

**December 3, 2020** 



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## **PURPOSE**

SHA services will adapt and expand to meet the projected COVID-19 patient demand, while continuing to deliver essential services to non-COVID-19 patients throughout the duration of the event.





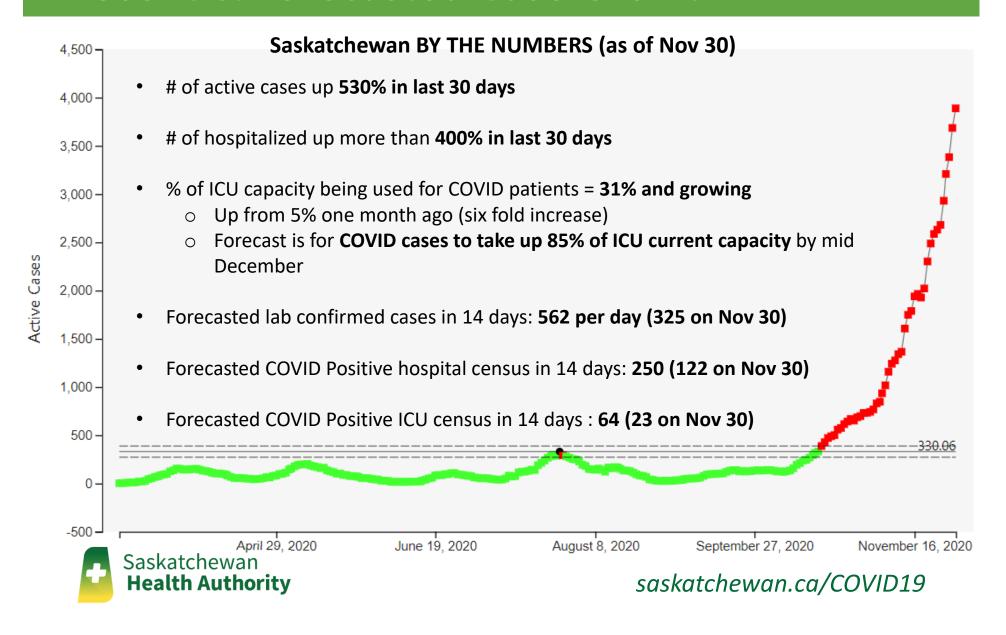
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### OUTLINE

- Recent & Forecasted Case Growth
- Two-Week Surge Targets
- Service Slowdowns
- Redeployment Plan
- Next Steps



### Recent & Forecasted Case Growth



# Offense – Two Week Surge Targets

- Contact Tracing Surge Target: Meet demand for approximately 562 average cases/day within two weeks (6,000+ hours work/day)
- Requirement: 500 licensed health care workers, unlicensed workers and data entry staff
- Needs across the spectrum of contact tracing:
  - Green = Public Health Nurses, sufficient resources to meet target
  - Yellow = Unlicensed workers, target to be met primarily through supplementary workforce
  - Red = licensed/certified staff required, meeting target requires service slow downs to support redeployment to address gaps



\* Does not always occur in linear order above

# Defense – Two Week Surge Targets

- **ICU Surge Target:** 64 COVID patients requiring ICU within two weeks
  - Equivalent to 28 percent more ICU bed capacity than currently exists right now in Saskatoon and Regina combined.
- Acute Care Surge Target: 250 COVID patients requiring hospitalization within two weeks
  - Equivalent to the capacity of the Cypress Regional Hospital in Swift
     Current and the Prince Albert Victoria Hospital combined.
- O Where does this step in the surge plan take us?
  - 15.5% of planned COVID ICU capacity at peak
  - 19% of planned COVID acute capacity at peak



**Capacity Steps** 



### Outbreaks/Isolation Resources – Two Week Target

### **Surge Target**

Create a pool of approximately 55-60 health care workers in six regions of the province able to be redeployed to address outbreaks and prevent critical service disruptions when large numbers of staff are required to isolate.

	Registered Nurse	Licensed Practical Nurse	Continuing Care Aide	Enviro. Service Worker	Rec Worker
Acute	15	10			
LTC	5-10	5	15	5-10	2
Total	20-25	15	15	5-10	2



## Service Slowdown Plan – Summary

- Targeted approach to minimize patient impact and maximize staff for redeployment
- Not a broad reduction across service lines like Spring slowdown

Partial Service Slowdowns	Full Services Maintained			
<ul> <li>Primary Health Care</li> <li>Surgery         <ul> <li>Urban electives slowdowns</li> </ul> </li> <li>Endoscopy/Cystoscopy</li> <li>Women and Children's         <ul> <li>Programming</li> </ul> </li> <li>Diagnostics</li> <li>Therapies</li> <li>Ambulatory Care</li> <li>Registration</li> <li>Environmental</li> <li>Food and Nutrition</li> <li>Continuing Care – Rehab Services</li> <li>Home Care Services</li> </ul>	<ul> <li>Mental Health/Addictions</li> <li>Neurology</li> <li>Cardiology</li> <li>Long-Term Care</li> <li>Pediatric Orthopedics</li> <li>Cast Clinic</li> <li>Labour and Delivery</li> <li>ICU, PICU, NICU</li> <li>Breast Health Center</li> <li>Palliative Care</li> <li>Medicine Services</li> <li>Pharmacy Services</li> </ul>	<ul> <li>Surgeries         <ul> <li>Urgent, emergent and cancer</li> <li>Some elective surgeries</li> <li>Contracted surgical services</li> </ul> </li> <li>COVID Services         <ul> <li>Testing and Assessment Sites</li> <li>Virtual Care</li> <li>ASIS</li> <li>Contact Tracing</li> <li>811</li> </ul> </li> </ul>		



### Redeployment Resources - Summary

	RNs	LPNs	CCAs	ESWs	Rec. Worker	Other	Total
North	19	15	1	0	0	89	124
S'toon	55	18	5	10	6	60	154
Regina	34	14	0	0	0	55	103
Rural	67	27	9	2	5	97	207
Total	175	74	15	12	11	301	588 FTEs

- 588 FTEs are only the resources identified for redeployment through service slow down.
- Exponential increase in hospitalizations + ICU admissions + contact tracing needs far exceed this amount.
- Additional resources are being obtained through supplementary workforce (Gov't of Sask staff, Federal Gov't Stats Can staff, etc).

## Longer Term

- Continually assess *every week* based on modelling and case trajectory need for slowing down or resuming services.
- SHA to take a "dimmer switch" approach over the longer term, scaling up and down services as required for robust pandemic response while maintaining non-COVID services as much as possible.
- Changes in service delivery *may vary by area* of the province, so local communications will be deployed as required.
- Rapid and effective distribution and delivery of COVID vaccine, prioritizing key populations (vulnerable populations, health care workers). Ministry of Health led planning underway.



## Key Messages

- Safety of our patients, residents and health care workers is our #1 priority
- Committed to:
  - ✓ Maintaining non-COVID services as much as possible.
  - ✓ Keeping service disruptions as localized, targeted and timelimited as possible
  - ✓ Staging surges & slow downs to meet demand
- Protecting the health care system is in the public's hands, we need their help







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#### Healthy People, Healthy Saskatchewan

The Saskatchewan Health Authority works in the spirit of truth and reconciliation, acknowledging Saskatchewan as the traditional territory of First Nations and Métis People.