

Coronavirus disease (COVID-19) FNHA Public Health Response Community Situation Report April 21, 2020

Note: Changes from the previous Community Situation Report are in red.

Purpose

The purpose of this information note is to provide a daily situational overview of the FNHA COVID-19 response activities that are being carried out by the Public Health Response Team and supporting executive leadership.

Background

On March 17, 2020, British Columbia's (BC) Provincial Health Officer (PHO) declared a public health emergency under the Public Health Act in response to the COVID-19 pandemic. On March 18, 2020, BC's Public Safety Minister also declared a provincial state of emergency, in an effort to allow the government to support the PHO and Ministry of Health in their response. Please refer to Appendix "B" for details on the Provincial and Public Health Emergencies/Orders related to the COVID-19 pandemic and the powers granted under them. All provinces across the country have declared public health emergencies.

As of April 21, 2020, there are 1,724 confirmed cases in BC, and a total of 87 deaths. Of these, 25 cases and one (1) death were confirmed in the last 24 hours. The regional breakdown of cases are as follows:

Vancouver Coastal: 707
Fraser: 715
Vancouver Island: 109
Interior: 153
Northern: 40

As of April 20th, 109 people are hospitalized, and 51 people are in ICU. There are active outbreaks at 20 long term care centres or assisted living homes accounting for 319 of the confirmed cases. There is also a new outbreak at Vancouver's United Poultry plant (28 workers), accounting for some of the latest confirmed cases. The plant has been shut down and there is no evidence to date that COVID-19 can be spread from meat. The outbreak at Mission Institution now includes 76 people (including 65 federal inmates). There are no new cases connected to the outbreak at the Kearl Lake oilsands project in Alberta.

Of the total number of cases, 1041 (60%) patients have fully recovered as of Monday.

On April 20th, the provincial government announced a new collaborative framework to help ensure people living in rural, remote and Indigenous communities in British Columbia (BC) have appropriate health supports during the COVID-19 pandemic and beyond. This framework includes immediate actions to improve health-care services and respond to the pandemic, including:

- Enhanced medical transportation options to larger centres, including flights and ambulances;
- Short-term accommodations options for people needing to self-isolate near their families while remaining in their home communities or options to develop accommodation near larger centres with more medical services;
- New and faster COVID-19 testing technology, which uses a team-based approach;
- First Nations Virtual Doctor of the Day, a program that connects First Nations members and their families in remote communities to a doctor using videoconferencing; and
- Increased mental health supports in communities.

First Nations COVID-19 Cases (April 22, 2020) – Each region has at least one COVID-19 case. There are at least 26 people who are resident on reserve and at least 6 other positive cases of First Nations individuals not resident on reserve.

First Nations Statistics as of April 15, 2020

Band Offices Closed	145
First Nations Emergency Operation Centres	90
Declared State of Emergency	53

FNHA Response:

- FNHA is on Week 4 of Level 3 Emergency Response Level 3, which means that 80% of FNHA's time is spent on COVID-19 and 20% on FNHA operations.
- FNHA will maintain essential services to support First Nations communities during this pandemic.
- Supporting First Nations communities in refreshing their Pandemic Plans and to provide COVID-19 resources for medical transportation, isolation and guarantine.
- Maintaining communications and regular telephone updates with the Regional Health Authorities, Emergency Management of BC, Ministry of Health, First Nations Leadership Council, and Indigenous Services Canada. See Appendix "A"
- "First Nations Virtual Doctor of the Day" is up and running in all five regions, which is to close this gap by providing virtual access of physicians to First Nations communities.
- Working with Federal and Provincial partners to obtain Personal Protective Equipment (PPE) for health care staff and first responders in all communities. The first delivery of PPE from the Province was received on March 27 and was shipped to communities on March 28. The second Provincial delivery of PPE was received on April 3 and shipped out to regions for April 6th week delivery. The third Province Order received April 7th and being sent out to communities on April 8th. A Federal and Provincial shipment of PPE arrived in Vancouver on April 15th and will be sent to the Regional Offices next week.
- Launch of Advance Care Planning (ACP) workbook created by nursing.
- Public health advertisements on radio and television (APTN and Global) featuring Doctors Adams and Wieman.
- FNHA is working on access to point of care testing, self-isolation and quarantine options with our Federal, Provincial Government partners and the Canadian Red Cross to support First Nations communities and urban settings.
- COVID-19 response is being compounded by the re-emerging of the opioid overdoses and starting of flooding and forest fires that are impacting our First Nations communities.

FNHA Resources:

The FNHA website has been updated and has been divided into three sections: Community Leaders, Health Professionals and Public. https://www.fnha.ca/what-we-do/communicable-disease-control/coronavirus.

The FNHA and Province of BC Partner to Support Indigenous, Rural and Remote Communities during COVID-19. https://www.fnha.ca/about/news-and-events/news/helping-rural-remote-and-indigenous-communities-respond-to-covid-19

Funding Announced:

On March 11, 2020, the Government of Canada announced more than \$1 billion dollars for enhanced public health measures to ensure the health and safety of Canadians.

To support the immediate response to the outbreak, this funding includes \$100 million to support federal public health measures such as enhanced surveillance, increased testing at the National Microbiology Laboratory, and **ongoing support for preparedness in First Nations and Inuit communities.**

On March 18, 2020, it was announced that \$305 million would be available for Indigenous Community Support Fund.

Emergency/disaster supplement funding under the Income Assistance program is available to First Nations persons in BC affected by COVID-19 and an advance is being forwarded to allow First Nations to enact these provisions immediately. It is ISC's intention to mirror the provisions as that of the Province of BC who have recently expanded eligibility to assist during this period. In order to assure a timely response to your needs, ISC has asked that First Nation identify to what additional resources that may be required over the next couple weeks if possible. For more information, call 1-888-440-4080 or e-mail aandc@canada.ca.

For any ISC COVID-19-related questions and requests, please email: aadnc.iscbccovid19.aandc@canada.ca, which will ensure that all requests are tracked and responded to promptly.

There is new funding to support women and children who are especially vulnerable during these troubling times. The Government of Canada has announced up to \$50 million to boost the capacity of women's shelters and sexual assault centres to manage or prevent a COVID-19 outbreak. This includes potential funding to facilities in First Nation communities and more information will be coming soon.

FNHA Funding:

1. FUNDING AND OTHER SUPPORTS FOR COVID-19 RESPONSE

On March 11, 2020, the Government of Canada announced more than \$1 billion dollars for enhanced public health measures to ensure the health and safety of Canadians. To support the immediate response to the outbreak, this funding includes \$100 million to support federal public health measures such as enhanced surveillance, increased testing at the National Microbiology Laboratory, and ongoing support for preparedness in First Nations and Inuit communities.

The FNHA will be supporting communities to identify their associated COVID-19 costs. The mechanism for funding is still being determined. FNHA will support First Nations to access resources as needed including through the following methods:

- Coordinate service delivery and supports on behalf of communities
- Purchasing activity to procure items needed for COVID-19 response as collectively we have purchasing power with medical equipment suppliers through the provincial process

This information and forms can be found at: https://www.fnha.ca/Documents/FNHA-COVID-19-BC-First-Nations-Community-Guide-for-Additional-Supports-Needed.pdf

2. HOW CAN BC FIRST NATIONS COMMUNITIES IDENTIFY ADDITIONAL SUPPORTS

Personal Protective Equipment (PPE) for COVID-related primary health care activities, and possible transfer of individuals with respiratory symptoms can be requested from FNHA if they are not accessible through regular procurement channels, or provincial channels (please see Annex A for PPE request form and process). We recognize that each community's needs are different, and we will work with our system partners to ensure that the personal protective equipment needs are met, while facilitating fair and timely distribution of supplies across communities and the health system. Recognizing the urgency of PPE needs it is important to note that PPE request forms may come in separately from requests for other expenses listed below. Submit to: COVID19needs@fnha.ca.

Communities should ensure that they track all expenses specific to their COVID-19 response. Please keep a list of planned or incurred expenses that include information related to:

- Cost (with receipt or invoice);
- Item required or purchased;
- Brief description of item and the essential function it has for your community to be able to operationalize your plan; to support your community in reducing the spread of COVID-19; and/or to respond to cases in your community.

See Annex B for a template to identify and/or track associated needs and costs planned or incurred by your community due to COVID-19. Submit to: coviD19needs@fnha.ca.

Eligible expenses will include:

- Community or service provider level infection prevention and control (soap, sanitizers, disinfectants, personal clinical supplies, community training, etc.);
- Medical Transportation: Travel (air, ground and water) / Meals and accommodations (note high-risk individuals eligible for private ground transportation, such as taxi, and private accommodations, such as hotel);
- Emergency Transportation Additional escorts Travel (air, ground and water) meals and accommodations (note high-risk individuals eligible for private ground transportation, such as taxi, and private accommodations, such as hotel);
- Health human resources surge capacity primary care nurses and public health nurses needed to address outbreaks in communities, or other health providers such as paramedics and community workers;
- Mental health services to support communities, particularly when they are facing affected individuals;
- Adaptation of community space for surge capacity access to medical care or for self-isolation, quarantine and/or other related purposes;
- Storage costs of supplies; and other types of expenses will be considered on a case-by-case basis.

Note that other additional non-health related expenses may be covered through the Emergency Management and Preparedness Fund administered by Indigenous Services Canada. BC's Emergency Management and Preparedness coordinator can be contacted at: Telephone: 604-209-9709 Email: aadnc.bcemu.aandc@canada.ca

Appendix "A" - Meeting schedule undertaken by Public Health Response Team

FNHA representation on coordination calls includes:

• Daily:

- CEOs and Deputy Ministers Conference Call
- Chief Medical Officers Conference Calls
- Joint Information Centre COVID-19 Conference call
- > FNHA Public Health Response Team
- HEMBC SLT nCoV Daily Check-in
- ➤ ISC Regional Daily COVID call

Monday:

- Expanded Level 1 COVID-19 Response Team
- FNHA-FNHC-FNHDA Co-Chairs Update
- Senior First Nations Agency Rep Meeting

Tuesday:

- FNHA Executive Public Health Response Update
- Regional Health Authority Chairs and MoH Meeting
- ISC/FNHA Covid-19 Touch Base
- EMBC and FNLC Meetings
- > nCoV CD-Medical Health Officers
- Northern Health COVID Coordination Call
- > Interior Health COVID Coordination Call
- Vancouver Island COVID Coordination Call
- North West/East COVID Coordination Call
- COVID-19 Infection Prevention and Control /WHS Provincial Working Group Meeting
- North East COVID Coordination Call

Wednesday:

- Senior First Nations Agency Rep Meeting
- Vancouver Island Health Regional COVID-19
- Federal CDWG/ IPC meeting
- CDE/IPC and NHEM COVID-19 Network
- ➤ Northern Health Regional COVID-19
- > Fraser Health Region COVID-19
- Expanded Level 1 COVID-19 Response Team

• Thursday:

- > FNHA Board Update
- > nCoV CD-MHO T/C a(10-11)
- nCoV Provincial Coordination Committee
- > Fraser Health Regional COVID-19
- EMBC and FNLC Meetings

Friday:

- Regional Medical Officer COVID Call SAC/ISC
- Regional Health Authority Chairs and MoH Meeting
- Senior First Nations Agency Rep Meeting
- EMBC and FNLC Meetings
- Fraser Health Regional COVID-19
- Expanded Level 1 COVID-19 Response Team

Saturday:

- CEOs and Deputy Ministers Conference Call
- Chief Medical Officers Conference Calls

Sunday:

- CEOs and Deputy Ministers Conference Call
- > Chief Medical Officers Conference Calls

Appendix "B" - Provincial Orders

PHO Order effective April 20:

There has been transmission of COVID-19 from people who have returned to BC from the Kearl Lake oilsands project in Alberta (7 cases confirmed, others under investigation). There is an ongoing outbreak investigation happening in that community in AB. The PHO is now ordering anyone who has been in the Kearl Lake projects as early as March 15th to self-isolate for 14 days after they return to BC.

In an effort to avoid more spikes in community cases, COVID testing is being opened up more widely in order to quickly identify and address cases in community. Effective today, testing strategy has been broadened to allow anyone with symptoms of COVID-19 can to be assessed or tested by their family physician, nurse practitioner, or local community collection centre.

Effective April 9th, 2020:

BC's Premier Horgan announced that anyone returning to BC from an international location or any other points of entry into the province are now legally required to have a self-isolation plan upon arrival. This plan is meant to support the PHO's travel orders and reinforce the federal emergency order requiring anyone entering Canada to self-isolate for 14 days.

Effective March 27, 2020:

The PHO has made issued an additional order today:

All episodic vending markets (e.g. farmers markets and community markets) must only allow vendors that sell food.
 All other vendors selling items other than food are prohibited from participating in these markets. This order recognizes the importance of access to locally grown food.

During the PHO address, she shared some epidemiological modelling done by the BCCDC which indicated that while the current restrictions need to remain in place for some time, they do seem to be working. The current case rate trajectory is lower than what would have been expected if restrictions had not been implemented in BC. BC's rate of growth in COVID-19 cases has slowed slightly compared to the rest of the country.

Effective March 26, 2020:

The PHO has made two additional orders under the Public Health Act:

- 1. Enables all health sector workers at all public and private facilities to remain at one facility only for the duration of the pandemic (includes long term care, assisted living, extended and acute care.
- 2. Minister Farnworth has put in place a number of enhanced provisions around the provincial emergency declaration under the Emergency Programs Act which allows municipal bylaw officers to enforce orders outline by the PHO (e.g. physical distancing, isolation/quarantine requirements, bans on large gatherings). A clearly defined list of essential and non-essential services was also released. The following other measures were also announced:
 - Establishing a provincial supply chain to make sure goods/supplies are getting to where they are needed
 - Protecting consumers by banning the resale of food, medical supplies, personal protective equipment and cleaning supplies
 - Ensuring passenger and car ferries provide minimum service levels
 - Suspending all local states of emergencies, except in the City of Vancouver

Other notable announcements, enforcements, and guideline changes occurring today include:

- There are new prescriber guidelines around the provision of a safe supply of drugs to people who use drugs and are suffering from Substance Use Disorder. These guidelines support these people in places such as the DTES, who may be affected by COVID-19, by ensuring that they are able to comply with public health advice around isolation and quarantine.
- The Government of Canada began enforcing the Quarantine Act effective the evening of March 25th, requiring a mandatory 14-day quarantine for all travelers returning to Canada.
- Isobel Mackenzie (Seniors Advocate for BC) has announced that the government is expanding its BC 211 helpline to match seniors in need with volunteers willing to help during the pandemic. The Government is funding the expansion of the program which was previously only available in Metro Vancouver and Vancouver Island, and will now cover the entire province. This will allow seniors to receive help which includes virtual visits, and picking up/delivering groceries and medications. Family members of a senior who needs help can also phone this number and be matched up with a volunteer or service in their community.

Effective March 18, 2020:

The declaration of a Provincial State of Emergency allows the government the following powers:

- To prohibit the reselling of certain necessary supplies
- To enact food rationing protocols and set fuel prices if necessary
- Enforce the closure of bars and restaurants

The state of emergency is for two weeks, renewable by Cabinet. The legislature will be called back on Monday, March 23rd to expedite the response to COVID-19.

At the briefing, Dr. Henry was asked about Indigenous communities being able to offer their own testing. She said she has been in talks with FNHA to ensure there are courses of action to meet those needs, and noting that in particular elders are important in this. She further indicated that the provincial leaders are meeting with Chiefs from across BC on Friday, to ensure they are addressing this in a culturally-appropriate way. Minister Dix highlighted FNHA's involvement in meetings with Stephen Brown.

Effective March 17, 2020:

For the duration of the Public Health Emergency, the Provincial Health Officer is granted the following powers:

- Can deliver order verbally
- Can compel police to enforce those orders
- · Can make orders of health staff in all health authorities

Additionally, the Minister of Health can make changes without being required to seek the approval of legislature.

The following announcements were also made by Premier John Horgan, Finance Minister Carole James and Education Minister Rob Fleming:

- Province will reveal pandemic economic plan once federal government reveals details of its own stimulus package on Wednesday, March 18. BC will then look to supplement where needed (ie. Expansion of El coverage.
- Amendments to be made to employment standards act around assisting those who cannot work.
- K-12 classes across BC suspended indefinitely.
- Daycare/Childcare will remain available (at this time), but upon new advice this can change.
- New self-assessment tool available: https://covid19.thrive.health/

Effective March 16, 2020: the following orders are in place, announced by the BC Provincial Health Officer and Health Minister:

- Ban on gatherings of 50 people or more
- All casinos closed
- Restrictions on visitors at long-term care facilities ("essential only")
- Pharmacies to refill prescriptions without requiring physician's notes
- All hospitals (except Lions Gate) moved to Outbreak phase 2:
 - All elective scheduled surgeries cancelled urgent and emergency services only
 - Staff within sites reallocated to support COVID-19
- Lions Gate Hospital moved to Outbreak phase 3 accepting emergencies only
 - o Preparing to open a dedicated COVID-19 unit to provide care to those affected
- · Ministry moving to acquire more long-term care beds to move non-urgent patients out of acute care sites
- Physician compensation being extended for virtual-care services
- Regulatory colleges to list non-practicing providers to potentially re-register
- COVID telephone/text line available in addition to 811: 1-888-COVID19/1-888-268-4319