



MEDICAL STAFF DIGEST

A weekly update for medical staff

June 22, 2021

Clinical guidelines

PPE Requirements – Masks and eye protection are still required

BC's COVID-19 Restart Plan is in its second phase and this has led to confusion about ongoing PPE requirements in healthcare. While restrictions may be loosening in public settings, the PPE requirements in all healthcare settings (acute, LTC, community, home care, etc.) remain the same and will be in place at least through the summer.

Eye protection:

- Eye protection is required if you have direct contact with patients/clients or your work requires close proximity to patients (within 2 metres).
- Eye protection should be worn at all times in patient care areas and doffed when you go on a break.
- Goggles or full faceshields are required in high-risk areas such as ICU, Emergency, providing care to known or suspected COVID patients, COVID swabbing, and during outbreaks.
- In a low risk area where the use of faceshields or goggles causes vision, health, or safety concerns, safety glasses or the combination mask with visor can be used.

Medical masks:

- Staff in healthcare facilities must wear a medical mask in all common areas and patient care settings.
- Change your mask if it is too damp, soiled or damaged for safe use or for a meal break.

Additional PPE would be determined based on a [Point of Care Risk Assessment](#).

COVID-19

NH's COVID-19 resources

- On the NH physician website:
 - [COVID-19 information and resources](#)
- On OurNH:
 - [COVID-19 \(Coronavirus\)](#)
 - [Pandemic Recovery Toolkit](#)

COVID-19 case counts and statements

Visit the new [COVID-19 surveillance dashboard](#) from the BCCDC, to see graphs, maps, and data showing COVID-19 case rates, test positivity and vaccination coverage by local health area (LHA) and community health service area (CHSA).

As of June 21, **7,793** cases have been reported in the NH region since the beginning of the pandemic.

- Cases currently active: **58**
- New cases: **1**
- Currently in hospital: **5**
 - Currently in ICU level care in hospital: **6**
- Deaths in the NH region since the beginning of the pandemic: **155**

For the latest provincial numbers, see the [BC COVID-19 dashboard](#), which is updated Monday-Friday. The dashboard may not work in all browsers; Chrome is suggested.

As well, for a visual comparison of COVID-19 cases in BC by HSDA to other Canadian and global jurisdictions, see the [COVID-19 Epidemiology app](#). It's updated on Mondays, Wednesdays, and Fridays.

- [Joint statement on Province of B.C.'s COVID-19 response](#) – June 21, 2021
- [BCCDC Situation Report](#) – June 16, 2021

Northern Health Virtual Clinic: Data on patient visits

The Northern Health Virtual Clinic supports after hours access to COVID-19 and primary care services for those who cannot easily access these services in their communities. The goal is to connect people to their local primary care home wherever possible.

Monday, June 14

- 101 COVID-19 nursing assessments
- 31 primary care provider appointments from Baldonnel, Fort St. John, Kitimat, Hixon, Prince George, Terrace, and Hudson's Hope

Tuesday, June 15

- 70 COVID-19 nursing assessments
- 30 primary care provider appointments from Chetwynd, Fort St. John, Prince Rupert, Terrace, Houston, Prince George, Richmond, Dawson Creek, Montney, Smithers, Hudson's Hope, Kitimat, and Quesnel

Wednesday, June 16

- 70 COVID-19 nursing assessments
- 27 primary care provider appointments from Prince George, Quesnel, Terrace, Chetwynd, Charlie Lake, Dawson Creek, Fort St. John, Taylor, Thornhill, Kitimat, Hudson's Hope, Moberly Lake, and Smithers

Thursday, June 17

- 69 COVID-19 nursing assessments
- 39 primary care provider appointments from Prince George, Quesnel, Terrace, Chetwynd, Charlie Lake, Fort St. John, Thornhill, Edmonton, Prespatou, Calgary, Dease Lake, Dawson Creek, Prince Rupert, and Bear Lake

Friday, June 18

- 55 COVID-19 nursing assessments
- 35 primary care provider appointments from Prince George, Pouce Coupe, Baldonnel, Terrace, Dawson Creek, Fort St. John, Smithers, Kelowna, Quesnel, Chetwynd, Moricetown, and Kitimat

Saturday, June 19

- 31 COVID-19 nursing assessments
- 14 primary care provider appointments from Prince George, Dawson Creek, Prince Rupert, Terrace, Quesnel, Thornhill, Fort St. John, and Hudson's Hope

Sunday, June 20

- 31 COVID-19 nursing assessments
- 7 primary care provider appointments from Dawson creek, Prince George, Terrace, Fort St. John, and Fort Liard

Trusted links and resources for COVID-19

- [BC Centre for Disease Control](#)
- [HealthLink BC COVID-19 page](#)
- [WHO FAQ](#)
- [Health Canada FAQ](#)
- [COVID-19 content in other languages](#)
- WorkSafe BC - [COVID-19 information and resources](#)
- Northern Health Virtual Primary and Community Care Clinic: **1-844-645-7811**
- Northern Health Environmental Health Officer Line: **1-250-565-7322**
- Non-medical info: call 1-888-COVID19 / 1-888-268-4319 7 days, 7:30 am - 8 pm

For current information on restrictions on travel, gatherings and other issues, see the [Provincial Health Officer's COVID-19 webpage](#).

Overdose prevention and response**Invitation to Provide Feedback: Research Interview about Risk Mitigation Guidance and Prescribing**

As a health planner or service provider, we are inviting you to participate in a research interview about your experiences related to the Risk Mitigation Guidance during dual public health emergencies introduced in March, 2020. The research study is entitled '*Risk mitigation and peer support for people who use substances during dual public health emergencies*' and is being led by Dr. Karen Urbanoski and Dr. Bernie Pauly, Scientists at the Canadian Institute for Substance Use Research (CISUR) at the University of Victoria.

Participating in the study would involve being interviewed over the phone or by zoom which will talk approximately one hour of your time.

The purpose of this research is to better understand how the guidelines are used, investigating the experiences, concerns/challenges, or benefits to patients and providers, and the impacts on compliance with COVID-19 protocols. This information is important to informing future initiatives of this type. This study is being conducted across BC.

The lead researcher on the project, Bernie Pauly, is a Professor, School of Nursing and a Scientist and Associate Director, Canadian Institute for Substance Use Research (CISUR) at the University of Victoria. Please feel free to contact her if you have any questions by emailing bpaul@uvic.ca or by phoning 250 472-5915.

Please call 250-853-3228 or send an email to colab@uvic.ca to let them know you are interested in participating and they will be happy to follow up with further details.

Please click on the link below to access the risk mitigation guidelines - <https://www.bccsu.ca>

Other organizational news

Physician Quality Improvement (PQI) website launch

The [Physician Quality Improvement \(PQI\) program has launched a new website](#) full of information about PQI, the programs and opportunities they offer, as well as resources, news, and an events calendar. Please visit this new website to access this exciting opportunity, including quality improvement expertise, data, education, funding to reimburse physicians for their time, coaching support, and more!

NEW Long-term Care/Assisted Living Digest – Issue 24: Information for residents and families

The long-term care task group is producing updates once a month for residents and families of long-term care homes and assisted living facilities.

[Issue 24](#) of the long-term care and assisted living digest is now available. This issue provides an update on second doses of COVID-19 vaccines and information on BC's restart plan.

UPDATED regional order set for management of community acquired pneumonia in adults

The Antimicrobial Stewardship (AMS) Program Committee has updated the regional order set for management of community acquired pneumonia (CAP) in adults which is intended to be used at all facilities in Northern Health.

This order set has been reviewed by an extensive group of stakeholders and endorsed by the NH Therapeutics Committee. Changes to the information you will find in this order set includes:

- Re-classification of pneumonia severity groups
- Updated antibiotic regimens for patients with moderate severity disease to include options for penicillin allergic patients and to align with updated guidelines
- More vaccine guidance

The [updated order set](#) can be found through document source and OurNH and [Physician AMS Resources](#).

Northern Health Regional Medical Imaging Requisitions

Please note: New and updated Northern Health Medical Imaging requisitions are available through DocumentSource. These requisitions have been standardized and meet all of the Diagnostic Accreditation Program and Ministry of Health mandates. Your transition to these new and updated forms is appreciated.

The Provincial requisitions for Bone Densitometry and Breast Imaging are still available on the Province of British Columbia website.

- [Standard Out-Patient Bone Densitometry Requisition](#)
- [Standard Out-Patient Breast Imaging Requisition](#)

All of these requisitions are also available on the Northern Health Website:

- [Northern Health Physicians Resources - Medical Imaging](#)

For more information or any questions, please contact Katy.Anderson@northernhealth.ca

Physical Activity – worth promoting even (or especially) during a pandemic

It's no secret that physical activity is good for our bodies; however, we may not be appreciating the full potential of physical activity to:

- prevent and treat numerous chronic diseases
- improve mental health
- decrease the severity of COVID-19 symptoms
- lead to improved outcomes following a COVID-19 infection

In spite of its protective qualities, access to and engagement in physical activity has decreased severely as a result of restrictions related to the pandemic. The constant “stay home” messages were loud and clear, but the less frequent “...but get outside for some movement” messages were largely missed.

A recent [study](#) out of California compared the outcomes of 48,440 patients who had been diagnosed with COVID-19. Based on a physical activity vital sign taken at every appointment for the last several years, patients were identified as being active (meeting physical activity guidelines of >150 minutes per week), somewhat active (10-149 minutes per week), or inactive (<10 minutes per week). Active patients were 70% less likely to be hospitalized and 80% less likely to die as a result of COVID-19 when compared to the inactive group. Being somewhat active also showed a significant reduction of risk, which supports the statement that [every move counts](#) when it comes to our health.

For more information regarding the link between physical activity and COVID-19, review this Exercise is Medicine [blog post](#) for an overview of HOW physical activity can help in the fight against COVID-19 & WHY we should be promoting safe and equitable access to and engagement in regular physical activity.

HIV self-testing now available

Early diagnosis of an HIV infection, combined with initiation of highly active antiretroviral therapy reduces the spread of HIV, and decreases morbidity and mortality. In November 2020, HIV Self-Testing became available in Canada. Current research projects are providing Self-Test kits free of charge to participants, so the utilization of these kits will likely increase. If you'd like to learn more about Self-Testing, including where kits can be acquired and what to do if a client reports a positive Self-Test result, check out our [memo](#) or contact us directly.

New cultural safety practice resource for health care providers: Honouring Indigenous women's and families' pregnancy journeys

In collaboration with Indigenous Peoples and various health organizations, Perinatal Services BC has developed [Honouring Indigenous Women's and Families' Pregnancy Journeys: A Practice Resource to Support Improved Perinatal Care Created by Aunties, Mothers, Grandmothers, Sisters, and Daughters](#) (May 2021).

This new practice resource can help health care providers work toward adopting and supporting culturally safe, humble, and trauma-informed practice and care to improve perinatal health outcomes and to honour the resilience of Indigenous Peoples.

How to implement this resource into your practice:

- Share this information with your teams and colleagues.
- Work through the case studies together.
- Embrace and integrate the six practice principles to support culturally safe, humble, trauma-informed perinatal care.
- Make a personal commitment to reconciliation and a lifelong journey of self-reflection and learning.

To obtain a copy:

- View the practice resource [online](#).
- Email psbc@phsa.ca to request a professionally printed copy.
- In the coming weeks, it will also be available to order through [NH Document Source](#).

“The Bridge” – Provincial perinatal substance use project updates June 2021

Sharing on behalf of the Provincial Perinatal Substance Use Project:

Dear Project Partners,

Today, on National Indigenous Peoples Day (June 21, 2021), we share a special edition of “The Bridge”, where we highlight Indigenous voices, wisdom and teachings that we take our

guidance from, and encourage you to read more about. Please share the link widely with your teams and colleagues.

["The Bridge" Provincial Perinatal Substance Use Project Updates June 2021.](#)

Have questions? Email Akash Sidhu, Project Coordinator, Provincial Perinatal Substance Use Project, at akash.sidhu@phsa.ca

To view previous editions, go to OurNH [Healthy Start](#) page for staff under **Resources > Perinatal Mental Health and Substance Use > Newsletters.**

Wellness and more

Resources for wellness are available on the [Health and Wellness page](#) of the Physicians Website. For more information on [staff deals](#), the [NH Community Corner](#), and [RAARs](#), visit [OurNH](#).