

Fort Nelson First Nation



COVID-19 (CORONAVIRUS)

PANDEMIC PLAN

MARCH 2020

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Covid-19 (Coronavirus)

Covid-19 Coronaviruses are a large family of viruses found mostly in animals. In humans, they can cause diseases ranging from the common cold to more severe diseases such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS-CoV). The new coronavirus has been named COVID-19. While many of the characteristics of COVID-19 are still unknown, mild to severe illness has been reported for confirmed cases.

Anyone concerned that they may have been exposed to, or is experiencing symptoms of the novel coronavirus, should contact their primary care provider, local public health office, or call 8-1-1.

What is a Pandemic

A pandemic is a World Wide event that happens everywhere at almost the same time. A pandemic is not restricted to influenza; there are many people in the world who one day hopes for pandemic peace!

A pandemic influenza is a result of a major change in the virus (virus shift) which results in a never seen before virus, not introduced into people before, and once that virus manifests itself and meets the following 5 criteria, an influenza pandemic is likely to result. They are:

- Never seen before virus
- We have no immunity against it
- Spreads person to person
- Causes higher than usual rates of illness and/or death
- No developed vaccine

Preparing for Pandemic

Why plan for a pandemic? Pandemics are unpredictable, but occur on average three or four times a century. Experts agree that another influenza pandemic is inevitable and possibly imminent (World Health Organization, Jan 15 2004). Planning ahead for such a public health emergency can minimize serious illness and deaths. It is also important in order to minimize the social disruption that would probably result.

Goals and Objectives of this Plan

Specific objectives of pandemic planning in Aboriginal Communities:

- To minimize serious illness and overall deaths
- To minimize suffering
- To increase awareness
- To develop a plan that ensures readiness to respond appropriately to a pandemic
- To develop a plan that is consistent with our Health Authority.
- To develop a plan that is a living document, changing to meet future needs

Public Health and Prevention

How to minimize risk of spreading the virus: The most important thing you can do to prevent infection is to wash your hands regularly and avoid touching your face.

To help reduce your risk of infection:

- Wash your hands often with soap and water for at least 20 seconds. Using soap and water is the single most effective way of reducing the spread of infection.
- If soap is not available, alcohol based hand rubs (ABHR) also known as hand sanitizers, can be used to clean your hands as long as they are not visibly soiled. If they are visibly soiled, use a wipe and then ABHR to effectively clean them.
- Do not touch your face, eyes, nose or mouth with unwashed hands.
- Cover your mouth and nose with a disposable tissue or the crease of your elbow when you sneeze or cough.
- Regularly clean and disinfect frequently touched surfaces.
- Do not share food, drinks, utensils, etc.
- Stay at home when you are sick
- Self-Isolate if you are feeling sick
- Stay away from sick people
- Stay away from large crowds/gatherings
- Do not travel
- Frequently clean and sanitize door handles, washrooms and surfaces that are touched often.
- You may be used to greeting friends, family and colleagues with a hug or a handshake, but make bumping elbows the new greeting for now.

For protection against germs and disease, always wash hands:

- Before preparing food and after handling uncooked foods
- Before eating or smoking
- Before breastfeeding
- After toileting or diapering
- Before and after providing first aid
- After handling blood or body fluids
- Before and after providing care to an ill person

Community-based disease control strategies:

Public health control measures alone will probably not be effective at controlling spread of Covid-19 in the community. The following are recommendations for community-based strategies:

- Self-isolation: is strongly recommended
- There may be a need to cancel public gatherings (Schools, Church, Pow Wows, Sporting events, other gatherings or social events).
- Hand sanitizing stations are recommended in public buildings (Band Offices, Community Halls, Health Centres, and Schools).

Can you become sick from someone before they show symptoms? There have been a few instances of transmissions before the person became sick or the symptoms were mild that the person did not know they were sick. Those are exceptions as most people became ill from

being in close contact with someone who showed symptoms such as coughing and sneezing, therefore transmitting the virus through droplets. This is why B.C. health officials are focused on putting protection around people who are ill and showing symptoms, in order to decrease the spread to others.

Will wearing a mask protect me? Masks should be used by sick people to prevent transmission to other people. A mask will help keep a person's droplets in. It may be less effective to wear a mask in the community when a person is not sick themselves. Masks may give a person a false sense of security and are likely to increase the number of times a person will touch their own face (e.g., to adjust the mask). Health-care workers will wear surgical masks, eye protection and gowns in order to protect themselves and other patients. During health-care procedures in which aerosol sprays may be generated (for example, when giving certain inhaled medications), health-care workers should wear specialized masks.

Protecting loved ones: Follow the same advice that public health officials recommend for the cold and flu season: wash your hands often with soap and water, cover your mouth and nose when coughing or sneezing, avoid others who are unwell, and stay home when you are sick. The most important thing you can do to prevent coronavirus and other illnesses is to wash your hands regularly and avoid touching your face. Cover your mouth when you cough so you're not exposing other people. If you are sick yourself, stay away from others. Contact your health-care provider ahead of time so you can be safely assessed.

Social Distancing: Social distancing is a way that we can slow the spread of COVID-19 by limiting close contact with others. Even though we are not sick, we should still keep about two meters (six feet) or the length of a queen-sized bed from one another when we can when outside our homes.

There are many ways to practice social distancing:

- Limit activities outside your home
- Use virtual options to connect with others
- If you are out in public, try to keep 2 metres between yourself and others.
- Keep your hands at your side when possible
- Stay home when you are sick
- Cough into your elbow or sleeve
- Avoid social activities in large gatherings.

Chronic condition: Current information suggests that older people with chronic health conditions such as diabetes, heart disease and lung disease are at higher risk of developing more severe illness or complications from COVID-19. If you are at higher risk for COVID-19 complications, follow general preventative strategies against infection, and should you become ill, seek medical help early.

Before Pandemic

Community Responsibilities

- Community leadership and health team members will be responsible for supporting a Pandemic Preparedness Response Plan as an appendix to their Emergency Preparedness Plan. They should also coordinate with their Health Authority to ensure it is integrated with the Health Authorities Pandemic plan.

- Community leadership is responsible to support the work required to review, revise and exercise this pandemic annually, or as needed.
- Community leadership will ensure that all community members are made aware of this pandemic plan by providing copies of this plan to each household located in the community and to band members living within close proximity to the community.
- Community health team members are responsible to ensure that community leaders and community members are kept apprised of any updates or information as it relates to health emergencies, such as localized outbreaks, epidemics, or pandemics.
- Pandemic planning team will ensure that everyone whose name has been included in this plan with any responsibilities will be provided a copy of the plan and have their responsibilities explained to them.
- Ensure that you have established contacts with:
 - Northern Health Authority
 - First Nations Health Authority
 - Nearest Hospital
- Designate a central spokesperson (to the community and media).

Plan: The community spokesperson will conduct any media interviews, or communications required on behalf of the community.

During A Pandemic Community Responsibilities

Emergency Response

- The community Incident Command team shall meet as soon as possible to review and activate this plan, as well as any local control measures. Each local control measure (such as individual isolation or cancelling of events) will need to be discussed, and decided upon separately, before being implemented.

The following has been established as your Incident Command team:

Incident Command Structure:

- | | |
|---------------------------|----------------------------|
| ◆ Incident Commander: | Health Director |
| ◆ Community Spokesperson: | Chief or Council Designate |
| ◆ Operations: | Health, Administration |
| ◆ Planning: | CHN/CHR/Health Director |
| ◆ Logistics: | Capital Works Manager |
| ◆ Finance/Adminin: | Finance Manager |

Note - Each Key Person is aware that they will need to compose a team of one other (if possible) to assist in the event of an emergency.

Command Station: will be at the Fort Nelson First Nation Health and Wellness Center located at 5001 Dene Etene Road. Phone: 250.774.2300

Incident Command

- ✓✓ Sets objectives and priorities
- ✓✓ Has overall responsibility at the site

Operations

- ✓✓ Directs resources
- ✓✓ Carries out the response activities described in the plan
- ✓✓ Directs operations and ensures safety of staff

Planning

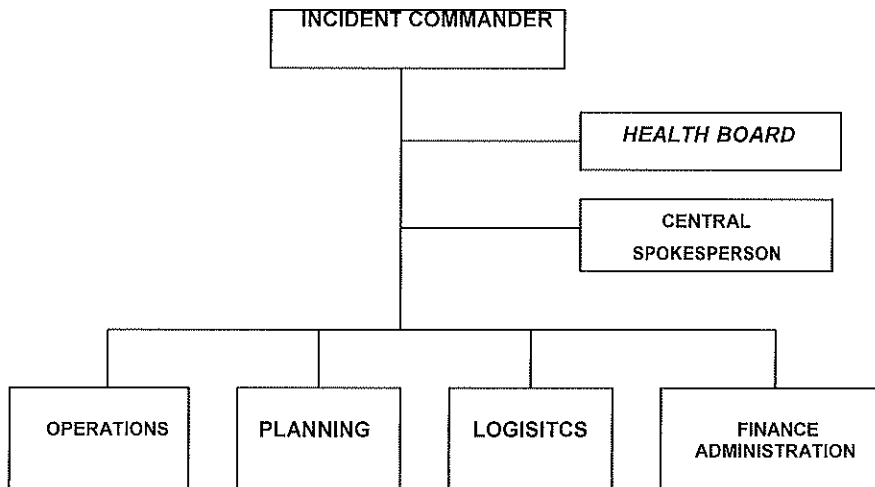
- ✓✓ Collects and evaluates information
- ✓✓ Develops incident action plans
- ✓✓ Maintains resource status (personnel, equipment)
- ✓✓ Maintains incident documentation

Logistics

- ✓✓ Provides support to meet the incident needs
- ✓✓ Provides resources
- ✓✓ Provides other services to support the incident

Finance/Administration

- ✓✓ Monitors costs related to the incident
- ✓✓ Provides accounting, procurement, time recording and cost analysis



Health team members will need to coordinate responses with their own Health Authorities, as well as FNHA, BCCDC and the FNHC when applicable.

Important contact information:

Fort Nelson General Hospital: 250.774.8100

Fort Nelson, Airport Way Medical Clinic: 250.774.7838

Fort Nelson First Nation, Health Center: 250.774.2300

Community Health Nurse, Rhonda Mathison: 250.500.1084

Executive Director of Community Services, Roberta Dendys: 250.500.2679

Chief, Sharleen Gale: 250.500.1070 or 250.500.1383

Executive Director of Administration, Liz Logan: 250.500.2564

First Nation Health Authority: <https://www.fnha.ca/what-we-do/communicable-disease-control/coronavirus>. Or Covid19.northern@fnha.ca

Northern/Provincial Health: 1-888-268-4319 (1-888-COVID19) for non health related calls and 881 health related calls

Northern Health: 1.844.645.7811

British Columbia Centre for Disease Control (BCCDC): <http://covid-19.bccdc.ca/>

Emergency Management BC NEA PREOC: 250-614-6322 during business hours (non emergency EOC information) and 1-800-663-3456 after hours emergency only
Preoc5.ops1@gov.bc.ca – any communications to the PREOC and EOC type questions that were not answered on the call

- Open communication with other communities in your area, as it is likely that what affects them can/will affect your community as well. This will also be important in the event that your or their community is severely affected by the outbreak and either community needs help.

BC Government Announces a State of Emergency on the Covid-19 Virus

The declaration of a provincial state of emergency gives the government sweeping powers, such as acquiring or using any land or property considered necessary to address the pandemic. The province also now has the power to control or prohibit travel to or from any area of British Columbia. The state of emergency also allows the province to procure, fix prices for or ration food, clothing, fuel, equipment, medical supplies or other essential supplies and the use of any property, services, resources or equipment. It also authorizes local authorities to implement a local emergency plan.

Vaccine

When a disease is new, such as the Covid-19, there is no vaccine until one is developed. It is unknown as to when a vaccine for the Covid-19 will be developed.

Plan: Once informed that a vaccine is developed and available and will be coming to the community for a vaccination clinic, a meeting with Health Team members, and Logistics shall occur to confirm dates, times, location, and the best way to advise community members.

Currently the Health Clinic has been identified as the location of the clinic.

Logistics will ensure the building is open with sufficient tables, chairs and supplies to support the health team to complete the vaccination clinic.

Ensure you have the total number of band members living on reserve up to date. If for some reason a community member cannot attend the clinic, either the CHN will attend that persons home or a member of the logistics team will arrange to pick up that

community member. Health Team will ensure that your Health Authority is kept up to date on the number of community members immunized, and how many are remaining.

It is the responsibility of the Health Team to monitor vaccine coverage and adverse effects. It is also their responsibility to report adverse effects to their Health Authority.

Antivirals

Consult your doctor early if you develop flu-like symptoms and you have a condition that puts you at higher risk of complications.

Antiviral medication is most effective if given within 48 hours once symptoms start, and the sooner the better. You should also call your doctor if your symptoms get worse, such as shortness of breath or difficulty breathing, chest pain, or signs of dehydration (dizziness when standing, low urine output).

Vulnerable Populations

Most people with COVID-19 recover; however, some people are more vulnerable to developing severe illness or complications from COVID-19 including:

older people and those with chronic health conditions. Others patients may have questions about how their health may be impacted by COVID-19.

Here you can find information for:

- Older People with chronic health conditions
- Children with immune suppression
- People living with kidney disease
- Patients receiving cancer treatment
- People who use substances

Symptoms of Covid-19

The symptoms of COVID-19 are similar to other respiratory illnesses, including the flu and common cold. They include cough, sneezing, fever, sore throat and difficulty breathing.

Contact your healthcare provider if you have developed symptoms and have been in close contact with someone known to have COVID-19. Do the same if you develop symptoms and have been in contact with a traveller returning from an affected area with widespread community spread of COVID-19.

Tell your health-care professional:

- your symptoms;
- where you have been travelling or living;
- if you had direct contact with animals (for example, if you visited a live animal market); and
- if you had close contact with a sick person, especially if they had a fever, cough or difficulty breathing.

Call ahead to the health-care facility you are planning to visit so they can be prepared to take precautions. In an emergency, describe your symptoms, travel history and any sick contacts when you first arrive at the facility so that appropriate precautions can be taken. Until more is understood about the virus, older people and people with a weakened immune system or underlying medical condition are considered at higher risk of severe disease.

Self-Monitoring

Self-monitoring means looking for new symptoms or signs of coronavirus infection such as fever, cough, runny nose, sore throat, etc.

- Take and record temperature daily and avoid the use of fever reducing medications (e.g., acetaminophen, ibuprofen) as much possible.
- These medications could mask an early symptom of COVID-19; if these medications must be taken, client should advise their healthcare provider.

If you develop symptoms, use the [BC COVID-19 Self-Assessment Tool](https://covid19.thrive.health/), available on line at <https://covid19.thrive.health/> to help determine if you need further assessment or testing for COVID-19. You can complete this assessment for yourself, or on behalf of someone else, if they are unable to.

If symptoms appear

- Symptoms of COVID-19 are like other respiratory illnesses. Commonly, these are fever/chills, cough, sore throat, runny nose and shortness of breath. Shortness of breath and chest pain can be signs of severe illness.
- Use the [BC COVID-19 Self-Assessment Tool](https://covid19.thrive.health/) to help determine if you need further assessment or testing for COVID-19. You can complete this assessment for yourself, or on behalf of someone else, if they are unable to. It is available online at
- After doing the self-assessment tool, if you still have questions, contact your healthcare provider or call 8-1-1 for guidance.
- If the symptoms are severe such as shortness of breath or chest pain, call 9-1-1 or go to the nearest Emergency Department
- Ensure that you self-isolate immediately and avoid contact with others. This means staying away from others as much as possible.
- Wash your hands or use alcohol-based sanitizer frequently.
- Practice good hygiene practices such as covering your cough and sneezing with a disposable tissue.
- Clean high-touch areas such as toilets, bedside tables and door handles with diluted bleach (one-part bleach to nine-parts water) or a household disinfectant.

To report symptoms please call:

Community Health Nurse Rhonda Mathison at (250) 500.1084, or
811 (BC Nurse Line) or
Fort Nelson General Hospital at 250.774.8100
The local Clinic at 250.774.7838

Testing

Testing is available for all who need it but not everyone requires a test. If you develop symptoms, use the [BC COVID-19 Self-Assessment Tool](#) to help determine if you need further assessment or testing for COVID-19. You can complete this assessment for yourself, or on behalf of someone else, if they are unable to.

Who should be tested for COVID-19? People with respiratory symptoms who are:

- Hospitalized, or likely to be hospitalized
- Health Care Workers
- Residents of long term care facilities
- Part of an investigation of a cluster or outbreak

Who does not need to be tested for COVID-19?

- People without symptoms
- Patients with mild respiratory symptoms who can be managed at home, including returning travellers with an onset of illness within 14 days of return to Canada

The BC Ministry of Health strongly urges anyone who has symptoms - including a fever, cough, sneezing, sore throat, or difficulty breathing - to self-isolate for 14 days. To protect yourself while out in public, wash your hands frequently and maintain a distance of about 2 metres from others.

Test results

Test Kits are limited, The BCCDC COVID-19 Negative Results line is staffed from 8:30AM to 4:30PM, seven days a week. People who have been tested are asked to wait 72 hours before calling the Negative Results line. Most people who have been tested are calling before the 72 hours and, as a result, the line is experiencing an extremely high call and voicemail volume. We ask for your patience and to wait at least 72 hours before calling for your result. If you have spoken with an operator or left a voicemail with your information, you have been placed in a queue and a nurse will follow-up when your result is ready. Please do not call back. If someone tests positive, public health will contact them. However, while you wait for your test result, you should follow the advice of your doctor or testing provider to self-isolate.

How does it spread?

Coronavirus is transmitted via larger liquid droplets when a person coughs or sneezes. The virus can enter through these droplets through the eyes, nose or throat if you are in close contact.

The virus is not known to be airborne (e.g. transmitted through the particles floating in the air) and it is not something that comes in through the skin.

It can be spread by touch if a person has used their hands to cover their mouth or nose when they cough. That's why we recommend you cough or sneeze into your arm and wash your hands regularly.

The spread of novel coronavirus occurs with sustained close contact with an affected individual, for example, sitting in a car on a long trip, or living in the same household. Grocery stores – which are open and where people tend to walk around – are unlikely places to allow for virus spread.

A number of groups are being asked to self-isolate

- Anyone returning from outside of Canada.
- Those with known exposure to COVID-19
- Those who are a confirmed case

The second and third groups are monitored by Public Health, both their health and their activities. If people do not voluntarily self-isolate, Public Health can use legal powers under the Public Health Act to ensure that self-isolation occurs.

If you are sick

If you have COVID-19, or think you might have it, help prevent spreading by following the instructions below.

Wear a face mask. When you are sick, wearing a face mask (surgical or procedure mask) helps to stop the spread of germs from you to others. Wear a face mask when you are in the same room with other people and when you get medical care. If your mask gets wet or dirty, change it and wash your hands right away. You and those you live with do not need to buy and wear other types of masks, such as an N-95 respirator mask.

Cover your coughs and sneezes. When you feel a cough or sneeze coming on, cover your mouth and nose with a tissue. Don't have a tissue? Cough or sneeze into your upper sleeve or elbow, not your hands. Wash your hands right away after you sneeze, cough or touch used tissues or masks. Throw used tissues into a lined trash can in your room and tie up that trash bag before adding it with other household waste.

Wash your hands. Wash your hands often with soap and water for at least 20 seconds. It is best to dry your hands with a paper towel and throw it away after use. If you can't wash your hands, use an alcohol-based hand sanitizer. Avoid touching your eyes, nose, and mouth with unwashed hands.

Do not share household items. Do not share dishes, cups, eating utensils, towels, bedding, or other shared belongings. After using these items, wash them with soap and water.

Flush the toilet with the lid down. COVID-19 virus may also be present in poop (stool or feces). Always wash your hands with soap and water after using the toilet.

General cleaning. Water and detergent (e.g., liquid dishwashing soap) or common household cleaning wipes should be used. Apply firm pressure while cleaning. Surfaces should be cleaned at least once a day. Clean surfaces that are touched often (e.g., counters, table tops, doorknobs, toilets, sinks, taps, etc.) at least twice a day.

Pay attention to your health and how you are feeling after getting the test. You can call 8-1-1 anytime to talk to a nurse at HealthLinkBC and get advice about how you are feeling and what to do next. 8-1-1 has translation services in 130 languages.

Urgent medical care means that there is a change in your health that needs medical help right away. If it becomes harder to breathe, you can't drink anything or feel much worse than when you got tested; seek urgent medical care at an urgent care clinic or emergency department. If you or someone in your care has chest pains, difficulty breathing, or severe bleeding, it could be a life-threatening emergency.

Call ahead before you get medical care. If leaving your home for medical care, call ahead and tell the clinic you are coming in and that you just had a COVID-19 test. By calling ahead, you help the clinic, hospital, lab, urgent care or doctor's office prepare for your visit and stop the spread of germs. Remind each health care provider that is taking care of you that you are waiting for COVID-19 test results.

Travel

There has been travel bans put in place, speak to your local travel agent for more information. British Columbians and Canadians should avoid all non-essential travel outside of Canada, including to the United States. Anyone arriving in British Columbia from outside of Canada will be asked to self-isolate and monitor for symptoms for 14 days upon their arrival. The federal government is doing several things to inform and screen travellers at the airport

Create a Household Plan

Create a household plan of action in case of illness in the household or disruption of daily activities due to COVID-19 in the community.

- Consider 2-week supply of prescription and over the counter medications, food and other essentials. Know how to get food delivered if possible.
- Establish ways to communicate with others (e.g., family, friends, co-workers).
- Establish plans to telework, what to do about childcare needs, how to adapt to cancellation of events.

How to Self-Isolate

It is better if those you live with can stay somewhere else, especially if they have a weak immune system or chronic health conditions. If you need to share a home, stay and sleep in a room with good airflow that is away from others. Use a separate bathroom if you can. Wear a face mask (surgical/procedure mask) if you are in the same room with anyone. Avoid face to face contact; friends or family can drop off food outside your room or home.

Establishing Isolation (Individual, Household, and Community): There are 3 levels of isolation which can be used to assist the community and its members to remain safe in the event that the outbreak is localized. In the case of persons who become isolated, someone will need to be identified to check on those people to ensure they are not getting sicker, or require supplies such as food or medication.

1) Individual Isolation:

In the event that a community member becomes ill, they will be required to isolate themselves from other family members and community. To do this, individuals will stay in one room of their home (or the home of a care giver), and remain there for a minimum of 14 days or longer if advised by a health team member. Someone should clean the home, and ensure that the washroom used by the ill person is cleaned regularly. When possible the ill person should have the use of their own washroom away from others, when not possible it will need to be cleaned after each use.

It will be important to keep those persons who are at a high risk away from the ill person, and it may be necessary to either remove the ill person or

the person at risk as a way to keep them safe.

Ensure that the Health Team has been notified that the person is sick.

2) Household Isolation:

When there are 2 or more persons who live within one house who are sick, then this household should be isolated. A sign indicating that there are sick people inside and to not enter without permission should be posted at the door.

For medical confidentiality purposes, the persons living in the home will need to be advised that a sign is to be placed at their door indicating that persons are sick and to not enter. Permission will need to be given by household members before the sign is posted.

3) Community Isolation:

There may be a need to isolate the community for one of two reasons:

- a) In the event there is large outbreak of illness in the community;
- b) There is a large outbreak of illness in the surrounding area, and isolation is being used to keep the outbreak away from the community.

The Medical Health Officer for your Health Authority does have the legal ability to isolate your community if required, as does the Chief and Council

Because of the severity of community isolation, it will be imperative to advise the community of the impending isolation so that they can pick up food, medication or other items before the community becomes isolated.

When the community is isolated, a meeting/communication must take place explaining fully as to the reasons for the isolation, and any restrictions that are in place because of it, as well as expected timelines of the isolation.

FNFN Community Health Services

Family members are strongly encouraged to assist their family members with their basic needs. The Health and Wellness Team will be available to provide essential services to only those members who require them. Such services will include:

- Home care for elders and members with disabilities or chronic illness
- Meals on Wheels for elders and members with disabilities or chronic illness
- Shopping for elders and members with disabilities or chronic illness
- Counselling Services, via conference call

Provide health care services on a priority basis: Once notified by a community member of an illness, a member of the Health Team will either attend their residence, or have them attend a location to triage their level of illness. As other members of the community become ill, the Health Team may establish a priority list indicating who requires what level of care (e.g. at home, alternative care site or hospitalization).

When community members are triaged, they may be classified in one of the following ways:

- 1) Have covid-19 symptoms and can care for themselves (advise them to self isolate for 14 days), check back with them 4 – 6 hours later to re-triage.
- 2) Have covid-19 symptoms and have family or others who can care for them (advise them to self isolate for 14 days), check back with them 4 – 6 hours later to re-triage.
- 3) Cannot care for them and have no family who can care for them, arrange for a health team member to care for them or set up an alternative care site.
- 4) They are having severe symptoms and need advanced medical care, either call 811 (BC Nurse line) or for an ambulance or have them taken to the hospital

Establishing Isolation (Individual, Household, and Community): There are 3 levels of isolation which can be used to assist the community and its members to remain safe in the event that the outbreak is localized. In the case of persons who become isolated, someone will need to be identified to check on those people to ensure they are not getting sicker, or require supplies such as food or medication. **FNFN will be providing a sign you can place in your windows to notify others that your household is under self-isolation and you will not be answering the door to visitors.**

Establish alternate sites for providing medical care: In the event that community members become too ill to care for themselves (or a loved one cannot care for them), or there are too many community members sick and unable to care for themselves, an alternative care site will be established.

When possible these sites should possess the following: an area large enough for more than 5 people to be cared for, running water, washroom facilities, a place to cook, large sinks, heat, and enough room to have patients separated by 3 feet. Other considerations include:

Beds, bedding, buckets, lights, thermometers, gloves, masks, wash clothes, sponges, paper towels, scissors, water, soap, oxygen, patient record keeping material.

Arrange for transportation of ill cases: If a member of the community has been identified as being too ill to be cared for within the community, a family member or a member of the Health Team will arrange for transportation to the closest hospital. The means of transportation will depend upon availability of the BC Ambulance Service.

Surveillance

Establishing local surveillance (monitoring ill people): It will be a requirement for all community members to report their illness to the Health Team during a pandemic. The Health Team will inform community members of their responsibility to inform the Health Team when they are ill.

Ensure timely reporting of covid-19 to the communities Health Authority: When a community member is suspected as having the coronavirus, they will notify a member of the health team and be triaged as per the triage section above.

COVID-19 Pharmacy Procedures

The best available information on the COVID-19 virus suggests that older people and those with pre-existing conditions should limit their potential exposure by remaining at home as much as possible. Patients may therefore seek early fills and/or deliveries of prescriptions to enable self-isolation. Additionally, the Provincial Health Officer has said that pharmacies may use their judgement and the options available to them to reduce non-essential physician visits, including those for prescription renewals. This may require pharmacists to act with broader latitude than they do normally.

Pharmacists should use their judgement to allow early fills in the best interests of the patient without promoting stockpiling.

The public will be asked to phone ahead to pharmacies under the following circumstances:

- They are feeling ill

- They are sending someone to pick up a prescription

- They will be asking for a renewal or an early fill

- They need a prescription delivered

This should help pharmacies manage these requests. The public will also be asked to not stockpile medication, to prevent demand-based shortages.

Communication

As soon as Chief and Council has been made aware of a health emergency, a communication with all information and next steps will be communicated to the membership.

Have a clearly identified central spokesperson: The Chief or Council designate is the community spokesperson and will conduct any media interviews, or communications required on behalf of the community.

After Pandemic Community Responsibilities

The Pandemic is over when the local, provincial, and federal public health authorities declare it being over. As a pandemic comes in waves, communities should not assume a pandemic is over until it has been announced as formally being over.

Your community incident command team shall meet and:

- Deactivate the plan;
- Assess the effectiveness of this plan;
- Revise the plan as necessary.

Inform the community members of the pandemic being over, and discuss how it affected the community. It would be best to do this in a community gathering, as this would be a good time to support each other as well. As there will be very few persons not affected by the pandemic coronavirus outbreak, many community

members may feel the need for support and counselling.

- Arrange for the return of any community members who may be out of the community in hospital, or at other care sites.
- Provide grief counselling to the community as needed.
- Document lessons learned by the community. There are only a few times in history where we have the opportunity to possibly save our community from future pandemics. It is important to write down and pass along how the community did during the outbreak, what worked and what didn't.
- If the community was financially impacted by the health emergency, then seek financial redress.
- Health Team will complete your surveillance report. The information required by your Health Authority and FNIH.
- Resume regular surveillance activities.

Note: There will be a continued need for regular surveillance for illness in the community for some time. Although the pandemic coronavirus has passed, we need to ensure that if community members become ill, that it is reported to the Health Team. The affects of a pandemic coronavirus can and will be felt for a long time in the community once the pandemic is over.

- Encourage planning for future pandemics!

Notice to all community:

Appendix A

COVID-19/ Novel Coronavirus

March 12, 2020

Re: COVID-19/ Novel Coronavirus

FNFN Members,

Please be advised that the Fort Nelson First Nation is monitoring the situation regarding the spread of COVID-19 (Novel Coronavirus) and taking precautionary measures. On Mar. 11th the World Health Organization (WHO) declared the COVID-19 outbreak a pandemic and is encouraging communities and individuals to practice social distancing and avoid international travel.

In light of these events, the Fort Nelson First Nation Chief & Council have made the difficult decision to CANCEL our participation in the 2nd Annual Northern Lights Festival, which was set to take place Mar. 12-21, 2020. We regret that we will not be able to participate in this event and showcase our community on an international stage however we must act in the interest of the health and safety of our community and our members.

FNFN is working to put in place a response plan for the COVID-19 pandemic. We encourage you to attend an Emergency Community Meeting today from 5:00-7:00 pm at Chalo Gymnasium to get informed on our response plan and measures you can take as an individual to limit the spread of the virus and prepare for self-isolation, should it become necessary. Dr Lupu and Nurse Rhonda Mathison will be in attendance for questions and recommendations.

Sincerely,
Chief Sharleen Gale
Fort Nelson First Nation

Notice to All FNFN Staff

MEMORANDUM

Date: March 12, 2020

To: All Staff

From: Chief & Council

Re: Office Closure - COVID-19/Novel Coronavirus Self-Isolation Measures

Please be advised that the Fort Nelson First Nation is monitoring the situation regarding the spread of COVID-19 (Novel Coronavirus) and taking precautionary and pro-active measures. On Mar. 11th the World Health Organization (WHO) declared the COVID-19 outbreak a pandemic and is encouraging communities and individuals to practice social distancing and avoid travel.

FNFN is working to put in place a response plan for the COVID-19 pandemic, which will involve a two-week office closure beginning at 4:30 pm on Friday, Mar. 13th, as a pro-active social distancing measure. All offices are to be cleaned and disinfected prior to the commencement of the office closure. Offices will re-open Monday, Mar. 30th. Staff will continue to be paid during the office closure, and are expected to be available by email and/or phone, and fulfilling those job duties that can be carried out from home. During this office closure essential services will remain available.

Further, all work-related travel is to be suspended, effective immediately, until risk of spreading the virus declines and officially advised that standard travel practices may resume.

We encourage staff to attend an Emergency Community Meeting **TODAY** from 5:00-7:00 at Chalo Gymnasium to get informed on our response plan and measures you can take as an individual to limit the spread of the virus and to prepare for self-isolation, should it become necessary. Dr Lupu and Nurse Rhonda Mathison will be in attendance for questions and recommendations.

We further encourage staff to follow the staff bulletins closely for updates and to take personal precautions to limit the spread of the virus, which include:

- Staying home if you are sick to avoid spreading illness to others;
- Washing hands often with soap and water;
- Avoiding touching your eyes, nose, and mouth, especially with unwashed hands;
- Avoiding close contact with individuals who are sick;
- Covering your mouth and nose when coughing or sneezing and immediately disposing of tissues;
- Frequent cleaning and disinfecting of surfaces and objects that are touched frequently.

In the event that you are unwell, experiencing a fever, cough or respiratory illness and would like to see a doctor, please call ahead to Airport Way Medical Clinic or the Hospital, so they are prepared for your arrival to limit exposure to other patients. Call 811 for non-emergent health concerns, for advice on how to proceed.

March 20, 2020

Re: COVID-19 Response – Self-Isolation Recommended for ALL FNFN Community Members

Dear FNFN Members,

The Fort Nelson First Nation Council and Administration continues to carefully monitor the evolving situation regarding the spread of COVID-19 in Canada and around the world. We are closely following government announcements, including recommendations from the BC Ministry of Health and the BC Centre for Disease Control and remaining vigilant about ways to prevent the spread of COVID-19. The health and safety of our community members and staff is of the highest importance. We will be working hard to support our members through this difficult and trying time.

The federal government has taken unprecedented measures including limiting international travel in an effort to limit the spread of the virus. The provincial government has announced that all schools are closed indefinitely and has declared a public health emergency and a state of emergency. This gives the Province sweeping powers including: the ability to prohibit travel between regions; fix prices for or ration food, clothing, fuel, equipment, medical supplies, or other essential

supplies; and the use of any property, services, resources or equipment needed to assist in safeguarding the public. FNFN is actively working with the Province, NRRM, Northern Health, the First Nations Regional Health Authority and Indigenous Services Canada as this situation unfolds. All Canadians are being asked to take extra precautions, practice social distancing and remain home as much as possible.

The situation is evolving rapidly and members are encouraged to follow updates daily from reliable news sources and government agencies. A couple of good sources include Northern Health (<https://www.northernhealth.ca/>) and the BC Center for Disease Control (<http://covid-19.bccdc.ca/>).

Remote communities like ours will face extra challenges in the event of a local outbreak due to limited availability of local healthcare services. As a community and as individuals we must take additional precautions to avoid unnecessary strain on the healthcare system. Our ultimate goal is still to avoid a local outbreak altogether, and the best way to achieve that is for everyone to stay home and stay safe.

As a safeguard to protect our community members and staff, FNFN made has closed our offices to the public for a minimum of 2 weeks from March 14-29, 2020. As this situation progresses, we will evaluate whether the closure will continue. Essential services remain in place and while limited employees are working in the community, others are working by phone and/or email, and fulfilling duties that can be carried out from home wherever possible. All work-related travel has been suspended for the foreseeable future. Council and staff have been working hard to activate our pandemic emergency response plan to protect our community and prepare for a potential outbreak. Council will strive to keep members informed as the situation progresses.

Anyone exhibiting symptoms including fever, cough or respiratory illness MUST immediately self-isolate IN THEIR HOME for a minimum of 14 days. From isolation you should then call 811 for advice on how to proceed. If you are concerned that you may have contracted COVID-19, are exhibiting serious symptoms, and would like to see a doctor, call ahead so that precautions can be taken to limit exposure to other patients. We would also like to remind everyone that **anyone returning from travel MUST immediately self-isolate for a minimum of 14 days.**

At this time, FNFN is urging all community members to initiate self-isolation as soon as possible for a period of 14 days. Self-isolation involves avoiding contact with other individuals by remaining home. Public spaces such as grocery stores

must be avoided however, individuals who do not exhibit symptoms can still get outside in their yards and to walk their pets, if this can be done while avoiding contact with others.

URGENT: Self-Isolation Recommendations for our Elderly Family Members

In order for us to properly prepare as a community, we are calling upon all of our families to immediately identify an individual within your family to self-isolate along with and act as a care provider to your elderly parent(s) or grand-parent(s), and those with underlying health concerns. It is recommended that a family member should self-isolate along with vulnerable individuals so that others can drop off supplies if necessary, avoiding unnecessary exposure and contact with others.

We must all work together to provide support to our elders, as home support and elder care may be limited in the event of an outbreak. FNFN's Health Team may not have the capacity or manpower to meet all our needs in the event of a local outbreak. Each family must be responsible to ensure care plans are put in place for the most vulnerable members of our community. Plans should be communicated to FNFN's Health Director, Roberta Dendys (roberta.dendys@fnnation.ca/250-500-2679) in a timely manner.

in the home. We will be working with our Finance department in the coming days to determine logistics for the distribution. Please be patient as we work out the details. Please do not call the office to inquire about the distribution. A notice will be issued once a plan is in place.

As you prepare for isolation, if you must venture out, you are reminded to take extra precautions to limit the spread of the virus:

- Avoid handshakes and other unnecessary touching;
- Frequently clean and disinfect surfaces and objects that are touched frequently;
- Wash hands often with soap and water for at least 20 seconds;
- Avoid touching your eyes, nose, and mouth, especially with unwashed hands;
- Avoid close contact with individuals who are sick;
- Cover your mouth and nose when coughing or sneezing and immediately disposing of tissues and wash hands;
- Avoid groups of people;

- Maintain a space of 2 meters (6 feet) between yourself and others in public spaces; and
- Above all, **stay home if you are sick** to avoid spreading illness to others.

Families are encouraged to **identify a family contact** and provide contact information to FNFN to allow for speedy communication in the event an emergency.

We also take this opportunity to remind members that while disinfectant wipes are a great way to protect your family from germs, **disinfectant wipes must not be flushed down the toilet**. We have seen increased incidence of wipes flushed, which is creating serious issues for our sewer system and could cause backups if it continues. Please be reminded that only toilet paper should be flushed down the toilet.

The Government of Canada has recognized that many individuals and businesses are experiencing a great deal of uncertainty and a federal aid package has been announced that includes income support for individuals experiencing loss of work due to the COVID-19 response and as well as supports for businesses to help get them through these trying times. Details can be reviewed at <https://www.canada.ca/en/department-finance/news/2020/03/canadas-covid-19-economic-response-plan-support-for-canadians-and-businesses.html>. At this time, Service BC offices remain open.

During the coming weeks, only essential FNFN services will remain available. Emergency contact numbers and essential services provided during this time are as follows:

- **Council** - Chief Sharleen Gale: 250-500-1383
- **Administration** – 250-500-2564 (Liz Logan, Executive Director of Administration)

Supporting Council and Department emergency management efforts

- **Health & Community Services** – 250-500-2679 (Roberta Dendys, Executive Director of Community Services)

Preparing to support our most vulnerable members through these uncertain times, providing home support services and meals on wheels for Elders and members with disabilities or chronic illnesses, providing counselling services via teleconference, and Nurse Rhonda will also continue making rounds and checking on vulnerable members

- **Human Resources** - 250-884-1963 (Tony Elwell, Director of Human Resources, Safety & Research)

Supporting staff through the current uncertainty

- **Finance** – 250-500-1081 (Angela O'Shaughnessy, Acting CFO)

Processing emergency payments

- **Housing** – 250-500-1337 (Vera Nicholson, Housing Coordinator)

Maintenance of FNFN's housing stock including issuance of work orders as deemed necessary

- **Public Works** – 250-500-1080 (Cougan Purington, Public Works Coordinator)
- **Capital Works** – 250-500-4206 (Heather Gairdner, Capital Works Coordinator)

Preparation of supplies for the Emergency Operations Centre (EOC) and the Emergency Program Executive Committee and participation in activities, distribution of emergency preparedness information, utility maintenance (drainage and sewer), testing and supply of potable water, liaise and assist public utility companies and commercial communication outlets, traffic control, equipment provision and maintenance, flood protection activities, road maintenance, building maintenance

- **Lands** – 250-500-2029 (Lana Lowe, Lands Director)

Emergency Management BC participation, Guardians remain active

- **Justice** – 250-500-4002 (Sara Gairdner, Justice Coordinator)

During this time we will not be accepting any new residents into the FNFN community. FNFN has a Residency By-Law in place which requires application prior to residence being granted to non-members. FNFN's Housing Department and Chief and Council will not review or approve applications for residence during this time.

Again, we urge all members to immediately begin preparations, self-isolate as soon as possible, and follow the recommendations set out in the attached FNFN Pandemic Plan, as this situation unfolds.

Sincerely,

Chief Sharleen Gale
Fort Nelson First Nation

March 17, 2020

To our Post-Secondary Students,

By now you will have learned that Canadian schools, colleges and universities are suspended indefinitely, pending future decisions by the both Provincial Ministry of Health and Health Canada.

These Ministries are responsible for determining the best course of action during the Coronavirus Pandemic.

The Community Education Authority of Fort Nelson First Nation is advising all post-secondary students to remain quarantined where they are now. Avoid traveling at this time. The CEA is not responsible for students who choose to return home early. If there are changes in this position, students will be notified immediately.

The CEA encourages students to follow the safety suggestions given on line and from reputable sources. The ministries listed above, the BC Ministry of Education, and the colleges and universities you attend, will provide trustworthy information.

The CEA realizes that this is a difficult time for students and their families. However, with patience and adherence to safe practices, you can and will get through the challenges posed by this new and serious health risk.

Sincerely,
Ray Irwin, Education Director
For the Community Education Authority

March 17, 2020

To our Chalo School Parents,

By now you will have learned that Canadian schools, colleges and universities are suspended indefinitely, pending future decisions by the both Provincial Ministry of Health and Health Canada. These Ministries are responsible for determining the best course of action during the Coronavirus Pandemic.

The Ministry of Education has announced that all students who are 'on track', that is, passing their courses, will do so. This includes grade 12 students on track to graduate this June. For students who are not currently passing courses, Chalo School will arrange homework packages that will assist students in meeting course requirements. This will require careful communication between and home and school. This dialogue between parents, students, and teachers, will begin after Spring Break.

The Community Education Authority (CEA) encourages families to follow the safety suggestions given on line and from reputable sources. The ministries listed above, the BC Ministry of Education, and the First Nations Health Authority will provide trustworthy information. Chief and Council will also share pertinent information with the community.

The CEA realizes that this is a difficult time for students and their families. However, with patience and adherence to safe practices, you can and will get through the challenges posed by this new and serious health risk.

Sincerely,
Ray Irwin, Education Director
For the Community Education Authority

Suggested Shopping list for self-isolation

Appendix B

Food

- dried pasta and rice
- pasta sauces
- canned soups, vegetables and beans
- pet food

Hygiene

- toilet paper
- feminine hygiene products
- diapers
- facial tissue
- soap
- alcohol-based hand sanitizer

Health care

- thermometer
- fever-reducing medications (acetaminophen or ibuprofen for adults and children)

Cleaning

- paper towels
- plastic garbage bags
- dish soap
- laundry detergent
- household bleach
- household cleaning products

Basic Cleaning Tips

It will be very important to disinfect your home, especially if you or a loved one at home who is sick. The following are a few tips on where to clean and how to clean.

As bleach has been proven to kill 99.9% of common household germs, such as E. coli, Staphylococcus (Staph), Salmonella and viruses that can cause colds and flu, your cleaning solution should be made up of 9 parts water and 1 part bleach.

The following common surfaces should be kept clean especially when someone is sick:

- Refrigerator and microwave door handles
- All sinks, tubs & faucets
- Toilet handles, seats & bowls
- TV remotes
- Telephones
- Light switches
- Doorknobs
- Computer keyboards & Mouse's
- Countertops

These surfaces can be cleaned by using the bleach/water cleaning solution, with just a few quick sprays of the cleaning solution and wiping the surface with a cloth. Be sure to give the surface a good rub, while wiping off the cleaning solution.

A sink drain needs to be cleaned at least weekly. After you've washed out the sink with the cleaning solution, flush the drain by pouring in 1 cup (8 Oz.) of bleach down the drain and flush again with hot water.

Sweep then mop kitchen and bathroom floors with the cleaning solution, and vacuum carpets at least weekly or as needed.

To clean plastic cutting boards, wash or rinse with liquid dishwashing detergent and water. Then soak in a solution using 1 tablespoon of bleach per gallon of water. Let stand 2 minutes, then air dry.

To clean wooden cutting boards, use approximately 3 tablespoons of bleach per gallon of water to create a sanitizing solution. Wash, wipe, or rinse with dishwashing detergent and water, then apply solution. Let stand 2 minutes. Rinse with a solution of 1 tablespoon of bleach per gallon of water. Do not rinse or soak overnight.

When cleaning telephones, be sure to clean both the receiver and the buttons on the phone, this way the entire phone is clean.

Scrubbing toys weekly is your safest bet. Clean washable, colorfast plastic toys with a solution of $\frac{3}{4}$ cup bleach per gallon of water. Soak for 5 minutes, rinse and air dry. Keep in mind that many toys can simply join your dishes in the dishwasher. If your child has been ill you will want to disinfect hard plastic toys with bleach as soon as your child shows symptoms of influenza.

Have your children use a plastic tub for the hard plastic toys they've been playing with that day. This way, you can simply pick the whole thing up and clean in one batch. Don't forget to wipe down and rinse the toys and the bin!

Toys that trap water (like rubber ducky's) also need to be cleaned regularly, rinsed well and left to dry.

Fort Nelson First Nation Health and Wellness Team

Please note that although there is an FNFN office closure from March 16th-27th, due to the Covid-19 (Novel Coronavirus) safety precaution, the Health and Wellness Centre will be accepting calls and re-directing them to the appropriate staff. You may call 250.774.2300 from 8:30-12 1-4:30pm Monday-Friday. You may also directly contact any one of the following employees for service delivery:

Community Health Nurse, Rhonda Mathison: 250.500.1084

Community Services, Roberta Dendys: 250.500.2679

Samantha Kotchea, Community Health Representative: 250.500.4089

Patient Travel, Chrystal Fincaryk: 250.500.3506

Counselling Services & Band Designate, Saralee Andrews: 250.500.3330

Counselling Services, Rose Omani: 250.500.5335

Counselling Services , Allison Cannon: 250.500.1079

Home Care, Tammy Myers: 250.500.1083

Home Care, Scott Wilson: 250.500.4357

Home Care, Tami Raymond: 250.500.5226

Home Support Worker, Sharon Needlay: 250.500.1082

Family Support Worker, Shelly Winters: 250.500.5540

Child & Youth Care Worker, Brandy Neitzel: 250.500.1073

Temporary Medical Transportation Changes in Response to COVID-19

Appendix E

Medical Transportation for Routine Appointments

All medical transportation for routine appointments is currently unavailable. Routine appointments include, but are not limited to, regular dentist appointments, eye exams, non-urgent specialist appointments, or diagnostic tests.

Medical Transportation for Urgent Appointments

Medical transportation is only available for urgent appointments that cannot be postponed. Urgent appointments include, but are not limited to, prenatal confinement, dialysis, or cancer treatment.

- All medical transportation for urgent appointments must be submitted as a Benefit Exception request to Health Benefits.
- Clients should submit their Benefit Exception requests to their local patient travel clerk or to Health Benefits by calling **1-855-550-5454**.

If the Benefit Exception request is approved, medical transportation will be arranged.

- If clients **have not** been told to self-isolate, their medical transportation will be arranged by their local patient travel clerk.
- If clients **have** been told to self-isolate, their medical transportation will be arranged by Health Benefits. Special travel arrangements will make sure the client stays isolated.

Clients Who Have Been Told to Self-Isolate

Health Benefits is following the provincial criteria for self-isolation set by the BC Centre for Disease Control. Clients should follow self-isolation directions given to them by:

- a government official;
- 8-1-1;
- their local public health office; or
- their primary care provider.

Clients can complete a self-assessment set by the BC CDC at <https://covid19.thrive.health/>.

If a client has severe symptoms such as difficulty breathing, chest pain, or losing consciousness they should call 9-1-1.

Clients Who Have Been Told They Need to Be Tested for COVID-19

If clients have been told by 8-1-1 that they need to be tested for COVID-19, and they need help traveling to the testing location, they should call the BC ambulance non-emergency line at **604-872-5151**.

Clients with At-Risk Household Members

Clients who have been told to self-isolate should follow the BC CDC recommendations for how to self-isolate when living with other people:

- Stay and sleep in a room with good airflow that is away from others.
- Use a separate bathroom, if possible.

- Wear a face mask (surgical/procedure mask) if you are in the same room as anyone.
- Avoid face to face contact.
- Friends or family can drop off food outside your room or home.

If self-isolating clients have household members who have weak immune systems, chronic medical conditions, or are especially vulnerable seniors, the at-risk household member can request MT benefits to stay elsewhere.

- All medical transportation for at-risk household member(s) must be submitted as a Benefit Exception request to Health Benefits.
- Clients should submit their Benefit Exception requests to their local patient travel clerk or to Health Benefits by calling **1-855-550-5454**.

Clients with a Positive COVID-19 Diagnosis

If a client has been diagnosed with COVID-19 and been told to recover at home, their household members can request MT benefits to stay elsewhere.

- All medical transportation for the client's household member(s) must be submitted as a Benefit Exception request to Health Benefits.
- Clients should submit their Benefit Exception requests to their local patient travel clerk or to Health Benefits by calling **1-855-550-5454**.

First Nation Reference Websites

1. BC Centre for Disease Control <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>
2. World Health Organization (WHO) <https://www.who.int/health-topics/coronavirus>
3. Northern Health: www.northernhealth.ca
4. First Nation Health Authority <https://www.fnha.ca/about/news-and-events/news/information-on-novel-coronavirus>
5. Public Health Agency <https://www.canada.ca/en/public-health.html>
6. Government of Canada <https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html>
7. HealthLink BC <https://www.healthlinkbc.ca/health-feature/coronavirus-disease-covid-19>
8. BC Government Self-Assessment Tool <https://covid19.thrive.health/>
9. British Columbia Government: <http://www.gov.bc.ca/>

COVID-19 Online Clinic and Information Line

Northern Health

March 15, 2020



Northern Health has launched a COVID-19 Online Clinic and Information Line to help answer questions and concerns from Northern BC residents. The NH COVID-19 Online Clinic and Information Line can be reached at 1-844-645-7811.

We are launching this service to ensure Northern Health residents have access to information, health advice, and an online clinic to reduce the transmission of COVID-19, while reducing demand on emergency rooms and other health services.

This service is staffed by nurses, physicians, and nurse practitioners, offering virtual screening and assessment for individuals who feel they may have COVID-19 or feel they have been exposed. By calling the Online Clinic, Northern BC residents can receive information, may undergo virtual screening, be assessed by a nurse, and may see a physician or nurse practitioner if it is required.

Other options for health information and advice continue to be available, including calling your primary care provider, or contacting HealthLink BC (8-1-1) at any time.

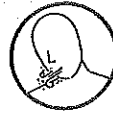
For general COVID-19 health advice and answers to common questions, please continue to visit: <http://www.bccdc.ca/.../diseases-co.../covid-19/common-questions>

KNOW THE DIFFERENCE: SELF-MONITORING, SELF-ISOLATION, AND ISOLATION FOR COVID-19

SYMPTOMS OF COVID-19



FEVER



COUGH



DIFFICULTY BREATHING

Appendix H

SELF-MONITORING



You have:

- ▶ no symptoms

AND

- ▶ a history of possible exposure to the novel coronavirus that causes COVID-19, in the last 14 days

SELF-ISOLATION

You have:

- ▶ no symptoms

AND

- ▶ a history of possible exposure to the novel coronavirus due to travel outside of Canada or close contact with a person diagnosed with COVID-19

ISOLATION

You have:

- ▶ symptoms, even if mild

AND

- ▶ you have been **diagnosed with COVID-19** or are waiting for the results of a lab test for COVID-19



SELF-MONITOR means to:

- ▶ **monitor yourself** for 14 days for one or more symptoms of COVID-19
- ▶ go about your day but **avoid crowded places** and increase your personal space from others, whenever possible

SELF-ISOLATE means to:

- ▶ **stay at home** and monitor yourself for symptoms, even if mild, for 14 days
- ▶ **avoid contact with other people** to help prevent the spread of disease in your home and in your community in the event you become symptomatic

To be **ISOLATED** means to:

- ▶ **stay at home** until your Public Health Authority advises you that you are no longer at risk of spreading the virus to others
- ▶ **avoid contact with other people** to help prevent the spread of disease in your home and in your community, particularly people at high risk of severe illness outcomes such as older adults or medically vulnerable people



You need to **self-monitor** if:

- ▶ you have reason to believe you have been **exposed to a person** with COVID-19

OR

- ▶ you are in **close contact** with older adults or medically vulnerable people

OR

- ▶ you have been **advised to self-monitor** for any other reason by your Public Health Authority

Self-isolate if:

- ▶ you have travelled **outside of Canada** within the last 14 days

OR

- ▶ your Public Health Authority has identified you as a **close contact** of someone diagnosed with COVID-19

You need to **isolate** if:

- ▶ you have been **diagnosed** with COVID-19

OR

- ▶ you are **waiting to hear the results** of a laboratory test for COVID-19

OR

- ▶ you have been **advised to isolate at home** for any other reason by your Public Health Authority



If you develop symptoms, **isolate yourself from others immediately**

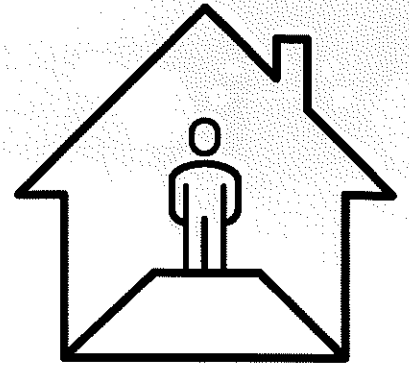
If you develop symptoms, even if mild, **stay home, avoid**

If your symptoms get worse, **immediately contact your**

CORONAVIRUS DISEASE (COVID-19) HOW TO ISOLATE AT HOME WHEN YOU HAVE COVID-19

Isolation means staying at home when you are sick with COVID-19 and avoiding contact with other people to help prevent the spread of disease to others in your home and your community.

If you have been diagnosed with COVID-19, it is expected that you take the following measures.



Limit contact with others

- ▶ Do not leave home unless absolutely necessary, such as to seek medical care.
- ▶ Do not go to school, work, other public areas or use public transportation (e.g. buses, taxis).
- ▶ Arrange to have groceries and supplies dropped off at your door to minimize contact.
- ▶ Stay in a separate room and use a separate bathroom from others in your home, if possible.
- ▶ If you have to be in contact with others, keep at least 2 metres between yourself and the other person. Keep interactions brief and wear a mask.
- ▶ Avoid contact with individuals with chronic conditions, compromised immune systems and older adults.
- ▶ Avoid contact with pets if you live with other people that may also be touching the pet.

Keep your hands clean

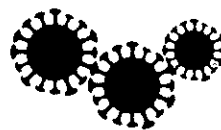
- ▶ Wash your hands **often** with soap and water for at least 20 seconds, and dry with disposable paper towels or dry reusable towel, replacing it when it becomes wet.
- ▶ You can also remove dirt with a wet wipe and then use an alcohol-based hand sanitizer.
- ▶ Avoid touching your eyes, nose and mouth.
- ▶ Cough or sneeze into the bend of your arm or into a tissue.

Avoid contaminating common items and surfaces

- ▶ At least once daily, clean and disinfect surfaces that you touch often, like toilets, bedside tables, doorknobs, phones and television remotes.
- ▶ Do not share personal items with others, such as toothbrushes, towels, bed linen, utensils or electronic devices.
- ▶ Use regular household disinfectants or diluted bleach (one part bleach and nine parts water) to disinfect.
- ▶ Place contaminated items that cannot be cleaned in a lined container, secure the contents and dispose of them with other household waste.
- ▶ Put the lid of the toilet down before flushing.

Care for yourself

- ▶ Monitor your symptoms as directed by your healthcare provider or **Public Health Authority**.
- ▶ If your symptoms get worse, immediately contact your healthcare provider or **Public Health Authority** and follow their instructions.
- ▶ Get some rest, eat a balanced diet, and stay in touch with others through 'communication devices'.



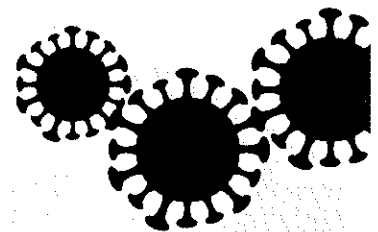
Supplies to have at home when isolating

- Surgical/procedure masks (do not re-use)
- Eye protection
- Disposable gloves (do not re-use)
- Disposable paper towels
- Tissues
- Waste container with plastic liner
- Thermometer
- Over the counter medication to reduce fever (e.g. ibuprofen or acetaminophen)
- Running water
- Hand soap
- Alcohol-based sanitizer containing at least 60% alcohol
- Dish soap
- Regular laundry soap
- Regular household cleaning products
- Bleach (5% sodium hypochlorite) and a separate container for dilution (one part bleach to nine parts water)
- Alcohol prep wipes
- Arrange to have your groceries delivered to you



**WE CAN ALL DO OUR
PART IN PREVENTING
THE SPREAD OF
COVID-19. FOR MORE
INFORMATION, VISIT**

Canada.ca/coronavirus
or contact
1-833-784-4397



COVID-19: Harm Reduction and Overdose Response

Appendix J

We recognize that many of the public health messages being shared on COVID-19 are hard to practice when people are living outside, in a tent, in an SRO, or in a shelter. People who use drugs are already doing incredible work to keep communities safe and reduce the spread of infection. We need creative solutions to slow down the spread of COVID-19 and protect people who use drugs, have underlying health conditions, and/or may be elderly.

Risk of overdose

- COVID-19 is a virus that can cause a respiratory infection and other health problems
- Fentanyl and other opioids can slow your breathing rate, so COVID-19 may increase the risk of overdose death when using opioids

Practice safer drug use

- Do not share supplies, such as cigarettes, joints, pipes, injecting equipment, containers for alcohol, utensils, and other supplies. If you have to share, wipe pipes with alcohol wipes or use new mouthpieces.
- Reduce close contact (e.g. shaking hands, hugging, kissing) and ensure condom use
- Wash your hands or use wipes before preparing, handling or using your drugs. Prepare your drugs yourself.
- Cough or sneeze into your elbow or use tissues. Throw tissues away immediately and wash your hands thoroughly.
- Clean surfaces with soap and water, alcohol wipes, bleach or hydrogen peroxide before preparing drugs if possible
- Carry naloxone and have an overdose plan. Please use breathing masks available in the THN kits if responding to an overdose.

Accessing testing

- For most up to date information on testing please see [BCCDC](#) or use the [self-assessment tool](#)

Buddy up

- Buddy up when you are using. COVID-19 is passed by droplets. Stay 2m (6.5 ft) from your buddy to avoid passing the virus. Using with a buddy is safer than using alone.
- Find your "buddies" who can bring you food, harm reduction supplies, medicine, and substances so that you can stay well. You can also be a buddy to those who may need extra support. Check in on your buddies regularly.

If you are quarantined or in isolation

- See if your buddy can pick up supplies including naloxone from a harm reduction site
- Try to have the substances you need to stay well. Know that carrying large amounts may put you at risk by the police and other people looking to score. Consider alternatives to your drug of choice and prepare for potential supply disruptions.
- You may go through involuntary withdrawal if your dealer gets sick. Have backup plans and be cautious if using a new supply.
- Try to have the medications you need, re-fills may be available directly through your pharmacist or by phone without having to see your physician. If you are feeling unwell and require medications, call your pharmacy in advance.
- Health Canada is working on exemptions to ensure access to OAT and other medicines
- For more information contact: hc.exemption.sc@canada.ca

Continue to use OPS, SCS and supportive housing OPS sites

- Regular cleaning that already takes place at these sites will help reduce the spread of infection

Cleaning

- If you share a washroom with others, clean and disinfect high-touch surfaces, such as knobs, taps, and flushers with soap and water, bleach, hydrogen peroxide or alcohol-based wipes (70%) after every use. Do not mix different types of cleaning solutions.
- If you cannot wash your hands with soap or use hand sanitizer, try to access alcohol-based hand wipes

COVID-19: Harm Reduction and Overdose Response

For registered harm reduction and naloxone sites in BC

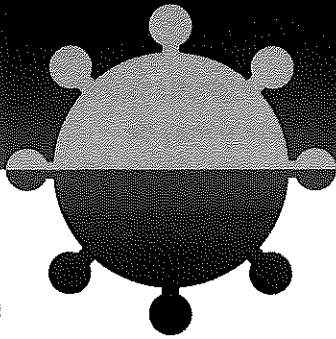
- BCCDC does not anticipate supply chain disruptions
- Registered sites should continue to order supplies as needed weekly/monthly to avoid stock piling
- Please continue to distribute supplies as usual, and note that if there is a specific request for supplies for an individual who requires quarantine or isolation, additional supplies may be provided for the 14-day period
- If you are awaiting your next order to arrive and are temporarily low on any supplies, connect to your local Harm Reduction Coordinator. Individuals can also be referred to nearby existing sites by using the [site finder](#).
- Please circulate this information to any secondary or satellite sites of your location

For more information

- On accessing your local OPS, harm reduction, and naloxone sites
- On COVID-19 <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>
- On exemptions for OAT and other prescriptions contact hc.exemption.sc@canada.ca
- On BC pharmacists order <https://bcpharmacists.org/covid19>
- For organizations implementing pandemic outbreak response plans <https://sneezesdiseases.com/resource/vch-regional-pandemic-outbreak-response-plans>

Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



Key Facts

We are focused on slowing the spread of COVID-19 in our communities.

A sudden increase in people becoming infected with COVID-19 may impact the capacity of our health system to provide care to everyone who needs it.

By slowing the spread of the virus, our most vulnerable will be able to access care when and where they need it.

80% of people who are infected will have mild symptoms that will not require care outside of the home.

Around 1 out of 6 people who get COVID-19 may become seriously ill and develop difficulty breathing.

Older people, and those with preexisting medical conditions such as high blood pressure, heart problems or diabetes, are more likely to develop serious illness.

Appendix K WHAT YOU CAN DO TO SLOW TRANSMISSION

Take care of others by taking care of yourself.

Wash your hands, don't touch your face, and stay home if you are sick.

Monitor yourself.

If you have a fever, a new cough or difficulty breathing, call 8-1-1 for guidance.

WHAT BUSINESSES CAN DO TO SLOW TRANSMISSION

Support hand washing, social distancing, and adopt flexible sick-leave policies to allow people who are sick to stay home.

Clean and disinfect frequently touched surfaces using routine practices and consider cleaning and disinfecting twice a day if possible.

Respiratory Protection for Health Care Workers Caring for Potential or Confirmed COVID-19 Patients

Introduction

An outbreak of a novel coronavirus (COVID-19) began in Wuhan, China in December 2019 and since then has become widespread in the Hubei province of China with cases being reported throughout mainland China and many other countries.

To date all evidence from China and other countries indicate that transmission of this virus is via droplet and contact mode. This is consistent with other coronaviruses that are circulating. The World Health Organization, Public Health Agency of Canada and other expert groups have recommended the use of Droplet and Contact Precautions when caring for individuals with this illness.

In addition to Routine Practices, all individuals including family members, visitors and all health care workers (HCWs) are required to use contact and droplet precautions before entering the room where a suspected or confirmed COVID-19 patient has been admitted. The personal protective equipment (PPE) for this level of precautions includes: gloves, gown, surgical mask and eye protection. For some aerosol generating medical procedures (AGMP) an N95 respirator and face shield/goggles are required and it is recommended to perform AGMPs in a negative pressure setting if possible.

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.



Ministry of Health



BC Centre for Disease Control



The exception to this recommendation is for paramedics with BC Ambulance. Prehospital care is delivered in a variety of locations and under a variety of situations (e.g., in the street, in the home, in the ambulance, etc.). Some locations may be unsanitary, uncontrolled and/or within cramped environments, urgent interventions such as intubation may be required and not amenable to risk assessment and/or application of PPE. As a result, paramedics utilize PPE differently than HCWs in the acute care setting. **In British Columbia (BC), paramedics carry only N95 respirators and eye protection and not surgical masks for their PPE. This has been mandated by WorkSafe BC.**

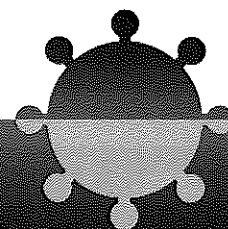
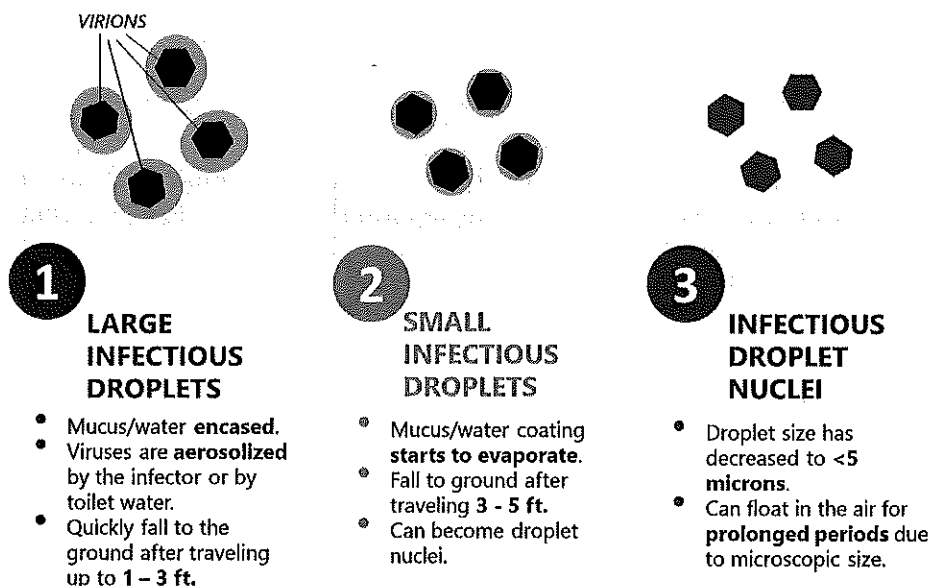
The purpose of this document is to outline and explain the rationale for the respiratory protection chosen for HCWs to wear.

The Difference Between Droplet and Airborne Transmission

Humans produce droplets in various ways (e.g. sneezing, coughing, singing) and these droplets vary in size. Large droplets (> 5 µm) comprise most of the volume of expelled respiratory droplets and they tend to fall rapidly to the ground. Droplets smaller than 5 µm are referred to as droplet nuclei and may remain suspended in the air for significant periods of time and move with air currents. Respiratory viruses, including COVID-19 viruses are usually transported in large particle droplets. As enveloped viruses, they are usually not viable in small droplet-nuclei.

Diagram 1: Droplet vs Droplet nuclei

Stages Of Infectious Droplets And Droplet Nuclei



Droplet transmission occurs when bacteria or viruses travel on relatively large respiratory **droplets** that people sneeze, cough, or exhale. They travel only short distances (usually less than 2 meters) before settling. These **droplets** may be loaded with infectious particles and can infect another person if the bacteria/viruses contact their eyes, nose or mouth. They may also fall on surfaces and then be transferred onto someone's hand who then rubs their eyes, nose or mouth.

Airborne transmission occurs when bacteria or viruses travel in droplet nuclei that become aerosolized. Healthy people can inhale the infectious droplet nuclei into their lungs.

Recent systematic reviews of over 70 studies have concluded that in the clinical environment there is no compelling evidence that N95 respirators were superior to surgical masks with eye protection for protecting HCWs against droplet borne respiratory infections.

For these reasons and consistent to recommendations from the Public Health Agency of Canada and World Health Organization, health care workers are recommended to wear a surgical/procedure mask with eye protection (face shield or goggles) when providing care for a person suspected or confirmed with COVID-19.

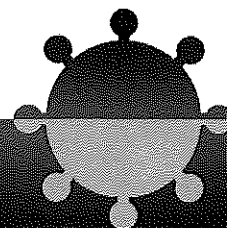
Aerosol Generating Medical Procedures (AGMPs)

AGMPs that generate small droplet nuclei in high concentration present a risk for airborne transmission of pathogens not otherwise able to spread by the airborne route (e.g. coronavirus, influenza). When performing AGMPs for a person under investigation (PUI) including for the purpose of specimen collection, it is recommended to observe the following:

- Place patient in a negative pressure if possible, or in a single room that minimizes exposure to HCWs and other patients;
- Limit the number of HCWs to only those required for the procedure;
- Ensure HCWs performing or assisting with AGMP wear appropriate PPE: gown, gloves, a fit tested N95 respirator and eye protection (i.e. face shield/goggles);
- Observe appropriate hand hygiene, donning and doffing procedures.

Table 1: AGMPs Requiring N95 Respirators for COVID-2019 Patients Under Investigation

Autopsies involving respiratory tissues
CPR with Bag valve mask ventilation
Bronchoscopy and bronchoalveolar lavage
Continuous positive airway pressure (CPAP) or bilevel positive airway pressure (BiPAP)
Intubation and extubation procedures
Nasopharyngeal aspirates, washes, and scoping*
Nebulized therapy
Open airway suctioning
Sputum Induction



Nasopharyngeal (NP) and throat swabs can be performed using contact and droplet precautions with procedural mask and eye protection, and do not require the use of an N95 respirator.

IMPORTANT: This list is not exhaustive and includes common types of AGMPs. For scenarios not described, please contact your local Infection Prevention and Control team and/or the Medical Health Officer.

Use of a Powered Air-Purifying Respirator (PAPR)

Current knowledge about the transmission dynamics of COVID-19 does not indicate the need for PAPR use. There may be unique individual circumstances (e.g. facial structure, unable to be successfully fit tested for an N-95 respirator) that potentially interfere with correct surgical mask or N95 respirator use. In these cases, consult your health authority Workplace Health and Safety, Medical Microbiology and Infection Prevention and Control personnel. In some health care workers roles such as BC Ambulance/BCEHS paramedics, where transport times may be very long and occur in a small closed space PAPR use may be warranted.

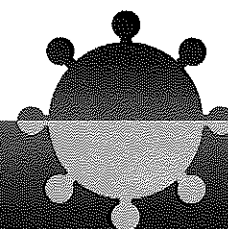
Key Reminders for Health Care Workers

When providing care for patients under investigation for COVID-19:

- Place patients with acute respiratory illness/pneumonia on appropriate additional precautions:
 - Place the patient in a single-occupancy room
 - Provide the patient with a surgical mask and ask them to perform hand hygiene
 - Place the patient under droplet and contact precautions in addition to routine practices
 - Ensure the **correct use of a surgical mask and eye protection** (i.e. goggles or face shield), gloves and gown while providing patient care and during specimen collection
 - **Please note that safety glasses do not offer adequate protection from microbes. Face shields or goggles offer splash resistance to protect workers from blood and body fluid sprays and splashes.**
 - Use an N95 respirator and eye protection (i.e. goggles or face shield), gloves and gown for procedures that are aerosol generating
- Practice fastidious hand hygiene.
- Practice cough etiquette; cover nose and mouth during coughing or sneezing with a tissue or your elbow and dispose of tissue appropriately.
- Instruct and assist patients to practice cough etiquette
- Use extreme care when doffing/removing PPE and always clean hands when finished.

References

1. World Health Organization. (2020, January 25). Infection Prevention and Control During Health Care When Novel Coronavirus (COVID) Infection is Suspected. Retrieved from <https://www.who.int/publications-detail/infection->



[prevention-and-control-during-health-care-when-novel-coronavirus-\(ncov\)-infection-is-suspected-20200125](#)

2. Public Health Agency of Canada. (2020, February 4). Infection Prevention and Control for Novel Coronavirus (COVID-19): Interim Guidance for Acute Healthcare Settings. Retrieved from <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html>
3. Smith, J., MacDougall, C., Johnstone, J. et al. (2016). *Effectiveness of N95 respirators versus surgical masks in protecting health care workers from acute respiratory infection: a systematic review and meta-analysis*. CMAJ, May 17, 2016, 188(8).
4. Jefferson, T., Del Mar, C. B., Dooley, L., Ferroni, E., Al-Ansary, L. A., Bawazeer, G. A., ... & Conly, J. M. (2011). Physical interventions to interrupt or reduce the spread of respiratory viruses. *Cochrane database of systematic reviews*, (7).
5. BC Provincial Infection Control Network. (2018). Respiratory Infection Outbreak Guidelines for Health care Facilities. Retrieved from https://www.picnet.ca/wp-content/uploads/Respiratory-Infection-Outbreak-Guidelines-for-Healthcare-Facilities_November-2018.pdf

March 6 2020

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