

July 29, 2020

TO: All Staff, Medical Staff, Contracted Staff at Holy Family Long Term Care

**FROM: Dr. Patty Daly, Chief Medical Officer for VCH and PHC
Karin Olson, Chief Operating Officer, Vice President, Coastal, VCH
Dr. John Harding, Medical Health Officer, VCH**

Provincial Health Officer Dr. Bonnie Henry’s daily release of information today included the following update on Holy Family’s outbreak:

Facility name	Type of facility	HA	Declared over	Total number of cases	Total number of deaths		Number of resident cases	Number of resident deaths	Number of staff/other cases	Number of staff deaths
Holy Family Hospital	Long term care facility	VCH	No	88	19	53	19	35	0	

As the table shows, there has been no change to the status since yesterday; 53 residents and 35 staff members have been diagnosed with COVID-19 to date at Holy Family Hospital.

Three residents remain in hospital, two of whom are COVID positive and one COVID negative; none of them are in the ICU. No staff are in hospital. One more resident has been cleared of COVID, bringing the total to 26, and one more staff member has been cleared, bringing the total to 30.

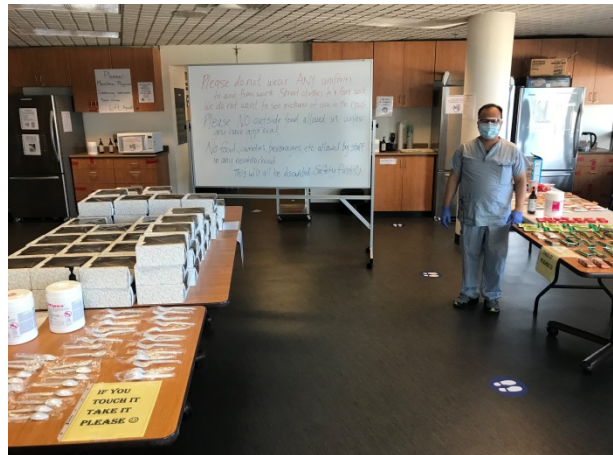
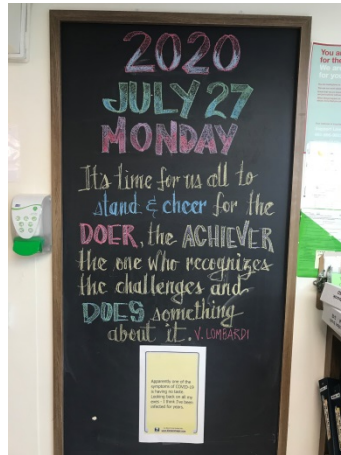
Throughout this outbreak, all of you have had to walk a fine line between staying positive and looking forward to ending the outbreak while ensuring you remain vigilant in your practice and not let your guard down. Your continued dedication and approach to this work is resulting in good progress. **We haven’t had a resident have a positive test result since Friday, July 24.** Holy Family staff need to collectively give credit to each other for such mini-milestones, and use this to continue building momentum. For us to have ongoing success, we cannot get complacent.

Special Gratitude for HF LTC’s Rehab Team

Throughout the Holy Family LTC outbreak, ensuring we’re at full staffing complement has been a key success factor in our continuing progress. Staff, medical staff and contracted staff all have had to work as a well-coordinated and integrated team, helping establish and sustain all our new processes and protocols.



Today, we want to especially point out the ongoing contributions of our excellent recreation and rehab team, which continues to work one-on-one with residents to promote ability and function, as well as to provide support with meals, toileting and exercise. And team members continue to assist with regular cleaning and maintenance of wheelchairs, cushions and other equipment.



They even do the fancy calligraphy and messages of the daily staff board (pictured above left). Kudos and thank you to all team members. You are a highly valued and integral team!

Reminder: Use of Showers/Bathroom Trailer

All staff are reminded that the shower and bathroom trailer is for post-shift use only.

Moral Distress at the time of COVID

Moral distress can occur when staff feel like they are unable to “do the right thing” — to act and work ethically. Some of us experience these feelings under normal working circumstances, like when we discharge patients to suboptimal conditions because of inadequate community resources or space pressures, or when cannot give our residents enough time and attention because we have to respond to other essential tasks.

During our current COVID-19 pandemic, the person and family centred care that is normally at the heart of our ethical practice will be challenged by the need to protect the health of the community at large. Because of this, clinical decisions will be made in a different way, with different ethical thinking and may result in outcomes that we would find unimaginable under normal circumstances.

When we experience moral distress, staff sometimes have difficulty sleeping and feel physically unwell, emotionally drained, frustrated and guilty.

Staff may experience greater moral distress as our teams struggle to balance the interests of our residents and patients with public health considerations. It is important to attend to the feelings that arise and reach out to others to talk them through.

Some online resources that might be helpful include:

- Oncology Nursing Society: <https://voice.ons.org/news-and-views/cope-with-moral-distress-by-focusing-on-the-possibilities>
- American Association of Critical Care Nurses, 4As to Rise Above Moral Distress: [https://www.emergingrnleader.com/wp-content/uploads/2012/06/4As to Rise Above Moral Distress.pdf](https://www.emergingrnleader.com/wp-content/uploads/2012/06/4As_to_Rise_Above_Moral_Distress.pdf)
- Healthy Nurse/Healthy Nation blog: <https://engage.healthnursehealthynation.org/blogs/8/531>
- The [PHC Ethics Services Team](#) is available to support teams to work through moral distress, and can provide information about the [COVID-19 Ethical Decision-Making Framework](#) of pandemic response to increase understanding of this shift in ethical thinking. **Staff can also receive help by utilizing the supports listed below.**

STAFF SUPPORTS:

Your wellness is important & you are not alone:

- Email: covidwellness&support@providencehealth.bc.ca
- Support Line: 604-806-9925 or ext. 69925
 - Provides call-back option, including evenings and weekends
 - To speak with a colleague who is trained to provide Psychological First Aid (PFA) (this is not a crisis line). The voicemail and email will only be checked Monday-Friday between 0830-1630.
 - Supports include:
 - Virtual/remote availability PHC trained PFA employees/Psychologists
 - More Urgent Emotional Support: Contact EFAP 24/7: 604-872-4929 or 1-800-505-4929
 - PHC Occupational Health & Safety: Contact Sandy Coughlin, OH&S Director – 604-341-6272