

Windsor Regional Hospital – Current Snapshot



Census as of 10 AM Today

Met Campus - 112%
Ouellette Campus - 110%

Other Statistics

- Number of patients admitted BUT waiting for an inpatient bed to become available –
 37 ANBs
- Just to put in context October 1 2019 to present we averaged 7 ANBs per day.
 It is NOW almost 30 a day.
- Number of Alternative Level of Care (ALC) 34

Windsor Regional Hospital – Current Snapshot



Since October 1, 2022

Influenza

- 7 adults admitted
- 1 paed patient admitted

RSV

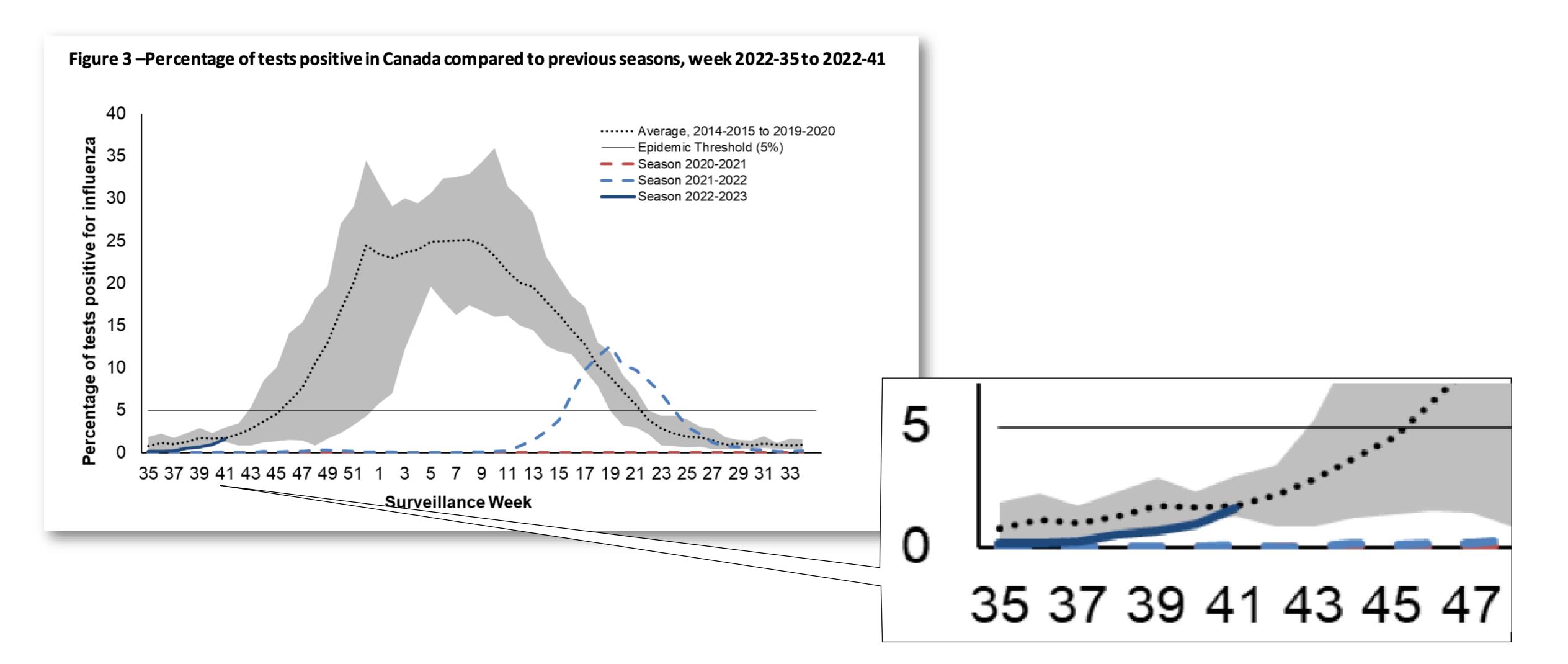
41 positive for month of October

COVID-19

71 positive coming to hospital month of October

Windsor Regional Hospital – Current Snapshot





Windsor Regional Hospital – Overall Staffing 2019 compared to current and other Data Points



- ✓ Added close to 400 FT staff currently as compared to 2019. It varies between 350 and 400.
- ✓ Added 53 acute care beds. 18 of them UNFUNDED BUT operational.

From EMS report - "In review of the call data for transports to the regional acute care hospitals for the period 2018 to 2022 (ytd) we see a stable volume, with a slight decrease in 2020 (COVID)"

Here is the difference we <u>ALL</u> have to adjust to –

- Only doing maximum 70% of surgery volumes currently we did in 2019 (shows beds are not being occupied by surgical patients)
- ➤ In 2019 admitting 15% patients a day from the ED....in 2022 admitting 20% patients a day from ED....5 more patients a day being admitted in 2022
- > The patients being brought to hospital by EMS are also sicker. ~5% higher admission rate then in 2019.
- ➤ LOS in 2022 is 2 days longer per patient then in 2019 (8 versus 6 days). That is ALL 500+ patients staying an average 2 days longer
- ➤ That is why we are operating at 100%+ capacity, close to 60 more acute beds then 2019 and also only 70% surgery volume 2019, plus averaging ~30 ANBs every morning
- > ALCs are some of the lowest levels in Province

Windsor Regional Hospital – Example of Changes



Starting October 1 added ER Physician in Triage from 1300-2300 hrs x 7 days per week every day through Oct and Nov at both campuses

Starting in Aug added Internal Medicine Physician 1500-2300 hrs approximately 50% of days to see patients direct from triage both campuses

Vaccination Clinics



MET CAMPUS:

First Floor Lobby (in front of switchboard) NOW to Thursday, November 3, 2022 8:30am - 10:45am / 12:15pm - 3:30pm

OUELLETTE CAMPUS:

Vendor Area (1st floor above Tim Hortons) NOW to Thursday, November 3, 2022 8:30am - 10:45am / 12:15pm - 3:30pm

Also, we continue to offer **Pfizer Bivalent COVID-19 booster vaccinations**. Please go to https://www.wrh.on.ca/StaffBooking to book your appointment and enter your information. Any staff can book as long as they are 3 months past their last COVID vaccine.



What is RSV? What is Influenza? What is COVID?

Who do they impact?

How can we avoid them?

If we acquire them what can we do?



What is RSV?

- Respiratory syncytial virus (RSV) was discovered in 1956 and has since been recognized as one
 of the most common causes of childhood illness.
- It causes annual outbreaks of respiratory illnesses in all age groups. Circulates during fall, winter, and spring, timing and severity of RSV season can vary from year to year.
- Scientists are developing several vaccines, monoclonal antibodies, and antiviral therapies
- It is transmitted when virus droplets from a cough or sneeze get into your eyes, nose, or mouth You touch a surface that has the virus on it, like a doorknob, and then touch your face before washing your hands- RSV can survive for hours on hard surfaces
- You have direct contact with the virus, like kissing the face of a child with RSV
- People infected with RSV are usually contagious for 3 to 8 days but may be as long as 4 weeks
- Children are often exposed to and infected with RSV outside the home, such as in school or child-care centers.



High Risk Populations:

- Premature infants,
- Children younger than 2 years of age with chronic lung or heart conditions, and
- Children with weakened immune systems
- Children with neuromuscular disorders, including those with difficulty swallowing or clearing mucus
- Parents of children at high risk for developing severe RSV disease should
 - Avoid close contact with sick people
 - Wash their hands often with soap and water for at least 20 seconds
 - Avoid touching their face with unwashed hands
 - Limit the time they spend in child-care centers or other potentially contagious settings, especially during fall, winter, and spring
- Chronic lung and heart disease, asthma, congestive heart failure
- Adults 65 and over



Symptoms of RSV:

- Rhinorrhea/Runny nose
- Decrease in appetite
- Cough usually develops one to three days later
- Soon after the cough develops, sneezing, fever, and wheezing may occur
- In very young infants, irritability, decreased activity, and/or apnea may be the only symptoms of infection
- Most adults usually have mild or no symptoms- rhinorrhea, pharyngitis, cough, headache, fatigue, fever
- Older adults (65 and over), those with chronic lung or heart disease and those with weakened immune systems may experience of lower respiratory tract infections such as pneumonia



RSV Treatment:

- Most RSV infections go away on their own in a week or two.
- There is no specific treatment for RSV infection
- Some children may require hospitalization, hydration and airway support including mechanical ventilation
- Manage fever and pain with over-the-counter fever reducers and pain relievers, such as acetaminophen or ibuprofen. (Never give aspirin to children.)
- Drink enough fluids. It is important for people with RSV infection to drink enough fluids to prevent dehydration (loss of body fluids).
- Talk to your healthcare provider before giving your child nonprescription cold medicines. Some
 medicines contain ingredients that are not good for children.

^{*}Call your healthcare professional if you or your child is having difficulty breathing, not drinking enough fluids, or experiencing worsening symptoms.



RSV Prophylaxis:

- Ontario has an RSV Prophylaxis program for High Risk Infants
- Ministry covers the cost of the drug palivizumab used to prevent severe lower respiratory tract
 infection in infants less than 2 years of age and at high risk for disease
 - Prematurity
 - Down Syndrome/Trisomy 21
 - Lung disease, requiring oxygen or medical therapy
 - Congenital heart disease, congestive heart failure
 - Others at high risk of hospitalization and complications from RSV

Influenza



What is Influenza (also known as "flu")?

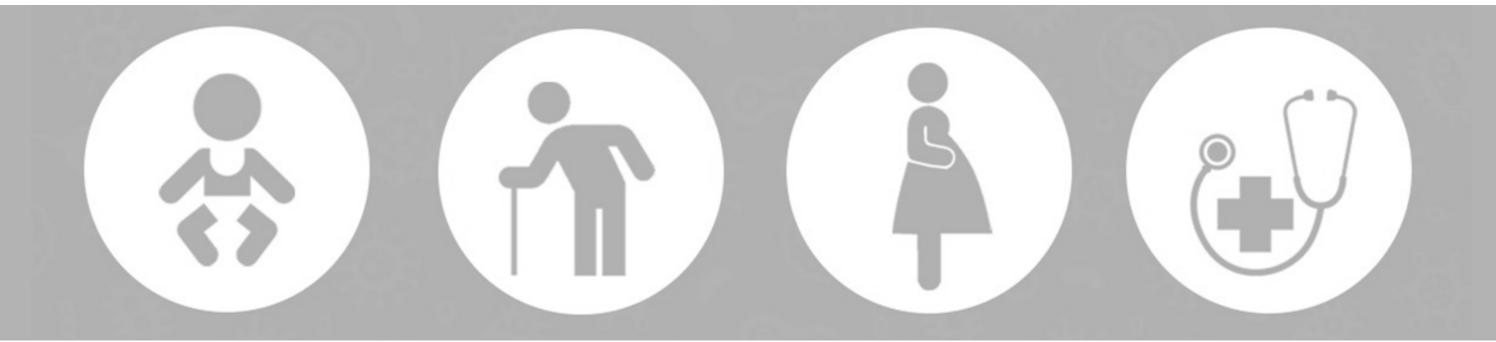
- A contagious respiratory illness caused by influenza viruses.
- Can cause mild to severe illness, and at times can lead to death.
- Flu viruses typically circulate during the fall and winter during what's known as the flu season.
- Timing and duration of flu seasons varies, but flu activity often begins to increase in October.
- Flu activity peaks between December and February, significant activity can last as late as May.
- Since the start of the COVID pandemic, the timing and duration of flu activity has been less predictable.

Influenza



High Risk Populations:

- Young children, those less than 6 months of age
- Pregnant people
- Those with chronic health conditions like asthma, diabetes, heart and lung disease
- 65 years and over
- Healthcare workers



Influenza



Symptoms:

- Flu signs and symptoms usually come on suddenly.
- Fever*/feeling feverish or chills- * Not everyone with the flu has a fever
- Cough
- Sore throat
- Runny or stuffy nose
- Muscle, body aches or headaches
- Fatigue (tiredness)
- Some people may have vomiting and diarrhea, though this is more common in children than adults.
- Most will recover in a few days to less than two weeks
- Some people will develop complications (such as sepsis, pneumonia, inflammation of the heart, brain, muscle tissue, and organ failure, and worsening of chronic medical conditions) as a result of flu, some of which can be life-threatening and result in death.

Emergency Warning Signs of Flu Complications



CHILDREN experiencing these warning signs should obtain medical care right away.

- Fast breathing or trouble breathing
- Bluish lips or face
- Ribs pulling in with each breath
- Chest pain
- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, dry mouth, no tears when crying)

- Not alert or interacting when awake
- Seizures
- Fever above 104°F
- In children younger than 12 weeks, any fever
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions

These lists are not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

Emergency Warning Signs of Flu Complications



ADULTS experiencing these warning signs should obtain medical care right away.

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest or abdomen
- Persistent dizziness, confusion, inability to arouse
- Seizures

- Not urinating
- Severe muscle pain
- Severe weakness or unsteadiness
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions

These lists are not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

Influenza - Treatment and Antiviral Drugs



- Most people with flu have mild illness and do not need medical care or antiviral drugs. If you
 get sick with flu symptoms, in most cases, you should stay home and avoid contact with
 other people except to get medical care.
- If, however, you have symptoms of flu and are at increased risk for complications antiviral drugs may be prescribed by your healthcare provider.
- Most otherwise-healthy people who get flu, however, do not need to be treated with antiviral drugs.

COVID-19



- Coronavirus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus.
- Most experience mild to moderate respiratory illness and recover without requiring special treatment.
- Some will become seriously ill and require medical attention.
- Older people and those with underlying medical conditions like cardiovascular disease, diabetes, chronic respiratory disease, or cancer are more likely to develop serious illness.
- Anyone can get sick with COVID-19 and become seriously ill or die at any age.
- COVID-19 spreads from an infected person to others through respiratory droplets and aerosols that can vary in size
- COVID-19 can also spread by touching something that has the virus on it, then touching your mouth, nose or eyes with unwashed hands.

COVID-19



High Risk Populations:

- older adult (increasing risk with each decade, especially over 60 years)
- are pregnant
- have Down syndrome
- haven't received all of your recommended COVID-19 vaccine doses
- have a chronic medical condition
- are immunocompromised
- live with obesity (if you have a body mass index [BMI] of 40 or more)

COVID-19 - Symptoms



Symptoms of COVID-19: can vary from person to person, in different age groups and depending on the COVID 19 variant. Symptoms start from 1 to 14 days after exposure. You can still spread the virus to others if you don't have symptoms.

- sore throat
- runny nose or sneezing
- new or worsening cough
- shortness of breath or difficulty breathing
- temperature equal to or more than 38°C
- feeling feverish or chills

- fatigue or weakness
- muscle or body aches
- new loss of smell or taste
- headache
- abdominal pain, diarrhea and vomiting
- feeling very unwell

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Call 911 or your local emergency number if you develop severe symptoms, such as:

- trouble breathing or severe shortness of breath
- persistent pressure or pain in the chest
- new onset of confusion

- difficulty waking up or staying awake
- pale, grey or blue-coloured skin, lips or nail beds

COVID-19



Prevention and Treatment:

- Evidence shows that the vaccines used in Canada are very effective at preventing severe illness, hospitalization and death from COVID-19. However, vaccines are not 100% effective and you may still become infected with or without symptoms. It's important to receive a primary series and a booster dose (or doses) when eligible for the best protection against COVID-19.
- Several different types of treatments for COVID-19 have been developed. Examples include drugs that reduce or stop the virus from multiplying in human cells and drugs that treat the symptoms of COVID-19.

Influenza (Flu) and COVID-19



What are the similarities and differences between Influenza (Flu) and COVID-19?

- Both are contagious respiratory illnesses, but they are caused by different viruses.
- COVID-19 seems to spread more easily than flu.
- Vaccines for both are critical to reducing the risk of severe illness and death.
- COVID-19 can cause more severe illness in some people than flu.
- People infected with COVID-19 may take longer to show symptoms and may be contagious for longer periods of time.
- You cannot tell the difference between flu and COVID-19 by the symptoms alone.
- People with flu and COVID-19 at the same time can have more severe disease than people with either flu or COVID-19 alone. Additionally, some people with COVID-19 may also be affected by post-COVID conditions (also known as long COVID).
- It is possible to be infected with the viruses that cause COVID-19 and Flu without experiencing any symptoms.

RSV, Influenza and COVID-19



Take everyday preventive actions that are recommended to reduce the spread of RSV, Influenza & COVID-19.

- Vaccination for Flu and COVID 19
- Avoid close contact with people who are sick.
- If you are sick, limit contact with others as much as possible to keep from infecting them.
- Cover coughs and sneezes. Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water or use an alcohol-based hand rub.
- Avoid touching your eyes, nose, and mouth.
- Clean and disinfect surfaces and objects that may be contaminated.

Data



