Ontario Long Term Care Clinicians

Friday, April 24, 2020

COVID-19 REPORT

Public Health Ontario is dedicated to protecting and promoting the health of all Ontarians and reducing inequities in health. PHO links public health practitioners, frontline health workers and researchers to the best scientific intelligence and knowledge. PHO provides scientific and technical advice to Ontario's government, public health organizations and health care providers. During COVID-19 the regular Epidemiological Summaries includes the most current information available from the integrated Public Health Information System (iPHIS). From yesterday's report:

- There are 12,879 confirmed cases of COVID-19 in Ontario reported to date.
- 42.0% of cases are male, 57.0% are female.
- 44.5% of cases are 60 years of age and older.
- 11.7% of cases were hospitalized.
- 713 deaths reported (there may be a reporting delay for deaths in iPHIS).
- 135 outbreaks have been reported in long-term care homes.
- 358 deaths have been reported among residents in LTC homes.

PHO Epidemiological Summary, Apr 23

There are data gaps between provinces which hamper national statistics. Alberta is widely seen as a national leader in providing COVID-19 data. Other provinces are less transparent. Some health authorities in the greater Montreal area stopped publishing the death statistics of each LTC home – "places where the pandemic has cut a deadly swath." The Epidemiological Summaries provide a heat map of cases broken down by the province's 34 public health units. The map shows that Toronto is the regional epicentre of the pandemic. New York provides a far more detailed map showing the percentage of positive tests in each of the city's dozens of zip codes, revealing stark geographic divides within a single metropolitan area. Death count also is skewed because of data gaps. The methodology needs to sort out deaths that may not be COVID related. National mortality data by Statistics Canada is 11 months after the end of a year. Statscan says that they're working with provinces and coroners to provide more timely death statistics.

Crucial data gaps, Globe and Mail, Apr 24

Virtual care in LTC is an innovative and inventive way to provide care. Dr. Mark Dermer, a primary care physician and virtual care expert provides practical tips on technology needs, good "webside" manner, and best practices. This is one of the webinars in the CMA COVID-19 learning series. The move to telemedicine is easier than the other major transition is digital health care, the electronic health record. Software can be downloaded to any computer or mobile device. Considerations for virtual care include privacy, confidentiality, necessary screen space, the quality of the camera and audio.

Secure access to the EHR, such as PointClickCare, allows the clinician to review progress notes, biometrics, medications, etc. Photos can be uploaded into the virtual file. This will assist in virtual rounds with the patient representative, usually the nurse. Laboratory and imaging can be accessed through the regional clinical views, such as ConnectGTA or Clinical Connect. Ongoing contact with families and SDM is especially important at this time. This can be done by the phone but also other on-line platforms (see below). Develop "standard recitations" to explain the LTC situation and your part. Assure privacy, build trust.
CMA COVID-19 learning series

The OMA's virtual care one-pager provides an overview of the virtual care platforms you can use to provide care to patients during this COVID-19 pandemic. The link to OntarioMD provides several platforms created for medical care. The most widely used is likely the Ontario Telemedicine Network (OTN)
https://ontariomd.news

The OMA one pager lists other video-conferencing platforms that are not typically used in health care, including Skype, Teams by Microsoft, Facetime, Zoom.us, Google Hangouts, and others. Consent, privacy and confidentiality is always considered with these platforms. From today's webinar on heart failure, the clinician uses WhatsApp for assessing physical signs like orthopnea, JVP and edema. WhatsApp has end-to-end encryption built-in, which means any texts, photos, or videos exchanged between users are encrypted and assumed to be secure between the people communicating. No server stores messages after they are delivered.
McFee, Mar 7, 2020

Give your experiences and questions about virtual care in LTC at office@oltcc.ca