Moderator:

Good evening. My name is Jim. I'll be your moderator for this evening's event. This is an interactive forum consisting of approximately 10 minutes of remarks from your panelists to start us off and then questions from you. We're looking forward to hearing from you. We will take as many questions from participants as time permits. If you have a question, you can press star three on your phone keypad at any time and you'll be placed in line to speak with a member of our staff. Again, you can press star three now or any time in the call if you'd like to ask us a question. Our staff will take down your name, where you're calling from. The next time you hear your name, you'll be live on the call and you'll be able to ask your question directly. If you're streaming the event on the website, you can simply type your name and question below the streaming player.

Tonight’s forum will conclude at 8:00 PM. We'll do our best to answer as many questions as we can in the time we have. If we do not get to your question or it is not covered in the panelist remarks, you can reach out to the OHTN members after the event by calling 1-800-354-7050 ext. 2335, or by email at info@ohtnorthumberland.ca. That's info@ohtnorthumberland.ca. We will repeat these instructions at the end of the event. Again, press star three on your keypad or type your question below the streaming player. I will now turn the event over to your host for tonight's forum, Linda Davis.

Linda Davis, President & CEO, Northumberland Hills Hospital:

Thank you Jim and good evening everyone. Thank you for joining us for the Ontario Health Team of Northumberland's first virtual forum. My name is Linda Davis. I am the President and CEO of Northumberland Hills Hospital and it is my pleasure to welcome you on behalf of the Ontario Health Teams of Northumberland, or OHTN for short, which is a partnership of local patients, caregivers, health and social agencies. The purpose of this evening's interactive forum is to share information about the practices and partnerships that have strengthened the local health systems response to COVID-19 pandemic and to answer questions that you may have.

Before we begin, I would like to recognize the traditional keepers of this land and specifically Alderville First Nations. Northumberland County is located on the traditional territory of the Mississauga in the territory covered by the Williams Treaty. We acknowledge the long history of First Nation's Méti and Inuit peoples in what is now called Ontario. And locally, we recognize the proud heritage of Alderville First Nation.
COVID-19 has brought unprecedented change to daily life here in Northumberland County and around the globe. It will take all of us to successfully beat this virus and we've been extremely grateful to have the relationships in place around the OHTN table to support the work that's been required of all of us in the two months since the COVID-19 pandemic was declared by the World Health Organization and Ontario state of emergency was announced. To date, as we know, Northumberland has been very fortunate in that the number of confirmed positive COVID-19 cases in our community remains relatively low. This is due in no small part to the exceptional way that you, Northumberland residents, have listened to and followed public health advice to stay home and maintain those critical two meters of separation, however hard that has been, and I'm certain that it has been.

One of the first 24 teams formed across Ontario five months ago. The OHTN is a relatively new partnership of local patients, caregivers, health and social care agencies. At the beginning of this year, just prior to the declaration of the pandemic, we were preparing to introduce three projects across Northumberland County to support those who may have had difficulty accessing health services. Much of this work had to be put on hold, but the preexisting relationships have proven to be very powerful at enabling the innovation, creativity, and partnership needed to minimize the impact of the COVID-19 across our county. It is for this reason that we chose to host tonight's forum together to demonstrate for you the team effort that is right now at work across Northumberland's hospitals, public health providers, municipal services, local First Nations, primary care and community care providers, and to hear from you.

I will begin this evening session by sharing with you some of the steps Northumberland's two hospitals, Campbellford Memorial hospital and Northumberland Hills Hospital, have taken to support the community in this pandemic. First, we created inpatient capacity by deferring all but the services considered essential and urgent. Second, we implemented screening protocols at all of our entrances and took steps early on to minimize the number of individuals coming in and out of the hospital by temporarily pausing volunteers and all but the most essential visitors. Third, working with our teams, we provided education and preplanned pathways within our hospitals to ensure that those who need care for symptoms of COVID or otherwise can receive it safely and our staff and physicians remain safe as well.

Fourth, we established, in partnership with the health unit and Northumberland paramedics, two COVID-19 assessment centers, one at Northumberland Hills Hospital and the other in Trent Hills to screen and test local residents. This we have worked with Ontario health and area health partners and private donors to acquire and preserve the necessary personal protective equipment, better known as PPE. Sixth, our community mental health teams continue to support individuals in the community across the county using a mix of virtual counseling by phone and in-person supports such as through our
M-Heart services in collaboration with area police forces and our Northumberland County assertive community treatment teams, better known as the ACT teams.

And finally, we continue to monitor and respond to the many COVID-19 directives issued to hospitals by the ministry of health and the ministry of long-term care, most recently going out into the community to proactively screen and test individuals in the community, including area long-term care homes while ensuring essential services like emergency care, cancer and dialysis care and more are still here should you need them. With my counterpart, Varouj Eskedjian, President and CEO of Campbellford Memorial Hospital, I'll be happy to expand on these actions during the Q&A. But at both NHH and CMH, we have prepared for the worst and to date have fortunately not had the high volumes of COVID-19 positive patients as seen in other parts of the province.

I'd like to now turn the microphone over to Dr. Lynn Noseworthy, Medical Officer of Health from the Haliburton, Kawartha, Pine Ridge District Health Unit to speak to our local public health team's work to minimize the spread of COVID. Dr. Noseworthy.

Dr. Lynn Noseworthy, Medical Officer of Health, Haliburton, Kawartha, Pine Ridge District Health Unit:

Thank you Linda and good evening to everyone joining us tonight. At the end of December, we started hearing about a new virus that had appeared in a city in China. By the end of January we saw the first case of the novel Coronavirus in Canada, and on Friday, March 13th, we saw our first case of COVID-19 in Northumberland County. The reason I'm starting with this mini-timeline is to illustrate just how quickly things escalated and the world changed for all of us. Starting in January, the health unit began ramping up our response. We began having regular teleconferences with the ministry of health and public health Ontario to learn all we could about this new virus, what it is, how it is transmitted, the symptoms it causes, how to test for it, as measures to prevent infection. Information regarding this virus continues to evolve and grow.

The health units set up a call center to respond to the hundreds of phone calls coming in daily from healthcare providers, community agencies, municipal governments, school boards, and members of the public. We stopped providing some of our programs and services as we moved more of our staff into the response work, until most of our 135 staff were working solely on our pandemic response. We have been working very closely with our health care partners, preparing for cases, helping to set up assessment centers for testing and now coordinating the testing that is taking place within our long-term care homes, retirement homes and shelters and other groups settings.
Many of our staff now work on case and contact management, a lengthy process which involves contacting each confirmed case and reviewing everywhere they went and every person they were in contact with during their infectious period, which is about 48 hours before their symptoms began. Our staff then reach out to these contacts to gather information from them and determine if they in turn need to self-isolate and watch for symptoms. Our staff contacts all cases and contacts daily until their self-isolation period is over. Unfortunately, we learned that some people who could have been infectious were not self-isolating. I therefore issued what's called a section 22 class order under the Health Protection and Promotion Act that gave me the ability to seek fines for people who would not stay home in self isolation in order to protect others.

Northumberland County is one of three counties within the jurisdiction of the Haliburton, Kawartha, Pine Ridge District Health Unit, and thankfully we have not had very many confirmed cases in this area. In Northumberland County, we have had a total of 14 confirmed COVID-19 cases, including one case in a long-term care home in Bryson. We are currently monitoring 12 individuals deemed high risk as they had been in contact with a confirmed case. There have not been any COVID-19 deaths reported in this area.

People frequently ask why I think the number of cases is low in Northumberland County. I don't think there is just one reason. However, I do think that one of the key factors is the commitment of our residents, municipal governments and healthcare providers to work together to ensure people stay home, practice physical distancing when they have to go out and wash their hands often, thereby helping to stop the spread of the virus. I've been in public health for more than 30 years and have never experienced anything like the COVID-19 pandemic. We are constantly learning new information and adjusting our response accordingly. I think that will continue for all of us as we move into recovery mode and adapt to our new post-pandemic lives.

Linda Davis:

Thank you Dr. Noseworthy. I'd like to now invite the CAO of Northumberland County to share highlights on the key actions taken from our region's upper tier government. Jennifer?

Jennifer Moore, Chief Administrative Officer, Northumberland County:

Good evening everyone. My name is Jennifer Moore and I'm CAO of Northumberland County. As a provider of long-term care, paramedic and social services, Northumberland County has welcomed the opportunity to collaborate with community partners on the local COVID-19 response to the OHTN. In fact, the emergency of
COVID-19 coincided with the launch of our community paramedicine service, identified as a year one priority project for the OHTN. Our paramedics continue to deliver emergency prehospital care for those who require 911 services and a two-step screening process is in place with dispatch to enhance public and paramedic safety during the pandemic.

Since the launch of the community paramedicine service, paramedics has also been actively coordinating with health system partners to do home visits for certain procedures and to expand COVID-19 testing capacity across Northumberland. This includes responding to individuals experiencing symptoms and going out into the community to proactively test priority populations such as long-term care residents.

On the long-term care front, Northumberland County does operate the Golden Plough Lodge, which is the only municipally operated lodge in the county. As with other long-term care facilities in our community, staff have been carefully following direction from the Ministry of Long-term Care and Public Health to ensure resident’s health, safety and wellbeing during COVID-19. In compliance with recent directives, all GPL residents and staff have been proactively tested for the virus. Other measures that have been implemented include the closure of the GPL to non-essential visitors as of March 14th, active screening of all residents and employees twice daily, isolation protocols for any resident demonstrating symptoms, enhanced measures for the use of personal protective equipment by staff and enhanced sanitation practices. As we work to ensure a safe and healthy home, staff continue to support and guide our residents through this challenging time.

Finally from a social services perspective, the county has been focused on working with our community partners to ensure supports are in place for vulnerable populations during this health emergency, including the homeless shelter, housing stability, and food security services. This has included working with the staff of Transition House, Northumberland County’s only emergency homeless shelter, to shift operations to a temporary shelter at Cobourg Collegiate Institute in order to ensure the recommended physical distancing measures in shelter operations. Also, through our Food 4 All Warehouse, we are reinforcing food security by working with local food banks and other distribution networks to monitor needs and ensure coordinated response to any increased demand for food supports during COVID-19.

Northumberland County’s priority remains the health and safety of our residents and our staff as we continue to provide the services on which our community relies, including our non-healthcare and social services. I will be happy to elaborate further during the Q&A on the measures in place across the county operations to minimize the spread of COVID-19, but I'll turn it back to Linda for now.
Linda Davis:

Thank you, Jennifer. The next Ontario Health Team of Northumberland panelist we will hear from is Wendy Parker. Wendy will speak to the steps that our local primary care providers, community health centers and family health teams, physicians, nurse practitioners and the nursing and allied health professionals that work with them, steps that they have been taking to support their patients during the COVID-19 pandemic. Wendy?

Wendy Parker, Executive Director, Lakeview Family Health Team:

Thank you, Linda. Good evening. Am Wendy Parker, Executive Director of the Lakeview Family Health Team. Primary care providers in Ontario have continued to provide services during COVID-19. The community health centers of Northumberland based in Port Hope and three family health teams, which includes Northumberland Family Health Team in Cobourg, Trent Hills in Campbellford and Colborne, and the Lakeview Family Health Team in Brighton and Colborne along with our physician colleagues, transitioned to a new model of care delivery in March to ensure the needs of the community would continue to be met. In close partnership with the Haliburton, Kawartha, Pine Ridge District Health Unit and Public Health Ontario, the physicians and executive leads implemented the new model of care based on the expert guidance from the college of physicians and surgeons and the best practice direction from key provincial associations.

This multi-pronged approach to providing care in a pandemic includes a focus on personal protective equipment supply to keep staff, physicians and patients safe. The sustainability plan by introducing staggered work schedules and working from home measures to our staff and physicians to promote care delivery while maintaining the physical distancing requirements. Virtual platforms were introduced to mitigate services by moving to an online environment where possible, including using the technology to replicate the familiar face-to-face appointments with patients. And lastly, community outreach with primary care providers working with community assessment centers, providing support to long-term care facilities and retirement homes, and delivering services to vulnerable populations during this time.

Our goal has been to keep everyone as safe as possible while continuing to provide care to our patients. A very special thank you to our patients and the teams for being so patient with us and understanding through the constant array of changes. I can't emphasize enough that patients who do need medical attention during this time can continue to contact all primary care offices. An initial assessment will be provided by telephone with arrangements made for a scheduled telephone appointment, a virtual consultation and/or an in-house visit in some cases as needed.
It's very important for the community to understand that if someone is feeling ill or is having difficulty managing their health, that they can continue to contact their family physician, nurse practitioner or member of their primary care team. The primary care community can help by working with our available healthcare teams to address your health concerns and reduce the demand on emergency departments, hospitals, and paramedic services. I'll now turn things back to Linda.

Linda Davis:

Thank you Wendy. I'd actually like to echo your point about seeking care. No one should defer a trip to the emergency department should they find themselves in an emergency. Our teams are prepared and ready and the COVID-19 should not be a deterrent. The fifth and final Ontario Health Team of Northumberland panelist I'd like to introduce is Trish Baird who will speak to us about the work happening across the community care sector. Trish?

Trish Baird, Executive Director, Community Care Northumberland:

Thank you Linda and hello everyone. I'm Trish Baird, Executive Director of Community Care Northumberland. I want to begin by acknowledging and thanking the communities, organizations, and individuals throughout the county who have come together to support their families, friends, neighbors and community during these difficult times. The primary focus for community and social service agencies during the pandemic is to ensure essential services are available to isolated and vulnerable members of the community.

Essential programs and services that continue to operate in the community include meal and grocery delivery, medication delivery, essential medical transportation, personal distress alarm monitoring, hospice services, mental health services, and emergency housing. Most other community programs are being offered virtually or by telephone such as client assessments and intake, reassurance calls, support groups, social gatherings and counseling services. We are a community that relies heavily on volunteers, but we want to ensure that our volunteers, especially those most at risk, stay home and stay safe at this time. Because of this, many community agencies have paused their volunteer programs or transitioned to volunteers providing telephone support.

If you or someone you know requires an essential service, please contact a local community or social service agency or call 211 to be connected to local services. There are a number of programs and services available throughout Northumberland County that can help. And I'll turn the phone back over to Linda.
Linda Davis:

Thank you Trish. That concludes our panelist remark and now we'd really like to hear from you, our audience. So I'm going to turn it back to our moderator to begin taking questions.

Moderator:

Again, this is Jim and reminder, if you're just joining us, you're listening in on the COVID-19 virtual forum hosted by the Ontario Health Team of Northumberland. To ask a question, press star three on your phone keypad at any time to get into the queue and ask a question. If you're listening online, type your question below the streaming player. Again, at any time in this call, if you'd like to ask a question, hit star three on your phone. And by the way, we did have one web question, Catherine. One of the clarification from something Jennifer mentioned and that is the Golden Plough Lodge. You said ATL, but it's Golden Plough Lodge. To our panel, we have a web question from Linda. She asks how many tests for COVID-19 have been administered in Northumberland County?

Linda Davis:

Well, thank you Jim. That's a question that is Linda and I will take the first stab at that. I think we may not have exact the numbers across the county. What I can share with our listeners is that to date, as of today, 2,744 tests have been administered through the hospital team in collaboration with community paramedics. So through the assessment centers, both in Trent Hills and here at the hospital, as well as the community outreach, 2744 tests. If we look at our population across the county of about 85,000, it's about 2.3% of our population that has in fact been tested to date.

Jim:

And we have another web question from Patricia. Here's her question. She asks. Good evening. Thank you for having this forum tonight. My question for you is this. When we are told that we have COVID-19 cases in Northumberland County, why are we not told the area of the county the cases are in? The information will get too vague.

Dr. Lynn Noseworthy:

And I'll take that question. It's Lynn Noseworthy speaking. We only release the number of confirmed COVID-19 cases or deaths in the county in which the person resides because we have a legal responsibility to protect personal health information that's collected under various pieces of legislation such as the Health Protection and
Promotion Act. Although it may seem that our geographic area has a large enough population to make it impossible to identify an individual, we essentially cover three counties comprised of very small towns and it could be very easy to identify someone who tests positive.

If a person has been in contact with a confirmed case, they will be called by the health unit. Every confirmed case is contacted by our staff so that details can be obtained about every place that person has visited or a person that they interacted with during their infectious period. Every one of the identified individuals, a contact, is then contacted and told to self-isolate and watch for symptoms. If the contact develops symptoms, arrangements are made for them to be tested for COVID-19. This case and contact management is very thorough and can take hours to complete. Health unit staff are in contact with cases and contacts daily to ensure they remain in self isolation for the required period of time.

Moderator:

Great. And let's take our first live question. Nancy has a question about retirement homes. Nancy, you're on live. Go ahead and ask your question.

Nancy:

Hi. I'm wondering, have you finished doing all the testing of the approximately 16 retirement homes and long-term care homes in Northumberland County? And if you have, what are the results, breaking it down between staff and residents?

Linda Davis:

Nancy, it's Linda Davis. I think what I can do is tell you the hospital staff have been going and supporting the retirement homes that are in need of that. We will in fact have all of the retirement homes completed by May 20th across Northumberland County. I think we're approximately, I'm guessing about two thirds of the way through at this point in time. Does that answer your question Nancy?

Moderator:

Thank you Nancy. Does that answer your question Nancy.

Nancy:

Do you have any results?
Linda Davis:

I think what I can tell you is that the results are taking about six to seven days to come back. And obviously the positive test results are reported through the health unit. And as we know, Dr. Noseworthy has indicated that there really is only those 14 positives across the county at this point.

Moderator:

Thank you Nancy for that question. Let's go to one other web question. This one's from Sue. She asks, I noticed most employees in grocery stores are not wearing masks. Should I be wearing a mask in these stores even when I keep six feet from others?

Dr. Lynn Noseworthy:

And I can take that one. It's Lynn Noseworthy speaking. The purpose of wearing a mask out in public is not to protect yourself from somebody else. It's to protect other people from you in case you are incubating COVID-19 infection. However, if you go into a grocery store, if you think that you will be in close contact with someone for a lengthy period of time within that six feet distance or two meter distance, you can certainly wear a face covering. But it's only recommended that you wear a face covering when you anticipate that you will be unable to maintain the physical distancing from somebody else.

When you have a mask on your face, you tend to touch your face more. And one of the things we want you to do to prevent from getting infected is to not touch your face with unwashed hands. And if you've got a face mask on, you tend to touch your face more, which defeats the whole purpose. And if you didn't have a face mask, then you should keep it clean and wash it regularly and there's information on various websites that will give you further information about that.

Moderator:

Thank you so much for that. And again, if you'd like to ask a question live at any time, hit star three on your phone or if you're online you can type your question under the screen that is showing the conference right now. We'll get back to some live questions in a moment. One more from the web from Pam. She asks, when can we walk or bike ride in Presqu'ile Park?

Linda Davis:

Jennifer?
Jennifer Moore:

It's Jennifer Moore from the county. The Presqu'ile Park is a provincial park, so it's not directly within our authority. But the province has been issuing communications lately and I know you can check the provincial websites to determine exactly which parks are currently open. Some did open on Monday and some more will be opening as a phased approach in the coming days. You can check their website to find out specifically about that park. We did announce this week that the Northumberland County Forest will be reopening on Friday, if that's an area that you'd like to visit.

Moderator:

Let's go to another live question. Marilyn has a question about the timeline for seeing families in retirement. Marilyn, you're on live, go ahead and ask your question. Mareen, I'm sorry.

Mareen:

Hi, thank you very much for doing this event. I was wondering, is there any indication whatsoever when we could possibly be getting back into see our families in retirement and long-term care facilities? I know that mental health is playing a huge part as a widow visiting daily, but with low numbers in this area, would we be able to ease some restrictions on that anytime soon?

Linda Davis:

Dr. Noseworthy, would you like to comment on that?

Dr. Lynn Noseworthy:

I could start. While the numbers are low that we are aware of, these represent people who have been tested and were found to be positive. COVID-19 virus can also cause infections in people and they are not aware they have infections. So they're called asymptomatic infections. So we do not have any idea of how many people are out there in Northumberland County who have asymptomatic infections, number one. And number two, people who develop infections with COVID-19 virus have a few days before they actually develop symptoms when they are infectious. So, if you are around people during that pre-symptomatic phase, you can also spread the infection. That's the second point I'd like to make.

And the third point is, COVID-19 infections are present in the province of Ontario and about 62% of the infections in the province are in the Greater Toronto Area. The
Greater Toronto Area is within a half-hour drive of Northumberland County. So I think a good thing to think about for everybody is, consider other people may be incubating the infection, and conduct your activities accordingly. And so if you want to protect your loved ones within long-term care facilities, you may have to stay apart from them for a longer period of time until the infection with COVID-19 throughout our province is decreased significantly so that it will be safe to go into long-term care facilities.

We are monitoring the situation regularly, daily, and the province is the lead agency for providing direction to the rest of us in the healthcare system, businesses, municipalities to practice public health measures to protect the health of our loved ones, our families, our colleagues, our friends. So the short answer to your question is, I don't know when the restrictions are going to be lifted, but they're there for a purpose to protect our most loved relatives and family and friends in long-term care facilities.

**Moderator:**

Thank you for that question. Let's go to another online question. This is from Jane. Has there been a change in the number of people going to hospitals and family health clinics with COVID-19 complaints when compared to usual? Is this problematic?

**Linda Davis:**

So Jim, it's Linda Davis. Can I just understand the question. Has there been a change in the number of people going into hospitals or primary care clinics with COVID-19 or since COVID-19?

**Moderator:**

Yes. No, with COVID-19 complaints compared to usual, compared to usual capacity apparently.

**Linda Davis:**

Well, I think, I guess we’ve really in the hospital have not had an experience with COVID-19 prior to two months ago. I think there are fewer… there continues to have individuals who have symptoms that are coming to hospital and we are screening them and testing. We are testing every single individual that is admitted to the hospital. But I have to say that the vast majority of those of course are coming back negative. I think just another piece I'd add to that is in terms of we have seen the volume of individuals coming into emerge have decreased since the pandemic.
And our wait times, I'm sure many of you have often had challenges with the wait times in emerge, our wait times are very short right now. But I think that's where both Wendy and I commented on. If you are ill, we do want you to come to hospital or seek care from your primary care physician because we would not want you to not come thinking that there was a chance to be at risk to being near the virus. But I don't know that I can answer the question in terms of whether we're actually seeing a decreased volume of COVID complaints over the two months. I think it has been relatively consistent. Wendy, would you like to comment?

Wendy Parker:

Thank you, Linda. The response to that would be certainly that there are a number of patients who are continuing to be in contact and have appointments with their primary care providers. The family health teams in the community health centers are doing active screening through telephone triage and monitoring the signs and symptoms of patients who are calling in should they have COVID virus. However, in the last few weeks there's been an extension of the number of symptoms that are associated with COVID-19. And so, some of those are typical symptoms of other related illnesses and some of them are atypical symptoms.

The assessment is done on a case by case basis and it's, again, will underscore the importance of calling into your primary care provider. The priority for the province has been to maintain, throughout the pandemic, care for well children assessments and immunization schedules, and also the priority for antenatal and postnatal women and newborn care. So, that has been continuing. That volume has been reduced somewhat, I think for the caution that's been rendered by the parents. But certainly we continue to encourage people to call their primary care provider.

Adrienne Bell-Smith, Executive Director, Northumberland Family Health Team:

Hi, it's Adrienne, can I add in here?

Linda Davis:

Adrienne, go ahead.

Adrienne Bell-Smith:

Yes. Hi, I'm Adrienne Bell-Smith, Executive Director of the Northumberland Family Health Team. I wanted to echo everything that Wendy has said, but also add and reiterate that when somebody from the community is calling into their family doctor concerned that they may have symptoms, first of all we're asking them about symptoms
related to COVID or if they're concerned about exposure to COVID. The priority is getting that person access and providing them direction to the assessment centers for testing. In the primary care offices, right now we are not performing the assessments for COVID. We are directing those people, both in Cobourg, to the hospital and in Trent Hills to their assessment center. So please, if you're directed to attend your doctor's office for any other reason, please know that those with COVID symptoms are being directed for testing outside of your family doctor's office.

**Moderator:**

Thank you for all these. They're great questions. We are going to get back to some live questions. I'm just going to take a few web questions, but if you'd like to ask your question live, go ahead and hit star three on your phone right away and we'll get to it as soon as possible. This is another web question from Irene. She asks, when might non-urgent surgery start happening again at Northumberland hospitals?

**Linda Davis:**

Well, very good question, Irene. It's Linda Davis. It's a question that many of our physicians and surgeons of course are asking every day. The chief medical officer of health for Ontario did put forward a directive in the middle of March that asked us all to ramp down to just essential or urgent services. So we continued to do very urgent cancer surgeries but have not gone back to the broad elective. We do understand from the ministry that they are prepared to have us plan, and we have received a 37-page document outlining the various criteria that we will now need to look at and plan for as we begin to think about the potential to begin to do further elective surgeries.

We do not have a date for that yet. The chief medical officer of health for Ontario would have to reverse that directive for us to begin to do that. But I would say, Irene, we are doing a lot of planning and we understand that it certainly has not been something that we would have wanted to have delayed, but it was important that we maintain the capacity in the hospital. We will be doing this planning in a very measured way so that if by chance we have a surge of COVID positive within our community, we would be able to ramp down as quickly as we have ramped up.

We are also doing this planning with our partner hospitals. Campbellford, Peterborough Regional Health Center, Ross Memorial and Haliburton, together with Northumberland, are planning how we might begin to reintroduce some of these services. I do not have a date, but please know that we are sensitive to the need to begin to do this and certainly are doing planning.
**Varouj Eskedjian, President & CEO, Campbellford Memorial Hospital:**

Hi, this is Varouj Eskedjian from Campbellford Memorial hospital. We likewise are developing our plans to resume the scopes that were being done within our operating rooms, as well as looking at other ambulatory services that we have put on hold for the time being and trying to coordinate with not only Northumberland Hills Hospital, but as Linda mentioned, with Peterborough Regional Health Center. That's our regional referral center. We will develop those plans and really await guidance from Public Health Ontario and the ministry of health before we can actually resume.

**Moderator:**

And we're going to go to one more web question before we get to another live question. This one's from Colin. There is a lot of confusion around about who can socialize, meaning can multiple family households intermix. I'm thinking of this past Mother's Day and the upcoming May long weekend. Can you please clarify who should be socializing together right now?

**Linda Davis:**

Dr. Noseworthy, would you like to take that question?

**Dr. Lynn Noseworthy:**

Yes, I'll take that question. Right now we're recommending that people stay within their immediate family units, their immediate household, and that people not congregate in any groups larger than five. We are still sticking to that at this point in time until we receive further direction provincially with regard to expanding those circles. I know in other provinces they're now expanding to inviting a couple of other people into your family bubble but they haven't made that recommendation here in Ontario. That's at this particular point in time.

**Moderator:**

Okay. Now let's take another live call. Bob has a question about any potential with second wave infections. Go ahead, Bob, you're on line.

**Bob:**

Thank you. My question is, first of all, in Northumberland we have been fortunate in that our numbers have been low and that's largely due to the behaviors of the majority of our population. The concern I have is, should there be a second wave that is significant and
the surge numbers become very large, what planning is in place for the two hospitals in Northumberland to take care of such large numbers? And I think a couple of the previous questions addressed that, but if I could get an answer for that, that'd be great.

Linda Davis:

Thank you, Bob. It's Linda Davis, I'll start, and then I'll certainly ask Varouj to jump in for Campbellford. I think we were fortunate to not have a huge surge in the last while and it did afford the hospital to do some very good planning. I was extremely impressed, if you saw the room that I'm sitting in or several of them around the hospital, we've considered them our war room and there's multiple stickies. We planned a pathway for the potential COVID-19 patient through emerge, through into our intensive care unit and onto an inpatient unit.

We've created a respiratory unit. We have expanded capacity to probably take up to about 90 COVID positive patients if we needed to across the hospital. And we are ready, have been ready, and would be ready. We did education and trained our staff and we certainly again have acquired the necessary PPE to be able to care for the potential surge. Certainly I think Northumberland has done a great deal of preparation. We have truly, to use the quote of one of our vice presidents. We have prepared for the very worst, but hope always for the very best. And perhaps Varouj you'd like to comment about Campbellford.

Varouj Eskedjian:

Sure. Just like Northumberland Hills hospital, Campbellford Memorial Hospital rolled out its pandemic plan probably at the end of February and we likewise developed additional capacity within the organization to expand from our 34 bed capacity up to 49 beds, and then even utilize our operating rooms for what we call protected code blue. If somebody showed up in the emergency department that required intubation at all, they would actually go up into our operating room. So, we have created that capacity to deal for the potential worst. We have not used that capacity obviously to date but we still remain prepared and vigilant. Our ongoing internal communication is about maintaining our vigilance and our preparedness so that in the event that there is a second wave that comes upon us, that we have not let our guards down and will continue to maintain that until we are told otherwise.

Moderator:

Thank you for that question. Let's go to our next internet question from Suzanne. She asks this. Many residents of Cobourg are concerned about community spread from the
thousands of visitors to Victoria Beach each summer. Do you have any advice to minimize this?

Jennifer Moore:

It's Jennifer Moore with Northumberland County. There's a number of activities happening right now where municipalities are looking at visitors to our community. Each one of our member municipalities is looking at that slightly differently. We are taking the approach to the county tourism that we really do look forward to tourists coming to our community. Maybe not right now, but when things are settled down a little bit, we certainly would welcome them then. And that's how we intend to talk about our tourism for the time being.

Some of our member municipalities are taking slightly different approaches as they look at their community and need to decide what their priorities are and how they would like to make sure their residents are kept safe. Any municipality is debating and discussing that as we go through the coming days and weeks, and certainly as we look at the summer months. So I won't speak on behalf of our member municipalities, other than to broadly say that it's certainly, first and foremost, particularly when we look at our tourism sector.

Moderator:

Let's go ahead and take another live call. Alexandra has a question about the promotion of wearing masks. Alexandra, go ahead and ask your question.

Alexandra:

Thank you very much. I know you did touch briefly on the idea of wearing mask in say a grocery store, and I'm wondering why you do not actively promote the wearing masks when there are asymptomatic carriers of COVID. It seems logical to me that if everyone wore a mask correctly, then it would provide additional protection to everyone. So can somebody address that for me please?

Linda Davis:

Dr. Noseworthy, would you like to take that?

Dr. Lynn Noseworthy:

We have not been actively promoting the wearing of masks at this point in time, but as I indicated before, as the province starts to lift restrictions, we may see some difference
in the messaging around the use of masks. Currently, we're still recommending that people stay home as much as possible and when they're out to stay at least a distance of six feet away from other people, and that we're also recommending that people stay home if they have an infection themselves. It may not be COVID, it could be just a cold, but we're recommending that people stay home. And we're also recommending that people wash their hands regularly.

When you wear a mask, and you understand what I'm saying that it protects other people from you in case you're incubating it, but it can give people a false sense of security. And as I said before, they may touch their face and they may inadvertently infect themselves if they don't have an infection. So it's the kind of a catch 22 situation at times wearing a mask all the time when you're out in public. What the messaging is currently that I'm seeing in the paper, as I may have mentioned earlier, is that the province is recommending that you wear a mask covering when your physical distancing can be a challenge, that you can't maintain that two meter distance from other people.

**Moderator:**

And just to remind you if you'd like to ask a live question, go ahead and hit star three on your phone. We're going to take another internet question from Gail. Her question is, any insight regarding recent concerns about young children's symptoms?

**Linda Davis:**

Dr. Pepper, are you on the line? Would you like to take that question?

**Dr. Erin Pepper, Family Physician:**

Sure. Hi, my name is Dr. Erin Pepper and I'm one of the family physicians in Northumberland County. Certainly to date we've been hearing that kids have not had significant symptoms from COVID. More recently there's been some evidence out of Europe and also the United States that there may be some late presentations of COVID related to some inflammatory conditions. We're just in the early stages of learning about some of these presentations and I think at this point, if your child is sick, please seek care from either the family physician or the emergency department. And if you are concerned about more common COVID-19 symptoms, that you can reach out to the assessment center as well as your family physician.
Moderator:

Great. And we'll go to another web question from Linda. Here it is. We are trying to go out as little as possible, but I'm wondering about trips with multiple stops. Am I better to do one trip with four to five stops or can I split the trips into two days?

Linda Davis:

That's a very interesting question, Linda, and I'm just thinking, so I think that, again, it's minimizing... It's Linda Davis that's going to start to display a response. Perhaps I'm looking to my colleagues as well to jump in. I think you would want to think about whether you can safely distance yourself on those stops, as well as what areas you'd be going into so that you can maintain good hand hygiene. I'm thinking of washrooms. Again, if you're making a trip and you need to stop at a roadside stop for washrooms, that could be very challenging.

You'd need to make sure you have hand sanitizer that you're able to wash as you touch door handles or those sorts of things. So I think it would be, thinking about where you would make the stops, I think that if you could do your trip in one trip and not have to make stops, I would think that would be preferable because you have less potential for contacting or coming in contact with situations or surfaces that may be infected. Any other responses that you'd like to? Okay. I hope that's answered your question, Linda.

Moderator:

Thank you. Okay. Now we're going to take another live question. This is Hao on the turnaround time for testing? Hao, go ahead and ask your question.

Hao:

Good evening. I have a question about the testing results. It was mentioned that it takes seven or eight days to get the results back. Now, that seems like an incredibly long time when all kinds of things could happen, where you'd have a lot more problems trying to trace the results if they're not that good. It seems like a real long time, like an Achilles heel to me.

Linda Davis:

Yeah, absolutely Hao. It's Linda Davis, I'll start and then I'll actually ask Dr. Noseworthy if she'd like to comment. I think what we have found is the turnaround time at one point was 48 hours. But as the amount of testing has increased, the number of tests that are being done, it is taking longer. I think that anyone who is tested is also recommended to
isolate themselves, to self-isolate and to wait for those results. So, we do know that it is taking a long time, but that's because of the number of tests that are being done. And it would be hoped that the individual would be going home after the test and self-isolating so to avoid the potential of transmission of the virus should they in fact be positive. And Dr. Noseworthy, would you like to add to that?

Dr. Lynn Noseworthy:

Yeah, I can. I understand that provincially, the public health lab is working with about 25 other laboratories to create a system of laboratories to deal with the testing. Initially it was just a Public Health Ontario laboratory that was doing the testing, but it became apparent that they needed more support from laboratories across the province. And there is a process whereby the swabs go into the laboratory and they get sent to other laboratories that have the capacity to do the testing.

There's also a system that's being set up for the entities that are sent these swabs in to track those swabs and to help the system problem solve any results that are taking far too long. And I agree six or seven days is far too long to wait to get results, but the province has put a system in place to speed that process up. And the system is starting to respond better, but there was a significant influx of testing over the past I'd say two weeks related to the enhanced surveillance within the long-term care homes throughout our province. Hopefully we'll still see an improvement in the turnaround time.

Varouj Eskedjian:

This is Varouj Eskedjian from Campbellford again. The hospital specific tests, so those that we refer out directly, the turnaround time has been very good actually for the hospital. Recognizing how important it is as we're admitting patients onto our floors from the emergency department, we do need relatively quick results to determine how long they need to be isolated in our inpatient units. So our experience over the past, I would say, six weeks has been much better than the initial timeframe, even as low as 12 to 24 hours. So that really has helped us in managing how we treat patients as they're going from our emergency department onto our floors.

Moderator:

Linda, we've got another question that people want to ask. What services are available right now at the community health centers in Northumberland?
**Linda Davis:**

Community health centers. I'm actually going to punt that one over to Duff Sprague.

**Duff Sprague, Executive Director, Community Health Centres of Northumberland**

Hi, it's Duff Sprague at the community health center. We're open every day. We have primary care providers onsite for urgent care. We're keeping our dental open for emergencies only. And unfortunately, because our dentists come from another community, we have to have at least six or seven patients who can come in on a day to have them join us here in Port Hope. We're doing a lot of... staff are all chipping in and preparing food baskets and delivering them to those who normally use our food security program.

Approximately 60 plus baskets a week. Our staff are preparing hot meals for one night a week at Transition House. None of our group services are working at this point or going at this point. Counseling, diabetes education, those things are happening primarily by phone. We have our geriatric outreach team, which is trying to work by phone, but of course does have to make a home visit in more critical situations. And we're just opening up to do a cognitive assessments on site when it's a critical situation.

**Moderator:**

Let's get another online question from Laura. Here it is. I'm wondering about food security services. I know the services better in Trenton and Belleville. How are agencies in Northumberland meeting food security issues for our most in need?

**Trish Baird:**

I will try and take that one, to start off with. Trish Baird from Community Care Northumberland. Food security is very important. There are a number of organizations that have offered grocery delivery for people that can't get out to the grocery stores. We deliver, at Community Care Northumberland, frozen Meals on Wheels. We're delivering over 800 of those meals a week to people in Northumberland County. There are also the food banks are available and I think it's by appointment only, and there are a number of community groups that have organized online. I know in Cobourg, I think it's Caremongering that covers some of the area that will have volunteers that will deliver groceries, food, hot meals to people in the community. So those are some of the ways. I think Jennifer was going to say about a few others.
Jennifer Moore:

Yeah. It's Jennifer from the county, and I can speak a little bit to that. We do operate the Food 4 All warehouse, and we have seen our levels of food have been quite positive. We’re getting regular deliveries and those then go out to our food banks. We've changed our processes a little bit so we can deliver those directly to their door and we can do that in a contactless way. We're seeing greater amounts of milk, eggs. Fresh, frozen, and nonperishable food items have been made available through purchases.

We're receiving more donations so we're able to purchase more food directly and get that out to the food bank so that they can distribute it. We have received and began distributing emergency food hampers from Feed Ontario and they're also being distributed through local food banks. So there's a lot of assistance available through community agencies and we would encourage anybody needing that assistance to make that call to their local food bank or reach out through 211 to their local agencies, and we can certainly help get that assistance.

Moderator:

One last online question from Kim and then Linda you can begin your closing after that. How do I access community services like Meals on Wheels, medication delivery, et cetera.

Trish Baird:

It's Trish Baird. At Community Care Northumberland, we would be happy to take any calls related to Meals on Wheels or deliveries of medication. So whether if you have internet access, you can access us online at www.comcare.ca, or you can phone our 800 number, 1-866-514-5774. And we would be able to sign you up for our frozen Meals on Wheels delivery.

Linda Davis:

That number we can call again.

Moderator:

Can you repeat that number again. Oh, I'm sorry.

Trish Baird:

I hope I repeat it the same way. 1-866-514-5774. I hope that helps.
Moderator:

With that, Linda, I'll pass it off to you for some quick closing comments before I close down the call.

Linda Davis:

Thank you, Jim. Well, the members of the Ontario Health Team of Northumberland look forward to further collaboration and progress as we move through and beyond this pandemic phase two, what we will probably consider a new normal. There is much work to do, and we're not through it yet. We certainly thank the residents of Northumberland for your exceptional response to this unprecedented crisis. While the temptation is to relax our efforts against the virus, we know this may be premature. Please continue to do what you're doing. It is working, and we are grateful for that. Wash your hands frequently, limit your physical interaction with others and maintain the two meter distance that is required to stop the spread of this virus. We will beat this in time together. Thank you for joining us. Stay well. Stay safe.

Moderator:

Thank you Linda and thank you to everyone on the phone and online for taking the time to join us this evening for the COVID-19 virtual forum hosted by the Ontario Health Team of Northumberland. We appreciated the opportunity to speak directly with you this evening and answer your questions. An archive of tonight's conversation will be posted next week for everyone to review in case there were portions of discussion you would like to listen to once more, or if you'd like to share it with your friends.

If we are not able to get to your question this evening or if we were not able to get to your question and you did not hear an answer to your question in that archived conversation, a reminder that you can reach out to OHTN members after the event by calling (800) 350-7050, ext. 2335. If you'd like to write that down again, it's (800) 350-7050, ext. 2335, or you may email us at info@ohtnorthumberland.ca. That's info@ohtnorthumberland.ca. Have a wonderful evening.