



One System.
Best Health.

COVID-19 Long Term Care Commission

January 20, 2021



Lakeridge
Health

COVID-19 Long Term Care Team



- **Dr. Robert Kyle,**
*Medical Officer of Health,
The Regional Municipality of Durham*
- **Dr. Joel Kennedy,**
*Division Head, Hospitalist Medicine,
Lakeridge Health*
- **Cynthia Davis,**
President & CEO, Lakeridge Health
- **Dr. Daniel Ricciuto,**
*Medical Director, Infection Prevention
and Control, Lakeridge Health*
- **Susan deRyk,**
*EVP and Chief Transformation Officer,
Lakeridge Health*
- **Shauna Rekkar,**
*Clinical Practice Leader,
Interprofessional Practice, Lakeridge
Health*
- **Leslie Motz,**
*EVP, Clinical and Chief Nursing
Executive, Joseph Brant Hospital*

Orchard Villa Timelines



DATE 	MARCH 31 2020	APRIL 3 2020	APRIL 9 2020	APRIL 11 2020	APRIL 12 2020	APRIL 13 2020	APRIL 14 2020	APRIL 17 2020	APRIL 18 2020	APRIL 19 2020	APRIL 20 2020
ACTIVITY	DRHD declared OV outbreak.	1st COVID-19 positive staff case reported.	1st COVID-19 resident case reported.	CEO of Southbridge called LH operations supervisors office to ask for support for OV.	LH called CEO of Southbridge to offer support to OV and were informed that support was no longer required.	DRHD notifies MLTC Inspection Branch about outbreak.	LH contacted the LHIN to request the MLTC do inspection of OV. LHIN, DRHD, LH, MOH and OV meet to review the outbreak.	DRHD identifies PPE and critical staffing shortages at OV. MLTC Inspection Branch acknowledges situation. LH IPAC team to be deployed to OV.	LH IPAC assessment completed at OV.	OV situation reviewed by multiple stakeholders; MOH offers to use the HPPA as the legal basis to deploy LH team. LH inquires about potential order.	LH and DRHD legal counsels consult MOH legal counsel as to the appropriate sections of the HPPA to use. LH also spoke to OHA for support.



Orchard Villa Timelines

DATE	APRIL 21 2020	APRIL 22 2020	APRIL 24 2020	APRIL 28 2020	MAY 7 2020	JUNE 11 2020	JUNE 12 2020	JUNE 19 2020	JUNE 22 2020	SEPTEMBER 11 2020
ACTIVITY	Durham Region Medical Officer of Health issued an Order under Section 29.2(1) of the Ontario Health Protection and Promotion Act order to OV and to LH to address COVID-19 outbreak. LH team deployed to OV.	DRHD, LH and OV issued joint statement.	Lakeridge Health's Dr. Joel Kennedy takes over as primary Medical Director due to OV Medical Director illness. LH provides full-time IPAC practitioner onsite.	Canadian Armed Forces arrive at OV to support LH in containing the outbreak.	LH provides MOH with update on OV.	DRHD declares outbreak at OV over.	LH assumed temporary management of OV Long-Term Care Home for 90 days.	LH requests that MOH lift the Public Health Order and provides MOH with summary of activities	MOH issues revocation letter.	Formal agreement ended for the temporary management of OV Long-Term Care Home with voluntary transition plan in place.

Communication to families

Public Health Order



Public Health Order
issued by Durham
Region Medical
Officer of Health
on April 21, 2021
to Lakeridge Health



Lakeridge Health
to lead enhanced
monitoring, investigating,
and responding to
COVID-19 outbreak
– no decision-
making authority



First time this
order has ever
been issued

Orchard Villa – Day 1

- Limited Staff and IPAC professionals onsite, little supervision
- Residents had limited contact with physicians
- IPAC principles/protocols not being adhered to
- Non-compliant use of PPE
- Inadequate cleaning practices for patient rooms and high touch surfaces
- Limited knowledge of clinical standards and best practice guidelines
- Symptomatic residents in high traffic zones
- Limited access to diagnostic imaging, testing, etc
- Lack of communication to families



Orchard Villa Overview



Lakeridge Health Response Public Health Order



- Enhanced and right-sized staffing
- Implemented Infection Prevention and Control Measures
- Engaged experts Emerging and Existing Pathogen
- Cleaning of the entire facility (LTC/RH)
- Centralization and Coordination of PPE Management
- Training and Education (IPAC, PPE, dietary)
- Internal and External Communications
- Resident and Designated Next of Kin/Power of Attorney Communications
- Facilitated access to timely COVID-19 Testing

Orchard Villa Overview

Public Health Order

IPAC and Medical Model

- IPAC experts and clinical educators brought in to support education and training on IPAC protocols and PPE
- Assumed responsibility for primary medical leadership



Orchard Villa Overview

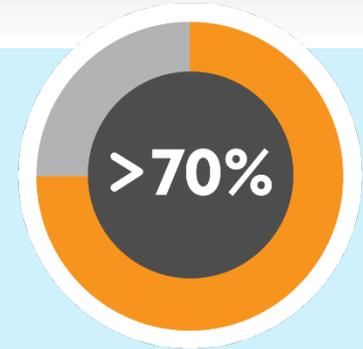
Voluntary Management Contract

- Led planning for safe resumption of resident activities post outbreak
- Leadership assessment, development and recruitment
- Staff development/training plan
- Relationship building with families to support trust building through accountability
- Development of KPI's to ensure sustainability
- Supported procurement of necessary equipment for care, building maintenance and resident comfort



Wave 1 IPAC Assessments

50 IPAC
assessments
completed for
LTC and
retirement
homes between
May and October



**Greater
than 70%**
of those
assessments were
conducted by LH

Sunnycrest Nursing Home Timelines



DATE	ACTIVITY
NOVEMBER 23 2020	Outbreak declared at Sunnycrest Nursing Home.
NOVEMBER 27 2020	LH team does on-site visit in response to a call from Sunnycrest Nursing Home
NOVEMBER 29 2020	LH met with MLTC on voluntary management agreement
NOVEMBER 30 2020	LH team on site to support Sunnycrest Nursing Home
DECEMBER 3 2020	LH assumes temporary management of Sunnycrest Nursing Home through a Voluntary Management Contract for a minimum of 90 days
DECEMBER 4 2020	Red Cross onsite for site assessment. Paramedics onsite.
DECEMBER 9 2020	Red Cross deployed to Sunnycrest.
DECEMBER 11 2020	Ontario Shores staff members deployed.
JANUARY 1 2021	Sunnycrest Nursing Home outbreak declared over.
JANUARY 9 2021	LH Mobile teams distributed vaccinations at Sunnycrest Nursing Home.

Sunnycrest Nursing Home – Day 1

- Limited Staff onsite, little supervision
- Limited PPE and non-compliant use of PPE
- IPAC principles/protocols not being adhered to
- Active screening not occurring at entrance
- Inadequate cleaning practices for patient rooms and high touch surfaces
- Limited knowledge of clinical standards and best practice guidelines
- Symptomatic residents in high traffic zones
- Limited access to diagnostic imaging, testing, etc
- Lack of communication to families



Sunnycrest Nursing Home Overview



Lakeridge Health Response

Voluntary Management
Contract



- Ensuring safe staffing levels
- Internal and External Communications
- IPAC, Safety and Testing
- Implementing a Co-horting plan for residents
- Ensuring sustainable supply of PPE and access to medical equipment and supplies

Sunnycrest Nursing Home Overview

Voluntary Management Contract

IPAC and Medical Model

- IPAC experts brought in to support education and training on IPAC protocols and PPE
- Supporting and collaborating with Sunnycrest medical leadership



Wave 2 IPAC Assessments

- 11 reassessments completed since October

- Currently involved in LTC outbreak management of 7 homes to provide ongoing advice and feedback



Wave 1 and Wave 2

- Inadequate staffing and care levels
- Delayed or no access to lab services, testing, etc
- Delayed test results

- Limited IPAC measures, policies, protocols and improper use of PPE
- No effective plan to address outbreaks

- Inconsistent leadership structure and medical care model
- Lack of effective monitoring, little enforcement, no accountability
- Lack of development and education plan for caregivers

Recommendations

- ▶ Ensure appropriate **leadership structures (management, medical, IPAC), skillsets and accountabilities** are in place
- ▶ **Enhance human resources** for stability of direct care and support staff
- ▶ **Advance care models** (nursing, allied, etc)
- ▶ **Improve transitions between LTC and Acute**
- ▶ **Adherence and oversight for IPAC protocols** (e.g., through regional IPAC hub model)
- ▶ Improve **Communication and Engagement**
- ▶ Implement strategies to **improve culture**
- ▶ Implement changes to ensure a **safe environment and delivery of high-quality care**
- ▶ Improve access to **EMR/DI/laboratory**
- ▶ Implement a **quality reporting and oversight model** that reports to a governing body
- ▶ **Consistent standards across all settings** (LTC, acute, community)



Lakeridge
Health

Thank you