Rady Faculty of Health Sciences Business Continuity Plan

Coronavirus (Covid 19)

Rady Faculty of Health Sciences

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Faculty and Staff Travelling Internationally: (as per Government of MB website https://www.gov.mb.ca/health/coronavirus/
As per the Government of Manitoba travel advisory, any faculty or staff travelling to/from countries/regions requiring self isolation will be asked to self-isolate for 14 days upon retuning to Manitoba. Please refer to this link for up to date information on self isolation/self monitoring. https://www.gov.mb.ca/covid19/travellers.html

Your direct supervisor needs to be aware of any International travel plans and will approve paid leave/sick leave as per usual University processes. Self isolation will be coded as paid leave as approved by Central HR. This will ensure sick banks are not impacted in the event the individual becomes sick.
during the 14 days. If the faculty or staff become sick during the 14 day self-isolation period, they will be coded with sick leave until they return to work.

Staff or Faculty returning to Manitoba from any international travel and have had close contact with individuals with flu-like symptoms should self-monitored for 14 days and follow instructions as per the Government of Manitoba website (https://www.gov.mb.ca/covid19/travellers.html). Please contact your immediate supervisor/Department Head for more information. Self-isolation resulting from self-monitoring will be paid leave as well.

Travel advisories for self-isolation/self-monitoring should be checked daily to ensure the appropriate recommendation are being followed.

Supervisors of Faculty and Staff Travelling Internationally:
Supervisors are required to plan for operational needs when approving vacation requests. Personal international travel requests should be approved considering operational needs. Until travel advisories related to COVID-19 are lifted, supervisors should plan for a faculty or staff member to be away up to an additional two weeks past their approved vacation time. Supervisors should contact their respective Supervisor, Department Head, Associate Dean, College Dean, Rady Dean, Director of Administration/Operations, Human Resources if they are unsure how to proceed.

University related travel has been suspended until further notice. Personal travel is being discouraged as per the social distancing guidelines put forwarded by the Province of Manitoba.

Students Travelling Internationally and not on any Clinical Practise:
Students travelling for pleasure to countries/regions under travel advisory will be required to self-isolate upon return to Manitoba (https://www.gov.mb.ca/covid19/travellers.html). Student impact to training based on the required self-isolation when travelling to impacted countries/regions need to be considered at a College level considering the existing policies in place around sick leave, absence, attendance, progress etc. Any students in class and in clinical practise need to follow the Clinical Placement considerations for Trainees outlined below.

College/program level considerations:
- Participation in classes/tutorials through electronic means (skype, video conferencing)- please refer to Operational/IT Considerations for details
- Any absence/attendance policies to guide decision making around impact on student training- Please refer to Relevant policies section for guidance
- Administration of exams if not able to attend in person due to self isolation- Please refer to Relevant polices section for guidance

International Post Doctoral Fellows/Research Associates/Visiting Scholars etc. (waiting on HR approval)
If an offer has been made to an International Post Doctoral Fellow/Research Associate they should start their appointment as outlined in their letter of offer and self isolate for 14 days before beginning their work on site. If they are able to work from home during the 14 day self isolation then that should be pursued. Where possible, appointments of international post doctoral fellows/research associates should occur after travel advisories are lifted keeping in mind immigration and benefit issues.
Research Considerations:
There will be no new patients recruited into human clinical trials. Existing patients should be followed where possible (Dentistry may need to stop trials due to closure of facility). Animal research should be ramped down as essential staffing levels to maintain animals may not be available as we deal with the pandemic. Bob Madziak and Barb Triggs Raine putting drafting a memo for consideration.

Hiring on research grants to be considered at a College/Department/Program level to ensure research study requirements can be met. As we are transitioning to work from home this may not be feasible. Hiring should be delayed where possible. Payment of existing personnel needs to continue.

Summer undergraduate research awards will continue to be paid. Students may have to work from home. They should contact their supervisor to discuss next steps.

Communication:
Everyone should closely monitor the Government of Manitoba travel advisories page to ensure the appropriate self isolation/self monitoring requirements are being met
https://www.gov.mb.ca/covid19/travellers.html

The Director of Administration and Operations is on the Operations Section Briefing at Shared Health and will distribute communication as received and as deemed appropriate after discussion with the Dean and Vice Provost Rady Faculty of Health Sciences. This group meets daily including weekends.

The University of Manitoba has a webpage dedicated to Coronavirus updates:
http://umanitoba.ca/coronavirus

The following websites will be monitored daily and updates will be communicated as deemed by Command.

All communication being circulated will be kept in a shared folder accessible by the Rady Dean, College Deans, UGME Associate Dean, Associate Dean PGME, and Director of Admin/Ops for ease of reference.

Operational and IT Considerations:
Approval of any vacation time should be made considering operational requirements of the College/program/Department. There will be no additional funds provided to hire staff or faculty for sick leave or self isolation as a result of travel to impacted areas. Issues related to school closure, child care etc. need to be considered in planning.

Vacation Deferrals- Staff can carryover more than 10 days of vacation without extensive approvals as a result of Public Health messaging discouraging personal travel.

University related travel has been suspended until further notice.
Any interviews should be conducted through teleconference or videoconference only or delayed if not urgent.

Most University of Manitoba information systems such as Jump, Banner, Aurora, UM Plan, UM Learn, Entrada etc are web based and can be accessed from anywhere. The University of Manitoba payroll system is not web based. A list of individuals who complete payroll has been collated and these individuals are set up with remote access.

There are currently 2500 VPN concurrent licenses at the U of M. This would allow our non essential staff to work from home.

Axium has remote access capabilities. The clinic manager, would be assigned to utilize the system remotely for the financial management of CSS.

Digital Signatures are either set up or in the process of being set up for Rady Dean, College of Medicine Deans, Associate Deans, Department Heads and Senior Administrators for electronic signing. A how to document is being created and will be shared with all that require it.

Cisco Webex is a live streaming software used by CATL as part of UMLearn. Should a faculty member be required to self-isolate they can continue to teach using this tool. CATL has provisioned licenses for all UMGa and CUPE staff and how to documentation has been circulated.

There are many programs/Colleges that use Entrada. In order to facilitate live streaming of lectures, 150 educational licenses of Zoom are being purchased. We have acquired HIPPA compliant licenses as well. A how to document for faculty and staff is developed and will be circulated. Faculty/College and Department meetings can be facilitated using this tool in the event of a self isolation/shutdown.

Teleconference- there are 15 teleconference lines that are available to assist in social distancing.

College Level Considerations- Operational Planning

- Determine vacation schedules for faculty and staff
- Add on two weeks to the end of any international travel if self isolation or sick time is required for planning and workforce purposes
- Determine if International Faculty travel for conferences/work related purposes needs to be suspended temporarily

College of Nursing Response to above:

- The Dean’s Office will determine the vacation schedule for faculty and staff.
- In its planning for staffing coverage, the Leadership Team will add two weeks to the end of any international travel in the event that self-isolation or sick time is required.
- The Leadership Team will determine the need to suspend international travel for conferences for faculty, staff and students.

*Exams (including skills based):*
Exams will continue to be administered in person as required keeping social distancing guidelines in mind. This means they will be spread out over more locations and perhaps for a longer period of time. If online remote administration is possible this should be pursued.

Telemedicine:
Health system working out privacy around tele-medicine. Microsoft teams and Zoom may be approved softwares for delivery. Waiting on update from Privacy Office at Shared Health.

Clinical Placement Considerations – Trainees, CEF’s, Oral Surgeons
Electives
All electives (our trainees and trainees from elsewhere) are being cancelled until further notice.

N95 Mask Fit Testing

- Health system has provided direction on mask fit testing for individuals providing direct care in
Level 1a Priority Levels • Definitions:
  - Direct Care Staff: All staff who come into contact with patients, patient care environments, patient care equipment and blood and body fluids. This includes but is not limited to physicians, nurses, health care aides, Allied Health (occupational therapist, respiratory therapist, physiotherapist, speech language pathologist, audiologist, dietician, laboratory and diagnostic imaging, pharmacy staff), Support Services (home support workers, housekeeping, porters, transfer personnel, specific volunteers, unit clerks, laboratory workers and others deemed appropriate for each site/area/program.
  - Priority Level: Levels have been assigned mainly by department and outline specific staff within the department who are required to wear an N95 respirator and therefore be fit tested. In some cases the levels have been assigned by program/job title only as these staff require an N95 respirator regardless of the department/unit they work in.
  - Level 1a: Staff who have the most contact with undiagnosed (unscreened) patients as they enter the healthcare system:
    - By Department/Unit
      - EMS
      - Emergency Rooms and Urgent Care – all staff including but not limited to physician/resident, physician assistant, nurse practitioner, nurse, health care aide, HIS registration staff (triage/admitting), housekeeping, facility management/maintenance, security, porters/transport, diagnostic (xray, lab, etc.) as well as staff who consult.
      - Access Centres, Quick Care Clinics, Walk In Connected Care, Primary Care Clinics (reception/intake, doctor, nurse practitioner, nurse)
      - Intensive Care Units
      - Pathology (autopsy staff)
• Bronchoscopy

By Program/Job Title

• Respiratory Therapy
• Code Blue Team
• Infection Prevention and Control Practitioners or their designates Health System Highest Priority for Mask Fit Testing (as per Shared Health OESH)

• HSC Emergency
• Children’s ER
• Critical Care
• Access Centres

Mask Fit Testing Requirements by College and Program based on priority set by Shared Health:

** Please note public health guidelines advise that mask fit testing take place once every 2 years**

College of Dentistry: Currently does no testing- unsure about OMFS and Peds Dental students as they are in hospital with the following priority: 1) Hospital OMFS residents and interns and associated faculty 2) Hospital Pedo residents and associated faculty and staff 3) faculty and staff identified as potential emergency providers (location to be determined) 4) faculty and staff in two of our community clinics: potentially Access Downtown and Deer Lodge- in progress

College of Nursing: Once at beginning of 4 year program – need to re-fit 4th year students in ER, Children’s ER and Critical Care at HSC asap- complete. Need to determine requirement for fit testing for Clinical Education Facilitators and Nurse Practitioner program faculty.

College of Medicine: Once at beginning of Med 3 every two years in residency programs- discrepancies in health system records vs our own records for who has had mask fit testing completed. Need confirmation of MPAS students completing N95 Mask Fit Testing.

College of Pharmacy: Done once at 3rd year of training- no further action required
Starting in 2021 Academic year, pharmacy students will be mask-fit tested at the end of their second yea in May.

College of Rehab Sciences: Done at beginning of training- need to redo 3rd year RT students- complete

• Rady FHS to organize mask fit testing for Nursing, Dentistry and RT students based on area or Level 1 priority- RRC was scheduled to do this but cancelled due to their own needs. Levitt has been contacted to assist.
• Shared Health will address discrepancies with Medical Clerks and Resident mask fit testing
Ongomiizwin Health Services: 3M will do mask fit testing training and Rady FHS will coordinate mask fit testing

Trainees in Clinical Placement returning from International travel:

• Requirement for all trainees returning from International travel to check in with Occupational Health Nurse before returning to clinical practise. If there is no Occupational Health Nurse in the service delivery organization then connect with OESH for screening prior to going back to their placement – may need alternate placement (https://www.gov.mb.ca/health/coronavirus/index.html)

• Any trainee that isn’t in a Shared Health Facility should call health links before returning to their clinical practise site. They need to identify they are working in a patient care area when calling to be assessed properly.

Clinical Education Facilitators and Oral Surgeons:

• If these individuals are also employed by Shared Health, they will need to follow the same steps as trainees returning from International Travel also. If they are only employees of the University of Manitoba they need to contact OESH at 1-888-203-4066 and be cleared to return to clinical supervision. Please communicate this to them.

College Level Considerations:

• Impact to training if Occupational Health Nurse/OESH deems the trainee cannot return to their clinical placement area (need to have back up training identified if required- simulation?) College of Dentistry has no back up for clinical practise training. Would adjust attendance required for didactic.

Communication from Shared Health

• Trainees are receiving communication from their respective Colleges/Programs around Shared Health requirements

Placement sites outside of Shared Health facilities:

• Colleges need to have alternate sites or alternative curricular opportunities lined up in the event placement sites are unable to accept students due to their own pandemic planning

Vacation to Impacted Areas- trainees

• Discourage travel as per travel advisories

• 14 day self isolation required when travelling Internationally– impacts to training time etc to be considered at a College level in particular when there are financial implications (ex. PGME- further discussion needed with Shared Health)

• Communication around pulling high risk students off of clinical rotations to be circulated

College of Dentistry and College of Rehabilitation Sciences (PT) Clinical Operations Considerations:

Current protocol: Email sent to all students, faculty and staff to ask whether patients currently have flu symptoms. If symptomatic, reschedule appointments. This week and electronic and voicemail message
will be sent through our system to all our patients with the same message. When patient arrives at College, ask about history, symptoms etc. If positive, patients are sent home and rescheduled.

If patient appears in emergency clinic or walk in with symptoms, protocol needs to be determined about triage; recommendations for the patient to be seen in a hospital setting (C3?)

Service Learning:
WISH clinic cancelled until further notice. Any service learning in personal care homes needs to be suspended until further notice. Review other scheduled service learning and delay/cancel as appropriate. Students volunteering in health system will be counted as service learning in Medicine.

UMG Employees (College of Medicine Only):
UMG Employees travelling internally will check in with the OHN or OESH before returning to work. If they are instructed to self isolate the same benefits health system employees receive will be applied to UMG employees (memo circulated March 13)

How can trainees assist with health service delivery in the event of a pandemic:
- Licensure considerations
- Protection of learner
- Social accountability

Rady Faculty of Health Sciences Shut Down Procedure:

Incident Command Structure: The Rady Faculty of Health Sciences Dean and Vice Provost will determine when the Incident Command Structure will be activated. The Incident Command Structure comprises five major functional areas: Command, Academic, Senior Admin and Operations, Finance/Admin and allows for a coordinated response across all areas. The areas will be comprised as follows:

Incident Commander: Director of Admin/Operations

Incident Command: Rady Dean and Vice Provost, College Deans, UGME/PGME Associate Dean Medicine, Director of Admin/Ops

Academic: Vice Deans, College of Medicine Department Heads and Associate Deans

Operations: Director of Admin/Ops, Rady Faculty of Health Sciences, Business Managers, Managing Directors, Admins and Affiliates

Senior Admin: Rady FHS Directors

The Incident command structure plays a key role in determining when an organization should shut down.

A business continuity plan for a pandemic should mitigate the risk of a shut down. However, there needs to be discussion around when a shut down would be considered keeping the following in mind:
• What is the minimum number of faculty and staff individual Colleges/programs would need to continue operation? (refer to strike plans if available)

College of Pharmacy:

We suggest a minimum of three administrative staff members in the office for the College to stay open. Research lab personnel may need to be in periodically to be at the College to manage on-going experiments at the discretion of the principal investigator.

College of Medicine;

The College could continue to function with individuals working from home.

• How would we compensate individuals/student if we shut down?

College of Pharmacy:

Our fourth year students will complete all the requirements for their graduation within the next three weeks. All are currently in their experiential rotations. The Office of Experiential Education is undertaking a plan for potential remote completion of activities, should it be required. For years 1 and 3, we anticipate readjusting the remaining requirements for the academic year.

College of Medicine:

Med 3 students would be impacted if the University shut down. They may need to repeat the year. Med 4 students are far enough along that they could graduate. There are provisions in place to continue Med 1 and Med 2 training online including examinations.

There have been provisions put in place in clinical sites to protect students when Covid 19 testing is being completed.

Residents receive sick leave as part of their employment with Shared Health. Their may be an impact to their training if they are off for a full two weeks or longer. Decisions will be guided by current PGME policy. Draft message to be circulated. Guideline around high risk trainees and coronavirus being developed.

2nd round of Carms iteration will be conducted by videoconference/teleconference only.

• Identify individuals at a College/Faculty level that can work remotely and ensure they are set up to do so with IST.

College of Pharmacy:

We anticipate course coordinators to be able to work off-site. We anticipate they will have remote access to UM Learn. The College of Pharmacy has considered a contingency plan for all of its courses.

College of Medicine:

Exams will be administered keeping social distancing guidelines in mind.
College of Dentistry/PT- need to determine at what point we would close doors to patients

Relevant Policies (not complete):

UGME Absence and Attendance Policy:
http://umanitoba.ca/faculties/health_sciences/medicine/education/undergraduate/policies.html#ATTEN DANCE_AND_ABSENCE

UGME Assessment and Evaluation Policy:
http://umanitoba.ca/faculties/health_sciences/medicine/education/undergraduate/policies.html#ASSESSMENT_EVALUATION

UGME Mask Fit Testing:

PGME Infection Prevention and Control:
http://www.wrha.mb.ca/professionals/students/index.php

PGME Assessment, Evaluation and Attendance:
http://umanitoba.ca/faculties/health_sciences/medicine/education/pgme/policies.html#Assess

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