

## SUMMARY:

# COVID-19 Pandemic Response Plan for Health Services

The NWT Health and Social Services Authorities COVID-19 Response Team's Pandemic Response Plan for Health Services (Pandemic Response Plan) is a document that outlines the patient care actions that will be taken as the demand for health services evolves due to the introduction of COVID-19 throughout the Northwest Territories.

We recognize the plan is complex; this is to be expected as it is intended to guide the work of the health and social services authorities through a difficult situation that includes unknown factors and events.

Our goal in releasing this plan is threefold:

1. We want to be transparent and build confidence in our healthcare response to COVID-19.
2. We need the public to know what to expect from a patient care perspective should the situation for COVID-19 escalate in the NWT.
3. We want people to understand the capacity of our health and social services system to respond to COVID-19 and encourage them to continue to follow the measures put in place by the Chief Public Health Officer to manage the spread of COVID-19.

It is important to remember that this plan aims to cover scenarios from current state through worst case scenario. COVID-19 has forced health and social services systems across the globe to make difficult decisions when demand exceeds capacity. Being prepared and transparent about how the NWT would escalate care and services is important.

Along with the preparations being implemented across the NWT health and social services system, the behaviours and choices of NWT residents can influence the demand on the healthcare system in the NWT during the COVID-19 pandemic. By following the orders of the Chief Public Health Officer to limit contact with others through physical distancing and to get tested if experiencing symptoms we can all help to lessen the impact of COVID-19 on individuals, communities, and our health and social services system.

This plan has been developed based on NWT pandemic planning structures and guidelines and brings together all three NWT Health and Social Services Authorities' COVID-19 pandemic response planning into one document. Many aspects of the plan have been activated and are already in place; however, this is the first time we have shared the detailed approach to our response in a cohesive document.

## Key Areas of the COVID-19 Pandemic Plan Response Plan for Health Services

### Caring for Patients with COVID-19

The plan covers processes for how we would care for patients with COVID-19. This ranges from supporting individuals with mild symptoms to stay at home in their community and recover while self-isolating to moving patients with more severe illness.

Self-isolation at home for those who have mild illness would be supported through a combination of in-person visits and virtual care encounters to monitor symptoms. Self-isolation facilities are being identified in several communities to support those who cannot self-isolate at home while they recover from mild illness.

Anyone who needs hospitalization for active care related to COVID-19 would be moved to receive care at Stanton Territorial Hospital during the early stages of the pandemic response. Inuvik Regional Hospital would care for some patients during later stages, if required. Comfort care (also known as palliative care) requiring inpatient admission can also occur in Hay River. Consideration of community palliative care in other locations would be assessed, case by case, based on community staffing and case requirements.

### Discussing Goals of Care

“Goals of Care” is the term used to describe discussions between providers and patients about a patient’s values and wishes about their medical care when they have a very serious illness. Goals of care help guide the patient’s care team to ensure that medical care is appropriate and meets the patient’s personal values and wishes. These discussions are particularly important for higher risk individuals. The pandemic plan outlines how Goals of Care would be included in clinical decision making.

### Clarity and Transparency in Pandemic Responses Stages

Should COVID-19 escalate in the NWT, having a structured approach to decisions, triggers and actions is important for a number of reasons. It allows our system to clearly define what measures will be taken and when. It allows the public to understand what care will look like at different points in our pandemic response, including what care might not be accessible if we shift resources to address COVID-19.

This plan clearly outlines the pandemic stages, provides detailed information on what actions would be taken in each stage, and what events would trigger moving up or down stages of response.

### Pandemic Response Structure and Decision Making

Outlined in the plan are the structures that have been created to help support decision making in a very complex environment. It outlines roles and responsibilities for the organizations who are involved in responding to COVID-19 and it documents what structures and groups will be involved in decision making and determining details of our response in the NWT.

## What to Expect Across the NWT

### Patient Flow

#### Mild Symptoms: Care Provided

- All patients with mild symptoms will be assessed and swabbed by a healthcare provider (RN, NP, MD) in person or virtually, in their home community.
- 80% of patients who test positive for COVID-19 will have mild symptoms and can stay at home if they can self-isolate. They will be followed by a healthcare provider and receive regular in-person or virtual assessments, as required.
- If the condition worsens, patients will be offered care options based on symptom severity and Goals of Care and the patient's wishes
- Patients will be asked to self-isolate at home.
- Patients who cannot self-isolate at home may be offered with accommodation in their community, region, or elsewhere in the territory depending on availability. Transportation will be provided.

#### Moderate and Severe Symptoms: Active Treatment and Comfort Care (Palliative Care)

- All patients with moderate or severe symptoms will be assessed in person. If the assessment is not by a physician, a physician will be consulted.
- If a patient chooses Active Treatment for moderate or severe symptoms, admissions for Active treatment will only be at Stanton Territorial Hospital during Response Stages 1 and 2. Starting at Stage 3, Active Treatment for moderate symptoms may be offered in Inuvik for patients in the Beaufort Delta and Sahtu regions.
  - All community health centres can provide active treatment while patients are awaiting transportation. Transportation, including by air ambulance, will be provided, if needed.
- If a patient chooses comfort care (palliative care) for Moderate or Severe Symptoms, inpatient comfort care will be provided at Stanton Territorial Hospital, Inuvik Regional Hospital, and Hay River Regional Health Centre.
  - All community health centres can provide comfort care while patients are awaiting transportation. Transportation to the location including by air ambulance, will be provided if needed. It is important to note that due to the highly infectious nature of COVID-19, consideration of community palliative care in other locations besides Stanton

Territorial Hospital, Inuvik and Hay River would be assessed, case by case, based on community staffing and case requirements.

### Surge

A coordinated approach across the NWT healthcare system is critical to ensure all resources are managed in alignment to achieve the best possible outcomes for patients, staff, and the residents of the territory. To achieve this goal, a staged response plan has been put into place. These four response stages for the NWT are adapted from and aligned with Alberta's pandemic response, enabling common language and effective communication with the NWT's closest tertiary care resource.

	1 - MINOR	2 - MODERATE	3 - MAJOR	4 - CRITICAL
TRIGGER	 <b>First COVID-19 Hospitalization</b>	 <b>Community Transmission</b>	 <b>50% COVID-19 inpatient beds at STH Full</b>	 <b>Scarce Resource Allocation</b>
GOAL	Detect and contact trace initial isolated cases, prevent community transmission	All activities should aim to reduce the rate of infection in the territory during community transmission ("flatten the curve")	Maintain capacity at Stanton Territorial Hospital to delay or avoid progression to stage 4	Use all available resources and external agency supports to return to Territorial Response Stage 3.
DESCRIPTION	Isolated cases with initial hospital admissions at STH.	Community transmission is occurring requiring active management of system resources.	Increasing critically ill patients are being admitted for active care.	Some or all of critical system resources exceed maximum capacity.
BED SURGE CAPACITY	<b>6</b> <b>36</b> <b>30</b> <hr/> <b>72</b>	<b>8</b> <b>49</b> <b>17</b> <hr/> <b>74</b>	<b>8</b> <b>63</b> <b>17</b> <hr/> <b>88</b>	<b>8</b> <b>84</b> <b>0</b> <hr/> <b>92*</b>
TOTAL	<b>72</b>	<b>74</b>	<b>88</b>	<b>92*</b>

## Outbreak

Despite the planning and public health measures in place, we will need to prepare for possible scenarios when there is a concentrated increase in the number of COVID-19 illness in one of our facilities or throughout a community.

In those scenarios, the ability of the health system to respond to increases in demand are limited to the following categories of action:

**Mobilize & Maximize Staff:** Add additional staff resources into the health system or reallocate staffing resources to areas as required, including moving staff to different communities.

**Mobilize Patients:** Move patients from their current location to a place where care can be provided. This can include moving critical patients to a central location (such as Stanton Territorial Hospital), moving non-critical patients to another location (such as Inuvik Regional Hospital or Hay River Regional Health Centre), or transfers out of territory based on other jurisdiction capacity.

**Mobilize Other Resources:** This includes may include utilizing external resources, non-medical staff, and/or delegate all appropriate tasks away from the health system to allow a focus on patient care and health system operations. This also includes the use of major external organizations such as the military to provide large-scale support for the response.

**Triage Care Decisions:** Demand for health services may greatly exceed available supply despite other mitigating actions. When the demand for ICU beds, ventilators, staff, medevacs, or other scarce resources outstrip available supply, decisions on how to prioritize these resources will need to be made.

The structure and decision making tools established under the Incident Command Structure of the Authorities COVID-19 Response Team (ACRT) will be activated in scenarios that require any of the above actions to address a need in the NWT, related to COVID-19.

## Continuing to meet the health and wellness needs of the NWT

The uncertainty of the COVID-19 pandemic has a direct impact on non-covid healthcare. We must balance the public health measure to prevent viral spread with the continuation of provision of necessary healthcare services.

This is a complex balancing act that we are managing by the following principles:

- When appropriate, replace face-to-face encounters with virtual encounters. This means meeting the patient's healthcare needs by phone, video or secure messaging
- Reduce patient movement by reducing unnecessary/ inefficient in-person presentations to healthcare facilities
- Continue face-to-face encounters when appropriate
- Encouraging Choosing Wisely guides to minimize assessments or treatments for things that are not evidence-based or will not impact health outcomes