



## **Administrative Report**

### **Office of the Administrator, Sun Parlor Home**

**To: Warden McNamara and Members of County Council**

**From: Jayne Brooks-Keller  
Administrator, Sun Parlor Home**

**Date: Wednesday, August 11, 2021**

**Subject: Sun Parlor Home COVID-19 Experience**

**Report #: 2021-0811-SPH-R03-JBK**

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#### **Purpose**

The purpose of this report is to provide County Council with an update and information on Sun Parlor Home's experience with COVID-19 since the August 2020 report.

#### **Background**

The COVID-19 pandemic has changed the world. The second and third waves of the COVID-19 brought their own set of challenges and yet we continue to persevere. The magnitude and scope of these challenges required the Sun Parlor Home (SPH) to continue to adapt quickly to ensure the health and safety of our residents and team members.

#### **Discussion**

SPH has been responding to the COVID-19 pandemic realities since early 2020. Over a year later, as of July 31, 2021, SPH is 172 days COVID-19 free. Vaccination is well in hand, screening efforts and rapid antigen testing are supporting ongoing efforts to keep residents, team members and essential caregivers safe.

This report provides an overview of the COVID-19 experience at SPH and outlines the home's response to date through the second and third waves

while continuing to ensure the best possible level of care. The information in this report is current as of July 31, 2021 and provides a summary of our actions taken in order to ensure a safe and secure home for our residents and team members.

SPH proactively implemented a number of measures following the first wave, in addition to following the provincial directives and guidelines related to resident and team member co-horting, visitation limits, testing requirements, use of face shields and many more.

These actions, summarized below, enabled the SPH to continue to navigate through the COVID-19 pandemic.

### **Key Measures Implemented to Mitigate Risks and Manage the Spread of COVID-19**

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- a) Receipt and review of constantly changing Ministry of Long-Term Care/Ministry of Health/Ontario Health/Public Health Directives and educating team members, residents and essential caregivers in that regard. Ensuring the implementation and sustainability of those mandates
- b) Continuing with enhanced communication with residents, families and team members
- c) Enhanced staffing levels for co-horting and to facilitate screening, swabbing and vaccinations
- d) Maintaining team huddles
- e) Investing in quantitative mask fit system
- f) Ensuring a 6-week PPE supply in order to respond to a full home outbreak
- g) Active screening of all team members entering the home using new entrance and exit system
- h) Adhering to changing provincial mandates, directives and guidelines to increase the frequency of COVID-19 testing including polymerase chain reaction (PCR) and rapid antigen testing (RAT) of team members, essential caregivers and residents

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- i) Physical distancing of residents and team members – including smaller neighbourhood activities, distancing during meals, separating/adding team member break rooms to support co-horting
- j) Quarantine area within the home enhanced
- k) COVID-19 testing for residents and team members completed in-house – allowed for rapid response
- l) Immediate institution of isolation protocols for residents based on best practices
- m) Implemented a phased approach to new admissions and readmissions – working with the Erie St. Clair LHIN
- n) Active screening of everyone entering the home using standard protocols
- o) Twice daily assessment and surveillance of all residents at the Sun Parlor Home maintained
- p) Building Infection Prevention and Control (IPAC) capacity by consulting with hospital partner to enhance IPAC practices and perform independent audits, dedicate full time IPAC practitioner, and completing IPAC audits
- q) Close partnership with Windsor Essex County Public Health
- r) 5 team members enrolled into certified IPAC program at Queens University
- s) Support team members through provision of mental health and well-being resources and other information

SPH learned significantly from the first wave experiences and the earlier outbreak regarding IPAC education and audits, personal protective equipment (PPE), communication and staffing patterns. We used the lessons learned to improve readiness for potential future new cases and outbreaks.

By the middle of September 2020, Ontario Premier Doug Ford confirmed that the Province was indeed in the midst of a Second Wave of COVID-19 as new cases began to rise, following a slowdown during the summer. This second wave revealed there was increased community transmission

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including the emergence of new variants of the COVID-19 virus known as variants of concern (VOCs).

As the Second Wave progressed, SPH continued to follow the direction of Ministry of Long-Term Care, WECHU and developed partnerships with health system partners including Erie Shores Health Care to build on lessons learned and adopt best practices.

Sadly, in spite of the interventions in place, the SPH experienced a second COVID-19 outbreak in December 2020. Outbreak protocols and practices were already in place and additional measures were initiated immediately under the guidance and direction from Windsor Essex County Health Unit and our Medical Director. We successfully initiated the quarantine area and we were able to adjust and contain the outbreak at the home.

The approval of the first COVID-19 vaccine in Canada occurred in December 2020. SPH leadership team shared vital information regarding the vaccines through posters, written fact sheets, memos and huddles with team members. During the initial roll out of vaccines in December 2020, team members were provided fair compensation for receiving the vaccine at the mass vaccination centre in Windsor, and we strived to support the team members to enable them to make the journey. In January 2021 SPH was provided with vaccines to administer in house to residents, essential caregivers and team members. Through strong partnership with WECHU and preparedness we were able to successfully facilitate team member vaccinations and administer vaccines to our residents, team members and essential caregivers. As of this report, 93% of residents, 80% of team members and 85% of essential caregivers have received the vaccine.

The home conducted a survey of essential caregivers in March and April 2021 with respondents sharing feedback on COVID-19 practices at the home including screening, testing, visit/appointment booking and caregiver support. The caregivers were asked if SPH kept them informed about changes related to COVID-19 and 92 % said yes. When asked if they felt they received adequate education regarding infection control policies and practices at the home, 100% said yes. 98% of caregivers felt that the screening process upon entry was running smoothly and that team members were helpful and booking appointments was very easy.

One of the key ways to mitigate the COVID-19 virus spreading is to identify potential sources of infection through regular surveillance testing. Initially, the mandate included weekly mandatory polymerase chain reaction (PCR) testing for all team members and essential caregivers. This testing was

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completed onsite at SPH or proof of negative PCR test was required prior to entering the home. Requirement for resident testing included any resident showing signs or symptoms of COVID-19 or if they had potential exposure to someone with virus. The testing requirement for residents increased dramatically during the outbreak. The PCR test reporting was frequently delayed thus increasing the risk of exposure by asymptomatic or pre-symptomatic carriers.

In February 2021, the rapid antigen testing (RAT) was approved for use in long-term care homes. These tests are part of enhanced screening and they can detect COVID-19 in 15 minutes. The RAT allowed the home to test for COVID-19 virus quicker and thus it is easier to stop the virus from entering the home. This test is only used as long as the home is not in an outbreak situation.

The testing mandates have required extensive resources. There was an increased requirement for education and communication for team members and families. Further, the PCR testing requires working with laboratory services off site including increased couriers and confidential reporting. The RAT requires additional supplies, space and human resources to administer. Further, there is a significant administrative burden to the home to monitor, track test results and report.

The testing requirements continue to change based on Ministry of Long-Term Care directives. SPH continues to exceed the minimum requirements set forth to minimize the risk level whenever possible.

As SPH traversed through the Second and then Third Waves, it was clear that there were physical infrastructure issues that posed challenges for managing COVID-19. The requirements for safe practices of physical distancing is difficult in smaller shared accommodation rooms and the small dining spaces. SPH undertook to use the limited space available on the main floor to create team member break areas based on co-horts and create screening and swabbing areas within the existing home. We created a COVID-19 quarantine area (care unit) by converting the Education room with a separate entrance/exit.

Throughout the duration of the waves, SPH closely examined IPAC practices including donning and doffing audits, hand hygiene audits and increased education for team members related to IPAC topics. Team members were surveyed in July/August 2020 and again in May/June 2021 regarding their understanding of IPAC topics including PPE practices, Point of Care Risk Assessments, Physical Distancing, Resident Isolation and Swabbing and the

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Resident Visitor process. Overall results were very positive with 100% of respondents indicating that they felt safe at work. The leadership team used feedback from both surveys to tailor ongoing education and training within the home.

As noted in the report in 2020, PPE issues were a significant concern during the first wave. SPH leadership team made the commitment to assemble and maintain a new 6-week supply of PPE. This supply required SPH to re-configure and re-imagine storage spaces within the home. New storage units were purchased and the climate-controlled space was created in the garage. We created a new inventory tracking system to manage our forecasting and purchasing. PPE inventory and usage reporting remains ongoing to the Ministry.

During the Second Wave, additional PPE requirement was layered onto the existing PPE protocols. Universal eye protection and/or face shields were instituted for all team members and essential caregivers in the home. The requirement for eye protection continued on throughout the Third Wave and has only very recently been removed.

Resident quality of life continues to be our main focus. Many of the measures that were mandated and enacted to keep our residents safe – suspension of group activities and meals in dining rooms, restrictions on visitors coming into the home, team members wearing multiple layers of PPE, being asked to wear a mask, and restricting outings had unintended consequences of loneliness and stress for our residents. By making small changes to ensure safety and adhering to all ministry protocols, the SPH team has been able to keep residents engaged through programs and activities. The care teams have been committed to doing everything possible to support residents and keep them connected to their families during the trying times of lockdown. In response, SPH increased the number of iPads so that there are two iPads per home area for video chats so that we can support the residents' connection to their families through virtual visits.

The months and months of the pandemic has delivered relentless stress – lockdowns have impeded the ability of the team members to connect with residents and families as they usually do. In normal times comfort and support is offered through simple acts of holding a hand and a visible smile but this was lost through the pandemic. Through all of this, we are inspired and in awe of the resilience of our residents and families. The residents unfailingly appreciate team member efforts to care for them in spite of all the challenges.

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We continue to respond to the ongoing changes to adopt the new guidelines for relaxing the visitor restrictions and to develop processes to ensure we are keeping everyone safe. The focus is balancing the risk of a COVID outbreak and the need for residents to have visitors of their choice be in the home to support their overall wellbeing and comfort.

SPH's top priority is the health and safety of residents and team members. We are proud of the dedication and commitment displayed 24/7 by team members to manage through the pandemic. Since our last update, the homes' team members have continued to stay strong and are dedicated to protecting the residents, families and each other. Our team members' compassion, adaptability and positive attitudes have assisted our residents during this difficult time and the whole home has worked together to implement creative solutions to challenges as a result of the pandemic.

The families and local community have rallied behind our home and have shown their support through kind words of encouragement, numerous food donations, technology devices, PPE supplies, and so much more. The SPH team is humbled by their ongoing support as well as the support and resources of the County of Essex.

The pandemic has taken a toll on human resources across the health care sector. This concern was noted by our County Partner Windsor Essex EMS last month. There is a pervasive sense of pandemic exhaustion and fatigue amongst team members at all levels. Team members experience increased demands at work including constant requirements to wear PPE, constant changes with practices/policies, cleaning protocols, screening, swabbing requirements, and vaccines.

At SPH, we took proactive steps early in the pandemic to increase our staffing levels to facilitate the co-horting requirements and provided additional resources throughout the home. We were fortunate that over 90% of our team members selected SPH as their Single Employer when that legislation required them to choose one location.

Ensuring ongoing staffing levels that meet the care needs of our residents remains a priority for the home. SPH continues to recruit new team members and has recently participated in a new initiative to "grow our own" Personal Support Workers.

We continue to support the well-being and mental health of our team members. We have facilitated many team member appreciation events such as pizza days, pop and chip days, cookies, ice cream events, coffee and

donut days. We encourage our team members to access support and resources available to them through our Employee Assistance program and programs such as Mind Beacon. We provided on-site testing to decrease the burden for team members to access this required test.

In the trying months since the beginning of the pandemic, we have learned a great deal about the challenges that this highly infectious virus leaves in its wake. At this time there is already talk of a Fourth Wave and once again we are reminded that we are not out of the pandemic yet. At SPH, we continually seek to understand and act upon the ever-evolving events and directives. We re-examine what we value and prioritize what matters most on a daily basis.

If there is anything to be gained from the tragic events of this pandemic, it must be in the opportunity to learn from the chaos it created. We have been faced - as a nation, as a community, and as a long-term care home - with many challenges we had never encountered before. Lots of things have changed, we don't shake hands, we physically distance, we wear masks, and hand sanitizer has become the norm. But, one thing has remained constant: the amazing care that this team has provided within our home for the residents.

Thank you to our residents and their families who have trusted us with their care and well-being on this journey. Your confidence in us and your unwavering support has meant so much to the team.

The work our team has done through this pandemic is nothing short of extraordinary. There will never be enough words to convey my gratitude and appreciation for the dedication and commitment of our leadership team and team members. I am also deeply humbled by the outreach of support and assistance from Administration, other County departments and Essex County Council as we have ventured through the changing tides of the pandemic. Thank you.

## **Financial Implications**

The COVID-19 pandemic has had a significant impact on the home's operating expenses. The majority of these expenses were offset by provincial funding however, the COVID-19 response has had an impact on the home's budget. The COVID-19 response investments were essential to meet legislative obligations and take necessary actions to protect our residents and team members. Specifically, SPH increased spending to facilitate enhanced staffing levels (co-horting), additional PPE, resources for



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screening, swabbing, vaccination clinics and enhanced cleaning protocols. We continue to be steadfast in our commitment to ensure quality of life, safety and security for our residents, families and team members. It is anticipated that there will be ongoing additional costs to ensure SPH remains in compliance with all legislation and directives. A projection of costs associated with implementation of the required directives and recommendations is provided in the financial report submitted by the Director of Financial Services/Treasurer on August 11, 2021.

## Recommendation

That Essex County Council receive for information, Report number 2021-0811-SPH-R03-JBK.

Respectfully Submitted

*Jayne Brooks Keller*

Jayne Brooks-Keller, Administrator, Sun Parlor Home

Concurred With,

*Mike Galloway*

Mike Galloway, Chief Administrative Officer