

### December 17, 2020 update



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## **PURPOSE**

SHA services will adapt and expand to meet the projected COVID-19 patient demand, while continuing to deliver essential services to non-COVID-19 patients throughout the duration of the event.





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### OUTLINE

- Progress on Surge Targets
  - Offensive
  - Defensive
  - Outbreak/isolation labour pools
- Escalated efforts to respond to outbreaks
- Status of Service Slow Downs



# Testing Targets – Offensive Strategy

### **Current Sustainable capacity:**

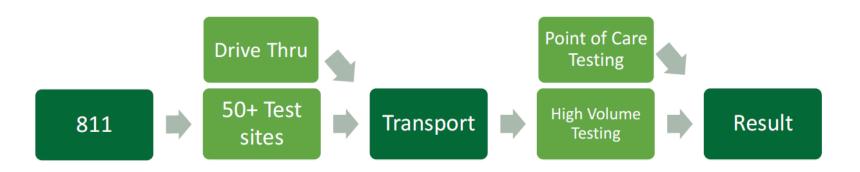
- Maximum test site capacity = 4,654/day tests
- Sustainable daily Lab capacity\* = 3,400/day

### Timelines for stepped up capacity:

- Lab Projected Daily Capacity\* = 4,000 by Dec 31
  - \* Does not include additional capacity being onboarded through Point of Care Testing options and third party testing (i.e. Quantum Genetix)

#### New testing initiatives:

- Rapid & Point-of-Care
   Testing
- Expanded hours in Regina & S'toon to 7 days/week in January
- Improving public communications to highlight non-peak periods for testing to help reduce wait times and increase testing capacity



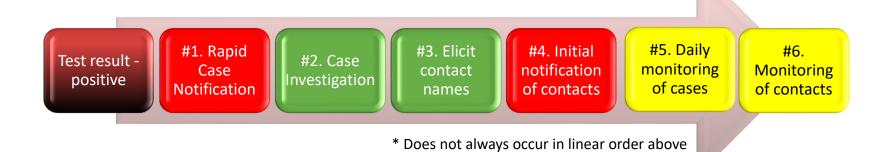
## Contact Tracing Targets – Offensive Strategy

#### **Current capacity:**

 At avg. cases of 262.4/day for Dec. 8-14, SHA teams were reporting that they are generally meeting target times for positive case notification but struggling to meet targets for contact notification and daily case monitoring.

### **Stepping up capacity:**

- Challenges remain around the availability of *licensed health care professionals* for key components of the work (primarily the steps in red in the illustration below).
- **206 additional unlicensed staff** have been identified through the Government of Saskatchewan (Ministries & Saskatchewan Public Safety Agency) and Federal Government (Statistics Canada) to support contact tracing (primarily steps in yellow below)



### Surge Targets – Defensive Strategy

### **Current Status of Acute Care Surge**

- Target: enable care for **250 COVID positive patients** requiring hospitalization.
  - ✓ Resources have been identified to meet this target if required

### **Current Status of ICU Surge**

- Target: enable care for 64 COVID positive patients requiring ICU
  - Although nearing target, human resources/staffing remains a barrier

Dec 3 Target = Enable Care for up to 64 COVID+ Patients Requiring ICU					
	Beds	Equipment	Supplies	Vent capacity-	HR/staffing
				oxygen	
S'toon					Below targeted ICU
					capacity due staffing
North					challenges, high
					northern caseloads
Regina					Can meet targets,
					but general staffing
Rural					challenges due to
					outbreaks/isolation

Red = Area of Significant Concern Yellow = Barriers exist

Green = Necessary resources identified

### Outbreaks/Isolation Targets

**Key Strategy:** Create pools of health care workers in six areas for outbreak response

- Target of approx. 300-400 staff identified for this purpose.
- Since Dec 3 the SHA has identified pool of approx. 117 staff for redeployment for this purpose
  - Does not include all staff immediately redeployed to existing outbreak situations (e.g. 70 to date for Extendicare Parkside)
- Given extremely high demand, the SHA will be continually identifying more staff appropriate for this purpose until risk begins to subside

The math on the high potential impact of outbreaks:

70+ extra SHA staff to date redeployed to Extendicare Parkside (i.e. a single facility)

X

Vulnerable populations in 150+
long term care homes, 60+
hospitals & hundreds of personal
care homes

=

Potential gap of *thousands of staff* if outbreaks continue to grow

# **Escalating Outbreak Efforts**

#### **Urgent focus on outbreaks and vulnerable populations in care homes:**

- Continue to apply lessons learned
- Continuing to identify sites of high risk for inspection
- More resources for infection prevention & control & safety for high risk sites and where there are outbreaks;
- Continue to review and identify facilities that may have poor ventilation & mitigate risk
- Identify resource needs and redeployments required to support vaccine rollout to key sites with vulnerable residents/patients.
- Expand point of care testing to facilitate early detection and rapid response to outbreak situations.



## Service Slow Downs

- Increase of 377 staff made available to the labour pool since Dec 3 announcement, accounting for 64% of target set for this work.
  - Staff in the labour pool continue to work as normal until appropriate placement is ready
- Of the more than 900 services the SHA is tracking, the SHA has approved slow downs for approximately 200 services
  - Many of these services continue as normal until appropriate opportunities are identified for redeployment to pandemic response.
- Surgical slow downs are occurring in Saskatoon/Regina (35% reduction) and Prince
   Albert/North Battleford (largely limited to urgent/emergent & cancer surgeries only)
- Safety precautions can some times also indirectly cause service slow downs
  - e.g. extra time required between Aerosol Generating Medical Procedures.
- Further service slow downs are being considered to ensure appropriate resources for outbreak management, contact tracing and other areas where continuity of care for those in need is threatened.

# Key Messages

- Safety of our patients, residents and health care workers is our #1 priority
- Committed to:
  - ✓ Maintaining non-COVID services as much as possible.
  - ✓ Keeping service disruptions as localized, targeted and timelimited as possible
  - ✓ Staging surges & slow downs to meet demand
- Protecting the health care system is in the public's hands, we need your help







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#### Healthy People, Healthy Saskatchewan

The Saskatchewan Health Authority works in the spirit of truth and reconciliation, acknowledging Saskatchewan as the traditional territory of First Nations and Métis People.