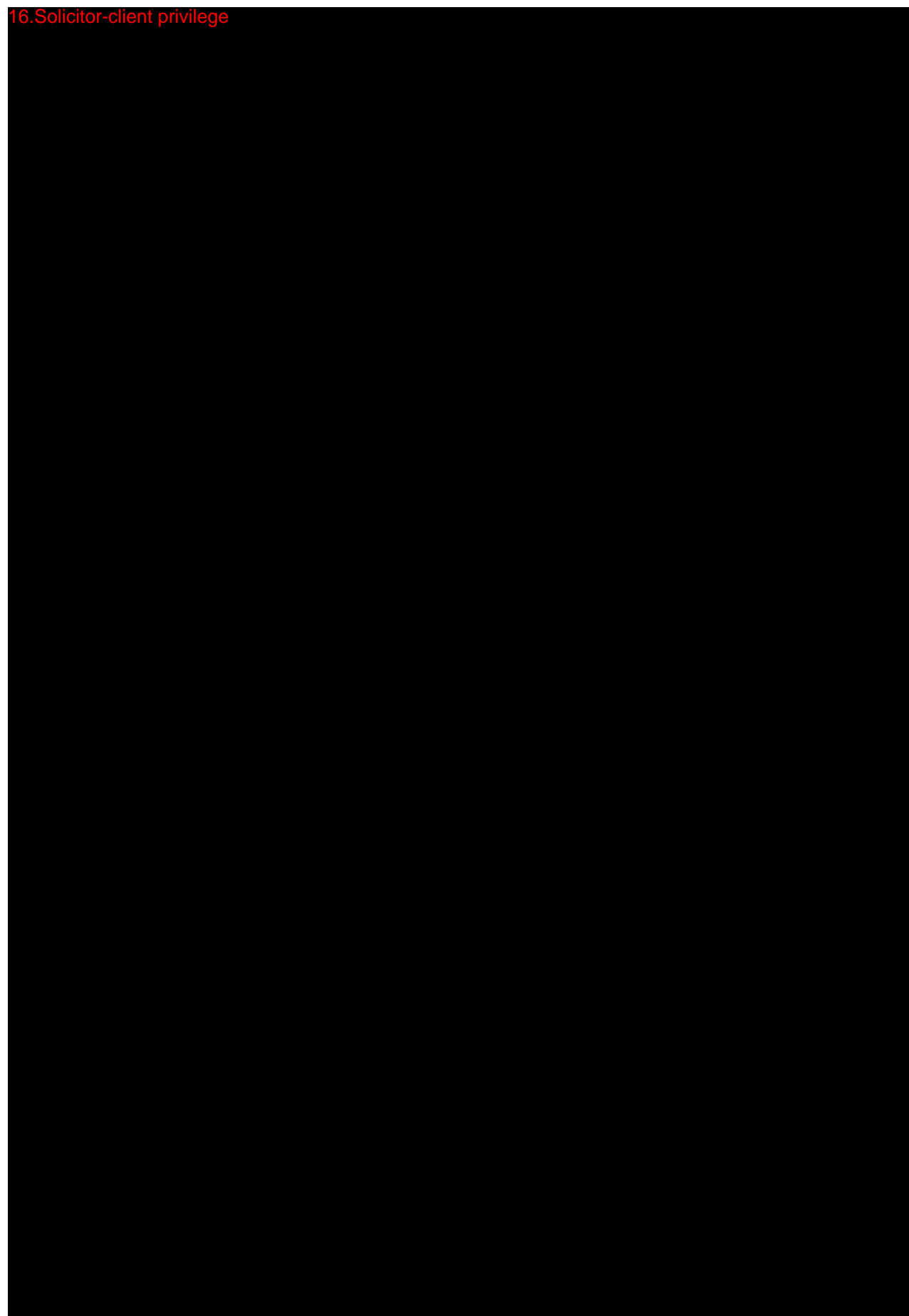
16. How else can I protect myself?

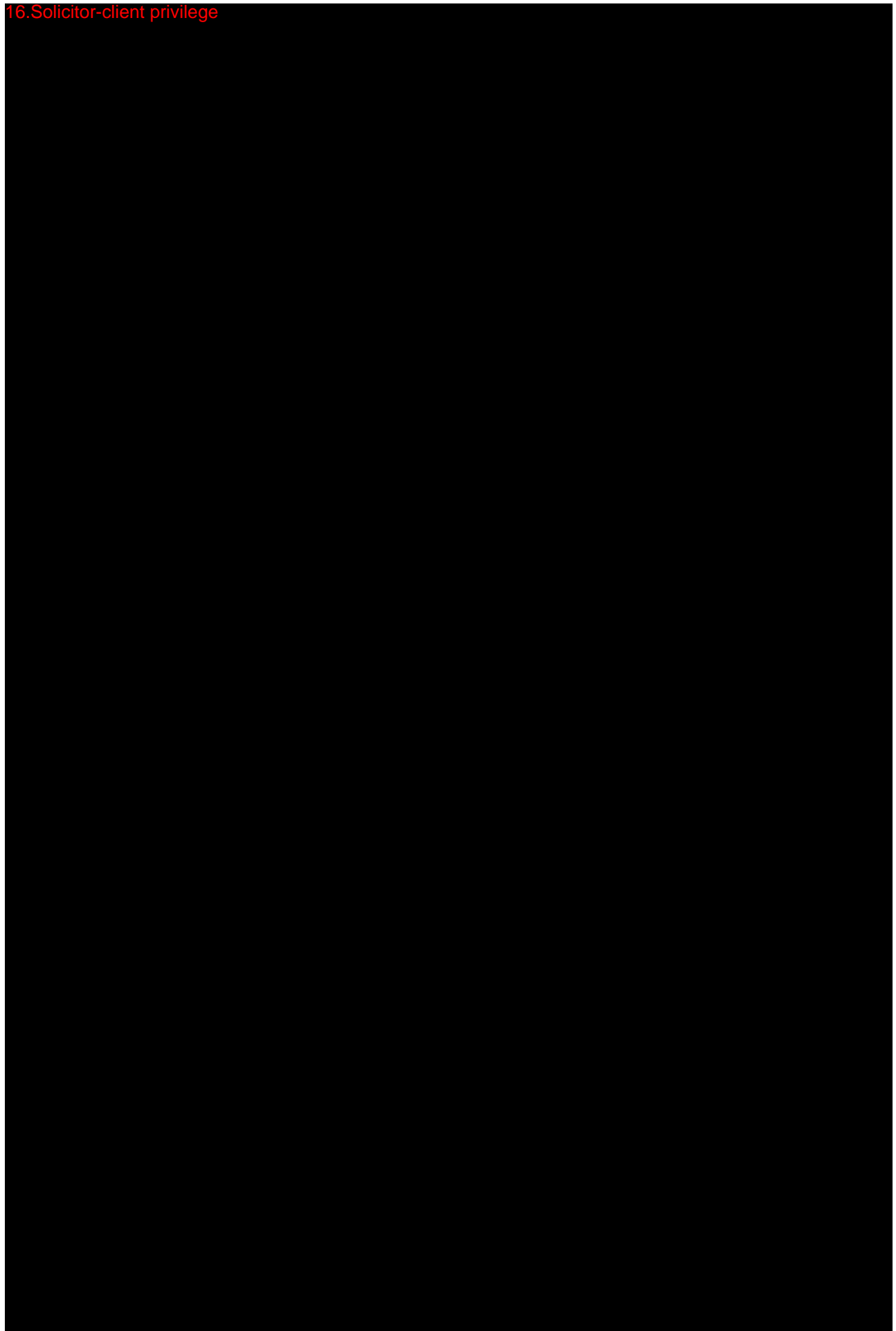
- Avoid touching the mask unless necessary for donning/doffing and then , only by the straps
- Ensure you are wearing the procedure mask appropriately
 - The mask should fully cover your mouth and nose
 - Pull the mask down to cover your chin
 - Press down to mold the metallic strip over the bridge of your nose.
- Do not partially remove the mask by pulling down under your chin. The mask is either fully on, or fully off. Do not hang the mask around your neck or from your ear.
- Avoid touching the mask at all times.
- If you must readjust the mask, or are donning/doffing for the reasons described above, ensure you perform hand hygiene immediately before and after doing so. Do not adjust the mask with a gloved hand.
- Clean your hands before and after touching the mask for any reason.
- Clean your hands before and after every patient contact.
- Do NOT come to work when ill. Contact Occupational Health as soon as possible if you do become ill.

17. What else do I need to think about?

- Do NOT attempt to sanitize/clean the procedure mask.
- If you have discarded your allocated mask, report to the unit where you acquired your mask at the beginning of the shift to request a new one.







16.Solicitor-client privilege



16.Solicitor-client privilege



[Redacted]

16.Solicitor-client privilege

[Redacted]

16.Solicitor-client privilege

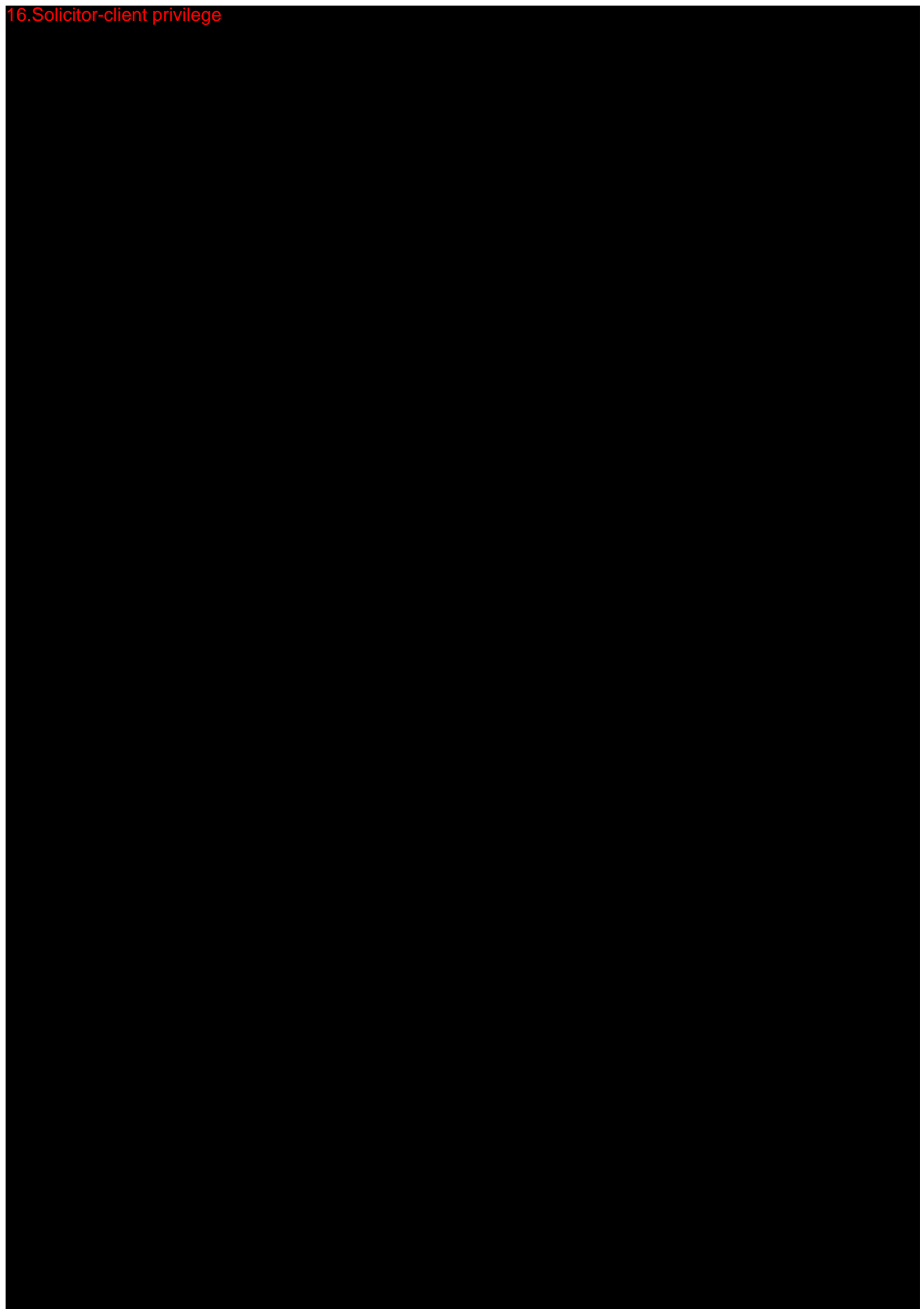
[Redacted]

16.Solicitor-client privilege



16.Solicitor-client privilege





16.Solicitor-client privilege



16.Solicitor-client privilege



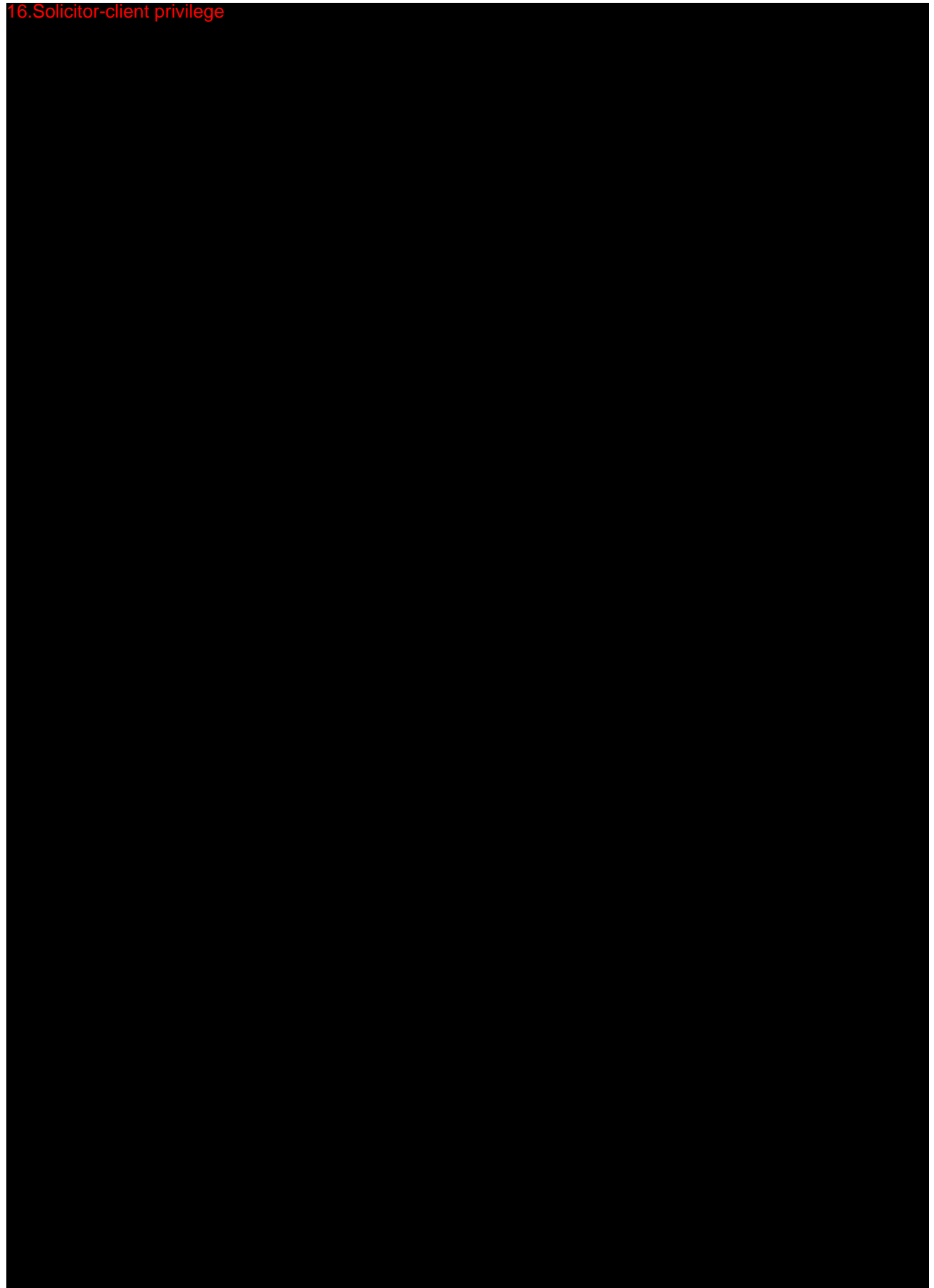




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16. Solicitor-client privilege



16.Solicitor-client privilege



From: [Stevenson, Colin](#)
To: [Stevenson, Colin](#); [McVeigh, Wendy](#); [Piers, Geoff W](#); [Read, Carolin](#); [Stevens, Susan](#); [Stone, Joanne](#)
Subject: !URGENT - Northwood Situation
Date: Friday, April 17, 2020 1:01:31 PM

Stevens, Susan 12:35 PM:

had to step off call
back

McVeigh, Wendy 12:36 PM:

just provided an overview

Stone Joanne 12:37 PM:

is that cZ could we pay travel fro truro kentville etc

McVeigh, Wendy 12:37 PM:

Based on my check in with NW team this morning they have 160 staff off and 90 of these are off on self-isolation. MOH and PH working with team on RTW plan.

Today and for the next 7 days NW requires urgently 15 licensed (RN or LPN) staff for 12 hr nights and 6 for 12 hour days. In addition 12-15 non licensed staff are required for 12 hour days and 12 hour nights.

All efforts to date have not addressed gaps. This effort included redeployment by VON, RC, NW Home Care employees; NSHA and retirees.

Stone Joanne 12:42 PM:

did we get a response about the IWK?

Piers, Geoff W 12:53 PM:

I just texted Cindy C and she indicated that Alex has asked them before and is right now

Stevenson, Colin 1:01 PM:

Have to hop off to get on another call. I'll follow up with Angela in DHW as well.

From: [MacDonald, Madonna](#)
To: [Stevenson, Colin](#)
Subject: Accepted: Northwood Incident Management Team - CRITICAL

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From: [Smith, Alexandra \(Health\)](#)
To: [LeBlanc, Angela](#); [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); [Purcell, Angela L](#); [Howlett, Todd](#); [REDACTED] [Cruickshank, Cindy J](#); [REDACTED] [Knowles, Ruby M](#); [Lagasse, Jeannine](#); [Elliott-Lopez, Vicki](#); [Murphy, Matthew](#); [Monroe, Randi](#); [REDACTED] [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#);
Cc: [Melvin, Kate](#); [REDACTED]
Subject: Article-Northwood was
Date: Saturday, May 2, 2020 2:26:52 PM

https://www.thechronicleherald.ca/news/ns-government-delayed-implementing-federal-covid-19-guidelines-for-long-term-care-homes-444709/?fbclid=IwAR0NsrKVbLCWssCfb5diiVceAZWCH_ACpxYmmL0IOSzfltt-fm1At7c8oIE#.Xqze-rj795g.twitter

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

From: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>

Sent: April 30, 2020 4:05 PM

To: LeBlanc, Angela; McCormick, Bethany; Zwerling, Isabelle; Rockwood, Kenneth; Rawding, Patsy A; Tschupruk, Cheryl; Miletic, Natalie; Carr, Brendan; Clarke, Barry; Connell, Katherine; Hawkesworth, Theresa; McVeigh, Wendy; Alexiadis, Maria; Stevenson, Colin; Stevens, Susan; Tate, Natalie; Elliott Rose, Annette; MacDonald, Madonna; Purcell, Angela L; Howlett, Todd; [REDACTED] Cruickshank, Cindy J; Smith, Alexandra (Health); [REDACTED] Knowles, Ruby M; Lagasse, Jeannine; Elliott-Lopez, Vicki; Murphy, Matthew; Monroe, Randi; [REDACTED] Flinn, Jill; MacDonald, Tammy; Sullivan, Vickie; Proffitt, Joshua G; [REDACTED] 'Natasha Handspiker'

Cc: Melvin, Kate; Margaret Szabo; Leslie Bellefontaine; Bernadette Mitchell-McDonald; Linda Verlinden; Murray Stenton; Terri Sarty; Lisa Carr

Subject: NSHA and Northwood Joint Meeting

When: May 2, 2020 2:00 PM-2:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference: 18554536962, 9059011

As per discussion today (April 30), we will have one check-in meeting per day in the afternoon this weekend.

Out of scope



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Derek

Covid Summary	Covid Expense by Day	Covid Expenses by Site	Covid Weekly Expense Trend	Capital Summary
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COVID-19 Site Expenses

Source	VP Description	Sr Director / Program Description	Select Zone:	Fiscal Year
(Multiple values)	(All)	(Multiple values)	(All)	(All)

Site Desc	Grand Total	Revenues					Wages and Benefits							
		Total	Federal Government	Non-Duty Prov Govt	Other	Total	Employer Benefits Contributions	Illness	Medical Fees	Misc Leaves	Overtime	Premiums	Purchased Service	Recovery Compensation
Northwood	234,437					194,549	28,830	3,536		2,499	21,359	7,899		

From: [Tate, Natalie](#) on behalf of [McCormick, Bethany](#)
To: [REDACTED]; [REDACTED] [Sullivan, Vickie](#); [Monroe, Randi](#); [Rawding, Patsy A](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [Carr, Brendan](#); [Tate, Natalie](#); [Stevenson, Colin](#); [Rockwood, Kenneth](#); [Alexiadis, Maria](#); [LeBlanc, Angela](#); [Clarke, Barry](#); "jeannine.lagasse@novascotia.ca"; [Murphy, Matthew](#); [Stevens, Susan](#); [McVeigh, Wendy](#); [REDACTED] [MacDonald, Tammy](#); [REDACTED] [Howlett, Todd](#); [Tschupruk, Cheryl](#)
Cc: [Vicki Elliott-Lopez](#)
Subject: Canceled: NSHA and Northwood Joint Meeting - Situation Update
Importance: High

Cancelling due to conflict with Northwood press conference

NSHA and Northwood Joint Meeting

Chair: NSHA leader

Purpose: Situation Update meeting

Agenda:

1. Medical
 - a. Care plans and goals of care
 - b. Analytics modelling, dashboard
 - c. Physician remuneration
2. Operations
 - a. Clinical care
 - b. Infection control
3. Communications
 - a. Overall strategy
 - b. FAQ
- c. Connection with Families
4. Human Resources
 - a. Clinical Staff
 - b. Support Staff
5. Logistics (Supplies, PPE, Equipment, Finance)
6. Offsite Location
7. Care by Family Proposal
8. Additional risks/Open items

From: [McVeigh, Wendy](#)
To: [LeBlanc, Angela](#); [Monroe, Randi](#); [REDACTED]; [MacDonald, Tammy](#); [REDACTED];
[REDACTED]; [Hawkesworth, Theresa](#); [Stevens, Susan](#); [REDACTED];
[Connell, Katherine](#); [Sullivan, Vickie](#); [Alexiadis, Maria](#); [Rawding, Patsy A](#); [McCormick, Bethany](#); [Howlett, Todd](#); ["jeannine.lagasse@novascotia.ca"](#); [Carr, Brendan](#); [Stevenson, Colin](#); [Murphy, Matthew](#); ["Smith, Alexandra \(Health\)"](#); [Proffitt, Joshua G](#); [Flinn, Jill](#); [MacDonald, Madonna](#); [Knowles, Ruby M](#); [Tate, Natalie](#); [REDACTED];
[REDACTED]; [Saulnier, Jenna](#); ["Cruikshank, Cindy J"](#); [REDACTED];
[Elliott-Rose, Annette](#); [Melvin, Kate](#); [REDACTED]; [Clarke, Barry](#); [Tschupruk, Cheryl](#); [REDACTED];
[Zwerling, Isabelle](#); [REDACTED]; [Miletic, Natalie](#); [Rockwood, Kenneth](#); ["Purcell, Angela L"](#)
Cc: [Hurd, Alison](#)
Subject: CANCELLED - May 10th NSHA & Northwood Joint Meeting
Date: Sunday, May 10, 2020 1:02:03 PM

Based on conversation with Randi Munroe and Jill Flinn we will not require a 2pm meeting today.

Wendy

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

I support inclusion

Office/Cell: [REDACTED]

Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Saulnier, Jenna **On Behalf Of** McVeigh, Wendy

Sent: Tuesday, May 05, 2020 4:25 PM

To: McVeigh, Wendy; LeBlanc, Angela; Monroe, Randi; Bernadette Mitchell-McDonald; MacDonald, Tammy; 'Elliott-Lopez, Vicki'; Linda Verlinden; Murray Stenton; Hawkesworth, Theresa; Stevens, Susan; [REDACTED] [REDACTED] Connell, Katherine; Sullivan, Vickie; Alexiadis, Maria; Rawding, Patsy A; McCormick, Bethany; Howlett, Todd; 'jeannine.lagasse@novascotia.ca'; Carr, Brendan; Stevenson, Colin; Murphy, Matthew; 'Smith, Alexandra (Health)'; Proffitt, Joshua G; Flinn, Jill; MacDonald, Madonna; Knowles, Ruby M; Tate, Natalie; [REDACTED] Lisa Carr; [REDACTED] Saulnier, Jenna; 'Cruickshank, Cindy J'; Margaret Szabo; 'Natasha Handspiker'; Elliott Rose, Annette; Melvin, Kate; Terri Sarty; Clarke, Barry; Tschupruk, Cheryl; Zwerling, Isabelle; Leslie Bellefontaine; Miletic, Natalie; Rockwood, Kenneth; 'Purcell, Angela L'

Cc: Hurd, Alison

Subject: NSHA & Northwood Joint Meeting

When: Occurs every day effective 2020/05/09 until 2020/05/31 from 2:00 PM to 2:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference

Teleconference Info

Phone: Out of scope [REDACTED]

[REDACTED]

Moderator: Wendy

From: [McCormick, Bethany](#)
To: [Stevenson, Colin](#)
Subject: Considerations for supporting Northwood with response.
Date: Saturday, April 18, 2020 8:56:21 PM
Attachments: [image.png](#)
[image.png](#)

Some key thoughts from the eprep leadership. Not polished by a good reminder / starting point for leadership to be thinking about.

Bethany McCormick BScOT MSc CHE , CFHI Extra Fellow; NSHA Senior Director - Strategy Planning & Performance

mobile: [REDACTED]

Sent from iPhone

Begin forwarded message:

From: "Rodier, Pascal" <Pascal.Rodier@nshealth.ca>
Date: April 18, 2020 at 8:54:31 PM ADT
To: "LeBlanc, Angela" <Angela.LeBlanc@nshealth.ca>
Cc: "McCormick, Bethany" <Bethany.McCormick@nshealth.ca>
Subject: Re: Considerations for supporting Northwood with response.

This site will also be our first official External Non-traditional Treatment Site. It will pull resources out of our norm and into someone else's site.

Thus the need to have it report to our EOC. Sorry for the ramblings. Just know how responses can go sideways.

Sincerely;

P.B. (Pascal) Rodier MStJ, MA

Manager, Emergency Preparedness - Projects and Planning
Enterprise Risk Management & Emergency Preparedness
Nova Scotia Health Authority

.....
Bethune Bldg

[515 - 1276 South Park Street](#)

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On Apr 18, 2020, at 20:44, LeBlanc, Angela <Angela.LeBlanc@nshealth.ca> wrote:

Hi Bethany,

Just in follow-up to our conversation, a few points to consider re our approach to Northwood Incident. A planning priority must include maintaining NSHA's ability to sustain long term resilience for ongoing COVID management within NSHA while supporting Northwood with their incident response. Northwood would be considered a current hot spot and we should minimize additional unprotected or unnecessary exposure.

Planning considerations:

- Ensure NSHA employees and representatives are operating in a safe environment during this response.
 - Until situation is fully assessed, we should minimize traffic and exposure to additional individuals.
 - Minimize the number of individuals participating on site for assessment of situation.
 - Establish a command post external to the facility if at all possible until a full assessment can be completed.
 - Ensure PPE for all participants of the medical team involved in the initial assessment.
 - Establish a Clinical team for ongoing support within available NSHA resources.
 - Establish OHSW plan for NSHA staff and physicians.
- Support for establishment of a site specific command post:
 - Identify and clearly communicate decision making authority
 - Include role clarification for NSHA, EHS, and Northwood staff
 - Support team with role of Command Post and Job Action Sheets for various roles
 - Establish reporting mechanisms to

NSHA EOC and DHW as required

<!--[if !supportLists]-->o <!--[endif]-->Assess needs and provide logistical support as required.

These are very quick thoughts. I expect they will need lots of development but offer them just for a starting point for tomorrow.

angela

<[image005.jpg](#)>
<[image006.jpg](#)>

Angela LeBlanc BScHed CPHRM

Director, Enterprise Risk Management
& Emergency Preparedness - NSHA
60 Vancouver Street, Yarmouth NS B5A 2P5

Office: 902-742-3542 Ext. 1437 | Cell: [REDACTED]
angela.leBlanc@nshealth.ca

Administrative Assistant:

Natalie Miletic, 902-742-3542 Ext. 1604
natalie.miletic@nshealth.ca

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From: [Stevenson, Colin](#)
To: [Howlett, Todd](#); [Tate, Natalie](#); [Guest](#); [Bond, Paula](#); [Matthews, Wanda](#); [MacConnell-Maxner, Nancy](#); [Stone, Joanne](#); [Boutillier, Nicole](#); [Stevenson, Colin](#); [#NSHA-Corp-232](#); [McPhee, Jordan](#); [MacDougall, Brett](#); [O'Toole, Gary](#); [Warford, Jordan](#); [Dunkley, Christopher](#); [Rodier, Pascal](#); [Mulcahy, Lesley](#); [MacDonald, Bruce](#); [Sommers, Ryan](#); [Brumwell, Scott](#); [MacDonald, Madonna](#); [504588@nshealth.ca](#); [Shannon, Liam](#); [MacGillivray, Kerri](#); [Ferguson, Delwin](#); [504588 \(\) \(000\)@nshealth.ca](#); [Gilley, Tamara](#); [Alexiadis, Maria](#); [MacIsaac, Eileen](#); [Ivany, Alishia](#); [Munroe, Tanya](#); [Lecouter, Mark](#); [Emergency Operations Center, NS Health Authority](#); [LeBlanc, Angela](#); [Hatchette, Todd](#); [Dickie, Mike](#); [Tomblin Murphy, Gail](#); [Bedford, Lewis](#)
Subject: COVID19 Status and Updates
Date: Monday, May 25, 2020 11:18:07 AM

Todd Howlett 11:04 AM:

Gary- I am assuming that the one case in CZ is related to Northwood

Sommers, Ryan 11:05 AM:

Yes

Todd Howlett 11:05 AM:

Thanks Ryan

Sommers, Ryan 11:06 AM:

We also had a new case (from yesterday I think) - it was a household contact from case (this case was initially associated with travel)

Todd Howlett 11:13 AM:

got it

Brett MacDougall 11:15 AM:

comment

Stone Joanne 11:16 AM:

krista can we let the unions know before employees about the parking please

Gilley, Tamara 11:16 AM:

Joanne- Yes, it's included in rollout plan

From: [Stevenson, Colin](#)
To: [Jamieson, Keltie](#); [Mccormick, Rob](#); [Hirtle, Jodi](#)
Subject: EOC - Sunday
Date: Saturday, April 18, 2020 7:53:00 PM

We are going into the EOC tomorrow if you are able to. We have a team working specifically with Northwood and we will need to be able to coordinate and support them.

Thanks



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: [McCormick, Bethany](#)
To: [Stevenson, Colin](#); [Emergency Operations Center, NS Health Authority](#)
Subject: EOC manager - active items
Date: Monday, May 11, 2020 8:25:56 AM

Hi Colin.

Majority of weekend was spent working on Northwood and Staff deployment, plus Cont Care Items for approval and submission to DHW.

Incident board items have been updated.

I moved the end of day ELT meeting MWF to 4pm rather than 430.

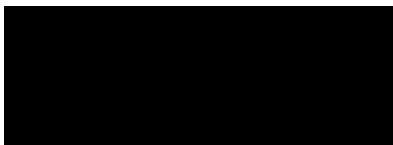
Inpatient number back up somewhat over the weekend

Had an issue with PHI not matching to a test result over the weekend.

Good Processes in PACs need to be reinforced, I sent note to the Zone IMTs

For consideration –

- Reduce to one person, combine Logistics and Planning Leads on go forward.
- Cancel the T and TH ELT Checkin
- Cancel 330 Zone check in MWF, or focus on actions related to flow.
- I expect that
 - o 11am meetings will begin to shift and focus on the re-introduction of services
 - o T, TH workgroup meeting will begin to shift and focus on the re-introduction of services
- LTC deployment in light of NW directive may need further consideration in the big picture, in terms of response impact, and ability to retain services in the NSHA
- Patient flow focus should be more evident in the 11ams. Impact of LTC admission policy (I.e. NO admits) needs to be evaluated
- Role / numbers of PACs go forward needs to be sorted. Pending Public Health direction

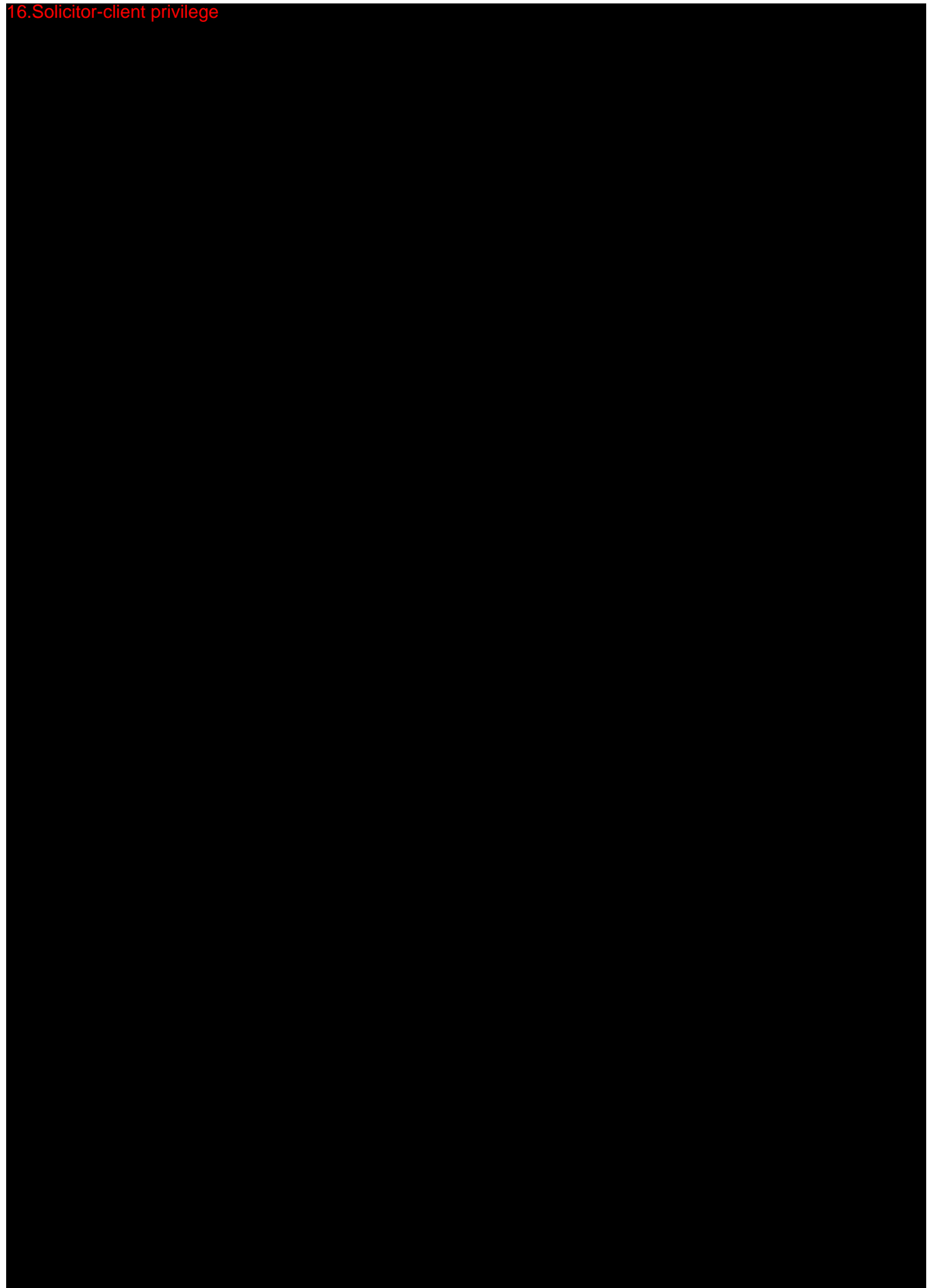


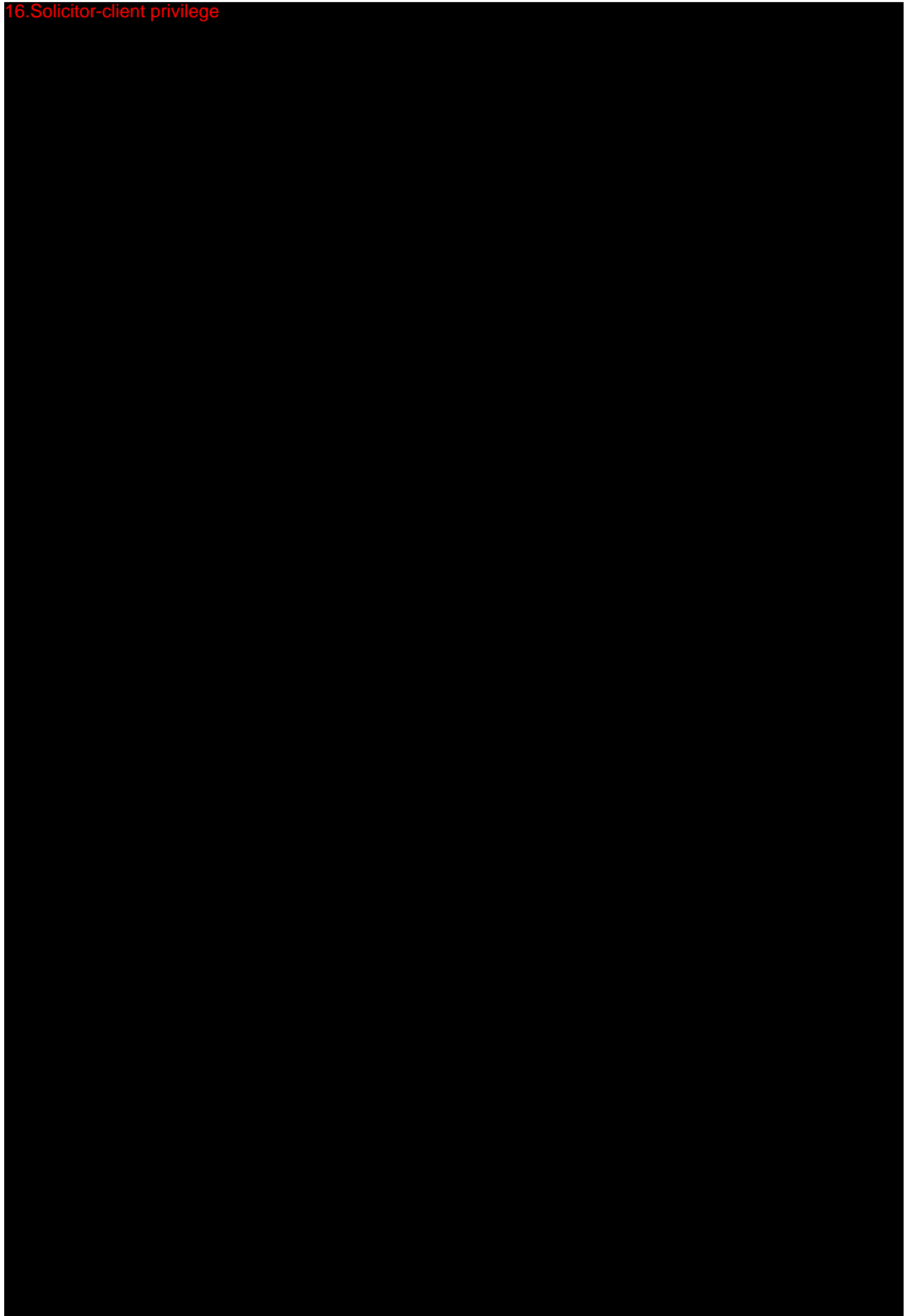
Bethany McCormick, BSc.OT., MSc, CHE, CFHI Extra Fellow
Senior Director, Strategy, Planning & Performance
25 Bay Street Antigonish,
Office: 902-867-4500 ext 4257
Cell: 
bethany.mccormick@nshealth.ca
www.nsha.ca

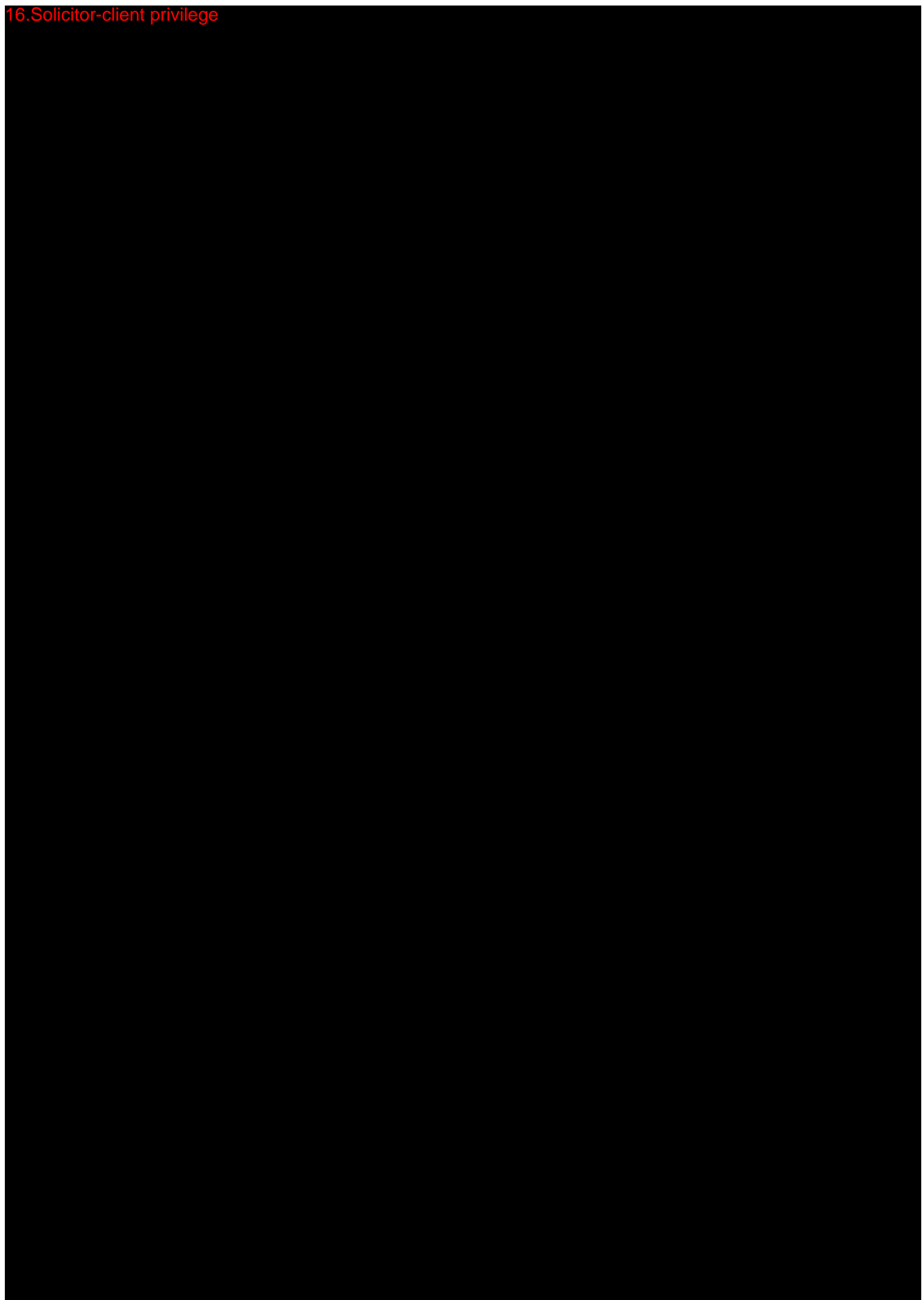
Administrative Assistant:
Natalie Tate, 902-867-4500 ext 4718
natalie.tate@nshealth.ca

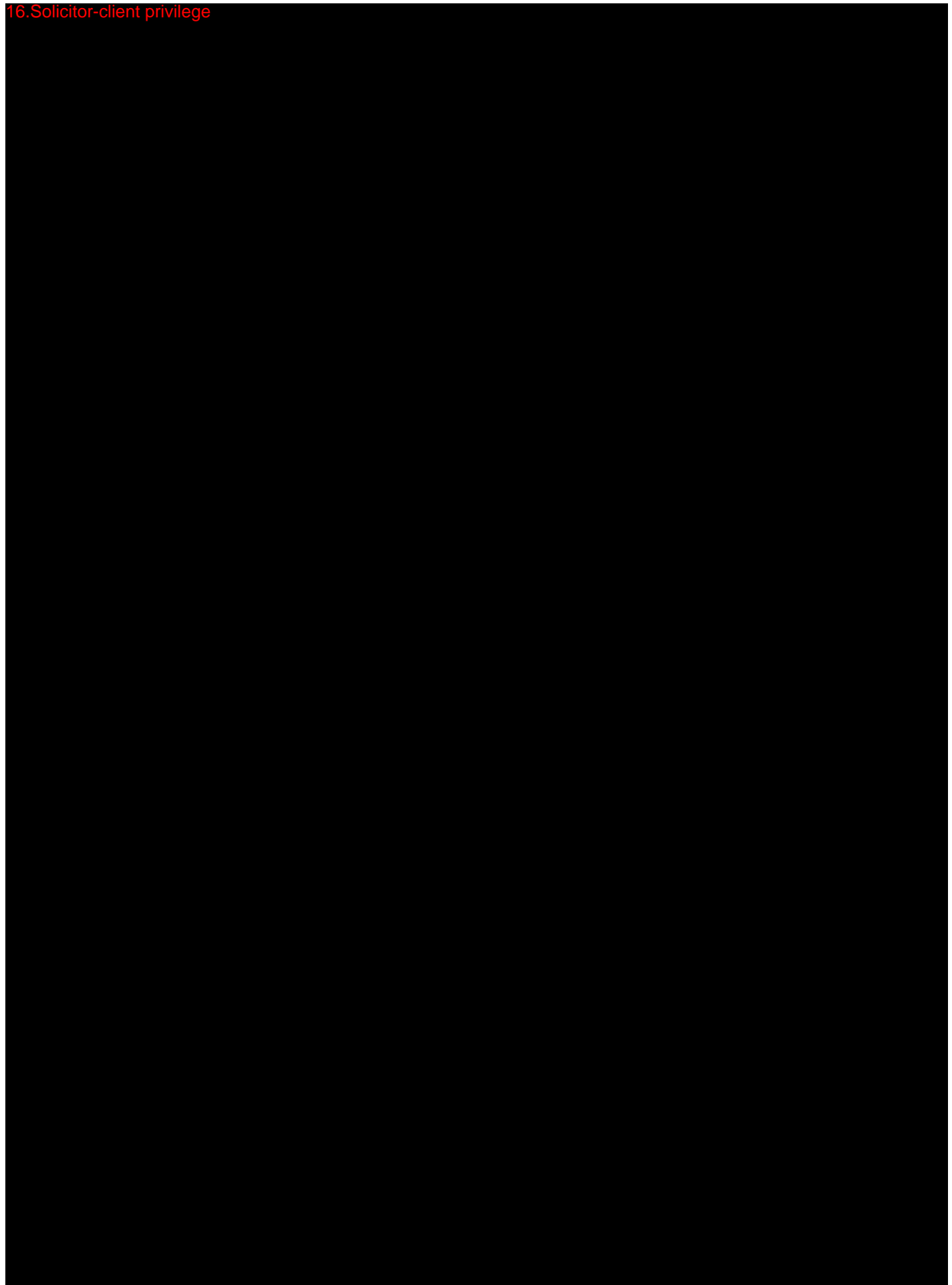
Out of scope, 19.Academic research

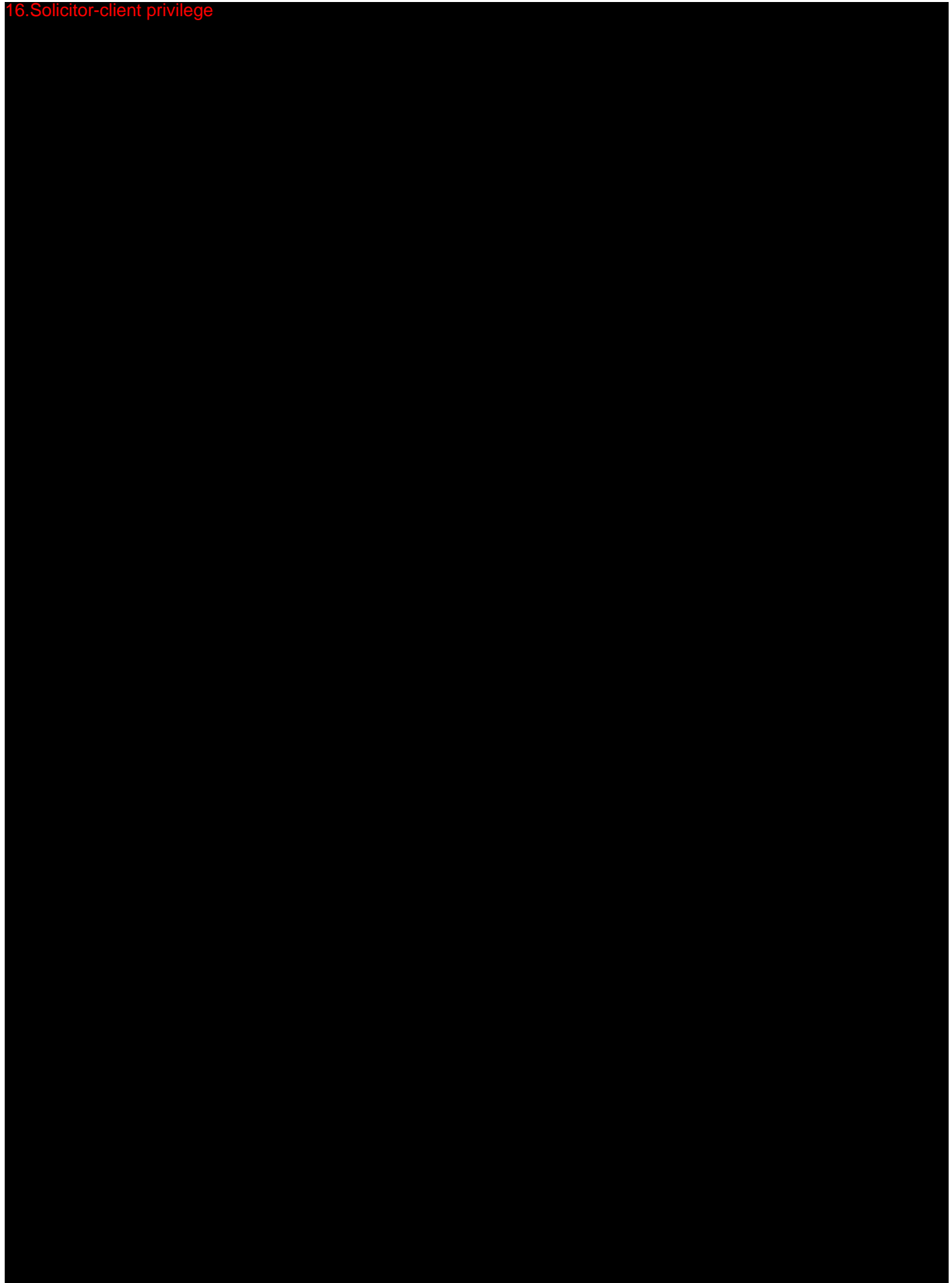
Out of scope

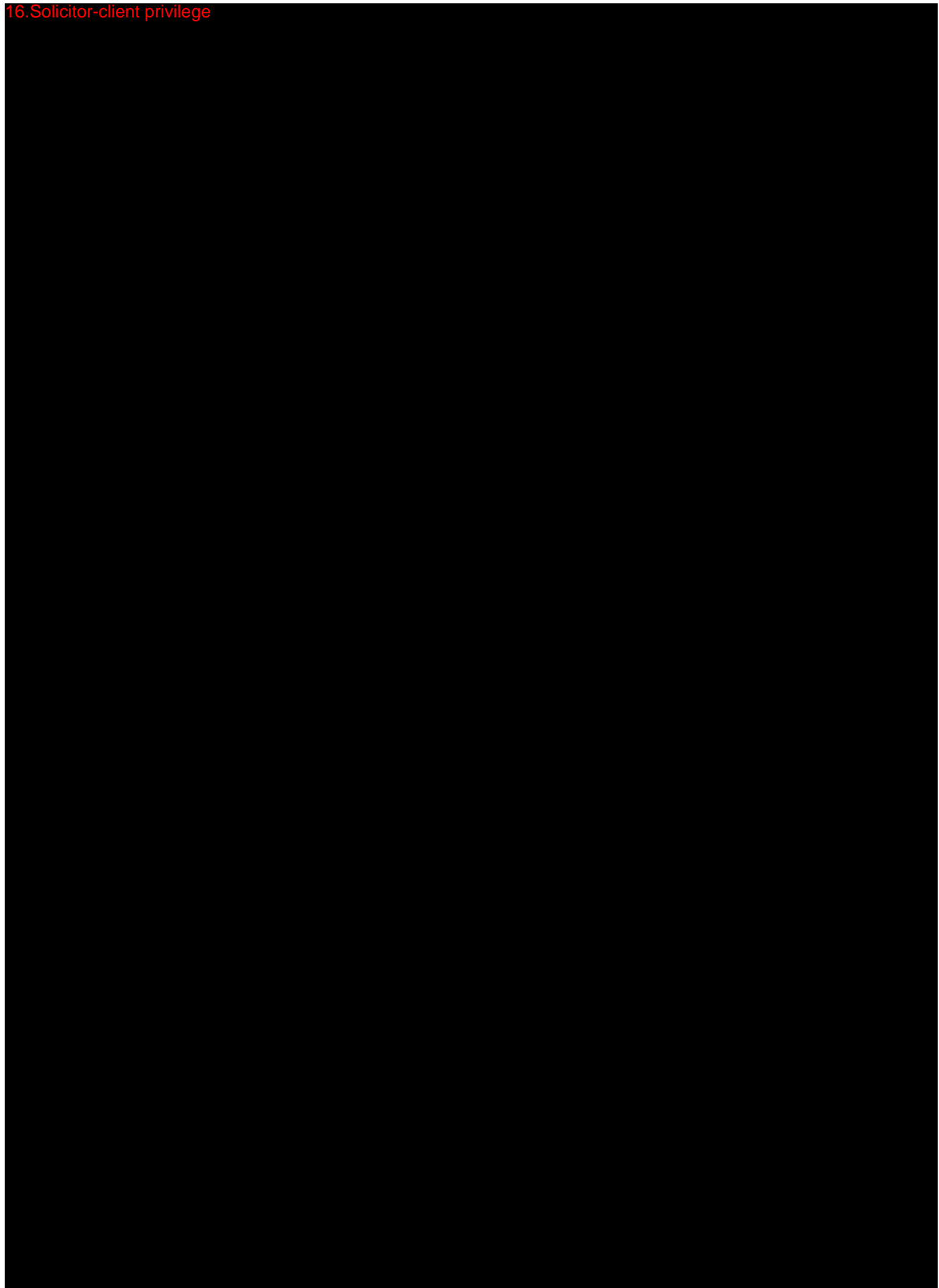






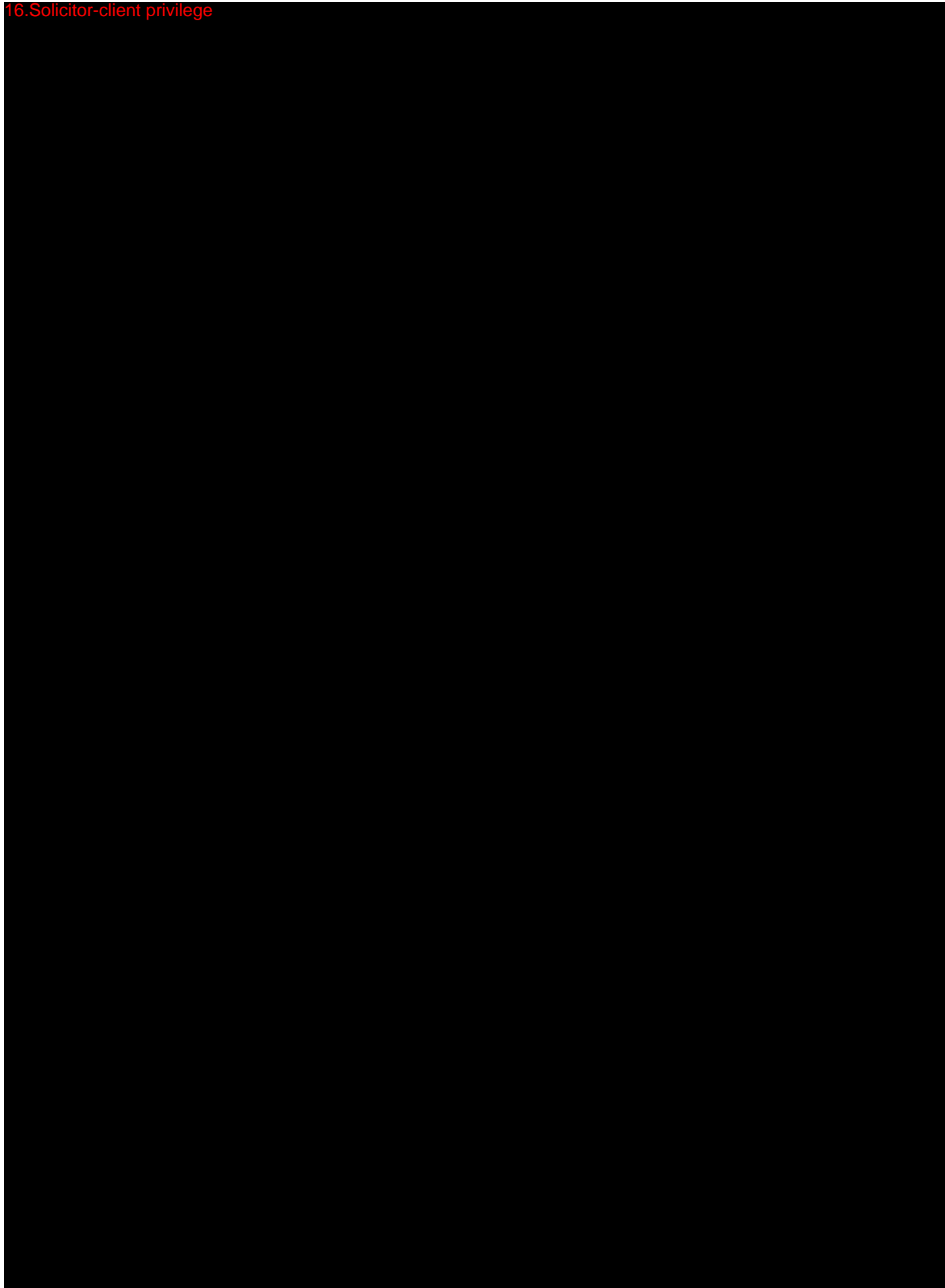


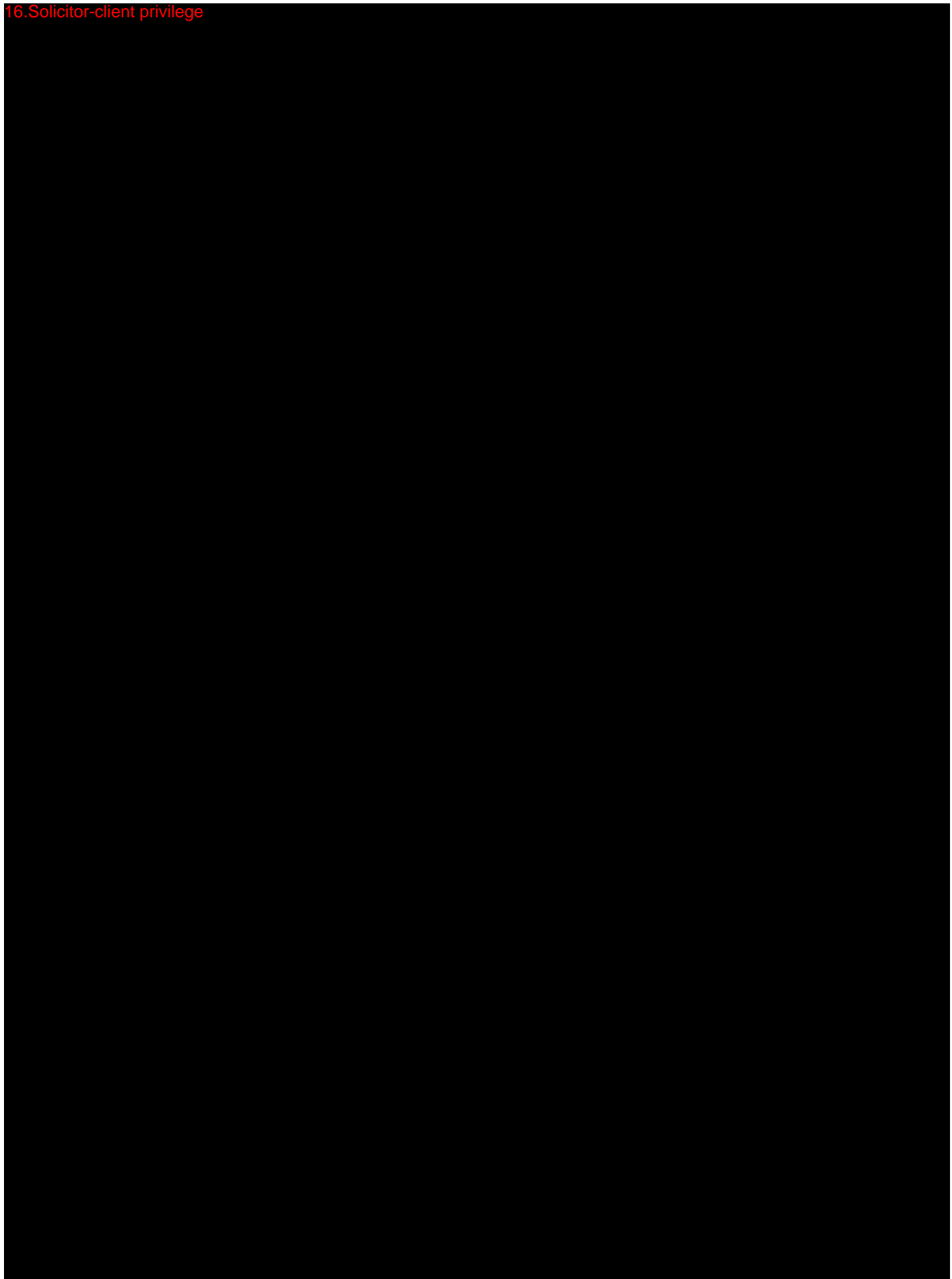




16.Solicitor-client privilege

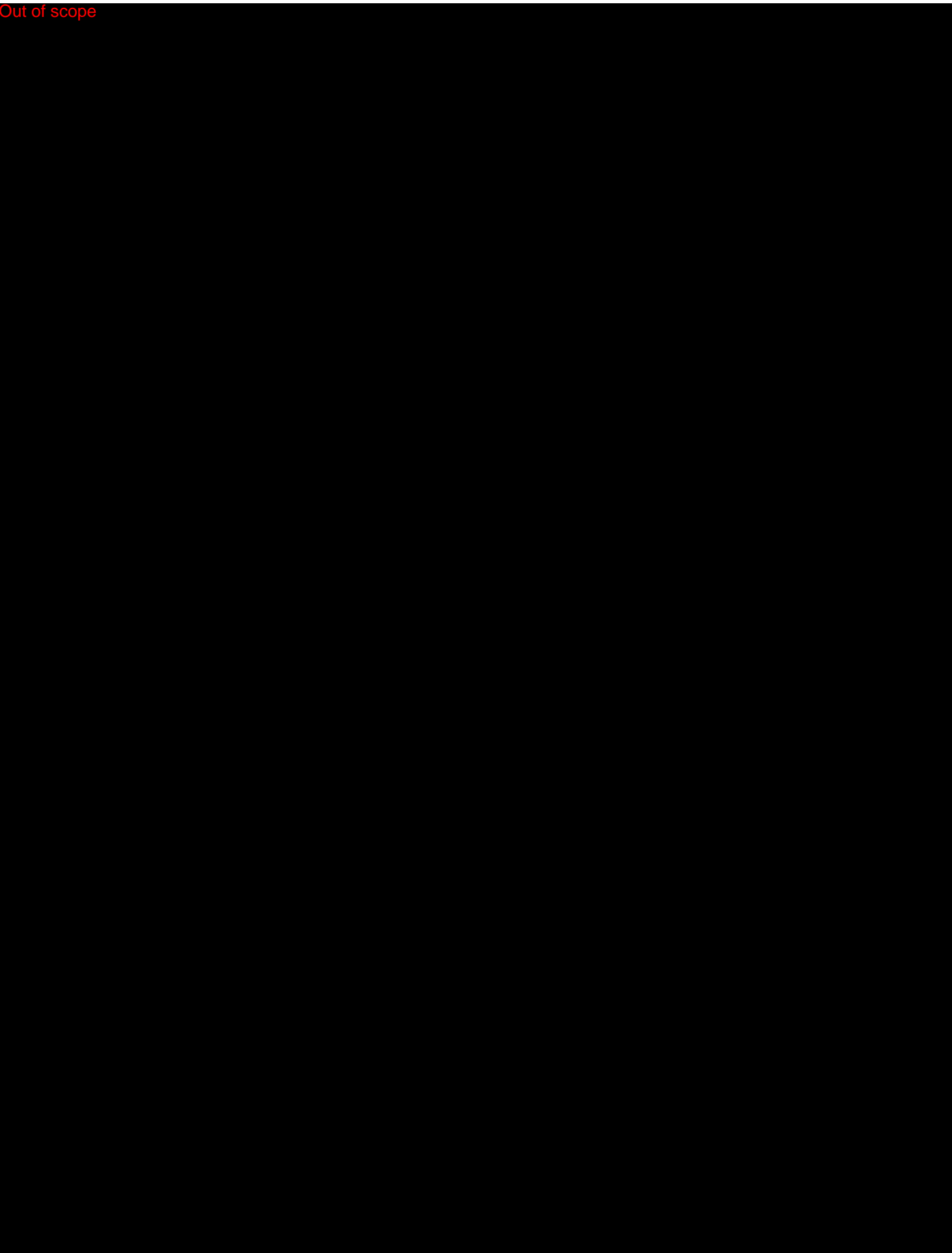






19.Academic research





Out of scope



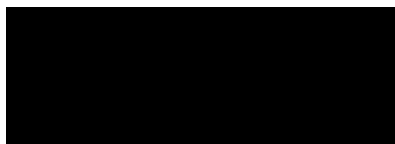
Out of scope



Out of scope

From: [Stevenson, Colin](#)
To: [Stone, Joanne](#); [Ungar, Tracey](#)
Subject: FW: FEEDBACK REQUIRED RE: MOA with Northwood.v3 20-04-18-01
Date: Tuesday, April 21, 2020 4:49:00 PM
Attachments: [MOA with Northwood April 21, 2020.v4.doc](#)

We are building a MOA with Northwood for our delivery of services. We can talk; and; can we identify appropriate wording that reflects what the employees are entitled to with respect to compensation and benefits? Need to be mindful of what we are setting up and doing. I assume we manage to our collective agreements for comp and benefits? But if there are other things that are offered outside of collective agreements are those also offered to our staff by the facility (not by NSHA). For example if Northwood is paying for the hotel for the staff then they are able to accept it.



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16.Solicitor-client privilege

A large black rectangular redaction box covering the majority of the lower half of the page.

16.Solicitor-client privilege



From: [Emergency Operations Center, NS Health Authority](#)
To: [Stevenson, Colin](#)
Cc: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: FOR FEEDBACK RE: MOA with Northwood 20-04-18-01
Date: Monday, April 27, 2020 8:44:39 PM
Attachments: [MOA with Northwood April 27, 2020 v5.doc](#)

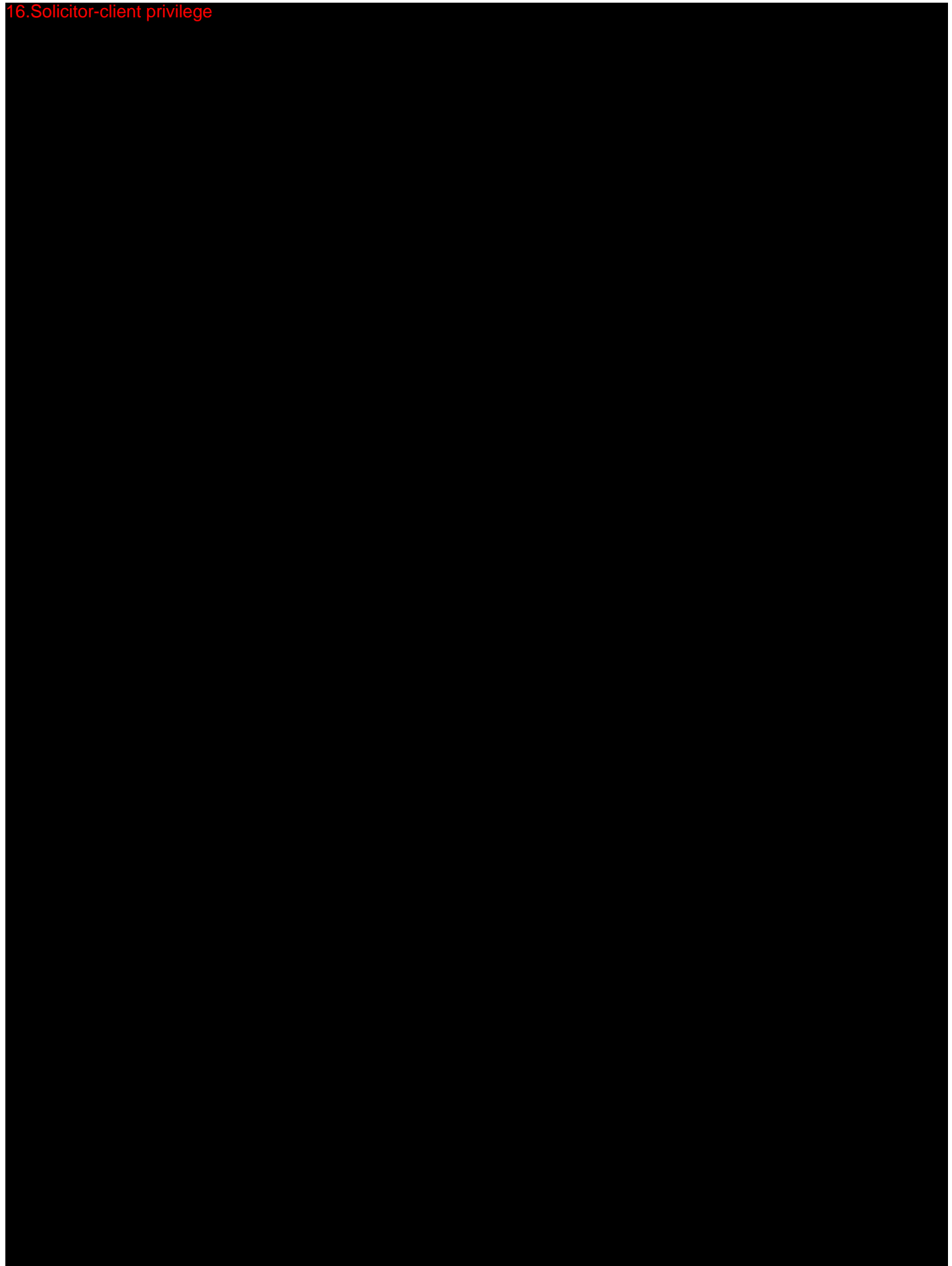
Colin,

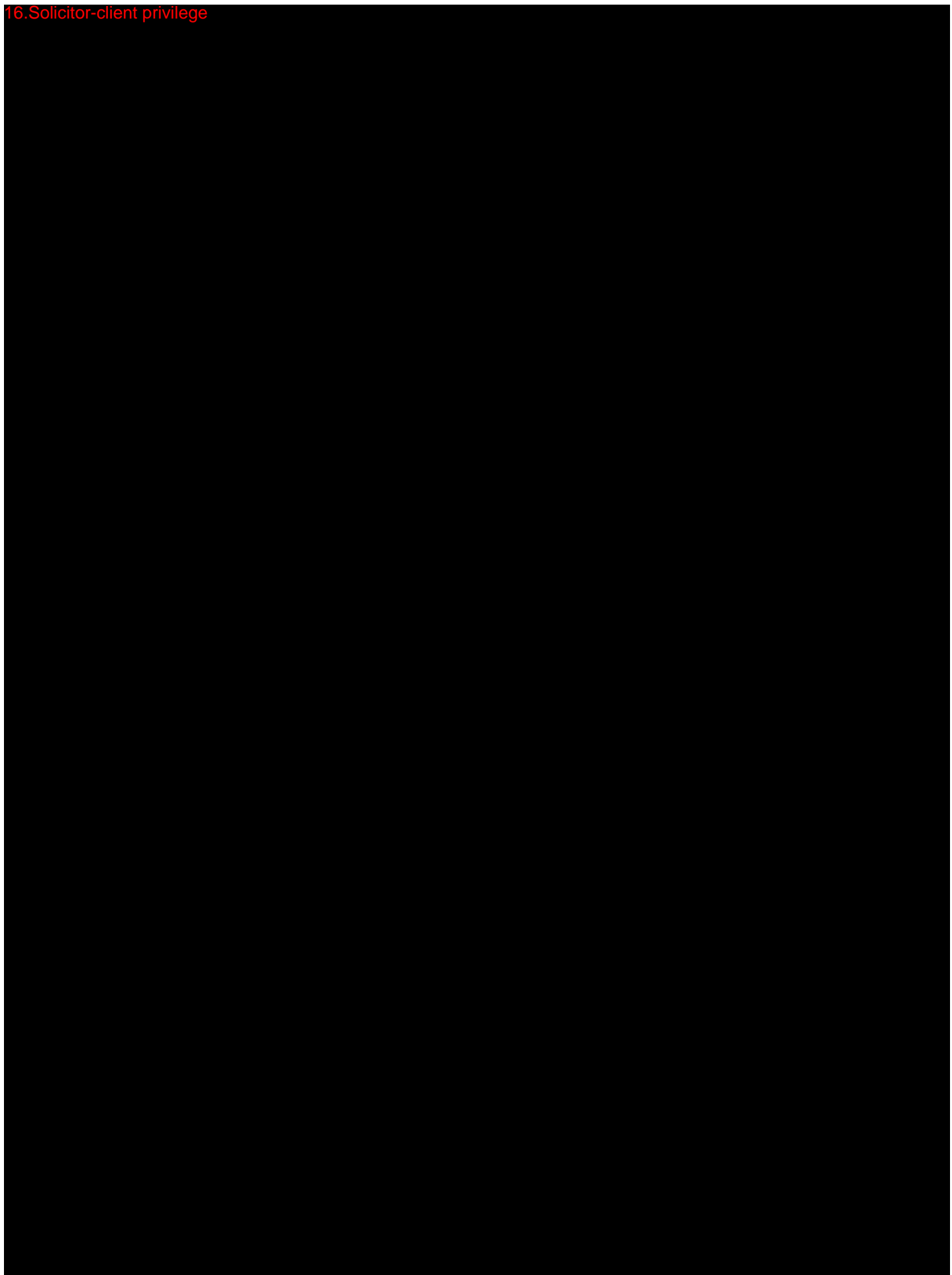
Can you confirm if you will review and offer final direction to EOC on next steps.

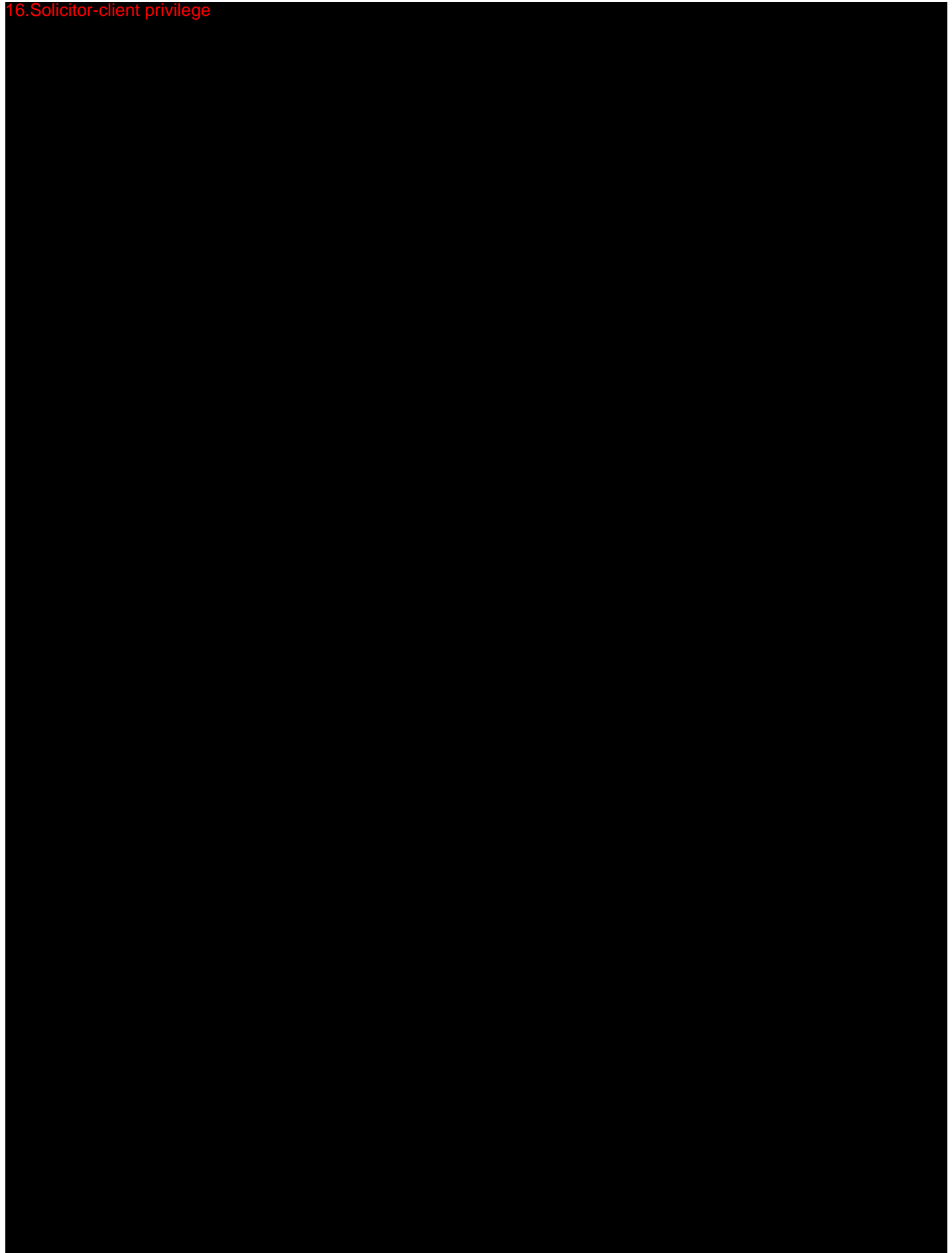
Bethany
NSHA EOC Manager

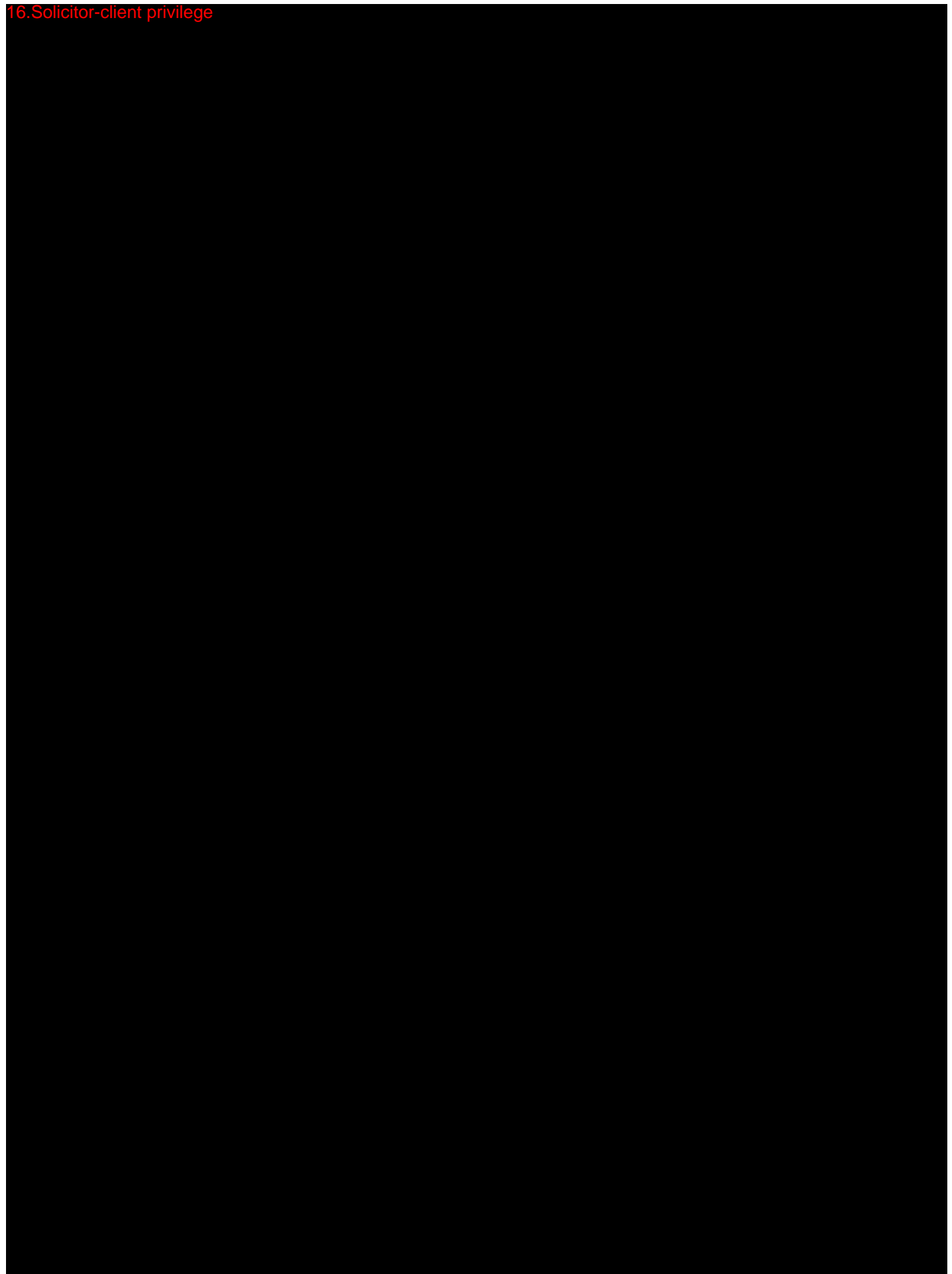
16.Solicitor-client privilege











From: [Stevenson, Colin](#)
To: [McCormick, Bethany](#)
Subject: FW: info re: Northwood Incident Management Team - CRITICAL
Date: Saturday, April 18, 2020 8:22:00 PM

In case you didn't get.

Colin Stevenson, BSc., MHA, CHE

Vice President – Health Services, Quality and System Performance

Nova Scotia Health Authority

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www.nsha.ca

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Marsham.bennett@nshealth.ca

From: McVeigh, Wendy

Sent: Saturday, April 18, 2020 7:43 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>

Subject: info re: Northwood Incident Management Team - CRITICAL

Northwoodcare Incorporated (NH and RCF)

Josie Ryan, Executive Director

2615 Northwood Terrace, Halifax, NS B3K 3S5

Switchboard: (902) 454-8311, Fax: (902) 455-6408

Admissions: (902) 454-3356

E-mail: [REDACTED] or [REDACTED]

No. of Nursing Home Beds - 445, Nursing Home Respite Beds - 0

No. of RCF Beds - 40, RCF Respite Beds - 0

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

I support inclusion

Office/Cell: [REDACTED]

Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 6:44 PM

To: Stevenson, Colin; Boutilier, Nicole; MacDonald, Madonna; Sullivan, Vickie; Stevens, Susan; Bond, Paula; Tomblin Murphy, Gail; Carr, Brendan; Howlett, Todd; McVeigh, Wendy; Alexiadis, Maria; McCormick, Bethany; LeBlanc, Angela; Grant, Krista L

Cc: Spinney, Derek

Subject: Northwood Incident Management Team - CRITICAL

When: Saturday, April 18, 2020 7:00 PM-7:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Conference Call

Importance: High

Out of scope

From: [Stevenson, Colin](#)
To: [Grant, Krista L](#); [Boutilier, Nicole](#); [MacDonald, Madonna](#); [Sullivan, Vickie](#); [Stevens, Susan](#); [Bond, Paula](#); [Tomblin Murphy, Gail](#); [Carr, Brendan](#); [Howlett, Todd](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [McCormick, Bethany](#); [LeBlanc, Angela](#)
Cc: [Spinney, Derek](#)
Subject: FW: Northwood Incident Management Team - CRITICAL
Importance: High

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

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 6:40 PM

To: Stevenson, Colin; Boutilier, Nicole; MacDonald, Madonna; Sullivan, Vickie; Stevens, Susan; Bond, Paula; Tomblin Murphy, Gail; Carr, Brendan; Howlett, Todd; McVeigh, Wendy; Alexiadis, Maria; McCormick, Bethany; LeBlanc, Angela

Cc: Spinney, Derek

Subject: Northwood Incident Management Team - CRITICAL

When: Saturday, April 18, 2020 7:00 PM-7:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Conference Call

Importance: High

Conference Number

Out of
scope

From: [Stevenson, Colin](#)
To: [Nemirovsky, Andrew](#)
Subject: FW: Northwood MOA - Physician Documentation
Date: Friday, May 1, 2020 1:23:00 PM

Andrew – see below. As noted below, they are doing consults as they would for any other NSHA patient; this really isn't the care in Northwood part.

Would not need to be in the MOA as this would be typical for care requirements and documentation.



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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Boutilier, Nicole
Sent: Friday, May 1, 2020 12:22 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Re: Northwood MOA - Physician Documentation

It makes sense to me that their offsite virtual contact would be recorded in the Telus system that was approved. I assume they can provide a copy to Northwood from their chart. The GIM team is an NSHA outreach into LTC etc
Nicole

Sent from my iPhone

On May 1, 2020, at 12:19 PM, Stevenson, Colin <Colin.Stevenson@nshealth.ca> wrote:

Nicole:

The clinical group with Northwood had indicated that they would use Northwoods patient information system for the purpose of documentation. We were not going to register these patients/residents as NSHA patients as the care is at Northwood, and we are augmenting with staffing.

Dr. Ashley Miller and Dr. Shetty – want to be able to document on the NSHA charts and not Northwood. As they indicate they are being asked to provide Medical Consult.

Want to get your perspective on this before responding.

.

<image001.jpg>

Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System
Performance
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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: [Stevenson, Colin](#)
To: [MacNeil, Tom](#); [MacDonald, Tammy](#); [Stone, Joanne](#)
Subject: FW: Northwood Update
Date: Wednesday, April 22, 2020 9:57:00 AM
Attachments: [Covid-19 Movement of Staff - Feedback.doc](#)

This is the document I saw recently – I believe this needs to be merged with the other movement of staff document so we have one that provides guidance on staff movement. If you could please bring them together.

Thanks



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
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www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Emergency Operations Center, NS Health Authority
Sent: Monday, April 20, 2020 9:32 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: FW: Northwood Update

Can you review this for People lens / perspective.

From: Piers, Geoff W
Sent: Monday, April 20, 2020 7:53 AM
To: MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>
Subject: RE: Northwood Update

Hi Tammy,

Thanks for drafting this document, my feedback is tracked in the attached.

It is my understanding that based on a formal request, this matter was being discussed yesterday amongst subject matter experts at a broad Nova Scotia sector/systems level. Is the content of this document consistent with what was discussed at the broad governmental level?

It is in the application of these guidelines where many questions may arise, such as:

- As a manager, how will I know if the employees that report to me are working elsewhere? Should I proactively query them to find out and take action accordingly?
- With significant numbers of employees being redeployed/deployed to areas with patients who are or may be COVID-19 positive, is there a restriction in their ability to return to their non-COVID-19 home areas after they have worked a shift(s) in these other areas? If so, what are these restrictions?

As Tom said, this is an evolving matter and one that is of significant importance.

Interested in your thoughts on my feedback and the questions noted above.

Thanks again,

Geoff

From: MacNeil, Tom

Sent: April 19, 2020 9:28 PM

To: MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Subject: RE: Northwood Update

Tammy, good on the OH side, it certainly is a moving target
tom

From: MacDonald, Tammy

Sent: Sunday, April 19, 2020 2:40 PM

To: Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Subject: RE: Northwood Update

Tracey, Geoff, Tom, Joanne: See attached draft document on Movement of Staff. Please review and provide your feedback especially in relation to LR and Occ Health perspectives.

Thanks

Tammy

16.Solicitor-client privilege



From: [McCormick, Bethany](#)
To: [Emergency Operations Center, NS Health Authority](#)
Cc: [Stevenson, Colin](#)
Subject: FW: NSHA and Northwood Joint Meeting - Situation Update
Date: Thursday, April 23, 2020 9:26:51 AM
Attachments: [Northwood COVID19 Situation Report - NSHA and NSHA - April 22 2020.pdf](#)

Colin,

This gives good insight and overview of where we are with Northwood.

BTW on Friday and thru weekend (if needed) I will lead Northwood calls 20. Personal information
[REDACTED]. Unless we designate someone from within CZ to do so.

From: LeBlanc, Angela
Sent: Thursday, April 23, 2020 8:33 AM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>;

Good morning all,

Please find attached the meeting notes from yesterday. Also, please note that the document now includes our ongoing Incident Event Board (pages 3-5 on the attached) to help track with actions and priorities. We will use the Incident Event Board during this morning's meeting. Please advise if any errors or omissions.

Many thanks,

Angela

NSHA and Northwood Joint Meeting

Chair: NSHA leader

Purpose: Situation Update meeting

Agenda:

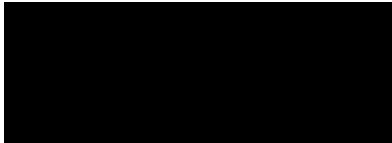
1. Medical
 - a. Care plans and goals of care
 - b. Analytics modelling, dashboard
 - c. Physician remuneration
2. Operations

- a. Clinical care
- b. Infection control
- 3. Communications
 - a. Overall strategy
 - b. FAQ
 - c. Connection with Families
- 4. Human Resources
 - a. Clinical Staff
 - b. Support Staff
- 5. Logistics (Supplies, PPE, Equipment, Finance)
- 6. Offsite Location
- 7. Care by Family Proposal
- 8. Additional risks/Open items

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From: [Stevenson, Colin](#)
To: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: NSHA and Northwood Joint Meeting - Situation Report
Date: Saturday, April 25, 2020 7:45:00 AM
Attachments: [Northwood COVID19 Situation Report - NSHA and NSHA - April 24 2020.pdf](#)



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
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Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Tate, Natalie
Sent: Friday, April 24, 2020 6:51 PM
To: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; [REDACTED] <[REDACTED]>
[REDACTED] <[REDACTED]> Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Clarke, Barry <Barry.Clarke@nshealth.ca>; 'jeannine.lagasse@novascotia.ca' <jeannine.lagasse@novascotia.ca>; Murphy, Matthew <Matthew.Murphy@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>; 'Elliott-Lopez, Vicki' <Vicki.Elliott-Lopez@novascotia.ca>; 'Purcell, Angela L' <Angela.Purcell@novascotia.ca>; 'Smith, Alexandra (Health)' <Alexandra.Smith@novascotia.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>; 'Cruickshank, Cindy J' <Cindy.Cruickshank@novascotia.ca>; [REDACTED] <[REDACTED]> MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; [REDACTED] <[REDACTED]> Howlett, Todd <Todd.Howlett@nshealth.ca>; Tschupruk, Cheryl <Cheryl.Tschupruk@nshealth.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>
Subject: NSHA and Northwood Joint Meeting - Situation Report

Good evening everyone

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Many thanks,

Natalie



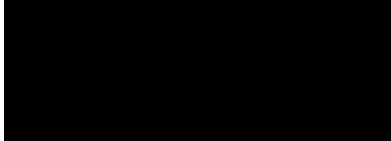
Natalie Tate

Assistant to Bethany McCormick
Senior Director, Strategy, Planning and Performance
Quality & System Performance
25 Bay Street
Antigonish, NS B2G 2G5
Office: 902-867-4500 ext 4718
www.nshealth.ca

16.Solicitor-client privilege



From: [Stevenson, Colin](#)
To: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: Public Health Inquiries - Testing Requirements / Northwood
Date: Wednesday, May 13, 2020 2:01:00 PM



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Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
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Executive Assistant:
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Marsham.bennett@nshealth.ca

From: Strang, Robert [mailto:Robert.Strang@novascotia.ca]
Sent: Wednesday, May 13, 2020 1:28 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Cc: Watson-Creed, Gaynor <Gaynor.Watson-Creed@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; Casey, Jill M <Jill.Casey@novascotia.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Barro, Kimberlee X <Kimberlee.Barro@novascotia.ca>
Subject: FW: Public Health Inquiries - Testing Requirements / Northwood

Thanks for your e-mail and I will try to address both of your concerns succinctly

- 1) When OCMOH engages senior clinical leads at NSHA our assumption has been that these individuals will connect back as necessary through the NSHA structures to make people aware, assess implications and seek approval. If this is not actually the case then I would suggest that there be an NSHA internal discussion to clarify the necessary processes. OCMOH cannot be having multiple discussions with NSHA on the same issue.
- 2) I am working with colleagues in DHW to provide a clear, written directive on all the details of the direction to have staff from outside organizations working at the Northwood Halifax campus be required to have a 14-day self-isolation period before returning to work in their home organization

Thanks,

Rob Strang

From: "Stevenson, Colin" <Colin.Stevenson@nshealth.ca>
Date: May 13, 2020 at 12:17:45 PM ADT
To: "Watson-Creed, Gaynor" <Gaynor.Watson-Creed@novascotia.ca>, 'C19TaskForce'

<C19TaskForce@novascotia.ca>, "Jonathan.Veale@novascotia.ca"
<Jonathan.Veale@novascotia.ca>, "'Chouinard, Vanessa P'"
<Vanessa.Chouinard@novascotia.ca>, "'Casey, Jill M'" <Jill.Casey@novascotia.ca>
Cc: "Bond, Paula" <Paula.Bond@nshealth.ca>, "MacDonald, Madonna"
<madonna.macdonald@nshealth.ca>, "Emergency Operations Center, NS Health
Authority" <nshaeoc@nshealth.ca>
Subject: Public Health Inquiries - Testing Requirements / Northwood

Dr. Watson-Creed:

There are a number of NSHA operational issues that we need greater clarity on to ensure that we are appropriately planning service delivery and COVID response. The information is critical to our ability to adjust our operations and ability to re-introduce services.

I am requesting your assistance in getting timely answers to the following:

Out of scope



2. Northwood / Staff Isolation Requirements – we received direction that “...any staff and physicians working at and/or deployed to on-site at Northwood must complete 14-days of self-isolation before returning back to work at an NSHA facility.” We have questions regarding this direction that will help to understand and manage the operational impact:
 1. Is the intent that the staff self-isolate or home-isolate:
 - a. Self-isolation (therefore at home and need to isolate from family)
 - b. Home Isolation – permitted to be around others at home.
 2. Does this apply to any individual regardless of the number of days worked at Northwood (1 day at Northwood results in 14 day isolation)? Examples:
 - i. Staff go to Northwood to complete bloodwork for patients, and then return to Q11 to complete their assignment.
 - ii. Infection control complete inspections.
 - iii. Interprofessional practice resources supporting on-site guidance/training
 - iv. Physicians that are providing on-site assistance/support.
 - v. Physicians/Management/other meeting on-site.
 3. Does this include all staff deployed to provide support (not specific to a COVID unit) – working on other resident floors (note that all COVID patients are not located in specific areas but there are some units more impacted)
 4. Does this only apply to Northwood or any location where there is an outbreak – other LTC; NSHA locations with COVID-positive patients?

Thank you in advance for your assistance with these issues. Both have substantive impact on NSHA resources and clarity is need to allow us to appropriately plan for current services and the re-introduction of services.

Going forward, could we also have a clinical/operational representative from NSHA included in these planning meetings and discussions? This will ensure that the ideas and strategies being considered are also informed by the operational impact within the system. We have requested that requests come through our established EOC email address so we can ensure that one of our VP's of Clinical Operations is able to participate.

Thank you in advance for your assistance.

Performance
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Executive Assistant:
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Marsham.bennett@nshealth.ca

From: [Stevenson, Colin](#)
To: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: update re swabbing: Northwood Incident Management Team - CRITICAL
Date: Saturday, April 18, 2020 8:23:00 PM

Colin Stevenson, BSc., MHA, CHE

Vice President – Health Services, Quality and System Performance

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Executive Assistant:

Marsha Bennett; (902) 491-5877

Marsham.bennett@nshealth.ca

From: McVeigh, Wendy

Sent: Saturday, April 18, 2020 8:22 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Cram, Jennifer <Jennifer.Cram@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>

Subject: update re swabbing: Northwood Incident Management Team - CRITICAL

Hello All,

I spoke with Dr. Jennifer Cram, MOH (included in this e-mail) and Ann Morgan, assigned Public Health Nurse. As of 1800 there are 80 positive COVID residents. There have been over 400 swabs completed with some residents being swabbed 2-3 times. Not all residents of NW have been swabbed. There remains some floors with no swabbing as no symptoms exist.

Dr. Cram does not believe swabbing is required tonight. She is meeting with Dr. Strang and the other MOH at 0830 and will have further direction post this call. Dr. Cram you may have additional details to share.

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

I support inclusion

Office/Cell:



Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 6:44 PM

To: Stevenson, Colin; Boutilier, Nicole; MacDonald, Madonna; Sullivan, Vickie; Stevens, Susan; Bond, Paula; Tomblin Murphy, Gail; Carr, Brendan; Howlett, Todd; McVeigh, Wendy; Alexiadis, Maria; McCormick, Bethany; LeBlanc, Angela; Grant, Krista L

Cc: Spinney, Derek

Subject: Northwood Incident Management Team - CRITICAL

When: Saturday, April 18, 2020 7:00 PM-7:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Conference Call

Importance: High

Conference Number

Out of scope

From: [Stone, Joanne](#)
To: [alexandra.smith@novascotia.ca](#); [rollie.king@novascotia.ca](#)
Cc: [Grant, Krista L](#); [Stevenson, Colin](#); [Hawkesworth, Theresa](#)
Subject: Fwd: Response to questions about new unit at Northwood
Date: Wednesday, April 22, 2020 2:35:46 PM
Attachments: [image.png](#)

Response to nsgeu

Sent from my iPhone

Begin forwarded message:

From: "Piers, Geoff W" <Geoff.Piers@nshealth.ca>
Date: April 22, 2020 at 1:52:43 PM ADT
To: "Stone, Joanne" <joanne.stone@nshealth.ca>
Subject: FW: Response to questions about new unit at Northwood

FYI

From: Ungar, Tracey
Sent: April 21, 2020 5:13 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>
Cc: Piers, Geoff W <Geoff.Piers@nshealth.ca>; O'Handley, Jennifer <Jennifer.OHandley@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>
Subject: Response to questions about new unit at Northwood

Hi All

Please see our response below. This was a group effort and is longer than a high level summary but reflects activity to date.

For the record, the union did share with me that the staff on the moved unit appreciate the support that they are receiving from Josh.

Tracey

From: Ungar, Tracey
Sent: Tuesday, April 21, 2020 5:09 PM
To: 'Jason MacLean' <[REDACTED]>
Cc: Trish MacDonald <[REDACTED]>
Subject: RE: Action needed ASAP at Northwood.

Hi Jason and Trish

Please see our responses below.

In the initial 24 hours of relocating staff from 8.4 to Northwood (NW), in accordance with the Ministerial Directive, there has been a tremendous amount of work accomplished. NSHA employees are currently providing care to residents on two units as follows:

- 11 Manor; 11th floor unit with a capacity of 16 and an occupancy of 12
- 1 Centre; 1st floor unit with a capacity of 22-23 beds and is fully occupied

In an effort to provide you with an overview of actions taken to date, we can summarize as follows:

Staffing/Management/HR:

- <!--[endif]-->Health Services Manager is on site and has shared his contact information with employees if needed during evenings and/or overnight
- <!--[endif]-->Both units have Charge Nurse assigned, based on a long week/short week rotation and work will continue around defining roles on the unit. There will not be an additional short assignment added.
- <!--[endif]-->Additional support is available from the NW Facility Supervisor, IPAC, Professional Practice, etc
- <!--[endif]-->The unit aide from 8.4 has been relocated to NW and clerical support will be there as of tomorrow
- <!--[endif]-->There is space available for staff to enjoy rest breaks
- <!--[endif]-->NW has offered accommodations and meals
- <!--[endif]-->Getting process in place to ensure staff have access to the COVID hub for reference and information
- <!--[endif]-->Setting up charting process, interim measures have been put in place while we arrange for access to electronic system
- <!--[endif]-->There is no provision for 'danger pay' within the collective agreement

IPAC/OHSW Issues:

- <!--[endif]-->Ongoing efforts to ensure appropriate level of PPE remain available
- <!--[endif]-->Designated space available for safe donning and doffing.

<!--[if !supportLists]-->• <!--[endif]-->PPE stock is being maintained for easy access by staff and inaccessible by residents

<!--[if !supportLists]-->• <!--[endif]-->Now have adequate supply of sanitizer

<!--[if !supportLists]-->• <!--[endif]-->NW uses a microfiber system for cleaning; this is different than NSHA employees are used to but in compliance with facility standard

<!--[if !supportLists]-->• <!--[endif]-->IPAC team working with Northwood staff to review PPE best practices

<!--[if !supportLists]-->• <!--[endif]-->IPAC signage will be used as reminders for staff

<!--[if !supportLists]-->• <!--[endif]-->Employees will continue to be swabbed in compliance IPAC and OHWS protocols

Practice Issues:

<!--[if !supportLists]-->• <!--[endif]-->Second CNE reassigned so support can be provided to each unit Work being done with the NW Educator to develop orientation that will be used for staff coming to facility for the first time

<!--[if !supportLists]-->• <!--[endif]-->NW and NSHA are working together to ensure all on same page with provision of care

<!--[if !supportLists]-->• <!--[endif]-->Wrist bands will be used for residents who are not in private rooms (where they can be easily identified) or when a resident is identified as needing one (ie. if resident wanders)

We are working to support employees, recognizing that this new work environment is quite different than what they are used to at the Halifax Infirmary. As employees have questions and concerns, they should raise any issue directly with their HSM so that it can be addressed in a timely manner.

Given our joint goal is to support Northwood in the provision of safe care in their response to COVID19, we recommend that a regular meeting be arranged in order to discuss questions or concerns that have not been able to be resolved directly with the HSM. It is important to remember and acknowledge that we are all doing our best to support safe quality care in a constantly changing environment during this pandemic crisis.

Tracey

Tracey Ungar, CPHR
People Services Director Employee and Labour

NSHA_colour_logo.jpg



Relations and Northern Zone Operations
Colchester East Hants Health Centre
600 Abenaki Road
Truro, NS B2N 5A1
Office: 902-893-5554 ext 42134
Cell: [REDACTED]
www.nshealth.ca

From: Jason MacLean [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Monday, April 20, 2020 3:47 PM
To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>; [REDACTED] King,
Rollie B <Rollie.King@novascotia.ca>; Robert.Strang@novascotia.ca
Cc: Robin MacLean <[REDACTED]> Jo-Ann Bailey <[REDACTED]> Lynette
Johnson <[REDACTED]> Trish MacDonald <[REDACTED]>
Subject: Action needed ASAP at Northwood.

This information is what we've obtained from our members as reported to us by our ERO Trish MacDonald. I would appreciate a response to this today. Please acknowledge receipt of this.

We are conducting two calls this evening with both shifts going on and coming of the floors at Northwood. These workers need protection.

Here is what needs to be in place at NW:

1. You need strong nurses in be in Charge. They have their present CN Michelle, she needs to continue in her role. In addition, another RN there is Rowena, she needs to be one as well.
2. Andrea Jenkins is a casual RN with over 20 years of nursing I believe. I have spoken to her and she is willing to work in a short assignment and also be in a charge role. **She will work Monday-Friday or shift work but no nights. So either have here in charge are use her as the Resource Nurse who can go to the different units and help nurses who have questions or issues and help problem solve,**
3. These nurses will get things organised , as I don't know how many units there are, but they need to get armbands on the patients so they can identify them, determine who is a CODE and who is not. They have no kardexes with patient information, these are documents that give quick detail about patients and what their needs are for care and deficits and if they require full or partial care. They will schedule proper breaks for the nurses on the day shifts. There should

also be a designed nurse charge on each unit for the night shifts, just like their unit if working at NSHA.

4. These Charge Nurses can look after staffing and ensuring the model of care they require and staff according with the NW workers that are there and keep the flow of care and update families with questions and concerns. This is lacking greatly, family are not being kept informed.
5. They need to have an educator on site with them , as well as an Infection Control there on a regular basis until things are set up and staff are NW staff are educated and following NSHA infection control protocols. After that they should be at least on site daily to assist and answer questions. If they are off site they need to be accessible by pager to the staff.
6. The staff need to have a contact person on nights in case there are issues and it be on every unit telling them who they are to contact. For instance will his be the Bed Manager at the HI site or the manager on Call with NSHA, contacted through Locating.
7. They need our housekeepers on site, as it seems like the place needs a complete overhaul. There needs to be deep cleaning done initially and then cleaning coming through several times a day on each unit and restocking wipes, doing another clean and getting rid of the biohazard wastes of the PPES on a regular basis.
8. Does each unit have a ward clerk, if not this is something to consider for a least a clerk for two units, as they will need help.
9. They need to have the proper PPEs at all time. I have suggested that they be wearing N95 masks covered with a surgical mask, the surgical can be discarded and they could wear the N95 for the day, as the surgical mask will protect the N95. Then need to ensure they have face shields, as there is lots of coughing going on.
10. Each unit needs to have a clean space that they can change into clean PPEs each shift and a dirty space to get out of these clothes. They also need to get cotton scrubs , as they have provided them with polyester and they are too hot to work in and ensure that they are available.
11. They also need a designated clean space to chart, and it needs to maintain clean, as this was not being followed. No one is to be in that area with dirty PPEs on.
12. The patients that are on the dementia floor need to be kept in their rooms, not running around the unit and touching the PPEs that nursing and other HC workers will be using
13. They will need sitters for some of the dementia patients or are they planning on using their CCAs to sit with these patients
14. Hotel accommodations, as they don't want to go home to their families
15. A list of casuals that are willing to work there, knowing that once they work there, they should not be working back in acute care. It will be too risky for them to come back to acute.

Jason MacLean

President

NSGEU

255 John Savage Ave

Dartmouth, Nova Scotia B3B 0J3



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nsgeu.ca



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From: [Stevenson, Colin](#)
To: [Rawding, Patsy A](#)
Cc: [MacDonald, Tammy](#)
Subject: IPAC on Northwood - URGENT
Date: Saturday, April 18, 2020 7:36:00 PM
Importance: High

Patsy:

We are stepping in in a larger way to support Northwood starting tomorrow. We have team members going on site at around 0900. Would you be able to join that team tomorrow to assess need and how we can support?

Colin



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Executive Assistant:
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Marsham.bennett@nshealth.ca

From: [Stone, Joanne](#)
To: [Ungar, Tracey](#); [MacNeil, Tom](#); [Read, Carolin](#); [Piers, Geoff W](#); [Nickerson, Anita](#); [Johnson, Andrea](#); [Grant, Krista L](#); [alexandra.smith@novascotia.ca](#); [Stevenson, Colin](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#)
Subject: MEDIA RELEASE: Immediate Action Required to Protect Seniors & Workers at Northwood Manor – NSGEU
Date: Wednesday, April 22, 2020 1:51:55 PM

<https://nsgeu.ca/media-releases/media-release-immediate-action-required-to-protect-seniors-workers-at-northwood-manor/21550/>

Sent from my iPhone

From: [Microsoft Outlook](#) on behalf of [Stevenson, Colin](#)
To: [Stevenson, Colin](#)
Subject: Meeting Forward Notification: Northwood Incident Management Team - CRITICAL

Your meeting was forwarded

Stevenson, Colin <<mailto:Colin.Stevenson@nshealth.ca>> has forwarded your meeting request to additional recipients.

Meeting
Northwood Incident Management Team - CRITICAL

Meeting Time
Saturday, April 18, 2020 7:00 PM-7:30 PM.

Recipients
Grant, Krista L <<mailto:KristaL.Grant@nshealth.ca>>

All times listed are in the following time zone: (UTC-04:00) Atlantic Time (Canada)

Sent by Microsoft Exchange Server 2010

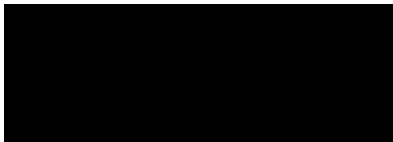
16. Solicitor-client privilege



From: [Stevenson, Colin](#)
To: [Ciccarelli, Pam](#)
Subject: MOA - NOrthwood
Date: Tuesday, May 5, 2020 9:19:00 AM
Attachments: [MOA with Northwood May 5, 2020 - Final.doc](#)

Can you please print for Brendan's signature. Will then need scanned and sent back to me; I'll forward to Northwood.

Thanks



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Marsham.bennett@nshealth.ca

From: [Stevenson, Colin](#)
To: ["Janet Simm"](#)
Cc: [Emergency Operations Center, NS Health Authority](#)
Subject: MOA - NSHA/Northwood
Date: Wednesday, May 6, 2020 8:43:00 AM
Attachments: [MOA - Northwood and NSHA.pdf](#)

Dear Janet:

Please find attached the revised MOA to reflect the changes requested through Northwood and DHW. This copy has been signed by Brendan Carr. If you are in agreement with the MOA as updated please sign, scan and return a copy to me.

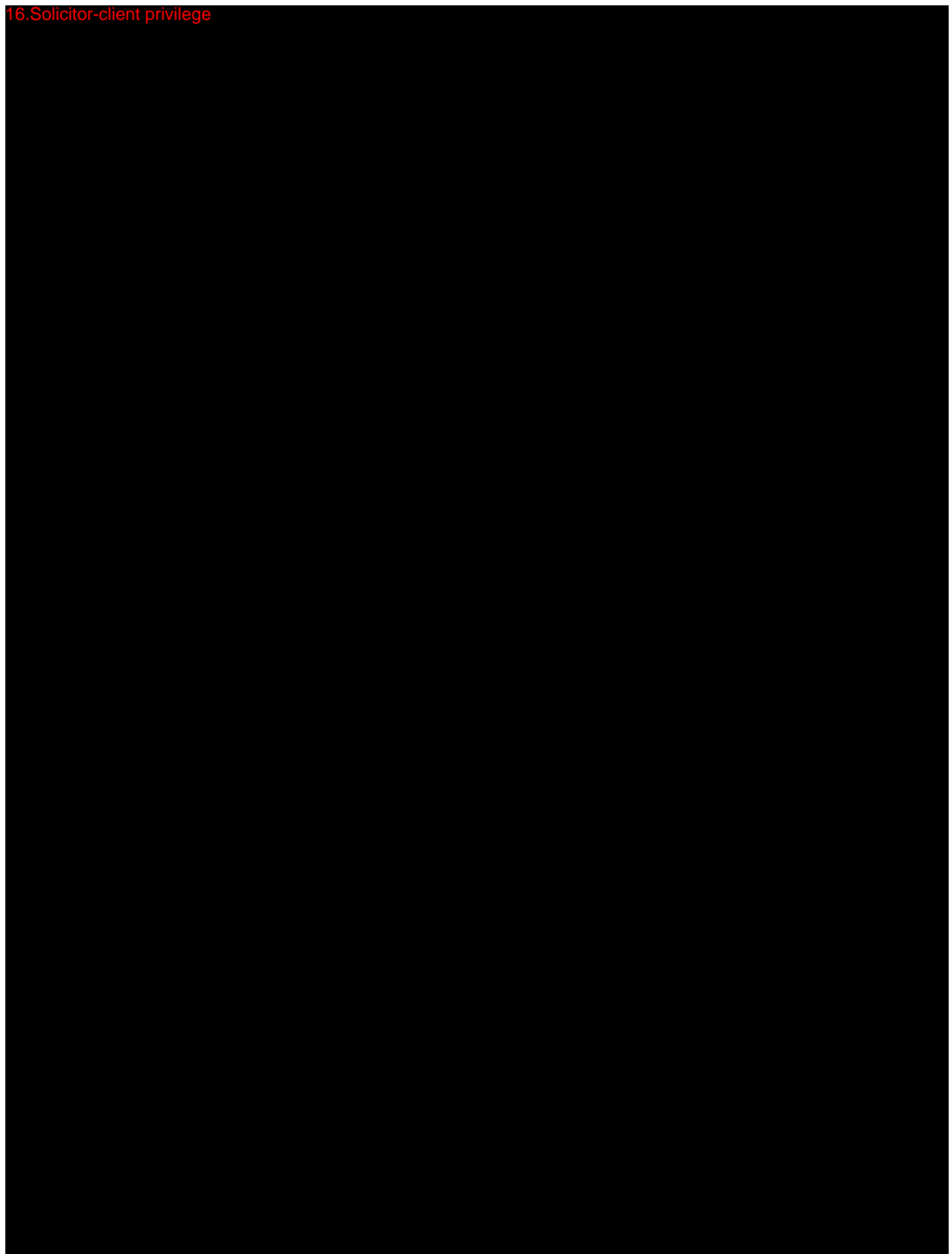
Thanks in advance.

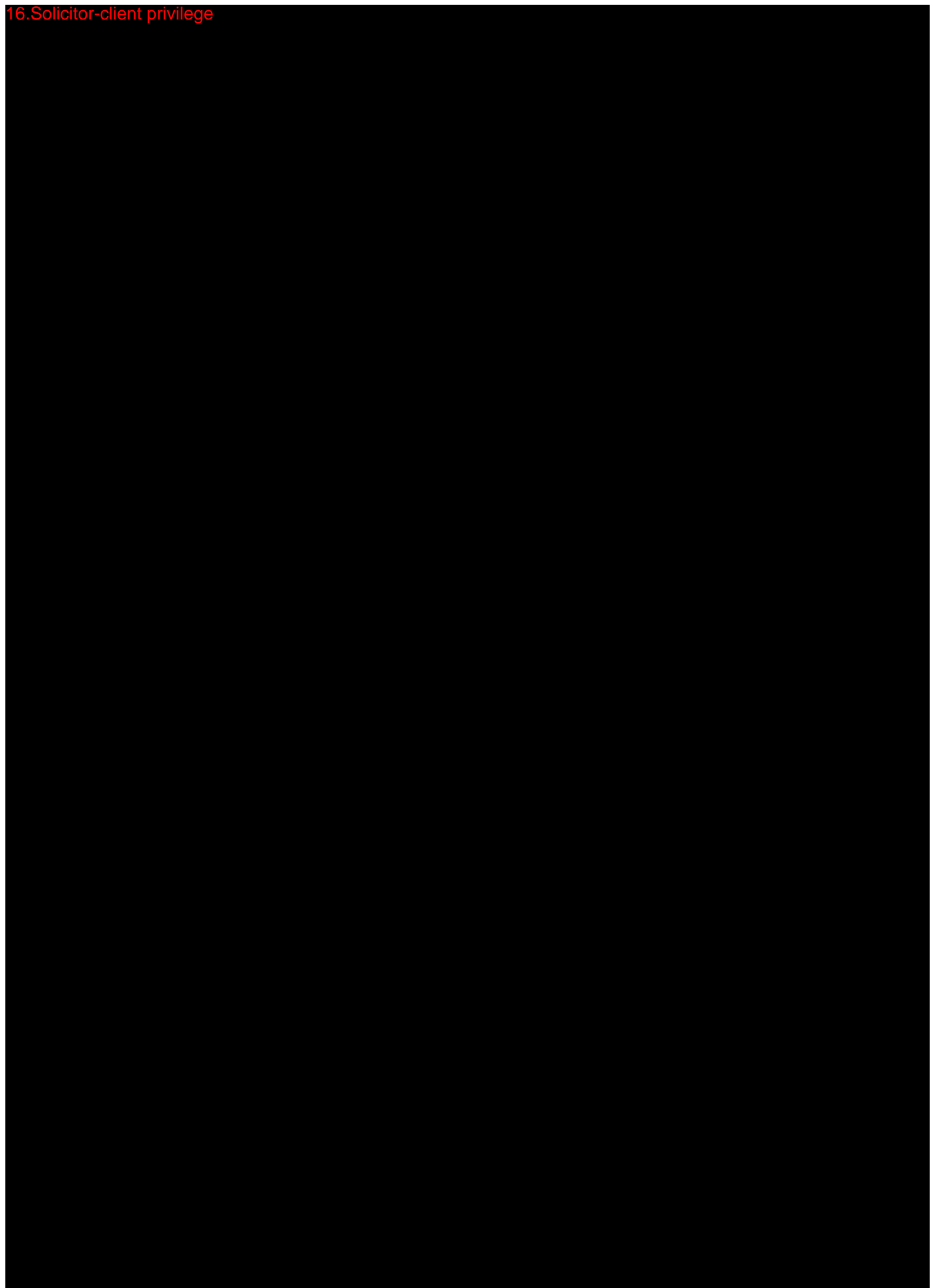
Colin



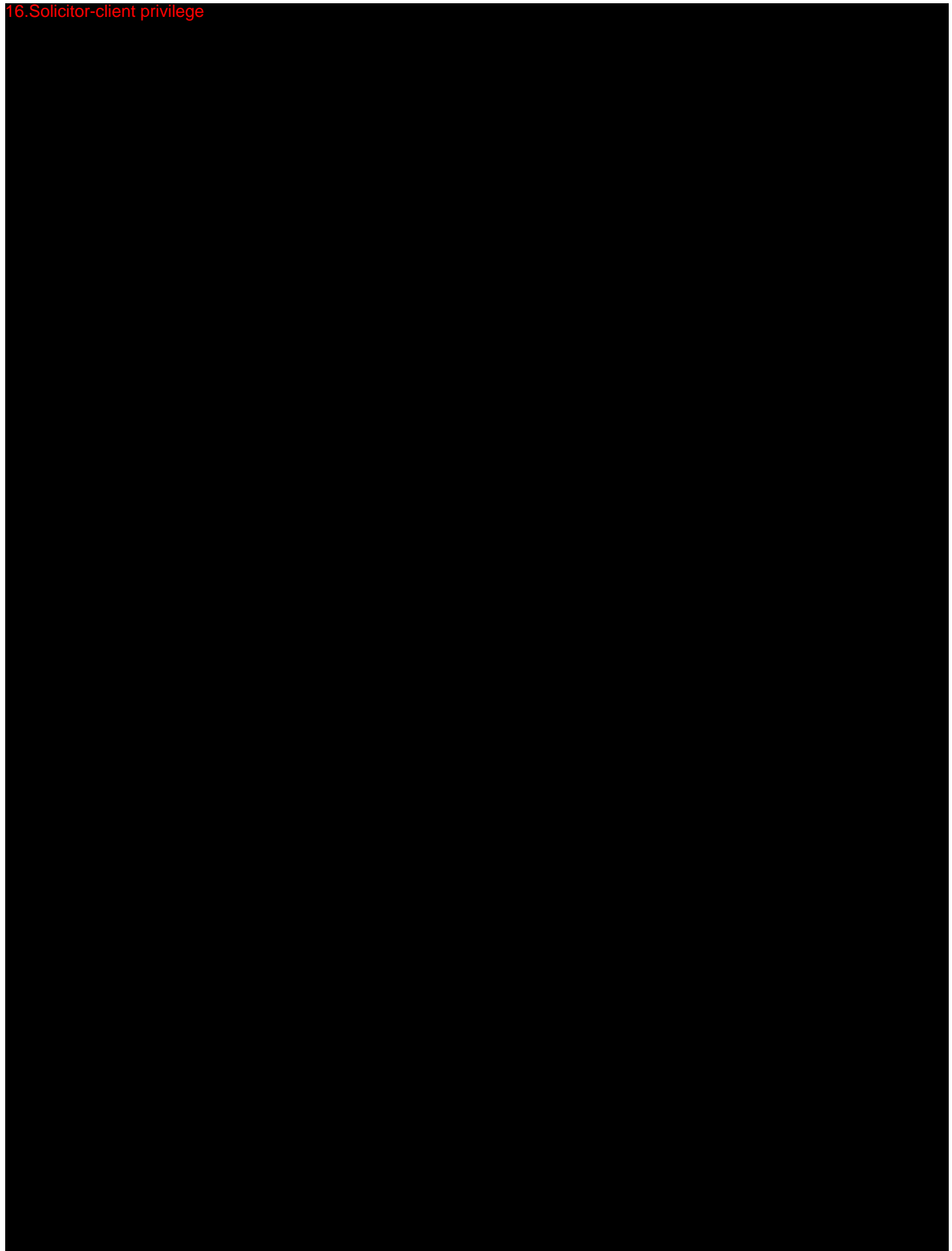
Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
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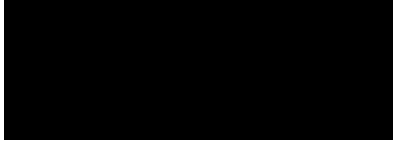






From: [Stevenson, Colin](#)
To: [Stevens, Susan](#)
Subject: RE: COVID-19 clients/staff issues from VON, Northwood and CRC
Date: Sunday, April 5, 2020 4:17:00 PM

Yes. James Broesch is covering for him today – was on call.



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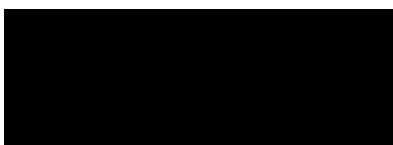
From: Stevens, Susan
Sent: Sunday, April 5, 2020 4:15 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: RE: COVID-19 clients/staff issues from VON, Northwood and CRC

Have reached out to Gary by text and cell. Thinking him or his designate should join us rather than calling MOH on call – what do you think?

From: Stevenson, Colin
Sent: Sunday, April 5, 2020 4:09 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaec@nshealth.ca>
Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; O'Toole, Gary <Gary.OToole@nshealth.ca>
Subject: RE: COVID-19 clients/staff issues from VON, Northwood and CRC

Susan – please include me in invite if you would like someone from EOC to join.

Thanks



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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Stevens, Susan
Sent: Sunday, April 5, 2020 3:05 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; O'Toole, Gary <Gary.OToole@nshealth.ca>
Subject: FW: COVID-19 clients/staff issues from VON, Northwood and CRC
Importance: High

Please see correspondence below – Tammy and Gary will need someone from your teams on a call we hope to have later tonight. We have 5 home care agencies in COVID situations and more being added as I write this email. We are experiencing challenges with PH notification and ensuring they are asking clients/families about other agencies providing services in the home. We are also getting conflicting IPAC and PH advice at times between our team and DHW team. I will send you the appointment when it comes through later.

Colin any update on the legal opinion I requested?

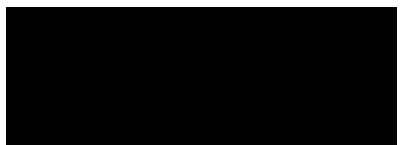
From: Stevens, Susan
Sent: Sunday, April 5, 2020 3:00 PM
To: 'Christina Baert-Wilson' <[REDACTED]> Langille, Paula D <Paula.Langille@novascotia.ca>
Cc: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Densmore, Jeff <[REDACTED]> Janet Simm <[REDACTED]>
Subject: RE: COVID-19 clients/staff issues from VON, Northwood and CRC
Importance: High

Hi Chris, Jeff and Janet

Thank you for bringing forward your concerns. I agree we should meet today. Paula can you convene a meeting later today? Please include my directors and me. I will reach out to our IPAC and Public Health teams to have representatives join us. I will after this email share the email below with our EOC and Executive. I agree we need to do everything we can collectively to ensure all health care workers are safe.

Thanks

Susan



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929

From: [McCormick, Bethany](#)
To: ["Knowles, Ruby M"; LeBlanc, Angela](#)
Cc: [Murphy, Matthew](#); [Stevenson, Colin](#)
Subject: RE: dashboard?
Date: Thursday, April 23, 2020 9:23:53 AM

Ruby

The dashboard that is being designed to Northwood is clinical decision support tool, it contains individual names, status and vitals, it is intended for clinical use and is very draft. This is not a system planning, or operational dashboard, but rather only for medical staff and clinicians. Matt is working with the vendor to continue its development, and it will be available within Northwood. Given the PHI within the system, it should be available to the Northwood Medical Director, Barry Clarke and his team.

If further discussion on this item is needed please let us know. A conversation about sharing this would need to include the Northwood administration, Medical Director, NSHA Performance and Analytics Senior Director (Matt) and Privacy.

Bethany

From: Knowles, Ruby M [mailto:Ruby.Knowles@novascotia.ca]
Sent: Thursday, April 23, 2020 8:52 AM
To: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Subject: dashboard?

Hi Angela or Bethany, Matt has made reference to a Dashboard a couple of times; I checked in with Christine Grimm and she is unaware. Could you send me the draft document?

Ruby

From: [Stevens, Susan](#)
To: [Bond, Paula](#); [Carr, Brendan](#); [MacDonald, Madonna](#)
Cc: [Emergency Operations Center, NS Health Authority](#); [Sullivan, Vickie](#); [Stevenson, Colin](#)
Subject: RE: DHW CC Division Request for Assistance ASAP
Date: Friday, April 17, 2020 11:24:57 AM

We met last night and discussed an number of scenarios and options. We obtained additional information from Northwood. We understand there is a meeting between Northwood and DHW today. We expressed interest in being part of that meeting. I believe Madonna received a commitment from DHW to involve us but I have not received a meeting invite.

Northwood is facing a critical staffing shortage today and for the weekend. I will speak to this in my EOC update this morning.

Susan

From: Bond, Paula
Sent: Friday, April 17, 2020 9:38 AM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: DHW CC Division Request for Assistance ASAP

I agree Vickie and Susan should help come up with a recommendation

From: Carr, Brendan
Sent: Thursday, April 16, 2020 7:09 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: DHW CC Division Request for Assistance ASAP

Thank you Madonna, I support and defer to Vickie and Susan.
Brendan

Sent from my iPhone

On Apr 16, 2020, at 6:50 PM, MacDonald, Madonna <madonna.macdonald@nshealth.ca> wrote:

Just off phone with Vicki Elliott Lopez who with Rob Strang has been given a task of Northwood containment planning.

They want to create a division of residents and are asking if we have space anywhere I.e. camp hill vets to cohort residents who have turned negative post

illness.

I am calling Vickie re number of available beds but want to be sure you are all aware of discussion and provide advice / input prior to me responding.

Madonna MacDonald

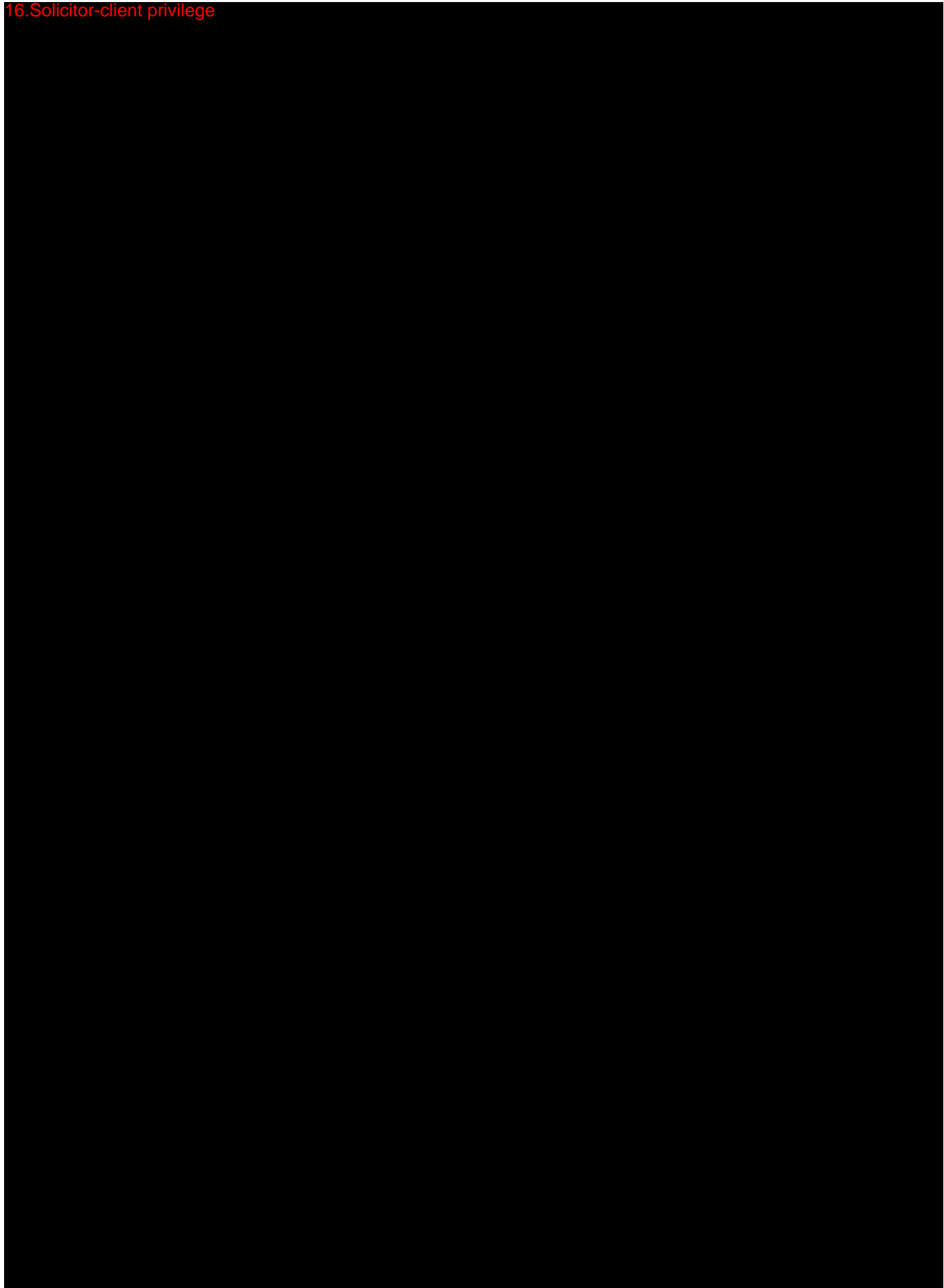
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Out of scope

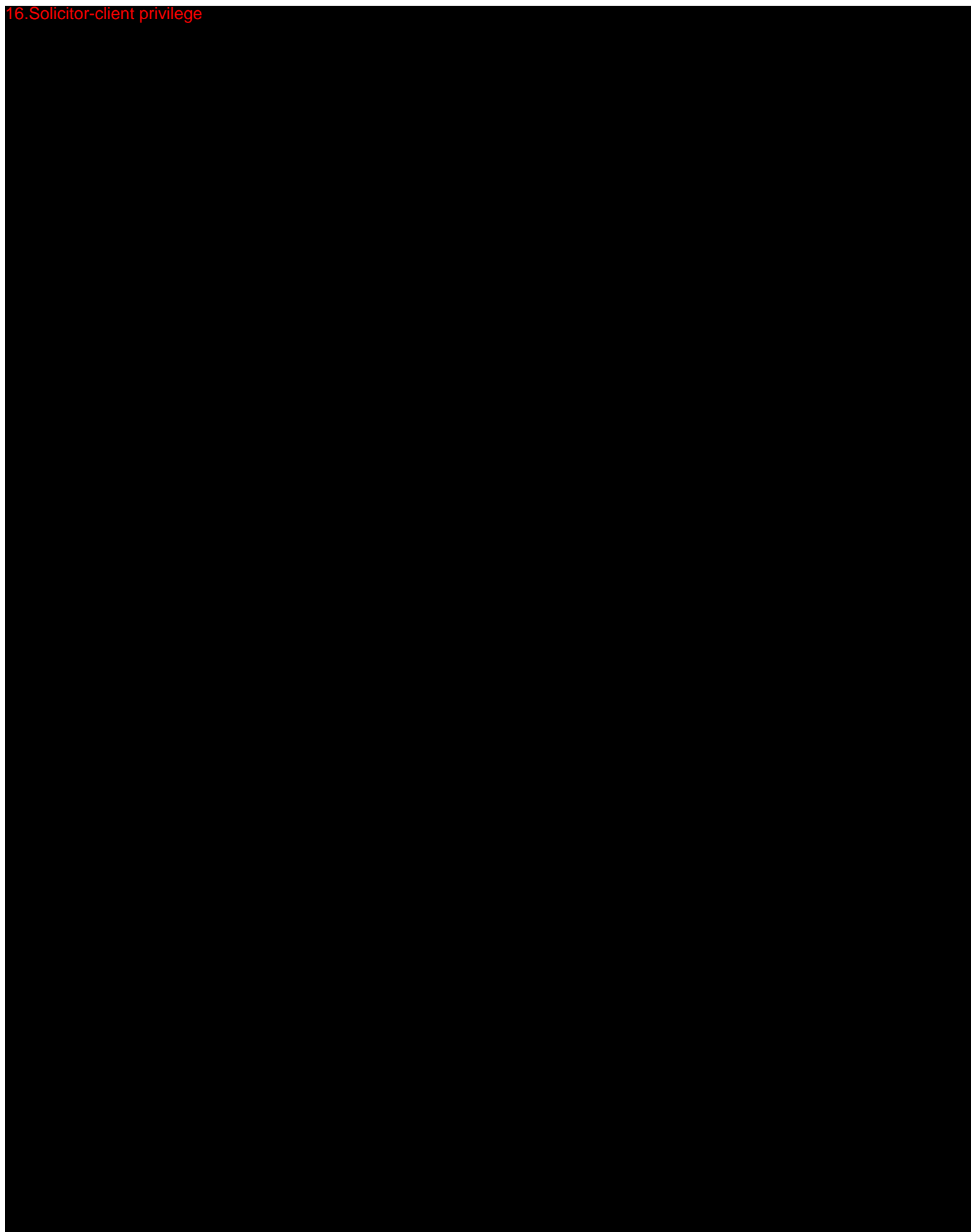
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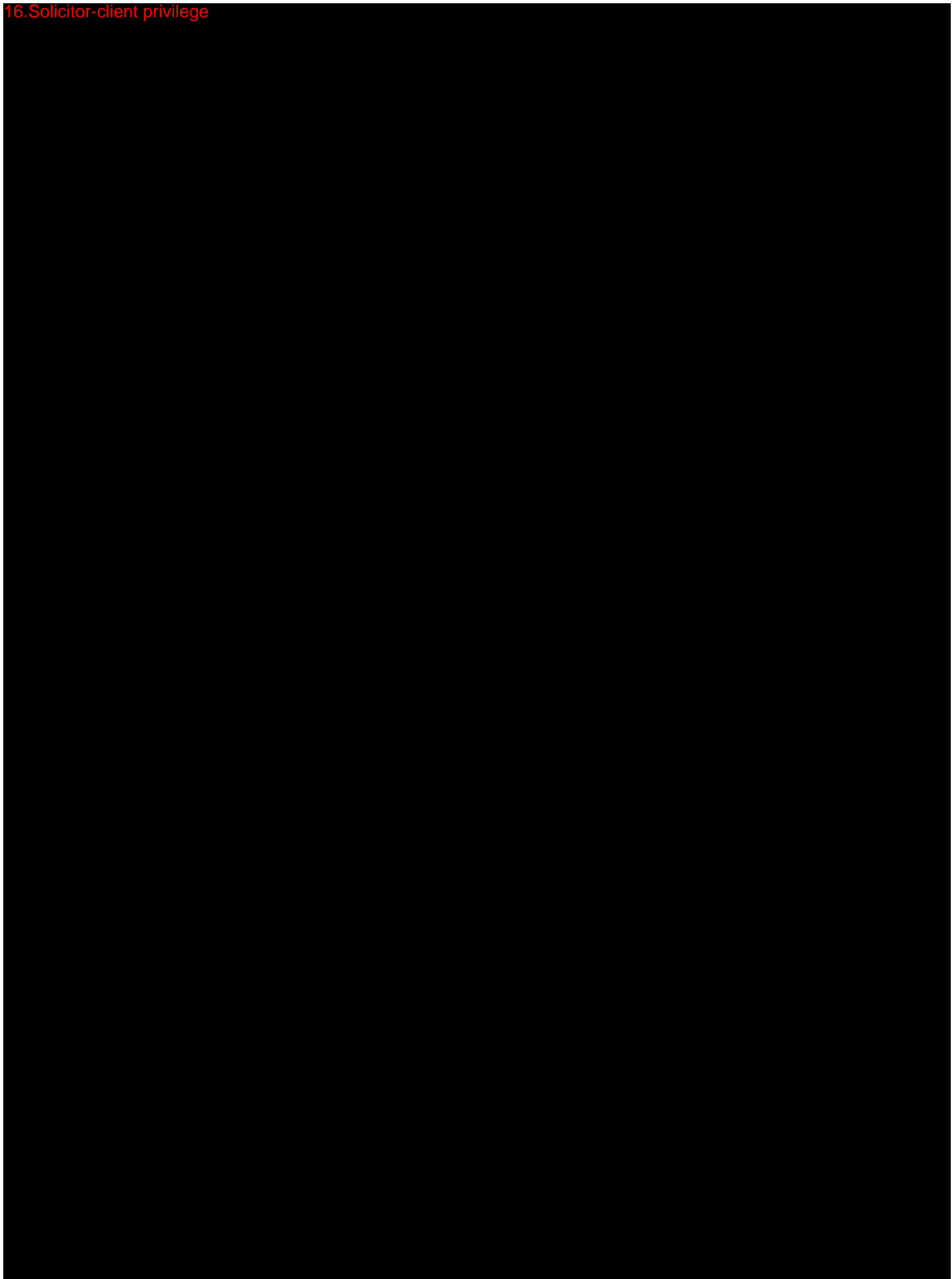


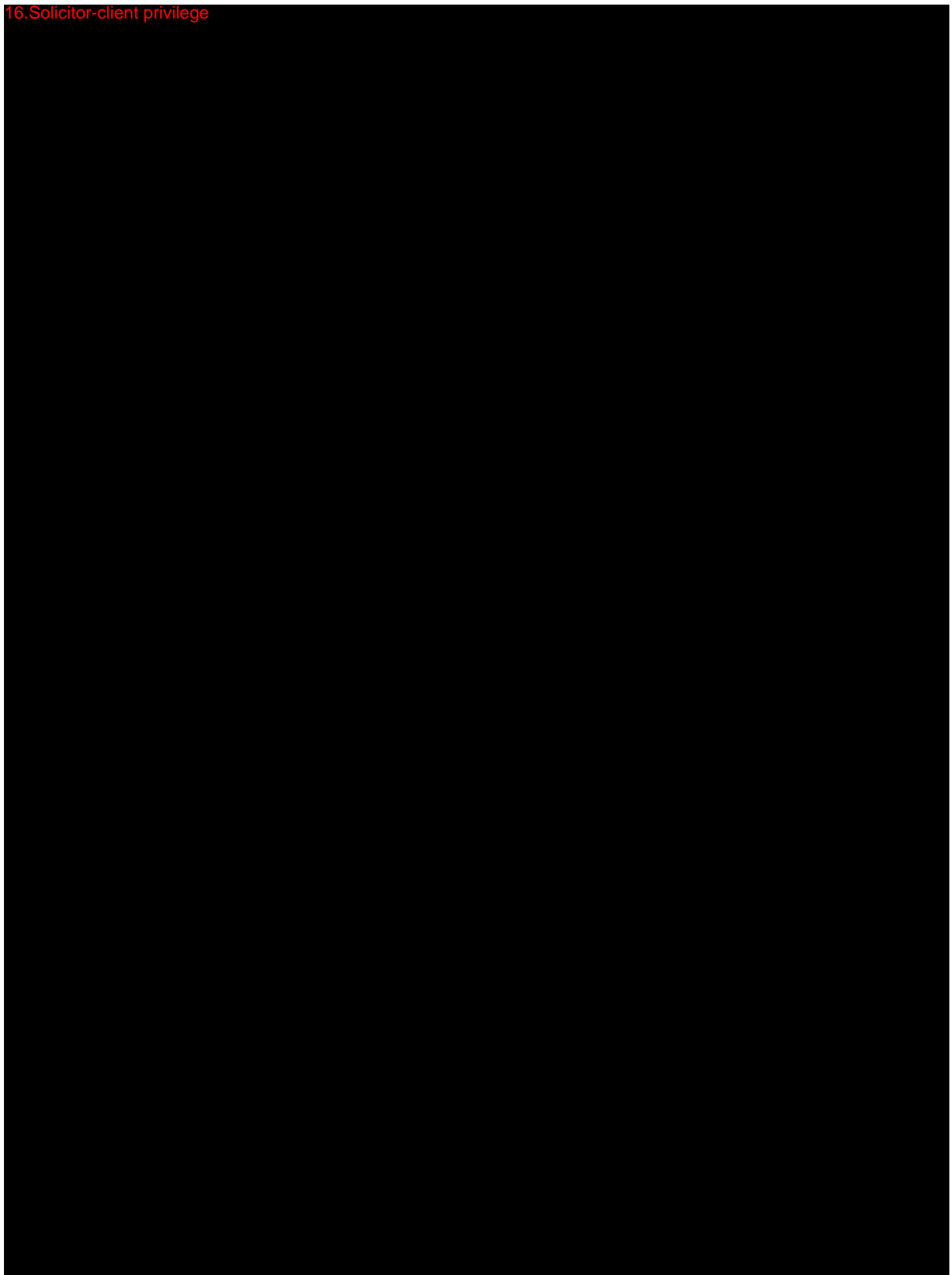


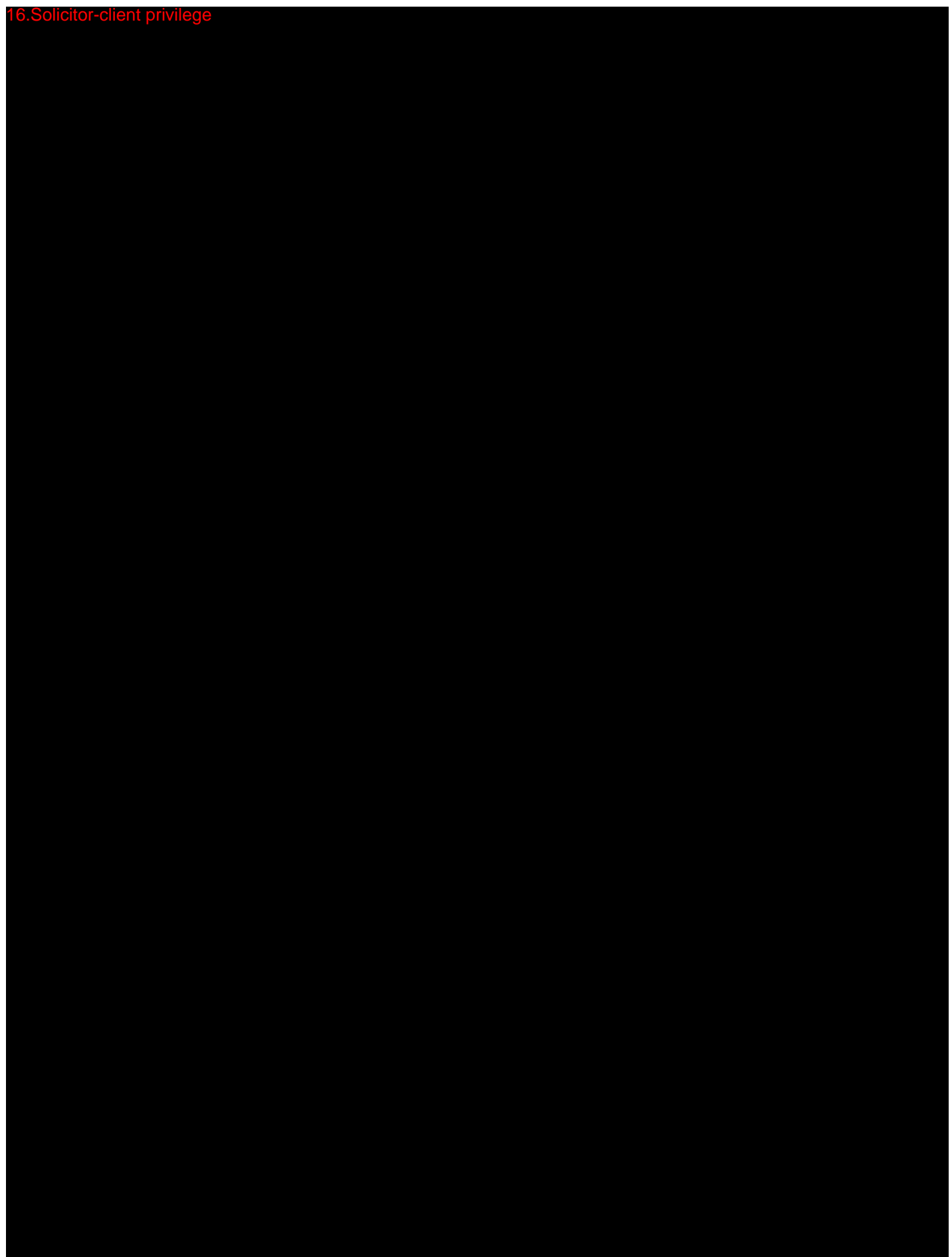
16.Solicitor-client privilege

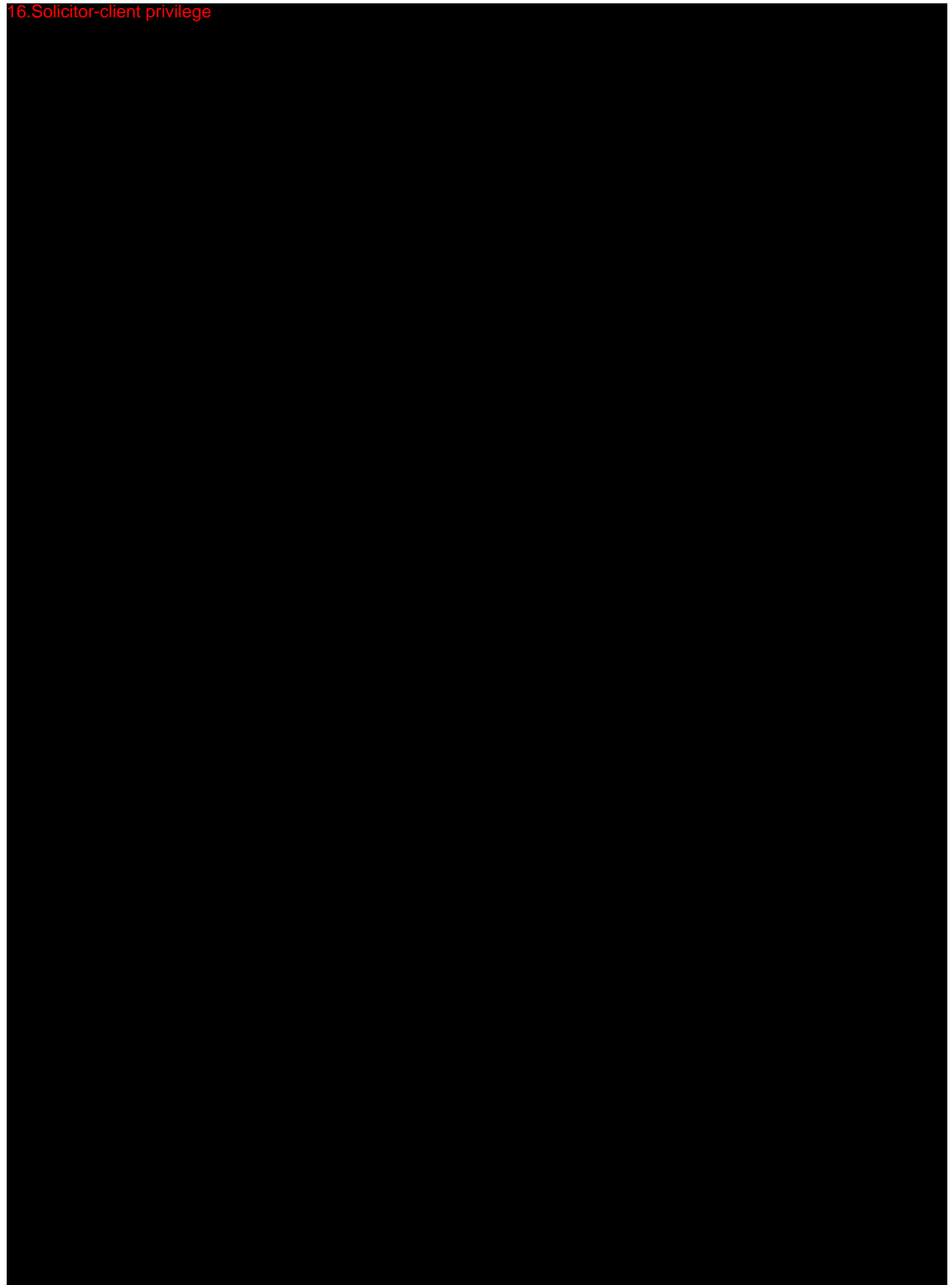


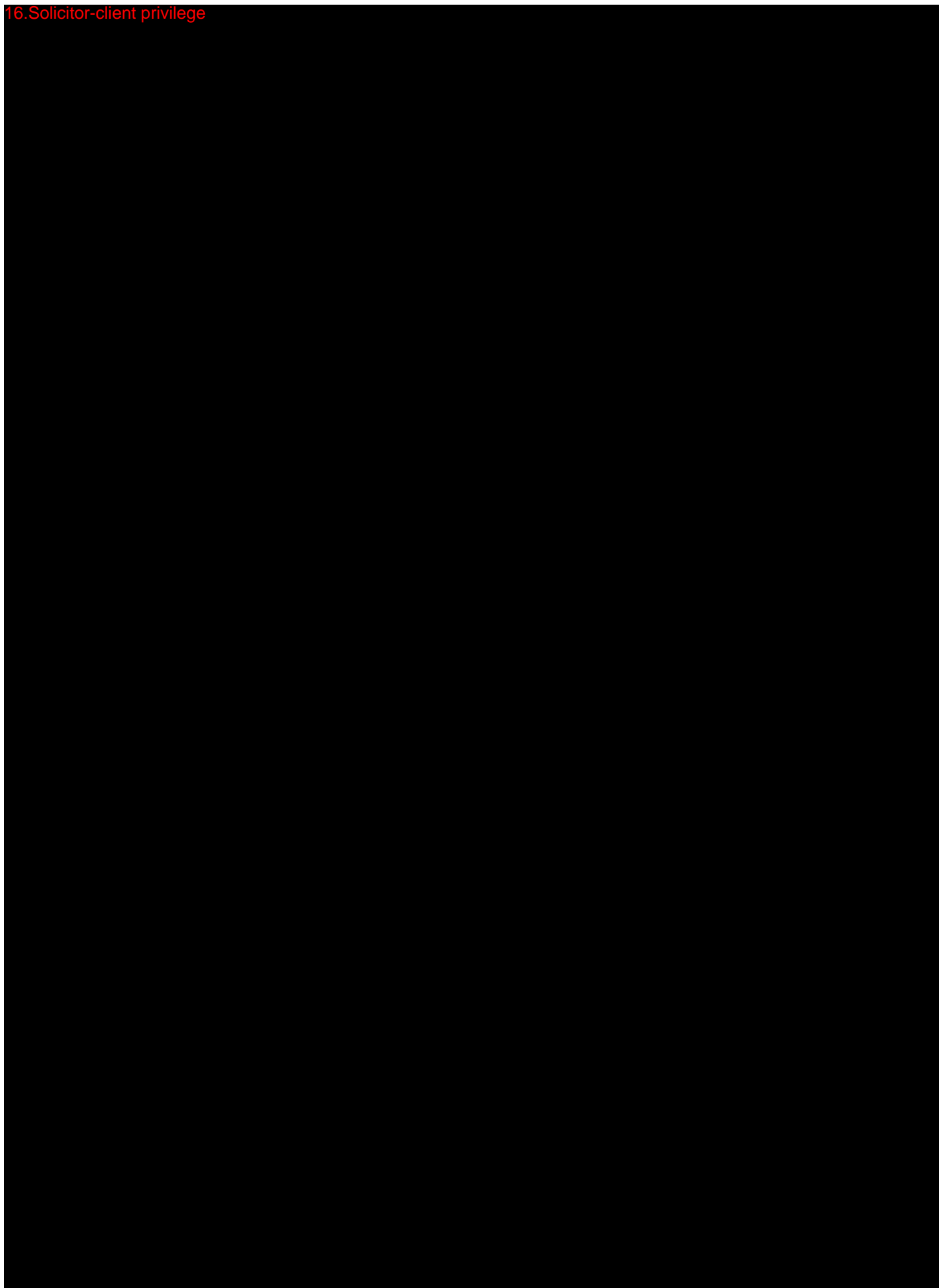


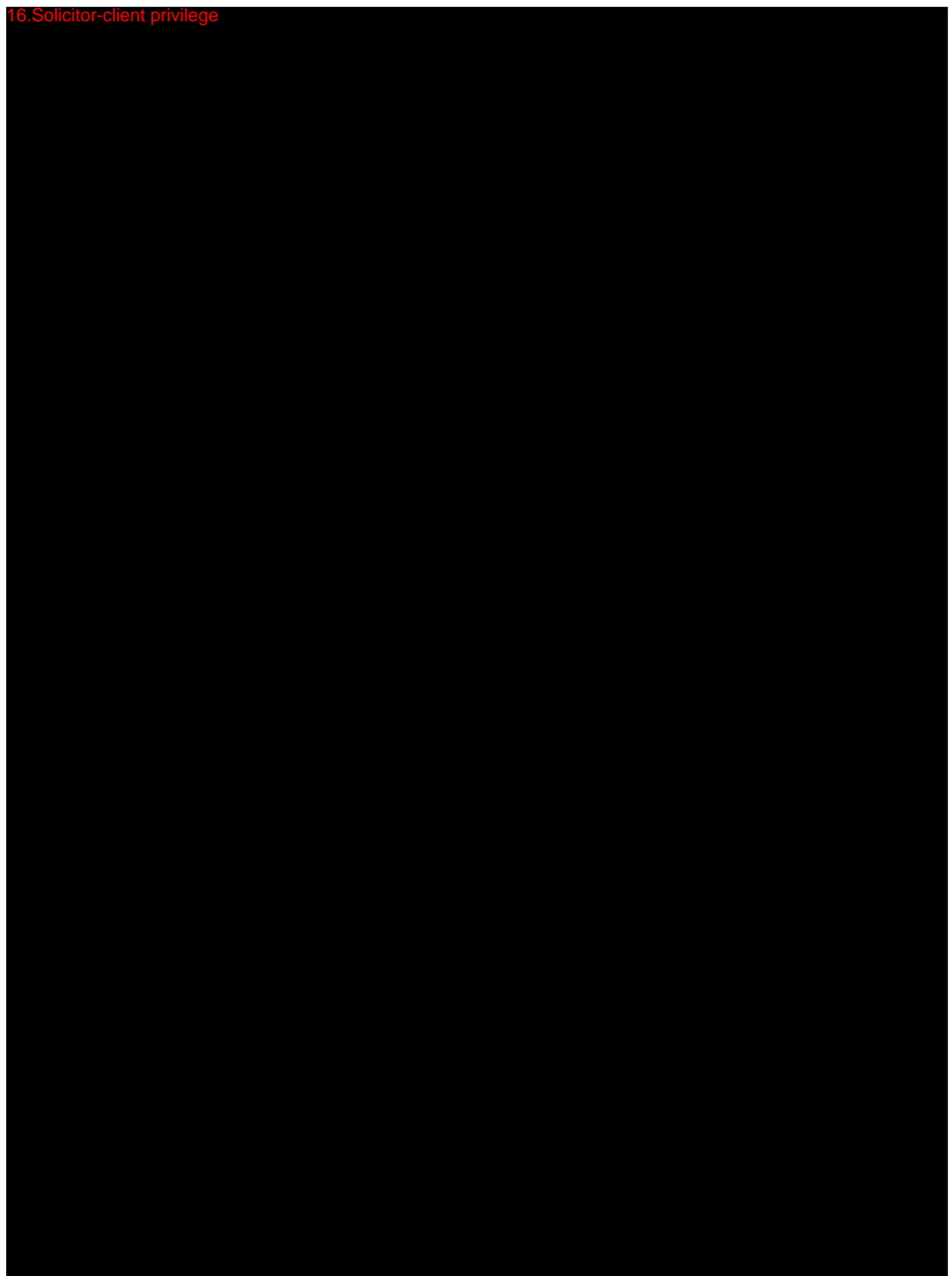


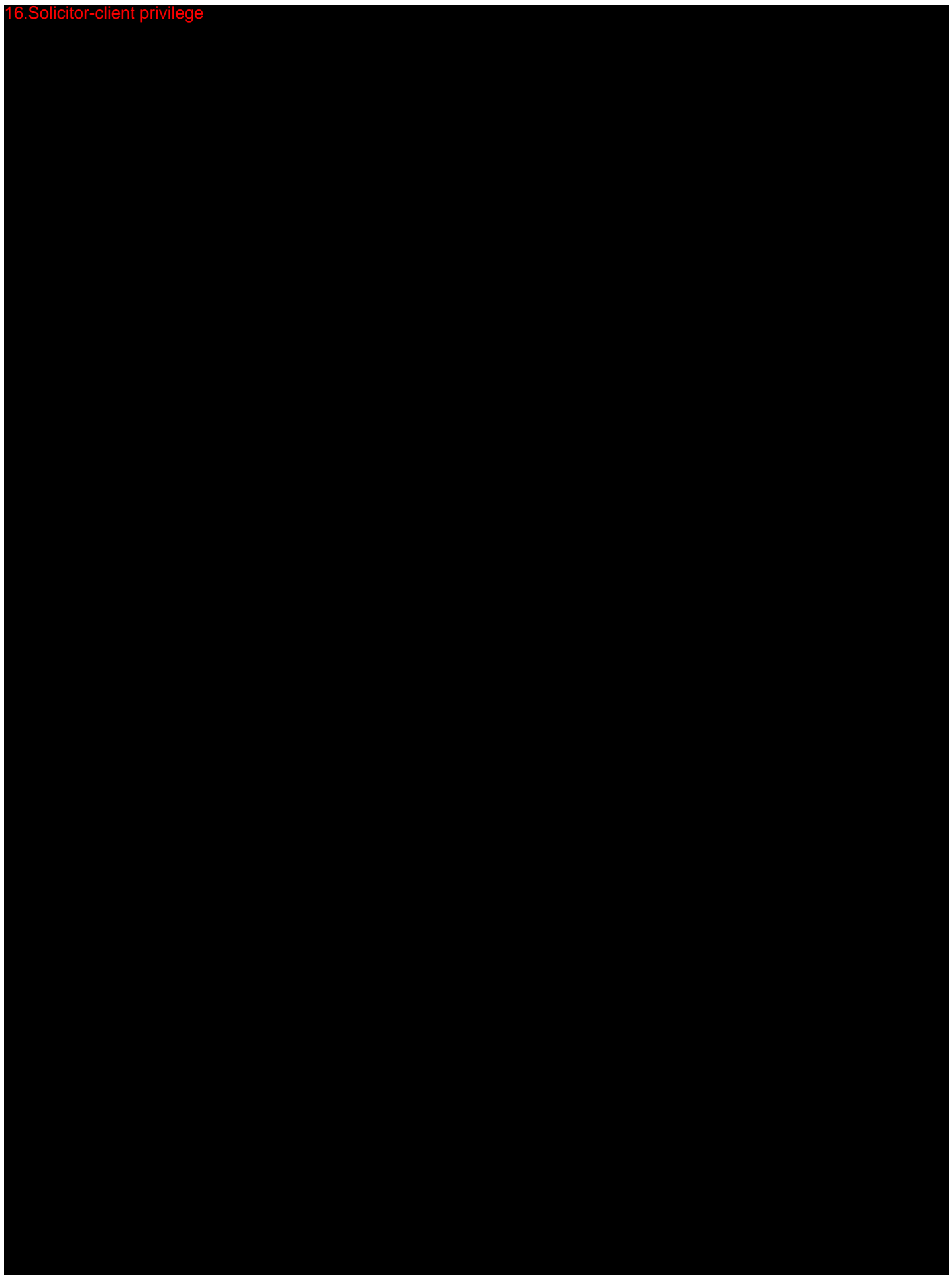


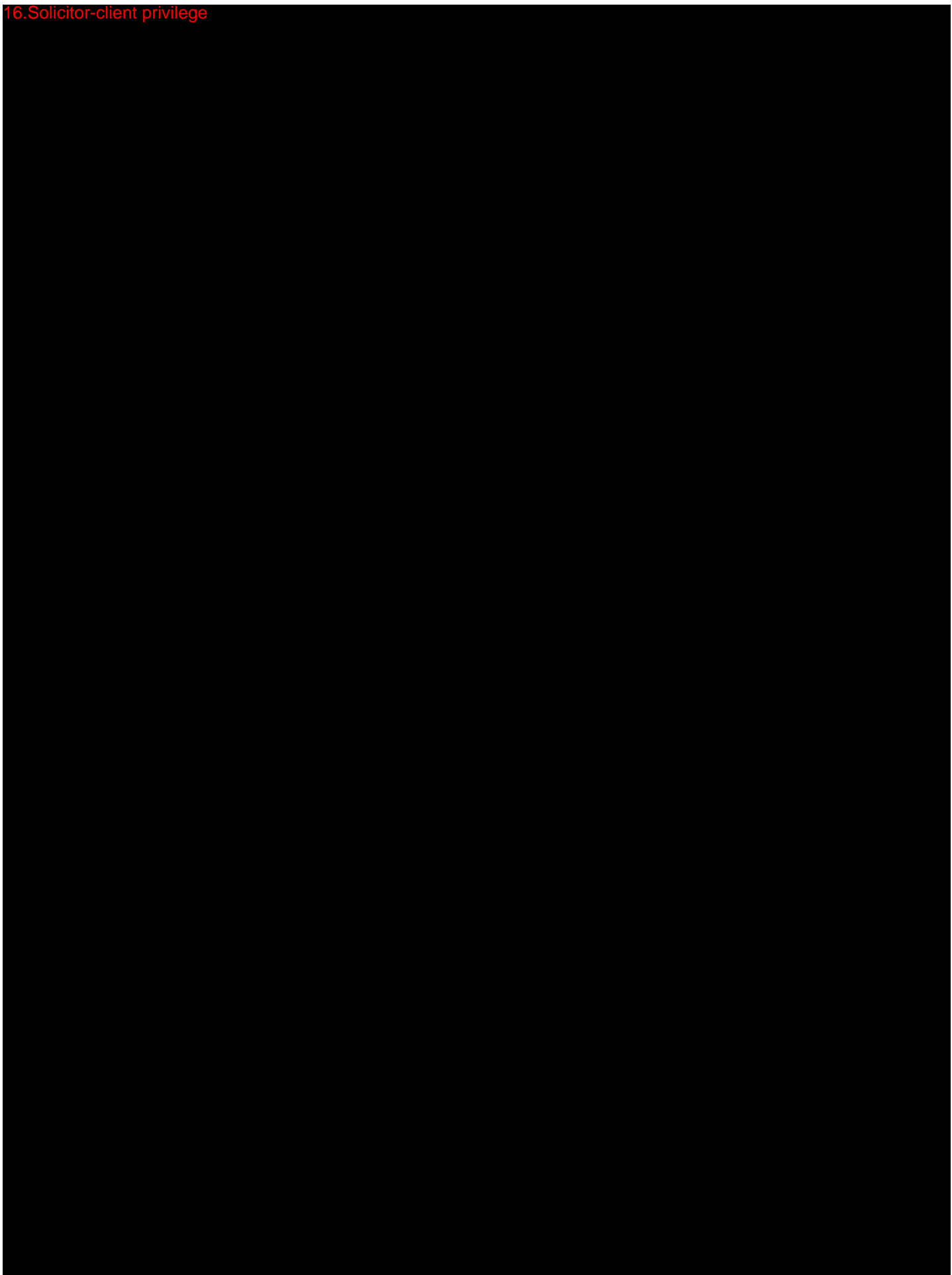


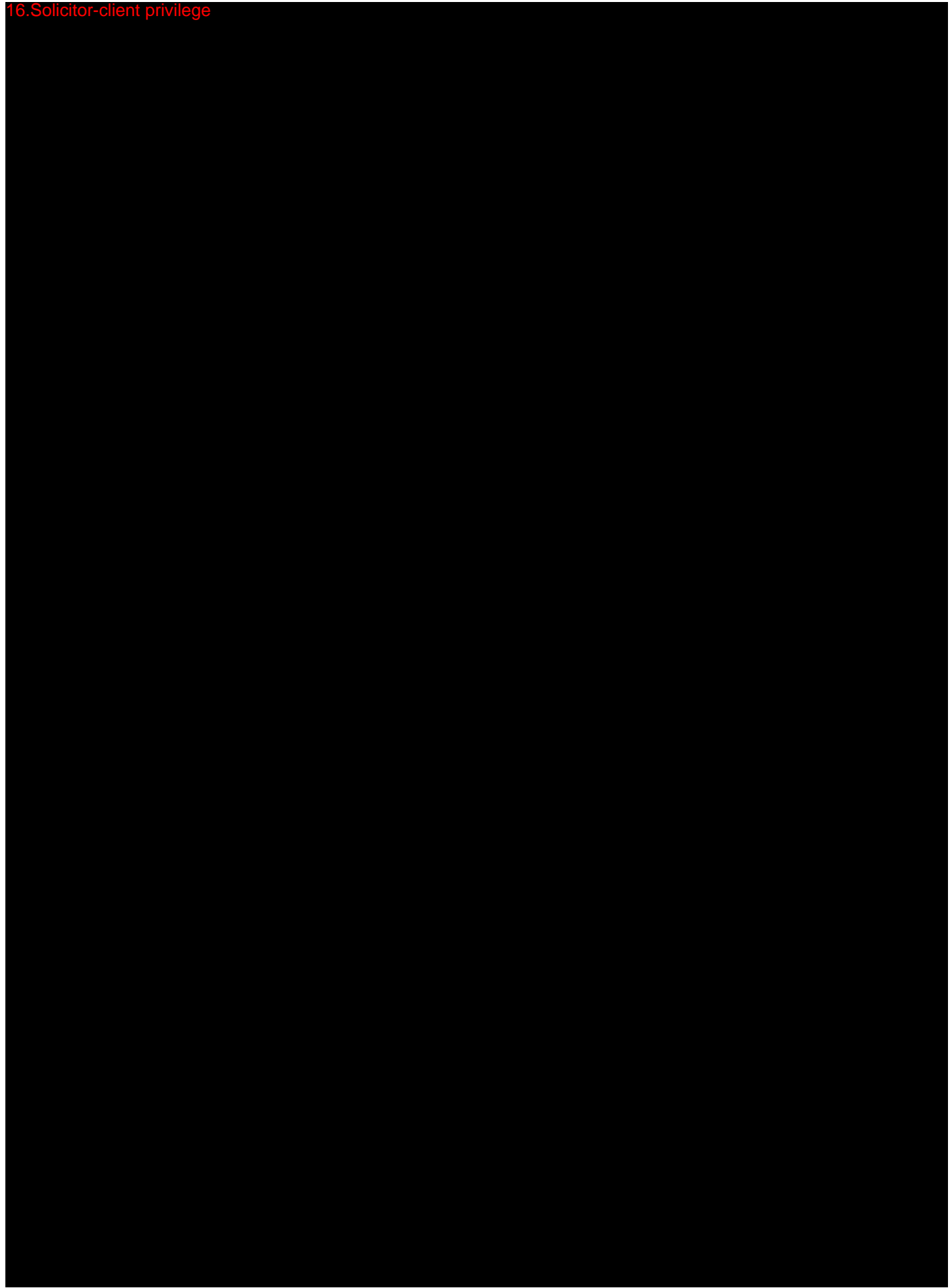










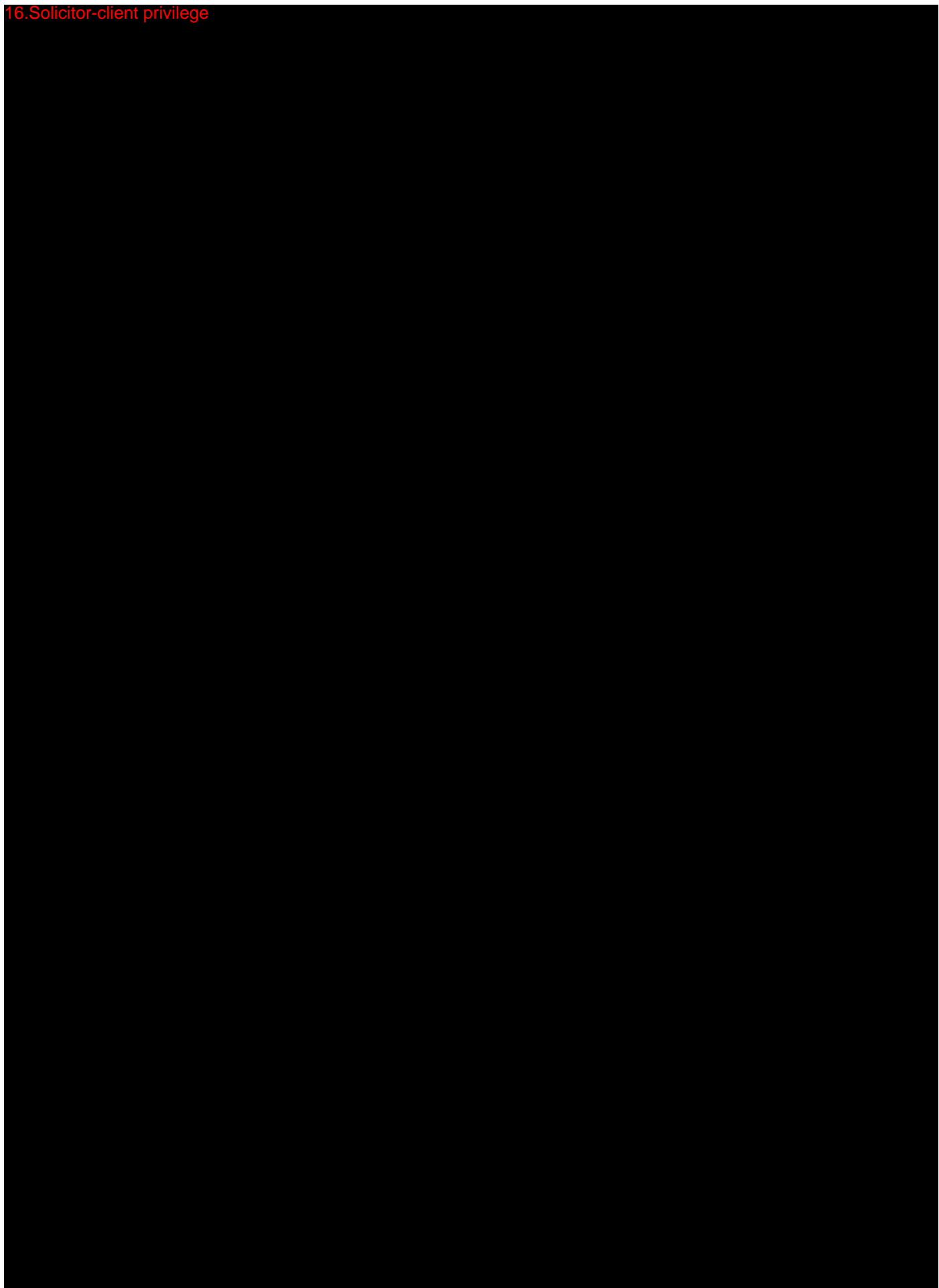


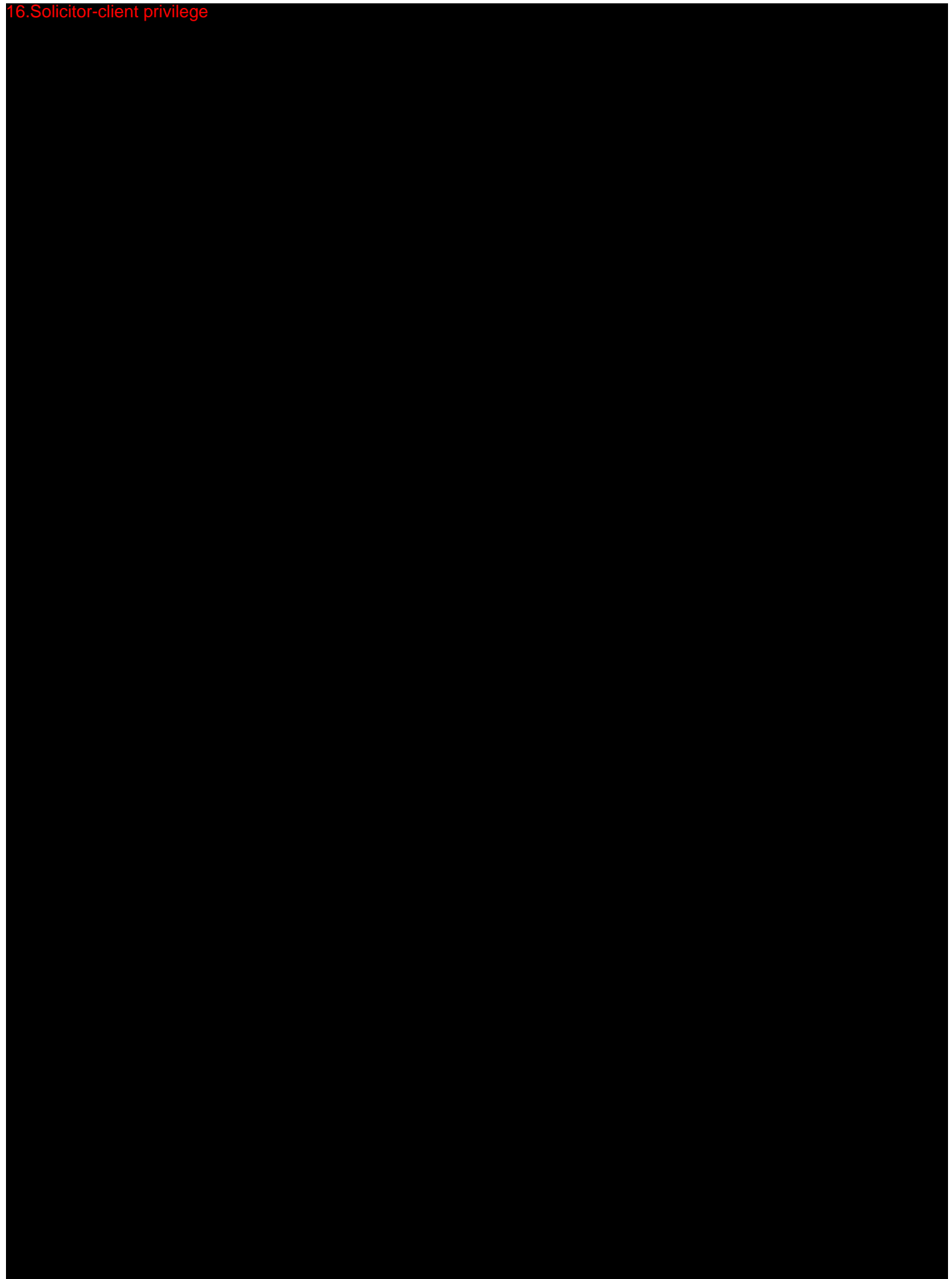
16.Solicitor-client privilege



Out of scope, 16.Solicitor-client privilege







16.Solicitor-client privilege



Out of scope

20. Personal information



From: [Sullivan, Vickie](#)
To: [Connell, Katherine](#)
Cc: [Stevens, Susan](#); [Jamieson, Keltie](#); [Stevenson, Colin](#)
Subject: Re: iPads for use at Northwood
Date: Sunday, April 19, 2020 2:04:56 PM

Thank you

See below re iPads - Ashley is taking some to NW

Sent from my iPhone

> On Apr 19, 2020, at 1:19 PM, Connell, Katherine <Katherine.Connell@nshealth.ca> wrote:
>
> I Vickie,
> Ashley Miller is taking 10 iPads off 8.3 for NW
> Kitty
>
> Katherine Connell, Interim Health Services Director Central Zone
> QEII Inpatient Medicine, Surgery, MOTP, Respiratory Therapy,
> Hyperbaric Medicine, Site Lead Halifax Infirmary
> Suite 5162, Halifax Infirmary Site, QEII
> 1796 Summer Street, Halifax, NS B3H 3A7
> 1 902-473-1242 | 902-473-1297
> Katherine.connell@nshealth.ca
>
> -----Original Message-----
> From: Sullivan, Vickie
> Sent: Sunday, April 19, 2020 1:18 PM
> To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Jamieson, Keltie
> <Keltie.Jamieson@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
> Cc: Monroe, Randi <Randi.Monroe@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>;
> Stevens, Susan <Susan.Stevens@nshealth.ca>
> Subject: iPads for use at Northwood
>
> Good day
>
> A team has been working at Northwood today to help support them. One of the items that was identified as being
helpful to support communication between residents and families is iPads so hoping you can help
>
> Thanks
>
> Vickie
>
> Sent from my iPhone

From: [Stevens, Susan](#)
To: [Boutilier, Nicole](#)
Cc: [Stevenson, Colin](#)
Subject: RE: LTC planning/lessons learned NW
Date: Wednesday, June 3, 2020 8:25:32 PM

Hi Nicole

Happy to participate though wondering best way to proceed given a class action law suite has been filed against Northwood.

Susan

-----Original Message-----

From: Boutilier, Nicole

Sent: Wednesday, June 3, 2020 1:00 PM

To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Rockwood, Kenneth <Kenneth.Rockwood@nshealth.ca>

Subject: LTC planning/lessons learned NW

Good afternoon,

At HAMAC today, the issue was raised that there would be a value to reviewing lessons learned and planning for wave 2 with a group internal to NSHA as well as NSHA participation with DHW/NW.

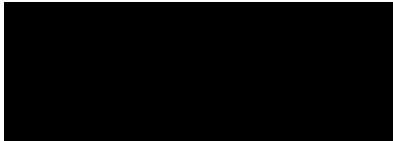
Would we be able to arrange that with your groups Bethany and Susan? Our internal ID/geriatrics/CC/LTC/IPAC/etc?

Thanks

Nicole

From: [Stevenson, Colin](#)
To: [Blackmore, Gail](#)
Subject: RE: Message to Colin only FOR FEEDBACK - Northwood - Quality Review 20-04-18-01
Date: Friday, May 1, 2020 10:28:00 AM

Thanks.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
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Colin.stevenson@nshealth.ca
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Executive Assistant:
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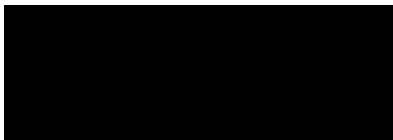
From: Blackmore, Gail
Sent: Friday, May 1, 2020 9:37 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Message to Colin only FOR FEEDBACK - Northwood - Quality Review 20-04-18-01

Colin:

This is a message to you only. I will reply. I am working on bit of additional information re this.

Gail

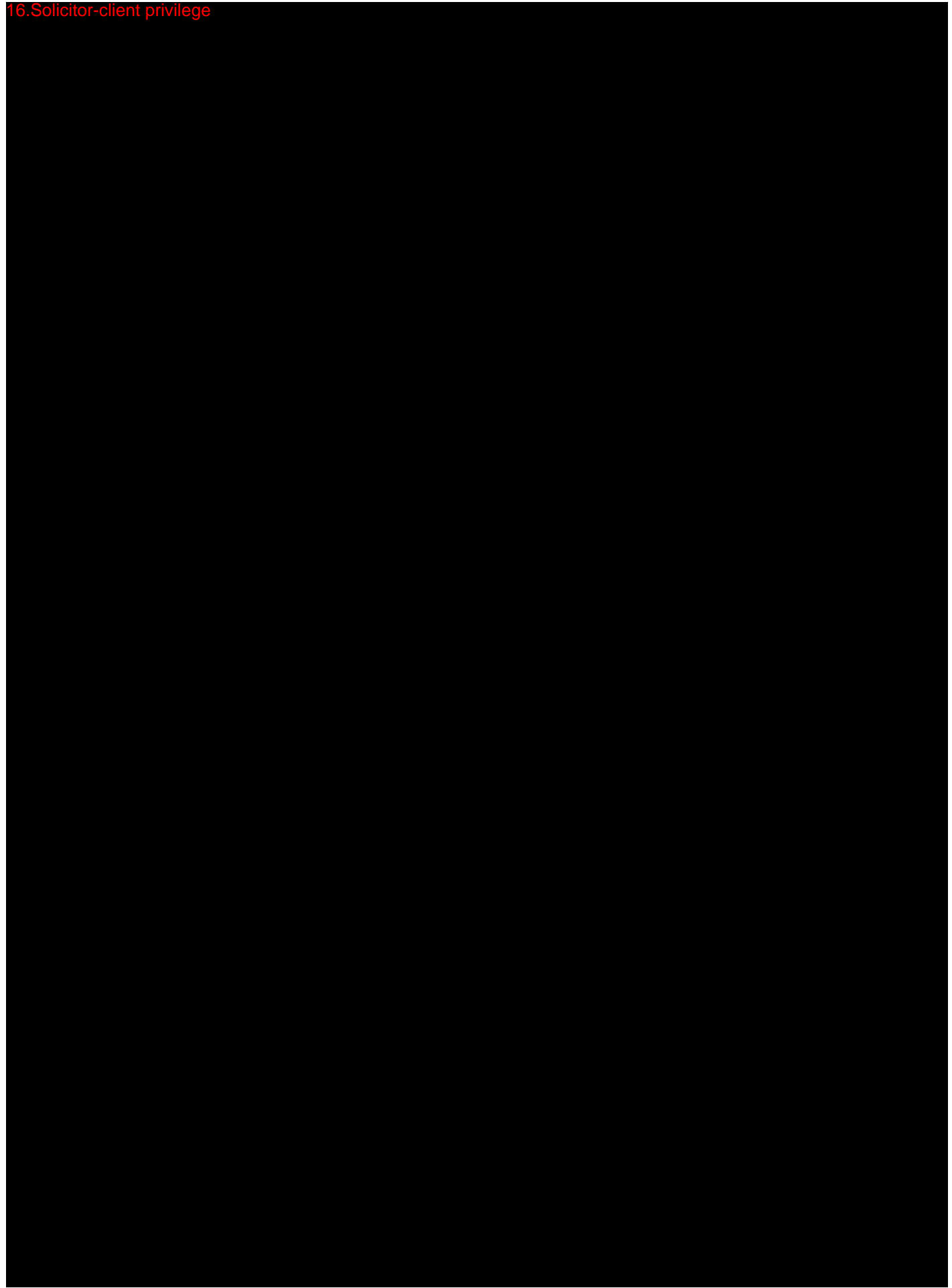
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Gail Blackmore BScN MHSA CHE
Senior Director, Quality Improvement & Safety
Quality & System Performance Portfolio
Nova Scotia Health
VG Site, 844C Bethune Building
1276 South Park Street
Halifax, NS B3H 2Y9
Office: 902-473-3269
Cell: 
Gail.Blackmore@nshealth.ca

Administrative Assistant: Sabrina MacKenzie
Office: 902-473-7854

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16.Solicitor-client privilege



From: [Ciccarelli, Pam](#)
To: [Stevenson, Colin](#)
Subject: RE: MOA - Northwood
Date: Wednesday, May 6, 2020 8:39:03 AM
Attachments: [MOA - Northwood and NSHA.pdf](#)

Good morning Colin,

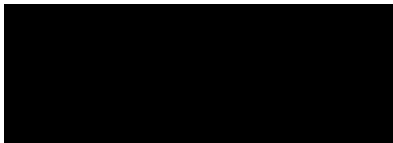
As requested. I will leave the hard copy on Marsha's desk. Thank you.

Pam

From: Stevenson, Colin
Sent: Tuesday, May 5, 2020 9:20 AM
To: Ciccarelli, Pam <Pam.Ciccarelli@nshealth.ca>
Subject: MOA - Northwood

Can you please print for Brendan's signature. Will then need scanned and sent back to me; I'll forward to Northwood.

Thanks



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Colin.stevenson@nshealth.ca
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Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: [Stevenson, Colin](#)
To: [MacDonald, Sandy](#)
Subject: RE: MOA with Northwood
Date: Monday, April 27, 2020 11:46:00 AM

Legal reviewed with privacy and clinical this morning. They are making the final changes and will send to EOC today.



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www.nsha.ca

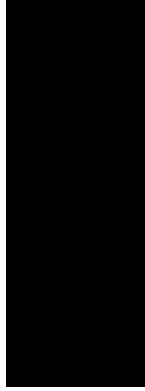
Executive Assistant:
Marsha Bennett: (902) 491-5877
Marsham.bennett@nshealth.ca

From: MacDonald, Sandy
Sent: Monday, April 27, 2020 10:23 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: MOA with Northwood

Hi Colin, putting in an update on this one. Is there anything I can do to move it along?

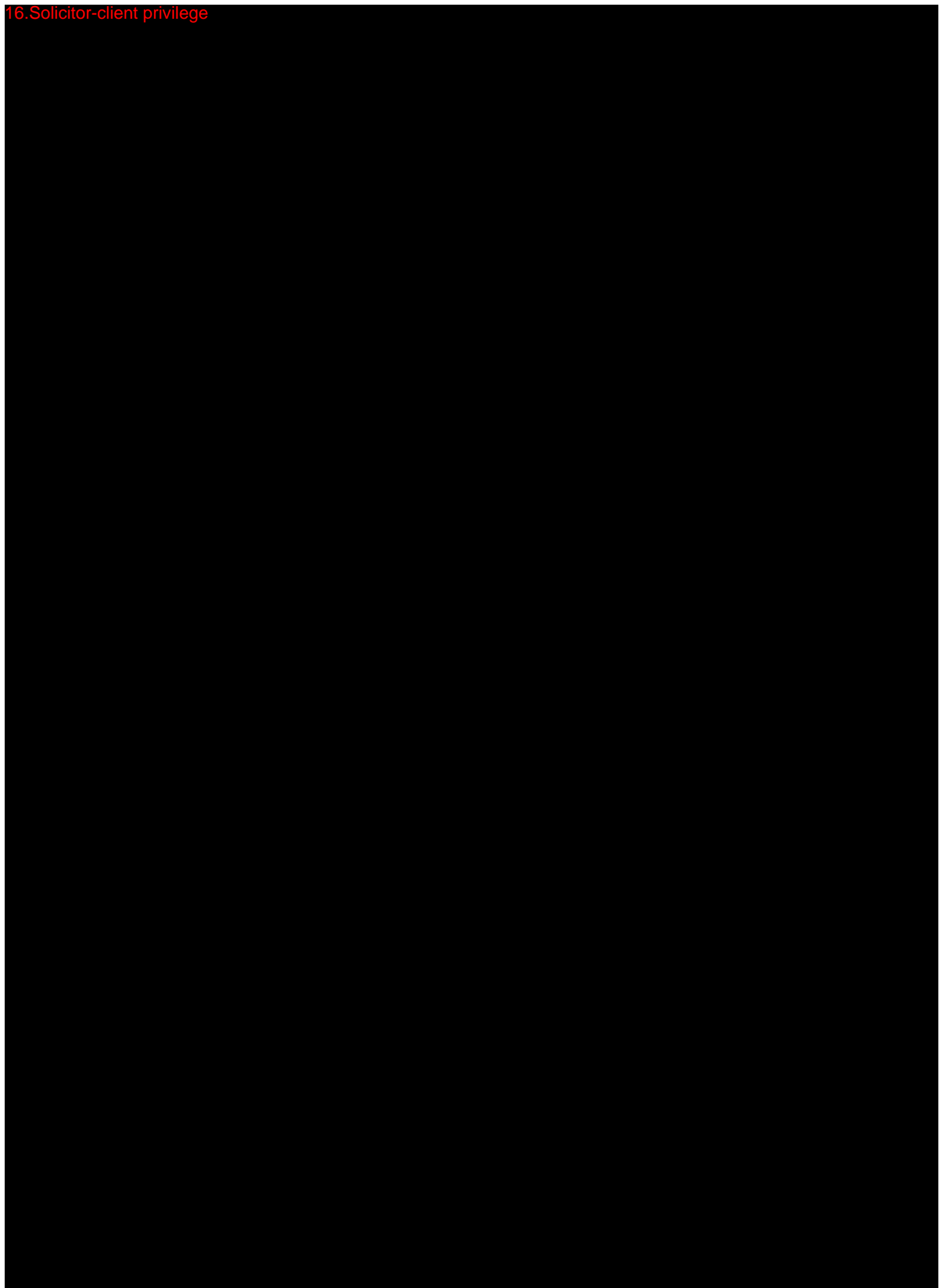
Thanks!

Sandy



Sandy MacDonald
Director, Business Services & Strategy
Information Management & Technology (IM/IT)
7071 Bayers Rd, Suite 326
Halifax, NS B3L 2C2

Cell: 
www.nshealth.ca



16.Solicitor-client privilege



From: [Grant, Krista L](#)
To: [Sullivan, Vickie](#); [Stevenson, Colin](#); [MacDonald, Madonna](#); [Carr, Brendan](#)
Cc: [Bond, Paula](#)
Subject: RE: Northwood *Quick Question
Date: Friday, April 24, 2020 12:33:25 PM

Hi – I think you stick to facts ie this is what it is.

Any other Qs can be directed to DHW. I have cleared this with government.

From: Sullivan, Vickie
Sent: Friday, April 24, 2020 12:28 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>
Cc: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: RE: Northwood *Quick Question

Hi

I am just getting on call at 1 with media with NW, so am just clarifying if asked, how I should respond to this.

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stevenson, Colin
Sent: Friday, April 24, 2020 11:49 AM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: RE: Northwood *Quick Question

Thank you. Received and forwarded to HR to update our documents.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: MacDonald, Madonna
Sent: Friday, April 24, 2020 11:13 AM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: RE: Northwood *Quick Question

The blue document appendix to the order, is the one I sent to Colin in EOC this am. We have made a recommendation that we follow 4.3 in NSH non-licensed LTC space as well i.e. VAC
Also shared the national direction with are guidelines verses a directive. Thanks.

From: Grant, Krista L
Sent: Friday, April 24, 2020 11:08 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: Bond, Paula <Paula.Bond@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: FW: Northwood *Quick Question

FYI

From: Poirier, Adele [<mailto:Adele.Poirier@novascotia.ca>]
Sent: Friday, April 24, 2020 11:06 AM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: RE: Northwood *Quick Question

The public health order/LTC directive are one doc, always on the coronavirus website under alerts and notices.

Direct link here: <https://novascotia.ca/coronavirus/health-protection-act-order-by-the-medical-officer-of-health.pdf>

From: Grant, Krista L <KristaL.Grant@nshealth.ca>
Sent: April 24, 2020 11:04 AM

To: Poirier, Adele <Adele.Poirier@novascotia.ca>

Subject: RE: Northwood *Quick Question

Hi Adele – where on line? Thanks

From: Poirier, Adele [<mailto:Adele.Poirier@novascotia.ca>]

Sent: Friday, April 24, 2020 10:59 AM

To: Karen White <[REDACTED]> Walsh, Tara A <Tara.Walsh@novascotia.ca>; Harrison, Dan J <Dan.Harrison@novascotia.ca>; [REDACTED] Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Silver, Kim <Kim.Silver@novascotia.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Thibeu, Tina D <Tina.Thibeu@novascotia.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Tara Wickwire <[REDACTED]> Rachel Chapman <[REDACTED]>

Subject: RE: Northwood *Quick Question

It's not an announcement but it is already online.

I believe Rob has talked about staff movement between facilities in the presser this week, he may not have said specifically that it's part of the directive.

From: Karen White <[REDACTED]>

Sent: April 24, 2020 10:57 AM

To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Harrison, Dan J <Dan.Harrison@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>; [REDACTED] Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Silver, Kim <Kim.Silver@novascotia.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Thibeu, Tina D <Tina.Thibeu@novascotia.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>

Cc: Tara Wickwire <[REDACTED]> Rachel Chapman <[REDACTED]>

Subject: RE: Northwood *Quick Question

**** EXTERNAL EMAIL / COURRIEL EXTERNE ****

Exercise caution when opening attachments or clicking on links / Faites preuve de prudence si vous ouvrez une pièce jointe ou cliquez sur un lien

Will the 'new directive' for healthcare workers redeployed to Northwood/LTC facilities – could someone confirm this won't be public anywhere before the 1 p.m. Northwood presser? I.e. It isn't part of the provincial Covid news release for today.

If it does come up during the press conference, Vickie Sullivan would take that question as a government directive? I.e., She'll be prepared?

Karen White

NATIONAL Public Relations

[REDACTED]

From: Karen White

Sent: Friday, April 24, 2020 10:41 AM

To: Walsh, Tara A <Tara.Walsh@novascotia.ca>; Harrison, Dan J <Dan.Harrison@novascotia.ca>; Poirier, Adele <Adele.Poirier@novascotia.ca>; [REDACTED] Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>; Silver, Kim <Kim.Silver@novascotia.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Thibeau, Tina D <Tina.Thibeau@novascotia.ca>; Gillis, John W <[\[REDACTED\]@novascotia.ca](mailto:[REDACTED]@novascotia.ca)>

Subject: RE: Northwood materials for today

As requested, recirculating the media advisory (below) and Janet's remarks.

Many thanks,
Karen

Media Advisory

April 23, 2020

Northwood to provide update on the fight against COVID-19 at their Halifax Campus

Halifax, NS, April 23, 2020 – On Friday, April 24, Janet Simm, CEO, Northwood and Josie Ryan, Executive Director of Long-Term Care, Northwood, along with Vickie Sullivan, Executive Director of Operations, Central Zone, Nova Scotia Health Authority, will host a virtual press conference at 1:00 p.m. ADT to address questions regarding planning and response to the coronavirus pandemic at Northwood's Halifax campus.

This is a virtual press briefing with upfront remarks followed by a question and answer session.

What: Northwood to provide update on the fight against COVID-19 at the Halifax Campus

When: April 24, 2020, 1:00–1:30 p.m. ADT

Who:

Janet Simm, CEO, Northwood

Josie Ryan, Executive Director of Long-Term Care, Northwood

Vickie Sullivan, Executive Director of Operations, Central Zone, Nova Scotia Health Authority

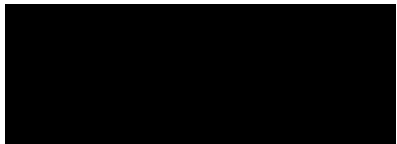
Out of scope
[REDACTED]

From: [Carr, Brendan](#)
To: [Stevenson, Colin](#); [Emergency Operations Center, NS Health Authority](#)
Subject: RE: Northwood Agreement - MOA
Date: Tuesday, April 28, 2020 3:12:45 PM

Awesome, thanks
Brendan

From: Stevenson, Colin
Sent: Tuesday, April 28, 2020 3:05 PM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Subject: RE: Northwood Agreement - MOA

Agree it should come from you. Probably doesn't need signature at this point; just want to send to Janet so they can review and confirm if they are ok with the document;



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
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Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Carr, Brendan
Sent: Tuesday, April 28, 2020 2:49 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: RE: Northwood Agreement - MOA

I am good with this, thank you, probably makes sense for me to sign unless we have precedent of VP's signing MOA's on behalf of NSHA.
Brendan

From: Emergency Operations Center, NS Health Authority
Sent: Tuesday, April 28, 2020 2:37 PM
To: Carr, Brendan <Brendan.Carr@nshealth.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Northwood Agreement - MOA

Brendan – See note from Colin and attached MOA. Please advise who is best to submit to CEO

Northwood.

Bethany
NSHA EOC Manager

From Colin:

I have reviewed the agreement for MOA and recommend it be forwarded to Northwood for their review and comment. Also recommend it be forwarded to DHW as there is a requirement for DHW to identify allocation of costs based on the response strategy.

Recommend that the submission to Northwood be from CEO or VP direct to CEO of Northwood.

Thank you

Colin



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Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: [MacQuarrie, Cindy](#)
To: [Stevenson, Colin](#); [Stevens, Susan](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [McCormick, Bethany](#)
Subject: RE: Northwood call at 3pm
Date: Wednesday, May 6, 2020 4:49:07 PM

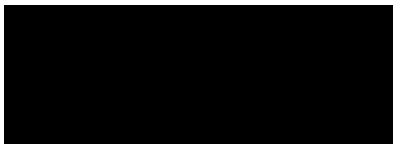
Should we meet to discuss this meeting? Thanks

Cindy MacQuarrie RN MN
Senior Director
Interprofessional Practice and Learning
Nova Scotia Health Authority
Cell [REDACTED]

From: Stevenson, Colin
Sent: Wednesday, May 06, 2020 10:34 AM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Subject: RE: Northwood call at 3pm

Thanks. Looks good.

20. Personal information [REDACTED]



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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Stevens, Susan
Sent: Wednesday, May 6, 2020 10:28 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Subject: RE: Northwood call at 3pm

Thanks Colin. So the invitees from NSHA are:

Susan – will attend
Vickie – will attend

Tammy – will attend

Cindy – will attend

Wendy – won't attend

Bethany – won't attend

Patsy

Colin

Angela LeBlanc – is planning to attend but I don't think she needs to attend. Colin will you or do you want me to connect with her?

Susan



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
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susan.stevens@nshealth.ca
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From: Stevenson, Colin

Sent: Wednesday, May 6, 2020 10:15 AM

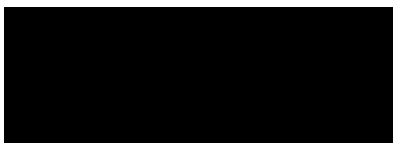
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>

Subject: RE: Northwood call at 3pm

Agree. **20. Personal information**

[REDACTED]

– better for IPAC and IPPL to be involved; plus you and Vickie for operations).



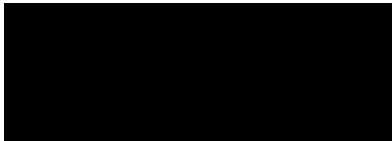
Colin Stevenson, BSc., MHA, CHE
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www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Stevens, Susan
Sent: Wednesday, May 6, 2020 8:57 AM
To: MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Subject: RE: Northwood call at 3pm

I wonder if Vickie, Tammy and Bethany should attend from an IPAC, operations and risk perspective. Wondering about Cindy from the involvement of the CNEs and education/training perspective.

Not sure that Wendy or Angela LeBlanc need to be involved. Thoughts?
Susan



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6960 Mumford Road, Suite 2069
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From: MacDonald, Tammy
Sent: Wednesday, May 6, 2020 8:55 AM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Subject: RE: Northwood call at 3pm

Hi
I will attend the meeting.
Thanks
Tammy

From: Stevens, Susan

Sent: Wednesday, May 06, 2020 8:46 AM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacQuarrie, Cindy <Cindy.MacQuarrie@nshealth.ca>; MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>

Subject: Northwood call at 3pm

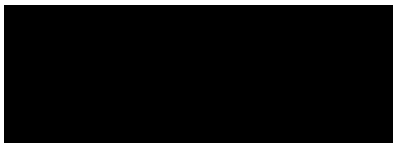
Wondering who you think from NSHA should be on the call with Northwood today – tentatively planned for 3pm. I have not received call details yet.

Colin, you and I are in another meeting with DHW from 230-330pm.

We probably don't want too many of us however, need to ensure we have those who can respond to questions about our involvement in providing care, IPAC education/training, testing, etc.

Thoughts?

Susan



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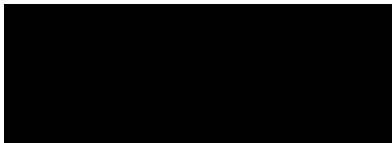
From: [Hurd, Alison](#)
To: [Miletic, Natalie](#); [Howlett, Todd](#); [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [McVeigh, Wendy](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); ["Purcell, Angela L"](#); ["Cruikshank, Cindy J"](#); ["Smith, Alexandra \(Health\)"](#); ["Knowles, Ruby M"](#); ["jeannine.lagasse@novascotia.ca"](#); ["Elliott-Lopez, Vicki"](#); [Murphy, Matthew](#); [Monroe, Randi](#); [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#); ["Langille, Paula D"](#); [LeBlanc, Angela](#)
Cc: [Melvin, Kate](#); [Kennedy, Shelby](#)
Subject: RE: NSHA and Northwood Joint Meeting - Situation Update
Date: Wednesday, May 13, 2020 5:52:14 PM
Attachments: [Northwood COVID19 Situation Report - NSHA and Northwood - May 13 2020.pdf](#)

Good evening,

Please find attached Situation Report from today. The Incident Board has also been included to assist with tracking progress on actions and priorities. Please advise of any errors or omissions.

Our next check-in is on Thursday, May 14 at 1400h.

Kind regards,
Alison

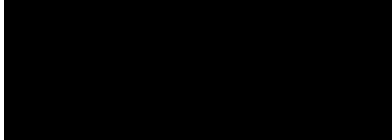


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From: [Stevens, Susan](#)
To: [LeBlanc, Angela](#); [Stevenson, Colin](#); [McCormick, Bethany](#)
Subject: RE: NSHA CC EOC
Date: Saturday, April 18, 2020 5:15:07 PM

From my perspective Monday is good – Wendy and I are dealing with Northwood today and likely tomorrow too.



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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From: LeBlanc, Angela
Sent: Saturday, April 18, 2020 5:10 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: NSHA CC EOC

Thanks Colin. Yes, will connect. Can you let me know if this is for action today/tomorrow or Monday. Good either way just want to have a sense of timeline re supporting with activation.

Thanks
angela

From: Stevenson, Colin
Sent: April-18-20 4:23 PM
To: LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: NSHA CC EOC

Angela:

We are setting up an incident management response structure for continuing care – starting with CZ. Attached is the SBAR approved by our ELT and the draft structure and fit with the overall EOC functioning.

The team concept for this is slightly modified for the needs of the sector and roles we actually plan. Susan needs some assistance in getting the CZ team up and running – we have individuals to fill roles but will need some support in early days for understanding role; having the process to track incidents/objectives; etc....

Can you and Bethany connect and identify how best to get this team up and running. It would be followed by similar in other zones, but Central is the priority.

Thank you

Colin



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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Stevens, Susan
Sent: Saturday, April 18, 2020 4:15 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: RE: NSHA CC EOC

Excellent. So we have Cheryl IMT lead with Wendy, Isabelle Zwerling (retired CZ CC manager) starting mid-week and I will connect with Angela. Angela and Isabelle will be the clinical advisors. Colin can someone work with us to stand up the EOC and get organized. Can you also share with me the documents you mentioned last night?

From: Stevenson, Colin
Sent: Saturday, April 18, 2020 4:13 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: NSHA CC EOC

Susan:

I have spoken with Cheryl Tschupruk and she is happy to provide support as CZ incident management lead for the CC work.

From: [Stevenson, Colin](#)
To: ["Elliott-Lopez, Vicki"](#); ["Lagasse, Jeannine"](#); ["Veale, Jonathan"](#); [Stevens, Susan](#)
Subject: RE: NSHA/DHW Roles and Responsibilities
Date: Wednesday, May 6, 2020 10:15:00 AM

Hoping you would be open to shifting this meeting – maybe to Thursday morning? There is a Northwood issue that is drawing Susan and Vickie away at the same time.

I'll still send feedback we have on the draft document and this will give you a chance to review and we can discuss changes.

Thanks for considering.

Colin Stevenson, BSc., MHA, CHE

Vice President – Health Services, Quality and System Performance

Nova Scotia Health Authority

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Colin.stevenson@nshealth.ca

www.nsha.ca

Executive Assistant:

Marsha Bennett; (902) 491-5877

Marsham.bennett@nshealth.ca

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

From: Elliott-Lopez, Vicki [<mailto:Vicki.Elliott-Lopez@novascotia.ca>]

Sent: Tuesday, May 5, 2020 12:31 PM

To: Elliott-Lopez, Vicki; Lagasse, Jeannine; Veale, Jonathan; Stevenson, Colin; Stevens, Susan

Subject: NSHA/DHW Roles and Responsibilities

When: Wednesday, May 6, 2020 2:30 PM-3:30 PM (UTC-04:00) Atlantic Time (Canada).

Where:

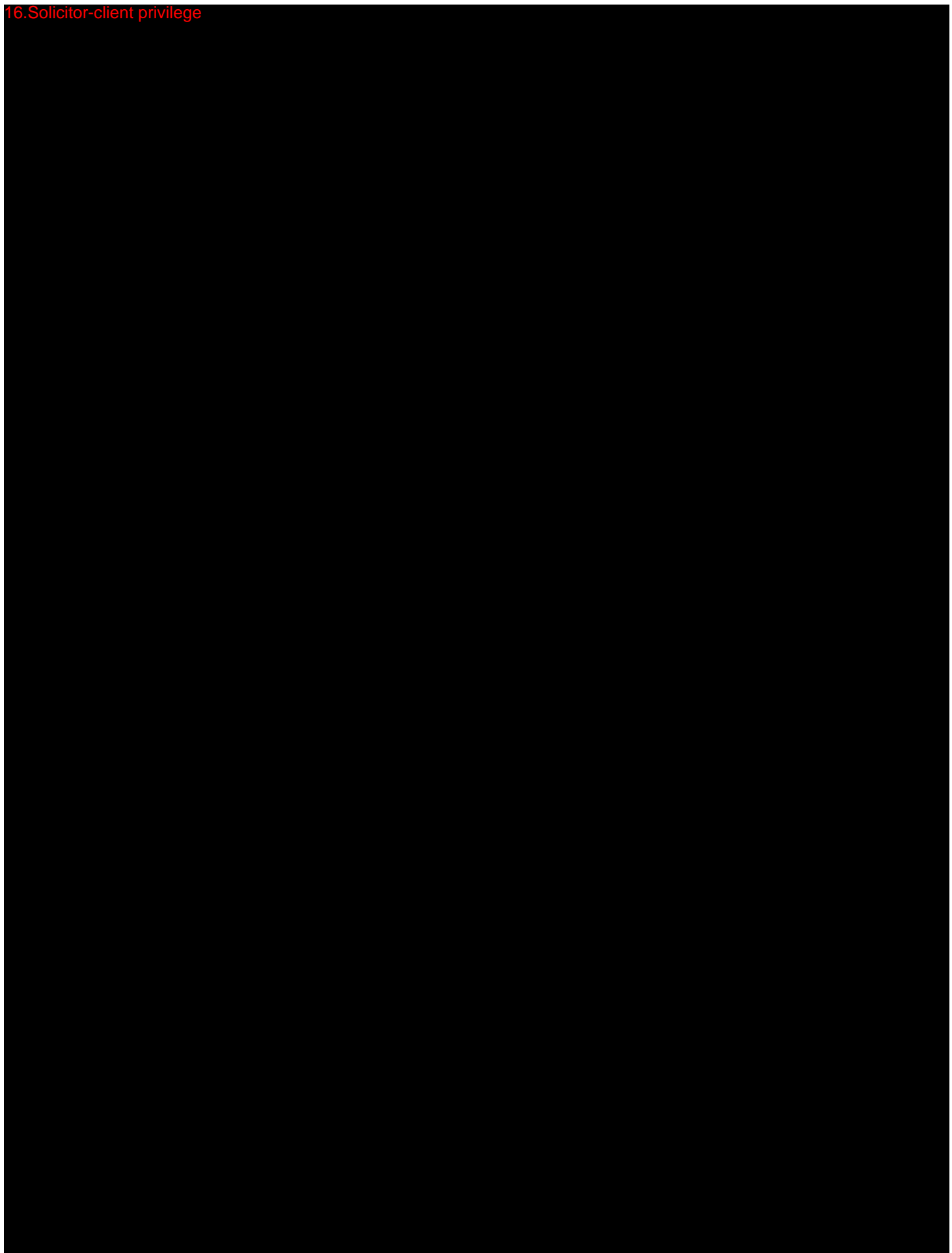
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20014895@t.plcm.vc VTC Conference ID: 1431524180

[Alternate VTC dialing instructions](#)



Out of scope

Subject: RE: Public Health Inquiries - Testing Requirements / Northwood

Thank you for the quick response. We all agree that multiple conversations shouldn't be needed. When OCMOH engages clinical leads please include Paula Bond and Madonna MacDonald (copied) in the invitation – one will participate and this will ensure the operational impact is included in the discussion and will support the approval process.

Thank you



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Strang, Robert [<mailto:Robert.Strang@novascotia.ca>]

Sent: Wednesday, May 13, 2020 1:28 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Cc: Watson-Creed, Gaynor <Gaynor.Watson-Creed@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; Casey, Jill M <Jill.Casey@novascotia.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Barro, Kimberlee X <Kimberlee.Barro@novascotia.ca>

Subject: FW: Public Health Inquiries - Testing Requirements / Northwood

Thanks for your e-mail and I will try to address both of your concerns succinctly

Out of scope

A large black rectangular box redacting the content of the email body.

- 2) I am working with colleagues in DHW to provide a clear, written directive on all the details of the direction to have staff from outside organizations working at the Northwood Halifax campus be required to have a 14-day self-isolation period before returning to work in their home organization

Thanks,

Rob Strang

From: [MacDonald, Madonna](#)
To: [Tomblin Murphy, Gail](#); [Grant, Krista L](#)
Cc: [~NSHA ELT](#); [Gillis, John W](#); [Wood, Krista](#)
Subject: RE: Release - case update - April 18
Date: Saturday, April 18, 2020 1:39:41 PM

It may have to do with the solution proposed by Northwood on Friday, which was supported during the meeting. There was to be planning meetings etc over the weekend.

From: Tomblin Murphy, Gail
Sent: Saturday, April 18, 2020 1:38 PM
To: Grant, Krista L <KristaL.Grant@nshealth.ca>
Cc: ~NSHA ELT <NSHAELT@nshealth.ca>; Gillis, John W <JohnW.Gillis@nshealth.ca>; Wood, Krista <Krista.Wood@nshealth.ca>
Subject: Re: Release - case update - April 18

Dear Krista

Thanks to you and your team for sharing. This is terrible news for LTC and Nova Scotians

Best

G

Gail Tomblin Murphy, PhD
Vice President, Research and Innovation
Nova Scotia Health Authority
[90 Lovett Lake Court, Suite 201](#) (Rm 239)
Halifax, NS B3S 0H6

Office Telephone: [902-491-5822](tel:902-491-5822)
Cell Number: [REDACTED]
Email: gail.tomblinmurphy@nshealth.ca

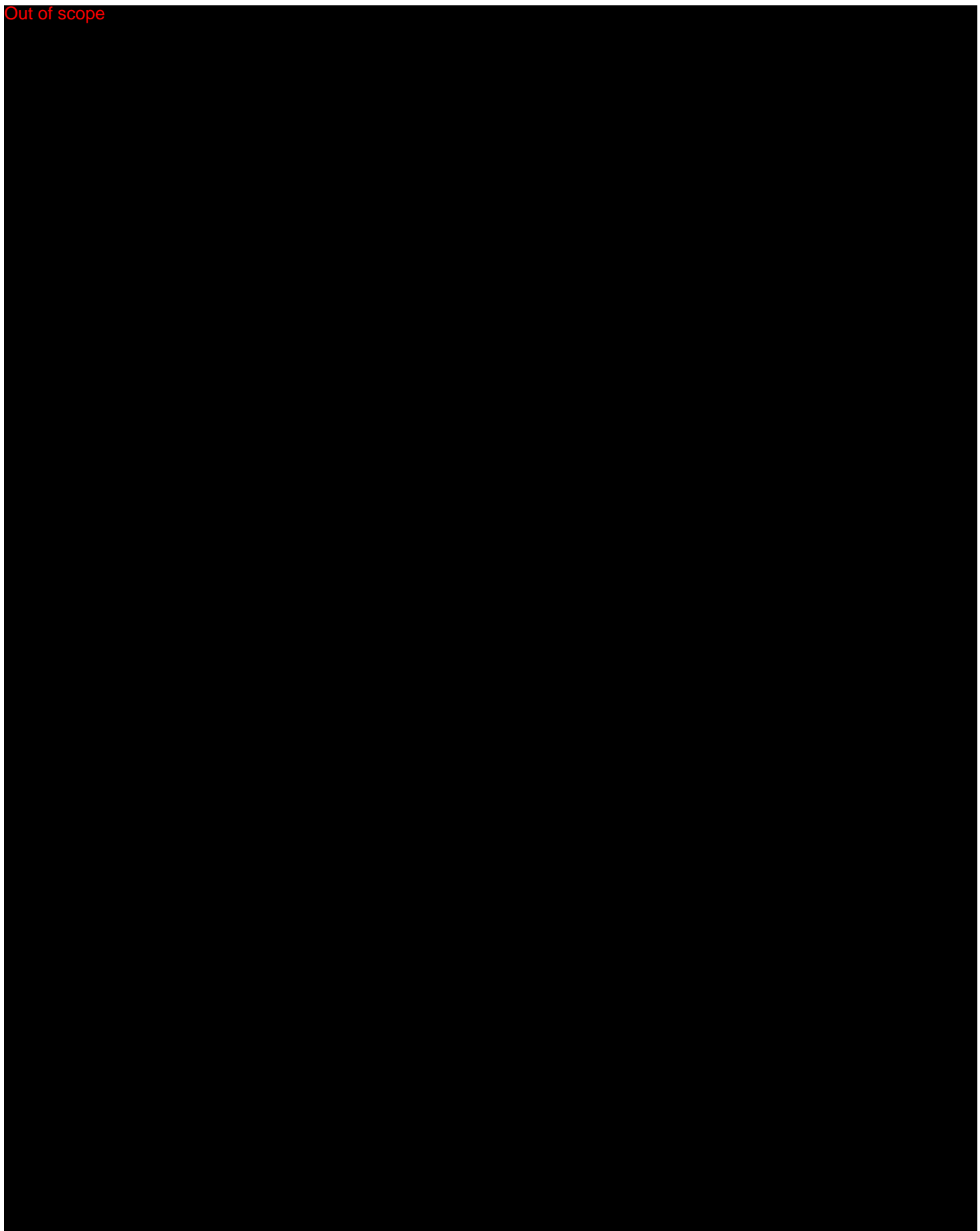
Director, WHO/PAHO Collaborating Centre on Health Workforce Planning & Research
<http://whocentre.dal.ca>

On Apr 18, 2020, at 1:35 PM, Grant, Krista L <KristaL.Grant@nshealth.ca> wrote:

Looks like they will have news conference tomorrow at 3pm now.

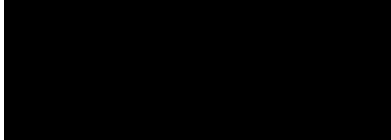
K

Out of scope



From: [Stevenson, Colin](#)
To: [Ashton, Steve](#); ["Alexandra Smith"](#); [Embrett-Baboushkin, Ryan](#); [Stone, Joanne](#)
Subject: RE: This Morning's Call
Date: Thursday, April 23, 2020 8:00:00 AM

We are meeting as an operational group re Northwood this morning. I think our collective HR approach to this needs to follow what is possible operationally as well; and our operational abilities will need to be informed by HR. Not sure what the conversation will be for the HR table today on this – but would be important to understand the limitations / possibilities.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Ashton, Steve
Sent: Thursday, April 23, 2020 7:14 AM
To: Alexandra Smith <Alexandra.Smith@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Embrett-Baboushkin, Ryan <Ryan.Embrett-Baboushkin@iwk.nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>
Subject: This Morning's Call

Hi folks,

I will be 10 minutes late for call, as need to meet briefly with Krista at 8:00.

Know we will be discussing Northwood, and just wanted to ask that it wait until I join the call. I had a call from Janet H. last night as I am sure others did, so just want to catch up on latest thinking.

Thanks,

Steve

Out of scope

A large black rectangular box covering the bottom portion of the email body, likely redacting sensitive information.

Date: April 22, 2020 at 10:22:11 PM ADT

To: "MacDonald, Angela N" <Angela.N.MacDonald@novascotia.ca>, "Cruickshank, Cindy J" <Cindy.Cruickshank@novascotia.ca>, "Ashton, Steve" <Steve.Ashton@iwk.nshealth.ca>, "Embrett-Baboushkin, Ryan" <Ryan.Embrett-Baboushkin@iwk.nshealth.ca>, "Stevenson, Colin" <Colin.Stevenson@nshealth.ca>, "Stone, Joanne" <joanne.stone@nshealth.ca>,
[REDACTED]
<[REDACTED]> "Whynot, Barbara" <Barbara.Whynot@iwk.nshealth.ca>, "Piers, Geoff W" <Geoff.Piers@nshealth.ca>,
"Purcell, Angela L" <Angela.Purcell@novascotia.ca>

Cc: "Boutilier, Lisa" <Lisa.Boutilier@iwk.nshealth.ca>, "Joyce, Brenda" <Brenda.Joyce@iwk.nshealth.ca>, "Bennett, Marsha M" <MarshaM.Bennett@nshealth.ca>, "Bernard, Diane" <Diane.Bernard@nshealth.ca>,
"Wain, Meredith V" <Meredith.Wain@novascotia.ca>, "McCormick, Bethany" <Bethany.McCormick@nshealth.ca>, "Ungar, Tracey" <Tracey.Ungar@nshealth.ca>,
"Joyce, Mike" <Mike.Joyce@novascotia.ca>, "Lucas, Mark Paul" <Mark.Lucas2@novascotia.ca>, "Mann, Shilo" <Shilo.Mann@novascotia.ca>, "Akuffo-Addo, Edgar" <Edgar.Akuffo-Addo@novascotia.ca>, "Read, Carolin" <Carolin.Read@nshealth.ca>

Subject: RE: Covid 19 HR/LR/Health Profession Regulation planning-conference call required

Please find attached the agenda for tomorrow's meeting

alex

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

From: MacDonald, Angela N <Angela.N.MacDonald@novascotia.ca>

Sent: March 4, 2020 11:26 AM

To: MacDonald, Angela N; Smith, Alexandra (Health); Cruickshank, Cindy J; Ashton, Steve; Embrett-Baboushkin, Ryan; Stevenson, Colin; Stone, Joanne; [REDACTED] Whynot, Barbara; Piers, Geoff W; Purcell, Angela L

Cc: Boutilier, Lisa; Joyce, Brenda; Bennett, Marsha M; Bernard, Diane; Wain, Meredith V; McCormick, Bethany; Ungar, Tracey; Joyce, Mike; Lucas, Mark Paul; Mann, Shilo; Akuffo-Addo, Edgar; Read, Carolin

Subject: Covid 19 HR/LR/Health Profession Regulation planning-conference call required

When: April 23, 2020 8:00 AM-10:00 AM (UTC-04:00) Atlantic Time (Canada).

Where: 1-855-453-6963/8494083

Sending at the request of Alexandra Smith and Cindy Cruickshank, Department of Health and Wellness

Out of scope [REDACTED]

Out of scope

If you are having difficulty with the call in line, please use one of these three non toll free numbers:

Out of scope

We are setting up weekly (at this time) coordinating calls for LR/HR/Workforce issues for the **hour before** the weekly health system calls with Dr Strang. The membership of this group is expected to evolve over time, but at this time will include HR LR and health care provider regulation. The appointments will be sent to your HR/LR organizational leads. Please include others from your organization as appropriate. The intent of these meetings is to coordinate on a system level the health system response to the COVID-19 pandemic from an HR LR perspective. We will escalate issues as they are identified for resolution.

Kind regards,

<image001.png>
Health and Wellness

Angela MacDonald

Administrative Assistant
Health Workforce Planning and Regulatory Affairs
System Strategy and Performance Division
Department of Health and Wellness
12th Floor Barrington Tower
1894 Barrington St.
Halifax, NS B3J 2A8
Office: 902-424-4849
Fax: 902-424-4847
Email: Angela.N.MacDonald@novascotia.ca

<Agenda_COVID 19_HR_LR_Health Profession Regulation Planning_April 23
2020FINAL.docx>

From: [Kempkens, Daniela](#)
To: [McVeigh, Wendy](#); [Stevenson, Colin](#); [Boutilier, Nicole](#); [MacDonald, Madonna](#); [Sullivan, Vickie](#); [Stevens, Susan](#); [Bond, Paula](#); [Tomblin Murphy, Gail](#); [Carr, Brendan](#); [Howlett, Todd](#); [Alexiadis, Maria](#); [McCormick, Bethany](#); [LeBlanc, Angela](#); [Grant, Krista L](#)
Cc: [Spinney, Derek](#); [Broesch, James](#)
Subject: RE: update re swabbing: Northwood Incident Management Team - CRITICAL
Date: Sunday, April 19, 2020 11:40:39 AM

Good morning everyone,

My name is Daniela Kempkens, I am the Medical Officer of Health who took over this outbreak a few days ago from a colleague.

We are currently in the process of gathering any outstanding information so that we can adopt the testing strategy to the rapidly changing situation. If you have any questions or suggestions in the meantime, please let me know.

In addition, if you are planning any meetings please consider me taking part from a public health perspective.

Best regards,

Daniela

Daniela Kempkens, MD, MPH, FRCPC

Regional Medical Officer of Health Eastern Zone

Public Health Eastern, Nova Scotia Health Authority

23 Bay Street, Antigonish Health & Wellness Centre, Suite 2N

Antigonish, NS B2G 2G7

Office: 902-563-2420

Fax: 902-563-0508

daniela.kempkens@nshealth.ca

From: Cram, Jennifer

Sent: Saturday, April 18, 2020 8:42 PM

To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula

<Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett, Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>; Kempkens, Daniela <Daniela.Kempkens@nshealth.ca>; Broesch, James <James.Broesch@nshealth.ca>

Subject: RE: update re swabbing: Northwood Incident Management Team - CRITICAL

Thank you so much for your support of the Northwood at this difficult time. I'm not the MOH that follows this facility regularly, so while I don't have full details, I do know that the testing strategy has been aggressive, and if applicable, iterative, with repeated testing of residents. Typically, if there is a single case on a unit the entire unit is then swabbed. There is also swabbing based on the units where positive staff have worked while infectious (included up to 2 days before symptom onset). The director of the facility could certainly provide more specific details. As Wendy mentioned, there is a meeting tomorrow with the lead MOH supporting this facility, myself and Dr. Strang. The ongoing testing strategy will be one of the topics covered. Wendy – perhaps I could have Dr. Daniela Kempkens connect back to you tomorrow? She will be the MOH on-call and also has been following this outbreak.

Have a good night,

Jennifer Cram

<< OLE Object: Picture (Device Independent Bitmap) >>

Dr. Jennifer Cram MD MPH FRCPC

Medical Officer of Health

Western Zone

821 St. George Street
Annapolis Royal, NS B0S 1A0

Email: Jennifer.cram@nshealth.ca

From: McVeigh, Wendy

Sent: Saturday, April 18, 2020 8:22 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; Tomblin Murphy, Gail <Gail.TomblinMurphy@nshealth.ca>; Carr, Brendan <Brendan.Carr@nshealth.ca>; Howlett,

Todd <Todd.Howlett@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; LeBlanc, Angela <Angela.LeBlanc@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Cram, Jennifer <Jennifer.Cram@nshealth.ca>

Cc: Spinney, Derek <Derek.Spinney@nshealth.ca>

Subject: update re swabbing: Northwood Incident Management Team - CRITICAL

Hello All,

I spoke with Dr. Jennifer Cram, MOH (included in this e-mail) and Ann Morgan, assigned Public Health Nurse. As of 1800 there are 80 positive COVID residents. There have been over 400 swabs completed with some residents being swabbed 2-3 times. Not all residents of NW have been swabbed. There remains some floors with no swabbing as no symptoms exist.

Dr. Cram does not believe swabbing is required tonight. She is meeting with Dr. Strang and the other MOH at 0830 and will have further direction post this call. Dr. Cram you may have additional details to share.

<< OLE Object: Picture (Device Independent Bitmap) >>

[Visit NSHA Continuing Care web page](#)

Wendy McVeigh

Director, Continuing Care, Central Zone

Provincial Responsive Behaviors Lead

Nova Scotia Health Authority

3825 Joseph Howe Drive

Halifax, NS B3L 4R6

<< OLE Object: Picture (Device Independent Bitmap) >> **I support inclusion**

Office/Cell: 

Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>

<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>

<https://novascotia.ca/coronavirus/>

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

From: Stevenson, Colin

Sent: Saturday, April 18, 2020 6:44 PM

To: Stevenson, Colin; Boutilier, Nicole; MacDonald, Madonna; Sullivan, Vickie; Stevens, Susan; Bond, Paula; Tomblin Murphy, Gail; Carr, Brendan; Howlett, Todd; McVeigh, Wendy; Alexiadis, Maria; McCormick, Bethany; LeBlanc, Angela; Grant, Krista L

Cc: Spinney, Derek

Subject: Northwood Incident Management Team - CRITICAL

When: Saturday, April 18, 2020 7:00 PM-7:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Conference Call

Importance: High

Conference Number

[REDACTED]

[REDACTED]

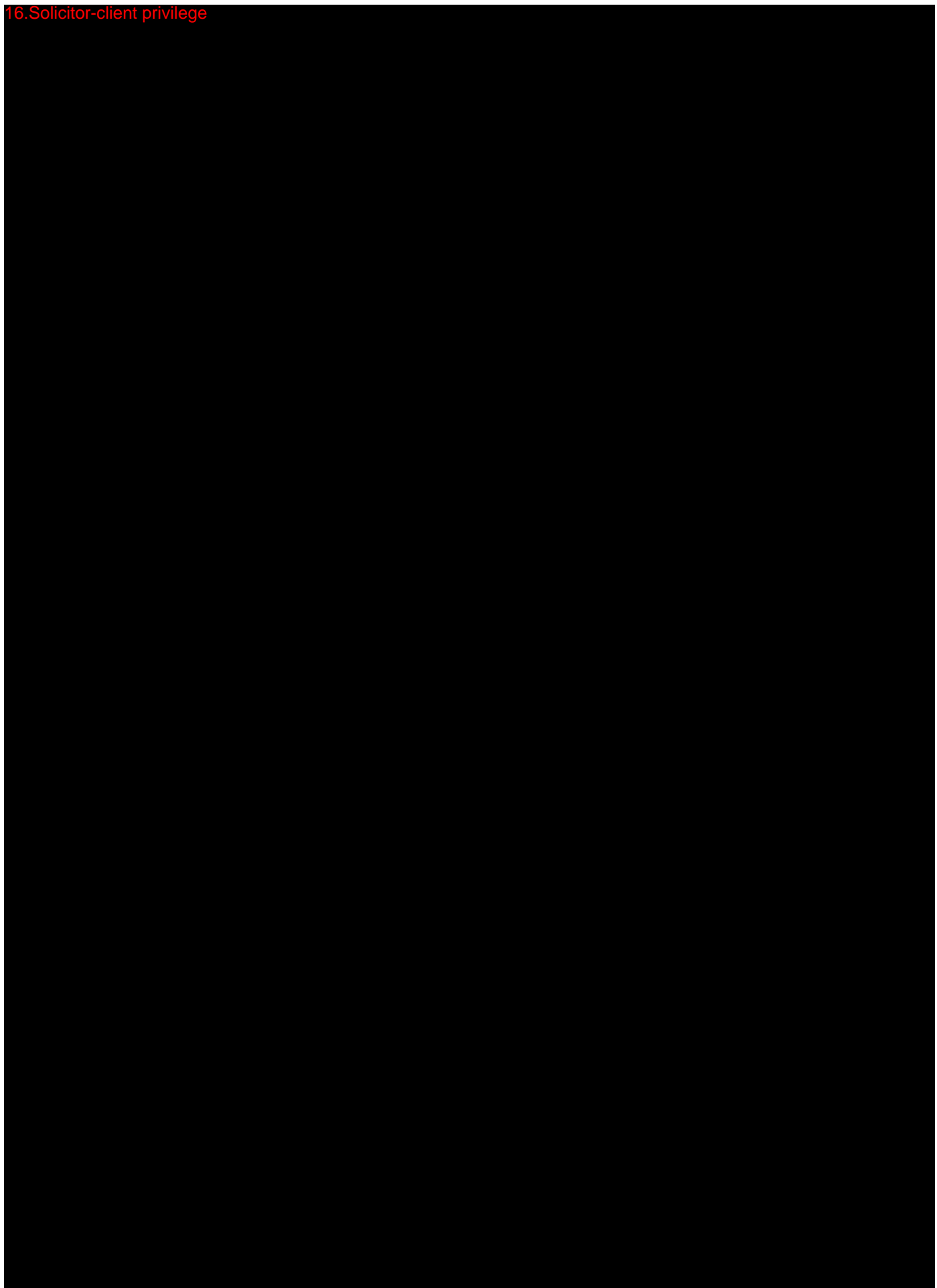
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16.Solicitor-client privilege





16.Solicitor-client privilege



From: [Veale, Jonathan](#)
To: [Stevens, Susan](#)
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP
Date: Friday, April 17, 2020 3:07:11 PM

Yes I understand. This was sent after I spoke with Colin, so I can make sure Northwood gets what it needs

J

From: Stevens, Susan <Susan.Stevens@nshealth.ca>
Sent: April 17, 2020 2:59 PM
To: Veale, Jonathan <[REDACTED]>
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP

Hi Jonathan

Alex has been handling these requests and issuing these requests. She has the details. We really need this to go out this afternoon.

Susan



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: Veale, Jonathan [<mailto:Jonathan.Veale@novascotia.ca>]
Sent: Friday, April 17, 2020 2:57 PM
To: COVID19CC <COVID19CC@novascotia.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP
Importance: High

Hi everyone. I have a few questions about this request and the process for getting HHR to

Northwood. I'd like to follow up with Angela and Vicki.

From: COVID19CC <COVID19CC@novascotia.ca>

Sent: April 17, 2020 2:27 PM

To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>

Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP

Please clarify how they will indicate interest. Who do staff and/or administrators contact?

From: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Sent: April 17, 2020 2:01 PM

To: COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>

Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>

Subject: urgent request to DHW re Northwood staffing situation - response required ASAP

Importance: High

We are requesting DHW please send an urgent request to all DHW licensed/funded long term care facilities and approved/funded home care agencies in Western, Central and Northern zones requesting nursing staff (LPN and RN), CCAs and other support staff to work at a Halifax nursing home currently requiring staff. Any staff travelling from outside of the Halifax-Dartmouth area will have their travel expenses covered. Staff are required immediately and over the weekend into next week.

From: [Emergency Operations Center, NS Health Authority](#)
To: [COVID19CC](#)
Cc: [Elliott-Lopez, Vicki](#); [Veale, Jonathan](#); [Stevenson, Colin](#); [Stevens, Susan](#); [C19TaskForce](#)
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP
Date: Friday, April 17, 2020 2:56:37 PM

Our understanding is that the Department of Health is coordinating requests for resources and would either gather the names; or have them provided direct to the facility in need.

From: COVID19CC [mailto:COVID19CC@novascotia.ca]
Sent: Friday, April 17, 2020 2:27 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
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From: [Veale, Jonathan](#)
To: [COVID19CC](#); [Emergency Operations Center, NS Health Authority](#)
Cc: [Elliott-Lopez, Vicki](#); [Stevenson, Colin](#); [Stevens, Susan](#); [C19TaskForce](#)
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP
Date: Friday, April 17, 2020 3:10:43 PM

Ok thanks everyone. I just needed a moment to check with Vicki and Colin. Please proceed with getting the request out, CC Susan on the request, and get the names to Northwood.

From: Veale, Jonathan <Jonathan.Veale@novascotia.ca>
Sent: April 17, 2020 2:57 PM
To: COVID19CC <COVID19CC@novascotia.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP
Importance: High

Hi everyone. I have a few questions about this request and the process for getting HHR to Northwood. I'd like to follow up with Angela and Vicki.

From: COVID19CC <COVID19CC@novascotia.ca>
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To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
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From: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
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To: COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: urgent request to DHW re Northwood staffing situation - response required ASAP
Importance: High

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home currently requiring staff. Any staff travelling from outside of the Halifax-Dartmouth area will have their travel expenses covered. Staff are required immediately and over the weekend into next week.

From: [Elliott-Lopez, Vicki](#)
To: [Langille, Paula D](#); [Jeffers, Fred W](#); [Lafferty, Robert](#); [Stevens, Susan](#); [Burke, Barry E](#); [Smith, Alexandra \(Health\)](#); [Cruickshank, Cindy J](#); [Sullivan, Vickie](#)
Cc: [Josie Ryan](#); [Janet Simm](#); [Sheppard, Barbara J](#); [Batstone, Angie](#)
Subject: URGENT: Apt. coming for 4:30 re Northwood needs
Date: Friday, April 17, 2020 3:32:07 PM

Hi everyone,


Can we pls meet at 4:30 today to discuss how to facilitate making a wing of a hotel operational for nursing home residents from Northwood?

Considerations for discussion (among others I'm sure I'm missing):

- Licensing
- OFM requirements
- Staffing requirements
- Equipment requirements
- Resident transfer requirements

Please make all efforts to attend or delegate to ensure we can cover everything off with one meeting before we move to action.

Thanks everyone, appreciate this very much!
Vicki

Vicki Elliott-Lopez
Senior Executive Director, Continuing Care
Department of Health and Wellness
1894 Barrington Street, Halifax, NS
(902) 424-5627


From: [Veale, Jonathan](#)
To: [Stevenson, Colin](#)
Subject: RE: confidential - draft Northwood
Date: Tuesday, May 19, 2020 1:38:41 PM

The intention is “on-going” can be interpreted for effective practical operationalization. Interpretive not prescriptive. This can be used to give you flexibility. Does that help?

From: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Sent: May 19, 2020 12:33 PM
To: Veale, Jonathan <Jonathan.Veale@novascotia.ca>
Subject: RE: confidential - draft Northwood

Thank you.

If you can get clarity on what is meant by “ongoing”. One of our questions was whether someone who works one day would require 14 day isolation.

THanks



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Veale, Jonathan [mailto:Jonathan.Veale@novascotia.ca]
Sent: Tuesday, May 19, 2020 12:23 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: confidential - draft Northwood

Colin, here's what we know about the draft right now, for your planning purposes. [This may change.](#) I have asked that this be expedited. Please do not circulate.

Purpose: Directive Regarding Healthcare Workers Deployed to Northwood Halifax

To ensure the health and safety of NSHA and IWK healthcare workers, patients and staff and to ensure the health and safety of Northwood Halifax residents, health care workers and staff, **all health care workers providing direct ongoing patient care**

at Northwood Halifax are hereby required to self-isolate for fourteen (14) days prior to returning to work at any NSHA or IWK facility.

This directive

- has been issued due to the outbreak of COVID-19 at the Northwood Halifax Campus;
- is effective as of May 7, 2020; and
- applies to all physicians, NSHA /IWK staff, healthcare workers including but not limited to Registered Nurses (RNs), Licenced Practical Nurses (LPNs) and Continuing Care Assistants (CCAs) who provide ongoing direct patient / client care at Northwood Halifax.

Mandatory requirements

- . The NSHA and IWK must communicate this directive to all physicians, healthcare workers, other staff who are currently, or may be in the future, deployed to Northwood Halifax and expected to return to work in a NSHA or IWK facility.
- . The requirements for isolation at home during the 14 day period will be consistent with the requirements for isolation at home under work isolation, which are permissive of essential trips outside the home if there are no other options providing a non-medical mask is worn.
- . All healthcare workers, staff who have been in isolation must be swabbed for COVID-19 on day twelve (12) and require a negative test result before returning to work.

From: [Veale, Jonathan](#)
To: [Emergency Operations Center, NS Health Authority](#); [Elliott Rose, Annette](#)
Cc: [Stevenson, Colin](#); [C19TaskForce](#); [COVID19CC](#); [Chouinard, Vanessa P](#); [Purcell, Angela L](#)
Subject: FW: Healthcare Workers Deployed to Northwood
Date: Tuesday, May 19, 2020 4:51:27 PM
Attachments: [Carr, Brendan and Jangaard, Krista re: NS Health re-deployed employees 19 May 20.pdf](#)

FYI – this was designed to be practical and provided some flexibility. We should stay closely coordinated amongst us on how this is implemented.

From: MacLeod, Sheila <Sheila.MacLeod@novascotia.ca>
Sent: May 19, 2020 4:25 PM
To: Veale, Jonathan <Jonathan.Veale@novascotia.ca>
Subject: Fwd: Healthcare Workers Deployed to Northwood

Begin forwarded message:

From: Deputy HealthandWellness <[REDACTED]>
Date: May 19, 2020 at 4:10:50 PM ADT
To: "Carr, Brendan" <Brendan.Carr@nshealth.ca>, "Jangaard, Krista" <Krista.Jangaard@iwk.nshealth.ca>
Cc: "Ciccarelli, Pam" <Pam.Ciccarelli@nshealth.ca>, "Skidmore, Penny" <Penny.Skidmore@iwk.nshealth.ca>, "Walsh, Anne Louise" <Anne.Walsh@novascotia.ca>
Subject: Healthcare Workers Deployed to Northwood

Good afternoon.

On behalf of Kevin Orrell, Deputy Minister of Health and Wellness, I am forwarding the attached correspondence.

Heather Miller
Coordinator
Corporate Policy, Planning and Process
Nova Scotia Health and Wellness
PO Box 488
Halifax, NS B3J 2R8

From: [Smith, Alexandra \(Health\)](#)
To: [Caroline Campbell](#); ["Karen White"](#); [Murray Stenton](#); [Stevenson, Colin](#)
Subject: Joint letter
Date: Thursday, April 23, 2020 12:57:06 PM
Attachments: [\[redacted\].png](#)
[\[redacted\].png](#)
Importance: High

Hi:

As discussed there is interest in potentially having a joint letter sent out to staff of Northwood and NSHA-there is interest in **potentially** getting this out today before 3. Would like to see prior to sending

First draft below

Despite recent claims regarding the working conditions at Northwood we want to ensure you that the safety of the residents at Northwood and the employees working at Northwood remains our top concern and primary focus. We want to assure you that all employees working at Northwood are receiving the personal protective equipment as recommended by both the World Health Organization and the expert IPAC physicians in Nova Scotia. We want to assure you that Northwood has a solid supply of personal protective equipment to keep both employees and residents safe.

Safe work environments and infection control are important at every healthcare work setting and especially those with a COVID outbreak. Safety and infection control are so important that two infection control practitioners have been onsite at Northwood each day since Sunday to support the efforts Northwood staff were already undertaking. There are appropriate and safe spaces for staff to don and doff their PPE without risk of contamination.

We always encourage employees to raise any concerns that they have with their onsite managers' immediately as they arise.

In closing, we want to thank you for the work you are doing to support the Northwood family. These grandparents, parents, aunts and uncles are benefiting from the care and support you are providing and your continued efforts to work together to provide quality care in a safe environment.

From: Caroline Campbell <[redacted]>
Sent: April 23, 2020 12:10 PM
To: Smith, Alexandra (Health) <Alexandra.Smith@novascotia.ca>; 'Karen White' <[redacted]> Murray Stenton <[redacted]>
Subject: DHW Connection from HR

**** EXTERNAL EMAIL / COURRIEL EXTERNE ****

Exercise caution when opening attachments or clicking on links / Faites preuve de prudence si vous ouvrez une pièce jointe ou cliquez sur un lien

Hi,

Karen and Murray I am connecting you via email with Alexandra, Director, Labour Relations from DHW. She may reach out for assistance.

Just wanted to give you a heads up.

Caroline Campbell
Corporate Director, People Services

[redacted] [redacted]





NORTHWOOD Corporate

130 Eileen Stubbs Avenue, Suite 1 South
Dartmouth, Nova Scotia B3B 2C4

Looking for a career with Northwood? Please visit northwoodcareers.itacit.com

From: [Stevenson, Colin](#)
To: [REDACTED]
Subject: RE: Isolation Rooms- Accommodations Available
Date: Monday, April 20, 2020 8:38:00 AM

Out of scope

When we moved staff to Northwood we were told that they are providing accommodations for their staff that are working with COVID positive residents. As a result our staff were offered the same arrangement by Northwood.

We don't have a formal MOU with Northwood to guide all policies and practices for our staff working there and are working on that – but expect we will need to abide by Northwood policies as it relates to facility issues; and our policies for clinical practice.

Colin



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Chouinard, Vanessa P [mailto:Vanessa.Chouinard@novascotia.ca]
Sent: Monday, April 20, 2020 8:26 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Fwd: Isolation Rooms- Accommodations Available

Morning,

Just checking if anything has changed on the accommodation front given the situation at Northwood? I assume it probably has to support workers and their families, but thought I should check in.

Out of scope

V

Begin forwarded message:

From: "Barro, Kimberlee X" <Kimberlee.Barro@novascotia.ca>
Date: April 20, 2020 at 7:52:01 AM ADT
To: "Chouinard, Vanessa P" <Vanessa.Chouinard@novascotia.ca>
Subject: RE: Isolation Rooms- Accommodations Available

Did you guys know about this?

From: Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>
Sent: April 20, 2020 7:44 AM
To: Barro, Kimberlee X <Kimberlee.Barro@novascotia.ca>
Subject: Re: Isolation Rooms- Accommodations Available

Thx

On Apr 20, 2020, at 7:22 AM, Barro, Kimberlee X
<Kimberlee.Barro@novascotia.ca> wrote:

Sent from my iPhone

Begin forwarded message:

From: "Watson-Creed, Gaynor" <Gaynor.Watson-Creed@novascotia.ca>
Date: April 19, 2020 at 7:54:32 PM ADT
To: "Barro, Kimberlee X" <Kimberlee.Barro@novascotia.ca>, C19TaskForce <C19TaskForce@novascotia.ca>
Cc: "Strang, Robert" <Robert.Strang@novascotia.ca>, "Cole, Teri J" <Teri.Cole@novascotia.ca>, "Holmes, Elaine" <Elaine.Holmes@novascotia.ca>
Subject: Fwd: Isolation Rooms- Accommodations Available

FYI.

Dr. Gaynor Watson-Creed

Begin forwarded message:

From: "Hendsbee, David"

<hendsbd@halifax.ca>

Date: April 19, 2020 at 4:57:33 PM ADT

To: Tracy Gates <[REDACTED]>

Cc: "Smith, Lindell" <smithli@halifax.ca>, Mayor <mayor@halifax.ca>, "Mike Savage" <Mike.Savage@halifax.ca>, "Fleck, Erica" <flecke@halifax.ca>, "Holly Gillis" <Holly.Gillis@nshealth.ca>, Claudia Sarbu <Claudia.Sarbu@nshealth.ca>

**Subject: Re:Isolation Rooms-
Accommodations Available**

**** EXTERNAL EMAIL / COURRIEL**

EXTERNE **

**Exercise caution when opening attachments
or clicking on links / Faites preuve de
prudence si vous ouvrez une pièce jointe ou
cliquez sur un lien**

THANK YOU TRACY !

I will forward this information onward to the
NSHA Central Region officials for their
attention.

Your generous offer should certainly ease some
concerns of health care workers and local long
term care facilities.

Best regards & Stay well !
David Hendsbee
HRM Councillor

Sent from my iPhone

On Apr 19, 2020, at 4:45 PM,
Tracy Gates
<[REDACTED]> wrote:

*[This email has been received from
an external person or system]*

Good afternoon
Councillor Hendsbee &
Councillor Smith, I
wanted to reach out and
let you know that we are
here for your Districts if
they require assistance.
I have four hotels that
can be used for various
reasons. The
Doubletree Dartmouth
(by MacDonald Bridge)
is available with
individual rooms or large
groups. I have reached
out to the Dartmouth
General Hospital too re:
staff, patients etc. The
Homewood Suites in
Halifax is an all suite
property with full
kitchens, grocery
service and we can take
individual inquiries but
we have also reached
out to Northwood for
assistance. The
Hampton Inn Downtown
Halifax is also available
(181 rooms) and I can
even use the Hollis
Hotel- Doubletree Suites
(120 rooms) for COVID-
19 positive if there is a
(25 room per day
requirement) which is
closed right now but can
open in 24 hours if the

need is there. My cell is
[REDACTED] if you
would like to discuss
further.

I have attached rates we
have sent out to the
Health Authority and our
essential workers but
we are prepared to help
where we can.

Gentleman keep in mind
we are in unchartered
waters so nothing is in
stone when it comes to
rate or needs - if you
have questions please
let me know.

Tracy Gates

Regional Director of Sales
Hampton Inn by Hilton™, Homewood
Suites by Hilton® and the Hollis- A
Doubletree by Hilton- Halifax Downtown
1960 Brunswick St, Halifax, NS, B3J2G7
Canada

<image001.png>

<image003.jpg>

D: 902-422-6890 • F: 902-407-9954

Email: [REDACTED]

www.Halifax.HamptonInn.com

www.Halifax.HomewoodSuites.com

www.thehollishalifaxsuites.doubletree.com

<image005.jpg>

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From: [Smith, Alexandra \(Health\)](#)
To: [Read, Carolin](#)
Cc: [Piers, Geoff W](#); [Stone, Joanne](#); [Stevenson, Colin](#)
Subject: Re: Numbers sent to Northwood
Date: Sunday, April 19, 2020 9:28:51 AM

Thank you

Sent from my iPhone

On Apr 19, 2020, at 9:25 AM, Read, Carolin <Carolin.Read@nshealth.ca> wrote:

I have not officially heard from EZ but I do know that 2 nurses volunteered from there

Sent from my iPhone

On Apr 19, 2020, at 8:29 AM, Smith, Alexandra (Health) <Alexandra.Smith@novascotia.ca> wrote:

Thank you Carolin/Geoff!

Do these include the 7 nurses Geoff references or would the 7 be in addition to this?

Alex

From: Read, Carolin <Carolin.Read@nshealth.ca>
Sent: April 18, 2020 10:28 PM
To: Smith, Alexandra (Health) <Alexandra.Smith@novascotia.ca>; Cruickshank, Cindy J <Cindy.Cruickshank@novascotia.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Fwd: Numbers sent to Northwood

CZ volunteers sent to Northwood

Sent from my iPhone

Begin forwarded message:

From: CZDeploy <CZDeploy@nshealth.ca>
Date: April 18, 2020 at 10:03:20 PM ADT
To: "Read, Carolin" <Carolin.Read@nshealth.ca>
Cc: "Monroe, Randi" <Randi.Monroe@nshealth.ca>, "Flinn, Jill" <Jill.Flinn@nshealth.ca>, "Pattison, Natalie I L"

<NatalieL.Pattison@nshealth.ca>

Subject: RE: Numbers sent to Northwood

Hi Carolin,

Here are the names of volunteers sent via the deployment centre:

Total sent 22:
Clerical/Admin 2
LPN 6
OT 2
PT 2
RN 8
Dietician 1
CCA 1

20. Personal information

Position
Administrative Assistant
Administrative Assistant
LPN
LPN
LPN
LPN
LPN
LPN
Occupational Therapist
Occupational Therapist
Physiotherapist
Physiotherapist/Behaviour Resource Consultant
Prov. Manager, CC Intake

20. Personal information

	PSW
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	Dietician

From: Read, Carolin

Sent: Saturday, April 18, 2020 7:07 PM

To: WZ Deploy <WZDeploy@nshealth.ca>; Moore, Jodi <Jodi.Moore@nshealth.ca>; LeBlanc, Alicia <Alicia.LeBlanc@nshealth.ca>; CZDeploy <CZDeploy@nshealth.ca>

Subject: Fwd: Numbers sent to Northwood

Hi All can you confirm numbers and categories of staff that have been sent to assist Northwood

Sent from my iPhone

Begin forwarded message:

From: "Smith, Alexandra (Health)"

<Alexandra.Smith@novascotia.ca>

Date: April 18, 2020 at 6:58:26 PM ADT

To: "Piers, Geoff W"

<Geoff.Piers@nshealth.ca>, "Read, Carolin"

<Carolin.Read@nshealth.ca>

Cc: "Cruickshank, Cindy J"

<Cindy.Cruickshank@novascotia.ca>

Subject: Numbers sent to Northwood

Hi Geoff /Carolyn:

Thank you for everything you have done to offer supports to LTC and especially to Northwood!

The Premier and Dr Strang will be holding a press conference tomorrow. I am guessing they will get questions during the question period asking for the specific supports that were provided. We are reaching out to organizations that redeployed staff. In preparation for these questions are you able to identify:

1. How many NSHA employees were redeployed to Northwood of what classifications (eg RN Dietary, OT)
2. How many newly hired through the portal (or perhaps not yet hired but had applied to the NSHA through the portal) were redeployed of what classifications.

A lot of great work is happening and I believe will be publicly recognized tomorrow.

Thanks

Alex

Alexandra E. Smith

Director, Health Sector Labour Relations and Compensation

Health Sector Workforce Branch

Nova Scotia Department of Health & Wellness

1894 Barrington Tower

PO Box 488

Halifax, NS B3J 2R8

Alexandra.Smith@novascotia.ca



From: [Bond, Paula](#)
To: [Stevenson, Colin](#); [MacDonald, Madonna](#)
Subject: RE: Public Health Inquiries - Testing Requirements / Northwood
Date: Thursday, May 14, 2020 7:35:41 AM

Thanks

From: Stevenson, Colin
Sent: Wednesday, May 13, 2020 4:59 PM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: FW: Public Health Inquiries - Testing Requirements / Northwood

You should now be getting an invite to the daily OCMOH calls. Please coordinate who should attend. Thanks



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Strang, Robert [<mailto:Robert.Strang@novascotia.ca>]
Sent: Wednesday, May 13, 2020 4:29 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Cc: Watson-Creed, Gaynor <Gaynor.Watson-Creed@novascotia.ca>
Subject: RE: Public Health Inquiries - Testing Requirements / Northwood












Thank you.

Rob

From: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Sent: May 13, 2020 2:01 PM
To: Strang, Robert <Robert.Strang@novascotia.ca>
Cc: Watson-Creed, Gaynor <Gaynor.Watson-Creed@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; Casey, Jill M <Jill.Casey@novascotia.ca>; Bond, Paula <Paula.Bond@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Barro, Kimberlee X <Kimberlee.Barro@novascotia.ca>

non responsive



From: Veale, Jonathan [[mailto:](#) 
Sent: Tuesday, April 21, 2020 5:34 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: COVID19CC < C19TaskForce <
Knowles, Ruby M < Chouinard, Vanessa P
< Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Elliott-
Lopez, Vicki < Orrell, Kevin <
Lagasse, Jeannine < C19TaskForce
< Batstone, Angie < Grimm,
Christine Z <

Subject: REQUEST FOR ACTION: Provincial Response Planning for LTC

Dear NSHA EOC:

Over the past few days we have learned from the implementation of the LTC clinical pathways at Northwood. DHW has reflected that we should revisit our planning assumptions and discuss any shifts or add-ons to the LTC clinical pathways. By way of this message, we are requesting a subsequent discussion about the provincial response plan to LTC. Essentially we are looking to revalidate our planning assumptions and response plans.

Action: We are looking for confirmation on participating in this discussion and feedback on the agenda.

Timeline: Meeting on Friday or Monday

Proposed Agenda

- Discussion of lessons learned from current outbreaks (i.e. Northwood)
 - Clinical approach
 - HHR/HR – clinical, IPAC, OHS, site coordination, administration, etc.
 - Supply and PPE
- Reflection questions/discussion:
 - **Quality/Clinical Pathways.** Our planning assumption that we will face an surge in hospitals may need to be revisited as we flatten the curve and observe low volumes/occupancy in hospitals. It also appears that this wave of the pandemic will impact LTC more than hospital settings. What is the appropriate

approach to caring for (COVID19) residents in LTC? Is our transfer policy still appropriate?

- **Sustainability/Capacity.** NSHA is leading/supporting on 8 LTC outbreaks. What is NSHA's capacity should this increase? How might we improve the sustainability of our collective approach?
- **Integration/Whole System Approach.** We have effectively converted Northwood into a hospital annex. Is this approach suitable elsewhere (other zones)? Should we be looking at identifying other locations to "hospitalizing LTC" and hotels for recovered patients? Previously we discussed converting RCF to LTC, given the current approach is this still recommended?

From: [Elliott-Lopez, Vicki](#)
To: [Janet Simm](#); [Lafferty, Robert](#); [Wentzell, Andrew W](#)
Cc: [Josie Ryan](#); [Jeffers, Fred W](#); [MacDonald, Jonathan E](#); [MacMaster, Laura E](#); [Griffith, Adele R](#); [Shannon MacEwan Smith](#); [Burke, Barry F](#); [McVeigh, Wendy](#); [Langille, Paula D](#); [Stevens, Susan](#); [Baird, Sara A](#); [Fuller, Adrian M](#); [Jones, Shelley R \(Health\)](#); [Caroline Campbell](#); [Therien, Krystal A](#); [Gail Giffin](#); [Brandon Meisner](#); [Steve Bowser](#); [Barb Cross](#); [Leslie Bellefontaine](#)
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)
Date: Saturday, April 18, 2020 4:09:12 PM

335 John Savage Avenue

From: Janet Simm <[REDACTED]>
Sent: April 18, 2020 4:06 PM
To: Elliott-Lopez, Vicki <[REDACTED]> Lafferty, Robert <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]> McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]> Caroline Campbell <[REDACTED]> Therien, Krystal A <[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner <[REDACTED]> Steve Bowser <[REDACTED]> Barb Cross <[REDACTED]> Leslie Bellefontaine <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi Vicki- do you have a street address so we can be sure we are all on the same page!

From: Elliott-Lopez, Vicki [[mailto:\[REDACTED\]](#)]
Sent: April 18, 2020 4:03 PM
To: Janet Simm <[REDACTED]> Lafferty, Robert <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]> Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]> Caroline Campbell <[REDACTED]> Therien, Krystal A <[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner <[REDACTED]> Steve Bowser <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

There is a request to start moving people tomorrow. To clarify, we are moving people to the Holiday

Inn, not the Best Western.

Please let us know what you need to make this happen and we will be there to assist!

V.

From: Janet Simm <[REDACTED]>
Sent: April 18, 2020 3:52 PM
To: Elliott-Lopez, Vicki <[REDACTED]> Lafferty, Robert <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]> McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]> Caroline Campbell <[REDACTED]> Therien, Krystal A <[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner <[REDACTED]> Steve Bowser <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

FANTASTIC- Brandon and Steve can you start to mobilize and connect with Shannex re their movers. I will connect with the team to get access to the list of needs!

From: Elliott-Lopez, Vicki [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: April 18, 2020 3:51 PM
To: Janet Simm <[REDACTED]> Lafferty, Robert <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]> Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]> Caroline Campbell <[REDACTED]> Therien, Krystal A <[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner <[REDACTED]> Steve Bowser <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

OFM is good with this location, so let's move on equipment. I am getting the contact info for 2 people who are on site at the Best Western that can help with moving.

From: Janet Simm <[REDACTED]>

Sent: April 18, 2020 3:39 PM

To: Elliott-Lopez, Vicki <[REDACTED]> Lafferty, Robert

<[REDACTED]> Wentzell, Andrew W <[REDACTED]>

Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,

Jonathan E <[REDACTED]> MacMaster, Laura E

<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon

MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>

McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>

Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,

Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>

Caroline Campbell <[REDACTED]> Therien, Krystal A

<[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner

<[REDACTED]> Steve Bowser <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

We have a moving company on standby- from Shannex.

Steve Bowser and Brandon Meisner are on standby waiting for the supply/equipment list to get it mobilized

From: Elliott-Lopez, Vicki [[mailto:\[REDACTED\]](mailto:[REDACTED])]

Sent: April 18, 2020 3:36 PM

To: Lafferty, Robert <[REDACTED]> Wentzell, Andrew W

<[REDACTED]> Janet Simm <[REDACTED]>

Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,

Jonathan E <[REDACTED]> MacMaster, Laura E

<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon

MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>

Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]>

Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,

Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>

Caroline Campbell <[REDACTED]> Therien, Krystal A

<[REDACTED]> Gail Giffin <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi folks,

Once we nail this down, we need a plan for moving in and setting up equipment on site. Janet/Josie, do you need a moving company called to help with this? There are a couple of people at the hotel that DHW has on site that can help with this as well. We could start that later today if possible.

From: Lafferty, Robert <[REDACTED]>

Sent: April 18, 2020 2:37 PM

To: Elliott-Lopez, Vicki <[REDACTED]> Wentzell, Andrew W

<[REDACTED]> Janet Simm <[REDACTED]>

Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon
MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,
Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Therien, Krystal A
<[REDACTED]> Gail Giffin <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi everyone,

I just spoke with Ron Miller, general manager for Holiday Inn and Best Western. He thinks that they should be able to accommodate at one of these two hotels. Ron is at the hotel now and can meet licensing, OFM, Public Health and NW at the Best Western (15 Spectacle Lake in Dartmouth). Hoping everyone is able to make their way there now? He suggested Best Western first, and if need be could look at Holiday Inn around the corner. Best Western has kitchen, however, can cater over to Holiday Inn.

Hopefully people can make there was to Best Western now. Thanks everyone.

Bob Lafferty, BSc., BSW, RSW
Director, Investigation & Compliance
Client Services and Contract Administration
Department of Health & Wellness
PO Box 488
Halifax, NS B3J 2R8
Tel: 902-424-0435
Fax: 902-428-5744
Email: [REDACTED]

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From: Elliott-Lopez, Vicki <[REDACTED]>
Sent: Saturday, April 18, 2020 2:31 PM
To: Wentzell, Andrew W <[REDACTED]> Janet Simm <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> Lafferty,
Robert <[REDACTED]> MacDonald, Jonathan E
<[REDACTED]> MacMaster, Laura E <[REDACTED]>
Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith

<[REDACTED] Burke, Barry F <[REDACTED] McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED] Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED] Fuller, Adrian M
<[REDACTED] Jones, Shelley R (Health) <[REDACTED] Caroline
Campbell <[REDACTED] Therien, Krystal A <[REDACTED]
Gail Giffin <[REDACTED]

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

There was miscommunication, as Cathy thought OFM was making arrangements. Bob is now coordinating this. Thank you Bob.

From: Wentzell, Andrew W <[REDACTED]
Sent: April 18, 2020 2:29 PM
To: Janet Simm <[REDACTED]
Cc: Josie Ryan <[REDACTED] Elliott-Lopez, Vicki <[REDACTED]
Jeffers, Fred W <[REDACTED] Lafferty, Robert <[REDACTED]
MacDonald, Jonathan E <[REDACTED] MacMaster, Laura E
<[REDACTED] Griffith, Adele R <[REDACTED] Shannon
MacEwan Smith <[REDACTED] Burke, Barry F <[REDACTED]
McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED] Fuller,
Adrian M <[REDACTED] Jones, Shelley R (Health) <[REDACTED]
Caroline Campbell <[REDACTED] Therien, Krystal A
<[REDACTED] Gail Giffin <[REDACTED]
Subject: Re: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Ok let me know if we are going there soon so i do not hang around all day and get in trouble

Sent from my iPhone

On Apr 18, 2020, at 2:23 PM, Janet Simm <[REDACTED] wrote:

We have a relationship with the 4 Points Sheraton- I have copied Caroline- she has made those connections.

Janet

From: Wentzell, Andrew W [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: April 18, 2020 2:21 PM
To: Josie Ryan <[REDACTED]
Cc: Elliott-Lopez, Vicki <[REDACTED] Jeffers, Fred W
<[REDACTED] Lafferty, Robert <[REDACTED]
MacDonald, Jonathan E <[REDACTED] MacMaster, Laura E

<[REDACTED] Griffith, Adele R <[REDACTED]
Shannon MacEwan Smith <[REDACTED] Burke, Barry F
<[REDACTED] Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Janet
Simm <[REDACTED] Langille, Paula D <[REDACTED]
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A
<[REDACTED] Fuller, Adrian M <[REDACTED] Jones,
Shelley R (Health) <[REDACTED] Therien, Krystal A
<[REDACTED] Gail Giffin <[REDACTED]
Subject: Re: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Any suggestions or decisions yet as to where we may look at next?

Sent from my iPhone

On Apr 18, 2020, at 1:51 PM, Josie Ryan <[REDACTED] wrote:

**** EXTERNAL EMAIL / COURRIEL EXTERNE ****

Exercise caution when opening attachments or clicking on links /
Faites preuve de prudence si vous ouvrez une pièce jointe ou cliquez
sur un lien

Let us know and we will be ready.

From: Elliott-Lopez, Vicki <[REDACTED]
Sent: April 18, 2020 1:03 PM
To: Jeffers, Fred W <[REDACTED] Lafferty, Robert
<[REDACTED]
Cc: MacDonald, Jonathan E <[REDACTED]
MacMaster, Laura E <[REDACTED] Griffith, Adele R
<[REDACTED] Wentzell, Andrew W
<[REDACTED] Josie Ryan <[REDACTED]
Burke, Barry F <[REDACTED] Wendy McVeigh
<wendy.mcveigh@nshealth.ca>; Janet Simm <[REDACTED]
Langille, Paula D <[REDACTED] Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]
Fuller, Adrian M <[REDACTED] Jones, Shelley R (Health)
<[REDACTED] Therien, Krystal A
<[REDACTED]
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Bob and team, can you pls contact Ron and set up a tour for when your
teams are available? And also the Westin please, they too are awaiting a
call. We have been asked to land this today.

<image001.jpg>

From: Jeffers, Fred W <[REDACTED]>
Sent: April 18, 2020 12:54 PM
To: Lafferty, Robert <[REDACTED]>
Cc: MacDonald, Jonathan E <[REDACTED]>
MacMaster, Laura E <[REDACTED]> Griffith, Adele R
<[REDACTED]> Wentzell, Andrew W
<[REDACTED]> Josie Ryan <[REDACTED]>
Burke, Barry F <[REDACTED]> Elliott-Lopez, Vicki
<[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm <[REDACTED]>
Langille, Paula D <[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]>
Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health)
<[REDACTED]> Therien, Krystal A
<[REDACTED]>
Subject: Re: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi folks.

Just heard from Cathy Berliner.

Please contact:

Ron Miller, general manager for Holiday Inn at [REDACTED]
[REDACTED]

Newer facility that may be able to accommodate this.

Fred

Fred Jeffers, CFI-II, CBO-II, CFI
Fire Marshal

NS Office of the Fire Marshal
Department of Municipal Affairs & Housing
1505 Barrington St, 8 North
PO Box 231 Halifax
B3J 2M4

902-424-5721 (Office)
902-424-3239 (Fax)

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On Apr 18, 2020, at 11:45 AM, Lafferty, Robert

<[REDACTED]> wrote:

Hi folks,

Just spoke with Laura and wanted to send brief update. Some of you would already be aware. There are challenges with the Lord Nelson, particularly some fire and life safety concerns given the age of the facility...i.e no sprinkler system, lack of fire compartment walls, no fire service elevator, bathroom accessibility, etc.

As such, I understand Josie and her team are exploring other hotel options. OFM, Licensing, and Public Health are on stand by to assist with another site inspection as needed. I will continue to update to ensure everyone is in the loop.

Bob Lafferty, BSc., BSW, RSW
Director, Investigation & Compliance
Client Services and Contract Administration
Department of Health & Wellness
PO Box 488
Halifax, NS B3J 2R8
Tel: 902-424-0435
Fax: 902-428-5744
Email: [REDACTED]

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system. Thank you.

From: MacDonald, Jonathan E
<[REDACTED]>
Sent: Friday, April 17, 2020 7:12 PM
To: Lafferty, Robert <[REDACTED]>
MacMaster, Laura E <[REDACTED]>
Griffith, Adele R <[REDACTED]> Wentzell,
Andrew W <[REDACTED]> Josie Ryan
<[REDACTED]>
Cc: Burke, Barry F <[REDACTED]> Elliott-
Lopez, Vicki <[REDACTED]> Jeffers,
Fred W <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm
<[REDACTED]> Langille, Paula D
<[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A
<[REDACTED]> Fuller, Adrian M
<[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re:
Northwood)

Thanks Bob!

Sara Baird (a senior Public Health Officer with NSE) will be at the Lord Nelson for 10:30. I included Sara on this email, so that she is in the loop.

If there is anything you need, please don't hesitate to call.

Jonathan

From: Lafferty, Robert <[REDACTED]>
Sent: Friday, April 17, 2020 6:45 PM
To: MacMaster, Laura E <[REDACTED]>
Griffith, Adele R <[REDACTED]> Wentzell,
Andrew W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> Josie
Ryan <[REDACTED]>
Cc: Burke, Barry F <[REDACTED]> Elliott-
Lopez, Vicki <[REDACTED]> Jeffers,
Fred W <[REDACTED]> McVeigh, Wendy

<Wendy.McVeigh@nshealth.ca>; Janet Simm

<[REDACTED] Langille, Paula D

<[REDACTED] Stevens, Susan

<Susan.Stevens@nshealth.ca>

Subject: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi Everyone,

Thank you for making yourselves available tomorrow to assist with moving this undertaking along. We have representation from Licensing, Office of the Fire Marshal and a Public Health Inspector confirmed. The plan is to meet at the Lord Nelson at 10:30am tomorrow (Saturday, April 18th). Josie will be there as well from Northwood.

I copied a few others, so they are aware of the plan.

Thanks again.

Bob

Bob Lafferty, BSc., BSW, RSW
Director, Investigation & Compliance
Client Services and Contract Administration
Department of Health & Wellness
PO Box 488
Halifax, NS B3J 2R8
Tel: 902-424-0435
Fax: 902-428-5744
Email: [REDACTED]

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From: [Janet Simm](#)
To: [Stevens, Susan](#); ["Lafferty, Robert"](#); [Elliott-Lopez, Vicki](#); [Wentzell, Andrew W](#)
Cc: [Josie Ryan](#); [Jeffers, Fred W](#); [MacDonald, Jonathan E](#); [MacMaster, Laura E](#); [Griffith, Adele R](#); [Shannon MacEwan Smith](#); [Burke, Barry F](#); [McVeigh, Wendy](#); [Langille, Paula D](#); [Baird, Sara A](#); [Fuller, Adrian M](#); [Jones, Shelley R \(Health\)](#); [Caroline Campbell](#); [Gail Giffin](#); [Brandon Meisner](#); [Steve Bowser](#); [Berliner, Catherine A](#)
Subject: RE: Northwood COVID-19 Recovery Unit; Holiday Inn - 335 John Savage Avenue
Date: Saturday, April 18, 2020 7:22:38 PM

Hi folks,

I was just notified by the DM that there is an emergency team being deployed from NSHA to assist. They will be onsite in Halifax at 9 am tomorrow.

Janet

From: Stevens, Susan [mailto:Susan.Stevens@nshealth.ca]
Sent: April 18, 2020 6:37 PM
To: 'Lafferty, Robert' <[REDACTED]> Janet Simm <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]> Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Baird, Sara A <[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]> Caroline Campbell <[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner <[REDACTED]> Steve Bowser <[REDACTED]> Berliner, Catherine A <[REDACTED]>
Subject: RE: Northwood COVID-19 Recovery Unit; Holiday Inn - 335 John Savage Avenue

Thanks Bob. Great news. Janet, Bob, Vicki, please let us know if we can assist in any way.
Susan

From: Lafferty, Robert [mailto:[\[REDACTED\]](mailto:[REDACTED])]
Sent: Saturday, April 18, 2020 6:35 PM
To: Janet Simm <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]> McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,

Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Gail Giffin <[REDACTED]> Brandon
Meisner <[REDACTED]> Steve Bowser <[REDACTED]> Berliner,
Catherine A <[REDACTED]>

Subject: RE: Northwood COVID-19 Recovery Unit; Holiday Inn - 335 John Savage Avenue

Hey folks,

Quick update. I understand the team at the Holiday Inn made out very well. Very happy to hear!!! It was decided that the 2nd floor would work best as it has 2 accessible rooms which have large walk in shower rooms. As this hotel is newer, lighting is brighter and rooms a little wider. I under there may be some challenges bringing in hospital beds in and that this is being looked into.

I am told that Environment and OFM are also good with the location.

Thank you for everyone pulling together today to make this happen! Very much appreciated.

Bob

Bob Lafferty, BSc., BSW, RSW
Director, Investigation & Compliance
Client Services and Contract Administration
Department of Health & Wellness
PO Box 488
Halifax, NS B3J 2R8
Tel: 902-424-0435
Fax: 902-428-5744
Email: [REDACTED]

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From: Janet Simm <[REDACTED]>
Sent: Saturday, April 18, 2020 5:27 PM
To: Elliott-Lopez, Vicki <[REDACTED]> Lafferty, Robert
<[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon

MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,
Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Gail Giffin <[REDACTED]> Brandon
Meisner <[REDACTED]> Steve Bowser <[REDACTED]> Berliner,
Catherine A <[REDACTED]>
Subject: RE: Northwood COVID-19 Recovery Unit; Holiday Inn - 335 John Savage Avenue

Hi Vicki,

The list of equipment/supplies has just started to come in. We are on it. We will let you know if we have any gaps!

Janet

From: Janet Simm
Sent: April 18, 2020 4:59 PM
To: 'Elliott-Lopez, Vicki' <[REDACTED]> Lafferty, Robert
<[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon
MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,
Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Gail Giffin <[REDACTED]> Brandon
Meisner <[REDACTED]> Steve Bowser <[REDACTED]> Berliner,
Catherine A <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

I understand the team is still on site- we are awaiting the list...we have a team on standby that is very anxious to get moving!!!

From: Elliott-Lopez, Vicki [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: April 18, 2020 4:55 PM
To: Janet Simm <[REDACTED]> Lafferty, Robert <[REDACTED]> Wentzell,
Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon
MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,

Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Gail Giffin <[REDACTED]> Brandon
Meisner <[REDACTED]> Steve Bowser <[REDACTED]> Berliner,
Catherine A <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Janet, do we have an ETA for equipment?

From: Janet Simm <[REDACTED]>

Sent: April 18, 2020 3:52 PM

To: Elliott-Lopez, Vicki <[REDACTED]> Lafferty, Robert

<[REDACTED]> Wentzell, Andrew W <[REDACTED]>

Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,

Jonathan E <[REDACTED]> MacMaster, Laura E

<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon

MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>

McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>

Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,

Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>

Caroline Campbell <[REDACTED]> Therien, Krystal A

<[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner

<[REDACTED]> Steve Bowser <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

FANTASTIC- Brandon and Steve can you start to mobilize and connect with Shannex re their movers.
I will connect with the team to get access to the list of needs!

From: Elliott-Lopez, Vicki [[mailto:\[REDACTED\]](mailto:[REDACTED])]

Sent: April 18, 2020 3:51 PM

To: Janet Simm <[REDACTED]> Lafferty, Robert <[REDACTED]> Wentzell,

Andrew W <[REDACTED]>

Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,

Jonathan E <[REDACTED]> MacMaster, Laura E

<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon

MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>

Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]>

Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,

Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>

Caroline Campbell <[REDACTED]> Therien, Krystal A

<[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner

<[REDACTED]> Steve Bowser <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

OFM is good with this location, so let's move on equipment. I am getting the contact info for 2 people who are on site at the Best Western that can help with moving.

From: Janet Simm <[REDACTED]>
Sent: April 18, 2020 3:39 PM
To: Elliott-Lopez, Vicki <[REDACTED]> Lafferty, Robert
<[REDACTED]> Wentzell, Andrew W <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon
MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,
Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Therien, Krystal A
<[REDACTED]> Gail Giffin <[REDACTED]> Brandon Meisner
<[REDACTED]> Steve Bowser <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

We have a moving company on standby- from Shannex.

Steve Bowser and Brandon Meisner are on standby waiting for the supply/equipment list to get it mobilized

From: Elliott-Lopez, Vicki [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: April 18, 2020 3:36 PM
To: Lafferty, Robert <[REDACTED]> Wentzell, Andrew W
<[REDACTED]> Janet Simm <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon
MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,
Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Therien, Krystal A
<[REDACTED]> Gail Giffin <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi folks,

Once we nail this down, we need a plan for moving in and setting up equipment on site. Janet/Josie, do you need a moving company called to help with this? There are a couple of people at the hotel that DHW has on site that can help with this as well. We could start that later today if possible.

From: Lafferty, Robert <[REDACTED]>

Sent: April 18, 2020 2:37 PM

To: Elliott-Lopez, Vicki <[REDACTED]> Wentzell, Andrew W <[REDACTED]>
<[REDACTED]> Janet Simm <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E <[REDACTED]>
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Therien, Krystal A <[REDACTED]>
<[REDACTED]> Gail Giffin <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi everyone,

I just spoke with Ron Miller, general manager for Holiday Inn and Best Western. He thinks that they should be able to accommodate at one of these two hotels. Ron is at the hotel now and can meet licensing, OFM, Public Health and NW at the Best Western (15 Spectacle Lake in Dartmouth). Hoping everyone is able to make their way there now? He suggested Best Western first, and if need be could look at Holiday Inn around the corner. Best Western has kitchen, however, can cater over to Holiday Inn.

Hopefully people can make there was to Best Western now. Thanks everyone.

Bob Lafferty, BSc., BSW, RSW
Director, Investigation & Compliance
Client Services and Contract Administration
Department of Health & Wellness
PO Box 488
Halifax, NS B3J 2R8
Tel: 902-424-0435
Fax: 902-428-5744
Email: [REDACTED]

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From: Elliott-Lopez, Vicki <[REDACTED]>
Sent: Saturday, April 18, 2020 2:31 PM
To: Wentzell, Andrew W <[REDACTED]> Janet Simm <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Jeffers, Fred W <[REDACTED]> Lafferty,

Robert <[REDACTED]> MacDonald, Jonathan E
<[REDACTED]> MacMaster, Laura E <[REDACTED]>
Griffith, Adele R <[REDACTED]> Shannon MacEwan Smith
<[REDACTED]> Burke, Barry F <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller, Adrian M
<[REDACTED]> Jones, Shelley R (Health) <[REDACTED]> Caroline
Campbell <[REDACTED]> Therien, Krystal A <[REDACTED]>
Gail Giffin <[REDACTED]>

Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

There was miscommunication, as Cathy thought OFM was making arrangements. Bob is now coordinating this. Thank you Bob.

From: Wentzell, Andrew W <[REDACTED]>
Sent: April 18, 2020 2:29 PM
To: Janet Simm <[REDACTED]>
Cc: Josie Ryan <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]>
Jeffers, Fred W <[REDACTED]> Lafferty, Robert <[REDACTED]>
MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Shannon
MacEwan Smith <[REDACTED]> Burke, Barry F <[REDACTED]>
McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]> Fuller,
Adrian M <[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Caroline Campbell <[REDACTED]> Therien, Krystal A
<[REDACTED]> Gail Giffin <[REDACTED]>

Subject: Re: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Ok let me know if we are going there soon so i do not hang around all day and get in trouble

Sent from my iPhone

On Apr 18, 2020, at 2:23 PM, Janet Simm <[REDACTED]> wrote:

We have a relationship with the 4 Points Sheraton- I have copied Caroline- she has made those connections.

Janet

From: Wentzell, Andrew W [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: April 18, 2020 2:21 PM
To: Josie Ryan <[REDACTED]>

Cc: Elliott-Lopez, Vicki <[REDACTED]> Jeffers, Fred W
<[REDACTED]> Lafferty, Robert <[REDACTED]>
MacDonald, Jonathan E <[REDACTED]> MacMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]>
Shannon MacEwan Smith <[REDACTED]> Burke, Barry F
<[REDACTED]> Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Janet
Simm <[REDACTED]> Langille, Paula D <[REDACTED]>
Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A
<[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones,
Shelley R (Health) <[REDACTED]> Therien, Krystal A
<[REDACTED]> Gail Giffin <[REDACTED]>
Subject: Re: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Any suggestions or decisions yet as to where we may look at next?

Sent from my iPhone

On Apr 18, 2020, at 1:51 PM, Josie Ryan <[REDACTED]> wrote:

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sur un lien

Let us know and we will be ready.

From: Elliott-Lopez, Vicki <[REDACTED]>
Sent: April 18, 2020 1:03 PM
To: Jeffers, Fred W <[REDACTED]> Lafferty, Robert
<[REDACTED]>
Cc: MacDonald, Jonathan E <[REDACTED]>
MacMaster, Laura E <[REDACTED]> Griffith, Adele R
<[REDACTED]> Wentzell, Andrew W
<[REDACTED]> Josie Ryan <[REDACTED]>
Burke, Barry F <[REDACTED]> Wendy McVeigh
<wendy.mcveigh@nshealth.ca>; Janet Simm <[REDACTED]>
Langille, Paula D <[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]>
Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health)
<[REDACTED]> Therien, Krystal A
<[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Bob and team, can you pls contact Ron and set up a tour for when your teams are available? And also the Westin please, they too are awaiting a call. We have been asked to land this today.

<image001.jpg>

From: Jeffers, Fred W <[REDACTED]>
Sent: April 18, 2020 12:54 PM
To: Lafferty, Robert <[REDACTED]>
Cc: MacDonald, Jonathan E <[REDACTED]>
MacMaster, Laura E <[REDACTED]> Griffith, Adele R
<[REDACTED]> Wentzell, Andrew W
<[REDACTED]> Josie Ryan <[REDACTED]>
Burke, Barry F <[REDACTED]> Elliott-Lopez, Vicki
<[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm <[REDACTED]>
Langille, Paula D <[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A <[REDACTED]>
Fuller, Adrian M <[REDACTED]> Jones, Shelley R (Health)
<[REDACTED]> Therien, Krystal A
<[REDACTED]>
Subject: Re: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

Hi folks.

Just heard from Cathy Berliner.

Please contact:

Ron Miller, general manager for Holiday Inn at 335 John Savage Avenue,
number is (902)-219-4933

Newer facility that may be able to accommodate this.

Fred

Fred Jeffers, CFI-II, CBO-II, CFI
Fire Marshal

NS Office of the Fire Marshal
Department of Municipal Affairs & Housing
1505 Barrington St, 8 North
PO Box 231 Halifax
B3J 2M4

902-424-5721 (Office)

902-424-3239 (Fax)

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On Apr 18, 2020, at 11:45 AM, Lafferty, Robert

<[REDACTED]> wrote:

Hi folks,

Just spoke with Laura and wanted to send brief update. Some of you would already be aware. There are challenges with the Lord Nelson, particularly some fire and life safety concerns given the age of the facility...i.e no sprinkler system, lack of fire compartment walls, no fire service elevator, bathroom accessibility, etc.

As such, I understand Josie and her team are exploring other hotel options. OFM, Licensing, and Public Health are on stand by to assist with another site inspection as needed. I will continue to update to ensure everyone is in the loop.

Bob Lafferty, BSc., BSW, RSW
Director, Investigation & Compliance
Client Services and Contract Administration
Department of Health & Wellness
PO Box 488
Halifax, NS B3J 2R8
Tel: 902-424-0435
Fax: 902-428-5744
Email: [REDACTED]

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the intended recipient, please do not open any attachments and notify the sender by e-mail or telephone that you have received the message. After notifying the sender, delete the e-mail from your system. Thank you.

From: MacDonald, Jonathan E
<[REDACTED]>
Sent: Friday, April 17, 2020 7:12 PM
To: Lafferty, Robert <[REDACTED]>
MacMaster, Laura E <[REDACTED]>
Griffith, Adele R <[REDACTED]> Wentzell,
Andrew W <[REDACTED]> Josie Ryan
<[REDACTED]>
Cc: Burke, Barry F <[REDACTED]> Elliott-
Lopez, Vicki <[REDACTED]> Jeffers,
Fred W <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm
<[REDACTED]> Langille, Paula D
<[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>; Baird, Sara A
<[REDACTED]> Fuller, Adrian M
<[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re:
Northwood)

Thanks Bob!

Sara Baird (a senior Public Health Officer with NSE) will be at the Lord Nelson for 10:30. I included Sara on this email, so that she is in the loop.

If there is anything you need, please don't hesitate to call.

Jonathan

From: Lafferty, Robert <[REDACTED]>
Sent: Friday, April 17, 2020 6:45 PM
To: MacMaster, Laura E <[REDACTED]>
Griffith, Adele R <[REDACTED]> Wentzell,
Andrew W <[REDACTED]> MacDonald,
Jonathan E <[REDACTED]> Josie

Ryan <[REDACTED]>
Cc: Burke, Barry F <[REDACTED]> Elliott-
Lopez, Vicki <[REDACTED]> Jeffers,
Fred W <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm
<[REDACTED]> Langille, Paula D
<[REDACTED]> Stevens, Susan
<Susan.Stevens@nshealth.ca>
Subject: Lord Nelson visit - April 18th, 10:30 am (Re:
Northwood)

Hi Everyone,
Thank you for making yourselves available tomorrow to
assist with moving this undertaking along. We have
representation from Licensing, Office of the Fire Marshal
and a Public Health Inspector confirmed. The plan is to
meet at the Lord Nelson at 10:30am tomorrow
(Saturday, April 18th). Josie will be there as well from
Northwood.

I copied a few others, so they are aware of the plan.

Thanks again.

Bob

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system. Thank you.*

From: [MacDonald, Madonna](#)
To: [Sullivan, Vickie](#); [Stevens, Susan](#)
Subject: RE: Update on Northwood relocation
Date: Saturday, April 18, 2020 2:16:30 PM

Noted.

From: Sullivan, Vickie
Sent: Saturday, April 18, 2020 1:57 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: RE: Update on Northwood relocation

Thanks Susan – will let Randi know

From: Stevens, Susan
Sent: Saturday, April 18, 2020 1:49 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: RE: Update on Northwood relocation

They are looking at the Westin and Best Western hotels later today. You may want to be prepared for an ask later today or tomorrow about the rehab space.
Susan

From: Sullivan, Vickie
Sent: Saturday, April 18, 2020 12:57 PM
To: Stevens, Susan <Susan.Stevens@nshealth.ca>
Cc: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Subject: RE: Update on Northwood relocation

Thanks Susan – let me know if there is anything we can do to assist

Vickie

From: Stevens, Susan
Sent: Saturday, April 18, 2020 11:49 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Update on Northwood relocation

FYI

From: Lafferty, Robert [<mailto:> [REDACTED]]

Sent: Saturday, April 18, 2020 11:45 AM

To: MacDonald, Jonathan E <[REDACTED]> McMaster, Laura E
<[REDACTED]> Griffith, Adele R <[REDACTED]> Wentzell,
Andrew W <[REDACTED]> Josie Ryan <[REDACTED]>
Cc: Burke, Barry F <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]>
[REDACTED] Jeffers, Fred W <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm <[REDACTED]> Langille, Paula D
<[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A
<[REDACTED]> Fuller, Adrian M <[REDACTED]> Jones, Shelley R
(Health) <[REDACTED]> Therien, Krystal A <[REDACTED]>
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<[REDACTED]> Griffith, Adele R <[REDACTED]> Wentzell,
Andrew W <[REDACTED]> Josie Ryan <[REDACTED]>

Cc: Burke, Barry F <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]>
[REDACTED] Jeffers, Fred W <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm <[REDACTED]> Langille, Paula D
<[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>; Baird, Sara A
<[REDACTED]> Fuller, Adrian M <[REDACTED]>
Subject: RE: Lord Nelson visit - April 18th, 10:30 am (Re: Northwood)

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Sent: Friday, April 17, 2020 6:45 PM
To: MacMaster, Laura E <[REDACTED]> Griffith, Adele R
<[REDACTED]> Wentzell, Andrew W <[REDACTED]>
MacDonald, Jonathan E <[REDACTED]> Josie Ryan <[REDACTED]>
Cc: Burke, Barry F <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]>
[REDACTED] Jeffers, Fred W <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Janet Simm <[REDACTED]> Langille, Paula D
<[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>
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Bob

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Long Term Care Program Requirements: Nursing Homes & Residential Care Facilities

February 2019

**Policy: Long Term Care Program Requirements:
Nursing Homes & Residential Care Facilities**

Approval Date: March 19, 2019

Effective Date: Effective as of approval date

Approved by: ____original signed by Denise Perret, Deputy Minister____

Denise Perret
Deputy Minister, Health and Wellness

Version Control:

Version Control		
Policy	Approval Date	Effective Date
Long Term Care Facility Program Requirements	2007	2007
Long Term Care Program Requirements: Nursing Homes & Residential Care Facilities		April 1, 2016
Long Term Care Program Requirements: Nursing Homes & Residential Care Facilities	March 19, 2019	Effective as of approval date

**Program Requirements:
Nursing Homes and Residential Care Facilities
Maintenance & Feedback**

The Nova Scotia Department of Health and Wellness (DHW) is responsible for maintaining the Long Term Care Program Requirements: Nursing Homes and Residential Care Facilities document and for keeping it current and relevant. The Continuing Care Branch undertakes this maintenance role in consultation with long term care licensees and the Nova Scotia Health Authority (NSHA).

If you identify any errors in this document, or if you have suggestions for revisions to this or future versions, please complete the form on the following page, providing as much detail as possible, and forward it by mail or fax to the Continuing Care Branch.

**LONG TERM CARE PROGRAM REQUIREMENTS:
NURSING HOMES & RESIDENTIAL CARE FACILITIES
FEEDBACK FORM**

Submitted by:

Name:			
Organization:			
Telephone:			Fax:

Please identify the section and page on which you are commenting.

Section: _____	Page: _____

Fax or Mail to: Continuing Care Branch
Department of Health and Wellness
P.O. Box 488
Halifax, NS B3J 2R8
Fax: 902-424-0558

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1.0 INTRODUCTION

The Long Term Care Program Requirements: Nursing Homes and Residential Care Facilities document, also referred to as program requirements, outlines the Department of Health and Wellness' expectations for licensed nursing homes and residential care facilities across Nova Scotia.

The Department is committed to the delivery of safe, high quality, holistic, resident-centred care for Nova Scotians residing in long term care facilities. Choice, empowerment, autonomy, flexibility, privacy, community linkages and the trend of moving away from the institutional model of care are inherent concepts in these program requirements. This document sets out the fundamental requirements and the requirements for resident care, administration, information management, human resource management, service quality, service continuity, human resource management and physical space.

These program requirements provide a mechanism for internal and external reviews and must be implemented in a manner that reflects the requirements of the Department of Health and Wellness. Compliance is monitored as part of the licensing process and ensures that homes operate within the established criteria and are committed to continuous quality improvement. The Department has authority under the *Homes for Special Care Act* to enter and inspect nursing homes and residential care facilities in Nova Scotia.

Aligned with the *Homes for Special Care Act (HSCA) and Regulations*, these program requirements ensure that program content is consistent with other relevant legislation including, but not limited to, the *Protection for Persons in Care Act (PPCA)*, the *Personal Health Information Act (PHIA)* and the *Personal Directives Act (PDA)*.

This document replaces all previous Long Term Care Program Requirements, including the 2007 Long Term Care Program Requirements developed in association with the 2007 Request for Proposal (RFP), and reflects the minimum acceptable standards for nursing homes and residential care facilities licensed by the Department of Health and Wellness in Nova Scotia. Unless otherwise noted, all nursing homes and residential care facilities that are licensed by the Department of Health and Wellness must meet the stated program requirements. In the event of a current or future discrepancy between these program requirements and legislation, the more stringent requirements shall apply.

2.0 VISION FOR CONTINUING CARE IN NOVA SCOTIA

Living well in a place you can call home

3.0 LONG TERM CARE PRINCIPLES

The Long Term Care Program Requirements: Nursing Homes and Residential Care Facilities document is guided by the principles listed below:

Resident and Family Focused:

1. Residents' privacy is respected and their health information is protected.
2. Residents maintain choice and self-determination even as their need for support increases.
3. Activities and services are designed to maximize residents' abilities.
4. Flexible scheduling of activities of daily living is supported.
5. Residents and families are encouraged to be partners in care.
6. A holistic approach to resident-centred care that addresses physical, social, cultural, mental and spiritual well-being is supported.
7. Opportunities for meaningful relationships, interactions and companionship with residents, family, staff members and the community are provided.
8. A clean, accessible, comfortable and secure homelike environment is provided for residents and their families.

Staff focused:

9. A supportive, safe and efficient workplace is provided for staff.
10. Occupational and organizational health, well-being and safety of staff members are supported.
11. Innovative models of care are encouraged through a resident-centred approach to care.

4.0 GLOSSARY

The following definitions apply to the *Long Term Care Program Requirements: Nursing Homes and Residential Care Facilities*:

Abuse: Any of the following (as defined by the *Protection for Persons in Care Regulations, Section 3(1)*):

- a) the use of physical force resulting in pain, discomfort or injury, including slapping, hitting, beating, burning, rough handling, tying up or binding;
- b) mistreatment causing emotional harm, including threatening, intimidating, humiliating, harassing, coercing or restricting from appropriate social contact;
- c) the administration, withholding or prescribing of medication for inappropriate purposes;
- d) sexual contact, activity or behaviour between a service provider and a patient or resident;
- e) non-consensual sexual contact, activity or behaviour between patients or residents;
- f) the misappropriation or improper or illegal conversion of money or other valuable possessions; and
- g) failure to provide adequate nutrition, care, medical attention or necessities of life without valid consent.

Acute Home Care: Home care services provided to a resident with a need for time limited intervention with a goal of improving a medical or post-surgical condition.

Adverse Event: An unexpected and undesired incident directly associated with the care or services provided to the resident or the environment in which the care is provided.

Aesthetic Integrity: No visible soiling, staining, discolouration or physical damage.

Assessment: A process for collecting and interpreting information obtained through various reliable sources for the purposes of determining residents' abilities, needs and potential for maintaining or improving their health.

Authorized Designates: Persons to whom the licensee shall communicate, as the case may be, on behalf of residents who do not have capacity, such as:

- a) a person to whom the resident has given authorization, under the *Medical Consent Act*, to give consent or directions respecting medical treatment;
- b) a guardian, under the *Incompetent Persons Act*, authorized to manage financial matters;
- c) a delegate or statutory decision-maker, under the *Personal Directives Act*, with authority to make personal care decisions; and/or

d) an attorney, under the *Powers of Attorney Act*, authorized to manage financial matters.

Business Continuity Plan: Arrangements and procedures that enable an organization to respond to a significant event that affects normal operations and to return to normal operational functions after the interruption.

Complaint: Expression of concern or dissatisfaction to or about the home, either verbally or in writing.

Compromised Functionality: Reduced working order or not fully functional.

Confidential: Information that shall be safeguarded from disclosure and that has defined parameters for distribution.

Consent: Voluntary and informed agreement by a resident, who is competent and understands the information and appreciates its implications, or the resident's authorized designate.

Corrective Action: The plan that is developed, implemented and evaluated in response to an identified issue of concern in order to mitigate risk.

Credential: The issuance by an authority of documentation to attest to the individual's possession of the requisites for a specific designation.

Critical Incident: A serious event, affecting either the resident, staff or the public.

Department: The Department of Health and Wellness.

Disclosure of Adverse Event: The imparting of information from the licensee to residents, or their authorized designates, regarding any adverse event affecting the resident.

Emergency Power System: An electrical generator, its switchgear, fuel system and, in some cases, its own storage building.

Environmental Services: Housekeeping and laundry functions.

Ethics: Moral principles and values.

Evaluation: The measurement of the degree of achievement toward the desired outcome.

Evidence-based Decision-making: The process of making decisions based on a theoretical body of knowledge and using the best available scientific evidence.

Family Council: A forum for families to have a voice in decisions that affect them and their loved ones and to improve the quality of residents' lives.

Functional Integrity: Able to perform and performing as originally intended.

Holistic: Emphasizing the importance of the whole person and the interdependence of body systems.

Home: A Nursing Home, Home for the Aged or Residential Care Facility that is licensed by the Department of Health and Wellness under the *Homes for Special Care Act*.

Homelike: A warm and inviting space which residents and/or family members are encouraged to personalize.

Incident: Any occurrence, including a near-miss situation, which has the potential to cause personal injury, disease or death, or property damage.

Incident Report: A document which records an incident, its investigation, a root cause analysis and the corrective action taken by the licensee.

Indicator: A performance measurement tool used to identify specific data that has significance.

Information Management: The means by which an organization efficiently plans, collects, organizes, uses, disseminates, and disposes of its information and through which it ensures that the value of that information is identified and exploited to its fullest extent.

Interdisciplinary Assessment: Team members from a variety of disciplines work together with the resident and/or authorized designates and family members to complete a comprehensive resident assessment.

Interdisciplinary Care Conference: A team meeting that includes the care staff, resident and/or authorized designate and family, and focuses on the resident for the purpose of communication, planning, coordination and evaluation of the resident's care.

Interdisciplinary Team: Team members from a variety of disciplines, the resident and/or authorized designate and family members who participate in the assessment, planning, implementation and evaluation of a resident's care.

Intergenerational Programs: Recreational programs that focus on the sharing of experiences between different age groups.

Leading Practice: Processes, systems or methods that have been shown to produce superior results.

Licensee: The owner/operator, administrator, board of directors or service provider to whom a license has been issued by the Department of Health and Wellness to operate a nursing home or residential care facility in Nova Scotia.

Mission: A clearly written statement of the home's purpose that focuses the direction and character of its programs and services encompassing a statement of philosophy.

Nursing Home: A building or place or part of a building or place, including Homes for the Aged, in which accommodation and skilled nursing care are provided to residents in accordance with the *Homes for Special Care Act, Section 2(1) (j)*.

Nursing Care: The use of methods, procedures and techniques employed in providing nursing care by persons with technical nursing training beyond the care that an untrained person can adequately administer.

Outbreak: An increase in the number of cases of disease or infection above the number normally occurring in the home over a defined period of time. Outbreak definitions may be more specific based on the microorganism/illness.

Outcome: The desired end result of the purpose or objective that shall be achieved.

Palliative Care: Care that improves the quality of life of patients/families facing life threatening illness, through the prevention and relief of suffering by means of early identification, assessment and treatment of pain and other problems (physical, psychological and spiritual). It includes end-of-life care for those who are dying and a palliative approach to care for those with advanced illness or at increased risk of dying.

Partners in Care: Mutually beneficial partnership among the resident, their authorized designate, family and care providers supporting respectful relationships and active engagement of all in planning, developing and accessing care.

Personal Care: The provision of supervision and assistance with activities of daily living for a person who is ambulatory or semi-ambulatory in accordance with the *Homes for Special Care Act, Section 2(1)(k)*, including, but not limited to, health care, nutrition, hydration, shelter, residence, clothing, hygiene, safety, comfort, recreation, social activities, and support services.

Personal Directive: The document that:

- a) sets out instructions or an expression of the maker's values, beliefs and wishes about future personal-care decisions to be made on his or her behalf; and
- b) authorizes one or more persons who, except in the case of a minor spouse, is or are of the age of majority to act as delegate to make, on the maker's behalf, decisions concerning the maker's personal care, as defined in the *Personal Directive Act, Section 3(1)*.

Plan of Care: The documented actions that the interdisciplinary team shall undertake to meet the identified needs, goals and preferences of the resident. The plan's rationale, goals, benefits, and expected outcomes are based on the assessment, planning, implementation and evaluation process.

Point of care: The place where the resident, care staff and care procedure come together.

Point of Care Risk Assessment (for infection, prevention and control): An activity whereby:

- a) the likelihood of exposure to an infectious agent is evaluated for a specific interaction, with a specific resident, in a specific environment (e.g., single room, hallway), under available conditions (e.g., no designated handwashing sink); and
- b) the appropriate actions/personal protective equipment needed to minimize the risk of exposure, for the specific resident, other residents in the environment, staff, visitors, contractors, etc, are utilized.

Policy: A written statement that reflects leading practices and identifies and interprets a position on a given issue, providing direction, limits, responsibility, accountability and expectations.

Preventive Maintenance Program: Maintaining equipment and facilities in satisfactory operating condition by providing for systematic inspection, detection and correction of incipient failures either before they occur or before they become major defects.

Privacy: Free from undue intrusion; the right of individuals to control or influence what information related to them may be collected and stored and by whom and to whom that information may be disclosed.

Procedure: A written set of instructions conveying the approved and recommended steps for an action or sequence of actions.

Program Requirement: The established standard with which a licensee must be in compliance in order to be licensed by the Department of Health and Wellness as a nursing home or a residential care facility.

Qualified: Possesses the capabilities, competencies, skills and experience necessary to successfully operate within the scope of his/her position.

Quality Improvement: The efforts taken to improve the level of performance of a process through measurement of the current level of performance, identifying ways to improve that performance, and the implementation of new and promising practices.

Resident: A person who lives in a home licensed by the Department of Health and Wellness.

Resident-Centred: An approach in which residents are viewed as whole persons; it is not merely about delivering services where the resident is located. Resident-centred care involves advocacy, empowerment, and respecting the resident's autonomy, voice, self-determination and participation in decision-making.

Resident Council: A forum for residents and/or authorized designates to have a voice in decisions that affect the residents and to improve the residents' quality of life in the home.

Residential Care Facility: A building or place, or part of a building or place, where supervisory or personal care is provided to three or more persons.

Resident Values: A written set of value statements that govern and guide resident and staff relationships.

Responsive Behaviours: Actions, words or gestures of people with dementia utilized as a means of communicating unmet need(s) and/or something important in their personal, social or physical environment (e.g. wandering, restlessness, agitation, physical resistance) which may cause distress and/or risk for the person, other residents, family members, visitors and/or staff.

Restraint: Anything that is intentionally used to limit the movement or behaviour of a resident and over which the resident has no control. Restraints may be physical, environmental or chemical. A resident is restrained if he or she cannot remove a physical device, leave a specific area, or refuse a chemical restraint.

Risk: Potential for harm.

Risk Management: A system for the detection, evaluation, prevention and mitigation of risks.

Safety Alerts: Hazards, alerts, recall notifications or warning notices that document faults or defects of products and may include recommendations on what corrective action(s) should be taken to reduce the possibility of injury.

Substitute Decision Maker (SDM): The delegate or statutory decision-maker with the legal authority to make personal care decisions on behalf of an individual who lacks capacity to make health care decisions pursuant to the *Personal Directives Act*.

Supervisory Care: The provision of room, board and (i) guidance or supervision in the activities of daily living, or (ii) observation or surveillance of the physical well-being of a person who is ambulatory or semi-ambulatory.

Surface Integrity: The surface material is continuous and sound.

Values: A fundamental set of beliefs that clearly communicate the vision and how the licensee will operate on a day-to-day basis.

Vision: A clear visualization of a future for which the licensee strives and which guides all of the home's activities.

Wound: An injury to the body that typically involves laceration or breaking of a membrane, (such as the skin), and usually damage to underlying tissues (Merriam-Webster Dictionary). Includes pressure injuries.

5.0 FUNDAMENTAL REQUIREMENTS

5.1 Resident Respect, Dignity and Right to Privacy

Outcome:

Residents are respected and their dignity and right to privacy are preserved.

The licensee shall ensure:

1. A privacy and confidentiality policy and procedures, that reflect the Long Term Care Principles and align with legislation, are developed and implemented.
2. Residents are treated with respect and dignity at all times, including during:
 - a) personal care activities;
 - b) consultation with and examination by professional staff;
 - c) intimacy; and
 - d) social contacts with families and friends.
3. Residents' privacy is protected to the extent possible.
4. There is a statement of values posted in common areas and residents are provided with a copy upon admission to the home.
5. Residents receive services that support inclusiveness and respect both diversity and cultural differences.
6. Staff members receive information regarding the home's values, respect, dignity and protection of privacy upon hire and as part of their ongoing professional development.
7. Residents have their own clothing, which are appropriate, correct in size, clean and neat, in good repair and suitable for the climate.
8. Staff members address residents using residents' preferred names.
9. Residents, or their authorized designates, receive mail unopened.

5.2 Resident Choice

Outcome:

Residents exercise choice and have control over their lives.

The licensee shall ensure:

1. The culture of the home, through its mission, statement of values, philosophy and provision of care, maximizes the ability of residents to exercise personal autonomy and choice.

2. Staff members support residents and/or authorized designates in making informed decisions.
3. Residents' informed decisions are respected including their decisions regarding personal directives and sharing of their information.
4. Residents' right to choose is reflected in the development and implementation of their individualized plan of care.
5. Residents or their authorized designates decide the extent to which family members, friends and others are involved in their care, including end of life care.
6. Residents are able to express religious, spiritual, sexual and cultural beliefs and practices.
7. Residents are encouraged to personalize their bedrooms with their personal possessions in a manner that is safe and practical.
8. Residents and/or their authorized designates manage their financial affairs.

5.3 Family and Community Relationships

Outcome:

Residents maintain relationships with family, friends and the local community as they choose.

The licensee shall ensure:

1. Upon admission, residents and/or their authorized designates receive written information about the home's philosophy on supporting and encouraging resident involvement with family, friends and the community.
2. All residents or authorized designates provide an emergency contact.
3. There is no restriction on visitors except:
 - a) when requested by the residents or their authorized designates;
 - b) when a visitor is deemed by the licensee to pose a security risk or to negatively impact other residents or the operations of the home;
 - c) where there is a Protective Intervention Order pursuant to the *Adult Protection Act* in place; or
 - d) as necessary during an outbreak of infection.

6.0 RESIDENT CARE

6.1 Assessments

Outcome:

Residents' individual needs are identified through appropriate, relevant assessments.

The licensee shall ensure:

1. Policies and procedures that reflect leading practices regarding assessments are developed and followed.
2. Ongoing assessments are completed in order to identify the unmet changing needs of the residents.
3. Results of assessments are documented on the resident record, are communicated appropriately to staff and become the basis for the resident plan of care.
4. Residents and/or authorized designates are advised of alternative care options when residents' needs can no longer be met by the home.

Additional Requirements for Nursing Homes

The licensee shall ensure:

- 5a Residents have an interdisciplinary assessment of risk, functional abilities, cognition, nutrition, oral health (see section 6.6), pain and discomfort, falls risk, and recreation, initiated upon admission to the home and completed within two weeks.
- 5b Residents have a skin integrity assessment completed within 24 hours of admission to the home, and on an ongoing basis in accordance with the residents' individual needs.
6. A lift and transfer assessment is completed for residents within 24 hours of admission and as the residents' individual needs change.
7. When residents are exhibiting responsive behaviours, the interdisciplinary team assesses the residents to determine the underlying causes of the behaviour, identifies the type and level of risk, and develops, communicates and evaluates the plan of care and outcomes in accordance with section 6.3, Individual Plan of Care.

Additional Requirements for Residential Care Facilities

The licensee shall ensure:

8. Collection of residents' current information, regarding functional abilities, risks, cognition, diet, oral health, pain and discomfort, falls, and recreation, is initiated upon admission to the home and completed within two weeks.

9. Collection of residents' current information regarding skin integrity is completed within 24 hours of admission to the facility, and on an ongoing basis in accordance with the residents' individual needs.

6.2 Health Services

Outcome:

The best possible resident health outcomes are achieved by meeting residents' assessed health care needs.

The licensee shall ensure:

1. Ethical, informed decision-making, staff-resident collaboration and staff teamwork are supported to enhance residents' long term care experiences.
2. Relationship building between and among residents, authorized designates, families and staff is encouraged.
3. Residents, authorized designates and families are supported in their care partner roles.
4. Staff members get to know the residents so they can better understand their unique needs, preferences and personal histories.
5. Staff members make decisions based on knowledge of the residents' needs and they work cooperatively to meet their needs.
6. Residents receive advocacy and support according to their needs, as appropriate.
7. Residents receive assistance and support with activities of daily living, as required, having regard for their plan of care.
8. Residents' health status is monitored daily and there is a system in place to recognize indicators of residents' changing needs and to respond accordingly.
9. Interventions are in accordance with resident goals of care, clinical guidelines, leading practices and the professional regulatory/licensing bodies.
10. Residents' access to specialized health care services is facilitated, according to their individualized care needs, e.g., acute home care, palliative care, wound care and mental health.
11. Resident care protocols, based on current leading practices, are developed, implemented, monitored and regularly evaluated with particular emphasis on responsive behaviours, skin integrity, poly-pharmacy, pain, wound management, infection control, nutrition and daily mouth care.
12. Residents are under the care of qualified medical practitioners of their choice who

agree to provide services in the home.

13. The home has a physician medical advisor.
14. Pharmaceutical services are provided to ensure the medication needs of residents are met.

Additional Requirements for Nursing Homes

The licensee shall ensure:

15. An interdisciplinary pharmacy committee, consisting of at least the Administrator of the Home, Medical Advisor, Pharmacist, Director of Resident Care and Clinical Dietitian, meets a minimum of every six months.
16. A stand-alone Wound Care Committee is implemented, or wound care issues/practices are included as a standing agenda item on another appropriate committee (i.e. Quality Committee). The committee shall be interdisciplinary ensuring that wound prevention and management is regularly reviewed and revised to reflect leading practices and provincial direction, and identify trends for quality improvement.

Additional Requirements for Residential Care Facilities

The licensee shall ensure:

17. A process is in place (e.g., a committee) to review wound care issues/practices to ensure wound prevention and management is regularly reviewed and revised to reflect leading practices and provincial direction, and identify trends for quality improvement.

6.3 Individual Plan of Care

Outcome:

Each resident's abilities and preferences are maximized through the individualized plan of care.

The licensee shall ensure:

1. Policies and procedures related to resident care planning are developed and followed.
2. An interdisciplinary care conference, that includes the resident and/or authorized designate and the family members approved by the resident, is conducted within six weeks of admission to the home and annually thereafter, or more frequently as the resident's individual needs require.
3. The care conference results in a mutually agreeable, documented plan of care.
4. Each resident has a plan of care which:
 - a) includes the plan's rationale, measurable and achievable goals, benefits,

expected outcomes, detailed actions that the interdisciplinary team shall undertake to meet the resident's identified needs and time frames for evaluation;

- b) is reviewed by staff on a quarterly basis, or more frequently as required, and is updated to reflect the resident's changing needs and interventions; and
 - c) is communicated to the resident and/or authorized designate and all those involved in the resident's care.
5. Interventions, outcomes and resident progress are regularly evaluated and the plan of care is modified as needed and documented on the resident record.
 6. Staff members document timely, clear, objective and complete information on the resident record.
 7. Each resident has an opportunity to complete or provide a personal directive which includes identifying a substitute decision maker. If completed, the personal directive will be placed on the resident record. Otherwise, it is documented on the record that a personal directive was discussed with the resident.
 8. For residents who do not have capacity, their authorized designates are advised as soon as possible of changes in the residents' health status.
 9. Residents and/or authorized designates are encouraged to have funeral arrangements completed and communicated to the licensee.

Additional Requirements for Nursing Homes

The licensee shall ensure

10. Each resident's plan of care is based on the risks and needs identified in the interdisciplinary assessments referenced in section 6.1, Additional Requirements for Nursing Homes, and the resident's choice.

Additional Requirements for Residential Care Facilities

11. Each resident's plan of care is based on the needs identified through the collection of resident information, referenced in section 6.1, Additional Requirements for Residential Care Facilities.

6.4 Resident-Centred Care

Outcome:

Residents' quality of life and well-being are enhanced through the provision of resident-centred care.

The licensee shall ensure:

1. Resident-centred care, which recognizes the value of providing a safe, homelike

environment with an emphasis on meeting the physical, health, cultural, spiritual, social, mental and emotional needs of residents, is provided for all residents.

2. Every effort is made to support residents in maximizing their independence, capabilities and freedom of choice to the extent of their abilities.
3. Staff members work with the residents and/or authorized designates as a team to determine what works best for the residents.
4. Team members learn collaborative problem solving and share responsibility, as well as accountability, for resident outcomes.
5. Resident-centred care:
 - a) supports residents, their authorized designates and families to be partners in care by promoting choice, empowerment, autonomy and independence in everyday life;
 - b) provides a clear statement of role expectations where team work is emphasized;
 - c) encourages decision-making by residents and/or their authorized designates and staff members who work closely with the residents;
 - d) enables flexible scheduling of activities of daily living to meet residents' preferences whenever possible;
 - e) supports innovative approaches to care delivery; and
 - f) enables staff to consistently work with the same residents, when in the residents' best interests.

6.5 Nutrition

Outcome:

Residents' nutritional requirements are met through a balanced diet. Their individual needs are accommodated and their preferences are obliged, whenever possible.

The licensee shall ensure:

1. Policies and procedures regarding food services, that reflect leading practices in public health, safe food production and professional standards, are developed and followed. This includes receiving, storage, production and delivery of meals, snacks and supplements and appropriate safety measures to guide visitors who bring in food for residents.
2. The following processes are developed and followed:

- a) identification and communication of residents' food allergies, preferences, therapeutic diets, food textures, supplements and food contraindications;
 - b) provision of food and beverages for mealtimes and snacks at safe, comfortable and palatable temperatures according to residents' individual needs;
 - c) labeling of food in refrigerators and discarding of expired food;
 - d) tracking and monitoring intake of meals, supplements and fluids as required;
 - e) documenting and monitoring residents' weights; and
 - f) receiving input from residents and/or authorized designates and families regarding the menu.
3. Menus are balanced according to Canada's Food Guide and provide flexibility to meet nutrition guidelines and interventions as identified for residents' specific needs and preferences.
 4. Menus follow a rotation that is not less than 4 weeks. Menus are posted and any changes are documented and align with the dietician's recommendations.
 5. Planned menus offer choices/alternatives based on residents' needs, including entrees, vegetables, desserts and beverages, for regular and therapeutic meals and texture modified diets. Seasonal items are incorporated into the menu.
 6. A minimum of three meals and two snacks, one of which is an evening snack, are provided at appropriate intervals throughout the day. Snacks include both food and fluids with options for residents with therapeutic and texture modified diets.
 7. The meal system provides some flexibility to offer meals/snacks/fluids throughout the day.
 8. Meals are served in accordance with leading practices and residents' preferences with no more than 15 hours between suppers and breakfasts unless otherwise documented. Meals are served based on the wishes and needs of the majority of residents.
 9. Supervision and assistance are provided during meals, snacks and other food related activities as necessary.
 10. There is a staff member on duty in the dining area, during meals, snacks and other food related activities (including on-site and off-site activities), who has current training on the maneuver for clearing the airway of a person who is choking.
 11. Relevant staff members are educated on safe food practices in accordance with current legislation.
 12. Assistive devices and eating aids are provided for residents who require them to eat/drink safely.

13. Residents are encouraged to eat in the dining room. Alternate arrangements based on residents' needs may be made, provided there is adequate supervision.
14. Mealtimes provide a positive, relaxed and quality dining experience that stimulates the senses, appetite and conversation. Every effort is made to limit noise and interruptions.
15. The dining environment promotes residents' enjoyment, safety, comfort, independence and dignity, allowing them to socialize and to eat at a pace that suits them. There are ongoing opportunities to evaluate and improve the dining experience for the residents.
16. A written hydration therapy program is implemented and maintained.
17. A Vitamin D supplementation program is in place in accordance with the Department of Health and Wellness' guidelines.

Additional Requirements for Nursing Homes

The licensee shall ensure:

18. Diets are provided according to residents' needs, following assessments by the dietitian, with consideration for residents' likes and dislikes, religious beliefs, culture and abilities.
19. Menus are reviewed, approved and dated by a registered dietitian at least twice per year.

Additional Requirements for Residential Care Facilities

The licensee shall ensure:

20. Diets are provided according to the residents' needs, with consideration for residents' likes and dislikes, religious beliefs, culture and abilities.
21. Menus are reviewed, approved and dated by a registered dietitian at least once per year.

6.6 Oral Health

Outcome:

Residents' oral health is optimized through an effective mouth care regime.

The licensee shall ensure:

1. An oral health assessment is initiated on admission and completed by staff within two weeks.
2. Any risks relating to oral status (such as pain, swelling, bleeding, broken or decayed teeth, debris and food particles) are documented on admission and monitored regularly by staff in order to initiate appropriate referrals to dental professionals, when required and desired by the resident or authorized designate, and to inform daily mouth care planning.

3. Each resident has a daily mouth care plan that includes appropriate hygiene techniques and products to maintain oral cleanliness of natural teeth and/or dentures.

6.7 Recreation

Outcome:

Residents' range of leisure programming reflects their expectations and preferences and satisfies their physical, social, cultural, spiritual, emotional, mental and recreational interests and needs.

The licensee shall ensure:

1. Policies and procedures for recreational programming are developed and followed.
2. A recreational program is developed and implemented that:
 - a) allows members of the care team to assist and support the continuous development of programs for the changing needs of the residents;
 - b) is in keeping with the residents' needs, preferences, abilities and strengths;
 - c) is flexible, innovative and varied to respond to the residents' leisure needs and interests; and
 - d) is planned, with input from residents and/or authorized designates and family councils, a minimum of one month in advance.
3. A monthly schedule is posted in common and resident areas. Any changes are documented and posted for residents and authorized designates to view.
4. Residents are supported in participating in meaningful activities.
5. Residents' participation records of individual and group programs are maintained for planned activities.
6. Community affiliations and intergenerational programs are encouraged, nurtured and facilitated.

6.8 Palliative and End of Life Care

Outcome:

Residents' dignity is preserved and their physical, emotional, cultural and spiritual needs are met.

The licensee shall ensure:

1. A policy and procedures regarding end of life care are documented and followed.

2. Residents and/or authorized designates are engaged in planning for residents' end of life care.
3. Upon admission, and as needed, there is evidence of discussion with residents and/or authorized designates about options for end of life care including options for the degree of medical intervention.
4. Residents'/authorized designates' goals of care and choices are documented accordingly on the plan of care and/or personal directive, if completed, and are placed on the resident record and followed.
5. Residents' personal directives, if completed, are reviewed annually with the residents and/or authorized designates or more frequently if required to ensure their care preferences and wishes are clearly understood.
6. Residents' religious and cultural practices concerning end of life care are recorded in the resident records and are followed.
7. There are procedures in place to direct staff in the event of an expected death or an unexpected death.

7.0 ADMINISTRATION

7.1 Management of the Home

Outcome:

Residents live in a home that promotes their quality of life through the effective and efficient management of the home.

The licensee shall ensure:

1. There is a designated administrator responsible for the overall management of the home.
2. On-site administrative authority is delegated to an appropriate individual when the administrator is absent.
3. The operation of the home is in compliance with the following:
 - a) all applicable legislation, including but not limited to:
 - the *Homes for Special Care Act (HSCA)* and *Regulations*;
 - the *Protection for Persons in Care Act (PPCA)*;
 - the *Personal Directives Act (PDA)*;
 - the *Personal Health Information Act (PHIA)*;
 - the *Occupational Health and Safety Act*; and
 - the *Smoke-free Places Act*
 - b) Department of Health and Wellness' Long Term Care Program Requirements: Nursing Homes and Residential Care Facilities and any other relevant provincial policies, standards and requirements.
4. A statement of the home's mission, vision, values and philosophy of care is developed; staff are knowledgeable about them and demonstrate them through their actions.
5. The policies listed in Appendix A and accompanying procedures, and any other policies and procedures deemed necessary by the licensee, are developed, documented and implemented.
6. The policies and procedures are maintained and easily accessed by staff. They are reviewed regularly with staff to ensure they are knowledgeable about them and demonstrate them through their actions.
7. The home's policies are reviewed a minimum of every three years, or more frequently as required to ensure they are current, and they are revised as needed.
8. A policy for the collection and management of resident funds is developed and implemented.

9. A policy for receiving, investigating and resolving complaints is developed and implemented.
10. On admission, residents and/or authorized designates are provided with the following:
 - a) written information regarding the complaint process;
 - b) written information about the services provided by the home; and
 - c) a list of the home's policies, relevant to residents and families, and copies are provided upon request.
11. Residents and/or authorized designates are kept informed of operational issues that may impact residents' care or well-being.
12. Required inspections of the home and equipment are completed and documentation is maintained to demonstrate compliance with requirements. These include, but are not limited to, manufacturer requirements, safety requirements, sprinkler systems, water testing, fire alarms and fuel systems.

7.2 Resident Councils

Outcome:

Residents and/or authorized designates are provided with regular opportunities to meet with management to discuss issues relating to residents' care and well-being and the safety and security of the home.

The licensee shall ensure:

1. The home has a resident council that has a documented Purpose and Terms of Reference.
2. Policies and procedures regarding the establishment of a functioning resident council are developed and followed. This includes a process for managing the funds raised through council activities.
3. Resident council meetings are held monthly. Residents and/or authorized designates are notified of meetings in advance and are encouraged to participate.
4. The administrator attends resident council meetings a minimum of quarterly.
5. Residents chair the resident council meetings whenever possible.
6. Minutes of resident council meetings are maintained and include resolution or action on identified concerns or issues. Minutes are available and easily accessible for viewing by residents.

7.3 Family Councils

Outcome:

Family members are provided with regular opportunities to meet with management to discuss issues relating to the care and well-being of residents and the safety and security of the home.

Requirements for Nursing Homes

The licensee shall ensure:

1. The nursing home has a family council that works together in partnership with the resident council. The family council has a documented Purpose and Terms of Reference.
2. Policies and procedures regarding the establishment of a functioning family council are developed and followed. This includes a process for managing the funds raised through family council activities.
3. Family council meetings are held a minimum of twice annually. Family members are notified of meetings in advance and are encouraged to participate.
4. The administrator attends a minimum of two family council meetings per year.
5. Family members chair the family council meetings whenever possible.
6. Minutes of family council meetings are maintained and include resolution or action on identified concerns or issues. Minutes are available and easily accessible for viewing.

7.4 Management and Staff Meetings

Outcome:

Management and staff are kept informed of operational issues that may impact the care of residents, the well-being of residents and staff and the safety and security of the home.

The licensee shall ensure:

1. Policies and procedures describing the roles and responsibilities of formalized management and staff meetings are documented and followed.
2. Minutes of management and staff meetings are maintained and include resolution or action on identified concerns or issues. Staff meeting minutes are available and easily accessed by staff.
3. Management and staff meetings are held a minimum of quarterly.

7.5 Inspections

Outcome:

Risk is mitigated through regular inspections by all applicable authorities having jurisdiction and through the licensee's compliance with the minimum requirements of those authorities.

The licensee shall ensure:

1. Compliance with all applicable government inspection processes, policies, standards, requirements and service agreements, including but not limited to, the following authorities:
 - a) Department of Health and Wellness;
 - b) Department of Labour and Advanced Education, including Occupational Health and Safety (OHS);
 - c) Nova Scotia Environment;
 - d) Office of the Fire Marshal (OFM); and
 - e) Workers' Compensation Board of Nova Scotia.
2. A valid and current Homes for Special Care license to operate is posted in a conspicuous location in the home.
3. A current Food Establishment permit is posted, if required by legislation.
4. Homes with 12 beds or more are inspected by a Nova Scotia Government Food Safety Specialist a minimum of annually.
5. The home is inspected by the Fire Marshal on a regular basis, in accordance with the requirements of the Office of the Fire Marshal.
6. Inspection reports, recommendations and requirements from legislated authorities having jurisdiction are retained. Compliance with recommendations and requirements is achieved and evidenced by appropriate documentation.

8.0 SERVICE QUALITY

8.1 Quality Management

Outcome:

The home's commitment to continuous quality improvement is evidenced by the provision of integrated, comprehensive quality resident care and services that demonstrate leading practices.

The licensee shall ensure:

1. Quality improvement policies and procedures for continuous quality improvement of resident care are developed and followed.
2. Management and staff use research-based, evidence-informed approaches to care and service delivery, which are based on leading practices.
3. Policies are consistent with professionally recognized standards of practice for health care professionals employed in the home.
4. Resident and family satisfaction surveys are conducted a minimum of annually.
5. A process is in place to review the results of the satisfaction surveys and to develop and implement appropriate changes.
6. The results of the satisfaction survey are summarized, with resident/authorized designate/family identifiers removed, and are available and easily accessible for viewing.
7. Key performance indicators are identified based on strategic health system objectives and health priorities and include, but are not limited to:
 - a) service utilization and access;
 - b) quality, safe care;
 - c) appropriateness of care, clinical characteristics, resident outcomes;
 - d) resident satisfaction;
 - e) financial;
 - f) efficiency, productivity; and
 - g) sustainability.

8.2 Risk Management

Outcome:

Systems and processes are in place to minimize risk to residents, staff, volunteers, visitors and the home.

The licensee shall ensure:

1. Policies and procedures that minimize risk to residents, staff, volunteers, visitors and the home are developed and followed. These include but are not limited to:
 - a) A risk management policy which includes the assessment, identification and management of risk, is developed, implemented and evaluated;
 - b) A critical incident reporting policy and procedures that direct staff in the event of a critical incident;
 - c) A disclosure of adverse events policy and procedures that direct staff in the event of an adverse event;
 - d) A smoking policy and procedures that address smoking by residents, staff, volunteers and visitors;
 - e) A safer needles in the workplace policy and procedures for the safe management, handling, administration and disposal of needles in the home. The policy and procedures shall be in compliance with the Safer Needles in the Healthcare Workplaces Act;
 - f) A safety alerts policy and procedures that includes information management, follow up actions and risk mitigation;
 - g) A water temperature monitoring policy and procedures to ensure temperatures are in accordance with the appropriate Canadian Standards Association (CSA) standards;
 - h) An extremes of internal temperature policy and procedures to ensure internal temperatures are at acceptable levels; and
 - i) A disclosure of wrongdoing policy and procedures regarding disclosing, reviewing, investigating and tracking concerns about wrongdoing.
 - j) A wound management policy that aligns with these program requirements and the Department of Health and Wellness' Wound Management Policy for Nursing Homes and Residential Care Facilities.
2. Risk management programs that minimize risk to residents are developed, implemented and evaluated. These include but are not limited to:

- a) An immunization program that provides safe administration of vaccines, such as influenza, to interested residents and staff; and
 - b) A falls prevention program is developed and implemented.
3. Risk management processes that minimize risk to residents and staff are implemented. These include but are not limited to:
- a) A resident identification process, at the time of admission, which includes a photo of the resident and is updated regularly to ensure it clearly identifies the resident;
 - b) A process to direct staff in the event of a missing resident;
 - c) A process for documenting and appropriately communicating resident allergies;
 - d) A process for analyzing critical incidents and adverse events, a minimum of quarterly or more often as required, to identify trends and ensure appropriate action is taken to remedy the identified risks; and
 - e) A process for ensuring staff members are trained in the safe operation of equipment.

8.3 Protection of Residents from Abuse

Outcome:

Residents are protected from all forms of abuse and neglect pursuant to the *Protection of Persons in Care Act*.

The licensee shall ensure:

- 1. Compliance with the *Protection of Persons in Care Act* (PPCA).
- 2. Policies and procedures that protect residents from abuse and maintain a reasonable level of safety are developed and followed
- 3. Investigators appointed pursuant to the PPCA are permitted entry to the home at all reasonable times.
- 4. Management and staff cooperate with and provide assistance to investigators as required.
- 5. Compliance with any and all directives received from the Minister of Health and Wellness, or designates, following investigation under PPCA, with respect to protecting residents from abuse.
- 6. All persons who are employed by the licensee, or who are providing services on behalf of the licensee, are provided with education regarding the licensee's policies and procedures related to abuse and the PPCA.

7. Where any employee is suspected of abusing a resident, the employee is suspended; the suspicion is reported to the Department of Health and Wellness' PPCA toll free line at 1-800-225-7225; and an investigation and action are taken in accordance with the licensee's policy.
8. An allegation of abuse or suspected abuse, which falls under the jurisdiction of the *Criminal Code of Canada*, is reported to the police, the Department of Health and Wellness' PPCA toll free line and the Nova Scotia Health Authority.
9. No adverse action is taken against employees, residents, authorized designates or family members who make a report of abuse in good faith.

Additional Requirement for Nursing Homes

The licensee shall ensure:

10. A least restraint policy and procedures are developed and followed.

8.4 Infection Prevention and Control

Outcome:

Residents and staff are protected from exposures and transmissions of microorganisms and infection by knowledgeable staff and evidence-informed infection prevention and control strategies.

The licensee shall ensure:

1. Infection prevention and control policies and procedures, with particular emphasis on proper hand hygiene and routine practices including a point of care risk assessment, are developed and followed. The policies and procedures are reviewed and updated regularly and practice audits are conducted to ensure they are being followed.
2. A formal structure is in place to oversee the activities of the infection prevention and control program. A designated person is assigned to oversee infection prevention and control throughout the home.
3. A stand-alone Infection Prevention and Control Committee is implemented or infection prevention and control issues/practices are included as a standing agenda item on another appropriate committee. The committee shall be multidisciplinary ensuring that the infection prevention and control program is regularly reviewed and revised to reflect leading practices and provincial direction.
4. There is an active program for the prevention, control and investigation of infectious, communicable diseases. This includes the monitoring of infection rates (surveillance) and the sharing of this information, internally and with the Department of Health and Wellness upon request.

5. Systems are in place for detecting and responding to outbreaks of infections, with clear mechanisms for consulting with and reporting to Public Health, the Department of Health and Wellness and the Nova Scotia Health Authority.
6. The closing of facilities in a pandemic situation is directed by the Department of Health and Wellness.
7. Staff education on infection prevention and control practices and outbreak management are provided at orientation for new staff and as part of continuing education.
8. Personal protective equipment is available to protect staff, volunteers and visitors as per routine practices and additional precautions.
9. The home implements a hand hygiene program which includes the following:
 - a) ensuring staff and residents have access to alcohol-based hand rubs and/or hand washing sinks at the point of care. Alcohol-based hand rubs with an alcohol (i.e., ethanol, isopropanol or *n*-propanol) concentration above 60% and up to 90% should be used;
 - b) ensuring paper towels and liquid hand soap are used in all public and staff hand washing sinks;
 - c) providing education/training based on current guidelines to staff and residents on hand hygiene practices; and
 - d) evaluating staff adherence with hand hygiene practices through auditing and observation.
10. If bars of soap and other personal care items are used in resident rooms, they are designated for the use of one resident and are not shared.
11. Immunizations or vaccinations for residents and staff are facilitated, recorded and provided to Department of Health and Wellness as directed.
12. Staff influenza immunization rates, in homes with greater than 5 employees, are posted in a public place and updated a minimum of twice per year on December 15th and on March 1st.
13. There is an organized laundry system with adequate covered laundry receptacles to maintain a clean and safe service. Clean laundry is separated from soiled laundry.
14. Documented processes and practices are followed to ensure staff members adhere to the separation of clean and soiled linen.
15. There are designated areas for the collection, processing and disposal of human and bio-medical waste to minimize the transmission of infectious diseases.
16. Documented processes and practices for cleaning and disinfecting resident care equipment are followed. E.g. foot care equipment.

17. Contracted services shall follow established standards for cleaning and disinfecting environmental surfaces and equipment.
18. Spray wands are disconnected from hoppers. Rinsing hoses may remain connected as they do not aerosolize materials.

8.5 Medication Management

Outcome:

Resident health is preserved and risk of harm is mitigated through the safe storage, management and administration of medication.

The licensee shall ensure:

1. Policies and procedures for the management and administration of medications and treatments, including over the counter medications, are developed and followed.
2. Prescription and non-prescription medications and treatments are administered only when ordered by authorized prescribers.
3. Medications are stored in a secure and appropriate manner, accessible only to persons authorized to administer medications.
4. Medications are accounted for, administered and documented in accordance with federal and provincial legislation and professional practice standards.
5. There is a process in place for
 - a) reconciling medications upon admission, transfer and discharge;
 - b) tracking narcotics;
 - c) ensuring verbal orders are signed by authorized prescribers no later than 72 hours after the verbal order was issued , in accordance with legislation; and
 - d) documenting medications administered on a PRN basis.
6. Preparation of doses for more than one administration time is not permitted.
7. Staff members are educated on the safe administration of medication and medication practices at the home.
8. Signatures of staff who administer medications are verified annually, or as needed, when a paper based system is utilized.
9. Upon admission, residents and/or authorized designates receive a list of over the counter medications that are provided by the home at no charge to the residents.
10. All residents have an individual Medication Administration Record (MAR) accompanied by a current resident photograph.

11. Resident allergies are documented on the MAR.
12. MARs are reviewed and double-checked for accuracy by two authorized staff members before being utilized.
13. Pharmaceutical services are provided by qualified pharmacists to ensure the medication needs of residents are met.
14. There is a current pharmaceutical reference resource available.
15. Discontinued and expired medications are disposed in a safe and appropriate manner.

8.6 Ethics

Outcome:

Resident values are promoted and protected by the consistent application of ethical principles in decision-making.

The licensee shall ensure:

1. A written code of ethics for the home is developed and followed.
2. Policies and procedures that address ethical issues are developed and followed.
3. There is a documented decision-making process for dealing with ethical issues.
4. Processes are in place to address non-compliance with the home's code of ethics.

9.0 SERVICE CONTINUITY

9.1 Labour Disruption Contingency Plan

Outcome:

Residents continue to receive quality care and services in the event of a labour-management dispute.

The licensee shall ensure:

1. Essential services continue to be provided to residents when there is a reduction in the number of available staff members due to a labour-management dispute.
2. A labour disruption contingency plan, which may be included in the business continuity plan, is developed in consultation with service partners as appropriate.

9.2 Emergency Planning and Preparedness

Outcome:

The safety and well-being of residents and staff are maintained during an emergency situation.

The licensee shall ensure:

1. All Hazards Plan
 - a) There is a documented All Hazards Plan which is reviewed a minimum of every three years and revised as necessary to ensure the plan is current. The All Hazards Plan shall address:
 - emergency evacuation;
 - emergency relocation;
 - emergency expansion;
 - emergency isolation;
 - bomb threat / suspicious package;
 - external air exclusion;
 - chemical spill;
 - violent person; and
 - facility access control.
 - b) The All Hazards Plan is exercised a minimum of once every three years. More frequent exercises shall be completed as required to ensure all staff members are knowledgeable. The Business Continuity Plan identified below may be incorporated as part of this exercise.

- c) The participation of staff members is incorporated into the exercise. Participation of residents is included when appropriate and safe. Table top exercises are not accepted as meeting the exercise requirement.
- d) External observers, such as individuals experienced in dealing with emergency situations, are invited to the exercise and asked in advance to provide feedback regarding exercises, testing and debriefing.

2. Business Continuity Plan

- a) There is a documented Business Continuity Plan that addresses the operational recovery and continuity of services in the face of a disaster, labour disruption or other major outage. The Business Continuity Plan includes the following:
 - hazard, vulnerability and risk assessment;
 - mission critical activities;
 - recovery strategies;
 - loss of electrical power, water, heat, ventilation and waste water services;
 - loss of information technology (computer / telephone / fax) priorities;
 - geographic footprint; and
 - pandemic situation (pandemic planning is undertaken and completed in accordance with direction received from the Department of Health and Wellness.)
- b) When applicable, business continuity information may be incorporated into the All Hazards Plan.
- c) The Business Continuity Plan is reviewed a minimum of annually and revised as necessary to ensure it is current.

3. Staff Call Back Plan

- a) There is a documented Staff Call Back Plan that includes:
 - current staff phone numbers;
 - procedure for staff call back;
 - priority for contacting staff; and
 - how long it will take staff to arrive on site
- b) The Staff Call Back Plan is reviewed a minimum of annually and revised as necessary to ensure it is current.
- c) The Staff Call Back Plan is activated a minimum of once per year to determine the ability of staff members to respond in emergency situations.

4. Fire Safety
 - a) There is a documented Fire Safety Plan, in accordance with the National Fire Code, that is reviewed a minimum of annually and revised as necessary to ensure the plan is current.
 - b) Fire Drills are conducted a minimum of monthly in accordance with direction from the Office of the Fire Marshal.
 - c) Fire protection systems are tested and inspected annually, or more frequently as required by the Office of the Fire Marshal.
 - d) Fire protection equipment is maintained in good working order. Fire alarms and fire doors are tested monthly; fire extinguishers are inspected monthly and tested annually in accordance with the Office of the Fire Marshal.
 - e) Records of testing and inspections of fire protection equipment and systems are maintained.
 - f) The Office of the Fire Marshal is requested to inspect the home on a regular basis in accordance with the requirements of the Office of the Fire Marshal.
 - g) No resident is maintained in a home or any part thereof that is not approved by the Fire Marshal.
5. Contact information in all plans is updated a minimum of quarterly.
6. All plans are established in consultation with the following organizations, as appropriate:
 - a) Nova Scotia Health Authority;
 - b) Local Emergency Measures Organization;
 - c) Office of the Fire Marshal, local fire departments, police departments; and
 - d) Emergency Health Services and other persons providing essential services.
7. The plans provide for situations where assistance from local fire departments, police departments, Emergency Health Services and other persons providing essential services may not be available.
8. Upon initial employment in a home and a minimum of annually thereafter, every staff member is instructed in and understands the contents of the All Hazards Plan, the Fire Safety Plan, the Business Continuity Plan and the Staff Call Back System Plan as applicable to their individual roles.
9. Residents are included in the education and training on the All Hazards Plan procedures and fire drills, as appropriate.

10. A written record for fire drills and exercises outlined above, that includes the date, time, location, staff attendance, response times, outcomes, areas for improvement, remedial actions and debriefing, is maintained by the licensee.
11. A list of emergency and non-emergency names, phone numbers and addresses is posted in an accessible place near a telephone in each home. The list should state, "In the event of an emergency, dial 911" and shall include the local fire department, police department, Emergency Management Office, ambulance services and physicians.

10.0 INFORMATION MANAGEMENT

10.1 Information System

Outcome:

Effective information management systems support the provision of quality care through information production, performance measurement and evidence based decision-making.

The licensee shall ensure:

1. The home has an information management system that:
 - a) supports the principles of resident-centred design;
 - b) makes useful, relevant, quality information available to inform decision-making;
 - c) focuses on outcomes related to care provision and service delivery; and
 - d) ensures compliance with the *Personal Health Information Act* (PHIA) and the *Personal Information Protection Electronic Documents Act* (PIPEDA) as well as any other applicable legislation.
2. The Department of Health and Wellness and the Nova Scotia Health Authority are advised prior to implementing any new electronic information management system.

10.2 Resident Records

Outcome:

Resident records are accurate, complete, up to date, and maintained in a manner that maintains the confidentiality of the information and protects the privacy of the resident.

The licensee shall ensure:

1. Compliance with all applicable legislation, including but not limited to HSCA, PHIA, and PIPEDA.
2. Policies and procedures regarding resident records are developed and followed with respect to:
 - a) a multidisciplinary approach to documentation standards and first hand charting;
 - b) access, privacy, confidentiality; and
 - c) privacy breach and security.
3. Resident records are protected from unauthorized collection, use, disclosure, copying and modification.

4. Upon admission, residents and/or authorized designates are provided with information regarding how residents' health information will be collected and shared within the circle of care.
5. Resident records are only disclosed in accordance with the *Freedom of Information and Protection of Privacy Act* (Nova Scotia), the *Personal Health Information Act* (Nova Scotia), the *Personal Information Protection and Electronic Documents Act* (Canada), the *Homes for Special Care Act* (Nova Scotia), the *Protection for Persons in Care Act* (Nova Scotia) or any other applicable legislation.
6. For adult residents, there is a records retention schedule of 5 years minimum post discharge. Destruction of records must be done in a secure manner.
7. For residents under 18 years of age, there is a records retention schedule of 5 years minimum after the age of majority is reached. Destruction of records must be done in a secure manner.
8. Residents' financial records are maintained in a safe and secure manner, are separate from resident care records and are maintained in accordance with Canada Revenue Agency requirements.

11.0 HUMAN RESOURCES MANAGEMENT

11.1 Human Resources Practices

Outcome:

The staff complement supports the achievement of the outcomes in all program areas.

The licensee shall ensure:

1. The following policies and procedures are developed and followed:
 - a) recruitment, hiring and orientation of staff members;
 - b) employee and volunteer involvement in residents' personal affairs including:
 - acceptance of gifts from residents;
 - involvement in residents' financial affairs, including Enduring Power of Attorney, wills and estates; and
 - involvement in residents' non-financial affairs including personal directives and guardianship.
2. Pre-employment Vulnerable Sector Checks are completed for staff members, students and volunteers at the time of hire and are maintained on file.
3. A written human resources plan is developed and includes the anticipated human resources required to deliver consistent, quality services.
4. The allocation of staff members is appropriate in number and qualifications reflecting the needs of residents and the layout of the home; and government funded direct care hours are utilized as intended.
5. There is a current job description for each position which is reviewed a minimum of every four years and clearly defines the role, responsibilities and scope of the position. A copy of the current job description is provided to staff members.
6. The home provides a documented, timely orientation for all staff members, volunteers and contracted personnel. The orientation provides the necessary information to support residents in a safe manner and improve their quality of life.
7. An orientation checklist, indicating which orientation components have been completed by staff, is signed, dated and maintained in each staff member's personnel file.
8. Formalized performance management processes that evaluate staff members' performance annually, and more frequently as necessary, are in place.
9. Volunteers are supervised and supported in their roles and do not replace paid staff members.

10. Contracted personnel work under the policies and procedures of the licensee.

Additional Requirements for Nursing Homes

The licensee shall ensure:

11. The home is staffed in accordance with the staffing model as funded by the Department of Health and Wellness.

Additional Requirements for Residential Care Facilities

The licensee shall ensure:

12. The home is staffed in accordance with the allocated funding approved by the Department of Health and Wellness.

11.2 Staff Qualifications

Outcome:

Staff members have an appropriate educational level and related experience to support program outcomes.

The licensee shall ensure:

1. Staff hired after March 31, 2016 in the following key positions meet the following minimum education and experience requirements: NOTE: Some positions may not apply to all homes.

Administrator	A minimum of a Baccalaureate degree in a field of study relevant to the operation of a nursing home and five years of relevant managerial experience. In nursing homes with less than 30 beds, where there is no Director of Resident Care, the Administrator will be an RN.
Director of Resident Care	Baccalaureate degree/diploma in nursing and current registration with the College of Registered Nurses of Nova Scotia and three years of relevant health care management experience.
Assistant Director of Care	Baccalaureate degree/diploma in nursing and current registration with the College of Registered Nurses of Nova Scotia and three years of relevant experience.
Business Manager	Bachelor of Business Administration or Commerce with concentration in accounting and three years of relevant experience. Equivalent combination of formal education and work experience may be considered.
Recreation Director	Degree in Recreation Therapy with certification in the field of Therapeutic Recreation from the National Council for Recreation Therapeutic Certification and current membership with either Nova Scotia Recreation Professionals in Health or Therapeutic Recreation Association Atlantic Canada. Equivalent combination of formal education and work experience may be considered.

Hospitality Manager	Diploma in an applicable field and two years of relevant experience.
Food Service Manager	Diploma in a food service related field and two years of relevant experience.
Registered Nurses (RN)	Current registration with the individual provincial licensing body.
Licensed Practical Nurse (LPN)	Current registration with the individual provincial licensing body.
Dietitian (PDt)	Current registration with the individual provincial licensing body.
Physiotherapist (PT)	Current registration with the individual provincial licensing body.
Occupational Therapist (OT)	Current registration with the individual provincial licensing body.
Social Worker (SW)	Current registration with the individual provincial licensing body.
Direct Care	As per DHW's Entry to Practice Policy

2. Minimum Education Requirements and Experience – Residential Care Facility

Administrator	A combination of education and experience necessary to achieve the required outcomes.
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- Staff members individually and collectively have the skills and experience to deliver the services and care which the setting offers to provide.
- Verification of current licensure, certification, registration or other relevant credentials of staff members (as applicable). Proof of verification is maintained.

11.3 Mandatory Continuing Education

Outcome:

Staff and volunteers have the necessary knowledge, skills, and abilities and provide quality care and service.

The licensee shall ensure:

- Policies and procedures regarding the ongoing education of staff members are developed and followed. This includes mandatory education and training, which meets the specific needs of staff members, and training on the safe use of equipment.
- Ongoing education to meet the needs of the resident population is provided to staff members by qualified individuals.
- Staff members, and volunteers when appropriate, receive initial and on-going training as needed and are knowledgeable about the following:
 - the philosophy of care;
 - the model of care;
 - relevant legislation, requirements, standards, policies; and
 - leading practices.

4. Maintenance of annual attendance records for individual staff participation in education sessions, including the date of the sessions.

12.0 PHYSICAL SPACE

12.1 Environmental Services

Outcome:

The well-being of residents, staff, volunteers and visitors is enhanced by the home's homelike physical environment, which is effectively and efficiently cleaned.

The licensee shall ensure:

1. Policies and procedures, including cleaning schedules and routines, are developed and followed to ensure a clean living environment.
2. Housekeeping schedules are flexible and are planned to accommodate the residents' routines, while maintaining a clean and safe environment.
3. Regularly scheduled environmental services audits are completed to ensure compliance with leading practices for environmental cleaning.
4. The following processes are developed and followed:
 - a) accommodating necessary housekeeping duties outside of regular environmental services hours, e.g. spills;
 - b) augmenting environmental cleaning & disinfection schedules during increased activity or outbreaks of infectious diseases; and
 - c) ensuring compliance with Workplace Hazardous Materials Information System (WHMIS) regulations. Current Material Safety Data Sheets for all applicable products used/stored in the home are maintained and are easily accessible to staff members.
5. Appropriate mechanisms are in place to effectively minimize unpleasant odours.
6. Hazardous products that may be harmful to residents are secured at all times and are not accessible to residents. They are stored and disposed of in accordance with established safety practices/manufacturers' recommendations.
7. Cleaning and disinfecting agents are mixed and used according to manufacturers' recommendations.
8. Cleaning and disinfectant products and other chemicals used in environmental cleaning are not used after their expiration date.

12.2 Condition of Home and Site

Outcome:

The home and site are maintained through good stewardship and provide a comfortable, secure environment that optimizes resident quality of life and supports the delivery of safe, quality resident accommodation and care.

12.2.1 General Requirements:

The licensee shall ensure:

1. There is a preventive maintenance program for the home.
2. Site development and building alterations or change in use of space from that originally intended have the approval of the Department of Health and Wellness and other required authorities.
3. Repairs and alterations to the home are carried out in accordance with applicable CSA standards.
4. Decommissioned, redundant equipment and materials are properly removed and disposed.
5. Systems, furnishings and equipment are maintained in accordance with the requirements of the manufacturer and/or accepted industry standards, whichever is more stringent.
6. Furnishings selected for the home are made of materials that can be easily cleaned and disinfected.
7. Furniture for open concept living areas, which may include chairs, tables, other related furnishings and upholstered furniture meets all of the requirements of the Office of the Fire Marshal.
8. Root causes analyses of building and maintenance issues related to compromised functionality, including but not limited to, surface integrity and aesthetic integrity are identified, analyzed and corrected.

Additional Requirements for Nursing Homes

The licensee shall ensure:

9. Compliance with the Department of Health and Wellness' Nursing Home Maintenance Standard.

Additional Requirements for Homes Constructed in 2005 or Later

The licensee shall ensure:

10. Building systems and components perform to originally intended standards for control

of water (including vapour and condensation) and air movement.

12.2.2 Site Requirements:

The licensee shall ensure:

1. Developed areas of the site are finished with a mix of soft landscaping (lawns, ground cover, shrubs, trees or planting beds) and hard landscaping (pavement or pavers) and are maintained to a high standard.
2. Aesthetic, functional and surface integrity of the following are maintained:
 - a) hard surfaced areas such as, but not limited to, smooth, level walkways;
 - b) building envelope such as, but not limited to, roofs, windows, doors, gutters, coatings and sealants;
 - c) interior building components such as, but not limited to, partitions, ceilings, doors, casework, coatings and sealants;
 - d) exterior equipment, furniture and structures such as, but not limited to, tanks, fences, signage and transformers;
 - e) building systems, furnishings and equipment such as, but not limited to, plumbing, heating, ventilation, power, lighting, emergency power, fire alarm, voice and data in accordance with manufacturers' guidelines and/or requirements; and
 - f) all furnishings, equipment, exposed mechanical and electrical systems and components such as, but not limited to, fixtures, trim, devices, enclosures and fabrics.
3. Aesthetic integrity and health of lawn areas and plant materials are maintained.
4. Windows are restricted from opening more than 8 inches.
5. Exterior doors are free of obstacles such as snow and ice.
6. Service and access operational clearances required for maintenance are not compromised.

APPENDIX A

Required Policies

In accordance with section 7.1 of the Long Term Care Program Requirements: Nursing Homes and Long Term Care Facilities, licensees shall ensure that, at a minimum, the following policies and procedures are developed and followed. For ease of reference, the applicable section is provided.

Assessments (s. 6.1)

Contracted Personnel (s.11.1)

Critical Incident Reporting (s.8.2)

Disclosure of Adverse Events (s. 8.2)

Disclosure of Wrongdoing (8.2)

Involvement in Residents' Personal Affairs (s.11.1)

End of Life Care (s. 6.7)

Environmental Services (s. 12.1)

Ethics (s. 8.6)

Extremes of Internal Temperature (s.8.2)

Family Council (Nursing Homes only) (s. 7.3)

Food Services (s. 6.5)

Infection, Prevention and Control (s. 8.4)

Least Restraint (Nursing Homes only) (s.8.3)

Management and Administration of Medications and Treatments (s. 8.5)

Management of Resident Funds (s. 7.1)

Management and Staff Committee (s. 7.4)

Ongoing Education of Staff (s. 11.3)

Privacy and Confidentiality (s. 5.1)

Protection of Residents from Abuse (s. 8.3)

Quality Improvement (s. 8.1)

Receiving, Investigating and Resolving Complaints (s. 7.1)

Recreational Programming (s. 6.7)

Recruitment, Hiring and Orientation (s. 11.1)

Resident Care (s. 6.3)

Resident Council (s. 7.2)

Resident Records (s. 10.2)

Risk Management (s.8.2)

Safety Alerts (s.8.2)

Safer Needles in the Workplace (8.2)

Smoking (8.2)

Water Temperature Monitoring (s. 8.2)

Wound Management Policy (s. 8.2)

From: [McVeigh, Wendy](#)
To: "[Janet Simm](#)"; "[Shelley Jones - DHW \(Shelley.Jones@novascotia.ca\)](#)"; "[Jessome, Kate K](#)"; "[Lafferty, Robert \(Robert.Lafferty@novascotia.ca\)](#)"; "[Langille, Paula D](#)"
Cc: [Stevens, Susan](#); [McVeigh, Wendy](#)
Subject: RE: REQUEST - Northwood - Fever Screening Thermal Cameras
Date: Monday, April 13, 2020 12:12:57 PM
Attachments: [image.png](#)

Bob,

I know you were investigating this yesterday.

Kate and Paula,
Are you able to follow up today. Do you have a sense of timeframes for a response?

Thanks,

Wendy



[Visit NSHA Continuing Care web page](#)

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

 I support inclusion

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
<https://novascotia.ca/coronavirus/>

From: Janet Simm [mailto:[REDACTED]]
Sent: Monday, April 13, 2020 11:56 AM
To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; 'Shelley Jones - DHW ([REDACTED]) <[REDACTED]>' 'Jessome, Kate K' ([REDACTED]) <[REDACTED]>' 'Lafferty, Robert ([REDACTED]) <[REDACTED]>' 'Langille, Paula D' ([REDACTED]) <[REDACTED]>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: REQUEST - Northwood - Fever Screening Thermal Cameras

Hi folks,

Reinhard and our IT folks have worked with Telus to reduce the quote- removing non critical features.

The new quote is per unit cost is **\$12,900.**

These devices are disappearing quickly- hopefully we have not missed the opportunity.

Janet

From: McVeigh, Wendy [<mailto:Wendy.McVeigh@nshealth.ca>]
Sent: April 11, 2020 12:12 PM
To: 'Shelley Jones - DHW' <[REDACTED]> <[REDACTED]> 'Jessome, Kate K' <[REDACTED]> 'Lafferty, Robert' <[REDACTED]> <[REDACTED]> 'Langille, Paula D' <[REDACTED]>
Cc: Janet Simm <[REDACTED]> Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: REQUEST - Northwood - Fever Screening Thermal Cameras

Hi folks,

Given the critical staffing shortages and the size of this facility could this proposal be considered? Do we require a quick ½ hour Skype call to discuss?

Wendy

From: Janet Simm [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Saturday, April 11, 2020 12:05 PM
To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: Fwd: Northwood - Fever Screening Thermal Cameras

\$20,000 investment will free up at 2 staff per shift who are assigned to screening- we have hired security to do the remainder of the screening- they however do not want to take responsibility for taking temps and the clinical conversation that result if there is an elevated temp- rightly so.

If you want the detailed specs I can send those as well.

This will be a tool we will use going forward for infection control.

J

Get [Outlook for iOS](#)

From: Janet Simm
Sent: Friday, April 10, 2020 2:07:32 PM
To: Reinhard Jerabek <[REDACTED]>
Cc: Brandon Meisner <[REDACTED]>
Subject: RE: Northwood - Fever Screening Thermal Cameras

[Added one other comment](#)

From: Janet Simm

Sent: April 10, 2020 2:04 PM
To: 'Reinhard Jerabek' <[REDACTED]>
Cc: Brandon Meisner <[REDACTED]>
Subject: RE: Northwood - Fever Screening Thermal Cameras

From: Reinhard Jerabek
Sent: April 10, 2020 1:36 PM
To: Janet Simm <[REDACTED]>
Cc: Brandon Meisner <[REDACTED]>
Subject: Northwood - Fever Screening Thermal Cameras

Hi Janet,

I did receive your previous email re this subject, but was not provided with DHW questions until a short time ago. Would you like to respond to queries below?

Reinhard

Sent from my iPhone

Begin forwarded message:

From: "Jones, Shelley R (Health)" <Shelley.Jones@novascotia.ca>
Date: April 10, 2020 at 1:05:21 PM ADT
To: Reinhard Jerabek <[REDACTED]>
Cc: "Akindoju, Toyin O" <Toyin.Akindoju@novascotia.ca>, "Farrell, Jeanne I" <Jeanne.Farrell@novascotia.ca>, "Langille, Paula D" <Paula.Langille@novascotia.ca>
Subject: RE: Northwood - Fever Screening Thermal Cameras

Hi Reinhard
Apologies for delayed follow up.

The cost is fairly high as compared to thermometers. It seems like the temp monitor system would still need to have staff monitor it, to flag that a staff has a temperature, so can you outline how this will benefit? Do you have a supply issue with thermometers? Just trying to understand justification for the cost. I like to support new ideas however I also have to defend them as being reasonable.

With the large numbers of staff entering our campuses, this seeing with introduce significant efficiencies. Currently we have a number if staff tied up in the screening process. With declining staff numbers, we are needing to redeploy these staff elsewhere. Currently if an individual is identified as having a temp, our process involves further assessment with our Occ Health Team. This process would continue.

With the large numbers of staff entering our campuses, this seeing with introduce significant risk reduction.

This will allow us to better maintain physical distancing during our screening process. It will also prevent queuing that is occurring particularly at Shift change- currently staff maintaining 6 ft. distancing are queuing outside of the building.

This will allow our current thermometers used during screening to be redeployed to care areas as the need grows in those areas.

We see this investment as something we will maintain in future as part of our infection control procedures.

I know the thermometer covers are been an ordering issues. In another facility they spoke with local Infection control and are putting probe covers in a baggie/container with the resident or staff name on it and cleaning with alcohol in between use (for those not impacted by covid). This would have to be explored by your site with Infection Prevention Control nurse, however I share that to explore.

Yes we have done that for residents- our key issue is screening procedures- currently we are cleaning thermometers after each use with alcohol as indicated

Other thoughts?

Would this only be used in high peak ILI season? Currently doors are closed to only staff, however do staff enter into a specific door/area in regular times? In regular times(post Covid), if it was mounted then would it capture visitors temperatures as well. Not sure this is privacy issue? I suspect would have to be disclosed at the entrance ?

As noted above, we will continue to use these tools/processes in the future to prevent outbreaks- we will all be adapting our infection control protocols based on our learnings from this pandemic.

Shelley Jones, RN,BN
Manager Liaison and Support Service
Continuing Care
Department of Health and Wellness
902-424-2240



From: Farrell, Jeanne I <Jeanne.Farrell@novascotia.ca>
Sent: April 7, 2020 8:05 PM
To: Jones, Shelley R (Health) <Shelley.Jones@novascotia.ca>
Cc: Akindoju, Toyin O <Toyin.Akindoju@novascotia.ca>
Subject: FW: Northwood - Fever Screening Thermal Cameras

Hi Shelley,

I don't resend emails to bug – I only do it cause I know it's easy for emails to get buried in your inbox.

Opinion on supporting the below for Northwood?

- "Northwood would like to proceed with purchasing two of the fever screening thermal cameras detailed in the attached documents, one camera for the Halifax site and the other unit for Bedford. At approximately \$20,000 (taxes in and installed),"

Thanks!

Jeanne

From: Farrell, Jeanne I
Sent: April 7, 2020 9:27 AM
To: Jones, Shelley R (Health) <Shelley.Jones@novascotia.ca>
Cc: Akindoju, Toyin O <Toyin.Akindoju@novascotia.ca>
Subject: FW: Northwood - Fever Screening Thermal Cameras

Hi Shelley,

See below: Reinhard from Northwood would like to know if DHW would support these expenditures before they commit to purchasing.

Thoughts?

Thanks,

Jeanne

From: Reinhard Jerabek <[REDACTED]>
Sent: April 7, 2020 9:14 AM
To: Farrell, Jeanne I <Jeanne.Farrell@novascotia.ca>
Subject: Northwood - Fever Screening Thermal Cameras

**** EXTERNAL EMAIL / COURRIEL EXTERNE ****

Exercise caution when opening attachments or clicking on links / Faites preuve de prudence si vous ouvrez une pièce jointe ou cliquez sur un lien

Hi Jeanne,

Northwood has been temperature testing all entrants to our buildings and we believe that this step has been very helpful so far in managing the COVID-19 situation.

Temperature testing has been done by management and non-union staff not only during the day, but also after hours and on weekends. This approach is not sustainable given that lack of a definitive time frame for the current situation combined with the large volume of staff to be screened during shift changes.

Northwood would like to proceed with purchasing two of the fever screening thermal cameras detailed in the attached documents, one camera for the Halifax site and the other unit for Bedford. At approximately \$20,000 (taxes in and installed), I did want to obtain the Department's approval as opposed to simply submitting the costs in the capital section of the COVID expense report. The cameras would not only be an asset in the current situation, but would also be helpful in an ongoing operational capacity and would certainly assist in case of future similar events.

Please review and advise.

Regards

Reinhard

From: [McVeigh, Wendy](#)
To: ["Jones, Shelley R \(Health\)"; Cruickshank, Cindy J](#)
Cc: [Stevens, Susan](#)
Subject: RE: EHS support for Northwood
Date: Saturday, April 18, 2020 3:04:13 PM
Attachments: [image.png](#)

Thank you Shelley.

Cindy,
If this is the case will you be leading this action and working with Geoff Piers and the NSHA deployment team?

Wendy



[Visit NSHA Continuing Care web page](#)

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

 I support inclusion

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

<https://www.cdha.nshealth.ca/coronavirus>
<https://intra.nshealth.ca/SitePages/coronavirus-update.aspx>
<https://novascotia.ca/coronavirus/>

From: Jones, Shelley R (Health) [mailto:[REDACTED]]
Sent: Saturday, April 18, 2020 3:02 PM
To: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>; Cruickshank, Cindy J
<[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Langille,
Paula D <[REDACTED]> Therien, Krystal A <[REDACTED]>
[REDACTED]
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: EHS support for Northwood

Hi Wendy

I have looped in Caroline from Northwood as she needs to answer that question regarding specific however I would say yes they need staff based on conversation

Shelley Jones, RN,BN
Manager Liaison and Support Service
Continuing Care



From: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Sent: April 18, 2020 2:56 PM
To: Jones, Shelley R (Health) <[REDACTED]> Cruickshank, Cindy J
<[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Langille,
Paula D <[REDACTED]> Therien, Krystal A <[REDACTED]>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: EHS support for Northwood
Importance: High

Thank you Shelley for reaching out to me after the meeting I appreciate that. As you noted I ask that myself and/or a member of our NSHA team be invited to all future meetings. I was not aware of this meeting.

To clarify will the DHW and/or the NSHA Deployment team be recirculating the “ask” for volunteers to fill critical staffing needs for evenings and nights?



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<https://novascotia.ca/coronavirus/>

From: Jones, Shelley R (Health) [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Saturday, April 18, 2020 2:47 PM
To: Cruickshank, Cindy J <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]>
[REDACTED] Langille, Paula D <[REDACTED]> Therien, Krystal A
<[REDACTED]> McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: EHS support for Northwood

Good Day

Sending a high level summary from the call held today with Northwood to discuss EHS support on site.

Northwood: Josie Ryan, Dr Barry Clarke, Caroline Campbell(HR director) Janet Simms

DHW: Cindy Cruikshank, Shelley Jones, Dr. Andrew Traverse (EHS) , Barry Burke, Alex Smith,

EMCI: Jeff Fraser, Bud Sampson

Medavie Health Ed: Zak Fitzsimons , Dr Jen McVeigh Med Director

- Dr. Andrew Travers and colleagues from EHS have identified an opportunity to engage paramedics as a team to assist Northwood with vitals, O2 sats, and other health assessments at this time.
- Proposed plan: Paramedics will be deployed to go into Northwood for 'rounding model' twice a day(total 3 hours) to do oxygen sats, resident checks as needed and report directly to Dr Barry Clarke
- It was discussed further and determine more time is likely needed on site at least to start this.
- It was suggested that an approach may be to develop teams that is coordinated by Nurse manager/clinical leader as they know the residents and work together with EHS to assess the residents. They would prioritize residents based on urgent need and then see all residents with positive results for assessment.
- EHS will report resident status to Dr. Barry Clarke and NM report up to Josie an that way all are getting the info and coordinated response. (documentation can be uploaded into system)
- Could set up a few teams to go throughout the building
- Reviewed the building layout as houses 485 residents when full (at 460) , 9 floors in centre with 33 residents each floor and 10 floors on the manor with the covid unit and lower levels of care (RCF) as well in manor. 70 % of floors impacted as CIOVID is throughout the building.
- Was suggested that perhaps there could be more support this weekend as the numbers of residents are increasing -some are asymptomatic and some get sick quickly. Currently some are on oxygen support.
- Jeff was going to go back and look at scheduling as the extended care paramedics are currently committed, however recognizing this priority- they are going to see what increased support could look like esp for weekend and get this rolled out. **They will get back to this group with their schedule/ plan.**
- Paramedic educator colleagues from [Medavie HealthEd](#) said there is opportunity to add paramedic students to the roster and/ or alternately the could be employed by Northwood for this time and could be available to work all shifts (current gaps on evenings and nights)
- Josie reports there is enough PPE to support current need(30,000 masks and washable gowns along with disposable).
- NW did report on the call that there was some improvement to staffing on days however evening and nights is still challenging.

- PSC has new HR resources over to them which will help.

Please note: that following this call I did reach out to Janet Simms to suggest it may be helpful to residents, staff and families if they were able to get some additional/ social work support into the facility and bill to DHW COVID. She forwarded this onto their social workers to review/access.

Please note: that following this call I did reach out to Wendy McVeigh(NSHA as she is the Director on call for today) to update her and she (or covering person) has requested to be on any future calls related to this.

Shelley Jones, RN,BN
Manager Liaison and Support Service
Continuing Care
Department of Health and Wellness
902-424-2240



From: [Caroline Campbell](#)
To: [McVeigh, Wendy](#); ["Jones, Shelley R \(Health\)"](#); [Cruickshank, Cindy J](#); [Elliott-Lopez, Vicki](#); [Langille, Paula D](#); [Therien, Krystal A](#)
Cc: [Stevens, Susan](#)
Subject: RE: EHS support for Northwood
Date: Saturday, April 18, 2020 3:47:57 PM
Attachments: [image.png](#)

Yes, Vicki has sent out an asks to the colleges and Rollie King is talking to the unions.

We should have a steady supply coming forward based on today's work.

Caroline Campbell
Corporate Director, People Services

From: McVeigh, Wendy [mailto:Wendy.McVeigh@nshealth.ca]
Sent: April 18, 2020 3:47 PM
To: Caroline Campbell <[REDACTED]> 'Jones, Shelley R (Health)'
<[REDACTED]> Cruickshank, Cindy J <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Langille, Paula D <[REDACTED]> Therien, Krystal A <[REDACTED]>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: EHS support for Northwood

Good to hear Caroline. We will stand down any further "ask" today.

Wendy



[Visit NSHA Continuing Care web page](#)

Wendy McVeigh
Director, Continuing Care, Central Zone
Provincial Responsive Behaviors Lead
Nova Scotia Health Authority
3825 Joseph Howe Drive
Halifax, NS B3L 4R6

 **support inclusion**

Office/Cell: [REDACTED]
Fax: 902-455-3508

Wendy.McVeigh@nshealth.ca

Administrative Assistant, Jenna Saulnier 902-487-0535

COVID RESOURCES

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<https://novascotia.ca/coronavirus/>

From: Caroline Campbell [mailto:[REDACTED]]
Sent: Saturday, April 18, 2020 3:44 PM

To: 'Jones, Shelley R (Health)' <[REDACTED]> McVeigh, Wendy
<Wendy.McVeigh@nshealth.ca>; Cruickshank, Cindy J <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Langille, Paula D <[REDACTED]>
Therien, Krystal A <[REDACTED]>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: EHS support for Northwood

We are still receiving support from all over the province, hopefully by Monday we will have a better idea of the gaps, but we are making great headway.

For now we will keep onboarding as many as possible to allow us to build capacity to help Dr. Clarke's team.

Caroline Campbell
Corporate Director, People Services

From: Jones, Shelley R (Health) [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: April 18, 2020 3:02 PM
To: Wendy McVeigh <wendy.mcveigh@nshealth.ca>; Cruickshank, Cindy J <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Langille, Paula D <[REDACTED]> Therien, Krystal A <[REDACTED]> Caroline Campbell <[REDACTED]>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: EHS support for Northwood

Hi Wendy
I have looped in Caroline from Northwood as she needs to answer that question regarding specific however I would say yes they need staff based on conversation

Shelley Jones, RN,BN
Manager Liaison and Support Service
Continuing Care
Department of Health and Wellness
902-424-2240



From: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Sent: April 18, 2020 2:56 PM
To: Jones, Shelley R (Health) <[REDACTED]> Cruickshank, Cindy J <[REDACTED]> Elliott-Lopez, Vicki <[REDACTED]> Langille, Paula D <[REDACTED]> Therien, Krystal A <[REDACTED]>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: RE: EHS support for Northwood
Importance: High

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To clarify will the DHW and/or the NSHA Deployment team be recirculating the “ask” for volunteers to fill critical staffing needs for evenings and nights?



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[REDACTED] Langille, Paula D <[REDACTED]> Therien, Krystal A
<[REDACTED]> McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: EHS support for Northwood

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at this time.

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Shelley Jones, RN,BN
Manager Liaison and Support Service
Continuing Care

Department of Health and Wellness
902-424-2240



From: [McVeigh, Wendy](#)
To: [Butt, Brian](#); [Stevens, Susan](#)
Subject: FYI: EHS - Field Assessment unit - relief plan for Northwood
Date: Saturday, April 18, 2020 3:02:01 PM
Attachments: [image007.png](#)

A heads up re EHS deployment to NW. As this EHS team is a combined Extended Care Paramedic paired with a Special Operations Paramedic this may/may not impact NSHA operations.

Brian,
I am sharing this as an FYI at this time.

Wendy

From: Jones, Shelley R (Health) [mailto: [REDACTED]]
Sent: Saturday, April 18, 2020 2:55 PM
To: Elliott-Lopez, Vicki < [REDACTED] > Cruickshank, Cindy J
< [REDACTED] > Langille, Paula D < [REDACTED] > Therien,
Krystal A < [REDACTED] > McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: FW: EHS - Field Assessment unit - relief plan for Northwood

Good day

In follow up to my previous email re EHS support- Northwood has been advised of the plan below devised by Jeff at EMCI.

Lisa Carr is their contact at Northwood

Josie Ryan and Dr Barry Clarke will be on site to work with them in the deployment plan.

Wendy- I have copied you and you can determine who this information is to be shared with on your end.

Shelley Jones, RN,BN
Manager Liaison and Support Service
Continuing Care
Department of Health and Wellness
902-424-2240



From: Jeffrey Fraser < [REDACTED] >
Sent: April 18, 2020 2:41 PM
To: [REDACTED] Cruickshank, Cindy J < [REDACTED] > Jones, Shelley R
(Health) < [REDACTED] > [REDACTED]
Smith, Alexandra (Health) < [REDACTED] > Jennifer McVey (External)
< [REDACTED] > Burke, Barry F < [REDACTED] > Travers, Andrew H
< [REDACTED] > Bud Sanford < [REDACTED] > Zachary Fitzsimmons
< [REDACTED] > Clarke, Barry <Barry.Clarke@nshealth.ca>

Cc: Paula Poirier <[REDACTED]>
Subject: EHS - Field Assessment unit - relief plan for Northwood

**** EXTERNAL EMAIL / COURRIEL EXTERNE ****

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Hi everyone ,

We have put together a plan that hopefully will help you all out during this challenging situation

The attending team is a combined Extended Care Paramedic paired with a Special Operations Paramedic which means you are receiving some of our most experienced and broadly trained Paramedics . their adaptability has been very remarkable during the covid 19 crisis .

Thanks again for helping out with the PPE as we are very tight with some of our supplies also we might be able to help out with some of the O2 needs described by Dr. Clarke and the Special Ops Medic can assess that when they arrive

For any urgent issues please call the Medical Communications Center @ 1888-346-9999 and ask to speak to the Watch Commander they will track any of our Sr. Leadership team to mitigate any issues experienced .

Bud is briefing the staff as we speak (keeping in mind this is an unusual situation and we want to be sure they are well prepared and understand the mission) It will be important that they remain in clinical scope and the proposed “ teaming up” with the Northwood staff is an excellent way to ensure success with that piece .

If you can assign a contact person and where you would like them to go when they arrive we should be set !

Date	Time frame # 1	Time Frame # 2
Saturday 18 April	Unit has will head to Northwood in the next hour- they can remain on scene until 1815	
Sunday 19 April	Unit will arrive around 730 and can remain on for the entire shift (1815)	
Monday	Crew will arrive at 0730 and remain until 10 am	Will return at 1600and can remain until 1815
Tuesday	Crew will arrive at 0730 and remain until 10 am	Will return at 1600and can remain until 1815
Wednesday	Crew will arrive at 0730 and remain until 10 am	Will return at 1600and can remain until 1815

Thursday	Crew will arrive at 0730 and remain until 10 am	Will return at 1600and can remain until 1815
Friday	Crew will arrive at 0730 and remain until 10 am	Will return at 1600and can remain until 1815

Jeffrey G Fraser
 Director Provincial Operations
 Emergency Health Services – EMC Operations
 902-407-4888

From: [Stevens, Susan](#)
To: [Emergency Operations Center, NS Health Authority](#)
Cc: [Stevenson, Colin](#); [Bond, Paula](#); [MacDougall, Brett](#); [Sullivan, Vickie](#); [Matthews, Wanda](#); [Burris, Debbie](#); [MacDonald, Madonna](#); [Stone, Joanne](#); [Alexiadis, Maria](#)
Subject: FW: CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax
Date: Friday, May 22, 2020 10:36:05 AM
Attachments: [CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax.pdf](#)

Making sure you received this from DHW



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: Millington, Susan I [mailto:[REDACTED]]
Sent: Friday, May 22, 2020 10:18 AM
To: Mason-Browne, Anne <Anne.Mason-Browne@nshsc.nshealth.ca>; Kidney, Angela <[REDACTED]> Tingley-MacLean, Mary Ellen <[REDACTED]>
[REDACTED] [REDACTED] [REDACTED]
Northwood Home Care <[REDACTED]> [REDACTED]
[REDACTED] Densmore, Jeff <[REDACTED]> RK MacDonald
<[REDACTED]> Oceanview <[REDACTED]> Glen Haven Manor
<[REDACTED]>
Cc: Langille, Paula D <[REDACTED]> Kelbratowski, Theresa
<[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Lafferty, Robert <[REDACTED]> Smith, Alexandra (Health)
<[REDACTED]> Cruickshank, Cindy J <[REDACTED]>
[REDACTED]; Stevens, Susan <Susan.Stevens@nshealth.ca>; Gorman,
Louise <Louise.Gorman@nshealth.ca>; Silver, Kim <[REDACTED]>
Subject: CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax

Hello,

Please find the attached document for your review. Questions can be directed to
[REDACTED]

Sue Millington

Administrative Support

Continuing Care

System Strategy and Performance

Nova Scotia Department of Health and Wellness

1894 Barrington Street, PO Box 488

7th Floor, Barrington Tower

Halifax, Nova Scotia, B3J 2R8



T: 902 424-4476

F: 902 424-0558

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If you have received this e-mail in error or you are not the intended recipient, please do not open any attachments and notify the sender by e-mail or telephone that you have received the message. After notifying the sender, delete the e-mail from your system. Thank you.

- b) Neither the expiration nor the earlier termination of this Agreement shall relieve, or be deemed to relieve, either Party from any duties, obligations and/or liabilities hereunder, which accrued prior to such expiration or termination, or that by their nature are intended to survive the expiration or earlier termination of this Agreement.

2) Clinical Operations

- a) The Parties will adhere to best practices for infection prevention and control.
- b) The Parties will work collaboratively to plan and deliver care to assigned Northwood residents.
- c) The Parties acknowledge that Department of Health and Wellness Long Term Care licensing restrictions, such as monitoring standards or policies, may have to be amended to be able to safely provide acute care within the long term care environment.
- d) Northwood shall notify NSHA in writing immediately in the event that Northwood disputes an activity or decision of NSHA. Any dispute will be jointly resolved by NSHA and Northwood as soon as clinical operations and/or conditions permit.

3) Roles and Responsibilities of NSHA

- a) NSHA shall establish an Emergency Operations Centre to support COVID-19 response requirements within Northwood.
- b) Support provided to Northwood by NSHA shall include but not be limited to: providing devices/equipment, delivery of clinical care, and administrative and support services, as needed, to assist Northwood during the local COVID-19 outbreak within the Facility. NSHA services will be provided to augment or support Northwood operations, and will include support directly related to COVID-19, as well as support of Northwood operations unrelated to COVID-19.
- c) NSHA shall have primary responsibility for the delivery of acute care within the Facility by NSHA employees, medical staff, volunteers, agents, and subcontractors ("NSHA Personnel"), including the practices and guidelines for the delivery of acute care by NSHA Personnel. NSHA shall provide additional staffing assistance as required to support the delivery of non-acute care.
- d) NSHA Personnel redeployed to the Facility shall provide services within their respective professional scopes of practice.
- e) All NSHA Personnel redeployed to the Facility shall be subject to and shall continue to act in accordance with NSHA's standards of clinical care.

4) Roles and Responsibilities of Northwood

- a) Northwood shall make available to NSHA adequate space and appropriate supplies and equipment as agreed upon between the Parties.

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Commented [SA(2)]: They have deployed both to COVID and non-COVID units within Northwood. Need to capture this somehow. Not sure if it should be included in c or be another section

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b) Northwood may choose to provide some gratuitous benefits (such as accommodations and meals) to NSHA Personnel during this temporary emergency situation. Any such benefits that may be offered by Northwood to any NSHA Personnel are the sole responsibility of Northwood and outside the Ministerial Directive, this Agreement and the GNP and MOA on the Casual Resource Pool dated April 16, 2020 (where applicable).

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c) Northwood employees, volunteers, agents, and subcontractors ("Northwood Personnel"), assigned to acute patients within Northwood, will follow and abide by direction of NSHA relating to the provision of acute care services.

d) Northwood agrees to work with DHW Monitoring and Evaluation Licensing and Compliance, as needed, to amend any Department of Health and Wellness Long Term Care licensing restrictions as required pursuant to section 2.

5) Medical Information and Records

a) Northwood is the custodian of and, will remain responsible for the retention, maintenance, security, disclosure, and use of, the medical records and personal health information of Northwood residents unless and until they become a registered patient of NSHA.

b) NSHA Personnel may review, report on, and make entries in the Northwood medical records as necessary to fulfill their professional obligations, to meet the documentation needs required to maintain the quality of resident care.

b)c) NSHA Personnel will fulfill their professional obligations as an agent, as defined in the Personal Health Information Act s3(a), to Northwood.

6) Confidentiality & Privacy

a) Northwood and NSHA acknowledge that information about identifiable individuals ("Personal Information" and/or "Personal Health Information," as that term is defined in the *Personal Health Information Act* (Nova Scotia) ("PHIA")), has or may be shared between the parties, in accordance with PHIA, for the purpose of facilitating collaboration under this Agreement.

b) NSHA and Northwood may exchange Confidential Information to facilitate collaboration under this Agreement. Except as permitted by this Agreement, with consent, or as required under applicable laws, each Party agrees not to disclose or permit the disclosure of any Confidential Information pertaining to the other Party to a third party, and each Party will use any Confidential Information of the other Party only for the purposes of exercising or performing its rights and duties under this Agreement.

c) NSHA and Northwood agree that upon request, each will cease all use of any Confidential Information of the other and will return all documents, software or other media containing such Confidential Information upon the termination of this Agreement.

- d) For the purposes of this Agreement, “Confidential Information” means any and all information supplied to, or obtained by, a Party (the “non-disclosing party”) by, or from, the other Party (the “disclosing party”) in the exercise or performance of a right, duty or obligation under this Agreement, and, without the foregoing, includes any information about the disclosing party, its trade-secrets, know-how, processes, formulas, standards, marketing plans, operations, finances, programs, operational procedures, Personal Information and Personal Health Information, proprietary information and other business information, but does not include information that, at the time of disclosure, was in the public domain, or which later enters the public domain through no fault of the non-disclosing party, or information that the non-disclosing party can prove was in its possession at the time of disclosure and was not acquired, directly or indirectly, from the disclosing party.

7) Communications

- a) The Parties will work together to develop and promote key messages regarding this Agreement. In the event of media requests regarding the work related to this Agreement, the Parties will consult each other prior to responses.

8) Liability and Indemnity

- a) Each party shall be responsible for the supervision and control of its officers, directors, employees, agents and representatives and their activities at the Facility. Each party is responsible for any and all actions, claims, liabilities, losses, costs, and expenses, which directly arise from its own operations or activities within the Facility.
- b) In no event shall either party be liable for any indirect or consequential damages that are sustained by the other party.
- c) Northwood shall indemnify and save harmless NSHA, its officers, directors, employees, agents and representatives from and against all damages, actions, suits, claims, demands, or other proceedings of any kind or nature, which they, or any of them, may at any time incur or sustain as a result of or arising out of the actions, omissions, or negligence of Northwood, or their officers, directors, employees, agents and representatives or subcontractors.

9) Insurance

- a) Both Parties shall, during the Term of this Agreement, maintain the following insurances with insurers licensed in Nova Scotia:
- i) Professional Liability, where applicable, in an amount not less than \$5,000,000, per claim, insuring liability for errors and omissions in the performance of professional services;
 - ii) Comprehensive General Liability in an amount not less than \$10,000,000, per claim, insuring against bodily injury, personal injury, and property damage including loss of use thereof. Such insurance shall include non-owned automobile liability; and
 - iii) Automobile Liability on all vehicles owned, operated or licensed in the name of the Party in an amount of not less than \$2,000,000.

- b) Upon request, either party shall provide the other party with acceptable evidence of all required insurance in the form of a Certificate of Insurance.

10) Independent Contractor

- a) NSHA and Northwood agree that NSHA is acting as an independent contractor under this Agreement. Nothing in this Agreement shall be construed as creating an employer-employee relationship between Northwood and NSHA's Personnel or NSHA and Northwood's Personnel. Neither Party are in any way a common employer with the other Party as referred to in section 21 of the Nova Scotia *Trade Union Act*.
- b) All NSHA employees will remain as employees of NSHA and shall be covered under NSHA's Workers' Compensation coverage. All Northwood employees will remain as employees of Northwood and shall be covered under Northwood's Workers' Compensation coverage.

11) Financial Arrangements

- a) NSHA will track all costs (labour and supplies) related to services provided to Northwood. Determination of final allocation of costs incurred will be determined by the Department of Health and Wellness.
- b) As per section 4, Northwood will cover the cost of any benefits that may be offered by Northwood to NSHA Personnel.

12) Notices

- a) Any notice to be given under this Agreement by NSHA or the Supplier shall be in writing and delivered by hand, by facsimile transmission or by registered mail, to the other party at the address and to the attention of the contact individual indicated below:

Nova Scotia Health Authority

Attn:

Brendan Carr
President and CEO
90 Lovett Lake Court, Suite 201
Halifax, Nova Scotia B3S 0H6

Northwood

Attn:

Janet Simm
President
2615 Northwood Terrace
Halifax, Nova Scotia B3K 3S5

13) General

- a) This Agreement may be amended in writing upon the mutual agreement of both Parties.
- b) This Agreement may be executed in several counterparts, each of which when so executed shall be deemed to be an original, and such counterparts together shall constitute one and the same instrument, which shall be sufficiently evidenced by any such original counterpart. A copy of a signed counterpart may be delivered by fax, PDF email or other electronic means which shows a reproduction of the signature and such shall be considered a complete delivery and shall be deemed to be a signed original.
- c) This Agreement constitutes the entire agreement between the Parties and supersedes all prior and contemporaneous agreements, understandings and discussions, whether oral or written, and there are no other warranties, agreements or representations between the Parties except as expressly set forth herein. If any provision of this Agreement is determined to be illegal or unenforceable, all other terms and conditions of this Agreement shall be binding on the Parties.
- d) This Agreement shall be governed by the laws of Nova Scotia.
- e) Each Party warrants that it has the full power and authority to enter into this Agreement and that the person signing this Agreement on behalf of each has been properly authorized and empowered. Each party further acknowledges that it has read the Agreement, understands it, and agrees to be bound by it.

IN WITNESS WHEREOF Nova Scotia Health Authority and Northwood have caused this Agreement to be executed by their respective officers duly authorized in that behalf on the dates hereinafter set forth.

SIGNED, SEALED & DELIVERED

	NOVA SCOTIA HEALTH AUTHORITY
in the presence of:)
)
)
_____ Witness	_____
)
)
)
_____ Date	_____ Date

NORTHWOODCARE INCORPORATED
)
)

Commented [SL3]: Insert full legal name



Health and Wellness

Office of the Minister

PO Box 488, Halifax, Nova Scotia, Canada B3J 2R8 • Telephone 902 424-3377 Fax 902 424-0559 • [REDACTED]

April 19, 2020

Frank van Schaayk
Board Chair
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201
Halifax, NS B3S 0H6

Dear Mr. van Schaayk:

Re: Redeployment of NSHA Staff to Northwood Halifax Campus

In accordance with Ministerial Directive on Redeployment of Nova Scotia Health Authority Staff, dated April 19, 2020, I request that, effective immediately, NSHA staff be redeployed to Northwood Halifax Campus long-term care facility to respond to COVID-19.

I look forward to your cooperation and collaboration in assisting the Province to combat COVID-19 and protecting long-term care residents as one of our most vulnerable populations during this unprecedented time.

I would be pleased to discuss further as required.

Regards,

The Honourable Randy Delorey
Minister of Health and Wellness

cc. Brendan Carr, CEO NSHA
Premier Stephen McNeil

May 19, 2020

To: Dr. Brendan Car, CEO, NSHA
Dr. Krista Jangaard, CEO, IWK
NSHA Emergency Operations Centre
Continuing Care Emergency Operations Centre

Purpose: Directive Regarding Healthcare Workers Deployed to Northwood Halifax

To ensure the health and safety of NSHA and IWK healthcare workers, patients and staff and to ensure the health and safety of Northwood Halifax residents, health care workers and staff, **all health care workers providing direct ongoing patient care at Northwood Halifax are hereby required to self-isolate for fourteen (14) days prior to returning to work at any NSHA or IWK facility.**

This directive

- has been issued due to the outbreak of COVID-19 at the Northwood Halifax Campus;
- is effective as of May 7, 2020; and
- applies to all physicians, NSHA /IWK staff, healthcare workers including but not limited to Registered Nurses (RNs), Licenced Practical Nurses (LPNs) and Continuing Care Assistants (CCAs) who provide ongoing direct patient / client care at Northwood Halifax.

Mandatory requirements

1. The NSHA and IWK must communicate this directive to all physicians, healthcare workers, other staff who are currently, or may be in the future, deployed to Northwood Halifax and expected to return to work in a NSHA or IWK facility.
2. The requirements for isolation at home during the 14 day period will be consistent with the requirements for isolation at home under work isolation, which are permissive of essential trips outside the home if there are no other options providing a non-medical mask is worn.
3. All healthcare workers, staff who have been in isolation must be swabbed for COVID-19 on day twelve (12) and require a negative test result before returning to work.

Yours truly,



Kevin G.S. Orrell M.D., FRCSC, MBA(CED)
Deputy Minister of Health and Wellness

- c. C19 Task Force
Annette Elliott-Rose, IWK

CCIR#42.0

CONTINUING CARE INFORMATION RELEASE

TO: Deployed Health Care Workers
Red Cross
Northwood HR and CEO
Glen Haven Manor
Oceanview Manor

CC: Susan Stevens, Senior Director, Continuing Care, Nova Scotia Health Authority
Cindy Cruickshank, Director, Health Workforce Policies & Programs

FROM: Paula Langille, Director, Liaison and Service Support, Continuing Care, DHW

DATE: May 22, 2020

RE: Directive Regarding Healthcare Workers Deployed to Northwood Halifax

To ensure the health and safety of deployed healthcare workers, their residents and clients, along with maintaining health and safety of Northwood Halifax residents, health care workers and staff, all deployed health care workers providing direct ongoing patient care at Northwood Halifax are hereby required to self-isolate for fourteen (14) days prior to returning to work at their home LTC facility or Home Support Agency.

This directive:

- has been issued due to the outbreak of COVID-19 at the Northwood Halifax Campus; is effective as of May 7, 2020; and applies to all physicians, NSHA /IWK staff, healthcare workers including but not limited to Registered Nurses (RNs), Licensed Practical Nurses (LPNs) and Continuing Care Assistants (CCAs) who provide ongoing direct patient / client care at Northwood Halifax.

Mandatory requirements:

1. The NSHA and IWK must communicate this directive to all physicians, healthcare workers, other staff who are currently, or may be in the future, deployed to Northwood Halifax and expected to return to work in a NSHA or IWK facility.
2. The requirements for isolation at home during the 14 day period will be consistent with the requirements for isolation at home under work isolation, which are permissive of essential trips outside the home if there are no other options providing a non-medical mask is worn.
3. All healthcare workers, staff who have been in isolation must be swabbed for COVID-19 on day twelve (12) and require a negative test result before returning to work.

Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Stevenson, Colin
Sent: Friday, April 24, 2020 10:10 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; Alexiadis, Maria <Maria.Alexiadis@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: FW: REQUEST FOR ACTION: Provincial Response Planning for LTC

Please note that you will be receiving an invite to attend a LTC provincial response meeting with DHW.

Thank you

Colin



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Emergency Operations Center, NS Health Authority
Sent: Friday, April 24, 2020 10:05 AM
To: Veale, Jonathan <[REDACTED]>
Cc: COVID19CC <[REDACTED]> C19TaskForce <[REDACTED]>
Knowles, Ruby M <[REDACTED]> Chouinard, Vanessa P
<[REDACTED]> Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Elliott-Lopez, Vicki <[REDACTED]> Orrell, Kevin <[REDACTED]>
Lagasse, Jeannine <[REDACTED]> C19TaskForce
<[REDACTED]> Batstone, Angie <[REDACTED]> Grimm, Christine Z <[REDACTED]>
Subject: RE: REQUEST FOR ACTION: Provincial Response Planning for LTC

Please include the following individuals in this meeting:

From: [Stevens, Susan](#)
To: [Emergency Operations Center, NS Health Authority](#)
Cc: [Stevenson, Colin](#); [Bond, Paula](#); [MacDougall, Brett](#); [Sullivan, Vickie](#); [Matthews, Wanda](#); [Burris, Debbie](#); [MacDonald, Madonna](#); [Stone, Joanne](#); [Alexiadis, Maria](#)
Subject: FW: CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax
Date: Friday, May 22, 2020 10:36:05 AM
Attachments: [CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax.pdf](#)

Making sure you received this from DHW



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

This email message may contain confidential information and is intended only for the individual named. If you are not the named addressee you should not disseminate, distribute or copy this email. Please notify the sender immediately by email if you have received this email by mistake and delete this email from your system. Email transmissions cannot be guaranteed to be secure or error free as information could be intercepted, corrupted, lost, destroyed, arrive late or incomplete, or contain viruses. The sender therefore does not accept any liability for errors or omissions in the contents of this message that arise as a result of email transmissions. If verification is required please request a hard copy version.

From: Millington, Susan I [mailto:[REDACTED]]
Sent: Friday, May 22, 2020 10:18 AM
To: Mason-Browne, Anne <Anne.Mason-Browne@nshsc.nshealth.ca>; Kidney, Angela <[REDACTED]> Tingley-MacLean, Mary Ellen <[REDACTED]>
[REDACTED] [REDACTED] [REDACTED]
Northwood Home Care <[REDACTED]> [REDACTED]
[REDACTED] Densmore, Jeff <[REDACTED]> RK MacDonald
<[REDACTED]> Oceanview <[REDACTED]> Glen Haven Manor
<[REDACTED]>
Cc: Langille, Paula D <[REDACTED]> Kelbratowski, Theresa
<[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Lafferty, Robert <[REDACTED]> Smith, Alexandra (Health)
<[REDACTED]> Cruickshank, Cindy J <[REDACTED]>
[REDACTED] >; Stevens, Susan <Susan.Stevens@nshealth.ca>; Gorman,
Louise <Louise.Gorman@nshealth.ca>; Silver, Kim <[REDACTED]>
Subject: CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax

Hello,

Please find the attached document for your review. Questions can be directed to
[REDACTED]

Sue Millington

Administrative Support

Continuing Care

System Strategy and Performance

Nova Scotia Department of Health and Wellness

1894 Barrington Street, PO Box 488

7th Floor, Barrington Tower

Halifax, Nova Scotia, B3J 2R8



T: 902 424-4476

F: 902 424-0558

Please observe our scent-free policy to keep the workplace safe and healthy for everyone.

If you have received this e-mail in error or you are not the intended recipient, please do not open any attachments and notify the sender by e-mail or telephone that you have received the message. After notifying the sender, delete the e-mail from your system. Thank you.



GOOD NEIGHBOUR PROTOCOL

GUIDING PRINCIPLES:

The purpose of this protocol is to facilitate the sharing of human resources among various jurisdictions in the event of an emergency arising from events such as a pandemic or a natural disaster. The parties to this protocol recognize that many emergencies may exceed the capabilities of a particular jurisdiction, be that jurisdiction within or outside of the Province of Nova Scotia. The parties further recognize that there will be emergencies that require immediate action in order to allow a prompt and effective response. The parties further recognize that participants in an emergency response require certain information and facts to be known and understood in order to permit full attention to the emergency at hand.

The parties agree that in formulating this agreement, the health, safety, and well being of the victims of the emergency and of those responding to assist are fundamental. In response to the foregoing, the parties have agreed to the following:

- 1. Declaration of a pandemic or emergency event**
An event will be determined by the Province of Nova Scotia as an emergency or a pandemic event, by a specifically designated and authorized representative of the Province. This does not include a situation arising from a labour dispute.
- 2. Employee participation — away from their usual employer**
Employees participating in a role outside of the jurisdiction of their usual employer in an "event" recognized and designated as an emergency or pandemic will do so by agreeing to provide their services.
Such participation is contingent on the employee receiving specific approval from their usual employer.
In such a situation the Province will ensure that the employee's union(s) and the union(s) at the receiving jurisdiction are advised in a timely manner.
- 3. Compensation while participating**
All time in participation as an employee will be considered time worked.
There will be no financial loss or out-of-pocket expense to a participating employee.
The regular provisions of the usual employment relationship will apply to matters of basic compensation (i.e., pay, benefit accrual and pension, travel and accommodation, etc.).
Matters pertaining to scheduling hours of work and assignment of duties will be determined under the terms and conditions applicable at the host employer, including the compensation provisions of a collective agreement if applicable.
- 4. Isolation — Quarantine**
A participating employee subsequently required to be isolated under a "required isolation" will have such time considered as at work and will suffer no loss of regular earnings or benefits for the period of the isolation.
- 5. Role and duties**
Participating employees may be required to carry out duties and responsibilities not normally considered as core duties and responsibilities falling within the scope of their regular positions. In no case will an employee be required or expected to perform any duties that the employee considers to exceed their scope of expertise, scope of licence or certification. Employees will inform or declare to the employer any limitations in the performance of duties.
- 6. Volunteers**
All persons not employed by an employer who subsequently volunteer to participate in the employer's event will be provided with supervision by the employer. Persons considered as volunteers will be deemed to be temporary employees — non compensated and will be directed by the employer.
- 7. Assistance from out of province — ability**
Where a public health emergency in Nova Scotia requires the Province to request assistance from another province or territory, health-care and emergency employees from another province or territory may provide services to assist in the health-care emergency in Nova Scotia regardless of a provision in a collective agreement that limits the assignment or work to members of the union.
In such a situation the Province will ensure that the union(s) present at the affected workplace are advised in a timely manner.
- 8. Assistance from out of province — pay**
Health-care or other emergency workers from another province or territory providing services in Nova Scotia in a public health emergency will continue to be employed by their employer and to receive their wages and benefits from their employer but will provide services under the terms and conditions of employment respecting hours of work, scheduling, and performance of duties that apply under the applicable collective agreements in Nova Scotia.
- 9. Workers' Compensation**
Employees participating in a role outside of the jurisdiction of their usual employer under the Good Neighbour Protocol will continue to be covered, through their usual employer, by the provisions of the Workers' Compensation Board of Nova Scotia.
- 10. Personal protective equipment**
Personal protective equipment will be made available and utilized by employees participating in an event. Employees will be instructed in the proper use of personal protective equipment.
- 11. Emergency coordinating committee**
In the event of a declared emergency or pandemic, the parties agree to constitute a coordinating committee to assist in the administration/implementation of the principles reflected in this document.
The committee may meet or collaborate through other communication means.
The committee and its membership will be reflected in the provincial and DHA emergency planning documents.

The Honourable Darrell Dexter
Premier of Nova Scotia

The Honourable Maureen MacDonald
Minister of Health Promotion and Protection

Nova Scotia Government and General Employees Union
Joan Jessome, President

Canadian Union of Public Employees
Dany Cavanagh, President of CUPE Nova Scotia

Canadian Auto Workers Union
Susan Burrows, National Representative

Canadian Union of Postal Workers
Jeff Callaghan, National Director, Atlantic Region

International Union of Operating Engineers Local 727
Dwayne Fitzgerald, President

Service Employees International Union Local 902
Gerard Higgins, Business Agent

Nova Scotia Federation of Labour
Rick Clarke, President

Dated this 27 day of October, 2009



Health and Wellness

Office of the Minister

PO Box 488, Halifax, Nova Scotia, Canada B3J 2R8 • Telephone 902 424-3377 Fax 902 424-0559 • [REDACTED]

Ministerial Directive

on

Redeployment of Nova Scotia Health Authority Staff

To: Frank van Schaayk, Board Chair Nova Scotia Health Authority

I, Randy Delorey, Minister of Health and Wellness, Province of Nova Scotia, do hereby direct the Nova Scotia Health Authority (NSHA) pursuant to Section 46 of the *Public Service Act* and Section 11 of the *Health Authorities Act* with respect to redeployment of NSHA staff.

1. Purpose

1.1 To ensure effective utilization of health human resources to respond to the communicable disease, COVID-19, particularly in the health authority and long-term care facilities in the Province of Nova Scotia.

2. Application:

2.1 This Ministerial Directive applies to all NSHA staff, whether permanent or temporary, unionized or non-unionized, contract or otherwise engaged in provision of services in the NSHA.

3. Mandatory Requirements:

3.1 Pursuant to this Ministerial Directive, I hereby direct the NSHA to redeploy NSHA staff to such area or place in or at which such staff must perform their duties as directed by me or my delegates.

This Ministerial Directive is effective the date of signature and remains in effect until otherwise directed and communicated by me in my capacity as Minister of Health and Wellness.

Dated at Halifax, Nova Scotia, this _____ day of April, 2020.

The Honourable Randy Delorey
Minister of Health and Wellness

MEMORANDUM OF AGREEMENT

This Agreement dated the ____ day of _____ 2020

BETWEEN

NOVA SCOTIA HEALTH AUTHORITY
("NSHA")

-and-

NORTHWOODCARE HALIFAX INC.
("Northwood")

(Together, the "Parties")

WHEREAS, in response to the provincial state of emergency arising from COVID-19 and pursuant to section 46 of the Nova Scotia *Public Service Act* and section 11 of the Nova Scotia *Health Authorities Act*, the Honourable Randy Delorey, Minister of Health and Wellness in Nova Scotia has issued a Ministerial Directive, dated April 19, 2020, with respect to the redeployment of NSHA staff (the "Minister's Directive");

AND WHEREAS NSHA may assist the broader healthcare sector outside its jurisdiction through the sharing of human resources in accordance with the principles of the Nova Scotia Good Neighbour Protocol dated October 27, 2009 (the "GNP"), including recruiting and bringing into employment casual resources;

AND WHEREAS, in accordance with the Minister's Directive and GNP, and as part of NSHA's operations and at NSHA's direction, certain NSHA staff are redeployed to Northwood Halifax Campus long-term care facility (the "Facility") to support Northwood in responding to the local COVID-19 outbreak within the Facility;

AND WHEREAS the Parties agree that NSHA will provide support, including clinical, administrative and other support services, to assist Northwood during the local COVID-19 outbreak within the Facility, in accordance with the terms and conditions set forth within this Agreement.

NOW THEREFORE in condition of the mutual promises and covenants herein, the Parties agree to the following:

1) Term and Termination

- a) This Agreement shall continue in full force and effect in accordance with the Minister's Directive.

- b) Neither the expiration nor the earlier termination of this Agreement shall relieve, or be deemed to relieve, either Party from any duties, obligations and/or liabilities hereunder, which accrued prior to such expiration or termination, or that by their nature are intended to survive the expiration or earlier termination of this Agreement.

2) Clinical Operations

- a) The Parties will adhere to best practices for infection prevention and control.
- b) The Parties will work collaboratively to plan and deliver care to assigned Northwood residents.
- c) The Parties acknowledge that Department of Health and Wellness Long Term Care licensing restrictions, such as monitoring standards or policies, may have to be amended to be able to safely provide acute care within the long term care environment.
- d) Northwood shall notify NSHA in writing immediately in the event that Northwood disputes an activity or decision of NSHA. Any dispute will be jointly resolved by NSHA and Northwood as soon as clinical operations and/or conditions permit.

3) Roles and Responsibilities of NSHA

- a) NSHA shall establish an Emergency Operations Centre to support COVID-19 response requirements within Northwood.
- b) Support provided to Northwood by NSHA shall include but not be limited to: providing devices/equipment, delivery of clinical care, and administrative and support services, as needed, to assist Northwood during the local COVID-19 outbreak within the Facility. NSHA services will be provided to augment or support Northwood operations, and will include support directly related to COVID-19, as well as support of Northwood operations unrelated to COVID-19, including providing additional staffing assistance, as required, to support the delivery of non-acute care within the Facility.
- c) NSHA shall have primary responsibility for the delivery of acute care within the Facility by NSHA employees, physicians, medical staff, volunteers, agents, and subcontractors ("NSHA Personnel"), including the practices and guidelines for the delivery of acute care by NSHA Personnel.
- d) NSHA Personnel redeployed to the Facility shall provide services within their respective professional scopes of practice.
- e) NSHA Personnel redeployed to the Facility shall be subject to and shall continue to act in accordance with NSHA's standards of clinical care.

4) Roles and Responsibilities of Northwood

- a) Northwood shall make available to NSHA adequate space and appropriate supplies and equipment as agreed upon between the Parties.
- b) Northwood may choose to provide some gratuitous benefits (such as accommodations and meals) to NSHA Personnel during this temporary emergency situation. Any such benefits that may be offered by Northwood to any NSHA Personnel are the sole responsibility of Northwood and outside the Ministerial Directive, this Agreement, the GNP, and MOA on the Casual Resource Pool dated April 16, 2020 (where applicable).
- c) Northwood employees, volunteers, agents, and subcontractors ("Northwood Personnel"), assigned to acute patients within Northwood, will follow and abide by direction of NSHA relating to the provision of acute care services.
- d) Northwood agrees to work with DHW Licensing and Compliance, as needed, to amend any Department of Health and Wellness Long Term Care licensing restrictions as required pursuant to section 2.

5) Medical Information and Records

- a) Northwood is the custodian of and, will remain responsible for the retention, maintenance, security, disclosure, and use of, the medical records and personal health information of Northwood residents unless and until they become a registered patient of NSHA.
- b) NSHA Personnel providing services under this Agreement may review, report on, and make entries in the Northwood medical records as necessary to fulfill their professional obligations, to meet the documentation needs required to maintain the quality of resident care.
- c) NSHA Personnel providing services under this Agreement will fulfill their professional obligations as an agent, as defined in the *Personal Health Information Act* ("PHIA") section 3(a), to Northwood.

6) Research and Quality Reviews

- a) Any research undertaken by NSHA physicians, medical staff, employees, or agents must be approved through Northwood's research, review, and approval procedures and by NSHA's Research Department. The Parties acknowledge that for research projects approved by both Parties, personal health information may be shared between the Parties, in accordance with PHIA, for research purposes.
- b) All quality reviews and quality-improvement projects relating in any way to the services provided under this Agreement must be approved through Northwood's research, review, and approval procedures and NSHA Quality, and be conducted in accordance with PHIA.

7) Confidentiality & Privacy

- a) Northwood and NSHA acknowledge that information about identifiable individuals ("Personal Information" and/or "Personal Health Information," as that term is defined in PHIA", has or may be shared between the parties, in accordance with PHIA, for the purpose of facilitating collaboration under this Agreement.
- b) NSHA and Northwood may exchange Confidential Information to facilitate collaboration under this Agreement. Except as permitted by this Agreement, with consent, or as required under applicable laws, each Party agrees not to disclose or permit the disclosure of any Confidential Information pertaining to the other Party to a third party, and each Party will use any Confidential Information of the other Party only for the purposes of exercising or performing its rights and duties under this Agreement.
- c) NSHA and Northwood agree that upon request, each will cease all use of any Confidential Information of the other and will return all documents, software or other media containing such Confidential Information upon the termination of this Agreement.
- d) For the purposes of this Agreement, "Confidential Information" means any and all information supplied to, or obtained by, a Party (the "non-disclosing party") by, or from, the other Party (the "disclosing party") in the exercise or performance of a right, duty or obligation under this Agreement, and, without the foregoing, includes any information about the disclosing party, its trade-secrets, know-how, processes, formulas, standards, marketing plans, operations, finances, programs, operational procedures, Personal Information and Personal Health Information, proprietary information and other business information, but does not include information that, at the time of disclosure, was in the public domain, or which later enters the public domain through no fault of the non-disclosing party, or information that the non-disclosing party can prove was in its possession at the time of disclosure and was not acquired, directly or indirectly, from the disclosing party.

8) Communications

- a) The Parties will work together to develop and promote key messages regarding this Agreement. In the event of media requests regarding the work related to this Agreement, the Parties will consult each other prior to responses.

9) Liability and Indemnity

- a) Each party shall be responsible for the supervision and control of its officers, directors, employees, agents and representatives and their activities at the Facility. Each party is responsible for any and all actions, claims, liabilities, losses, costs, and expenses, which directly arise from its own operations or activities within the Facility.
- b) In no event shall either party be liable for any indirect or consequential damages that are sustained by the other party.

- c) Northwood shall indemnify and save harmless NSHA, its officers, directors, employees, agents and representatives from and against all damages, actions, suits, claims, demands, or other proceedings of any kind or nature, which they, or any of them, may at any time incur or sustain as a result of or arising out of the actions, omissions, or negligence of Northwood, or their officers, directors, employees, agents and representatives or subcontractors.

10) Insurance

- a) Both Parties shall, during the Term of this Agreement, maintain the following insurances with insurers licensed in Nova Scotia:
 - i) Professional Liability, where applicable, in an amount not less than \$5,000,000, per claim, insuring liability for errors and omissions in the performance of professional services;
 - ii) Comprehensive General Liability in an amount not less than \$10,000,000, per claim, insuring against bodily injury, personal injury, and property damage including loss of use thereof. Such insurance shall include non-owned automobile liability; and
 - iii) Automobile Liability on all vehicles owned, operated or licensed in the name of the Party in an amount of not less than \$2,000,000.
- b) Upon request, either party shall provide the other party with acceptable evidence of all required insurance in the form of a Certificate of Insurance.

11) Independent Contractor

- a) NSHA and Northwood agree that NSHA is acting as an independent contractor under this Agreement. Nothing in this Agreement shall be construed as creating an employer-employee relationship between Northwood and NSHA's Personnel or NSHA and Northwood's Personnel. Neither Party are in any way a common employer with the other Party as referred to in section 21 of the *Nova Scotia Trade Union Act*.
- b) All NSHA employees will remain as employees of NSHA and shall be covered under NSHA's Workers' Compensation coverage. All Northwood employees will remain as employees of Northwood and shall be covered under Northwood's Workers' Compensation coverage.

12) Financial Arrangements

- a) NSHA will track all costs (labour and supplies) related to services provided to Northwood. Determination of final allocation of costs incurred will be determined by the Department of Health and Wellness.
- b) As per section 4, Northwood will cover the cost of any benefits that may be offered by Northwood to NSHA Personnel.

13) Notices

- a) Any notice to be given under this Agreement by NSHA or the Supplier shall be in writing and delivered by hand, by facsimile transmission or by registered mail, to the

other party at the address and to the attention of the contact individual indicated below:

Nova Scotia Health Authority
Attn:
Brendan Carr
President and CEO
90 Lovett Lake Court, Suite 201
Halifax, Nova Scotia B3S 0H6

Northwoodcare Halifax Inc.
Attn:
Janet Simm
President
2615 Northwood Terrace
Halifax, Nova Scotia B3K 3S5

14) General

- a) This Agreement may be amended in writing upon the mutual agreement of both Parties.
- b) This Agreement may be executed in several counterparts, each of which when so executed shall be deemed to be an original, and such counterparts together shall constitute one and the same instrument, which shall be sufficiently evidenced by any such original counterpart. A copy of a signed counterpart may be delivered by fax, PDF email or other electronic means which shows a reproduction of the signature and such shall be considered a complete delivery and shall be deemed to be a signed original.
- c) This Agreement constitutes the entire agreement between the Parties and supersedes all prior and contemporaneous agreements, understandings and discussions, whether oral or written, and there are no other warranties, agreements or representations between the Parties except as expressly set forth herein. If any provision of this Agreement is determined to be illegal or unenforceable, all other terms and conditions of this Agreement shall be binding on the Parties.
- d) This Agreement shall be governed by the laws of Nova Scotia.
- e) Each Party warrants that it has the full power and authority to enter into this Agreement and that the person signing this Agreement on behalf of each has been properly authorized and empowered. Each party further acknowledges that it has read the Agreement, understands it, and agrees to be bound by it.

IN WITNESS WHEREOF Nova Scotia Health Authority and Northwood have caused this Agreement to be executed by their respective officers duly authorized in that behalf on the dates hereinafter set forth.

SIGNED, SEALED & DELIVERED

in the presence of:

P. L. L. L.
Witness

May 5, 2020
Date

**NOVA SCOTIA
HEALTH AUTHORITY**

)
)
) [Signature]
)
)
)
) May 5, 2020
Date

NORTHWOODCARE HALIFAX INC.

Witness

Date

)
)
)

)
)

Date

MOA on Casual Resource Pool

Nova Scotia Health Authority (the “Employer”)

And

The Nova Scotia Council of Health Support Unions

The Nova Scotia Council of Health Administrative Professional Unions

The Nova Scotia Council of Health Care Unions

The Nova Scotia Council of Nursing Unions

Whereas the Province of Nova Scotia has declared a State of Emergency and there is a declared Pandemic;

And Whereas there may be a need for the NSHA to assist other Employers by sharing casual resources with the broader healthcare sector to support the safety, health and wellbeing of Nova Scotians during the (state of emergency or Pandemic);

And Whereas the NSHA is positioned to recruit and bring into employment casual resources to support its own needs and to support the needs to the broader healthcare sector outside its jurisdiction in accordance with the principles of the Good Neighbor Protocol (“GNP”);

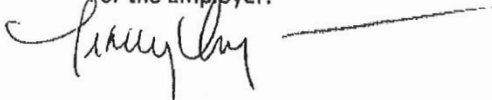
The Parties are agreed to the following in respect of their applicable collective agreements:

1. Notwithstanding job posting provisions in the collective agreements applicable to the NSHA, the NSHA may post for employees and hire in an expedited manner for a casual resource pool to provide support as required during the pandemic.
2. Job applications for a casual resources pool will be open to external applicants only as the intention is to increase casual resources capabilities.
3. All employees hired into a casual resource pool at a zone redeployment centre will be hired as Casuals and will be subject to the terms and conditions of the applicable collective agreement except as herein agreed.
4. All employees hired pursuant to a job posting that states that the position requires the employees to agree to be redeployed are deemed to have volunteered for redeployment in accordance with the terms of the GNP. The zone redeployment centre for the casual resource pool will be treated as the home area of the Casual employees and they will be precluded from placing their names on any Work Area Specific Casual Lists (WASCL) during the pandemic unless permission is granted by the Employer and the applicable Constituent Union. Employees on an

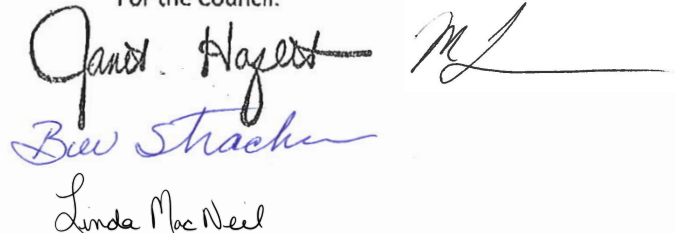
existing WASCL will not suffer a reduction in work opportunities as a result of the creation and deployment of casual resource pools.

5. All employees hired into a casual resource pool will be precluded from applying for existing vacancies during the pandemic unless permission is granted by the Employer.
6. Pursuant to Article 10 of the GNP personal protective equipment will be made available and used by employees in a deployment event. Employees will be instructed on the proper use of personal protective equipment.
7. Employees hired into casual resource pools will be covered for WCB by the NSHA regardless of where the employee may be deployed in accordance with Article 9 of the GNP. In accordance with Article 4 of the GNP Employees who are required to be isolate under a "required isolation" due to a Covid related exposure will continue to be paid based on the amount of work they could reasonably have expected to receive during the period of isolation.
8. The operation of the casual resource pool will be subject to review by the parties on a monthly basis by teleconference or by such other means as agreed by the parties.
9. The parties agree that the creation of casual resource pools is a temporary measure made necessary by the pandemic. The casual resource pools will be disbanded within two (2) weeks following the conclusion of the current pandemic as declared by the Province of Nova Scotia unless the parties mutually agree to an extension and employment for Casuals hired pursuant to this MOA will be terminated. Following the disbanding of the casual resource pools, persons who had been employed in the pools who wish to seek employment with the NSHA must apply for employment on the same terms as any other person who is outside the bargaining unit.
10. Union dues and assessments for employees in the casual resource pool will be remitted to the Constituent Union based on the jurisdiction in the geographic location of the zone redeployment centers where the employees are hired as determined by the applicable Council Constitution.
11. Each employee in the casual resource pool shall be given a copy of this agreement upon hiring and shall be advised of the union they belong to.
12. The parties agree that this Memorandum of Agreement applies to the following collective agreements: Health Support; Health Administrative Professionals; Health Care and Nursing (November 1, 2014-October 31, 2020).

For the Employer:



For the Council:



From: [Stevens, Susan](#)
To: [Emergency Operations Center, NS Health Authority](#)
Cc: [Stevenson, Colin](#); [Bond, Paula](#); [MacDougall, Brett](#); [Sullivan, Vickie](#); [Matthews, Wanda](#); [Burris, Debbie](#); [MacDonald, Madonna](#); [Stone, Joanne](#); [Alexiadis, Maria](#)
Subject: FW: CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax
Date: Friday, May 22, 2020 10:36:05 AM
Attachments: [CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax.pdf](#)

Making sure you received this from DHW



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
Senior Director, Continuing Care
Mumford Professional Centre
6960 Mumford Road, Suite 2069
Halifax, NS B3L 4P1
Office: 902-487-0811
Cell: [REDACTED] Fax: 902-423-8929
susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: Millington, Susan I [mailto:[REDACTED]]
Sent: Friday, May 22, 2020 10:18 AM
To: Mason-Browne, Anne <Anne.Mason-Browne@nshsc.nshealth.ca>; Kidney, Angela <[REDACTED]> Tingley-MacLean, Mary Ellen <[REDACTED]>
[REDACTED] [REDACTED] [REDACTED]
Northwood Home Care <[REDACTED]> [REDACTED]
[REDACTED] Densmore, Jeff <[REDACTED]> RK MacDonald
<[REDACTED]> Oceanview <[REDACTED]> Glen Haven Manor
<[REDACTED]>
Cc: Langille, Paula D <[REDACTED]> Kelbratowski, Theresa
<[REDACTED]> Jones, Shelley R (Health) <[REDACTED]>
Lafferty, Robert <[REDACTED]> Smith, Alexandra (Health)
<[REDACTED]> Cruickshank, Cindy J <[REDACTED]>
[REDACTED]; Stevens, Susan <Susan.Stevens@nshealth.ca>; Gorman,
Louise <Louise.Gorman@nshealth.ca>; Silver, Kim <[REDACTED]>
Subject: CCIR 42.0 Healthcare Workers Deployed to Northwood Halifax

Hello,

Please find the attached document for your review. Questions can be directed to
[REDACTED]

Sue Millington

Administrative Support

Continuing Care

System Strategy and Performance

Nova Scotia Department of Health and Wellness

1894 Barrington Street, PO Box 488

7th Floor, Barrington Tower

Halifax, Nova Scotia, B3J 2R8



T: 902 424-4476

F: 902 424-0558

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MEMORANDUM OF AGREEMENT

This Agreement dated the ____ day of _____ 2020

BETWEEN

**NOVA SCOTIA HEALTH AUTHORITY
("NSHA")**

-and-

**NORTHWOODCARE HALIFAX INC.
("Northwood")**

(Together, the "Parties")

WHEREAS, in response to the provincial state of emergency arising from COVID-19 and pursuant to section 46 of the Nova Scotia *Public Service Act* and section 11 of the Nova Scotia *Health Authorities Act*, the Honourable Randy Delorey, Minister of Health and Wellness in Nova Scotia has issued a Ministerial Directive, dated April 19, 2020, with respect to the redeployment of NSHA staff (the "Minister's Directive");

AND WHEREAS NSHA may assist the broader healthcare sector outside its jurisdiction through the sharing of human resources in accordance with the principles of the Nova Scotia Good Neighbour Protocol dated October 27, 2009 (the "GNP"), including recruiting and bringing into employment casual resources;

AND WHEREAS, in accordance with the Minister's Directive and GNP, and as part of NSHA's operations and at NSHA's direction, certain NSHA staff are redeployed to Northwood Halifax Campus long-term care facility (the "Facility") to support Northwood in responding to the local COVID-19 outbreak within the Facility;

AND WHEREAS the Parties agree that NSHA will provide support, including clinical, administrative and other support services, to assist Northwood during the local COVID-19 outbreak within the Facility, in accordance with the terms and conditions set forth within this Agreement.

NOW THEREFORE in condition of the mutual promises and covenants herein, the Parties agree to the following:

1) Term and Termination

- a) This Agreement shall continue in full force and effect in accordance with the Minister's Directive.

4) Roles and Responsibilities of Northwood

- a) Northwood shall make available to NSHA adequate space and appropriate supplies and equipment as agreed upon between the Parties.
- b) Northwood may choose to provide some gratuitous benefits (such as accommodations and meals) to NSHA Personnel during this temporary emergency situation. Any such benefits that may be offered by Northwood to any NSHA Personnel are the sole responsibility of Northwood and outside the Ministerial Directive, this Agreement, the GNP, and MOA on the Casual Resource Pool dated April 16, 2020 (where applicable).
- c) Northwood employees, volunteers, agents, and subcontractors ("Northwood Personnel"), assigned to acute patients within Northwood, will follow and abide by direction of NSHA relating to the provision of acute care services.
- d) Northwood agrees to work with DHW Licensing and Compliance, as needed, to amend any Department of Health and Wellness Long Term Care licensing restrictions as required pursuant to section 2.

5) Medical Information and Records

- a) Northwood is the custodian of and, will remain responsible for the retention, maintenance, security, disclosure, and use of, the medical records and personal health information of Northwood residents unless and until they become a registered patient of NSHA.
- b) NSHA Personnel providing services under this Agreement may review, report on, and make entries in the Northwood medical records as necessary to fulfill their professional obligations, to meet the documentation needs required to maintain the quality of resident care.
- c) NSHA Personnel providing services under this Agreement will fulfill their professional obligations as an agent, as defined in the *Personal Health Information Act* ("PHIA") section 3(a), to Northwood.

6) Research and Quality Reviews

- a) Any research undertaken by NSHA physicians, medical staff, employees, or agents must be approved through Northwood's research, review, and approval procedures and by NSHA's Research Department. The Parties acknowledge that for research projects approved by both Parties, personal health information may be shared between the Parties, in accordance with PHIA, for research purposes.
- b) All quality reviews and quality-improvement projects relating in any way to the services provided under this Agreement must be approved through Northwood's research, review, and approval procedures and NSHA Quality, and be conducted in accordance with PHIA.

- c) Northwood shall indemnify and save harmless NSHA, its officers, directors, employees, agents and representatives from and against all damages, actions, suits, claims, demands, or other proceedings of any kind or nature, which they, or any of them, may at any time incur or sustain as a result of or arising out of the actions, omissions, or negligence of Northwood, or their officers, directors, employees, agents and representatives or subcontractors.

10) Insurance

- a) Both Parties shall, during the Term of this Agreement, maintain the following insurances with insurers licensed in Nova Scotia:
 - i) Professional Liability, where applicable, in an amount not less than \$5,000,000, per claim, insuring liability for errors and omissions in the performance of professional services;
 - ii) Comprehensive General Liability in an amount not less than \$10,000,000, per claim, insuring against bodily injury, personal injury, and property damage including loss of use thereof. Such insurance shall include non-owned automobile liability; and
 - iii) Automobile Liability on all vehicles owned, operated or licensed in the name of the Party in an amount of not less than \$2,000,000.
- b) Upon request, either party shall provide the other party with acceptable evidence of all required insurance in the form of a Certificate of Insurance.

11) Independent Contractor

- a) NSHA and Northwood agree that NSHA is acting as an independent contractor under this Agreement. Nothing in this Agreement shall be construed as creating an employer-employee relationship between Northwood and NSHA's Personnel or NSHA and Northwood's Personnel. Neither Party are in any way a common employer with the other Party as referred to in section 21 of the Nova Scotia *Trade Union Act*.
- b) All NSHA employees will remain as employees of NSHA and shall be covered under NSHA's Workers' Compensation coverage. All Northwood employees will remain as employees of Northwood and shall be covered under Northwood's Workers' Compensation coverage.

12) Financial Arrangements

- a) NSHA will track all costs (labour and supplies) related to services provided to Northwood. Determination of final allocation of costs incurred will be determined by the Department of Health and Wellness.
- b) As per section 4, Northwood will cover the cost of any benefits that may be offered by Northwood to NSHA Personnel.

13) Notices

- a) Any notice to be given under this Agreement by NSHA or the Supplier shall be in writing and delivered by hand, by facsimile transmission or by registered mail, to the

IN WITNESS WHEREOF Nova Scotia Health Authority and Northwood have caused this Agreement to be executed by their respective officers duly authorized in that behalf on the dates hereinafter set forth.

SIGNED, SEALED & DELIVERED

in the presence of:

P. [Signature]
Witness

May 5, 2020
Date

**NOVA SCOTIA
HEALTH AUTHORITY**

)
) [Signature]
)
)
)
)
)
)
Date May 5, 2020

NORTHWOODCARE HALIFAX INC.

)
) [Signature]
)
)
)
)
)
)
Date May 12, 2020

[Signature]
Witness

May 12, 2020
Date

From: [Smith, Alexandra \(Health\)](#)
To: [Ashton, Steve](#)
Cc: [Stevenson, Colin](#)
Subject: Re: Northwood
Date: Sunday, April 26, 2020 12:49:06 PM

Thanks Steve. We really appreciate the support the IWK is offering.

20. Personal information

Alex

Sent from my iPhone

> On Apr 26, 2020, at 12:36 PM, Ashton, Steve <Steve.Ashton@iwk.nshealth.ca> wrote:
>
> Hi Colin/Alex,
>
> Just a quick touch base - I know our teams are all working hard on supporting Northwood this weekend, and in particular around the staffing issues.
>
> We have been staying in close touch with our staff at Northwood over the weekend. Annette is Exec leading from IWK overall, and Ryan our HR lead as you know, and working through a long list of issues.
>
> One area that seems to still be evolving over the weekend is clarity on the roles and responsibilities of each of the 4-5 partners in this (NW as the Employer, DHW CC, NSHA, IWK and HANS). Hoping that you are seeing that come together as we head into this week.
>
> The other observation (obvious to all I am sure) is the differences in Acute and LTC protocols and practices. For example, we are seeing requests for on-site/unit leadership and coordination of staff, as our staff used to having a Charge Nurse or Clinical Lead. LTC used to much thinner structure. My understanding is that all of these are getting logged and addressed as quickly as possible.
>
> From Labour Relations level, I know we have a lot of questions being worked through with you, Rollie and HANS, Alex. I had good chat with Janet H. Friday night and feel we have good support there with our nursing staff.
>
> Let me know if there is anywhere else you need beyond our current focus, and I have the same ask through Annette and Ryan.
>
> Thanks,
>
> Steve
>
>
> Sent from my iPhone

From: [Stevenson, Colin](#)
To: [McNeil, Shelly](#); [MacDonald, Tammy](#)
Cc: [Sullivan, Vickie](#); [Stone, Joanne](#); [Emergency Operations Center, NS Health Authority](#)
Subject: RE: IWK staff working at Northwood
Date: Friday, May 8, 2020 9:11:00 AM

Thank you. We are going to prepare something to get in to DHW so they are aware of the impact before moving forward with direction/decision. Appreciate the assistance.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: McNeil, Shelly
Sent: Friday, May 8, 2020 8:42 AM
To: MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Subject: Re: IWK staff working at Northwood

Hi Colin- I spoke to Jeanette-she thought Rob's plan was to speak to Kevin Bourke in occ health.
Shelly

Sent from my iPhone

On May 8, 2020, at 8:38 AM, MacDonald, Tammy <Tammy.MacDonald@nshealth.ca> wrote:

Hi Colin,
I am not aware of anything-
Tammy

From: Stevenson, Colin
Sent: Friday, May 08, 2020 6:26 AM
To: MacDonald, Tammy <Tammy.MacDonald@nshealth.ca>; Sullivan, Vickie

<Vickie.Sullivan@nshealth.ca>; McNeil, Shelly <Shelly.McNeil@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>

Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>

Subject: Fwd: IWK staff working at Northwood

Please see direction below provided to IWK. I am not aware of anything coming to NSHA indicating this?

Colin Stevenson
VP Health Services, Quality and System Performance
Nova Scotia Health Authority

Begin forwarded message:

From: "Ashton, Steve" <Steve.Ashton@iwk.nshealth.ca>

Date: May 7, 2020 at 9:39:10 PM ADT

To: "Stevenson, Colin" <Colin.Stevenson@nshealth.ca>

Subject: Fwd: IWK staff working at Northwood

Hi Colin - Annette said she was speaking with you, but just wanted to ensure you received same direction from Rob.

Steve

Sent from my iPhone

Begin forwarded message:

From: "Strang, Robert" <Robert.Strang@novascotia.ca>

Date: May 7, 2020 at 7:52:29 PM ADT

To: "Comeau, Jeannette"

<Jeannette.Comeau@iwk.nshealth.ca>

Cc: "Ashton, Steve" <Steve.Ashton@iwk.nshealth.ca>

Subject: IWK staff working at Northwood

Jeanette,

Thanks for the call earlier this evening. As we discussed, due to the recent cases of COVID-19 infection at Northwood, there is enhanced concern about staff brought in from other health care facilities to work at Northwood taking COVID back to their home facility. At the request of the Premier I am asking that all staff from the IWK who work at Northwood have a 14-day home isolation period before returning to work at the IWK. Work isolation protocols should not be used.

Please let me know if you have any questions.

Rob



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Ungar, Tracey
Sent: Friday, May 8, 2020 7:06 AM
To: Stone, Joanne <joanne.stone@nshealth.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>
Subject: Re: IWK staff working at Northwood

DHW asked if any of our staff had tested positive since working at NW. I checked with Tom and as of noon on Wednesday we had none. I advised DHW

After sharing that with them we later learned of one case testing positive post working at NW. DHW was informed on Thursday morning call.

As Joanne mentioned, on the same call IWK stated they were concerned with timing of our release and that they didn't agree/felt it was inconsistent.

Our message was released Friday night after extensive conversations with Dr Bourke.

Janet H contacted me yesterday to get copies of our documents and stated that she/they understood that Dr S had said on a call on weekend of ministerial directive that there was to be 14 day isolation. I advised her we worked with Dr Bourke who was following guidelines.

Alex sent meeting request last evening to meet w me and Ryan E-B to confirm how each of us are doing it.

NSHA is allowing asymptomatic staff to come to work and follow work isolation procedures (checking temp, calling OH etc) and self isolating at home for the 14 day period. It looks like a hybrid or modified version - for those who are asymptomatic.

Tracey

Sent from my iPhone

On May 8, 2020, at 6:50 AM, Stone, Joanne <joanne.stone@nshealth.ca> wrote:

We also have staff at magnolia etc so this is much bigger for us if that is the new direction I think unions lobbying...

Sent from my iPhone

On May 8, 2020, at 6:37 AM, Stone, Joanne <joanne.stone@nshealth.ca> wrote:

I have not seen anything but yesterday on a call with iwk They were saying that they did not circulate the document we did on the transfer of staff because there was something they wanted to discuss. They only have about 12 there so it's not as big an impact.

We have had 2 staff one in nz and one in wz who volunteered to go to northwood test positive

Sent from my iPhone

On May 8, 2020, at 6:26 AM, Stevenson, Colin
<Colin.Stevenson@nshealth.ca> wrote:

Please see direction below provided to IWK. I am not aware of anything coming to NSHA indicating this?

Colin Stevenson
VP Health Services, Quality and System Performance
Nova Scotia Health Authority

Begin forwarded message:

From: "Ashton, Steve"
<Steve.Ashton@iwk.nshealth.ca>
Date: May 7, 2020 at 9:39:10 PM ADT
To: "Stevenson, Colin"
<Colin.Stevenson@nshealth.ca>
Subject: Fwd: IWK staff working at Northwood

Hi Colin - Annette said she was speaking with you, but just wanted to ensure you received same direction from Rob.

Steve

Sent from my iPhone

Begin forwarded message:

From: "Strang, Robert"
<Robert.Strang@novascotia.ca>
Date: May 7, 2020 at 7:52:29 PM

ADT

To: "Comeau, Jeannette"

<Jeannette.Comeau@iwk.nshealth.ca>

Cc: "Ashton, Steve"

<Steve.Ashton@iwk.nshealth.ca>

**Subject: IWK staff working at
Northwood**

Jeanette,

Thanks for the call earlier this evening. As we discussed, due to the recent cases of COVID-19 infection at Northwood, there is enhanced concern about staff brought in from other health care facilities to work at Northwood taking COVID back to their home facility. At the request of the Premier I am asking that all staff from the IWK who work at Northwood have a 14-day home isolation period before returning to work at the IWK. Work isolation protocols should not be used.

Please let me know if you have any questions.

Rob

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Guidelines for Healthcare Workers Movement between work locations

1. NSHA acute care facilities will follow *Infection Prevention and Control Guidelines for Acute Care Facilities (April, 2020)*.

- a. HCWs will be cohorted to work only with known COVID-19 patients during a shift.
- b. HCWs assigned to work in a COVID-19 unit should be dedicated to that unit.
- c. These principles are applicable should staff work at multiple sites and consideration should be given to cohorting staff to one site or the other for a small block of time, if possible.

This minimizes the risk of cross contamination amongst units. This may change as the situation evolves and will be based on recommendation of IPAC and Employee Health.

2. LTC facilities within NSHA will follow the *Directive from Chief Medical Officer of Health for LTC facilities (April 17, 2020)* and *NSHA IPAC Guidelines for Long Term Care (April, 2020)*.

- a. Public Health will determine if staff can work between outbreak and non-outbreak facilities. Consult with NSHA Infection Prevention and Control and Occupational Health and Safety, as required.
- b. In the event of critical staff shortages, and under the direction of Public Health, staff from non-outbreak facilities may work in outbreak facilities. Staff may continue to work in their home facilities. This exception will not apply to those who have been identified as a close contact by Public Health
- c. Staff will be cohorted to work with symptomatic or asymptomatic residents during a shift.
- d. HCWs assigned to work in a COVID-19 unit should be dedicated to that unit.

3. IPAC may place further restrictions on staff movement related to an non-Covid outbreak unit

NSHA has otherwise not placed any restrictions on movement of staff within/between NSHA facilities. There has been some impacts to services due to the result of some-the need to isolate employees due to Covid-19, and the need to consider redeployment of work/workers to provide continuous service to some facility functions. If in the event that the need to redeploy staff between sites is required, the aforementioned guidelines and contractual agreements will be followed.

Commented [PGW1]: My apologies for having to ask this but where do these guidelines reside – perhaps insert hyperlink.

Commented [PGW2]: Can we guarantee this? If not, use should be rather than will.

Commented [PGW3]: Insert links

Commented [PGW4]: Consider inserting contact information.

Daily Data

May 8, 2020

Note: staff and resident numbers are what is being publically reported today – not real time

Occupancy Rate ~ Halifax Campus	
Occupancy Rate ~ Off Site Recovery Unit	26/29
# of vacant beds ~ Halifax Campus	Level II: 67 Level 1: 8 RCF: 1
# of residents in isolation <i>tested positive?</i>	229 resident total (2 new) 156 active cases
Active Cases	156
Total # of residents recovered <i>Note: This includes the numbers in the recovery unit.</i>	73
Total # of staff positive Northwood	95 staff total (2 new)
Active staff cases	38
Total # of staff recovered	57
# of NW staff/boots on the ground in place today (just # not types of staff)	Total: 209 Nursing: 136 Food: 29 Enviro: 27 Other: 15
# of staff/boots on the ground from other organizations deployed/in place today	Total: 61 Nursing: 51 Food: 3 Enviro: 2 Other: 5
# of NW staff return to work today	7
# of NW staff expected to return to work tomorrow	7

Daily Data

May 11, 2020

Occupancy Rate ~ Halifax Campus	
Occupancy Rate ~ Off Site Recovery Unit (total capacity 29)	25/29
# of vacant beds ~ Halifax Campus (total capacity 485)	Level II: 74 Level 1: 8 RCF: 1
# of residents in isolation <i>tested positive (cumulative)?</i> <i>Note: publically reported today – not real time</i>	231 (0 new)
Active Cases <i>Note: publically reported today – not real time</i>	156
Total # of residents recovered (cumulative) <i>Note: This includes the numbers in the recovery unit. These numbers are in real time.</i>	134
Total # of staff positive Northwood (cumulative) <i>Note: publically reported today – not real time</i>	95 staff total (0 new)
Active staff cases <i>Note: publically reported today – not real time</i>	18
# of NW staff/boots on the ground in place today (just # not types of staff)	Total: 231 Nursing: 152 Food: 31 Enviro: 34 Other: 14
# of staff/boots on the ground from other organizations deployed/in place today	Total: 64 Nursing: 56 Food: 3 Enviro: 2 Other: 3
# of NW staff return to work today	9
# of NW staff expected to return to work tomorrow	6

Daily Data

May 12, 2020

Occupancy Rate ~ Halifax Campus	
Occupancy Rate ~ Off Site Recovery Unit (total capacity 25)	25/25
# of vacant beds ~ Halifax Campus (total capacity 485) <i>Note: These numbers are in real time.</i>	75
# of residents in isolation <i>tested positive (cumulative)?</i> <i>Note: publically reported today – not real time</i>	232 (1 new)
Active Cases <i>Note: publically reported today – not real time</i>	157
Total # of residents recovered (cumulative) <i>Note: This includes the numbers in the recovery unit. These numbers are in real time.</i>	129
Total # of staff positive Northwood (cumulative) <i>Note: publically reported today – not real time</i>	95 staff total (0 new)
Active staff cases <i>Note: These numbers are in real time</i>	17
# of NW staff/boots on the ground in place today (just # not types of staff)	Total: 238 Nursing: 164 Food: 32 Enviro: 34 Other: 8
# of staff/boots on the ground from other organizations deployed/in place today	Total: 58 Nursing: 50 Food: 3 Enviro: 1 Other: 4
# of NW staff return to work today <i>Note: These numbers are in real time and may fluctuate through out the day</i>	2
# of NW staff expected to return to work tomorrow <i>Note: These numbers are in real time and may fluctuate through out the day</i>	15

Daily Data

May 13, 2020

Occupancy Rate ~ Halifax Campus	
Occupancy Rate ~ Off Site Recovery Unit (total capacity 25)	25/25
# of vacant beds ~ Halifax Campus (total capacity 485) <i>Note: These numbers are in real time.</i>	78
# of residents in isolation tested positive (cumulative)? <i>Note: publically reported today – not real time</i>	231 (1 new)
Active Cases <i>Note: publically reported today – not real time</i>	64
Total # of residents recovered (cumulative) <i>Note: This includes the numbers in the recovery unit. These numbers are in real time.</i>	129
Total # of staff positive Northwood (cumulative) <i>Note: publically reported today – not real time</i>	95 staff total (0 new)
Active staff cases <i>Note: publically reported today – not real time</i>	13
# of NW staff/boots on the ground in place today (just # not types of staff)	Total: 231 Nursing: 152 Food: 34 Enviro: 38 Other: 7
# of staff/boots on the ground from other organizations deployed/in place today	Total: 64 Nursing: 59 Food: 0 Enviro: 2 Other: 3
# of NW staff return to work today <i>Note: These numbers are in real time and may fluctuate through out the day</i>	9
# of NW staff expected to return to work tomorrow <i>Note: These numbers are in real time and may fluctuate through out the day</i>	4

Daily Data

May 14, 2020

Occupancy Rate ~ Halifax Campus	
Occupancy Rate ~ Off Site Recovery Unit (total capacity 25)	25/25
# of vacant beds ~ Halifax Campus (total capacity 485) <i>Note: These numbers are in real time.</i>	78
# of residents in isolation tested positive (cumulative)? <i>Note: publically reported today – not real time</i>	234
Active Cases <i>Note: publically reported today – not real time</i>	27
Total # of residents recovered (cumulative) <i>Note: This includes the numbers in the recovery unit. These numbers are in real time.</i>	162
Total # of staff positive Northwood (cumulative) <i>Note: publically reported today – not real time</i>	97 staff total (2 new)
Active staff cases <i>Note: publically reported today – not real time</i>	15
# of NW staff/boots on the ground in place today (just # not types of staff)	Total: 240 Nursing: 164 Food: 35 Enviro: 37 Other: 4
# of staff/boots on the ground from other organizations deployed/in place today	Total: 61 Nursing: 54 Food: 2 Enviro: 2 Other: 3
# of NW staff return to work today <i>Note: These numbers are in real time and may fluctuate through out the day</i>	0
# of NW staff expected to return to work tomorrow <i>Note: These numbers are in real time and may fluctuate through out the day</i>	3

Out of scope



-----Original Message-----

From: Sullivan, Vickie

Sent: Tuesday, April 21, 2020 10:16 PM

To: Bond, Paula <Paula.Bond@nshealth.ca>; Squires, Stacey <Stacey.Squires@nshealth.ca>; MacGillivray, Kerri <Kerri.MacGillivray@nshealth.ca>

Subject: RE:

Will do - Susan has meeting with DHW at 10-11, so will see what we can arrange

-----Original Message-----

From: Bond, Paula

Sent: Tuesday, April 21, 2020 9:06 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Squires, Stacey <Stacey.Squires@nshealth.ca>; MacGillivray, Kerri <Kerri.MacGillivray@nshealth.ca>

Subject:

can you pls make the appointment for after mid morning tomorrow to discuss NW

Sent from my iPhone

Out of scope



From: Sullivan, Vickie


Sent: Tuesday, April 21, 2020 10:08 AM

To: Bond, Paula <Paula.Bond@nshealth.ca>; Stevens, Susan <susan.stevens@nshealth.ca>

Subject: RE: 8.4 at NW

Thanks Paula

Susan and I are connecting at noon; we had a brief conversation earlier today

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; 
Email: vickie.sullivan@nshealth.ca

From: Bond, Paula

Sent: Tuesday, April 21, 2020 9:53 AM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: FW: 8.4 at NW

Susan are you aware

From: Bond, Paula
Sent: Tuesday, April 21, 2020 9:46 AM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>
Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: FW: 8.4 at NW

Fyi
Vickie is following up

From: Sullivan, Vickie
Sent: Tuesday, April 21, 2020 9:30 AM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: FW: 8.4 at NW

Hi Paula

Here is the communication Trish sent me last night; understand that Jason had been in contact with Tracey Ungar with similar messages and had included Dr. Strang, Rollie King, and Caroline from NW. Trish then directed communication to me, Manager and HR Advisor. Am meeting this am with HR, Manager, Director, IPAC and Professional Practice to review and respond. IPAC, educator, profesional practice were at NW all day yesterday and are there today and will continue to be there and support staff and look at practices, etc. Multiple changes have been already implemented. Josh the manager is there with them and staff indicated things are getting better with changes but stil work to do. Will update you after meeting this am

Vickie

From: Piers, Geoff W
Sent: Monday, April 20, 2020 9:36 PM
To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>
Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Fwd: 8.4 at NW

FYI in relation to developing a coordinated response to both Trish and Jason in the morning.

Sent from my iPhone

Begin forwarded message:

From: Trish MacDonald <[REDACTED]>
Date: April 20, 2020 at 9:09:03 PM ADT
To: "Sullivan, Vickie" <Vickie.Sullivan@nshealth.ca>
Cc: "Proffitt, Joshua G" <JoshuaG.Proffitt@nshealth.ca>, "Hirtle, Elizabeth" <Elizabeth.Hirtle@nshealth.ca>, "Connell, Katherine" <Katherine.Connell@nshealth.ca>, "Piers, Geoff W" <Geoff.Piers@nshealth.ca>, Jason MacLean <[REDACTED]> "Paul J. Cormier" <[REDACTED]> Shawn Fuller <[REDACTED]> Jason MacLean <[REDACTED]> "Lynette Johnson" <[REDACTED]> Jo-Ann Bailey <[REDACTED]>
Subject: RE: 8.4 at NW

Hi Vickie,

Thanks for getting back to me.

A few additional concerns came up on the last call. The nurses were told they may get Hazard Pay, can the employer also get back to us on this issue?

In addition, these nurses requested to be swabbed after they finish their set of 4/5 rotation or at the end of their shifts for the short/long rotation. They said they will go directly to the Assessment Units after work, as they don't want to expose their families. This will mean they will need additional accommodations waiting for the results.

Some of these nurses also travel with one another and want to ensure they will not be ticketed by HRP. We have suggested they carry their hospital ID with them to avoid this situation, can you confirm that this won't be an issue for these nurses.

The nurses want to know if perhaps the public/press should be informed of the working conditions and the conditions the patients/clients are living in at NW.

I will say that there were experienced nurses on the call and they stated they could never have prepared themselves for the conditions they walked into last night. They could not believe that their employer sent them there without going to evaluate the conditions they were sending their nurses too and the lack of notification they were given prior to starting their shift. The Union notified them on the Nursing FB Group to prepare them and know that they were to contact us with their issues and concerns.

I look forward to hearing from you tomorrow once you consult with Professional Practice and Infection Control after further assessment of the workplace. I look forward to their recommendations and suggestions to ensure the nurses and our other members are protected to care for the clients/patients of NW.

Take care and stay safe,

Trish

From: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Sent: April 20, 2020 8:17 PM
To: Trish MacDonald <[REDACTED]>
Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>; Connell, Katherine <Katherine.Connell@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>
Subject: RE: 8.4 at NW

Hi Trish

Thank you for the email; infection control and professional practice have and will continue to be engaged and are working with Josh and the team. Will follow-up tomorrow and get back to you

Kind regards

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
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Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Trish MacDonald [[mailto:\[REDACTED\]](mailto:[REDACTED])]
Sent: Monday, April 20, 2020 7:45 PM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: Proffitt, Joshua G <JoshuaG.Proffitt@nshealth.ca>; Hirtle, Elizabeth <Elizabeth.Hirtle@nshealth.ca>
Subject: 8.4 at NW
Importance: High

Hi Vickie,

We have had our first call with the nurse from 8.4 that have been redeployed to NW. Below is the list of things needed for NSGEU nurses working at NW. This has been sent by NSGEU to Rollie King, Tracey Unger, Dr. Strang and Caroline Campbell, apparently Dr. Strang does not want to get involved. We have been told that every patient will be treated as if they are Covid positive

Our nurses have addressed additional concerns since they have been redeployed there last night. They want the units set up as if they are at NSHA. There are no trollies outside the rooms with clean PPEs, instead they had boxes of masks in a box on the floor. They had no garbage cans in the room to safely doff their dirty PPEs and dispose of them. They have run out of Purell on the floors. They have no wipes to clean the patients and they have no Viroxx wipes to clean their equipment.

Things are no better there tonight and I understand that the ICN ,manager and the educator were there today, so I am disappointed to say the least that no changes have been made.. I am reaching out to you, as something needs to be done immediately to ensure these nurses are safe and be able to do their job. We have had our Health and Safety Officer on the call and talked about Right to Refuse. We have another call at 1945 tonight.

They need their ward aides there to help them set up the units so that they can work safely and effectively.

Last night they were cleaning probes , that are one time use of a tympanic thermometer in between their patients. They want their paperwork from NSHA for charting purposes as they have not been documenting, and this is a licensing issue.

I hope to hear from you on these issues and they will be addressed ASAP.

Trish

Here is what needs to be in place at NW:

1. You need strong nurses in be in Charge. They have their present CN **20.Perso** she needs to continue in her role. In addition, another RN there is **20.Pers** she needs to be one as well.
2. **20.Personal** is a casual RN with over 20 years of nursing I believe. I have spoken to her and she is willing to work in a short assignment and also be in a charge role. **She will work Monday-Friday or shift work but no nights. So either have her in charge or are use her as the Resource Nurse who can go to the different units and help nurses who have questions or issues and help problem solve,**
3. These nurses will get things organized , as I don't know how many units there are, but they need to get armbands on the patients so they can identify them, determine who is a CODE and who is not. They have no kardexes with patient information, these are documents that give quick detail about patients and what their needs are for care and deficits and if they require full or partial care. They will schedule proper breaks for the nurses on the day shifts. There should also be a designed nurse charge on each unit for the night shifts, just like their

unit if working at NSHA.

4. These Charge Nurses can look after staffing and ensuring the model of care they require and staff according with the NW workers that are there and keep the flow of care and update families with questions and concerns. This is lacking greatly, family are not being kept informed.
5. They need to have an educator on site with them , as well as an Infection Control there on a regular basis until things are set up and staff are NW staff are educated and following NSHA infection control protocols. After that they should be at least on site daily to assist and answer questions. If they are off site they need to be accessible by pager to the staff.
6. The staff need to have a contact person on nights in case there are issues and it be on every unit telling them who they are to contact. For instance will this be the Bed Manager at the HI site or the manager on Call with NSHA, contacted through Locating.
7. They need our housekeepers on site, as it seems like the place needs a complete overhaul. There needs to be deep cleaning done initially and then cleaning coming through several times a day on each unit and restocking wipes, doing another clean and getting rid of the biohazard wastes of the PPES on a regular basis.
8. Does each unit have a ward clerk, if not this is something to consider for a least a clerk for two units, as they will need help.
9. They need to have the proper PPEs at all time. I have suggested that they be wearing N95 masks covered with a surgical mask, the surgical can be discarded and they could wear the N95 for the day, as the surgical mask will protect the N95. Then need to ensure they have face shields, as there is lots of coughing going on.
10. Each unit needs to have a clean space that they can change into clean PPEs each shift and a dirty space to get out of these clothes. They also need to get cotton scrubs , as they have provided them with polyester and they are too hot to work in and ensure that they are available.
11. They also need a designated clean space to chart, and it needs to maintain clean, as this was not being followed. No one is to be in that area with dirty PPEs on.
12. The patients that are on the dementia floor need to be kept in their rooms, not running around the unit and touching the PPEs that nursing and other HC workers will be using
13. They will need sitters for some of the dementia patients or are they planning on using their CCAs to sit with these patients
14. Hotel accommodations, as they don't want to go home to their families
15. A list of casuals that are willing to work there, knowing that once they work there, they should not be working back in acute care. It will be too risky for them to come back to acute.

Trish MacDonald
Employee Relations Officer
NSGEU
255 John Savage Ave
Dartmouth, Nova Scotia B3B 0J3

Phone 902.424.4063 | Toll-Free 1.877.556.7438 | Fax 902.424.4832

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Out of scope



From: Sullivan, Vickie

Sent: Monday, April 27, 2020 2:57 PM

To: Bond, Paula <Paula.Bond@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Cc: Flinn, Jill <Jill.Flinn@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>

Subject: FW: Data

Importance: High

Please see attached spreadsheet detailing status of deployment to Northwood:

- Pooled posting
 - 13 (11 RNs; 2 LPNS) hired; 78 (64 RNs; 14 LPNS) onboarding
- Scheduled & working at Northwood
 - 160 (110 + approx. 50 - 8.4 staff)

If you have any questions, please let us know

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Flinn, Jill
Sent: Monday, April 27, 2020 2:34 PM
To: Monroe, Randi <Randi.Monroe@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Cc: McVeigh, Wendy <Wendy.McVeigh@nshealth.ca>
Subject: Data
Importance: High

This is not 100% percent inclusive but it should be close.
Is this the information you need daily Vickie?



Jill Flinn
Health Services Director
Central Zone Cancer & Palliative Care
Site Lead Victoria General Hospital
Room 114, 9B Centennial Building, VGH
1276 South Park Street
Halifax, NS | B3H 2Y
☎:902-473-6586 | [REDACTED]
☎:902-473-3359
✉:jill.flinn@nshealth.ca
www.nshealth.ca

Out of scope

From: Grant, Krista L

Sent: Thursday, April 23, 2020 2:56 PM

To: Murray Stenton <[REDACTED]>

Cc: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>

Subject: RE: Joint letter

Murray/Caroline,

Can you send this out to all staff asap? Thank you.

April 23, 2020

Despite recent claims regarding the working conditions at Northwood we want to assure you that the safety of the residents and the employees remains our top concern and primary focus. All employees working at Northwood receive the personal protective equipment recommended by both the World Health Organization and expert Infection Prevention and Control Clinicians in Nova Scotia. Northwood has a solid supply of personal protective equipment to keep both employees and residents safe.

Safe work environments and strong infection prevention and control practices are important in every health care setting, and especially those with a COVID-19 outbreak. Safety and infection control are so important that two infection prevention and control practitioners are on site daily to support Northwood's efforts. There are appropriate and safe spaces for staff to don and doff their PPE without risk of contamination.

As always, we encourage employees to raise any concerns they have with their onsite manager immediately so they can be addressed in a timely manner.

We sincerely thank you for the work you are doing to support the Northwood family. Our residents are benefiting from the care and support you are providing and your continued efforts to work together to provide quality care in a safe environment.

Sincerely,

Janet Simm and Vickie Sullivan on behalf of
Northwood and NSHA Leadership Teams

From: Caroline Campbell <[REDACTED]>

Out of scope




From: Sullivan, Vickie
Sent: Wednesday, April 29, 2020 3:25 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: FW: NHSA deployments APR 29

Hi Paula

Thought I would share this with you – the amount of deployment that has happened across the zone is remarkable, with over 500 staff deployed to support our covid response including Northwood. Randi and Jill have done a tremendous amount of work and as noted by Jill, it validates her fatigue.

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
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1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; 

Out of scope

From: Stevens, Susan

Sent: Sunday, May 3, 2020 2:52 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McCormick, Bethany
<Bethany.McCormick@nshealth.ca>

Subject: RE: Northwood today

Agree with all comments in the email trail



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:51 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Yes we can - just sent another email as Susan and I had spoken yesterday after call and hoping to also have further conversation with Colin tomorrow

Sent from my iPhone

On May 3, 2020, at 2:48 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

Vickie – is this something that Randi and Jill could begin to draft, with input from Wendy and NW?

From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:34 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Agreed

Sent from my iPhone

On May 3, 2020, at 1:47 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

I think we need to describe the staffing experience and lessons from northwood.

Need to frame up problem and recommendations,

We need to understand and clarify if NSHA is part of the longer term LTC solution or only during the active outbreak, and when is the time for us to step back, and how.

A few key pieces of the puzzle:

Level of baseline staffing levels pre covid,

Staff Levels at start if outbreak in the LTCF?

Levels of staff now?

When are those on isolation expected back ? Expected return to work dates. ?

Who is working on the longer term FTE issue and how?

- What hiring practices are in place by Northwood and DHW now to deal with the longer terms?

Bethany

From: Sullivan, Vickie

Sent: Sunday, May 3, 2020 1:24 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>

Subject: Fwd: Northwood today

FYI

See below

think this speaks to a need for a staffing recovery plan for NW as understand beyond number booking off, they have had a number of resignations

Vickie

Sent from my iPhone

Begin forwarded message:

From: "Monroe, Randi" <Randi.Monroe@nshealth.ca>

Date: May 3, 2020 at 12:23:23 PM ADT

To: "Sullivan, Vickie" <Vickie.Sullivan@nshealth.ca>

Cc: "Flinn, Jill" <Jill.Flinn@nshealth.ca>

Subject: Northwood today

Hi,

Great efforts by everyone yesterday my moved Northwood into above critical- but below normal staffing. It looks good for today and tonight. We have several new people coming into lines tomorrow, so things are looking good.

Today we talked about staffing the recovery unit at the hotel, as they have had some more resignations. I believe

we have a solution for next two weeks, but we did talk about the need to start pulling out staff back and start being in the new hires from pooled postings.

Cheers,
Randi

Sent from my iPhone

Out of scope

From: Stevens, Susan

Sent: Sunday, May 3, 2020 2:52 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; McCormick, Bethany
<Bethany.McCormick@nshealth.ca>

Subject: RE: Northwood today

Agree with all comments in the email trail



Susan Stevens, BSW, MEd, RSW, CHE, CFHI EXTRA Fellow
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susan.stevens@nshealth.ca
www.nshealth.ca/continuing-care

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From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:51 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Yes we can - just sent another email as Susan and I had spoken yesterday after call and hoping to also have further conversation with Colin tomorrow

Sent from my iPhone

On May 3, 2020, at 2:48 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

Vickie – is this something that Randi and Jill could begin to draft, with input from Wendy and NW?

From: Sullivan, Vickie
Sent: Sunday, May 3, 2020 2:34 PM
To: McCormick, Bethany <Bethany.McCormick@nshealth.ca>
Cc: Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: Re: Northwood today

Agreed

Sent from my iPhone

On May 3, 2020, at 1:47 PM, McCormick, Bethany <Bethany.McCormick@nshealth.ca> wrote:

I think we need to describe the staffing experience and lessons from northwood.

Need to frame up problem and recommendations,

We need to understand and clarify if NSHA is part of the longer term LTC solution or only during the active outbreak, and when is the time for us to step back, and how.

A few key pieces of the puzzle:

Level of baseline staffing levels pre covid,

Staff Levels at start if outbreak in the LTCF?

Levels of staff now?

When are those on isolation expected back ? Expected return to work dates. ?

Who is working on the longer term FTE issue and how?

- What hiring practices are in place by Northwood and DHW now to deal with the longer terms?

Bethany

From: Sullivan, Vickie

Sent: Sunday, May 3, 2020 1:24 PM

To: Stevens, Susan <Susan.Stevens@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>

Subject: Fwd: Northwood today

FYI

See below

think this speaks to a need for a staffing recovery plan for NW as understand beyond number booking off, they have had a number of resignations

Vickie

Sent from my iPhone

Begin forwarded message:

From: "Monroe, Randi" <Randi.Monroe@nshealth.ca>

Date: May 3, 2020 at 12:23:23 PM ADT

To: "Sullivan, Vickie" <Vickie.Sullivan@nshealth.ca>

Cc: "Flinn, Jill" <Jill.Flinn@nshealth.ca>

Subject: Northwood today

Hi,

Great efforts by everyone yesterday my moved Northwood into above critical- but below normal staffing. It looks good for today and tonight. We have several new people coming into lines tomorrow, so things are looking good.

Today we talked about staffing the recovery unit at the hotel, as they have had some more resignations. I believe

we have a solution for next two weeks, but we did talk about the need to start pulling out staff back and start being in the new hires from pooled postings.

Cheers,
Randi

Sent from my iPhone


Out of scope



From: Sullivan, Vickie
Sent: Tuesday, April 21, 2020 8:54 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>
Subject: Northwood tonight

Talked with both Josie and Janet after we talked - Josie just pulled a couple of the RNS who are coming in tonight they are strong/ skilled staff. They were reassuring. Some of her team are staying for the night and they will take turns sleeping and getting breaks just so we can keep going for the long haul. She knows we are here to help as we can

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; 
Email: vickie.sullivan@nshealth.ca

Out of scope



From: Sullivan, Vickie

Sent: Monday, April 20, 2020 9:47 AM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>;
Monroe, Randi <Randi.Monroe@nshealth.ca>

Subject: RE: Please point me in right direction - questions about COVID unit at Northwood

Tracy

We will get back to you re question 3 as more than staff on 8.4 have been deployed to assist

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; 
Email: vickie.sullivan@nshealth.ca

From: Stevenson, Colin

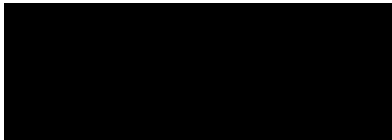
Sent: Monday, April 20, 2020 9:34 AM

To: Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>

Subject: RE: Please point me in right direction - questions about COVID unit at Northwood

Vickie/Randi – can you please work with Tracey Ungar (HR) regarding questions below. She is linking with the union as needed.

Thanks



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Ungar, Tracey

Sent: Sunday, April 19, 2020 8:55 PM

To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Subject: Please point me in right direction - questions about COVID unit at Northwood

Hi

Unions are asking about:

- timing of any official communication on the relocation – assume this is about the directive – I can also ask Health
- length of relocation – assume we can only say for the foreseeable future
- is it all staff who currently work on 8.4

Who should I contact with these questions instead of going to you? I was going to ask EOC but not sure if appropriate.

thanks

Tracey

Tracey Ungar, CPHR
People Services Director Employee and Labour Relations and



Northern Zone Operations
Colchester East Hants Health Centre
600 Abenaki Road
Truro, NS B2N 5A1
Office: 902-893-5554 ext 42134
[REDACTED]
www.nshealth.ca

Out of scope

From: Sullivan, Vickie

Sent: Sunday, April 26, 2020 9:05 PM

To: Hawkesworth, Theresa <Theresa.Hawkesworth@nshealth.ca>

Cc: Mitchell, Alex <Alex.Mitchell@nshealth.ca>; Bedford, Lewis <Lewis.Bedford@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; MacDonald, Madonna <madonna.macdonald@nshealth.ca>; McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>

Subject: RE: PPE - question about the procedural/surgical masks

Thanks Theresa – greatly appreciated

Vickie

From: Hawkesworth, Theresa

Sent: Sunday, April 26, 2020 8:52 PM

To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>

Cc: Mitchell, Alex <Alex.Mitchell@nshealth.ca>; Bedford, Lewis <Lewis.Bedford@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>; Rawding, Patsy A <Patsy.Rawding@nshealth.ca>; MacDonald, Madonna

Out of scope



From: Sullivan, Vickie

Sent: Thursday, April 23, 2020 12:48 PM

To: Matthews, Wanda <Wanda.Matthews@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>

Subject: RE: Requested info

Hi Wanda

Thanks for the information

Can you also advise number of RNs/LPNs this would equate to meet the rotational needs as outlined below

Thanks

Vickie

Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7

Office: 902-491-5880; [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Matthews, Wanda
Sent: Thursday, April 23, 2020 12:36 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Requested info

Hi,
COVID inpatient staffing and those volunteering to work in Northwood currently information below:

COVID Inpatient Units

YRH - 3 South (16 beds)

Days

2 RN's LD

2 LPN's LD

1 RN Team Lead Days M-F

1 Ward Clerk LD 24/7 except 12hr D on Sunday

Nights

2 RN's LN

1 LPN LN

This is the regular staffing for this unit – additional staff would be deployed to unit as need arises

SSRH – “Short End” Medical (16 beds)

2RN 24/7

2LPN 24/7

Using a mix of medical Unit staff with plan to deploy staff from Med/Surg as required

VRH – Med A (25 beds)

2RN 24/7

1 LPN 24/7

1 Unit Aid 24/7

Charge RN 12hr days/7days/wk

This is the regular staffing for this unit

Good morning. The following employees names were forwarded for deployment to support Northwood.

Northwood Support	Home unit/site	Role	Deployment start date
20. Personal [REDACTED]	VRH	20 [REDACTED]	Declined to come
20. Personal [REDACTED]	VRH	20 [REDACTED]	Needs an RN Buddy shift. Need to book.
20. Personal [REDACTED]	VRH	20 [REDACTED]	April 20 th
20. Personal [REDACTED]	VRH	20. Personal [REDACTED]	April 20 th
20. Personal [REDACTED]	VRH	20 [REDACTED]	April 21 st

20. Personal	DGH	20	Manager would not release.
20. Personal	DGH	20	April 20 th
20. Personal	VRH	20. Pers	Declined to come
20. Persona	YRH	20	April 26 th scheduled
20. Personal information	YRH	20. P	April 22 nd

Kind Regards,

Wanda



Wanda Matthews, BBA, CPA, CA
 Western Zone Operations Executive Director
 5 Chipman Drive
 Kentville, NS B4N 3V7
 Office: 902.679.3763
 [Redacted]
www.nshealth.ca

Executive Assistant: Valerie Parker | 902.679.3765

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Deployment Information

Date: as of 1300 on April 27th 2020

Pooled Posting		
	Hired	Onboarding
RN	11	64
LPN	2	14
Clerical*		
Support*		

** Do not have access yet*

Currently Scheduled & working in Northwood

	NSHA	Pool posting/	Continuing Care	IWK	Agency & other	Other Zones	Discipline total
CNE	2						2
IPAC	2						2
RN	15	1	1	5	1	3	26
LPN	3	1	1	2	4	1	12
CTA	3	1			5	1	10
Clerk		3					3
Aide							0
Stores clerk		1					1
Housekeeper		1					1
Swabbers	2						2
Helper/comfort	2		2			3	7
LTC assist	2	5			4		11
NW Callers			33				33
Facility Total	31	13	37	7	14	8	110
Total (all agencies)	110	* plus 8.4 staff which accounts for an additional 50 FTE					

Approach to Return to Work for Staff Returning from Northwood

Situation:

Through the Office of the Chief Medical Officer of Nova Scotia, the Premier has directed that IWK staff returning from deployment to Northwood Halifax Campus long-term care facility undergo a 14-day self-isolation period prior to returning to work at the IWK.

Background:

The majority of some 219 NSHA staff are also due to return from their Northwood deployment in the next days. With the goal of facilitating their safe reintegration to NSHA worksites, Occupational Health is currently refining the relevant posted guidance, as well as generating information packages for both returning employees and operational managers' use.

Assessment:

A pro-forma 14-day self-isolation for any/all NSHA staff returning from deployment to Northwood:

1. Does not represent a medical accommodation requirement for the vast majority of these personnel; following evidence-informed responsible practice, only a very few staff would require this level of intervention to support their safety and that of their colleagues/patients. Over the past several weeks, some staff have already returned to their home units and on rest days have not been following any additional precautions.
2. Could trigger staff concerns and confidence regarding the appropriateness or efficacy of their PPE during this or future deployments.
3. A 14-day home isolation will have a significant impact on the acute care sector, specifically pertaining to medicine flow. Staff from 8.4 at the Halifax Infirmary would comprise a large proportion of those unable to report to work. Currently 8.4 has a 36 bed capacity for medicine patient, which is currently operating at 20 beds. These beds are staffed with nurses and other professionals from other inpatient services in the QEII. Continued absence of the 8.4 staff and subsequent deployment of staff from other areas to support 20 medicine beds on 8.4 will create a resource barrier in NSHA's ability to increase both surgical and ambulatory care. Other services impacted by the 2 week reduction in available staff include:
 - Central Zone: Neurosciences, other inpatient unit in both Dartmouth and the VG, the emergency department, Primary Care, Nova Scotia Rehabilitation Centre, and Continuing Care.
 - Both Western and Northern zones also continue to support the Northwood effort with 8 staff from each zone currently present in the facility who would require 14 day home isolation
4. May trigger heightened expectation(s) around leave entitlement for any future/ongoing deployments.

5. Approach to return to work from Northwood should be consistent to prevent dispute between staff and unions.

Recommendation:

- Occupational Health supports the continued application of evidence-guided criteria to determine the fitness for work of staff returning from Northwood or other deployment(s).
- Approach to return to work from Northwood should be consistent.

Date: May 8, 2020

May 6, 2020

Meeting between Northwood, VON, NSHA and DHW to better understand experiences of VON deployed staff.

Action Items

Northwood:

- Review staff assignments
- Review orientation list - 4 people who missed orientation – 1 of 4 are the positive- early on no email addresses – did not receive their invite to the virtual orientation
- Look at further orientation needs for deployed VON staff
- Provide clarity re the instruction for paper towel use with masks during breaks
- Provide orientation/walk through of VON IPAC and/or managers virtual or in person
- With support from IPAC, investigate concerns being expressed and practices at hotel

NSHA IPAC

- NSHA IPAC team on site for further coaching
- Barb Jones, VON IPAC to connect with Patsy Rawding, NSHA IPAC
- NSHA staff share the lessons learned from their teams joining Northwood
- Explore with Northwood possible opportunities for additional IPPL/IPAC coaching/support re IPAC and PPE

VON

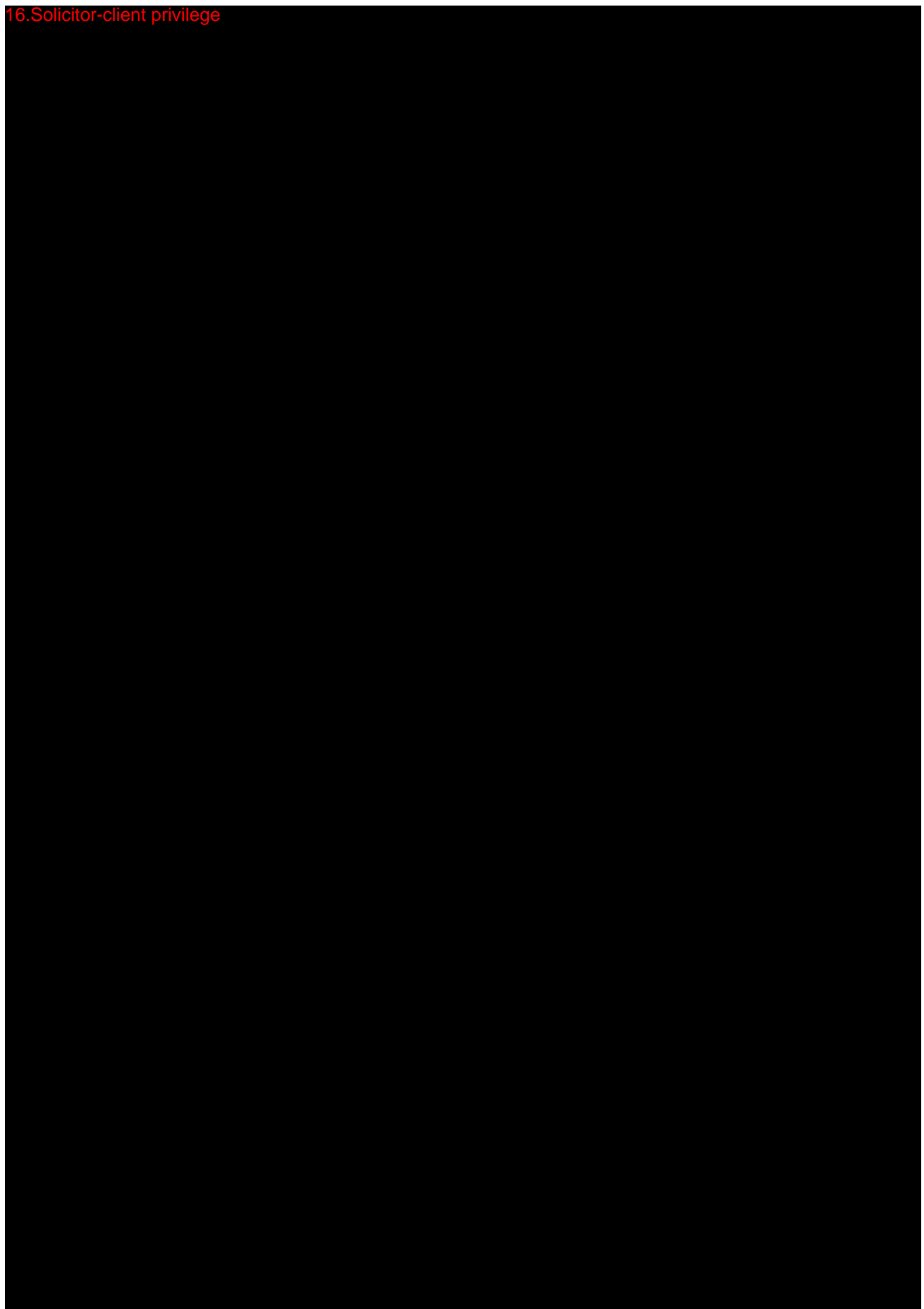
- Consider having a manager to support VON staff on site
- Visit Northwood to review practices, quality of the PPE
- VON to meet and get back to Northwood re next steps

MOH

- Continue their investigation share finding for improvements with VON, NSHA IPAC, Northwood

DHW

- Suggested more “boots” on the ground required, need for increased audits



16. Solicitor-client privilege



From: [Emergency Operations Center, NS Health Authority](#)
To: [Sullivan, Vickie](#); [MacDonald, Madonna](#)
Cc: [Emergency Operations Center, NS Health Authority](#); [Boutilier, Nicole](#); [Stevenson, Colin](#)
Subject: Directive Received - Re Northwood Deployment and Return to Work
Date: Saturday, May 9, 2020 4:52:31 PM
Importance: High

Vickie,

NSHA has received, on May 9th - written confirmation of the following Directive from DHW. See below.

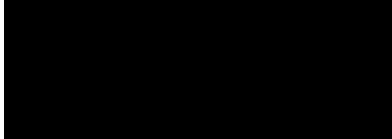
- **Staff deployed to Northwood from both health authorities (and VON) are to self isolate for 14 days before returning to work.**
- **In addition, these staff are also to be tested for COVID on day 12 of their self isolation as an added precaution before returning to work. Dr. Strang is charged with discussing this element with the Occupational Health and Safety leads at NSHA/IWK.**

The EOC, and Madonna as the Operations lead will be available to connect and support as needed. Please let us know if we should come together tomorrow to discuss.

Bethany
NSHA EOC Manager

From: [Stevenson, Colin](#)
To: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: Good Neighbour Protocol and NSHA MOA regarding casual pool
Date: Wednesday, April 22, 2020 9:59:00 AM
Attachments: [Good Neighbour Protocol \(002\).pdf](#)
[MOA Signed Casual Pool - Good Neighbour Apr 17 20.pdf](#)

For filing with Northwood information.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Ungar, Tracey
Sent: Sunday, April 19, 2020 9:11 AM
To: Stone, Joanne <joanne.stone@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Good Neighbour Protocol and NSHA MOA regarding casual pool

Hi

I'm attaching the GNP and our own MOA regarding the details as to how we are hiring people to deploy outside of NSHA.

HANS will have the legal perspective on the GNP but we have already been supplying Northwood with staff under the GNP/MOA.

Available any time for a call.

Tracey

From: [Stevenson, Colin](#)
To: [Stone, Joanne](#)
Subject: FW: Hotel and BUs
Date: Tuesday, April 21, 2020 5:05:00 PM

Hi Joanne – we would not be revisiting our (NSHA) policy on this. My understanding is that Northwood was offering to those working at their site, including the NSHA employees. This would be a Northwood covered decision; not NSHA. I think we will need to have this type of thing covered in the MOA so that it is not setting a direction for NSHA overall; but is based on what the individual sites that we are supporting are offering.

I know it will be clunky so happy to figure out how best to structure this.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
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www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Emergency Operations Center, NS Health Authority
Sent: Tuesday, April 21, 2020 4:39 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; McCormick, Rob <Rob.McCormick@nshealth.ca>
Subject: FW: Hotel and BUs

From: Stone, Joanne
Sent: Tuesday, April 21, 2020 10:16 AM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Johnson, Andrea <Andrea.Johnson@nshealth.ca>; McDuff, Karen <Karen.McDuff@nshealth.ca>; Read, Carolin <Carolin.Read@nshealth.ca>
Subject: Fwd: Hotel and BUs

Do we want to revisit the accommodation policy for hotels for employees in outbreak areas such as northwood ?

Sent from my iPhone

Begin forwarded message:

From: "Read, Carolin" <Carolin.Read@nshealth.ca>
Date: April 21, 2020 at 10:11:30 AM ADT
To: "Stone, Joanne" <joanne.stone@nshealth.ca>
Subject: FW: Hotel and BUs

FYI

From: Monroe, Randi
Sent: Tuesday, April 21, 2020 10:09 AM
To: Read, Carolin <Carolin.Read@nshealth.ca>
Cc: Flinn, Jill <Jill.Flinn@nshealth.ca>
Subject: RE: Hotel and BUs

This may be a barrier- we have staff who are willing to come but are living with people at risk and do not want to potentially add the risk. When we discussed on Sunday, we did offer hotel...I believe some of the staff on 8.4(at Northwood) are staying there.

We will need to have a strategy.

Randi

From: Read, Carolin
Sent: Tuesday, April 21, 2020 10:01 AM
To: Monroe, Randi <Randi.Monroe@nshealth.ca>
Cc: Flinn, Jill <Jill.Flinn@nshealth.ca>
Subject: RE: Hotel and BUs

Hi

No- the EOC denied hoteling for employees working in Covid units. We are only covering accommodation costs for hotels where volunteer staff are coming from other zones- this is claimable under the travel policy.

From: Monroe, Randi
Sent: Tuesday, April 21, 2020 9:51 AM
To: Read, Carolin <Carolin.Read@nshealth.ca>
Cc: Flinn, Jill <Jill.Flinn@nshealth.ca>
Subject: Hotel and BUs

Hi,

Just confirming when we are deploying staff to Northwood that you are paying for the hotel if they are willing to be deployed to Northwood.

Have a bit more info on the bus:

The bus we have in place for the 2x day for 8.4 staff is not able to add more stops/time- they are already on OT.
Our vendor has a second bus, same capacity as the shuttle (15). They would be willing to run it for 2 hrs in the am and 2 hrs in the eve for approx \$70 an hour. They will run it as long and often as we need it.

Thinking that this will be support Northwood, assuming that Northwood is ok with covering the cost. Thoughts?
Randi



Randi Monroe BSc.OT, OT Reg. (NS), MHS
Director
Rehabilitation & Supportive Care,
Neurosciences & Rheumatology
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1341 Summer Street
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randi.monroe@nshealth.ca

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From: [Emergency Operations Center, NS Health Authority](#)
To: [MacDonald, Madonna](#); [Boutilier, Nicole](#)
Cc: [Stevenson, Colin](#); [Carr, Brendan](#)
Subject: FW: Northwood Deployment and Return to Work
Date: Saturday, May 9, 2020 4:15:11 PM

Hello Madonna and Nicole.

We have received written confirmation. (see below). This will require an operational strategy to manage the implications in the immediate term. We will need to work with Vickie and CZ to address.

In longer term, this may impact service re-introduction and LTC deployment capacity.

Madonna - will you reach out to Vickie now?

Bethany
NSHA EOC Manager

From: Chouinard, Vanessa P [mailto:Vanessa.Chouinard@novascotia.ca]
Sent: Saturday, May 9, 2020 4:07 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Cc: Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Lagasse, Jeannine <Jeannine.Lagasse@novascotia.ca>; Beaton, Craig <Craig.Beaton@novascotia.ca>
Subject: RE: Northwood Deployment and Return to Work

Hello,

This email confirms the direction given by DHW to the NSHA CEO yesterday. Staff deployed to Northwood from both health authorities (and VON) are to self isolate for 14 days before returning to work. In addition, these staff are also to be tested for COVID on day 12 of their self isolation as an added precaution before returning to work. Dr. Strang is charged with discussing this element with the Occupational Health and Safety leads at NSHA/IWK.

Sincerely,
Vanessa

From: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Sent: May 9, 2020 1:53 PM
To: C19TaskForce <C19TaskForce@novascotia.ca>
Cc: Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>; Veale, Jonathan

<Jonathan.Veale@novascotia.ca>; Emergency Operations Center, NS Health Authority
<nshaeoc@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Subject: Northwood Deployment and Return to Work

C19 Taskforce, Vanessa and Jonathan

Attached is the SBAR re sent from NSHA to Jeannine Lagasse on Friday May 8th related to NSHA staff depolyed to Northwood.

In addition, NSHA is seeking clarification, and confirmation in writing, if a directive has been given to NSHA re: NSHA staff returning from deployment at Northwood Halifax Campus to undergo a 14 day self- isolation period prior to returning to work at NSHA.

If a written clarification or a copy of a directive can be provided that would be appreciated.

Many thanks
Bethany
NSHA EOC Manager

From: Bond, Paula
Sent: Friday, May 8, 2020 12:13 PM
To: 'Lagasse, Jeannine' <Jeannine.Lagasse@novascotia.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: SBAR NW Deployment Return to Work May 8 2020

Jeannine please see attached. Please feel free to call if you have any further questions
Paula

From: [Sullivan, Vickie](#)
To: [Stevenson, Colin](#); [Stevens, Susan](#)
Subject: FW: Northwood staffing
Date: Monday, May 4, 2020 1:43:00 PM
Attachments: [NW data to Vickie.xlsx](#)
Importance: High

Please see attached to get understanding of staff deployed

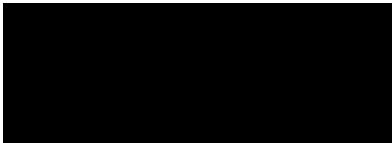
Victoria L. Sullivan, BN, RN, MHS, CON(C)
Operations Executive Director
Central Zone, Nova Scotia Health Authority
Halifax Infirmary 2-2121
1796 Summer Street
Halifax, NS
B3H 3A7
Office: 902-491-5880; Cell: [REDACTED]
Email: vickie.sullivan@nshealth.ca

From: Flinn, Jill
Sent: Monday, May 4, 2020 12:25 PM
To: Bond, Paula <Paula.Bond@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>
Subject: Northwood staffing
Importance: High

Attached is a tally of staff currently at Northwood for the update meeting today

From: [Stevenson, Colin](#)
To: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: SBAR NW Deployment Return to Work May 8 2020
Date: Friday, May 8, 2020 1:50:00 PM
Attachments: [SBAR NW Deployment Return to Work May 8 2020.docx](#)

For file re staff return to work from Northwood.



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Bond, Paula
Sent: Friday, May 8, 2020 12:13 PM
To: 'Lagasse, Jeannine' <Jeannine.Lagasse@novascotia.ca>
Cc: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: SBAR NW Deployment Return to Work May 8 2020

Jeannine please see attached. Please feel free to call if you have any further questions
Paula

From: [Stevenson, Colin](#)
To: [Emergency Operations Center, NS Health Authority](#)
Subject: FW: Sent to Northwood.xltm
Date: Sunday, April 19, 2020 10:37:00 AM



Colin Stevenson, BSc., MHA, CHE
Vice President – Health Services, Quality and System Performance
Nova Scotia Health Authority
90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6
Office: 902-491-5884
Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: Piers, Geoff W
Sent: Sunday, April 19, 2020 9:40 AM
To: Read, Carolin <Carolin.Read@nshealth.ca>; Alexandra.Smith@novascotia.ca;
Cindy.Cruickshank@novascotia.ca; Stone, Joanne <joanne.stone@nshealth.ca>; Stevenson, Colin
<Colin.Stevenson@nshealth.ca>
Subject: RE: Sent to Northwood.xltm

By my count it appears thus far we have had over 35 existing NSHA staff volunteer for redeployment to NW, and an additional 7 new casual workers forwarded from the open call pools.

I am connecting with the recruitment team in a few minutes to ensure we are getting all we can from the open call pools.

I assume the situation at NW remains critical. What are their staffing needs?

From: Read, Carolin
Sent: April 19, 2020 9:37 AM
To: Alexandra.Smith@novascotia.ca; Cindy.Cruickshank@novascotia.ca; Piers, Geoff W
<Geoff.Piers@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Stevenson, Colin
<Colin.Stevenson@nshealth.ca>
Subject: Fwd: Sent to Northwood.xltm

As you can see below volunteers are still coming forward. C

Sent from my iPhone

Begin forwarded message:

From: "Kline, Susan" <Susan.Kline@nshealth.ca>
Date: April 19, 2020 at 9:33:17 AM ADT
To: "Pattison, Natalie I L" <NatalieI.L.Pattison@nshealth.ca>, "Monroe, Randi" <Randi.Monroe@nshealth.ca>, "Flinn, Jill" <Jill.Flinn@nshealth.ca>, CZDeploy <CZDeploy@nshealth.ca>
Cc: "Read, Carolin" <Carolin.Read@nshealth.ca>, "Trainor, Amanda" <Amanda.Trainor@nshealth.ca>
Subject: RE: Sent to Northwood.xltm

Hi,

Two more RNs and an LPN have volunteered and been connected with Northwood this morning. Let me know if you need their names.

Susan

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From: [Sullivan, Vickie](#)
To: [Bond, Paula](#); [Stevenson, Colin](#)
Subject: FW: updated numbers
Date: Tuesday, April 28, 2020 11:23:45 AM
Attachments: [NW data re vickie.xlsx](#)

Updated staffing numbers for Northwood shown by organization and discipline

Key points

- number in schedule and working at NW has increased since yesterday (143 plus staff from 8.4 approx. 50)
- Pooled posting
 - o 16 hired
 - o 72 on boarding

Vickie

From: Flinn, Jill
Sent: Tuesday, April 28, 2020 11:05 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>
Subject: updated numbers

Updated NW numbers based on Success Factor and schedule updates



Jill Flinn
Health Services Director
Central Zone Cancer & Palliative Care
Site Lead Victoria General Hospital
Room 114, 9B Centennial Building, VGH
1276 South Park Street
Halifax, NS | B3H 2Y9
☎: 902-473-6586 | Cell: [REDACTED]
☎: 902-473-3359
✉: jill.flinn@nshealth.ca
www.nshealth.ca

From: Carol Read
To: Amanda Trainor
Subject: Fwd: Sent to Northwood.xltm
Date: Sunday, April 19, 2020 9:29:37 AM

Here are the additional volunteers from today

Sent from my iPhone

Begin forwarded message:

From: CZDeploy <CZDeploy@nshealth.ca>
Date: April 19, 2020 at 9:37:29 AM ADT
To: "Read, Carolin" <Carolyn.Read@nshealth.ca>, "Kline, Susan" <Susan.Kline@nshealth.ca>
Cc: "Pattison, Natalie I L" <NatalieI.L.Pattison@nshealth.ca>, "Monroe, Randi" <Randi.Monroe@nshealth.ca>, "Flinn, Jill" <Jill.Flinn@nshealth.ca>, "Trainor, Amanda" <Amanda.Trainor@nshealth.ca>
Subject: RE: Sent to Northwood.xltm

Here you go,

Date Received (DD-MM-YY)	Seniority Date (MM-DD-YY)	Employee Name	Phone Number	Position	Available Dates	Reporting Manager	Department/Cost Centre
19-Apr-20	casual	20. Bar			Offered to work beyond regular shifts	Rachel Nalepa/Tina Burden	491940
19-Apr-20	2016-07-04	20. Bar	20. Bar		Offered to work beyond regular shifts	Amy Button Langer	490856
19-Apr-20	2014-06-09	20. Bar	20. Bar		On leave for NP education due back May 1st. Will work for Northwood in meantime.	Suzanne McIsaac	490859

From: Read, Carolin
Sent: Sunday, April 19, 2020 9:34 AM
To: Kline, Susan <Susan.Kline@nshealth.ca>
Cc: Pattison, Natalie I L <NatalieI.L.Pattison@nshealth.ca>; Monroe, Randi <Randi.Monroe@nshealth.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>; CZDeploy <CZDeploy@nshealth.ca>; Trainor, Amanda <Amanda.Trainor@nshealth.ca>
Subject: Re: Sent to Northwood.xltm

Yes please

Sent from my iPhone

On Apr 19, 2020, at 9:33 AM, Kline, Susan <Susan.Kline@nshealth.ca> wrote:

Hi,
Two more RNs and an LPN have volunteered and been connected with Northwood this morning. Let me know if you need their names.
Susan

From: Pattison, Natalie I L
Sent: Sunday, April 19, 2020 8:01 AM
To: Monroe, Randi <Randi.Monroe@nshealth.ca>; Flinn, Jill <Jill.Flinn@nshealth.ca>; CZDeploy <CZDeploy@nshealth.ca>
Cc: Read, Carolin <Carolyn.Read@nshealth.ca>; Kline, Susan <Susan.Kline@nshealth.ca>; Trainor, Amanda <Amanda.Trainor@nshealth.ca>
Subject: Sent to Northwood.xltm

Hi There,

Luckily there has been tracking in regards to names sent to LTC. We do not have all of the shift dates for what they have been booked for as originally we were sending names and then they were booking the staff directly. Not sure if this week, we may need to adjust our processes or have some staff internally done to provide staff, but then we would be able to track to the shift what we are covering.

Amanda is waiting on an updated schedule from 20. Bar for the SEast patient -- and 8.3 is a Kronos Area So I will run that report in Kronos and send along momentarily. If there is any other information I can get together please let me know.

Will send 8.3 in a few moments.

Natalie

From: [Emergency Operations Center, NS Health Authority](#)
To: [Veale, Jonathan](#); [Stevenson, Colin](#); [C19TaskForce](#); [Chouinard, Vanessa P](#)
Cc: [Bond, Paula](#)
Subject: RE: 14 Day Isolation - Northwood - RESPONSE NEEDED / CLARIFICATION
Date: Monday, May 11, 2020 1:43:23 PM

Further to this, please consider the following scenarios:

1. Staff go to Northwood to complete bloodwork for patients, and then return to Q11 to complete their assignment.
2. Infection control complete inspections.
3. IPPL providing on-site guidance/training
4. Staff deployed to provide general support (not specific to a COVID unit) – working on other resident floors (note that all COVID patients are not located in specific areas but there are some units more impacted)
5. Physicians that are providing on-site assistance/support.
6. Physicians/Management/other meeting on-site.

From: Veale, Jonathan [mailto:Jonathan.Veale@novascotia.ca]
Sent: Monday, May 11, 2020 1:38 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; C19TaskForce <C19TaskForce@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: RE: 14 Day Isolation - Northwood - RESPONSE NEEDED / CLARIFICATION

Colin: We are looking into this with Public Health, but have not heard back yet. Stand by.

From: Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Sent: May 11, 2020 11:55 AM
To: C19TaskForce <C19TaskForce@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Chouinard, Vanessa P <Vanessa.Chouinard@novascotia.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; Bond, Paula <Paula.Bond@nshealth.ca>
Subject: 14 Day Isolation - Northwood - RESPONSE NEEDED / CLARIFICATION

We are looking for additional clarity on the direction provided over the weekend. The email received indicates that:

“Staff deployed to Northwood from both health authorities (and VON) are to self-isolate for 14 days before returning to work. In addition, these staff are also to be tested for COVID on day 12 of their self-isolation as an added precaution before returning to work. Dr. Strang is charged with discussing this element with the Occupational Health and Safety leads at NSHA/IWK.”

Please clarify:

1. Is the intent that the staff self-isolate or home-isolate:
 - a. Self-isolation (therefore at home and need to isolate from family)
 - b. Home Isolation – permitted to be around others at home.
2. Does this apply to any individual regardless of the number of days worked there (1 day at Northwood results in 14 day isolation)?
3. Does this only apply to Northwood or any location where there is an outbreak – other LTC; NSHA locations with COVID-positive patients?

We need information to ensure that we are appropriately assessing the operational impact and can plan re-introduction of services.

Thank you



Colin Stevenson, BSc., MHA, CHE

Vice President – Health Services, Quality and System Performance

Nova Scotia Health Authority

90 Lovett Lake Court, Suite 201, Halifax, NS, B3S 0H6

Office: 902-491-5884

Colin.stevenson@nshealth.ca

www.nsha.ca

Executive Assistant:

Marsha Bennett; (902) 491-5877

Marsham.bennett@nshealth.ca

From: [MacDonald, Madonna](#)
To: [Boutilier, Nicole](#)
Cc: [McCormick, Bethany](#); [Stevenson, Colin](#)
Subject: RE: Directive Received - Re Northwood Deployment and Return to Work
Date: Sunday, May 10, 2020 9:35:05 AM

Thanks Nicole, the only doc Vickie raised to me was 20.P

From: Boutilier, Nicole
Sent: Sunday, May 10, 2020 9:21 AM
To: MacDonald, Madonna <madonna.macdonald@nshealth.ca>
Cc: McCormick, Bethany <Bethany.McCormick@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>
Subject: Re: Directive Received - Re Northwood Deployment and Return to Work

We will have to raise the question tomorrow to DHW. My understanding is the physicians limited who was in the facility and virtual care, and that they weren't going to other nursing homes but I will check with Maria.

We would have to change our pathway with OHS as well which Katrina can follow up tomorrow with Kevin.

Nicole

Sent from my iPhone

On May 10, 2020, at 9:06 AM, MacDonald, Madonna
<madonna.macdonald@nshealth.ca> wrote:

Hi I did send earlier and I included Brett and Bruce as a just in case they have staff who volunteered.

I think we have to anticipate giving consideration to whether deployments to other LTC with outbreak follow same direction although NSH position differs based on evidence. I believe it's Magnolia with NZ staff. Not sure with others.

Also I was thinking we should give a heads up to Susan so she is aware. I can do that.

Thirdly. Vickie's question regarding physicians who are back and forth. What are implications for them if any knowing we have a different approach based on available evidence.

Madonna MacDonald

On May 10, 2020, at 8:52 AM, Emergency Operations Center, NS Health Authority
<nshaeoc@nshealth.ca> wrote:

Wanda and Debbie

NSHA has received, on May 9th - written confirmation of the following Directive from DHW. See below.

- **Staff deployed to Northwood from both health authorities (and VON) are to self-isolate for 14 days before returning to work.**
- **In addition, these staff are also to be tested for COVID on day 12 of their self-isolation as an added precaution before returning to work. Dr. Strang is charged with discussing this element with the Occupational Health and Safety leads at NSHA/IWK.**

-
The EOC, and Madonna as the Operations lead will be available to connect and support as needed. Please let us know if we should come together tomorrow to discuss.

Bethany
NSHA EOC Manager

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From: [Read, Carolin](#)
To: [Stone, Joanne](#)
Cc: [Piers, Geoff W](#); [Stevenson, Colin](#)
Subject: Re: Do you know if we had any luck finding help for northwood
Date: Saturday, April 18, 2020 7:09:33 PM

I have reached out to each zone to provide details. People are still coming forward

Sent from my iPhone

> On Apr 18, 2020, at 7:08 PM, Stone, Joanne <joanne.stone@nshealth.ca> wrote:

>

> Thanks so much. Excellent work from both teams ! Geoff sent quite a few casuals as well

>

> Sent from my iPhone

>

>> On Apr 18, 2020, at 7:02 PM, Read, Carolin <Carolin.Read@nshealth.ca> wrote:

>>

>> Yes there have been about 10 from each CZ and wz and about 2 each from nz and ez. That I am aware of

>>

>> Sent from my iPhone

>>

>>> On Apr 18, 2020, at 7:00 PM, Stone, Joanne <joanne.stone@nshealth.ca> wrote:

>>>

>>>

>>>

>>> Sent from my iPhone

From: [MacNeil, Tom](#)
To: [Emergency Operations Center, NS Health Authority](#); [Phillips, Dwayne](#); [MacIsaac, Eileen](#); [Keenan, Angela](#)
Cc: [Stone, Joanne](#); [Ungar, Tracey](#); [Stevenson, Colin](#); [Grant, Krista L](#); [Boutilier, Nicole](#)
Subject: RE: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood
Date: Friday, May 22, 2020 2:13:52 PM

Thank you
tom

From: Emergency Operations Center, NS Health Authority
Sent: Friday, May 22, 2020 2:01 PM
To: Phillips, Dwayne <Dwayne.Phillips@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>
Cc: Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>
Subject: RE: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood

Approved.

From: Phillips, Dwayne
Sent: Thursday, May 21, 2020 8:32 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>
Cc: Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>
Subject: RE: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood

Hi there.

Attached are the edited documents as requested:

- The infographics have been updated by OHSW to reflect HCWs vs. employees and/or staff.
- The target audience for the QA document are NSHA managers. The sections that relate to who has to isolate, etc have been updated to reflect HCW vs. employees/staff, however the sections that address compensation continue to refer to employees as HR and Managers do not direct compensation for physicians.

We trust these edits address the EOC request.

Dwayne

From: Emergency Operations Center, NS Health Authority

Sent: Thursday, May 21, 2020 4:56 PM

To: Phillips, Dwayne <Dwayne.Phillips@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>

Cc: Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>; Boutilier, Nicole <Nicole.Boutilier@nshealth.ca>

Subject: RE: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood

There is a request from EOC, that the documents, reflect not only Staff, but also Physicians.

Please make these edits, and resubmit.

Bethany

From: Phillips, Dwayne

Sent: Wednesday, May 20, 2020 2:35 PM

To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>

Cc: Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>

Subject: RE: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood

Hi there.

Attached for review and approval (updated as per Directive received yesterday):

- 2 infographics prepared by OHSW
- Updated Manager QAs prepared by Labour team, reviewed by OHSW

Once the infographics are approved – they will be posted on the Hub. Those hyperlinks can then be added to the QAs as indicated and distributed to Managers with staff who were deployed to Northwood via SLT/EDs.

Thank you.

Dwayne



Dwayne Phillips, CPHR

Manager, Employee and Labour Relations

People Services

5640 Spring Garden Road

Suite B-108, Rm 106

Halifax, NS B3J 3M7

Office: 902.473.2705

Mobile: 902.225.9114

From: Emergency Operations Center, NS Health Authority
Sent: Wednesday, May 20, 2020 9:38 AM
To: MacIsaac, Eileen <Eileen.MacIsaac@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>
Cc: Phillips, Dwayne <Dwayne.Phillips@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: RE: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood

The messaging is under review, and OHSW is re-working the comms plan, the infographic should be part of this review process.

From: MacIsaac, Eileen
Sent: Tuesday, May 19, 2020 10:14 AM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>; MacNeil, Tom <TomA.MacNeil@nshealth.ca>; Keenan, Angela <Angela.Keenan@nshealth.ca>
Cc: Phillips, Dwayne <Dwayne.Phillips@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: FOLLOW UP on STATUS: FOR APPROVAL: Returning from Deployment to Northwood

Good morning,

20. Personal information

Just wanted to follow up on the status of the infographic on the return of health care workers from deployment to NSHA, and the related managers' Q&A document. The infographic was pulled from the Hub late Friday afternoon and not included in the daily updates.

Do you expect the infographic can be shared with staff today?

Thanks.

E



Eileen MacIsaac
Director, Internal Communications (and Northern Zone)
Public Engagement & Communications
222 Haliburton Road, P.O. Box 1059
Pictou, NS B0K 1H0
Cell: [REDACTED]
Media Line: 1-844-483-3344

From: MacIsaac, Eileen
Sent: Friday, May 15, 2020 5:49 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Phillips, Dwayne <Dwayne.Phillips@nshealth.ca>; Stone, Joanne <joanne.stone@nshealth.ca>; Ungar, Tracey <Tracey.Ungar@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Grant, Krista L <KristaL.Grant@nshealth.ca>
Subject: Re: FOR APPROVAL: Returning from Deployment to Northwood

So we've pulled the infographic from the updates and the Hub.

Sent from my iPhone

On May 15, 2020, at 5:27 PM, Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca> wrote:

Hello All,

Please hold the document for today.

Given the ongoing dialogue about this directive with the Department, and that we continue to wait for more clarification on this matter. I will be seeking review of the QA from EOC and ELT before this can be released.

Also, I believe there was previously an ask for the central OHSW line to be removed from the memo.

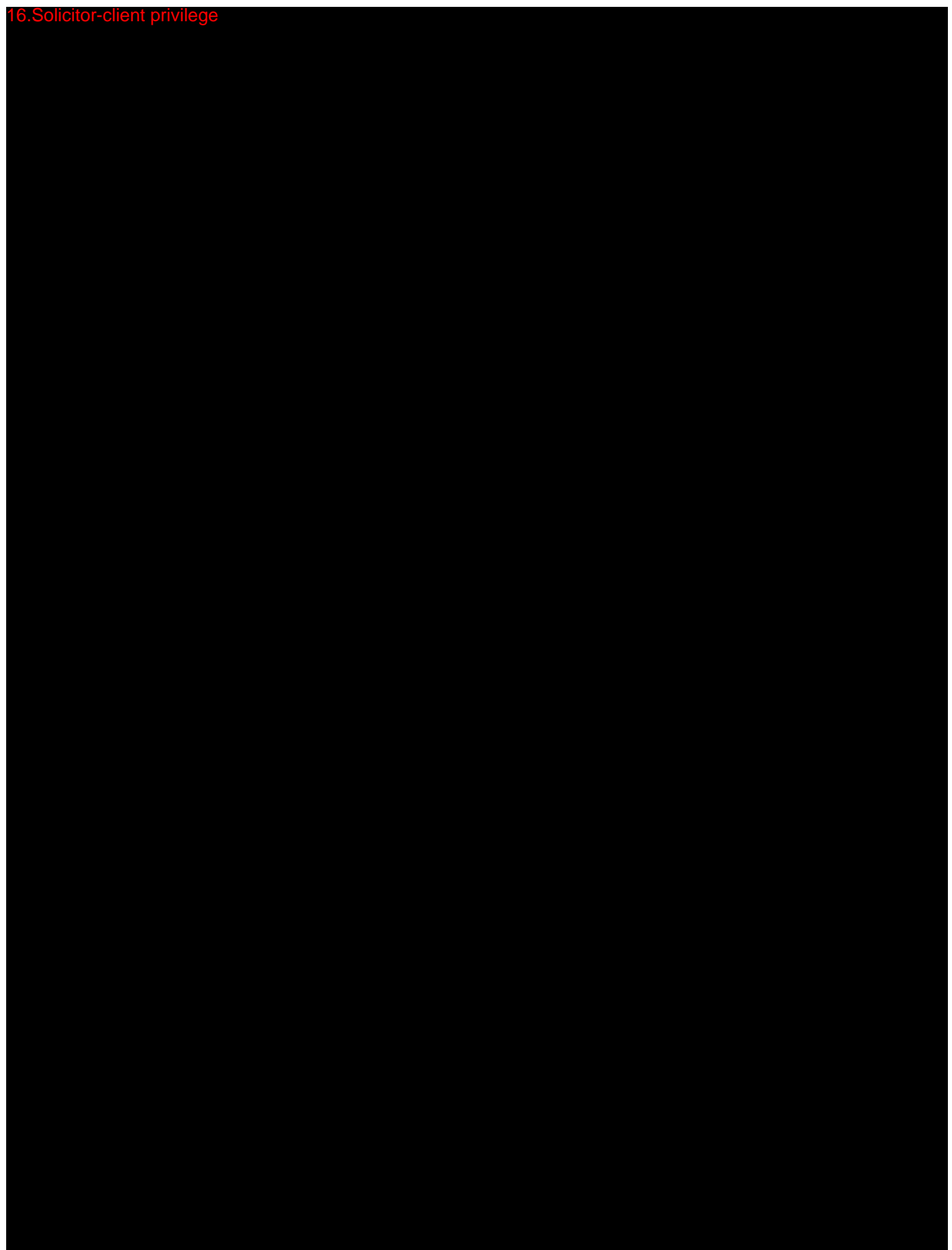
Thanks,
Bethany

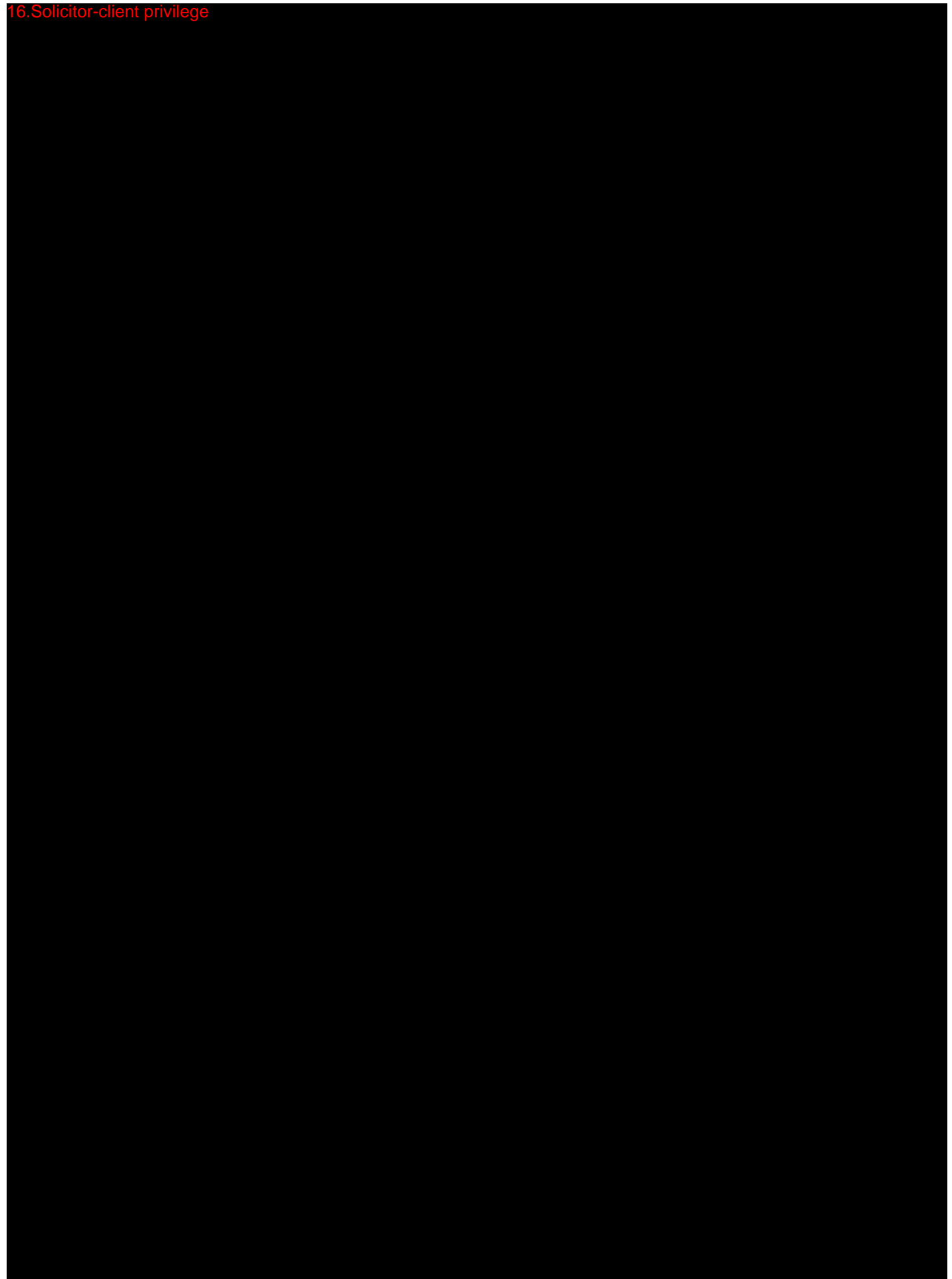
From: MacIsaac, Eileen
Sent: Friday, May 15, 2020 5:04 PM
To: Phillips, Dwayne <Dwayne.Phillips@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Subject: RE: FOR APPROVAL: Returning from Deployment to Northwood

Hi,
Attached is the edited final version of the Manager Q&As, in Word and PDF format.
Thanks.
E

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From: Read, Carolin

Sent: Saturday, April 18, 2020 10:28 PM

To: Alexandra.Smith@novascotia.ca; Cindy.Cruickshank@novascotia.ca; Stone, Joanne <joanne.stone@nshealth.ca>; Piers, Geoff W <Geoff.Piers@nshealth.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>

Subject: Fwd: Numbers sent to Northwood

CZ volunteers sent to Northwood

Sent from my iPhone

Begin forwarded message:

From: CZDeploy <CZDeploy@nshealth.ca>

Date: April 18, 2020 at 10:03:20 PM ADT

To: "Read, Carolin" <Carolin.Read@nshealth.ca>

Cc: "Monroe, Randi" <Randi.Monroe@nshealth.ca>, "Flinn, Jill" <Jill.Flinn@nshealth.ca>, "Pattison, Natalie I L" <NatalieIL.Pattison@nshealth.ca>

Subject: RE: Numbers sent to Northwood

Hi Carolin,

Here are the names of volunteers sent via the deployment centre:

Total sent 22:
Clerical/Admin 2
LPN 6
OT 2
PT 2
RN 8
Dietician 1
CCA 1

20. Personal information

	Position
	Administrative Assistant
	Administrative Assistant
	LPN
	LPN

20. Personal information

	LPN
	LPN
	LPN
	LPN
	Occupational Therapist
	Occupational Therapist
	Physiotherapist
	Physiotherapist/Behaviour Resource Consultant
	Prov. Manager, CC Intake
	PSW
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	RN
	Dietician

From: Read, Carolin

Sent: Saturday, April 18, 2020 7:07 PM

To: WZ Deploy <WZDeploy@nshealth.ca>; Moore, Jodi <Jodi.Moore@nshealth.ca>;

LeBlanc, Alicia <Alicia.LeBlanc@nshealth.ca>; CZDeploy <CZDeploy@nshealth.ca>

Subject: Fwd: Numbers sent to Northwood

Hi All can you confirm numbers and categories of staff that have been sent to assist Northwood

Sent from my iPhone

Begin forwarded message:

From: "Smith, Alexandra (Health)" <Alexandra.Smith@novascotia.ca>

Date: April 18, 2020 at 6:58:26 PM ADT

To: "Piers, Geoff W" <Geoff.Piers@nshealth.ca>, "Read, Carolin" <Carolin.Read@nshealth.ca>

Cc: "Cruickshank, Cindy J" <Cindy.Cruickshank@novascotia.ca>

Subject: Numbers sent to Northwood

Hi Geoff /Carolin:

Thank you for everything you have done to offer supports to LTC and especially to Northwood!

The Premier and Dr Strang will be holding a press conference tomorrow. I am guessing they will get questions during the question period asking for the specific supports that were provided. We are reaching out to organizations that redeployed staff. In preparation for these questions are you able to identify:

1. How many NSHA employees were redeployed to Northwood of what classifications (eg RN Dietary, OT)
2. How many newly hired through the portal (or perhaps not yet hired but had applied to the NSHA through the portal) were redeployed of what classifications.

A lot of great work is happening and I believe will be publicly recognized tomorrow.

Thanks

Alex

Alexandra E. Smith

Director, Health Sector Labour Relations and Compensation

Health Sector Workforce Branch

Nova Scotia Department of Health & Wellness

1894 Barrington Tower

PO Box 488

Halifax, NS B3J 2R8

From: [Sullivan, Vickie](#)
To: [Stevenson, Colin](#)
Subject: RE: Northwood staffing
Date: Thursday, May 7, 2020 11:40:08 AM

Hi Colin

We (me, Randi, Kitty and Josh) met with Josie, Janet and a few others from NW on Tuesday to discuss staffing plan based on their clinical plan. NW has updated their staffing needs/model based on current number of residents and care needs. Randi and Jill have been meeting with NW daily reviewing their needs. We did discuss a transition plan specific to the 8.4 staff as these two NW units transition to recovery units, not acute COVID units. So talked about the potential for staff on one unit beginning transition back next week and the other group of staff potentially coming back after long weekend. This has and will continue to be done in conjunction with NW and based on ongoing needs.

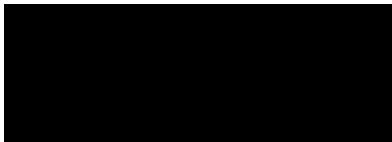
Perhaps we can connect this afternoon to discuss further

Vickie

From: Stevenson, Colin
Sent: Thursday, May 07, 2020 11:25 AM
To: Sullivan, Vickie <Vickie.Sullivan@nshealth.ca>
Subject: Northwood staffing

I know you are talking to Northwood about ongoing staffing requirements. There is rumour around that we are starting to remove from Northwood. Assuming that is not completely accurate but whatever you can provide would be helpful.

Thanks



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Colin.stevenson@nshealth.ca
www.nsha.ca

Executive Assistant:
Marsha Bennett; (902) 491-5877
Marsham.bennett@nshealth.ca

From: [REDACTED]
To: [McVeigh, Wendy](#); [Saulnier, Jenna](#); [Melvin, Kate](#); [REDACTED]; [REDACTED]; [REDACTED]; [LeBlanc, Angela](#); [McCormick, Bethany](#); [Zwerling, Isabelle](#); [Rockwood, Kenneth](#); [Rawding, Patsy A](#); [Tschupruk, Cheryl](#); [Miletic, Natalie](#); [Carr, Brendan](#); [Clarke, Barry](#); [Connell, Katherine](#); [Hawkesworth, Theresa](#); [Alexiadis, Maria](#); [Stevenson, Colin](#); [Stevens, Susan](#); [Tate, Natalie](#); [Elliott Rose, Annette](#); [MacDonald, Madonna](#); [Purcell, Angela L](#); [Howlett, Todd](#); [REDACTED]; [Cruikshank, Cindy J](#); [Smith, Alexandra \(Health\)](#); [REDACTED]; [Knowles, Ruby M](#); [jeannine.lagasse@novascotia.ca](#); [Elliott-Lopez, Vicki](#); [Murphy, Matthew](#); [Monroe, Randi](#); [REDACTED]; [Flinn, Jill](#); [MacDonald, Tammy](#); [Sullivan, Vickie](#); [Proffitt, Joshua G](#); [REDACTED]
Subject: RE: NSHA & Northwood Joint Meeting
Date: Thursday, May 14, 2020 12:27:57 PM
Attachments: [Daily Briefing - May 14, 2020.docx](#)

Stats for today.

Janet

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

From: McVeigh, Wendy [mailto:Wendy.McVeigh@nshealth.ca]

Sent: May 5, 2020 4:25 PM

To: McVeigh, Wendy; Saulnier, Jenna; Melvin, Kate; Margaret Szabo; Leslie Bellefontaine; Bernadette Mitchell-McDonald; Linda Verlinden; Murray Stenton; Terri Sarty; Lisa Carr; LeBlanc, Angela; McCormick, Bethany; Zwerling, Isabelle; Rockwood, Kenneth; Rawding, Patsy A; Tschupruk, Cheryl; Miletic, Natalie; Carr, Brendan; Clarke, Barry; Connell, Katherine; Hawkesworth, Theresa; Maria Alexiadis; Stevenson, Colin; Stevens, Susan; Tate, Natalie; Elliott Rose, Annette; MacDonald, Madonna; 'Purcell, Angela L'; Howlett, Todd; Paul Carey; 'Cruikshank, Cindy J'; 'Smith, Alexandra (Health)'; [REDACTED]; Knowles, Ruby M; 'jeannine.lagasse@novascotia.ca'; 'Elliott-Lopez, Vicki'; Murphy, Matthew; Monroe, Randi; Josie Ryan; Flinn, Jill; MacDonald, Tammy; Sullivan, Vickie; Proffitt, Joshua G; Janet Simm; Natasha Handspiker

Subject: NSHA & Northwood Joint Meeting

When: May 14, 2020 2:00 PM-2:30 PM (UTC-04:00) Atlantic Time (Canada).

Where: Teleconference

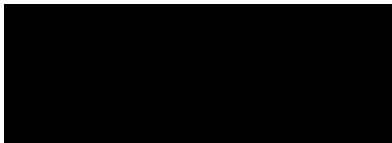
Out of scope [REDACTED]
[REDACTED]
[REDACTED]

Moderator: Wendy

From: [Stevenson, Colin](#)
To: ["Chouinard, Vanessa P"; Emergency Operations Center, NS Health Authority](#)
Cc: ["Veale, Jonathan"; "C19TaskForce"](#)
Subject: RE: Question about direction to NSHA about returning Northwood Staff
Date: Saturday, May 9, 2020 1:33:00 PM

We sent at SBAR in (from Paula Bond to Jeannine) yesterday, identifying the operational impact this will have.

I understand today that we are being directed to follow it though.



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Marsham.bennett@nshealth.ca

From: Chouinard, Vanessa P [mailto:Vanessa.Chouinard@novascotia.ca]
Sent: Saturday, May 9, 2020 10:56 AM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Veale, Jonathan <Jonathan.Veale@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Subject: Fwd: Question about direction to NSHA about returning Northwood Staff

Hey Colin,

I didn't see anything on this in terms of a request in this. Perhaps there is alignment now with the IWK?

V

Begin forwarded message:

From: "Purcell, Angela L" <Angela.Purcell@novascotia.ca>
Date: May 9, 2020 at 8:48:05 AM ADT
To: "Veale, Jonathan" <Jonathan.Veale@novascotia.ca>, "Chouinard, Vanessa P" <Vanessa.Chouinard@novascotia.ca>
Subject: Question about direction to NSHA about returning Northwood Staff

Jonathan and Vanessa,

I understand the IWK was told that staff returning from Northwood needed to self isolate for 14 days before returning back to work at the IWK but that this direction was not provided to the NSHA at the same time. I believe NSHA submitted an EOC request to clarify. Do you know the status on this and whether the same direction has now been provided to the NSHA?

Thanks
Angela

Sent from my iPhone

From: [Tomblin Murphy, Gail](#)
To: [Stevenson, Colin](#)
Subject: RE: Staff working at Northwood
Date: Friday, May 8, 2020 3:46:52 PM

Hi

Thanks so much

Best

Gail

From: MacDonald, Madonna
Sent: Friday, May 8, 2020 12:59 PM
To: Stevenson, Colin <Colin.Stevenson@nshealth.ca>; ~NSHA ELT <NSHAELT@nshealth.ca>
Cc: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Subject: RE: Staff working at Northwood

Thank you Colin for the update. Have you a timeline on the when the decision has to be taken for NSHA- or are we even permitted a variation from the direction?

From: Stevenson, Colin
Sent: Friday, May 8, 2020 7:25 AM
To: ~NSHA ELT <[NSHAELT@nshealth.ca](#)>
Cc: Emergency Operations Center, NS Health Authority <[nshaeoc@nshealth.ca](#)>
Subject: Staff working at Northwood

Please note that there is a direction from MOH to IWK indicating that “At the request of the Premier I am asking that all staff from the IWK who work at Northwood have a 14-day home isolation period before returning to work at the IWK”. We are not aware of this specific directive coming to NSHA at this time, however expect that similar will be put in place. I have asked HR to connect with Vicki Sullivan to identify what the operational impact of this directive would be.

Our approved approach through OHS and IPAC is that we are allowing asymptomatic staff to come to work and follow work isolation procedures (checking temp, calling OH etc) and self isolating at home for the 14 day period.

We have had a staff from NZ and WZ test positive after working at Northwood.

Colin

From: [Stevens, Susan](#)
To: ["COVID19CC"; Emergency Operations Center, NS Health Authority](#)
Cc: [Elliott-Lopez, Vicki](#); [Veale, Jonathan](#); [Stevenson, Colin](#); [C19TaskForce](#)
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP
Date: Friday, April 17, 2020 3:14:11 PM

Just spoke to Vicki Elliott-Lopez. She is connecting with Alex Smith.

From: COVID19CC [mailto:COVID19CC@novascotia.ca]
Sent: Friday, April 17, 2020 2:27 PM
To: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>; COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Subject: RE: urgent request to DHW re Northwood staffing situation - response required ASAP

Please clarify how they will indicate interest. Who do staff and/or administrators contact?

From: Emergency Operations Center, NS Health Authority <nshaeoc@nshealth.ca>
Sent: April 17, 2020 2:01 PM
To: COVID19CC <COVID19CC@novascotia.ca>; C19TaskForce <C19TaskForce@novascotia.ca>
Cc: Elliott-Lopez, Vicki <Vicki.Elliott-Lopez@novascotia.ca>; Veale, Jonathan <Jonathan.Veale@novascotia.ca>; Stevenson, Colin <Colin.Stevenson@nshealth.ca>; Stevens, Susan <Susan.Stevens@nshealth.ca>
Subject: urgent request to DHW re Northwood staffing situation - response required ASAP
Importance: High

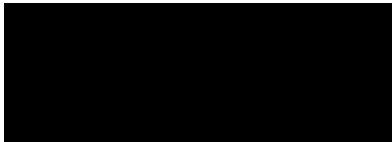
We are requesting DHW please send an urgent request to all DHW licensed/funded long term care facilities and approved/funded home care agencies in Western, Central and Northern zones requesting nursing staff (LPN and RN), CCAs and other support staff to work at a Halifax nursing home currently requiring staff. Any staff travelling from outside of the Halifax-Dartmouth area will have their travel expenses covered. Staff are required immediately and over the weekend into next week.

From: [Stevenson, Colin](#)
To: [REDACTED]
Cc: [Piers, Geoff W](#)
Subject: Redeployment of Staff
Date: Friday, April 17, 2020 1:00:00 PM

Steve:

Northwood is in critical situation for staffing. We are helping where we can on redeployment but im not sure if anyone has reached out to IWK. Can you check and see if there are any staff able to be redeployed to Northwood – Geoff is copied on this and can provide details on the ask.

Colin



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