

April 8, 2022

## HPPH Recommendations to Health Care Settings

Over the course of the past two years, every Huron Perth resident has been impacted by the COVID-19 pandemic, either directly through infection, hospitalization and death or indirectly through the unavoidable impacts associated with the Province's COVID-19 response efforts.

As of April 8, 2022, we can report the following statistics for Huron Perth:

- Outbreaks: 156
- Hospitalizations: 199
- Deaths: 101

There would have been numerous more infections and deaths without the implementation and continued adherence to public health measures. The pandemic has impacted everyone mentally, physically, emotionally and financially. It has been through the collective efforts of all of you that we have managed the pandemic and reduced its impacts where possible.

Now we are moving into a transition phase where we expect to see repeated waves of COVID transmission. We are in a better position with increased understanding of COVID-19 and control measures, increased levels of population immunity and access to therapeutics. Accordingly, Ontario [began to ease public health and workplace safety measures](#) on March 9 and is currently planning to remove remaining measures, directives and orders on April 27, 2022.

We are expecting further guidance for health care settings to implement beyond April 27 from the province and will share this information widely once received.

Unfortunately, we have entered the sixth wave of the pandemic, driven by Omicron BA.2; we also expect future waves. At this time, HPPH strongly recommends that public health measures continue to be implemented in all health care settings for the foreseeable future, as described below.

For your information, HPPH also strongly advises that people continue to consider the risk and take actions to protect themselves and their loved ones, including wearing a mask in **all** indoor public settings at this time. We ask everyone to continue to show kindness and respect during this time of transition.

### Organizations will need to have policies in place effective April 27

Although the Ministry is no longer providing central direction, as always **facilities are expected to have policies in place for infection control, including policies for COVID prevention and response and Health Human Resources contingency planning**. Please also know that some of the COVID response capacity provided by Ontario Health will no longer be available; for example, health care partners are unlikely to have excess capacity to assist homes in outbreak.

In providing this direction, HPPH considers all current provincial direction, provincial and local data about COVID-19 rates (including hospitalizations, deaths, percent positivity, waste water surveillance), as well as the latest

evidence regarding COVID-19 mitigation strategies. Please be reminded that HPPH direction may change as new information becomes available.

### Key considerations for policy

1. Although provincial requirements for public health and workplace safety measures have and continue to be lifted, we must remember that managing COVID-19 does not mean that it is gone. We also remind you that other respiratory and gastrointestinal viruses are circulating locally. You are required to take action to protect your staff, visitors and residents/patients from other illnesses that may be circulating in your workplace.
2. Many tools are required to reduce the spread of COVID-19 and to protect residents/patients, staff and visitors. These tools work together best as layers of protection. Vaccination against COVID and all vaccine-preventable diseases is one of our most important tools.

### Policy must address current and future contexts

During this pandemic, our communities have experienced waves of multiple variants of COVID-19 including the ancestral strain and the Alpha, Delta, and Omicron variants.

A COVID-19 workplace policy will need to consider not just what is happening currently, but what is possible for the future, including further COVID-19 variants and a potential rise in cases as colder temperatures arrive in the fall and winter of this year. We are transitioning, at best, to a scenario where COVID-19 is one of the several respiratory illnesses that must be considered when developing policies and procedures to fulfil your obligations to:

- Protect residents and patients from illness in accordance with professional duty of care
- Protect staff from illness in accordance with Occupational Health and Safety legislation
- Maintain health human resource capacity across several skill sets in accordance with professional duty of care

### Tools to protect the most vulnerable

At this time, COVID-19 continues to transmit widely provincially and within our communities; it is imperative that COVID-19 prevention and mitigation measures remain in place in the highest risk settings. As a reminder, the following groups are more likely to experience severe outcomes (long COVID, hospitalization, death) if exposed to COVID-19:

- People of advanced age
- People living in congregate settings
- People with underlying health conditions
- People who are unvaccinated

Health care settings have many layers of protection available for an effective COVID-19 prevention and response plan. These include, but are not limited to, surveillance, screening, universal source control masking, PPE, and vaccines; these are most effective when they work together as layers. Vaccination remains the single most

important layer of protection in our COVID-19 response as vaccines provide powerful, persistent immunity against severe outcomes. This is noted by the Council of Chief Medical Officers of Health (CCMOH):

“As with all vaccines, to maximize protection, vaccination guidance will change as the epidemiology and characteristics of circulating SARS-CoV-2 virus variants evolve. As COVID-19 transmission increases, getting a booster dose is very important, especially if you are at higher risk. Evidence indicates that an mRNA COVID-19 vaccine booster dose can provide longer-lasting protection and possibly better effectiveness against variants, even if you have been previously infected with COVID-19.”

**“Staying up-to-date with COVID-19 vaccines provides you with strong protection against severe illness and hospitalization and helps to reduce the overall impact and severity at the population level.”**

- April 5, 2022 Statement from the Council of Chief Medical Officers of Health (CCMOH) on the importance of staying up to date with COVID-19 vaccines

In all health care settings, the vaccination of staff, visitors and residents will continue to be an important and powerful layer of protection. In congregate living settings, it will also facilitate the ability for residents to participate more fully in a broad range of activities safely where the population around them has a high level of immunity.

The province will continue to remind Ontarians to stay up-to-date according to the most recent Ontario publicly funded immunization schedule. The schedule will be updated according to the latest research and taking into account circulating variants. In a similar way, Ontario’s Universal Influenza Immunization Program (UIIP), each year, offers a specific influenza vaccine to boost immunity based on which virus is spreading.

We all continue to receive questions about COVID-19. There is much information and misinformation about COVID-19 circulating. It is important to seek credible sources of information. (See Appendix A).

It will also be critical for facilities to monitor local and provincial transmission going forward; see sources of information listed in HPPH Recommendations below.

## HPPH Recommendations

Given the above, HPPH strongly recommends that all health care settings continue to ensure the safety of staff, visitors, residents and patients. All health care providers and organizations are recommended to consider the clients they serve and:

- Seek credible sources of information (see Appendix A)
- Monitor local and provincial levels of transmission to inform COVID-19 health and safety measures
  - HPPH continues to send out weekly updates.
  - Visit HPPH dashboard at <https://public.tableau.com/app/profile/huron.perth.public.health/viz/HPPHCOVID-19transitiondashboardv2/Counts>
  - Visit Ontario COVID-19 Science Advisory Table Dashboard at <https://covid19-sciencetable.ca/ontario-dashboard/>

- Maintain a resident COVID-19 vaccination policy, where applicable, that ensures sufficient capacity to keep residents up to date with COVID-19 vaccination.
- Maintain a staff COVID-19 vaccination policy; HPPH strongly recommends that all staff be vaccinated with every dose for which they are eligible and recommended under Ontario's Publicly Funded COVID Immunization program.
- Maintain a visitor COVID-19 vaccination policy; HPPH strongly recommends that all visitors be vaccinated with every dose for which they are eligible and recommended under Ontario's Publicly Funded COVID Immunization program. HPPH also recommends that facilities adopt and communicate this strong recommendation visibly.
- Furthermore, HPPH strongly recommends that facilities consider restricting unvaccinated visitors during higher risk conditions such as, but not limited to:
  - when there is an outbreak and/or
  - when there are new variants circulating.
- Maintain a masking policy for staff and visitors that includes direction on when universal masking will be required (e.g., when COVID transmission rates are high, during outbreaks)\*
  - \*At this time, universal masking is required until April 27, 2022 under the Reopening Ontario Act.
  - \*As noted, at this time COVID transmission remains high
- Maintain outbreak management and IPAC policies including cleaning, PPE, screening, testing and human resources contingency planning.
- Where local epidemiology\*/HPPH communication indicates increased risk (i.e. new variant, outbreak, moderate to high rates of transmission), carry out the following:
  - Maintain/implement daily staff active screening (active is more effective than passive where feasible)
  - Maintain/implement visitor active screening (active is more effective than passive where feasible)
  - Maintain/implement universal masking (universal masking is still required until April 27, 2022)
  - Consider requiring vaccination for visitors
  - Consider increasing IPAC measures

\*local epidemiology is based on indicators of disease activity and severity, including case rates, percent positivity, hospitalizations, deaths, variants, waste water surveillance, outbreaks.

The pandemic has been extremely difficult for us all. However, through our collective and individual efforts in following public health measures, including vaccination, we have prevented many more cases, hospitalizations and deaths from occurring. Thank you for your ongoing hard work as we navigate through this transitional time together.

Dr. Miriam Klassen,  
Medical Officer of Health & CEO  
Huron Perth Public Health

## Appendix A

- [Public Health Agency of Canada: Coronavirus disease \(COVID-19\)](#)
  - (<https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html>)
- [National Advisory Committee on Immunization \(NACI\): Statements and publications](#)
  - <https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html>
- [Public Health Ontario: Coronavirus Disease 2019 \(COVID-19\)](#)  
(<https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus>)
- [Ontario COVID-19 Science Advisory Table: SCIENCE BRIEFS](#)
  - <https://covid19-sciencetable.ca/sciencebrief/>
- [Ontario COVID-19 Science Advisory Table: Ontario Dashboard](#)
  - <https://covid19-sciencetable.ca/ontario-dashboard/>
- [Ontario Health West: COVID-19 Dashboard](#)
  - <https://ohwestcovid19.ca/g15dashboard/>
- [Huron Perth Public Health: Tableau data dashboards](#)
  - <https://public.tableau.com/app/profile/huron.perth.public.health>

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