

**PROGRAM: Women's and Children**

**CAMPUS: Metropolitan**

**Last Updated: April 3, 2020**

<b><u>SERVICE</u></b>	<b><u>DESCRIPTION OF CHANGE</u></b>	<b><u>NUMBER OF BEDS CREATED</u></b>	<b><u>STAFFING AVAILABLE (RNS, RPNS ETC)</u></b>
<p><b>Family Birthing Center</b></p>	<ul style="list-style-type: none"> <li>• Pregnant women will enter and be screened through the Main Entrance.</li> </ul> <p><b>Asymptomatic patients</b> will proceed to OBT.</p> <ul style="list-style-type: none"> <li>• 2E will house asymptomatic patients in labour and asymptomatic patients requiring Caesarian sections.               <ul style="list-style-type: none"> <li>• After giving birth these patients will be transferred to 2N</li> </ul> </li> <li>• 2N will house asymptomatic antepartum and postpartum patients.</li> <li>• Healthy newborns should be discharged with their mother within 24-48 hours after vaginal birth/ caesarian birth.</li> </ul> <p><b>Symptomatic patients</b> or those having exposure will patient will proceed to OBT Room 2341.</p> <ul style="list-style-type: none"> <li>• 2W will house symptomatic patients in labour and antepartum patients requiring hospitalization</li> <li>• Caesarian sections scheduled /urgent of symptomatic patients will be done in the OR               <ul style="list-style-type: none"> <li>• STAT Caesarian sections will be done in the tented OR on 2e</li> </ul> </li> <li>• Ill patients requiring ICU/ventilation will be transferred to ICU if appropriate.</li> </ul> <p>Healthy newborns with ill mothers should be discharged home to the care of a responsible adult within 24- 48 hours after a vaginal birth / caesarian birth</p> <p style="text-align: center;">Visiting</p> <p>Only 1 visitor / patient in labour and through post-partum stay.</p>	<p>0</p>	<p><b>Days 0700-1500</b>            20 RN            1 RPN            4 Unit Clerks            1 Unit Aide</p> <p><b>Evenings 1500-2300</b>            19 RN            1 RPN            3 Unit Clerks            1 Unit Aide</p> <p><b>Nights 2300-0700</b>            18 RN's            1 RPN            1 Unit Clerk            1 Unit Aide</p> <p>RPN staff reallocated to surgery to assist with surg.</p> <p>Evolve staff returning Tracie Delaurier</p>

<p><b>Maternal Newborn Clinic</b></p> <p><b>Women's Health Clinic.</b></p>	<p>Patients screened at Main Entrance Clinic visits for <b>ONLY</b> urgent/emergent follow ups including, infant lab work, infant &amp; mother assessments.</p> <p>Patients screened at Main Entrance</p> <ul style="list-style-type: none"> <li>• <b>Asymptomatic patients</b> proceed to 2<sup>nd</sup> floor Women's Health Clinic</li> <li>• <b>Symptomatic patients</b> or those having exposure proceed to OBT Room 2341 Separate FBC staff will be assigned these potential positive patients</li> </ul>	<p>0</p>	<p><b>Days 0800-1600</b> 2-3 RN's</p>
<p><b>NICU clinics</b></p>	<p>Relocated to Pediatricians offices</p>	<p>0</p>	<p>1 RN/2 Clerical</p>
<p><b>Inpatient Paediatrics</b></p>	<p>All children will be screened in Emergency and proceed to 3 east – 16 beds includes 4 negative pressure rooms. A dedicated Pediatrician will be assigned to this unit.</p> <p style="text-align: center;"><b>PLAYROOM</b></p> <p style="text-align: center;">CLOSED for the duration of the pandemic.</p> <p style="text-align: center;"><b>VISTING</b></p> <p>1 visitors/ patient and it's the same 1 visitors. A parent or substitute decision maker is able to stay with each child is essential. When a parent or substitute decision maker is not able to stay with the child a consent for provision of care should be obtained upon admission.</p>	<p>0</p>	<p><b>Days 0700-1500</b> 5 RN's 1 Unit Clerk 1 Unit Aide (10-18) <b>Evenings 1500-2300</b> 4 RN's 1 Unit Clerk (15-20) <b>Nights 2300-0700</b> 4 RN's</p> <p>Metabolic RN x2 Orientated to unit able to take inpatient assignment</p> <p>Utilizing OP staff x4 on inpatient unit or NICU as required</p>

<b>Outpatient Paediatric</b>	All outpatient activities will be CANCELLED. Satellite Oncology Clinic (POGO) will continue to operate. Toronto will not dictate care /care levels but are available to support WRH POGO as needed.	0	<b>Days 0600-1800</b> Shifts vary during these hours 5 RN's total
<b>NICU</b>	<p>NICU should remain a clean unit.</p> <ul style="list-style-type: none"> <li>• Infants of moms who have a negative screen will be admitted to 1 of the 5 NICU pods – <b>20 beds</b></li> <li>• Infants of mothers who have a positive screen will be admitted to one of the <b>8 NICU isolation/segregation rooms</b> - and remain isolated until negative culture are obtained or condition stabilizes and the infant can return to mother's room or discharged home</li> </ul> <p>A separate cohort of NICU RNs will be assigned to the isolation/segregation area for the duration of the pandemic.</p> <p style="text-align: center;"><b>VISITING</b></p> <p>Only individuals who are asymptomatic will be allowed in the NICU 1 visitors / infant and it's the same 1 throughout the infants stay</p> <p>Parents who are infected with the virus will be unable to visit in the NICU– alternative communication plans to be developed to provide parents with updates regarding their infant's condition</p>	8	<b>Days 0700-1900</b> 8 RN's  <b>Nights 1900-0700</b> 7 RN's  1 RN from Neonatal Follow up orientated to unit able to take assignment  Paeds/FBC staff available to take in-patient assignment as required