## **COVID Outbreak Exercise**

**October 28, 2020** 

1:30pm-3:30pm



# **COVID Tabletop Exercise**

#### **Purpose:**

- Safe environment to learn and share
- Consider scenarios together
- Assess emergency plans and procedures in relation to a COVID-19 outbreak

#### Remember:

- Please participate-all answers provide an opportunity to learn from each other
- Various inputs will be provided during the session as the simulated scenario grows and changes.
- Share your organizations' existing plans and procedures.
- This exercise is a simulation only

#### **Our Hope:**

- Strengthen and clarify partnerships
- Identify areas for improvement

# **During the Exercise**

- There will be observers making notes regarding the overall exercise-review in the Debrief
- Place questions in the chat box-answer during or after
- After each input there will be time to answer and then share
- Did you receive the slides? If not please put your email address in the chat box

### You May Need:

- Tabletop exercise information sheet (emailed by WDGPH)
- Floorplan
- Cohorting plan
- Pandemic plan



Roll Call

### **Scenario:**

The staff at your facility have been vigilant in maintaining heightened infection control measures and are always on the lookout for symptomatic residents.

Today is Saturday and a staff member who is actively screening residents this morning happens to notice that three residents are feeling off today.

One resident has a low-grade fever, one has a decreased appetite and did not eat their breakfast and the other has an unusual cough.

The staff member is not sure what to do next and is looking to you for guidance.

## Input #1 – Symptomatic Residents

#### **FACILITY:**

What are your first steps to manage this situation?

### **PUBLIC HEALTH:**

- The facility calls Public Health to report the symptomatic residents
- What are your initial steps and how do you direct the facility?

# Input #2 – Testing

 The Medical Officer of Health (MOH) is requesting that all symptomatic residents and those identified as close contacts be tested for COVID-19

#### **FACILITY:**

- How would your staff arrange for this testing?
- Do you have any concerns or challenges?

#### **PUBLIC HEALTH:**

How would you direct the facility in regards to testing?

## Input #3 – COVID Outbreak

 Public Health receives lab reports confirming that the three symptomatic residents are positive for COVID-19. The MOH has recommended COVID testing for all residents and staff and must be completed as soon as possible.

#### **PUBLIC HEALTH:**

• The facility reports having no registered staff onsite. What are your next steps and what would you advise the facility?

#### **EMS**:

What are your next steps to mobilize testing and what challenges do you anticipate?

#### **HOSPITAL:**

You have a resident that had been admitted prior to the outbreak and is now ready for discharge back to the facility. The hospital is currently at 115% capacity. The home is unable to the take the resident back given the outbreak. How do you facilitate this repatriation back to the facility?

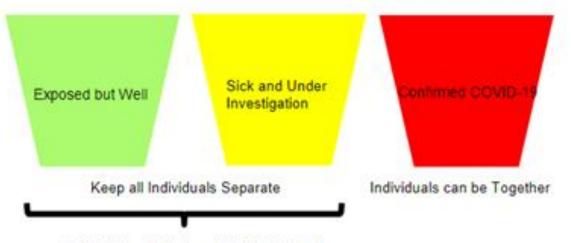
### LHIN/Guelph and Area OHT/NWFHT:

 You receive a call from the hospital asking for assistance dealing with their current over capacity and that a number of their patients are being refused readmissions back to their facility that is in outbreak. What do you do?

## **Input #4 - Cohorting**

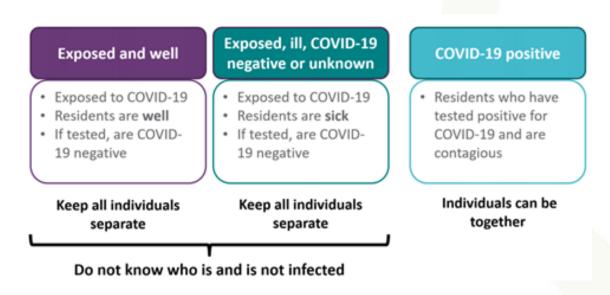
- Overnight staff have identified 2 additional residents that are symptomatic in addition to the 3 COVID positive residents
- The positive residents are in three different rooms, each has one roommate.
- 2 symptomatic residents 1 is in a private room and one is in a shared room with an asymptomatic roommate.

 How do you cohort these residents and how do you cohort your staff?



Do Not Know Who is and is Not Infected

Source: WDGPH fact sheet and template- Isolating residents in long term care and retirement homes during COVID-19 outbreaks (May 20, 2020)



Source: PHO webinar - Cohorting During a COVID-19 Outbreak in a Congregate Living Setting webinar (July 21, 2020)

## Input #5 - Staffing

#### **FACILITY:**

Several staff have called in sick resulting in a serious staffing shortage. How do you
manage this in order to meet minimum staffing levels?

### LHIN/ONTARIO HEALTH/G & A OHT/NWFHT:

• You receive notice of the outbreak from Public Health. Public health reports that the facility is in a severe staffing shortage. What are your next steps? When would the IMS structure be implemented and how? What partners do you confer with?

# Input #6 – PPE

### **FACILITY:**

 You only have a 3-day supply of PPE left. You typically notify your director when supplies are low, however supplies cannot be provided to you given the provincial shortage of PPE. How can you secure the PPE?

### **PUBLIC HEALTH:**

You have just returned from the IPAC visit at the facility where staff told you they are running low on PPE. Without help, the facility will not be able to safely provide care by the end of the day. You determine that this facility should be flagged from a "yellow" to a "red". Who do you notify? What do you do next?

### LHIN/ONTARIO HEALTH/G & A OHT/NWFHT:

• You have PPE that can be deployed to the facility however a storm has blown into the area and all major roads have been closed by police order. How can you provide the supplies to the facility in time?

# Input #7 - Decanting

The outbreak is now affecting over 50% of residents in the facility and 50% of residents still asymptomatic. Of the asymptomatic residents, some have been exposed and are in isolation and others are well. The facility has unfortunately had 3 deaths in the last 2 days. Staffing is currently at a crisis level and there are very little staff able to work.

#### **HOSPITAL:**

 You receive a call from the facility asking whether the hospital can assist with taking in the asymptomatic residents. The hospital is at capacity. Can you assist in any other way?

#### **FACILITY:**

 As the hospital is unable to assist, you have family members that are willing to take in their loved ones. What measures must take place before these residents can be decanted?

### LHIN/ONTARIO HEALTH/G and A OHT/NWFHT:

 How would you support the facility in regards to resident movement – within the facility or transferred out of the facility?

# Wrap Up and Discussion

- Hospital/LHIN/Ontario Health/G and A OHT/NWFHT/MCCSS:
  - Do you have any additional feedback to provide?
- Do you have any unanswered questions?
- What is one action item you will implement right away?
- What did you find helpful?
- Did you learn more about other organization's role?

