

## **Notes from Community Living British Columbia Conference Call – March 26, 2020**

While the community awaits a recording of the conference call being made available on the CLBC website, and in recognition of the needs of families for more information, ACT is making our notes from the call available. These have not been verified by CLBC so should be considered unofficial and are being offered in response to the many requests we are receiving for more information.

### **Michael Prince, CLBC Chair**

- Call will be recorded and put on CLBC website

### **Shane Simpson, Minister of Social Development and Poverty Reduction**

- Funding has been announced by the BC government for essential services for the province under Emergency Programs Act which encompass Community Living BC [CLBC] services.
- Of the \$5B commitment, \$2.8B will be provided to people.
- Be hearing more about government's plans in the upcoming days around lost income and Person with Disabilities benefits [PWD].

### **Dr. Danièle Behn-Smith, Fraser Health Region**

- Overview of COVID-19
- Population health goals: Protect the most vulnerable (65+, chronic health disease) & flatten the curve to preserve our health care system.
- Public health recommendations to prevent the spread: physical distancing (does not apply to household contacts), social isolation for those with symptoms, frequent hand washing & avoiding touching services, disinfectant & cleaning surfaces, especially high traffic items (doorknobs, light switches, handrails, etc.)
- Community transmission is happening, and testing is at its maximum capacity. We do not have the tests, or the lab capacity required to test everyone. Strategic testing is in place.
- Ethical concerns: Potential to overwhelm health system and as it is a global pandemic, supplies are in high demand and short supply (i.e. gowns, masks, gloves). Ethicists are advising government about who will be prioritized for medical interventions if not everyone can be treated.
- Although COVID-19 can be a severe illness, those who are in good health and are under the age of 65 are likely to have a mild course of the illness. About 80% of people.

### **Ross Chilton, CEO of CLBC**

- Health and safety have to be our first priority.
- Challenges associated with coronavirus have required changes to programs. Service providers advised to provide support in the home when possible. Families have brought their members home from group homes when they can. Everyone working to support each other to focus attention on those most in need of support.

- People with disabilities may find it hard to understand the guidelines for prevention and infection. Groups of 5 or less have been recommended.
- Many providers have modified services or are working to do so. A time like this shows how important the support network is. Has not been easy for them to make changes quickly, individual, families and home share needs need to be considered.
- Not everyone has families support or a network around them, home share providers taking on more responsibility to ease the burden on service providers.
- Over the next weeks/months, paying close attention to how the situation changes. Regular communication with families, advocates, home share providers in the meantime.

## Q & A

Questions not answered on this teleconference will be posted online. 2<sup>nd</sup> call to follow in 2 weeks

### **Q: From self advocate, “What do I do if I feel sick and I can’t get through to the 811 number?”**

A - Dr. Behn-Smith: Self isolate and maintain physical distance from others if possible. If you are feeling very unwell with shortness of breath, chest pain, change in colour, call 911. If you need immediate medical assistance, call 911. I know there has been a lot of mixed messaging as those with mild symptoms are asked not to go to the hospital to reduce the change of spread in the hospital. If you cannot reach 811:

- 1) Use the Online Self Assessment Tool through Health Link
- 2) Self assessment tool on App Store or Google Play. BC COVID-19 Support. Mayne resources, tips on physical distancing, going over hand hygiene and a variety of supports and resources. Tracking data for BC also available.

### **Q: From family, “What is being done to reduce the risk of infection for people that live in staff residential homes?”**

A - Chilton: We recommend the same as all homes: physical distancing, hand hygiene, cleaning and disinfecting shared equipment. Some of these directions can be difficult to have constantly applied with those struggling to understand the directions. We are working closely with the provincial health offices who are developing resources about controlling spread in residential environment.

A - Dr. Behn-Smith: These are close to being released. All things mentioned previously help reduce the spread. Regarding supplies, surgical masks or any physical barrier can be helpful to reduce how far droplets may travel if someone coughs or sneezes. Sick people should wear masks. For those who are not sick, wearing a mask does not offer much protection. People can self contaminate the mask. Masks are also in short supply - the provincial government has created a personal protection procurement group to help get masks to BC. Our overarching goals to protect the vulnerable and our healthcare workers will guide where the masks go when they arrive. I have raised the point of other groups out in the public when thinking about items like mask.

A - Prince: The guide will be published on website this week when it is available.

A - Dr. Behn-Smith: There is a lot of work happening trying to understand if masks aren't available, what the next best option is. The document coming will offer practical tips and thoughts around how to reduce the spread.

**Q: From self advocate, "Will the ministry increasing PWD payments during this crisis?"**

A - Simpson: People receiving PWD are not all in the same place – some are unemployed, some are supplementing with employment income. We are working closely with the federal government to ensure that people have the additional resources they need to meet their needs. We are trying to understand where those federal dollars are going to go so that our money compliments this. Yes, it is an issue. Yes, it is being worked on, and we will have more to come in the following days.

**Q: From family, "Why has CLBC directed service providers to deploy staff to family homes? Doesn't that increase the risk of COVID-19 for the families?"**

A - Chilton: In part, it stems from the fact that the providers that have day services have been working quickly to return people home. If they can be supported from home, it is the best place for them to be. The providers are to check in to help individual cope with isolation. They are asked to support them from home when they require that.

A – Dr. Behn-Smith: The goals around reducing the spread of the virus is to minimize the contact people are having. In that scenario, if the staff are performing hand hygiene and they do not have symptoms, the change of spread is quite low.

**Q: From self advocate, "I work and I receive PWD. I have lost my job and will apply for EI. Will I still get my full amount of PWD when I receive EI benefits?"**

A - Simpson: There are 20,000 people across the province that this will apply to. We recognize that earned income is an important part of people's livelihood and we want to make sure people are kept as supported as possible. We know there is the accelerated EI and the new federal benefit. We are trying to understand the difference between those and what ones apply for whom, how we create opportunities here so that people do not end up with less than they would get. It is very much an issue.

A - Galbraith: Just to add, we are working with our finance colleagues right now on this very issue. The federal shift was surprising, so we are working through what that means for our clients.

A - Simpson: We know what the time pressures are here. Cheques went out yesterday, but people will need certainty in the coming days. We are working with the financial team and hopefully we will have specific answer in the coming days.

**Q: From family, "Can a family member with IF payments pay themselves to provide support when support workers have resigned or cannot be found?"**

A - Chilton: The role of IF is to enable families to hire people to support them. It is our preference that the money be used to hire people to relieve the families themselves. I talked to Angela Kinsley last week about the support workers central website. She reassured me the platform is ready for an uptick in demand. These are extraordinary times however and if a family cannot find support, we will accept that families use this funding to support themselves as caregivers.

**Q: From self advocate, "Who can help me if I get sick and I need more support at home?"**

A – Dr. Behn-Smith: A lot of these points are going to be the same. If you are sick with mild illness, try to stay away from others as much as possible. If you have severe symptoms, try and dial 811 for guidance. If you can't get through and you have severe symptoms, call 911 for immediate help. On a provincial level, there is a team working on health and human resource issues to redeploy and handle staffing considerations, and encourage social organizations to develop contingency plans. I am not involved directly with that work, but staffing needs outside of direct health care setting are being considered.

A - Chilton: We want individuals to have access to the same health care support that all citizens get. The best place to be is at home with healthy people around you to help you get better. Agencies are working hard to be able to respond to that shifting need, but we don't want people who are mildly ill to go to hospital.

**Q: “Will CLBC service providers and staff be deemed essential services?”**

A - Simpson: Under the Emergency Measures Act, essential social and community services, including those who provide support through CLBC, will move forward as essential services. We as government will be ensuring we are continuing to provide the resources those organizations need to fulfill their responsibilities. We will be working collaboratively to adapt programs and services to deal with this health crisis and keep people as healthy as we can.

A – Chilton: It is reassuring to individuals, families and providers that this work is deemed essential. All 37 CLBC offices are still open with a skeleton crew so that people who need access can do so. Some offices may have signs advising that the front door is locked so please call in before visiting so you will be let inside.

**Q: “Some people need to get out of the house as part of their behaviour support plan. If there is a lockdown, will we need special permission to take people out for a drive?”**

A – Dr. Behn-Smith: From a population health perspective, lockdowns are not a recommended course of action. Physical distancing is advised. Being outside is a good thing for our health and mental health, but for physical exercise, not socializing. There will not be a full-on lockdown as it is not an effective public health measure; permission will be required. We recommend hand hygiene, coughing etiquette, and social distancing.

A - Chilton: For some individuals, it may be difficult to go for a walk and have them follow safety guidelines. It is better to go where there are no people and during hours when people are not out.

**Q: Can I apply to the gov to help shop for things I need and for rent?**

A - Simpson: We have announced several rent initiatives such as eviction protection. We are still refining this right now to determine what this looks like, especially for those on PWD. We have a wide range of crisis supplements available through the ministry for things like rent and other necessities. We are working to streamline processes to increase speed of access.

A - Galbraith: We are focusing all of our staff on our front line. We want to be sure our offices are open, and we have people on the phones at our contact centre. We are doing everything we can to help people get their cheques without coming into the office. We had an average response time of 4 minutes yesterday for call. Phone numbers and contact information can be found on the website.

**Q: “Will families lose individual funding if they cannot find support workers during this emergency? Can we roll over funds into then next year?”**

A - Simpson: No, they won't lose the money. Yes, we can roll this into the next year. They just have to let their CLBC contact know.

**Q: “When is it safe for caregivers who has experienced symptoms to go back to care giving?”**

A – Behn-Smith: Based on the most recent evidence from the population health operations group, when someone develops symptoms, that is the beginning of the period of contagiousness. That period seems to last up to 10 days. The guidance is that people who are sick should stay home or away as much as possible until they are feeling better and at least 10 days have passed. After 10 day, if they are feeling healthy, they are considered outside of their contagious period and they cannot spread the virus anymore. They may still have lingering symptoms but are not considered contagious.

**End**