

COVID-19 REPORT

	Outbreaks	Ont cases	Deaths	LTC deaths	% LTC deaths
July 13	27	36,090	2,723	1,836	67.4%
July 27	13	37,799	2,764	1,844	66.7%
August 11	18	40,194	2,786	1,847	66.3%
August 18	12	40,870	2,793	1,847	66.1%

There are no COVID-19 related deaths reported on Ontario LTC this past week. Outbreak status occurs when one staff or resident tests positive for COVID. New cases of COVID-19 in the community is mostly younger adults.

The Regional Geriatric Programs (RGPs) of Ontario are a network of specialized geriatric services working in collaboration with primary care physicians, community health professionals and others to meet the needs of older adults living with complex health concerns. The Provincial Geriatric Leadership Office (PGLO) builds on the work of the RGPs of Ontario to drive clinical excellence, build capacity across the system and advance health policy. Many searchable COVID-19 resources, which have also been shared in these reports, can be found at the website:

RGPs/PGLO COVID-19 resources



With the Canadian Geriatrics Society, the PGLO hosts a regular LTC Interest Group meetings during the pandemic. Topics include outbreak management and allowing essential family caregivers into the home. On August 14, Dr. Mark Loeb, focused on outbreak management strategies, planning and trends. Dr. Loeb is an infectious diseases and Professor at McMaster University. He has presented at OLTCC's Practical Pearls in LTC.

Standardized and effective training in PPE needs to be accompanied by effective auditing of PPE use and hand hygiene. Dr. Loeb mentions the obvious importance of better staffing and environmental controls, including housekeeping. In addition to reducing the density or residents, there should be restrictions on large group activities. Point-of-care testing (POCT) will be a great improvement for preventing future outbreaks. Current wait times for obtaining swab results are unsatisfactory. POCT provides accurate and timely analyses, and assures the best possible use of people, equipment, and reagents in the interest of efficiency.

Before and beyond SARS-Cov-2, outbreaks in LTC homes are commonplace. They include influenza A and B, parainfluenza, RSV, adenovirus, Norwalk-like virus, salmonella, E. coli 0157, C. difficile, Group A streptococcus, MRSA, VRE, ESBL, scabies and more. Better infection prevention and control training will prepare us for future outbreaks.

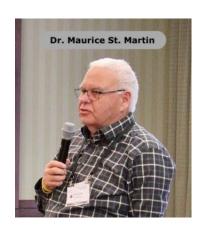
OMA meets the NDP

The OMA Sections Long Term Care and Care of the Elderly, General and Family Practice Palliative Care, Long Term Care, Geriatrics and Geriatric Psychiatry joined members of the NDP caucus on August 7. This round table round table discussion was to "offer solutions to LTC issues...[and] to offer solutions to important health policy because doctors live and breathe health care issues daily." Dr. Alykhan Abdulla, Chair of the Section of SGFP, said "long term care homes are best managed when physicians are leaders both in care and policy". He calls for integrated teams working together, and integrated virtual care community and continued training of physicians. Dr. Hugh Boyd, Chair of the Section for LTC and COE, reminded the audience that physicians are required by legislation to be part of the medical program in LTC.

Opposition Leader, Andrea Horvath expressed frustration that during the pandemic they did not know "who was at the Command Table". OMA President, Dr. Samantha Hill, added that "we do not have great lines of communication". For example, she was unaware of a PPE announcement that was made the previous day. Among her pressing concerns are inadequate supplies of quadrivalent influenza vaccine this autumn.

For the majority of residents in LTC, palliative care begins on admission. Maximizing functional independence and community living is a shared goal. Compression of morbidity and increasing home care results in shorter lengths of stay until death. In LTC, many frail and elderly residents have a limited life expectancy. LTC clinicians provide expertise in palliative care. Every year at the OLTCC conference workshops on palliative care that include advance care planning, goals of care, pain and symptom management. This essential role of LTC was missed by this OMA assembly.

The round table was chaired by France Gelinas, Health Critic for the NDP. The highlight of the round table was her praise of local Medical Director, Dr. Maurice St. Martin. Dr. St. Martin is Medical Director of Pioneer Manor in Sudbury, a 443-bed home in Sudbury. He participated in the last OLTCC Medical Director Course held earlier this year. Ms. Gelinas stated that "he put in a lot of work" and "stood his ground". As an example, he "stood-up" to the hospital CEO in order to avoid exposure to residents of the facility. She adds that "people respect him because of who he is".



This is the link to the recording of the round table. OMA NDP round table, August 7