Communications plan in case of the death of a healthcare worker

While we are in the midst of COVID-19, we must plan for the possible death of a member of our team to the virus. This communication plan hopes to offer some guidelines to prepare messaging and communications cascade if such a case arises.

A few assumptions:

- It would not be an unexpected death.
 - The HCW would first show symptoms and go into self-isolation, get positive results, condition would worsen, person gets hospitalised, then go to the ICU (where the person works, or not).
 - Occupational Health would have been in direct contact with the HCW, then possibly with the family once the condition worsens.
- In an ideal situation, the organization would have a few hours to liaise with the family and be allowed to release the name of the deceased, before the public health authority announces it.

Family liaison officer:

- The organization should try to assign someone as a **Family Liaison Officer** if they learn that the health of a staff member is taking a turn for the worse.
- The Family Liaison Officer could be from Occupational Health, the HCW manager, a colleague whoever is the right person to build and maintain a "human connection" with the family
- The Family Liaison Offer would try to keep the communication open while the HCW is hospitalised.

Liaison with Public Health authority after a HCW death:

- Ottawa Public Health (OPH) epidemiology team reviews hospital line list, and informs
 the case management team of the death of a HCW. They don't communicate that
 information to the institution: the institution would find out from the family.
- When a healthcare worker passes, OPH will be in contact with the institution to validate if they will issue their own message to the public.
- OPH would need to report on the death in a timely way but a news release would not be issued for every HCW, since the first one has already passed.
- If a HCW is working in Ottawa but residing in Quebec,
 - the Outaouais Public Health Authority would initially inform OPH of the HCW's positive results for tracing purposes;
 - the Outaouais Public Health Authority would inform OPH that a HCW working in Ottawa has passed away.
- OPH typically doesn't identify the individual that has passed, but may report that they
 were a HCW.

- The death will be included in the next OPH Epidemiology report. However, it may not always be acknowledged directly in the OPH media availability.
- OPH would direct any media inquiries to the institution.

Recognition

- Hospital flag at half mast
- Virtual or real book signing
- Minute of silence
- Wear a colour ribbon
- Online celebration of life
- Memorial Designate a place where staff can leave flowers and cards. Consideration on location to include understanding this space could be used for short to medium term. If not on unit, and is in corporate location, then consider it could be memorial for more than one, at some point
- Article in employee newsletter, framed and given to next of kin

Other interested parties:

- Unions and professional associations have been issuing condolences messages, sometimes before or with more details than the employer's condolence message.
- If the person was affiliated to a teaching institution (intern, resident, etc.), this organisation may also be issuing messages.

Sample messages

Note: note all messages mention that the person passed away from COVID-related complications.

Scenario 1:

The hospital has <u>not</u> been able to contact the family, or the family did not want the hospital to release the identity of the deceased.

NAME Hospital was notified that one of its healthcare worker tested positive for COVID-19 (when? 1,2 3 weeks ago etc.) and we now have the regret to announce the passing of this healthcare worker. We are deeply saddened by the loss of our colleague and send our thoughts to family and friends in these difficult times. Healthcare workers are on the front lines of fighting this virus and deserve the utmost respect and honor for doing their jobs.

We are following Ottawa Public Health recommendations and we have already contacted patients and employees who had direct contact with this person.

Another example:

We are deeply saddened by the passing of a beloved member of our nursing staff. The safety of our staff and patients has never been of greater importance and we are taking

every precaution possible to protect everyone. But this growing crisis is not abating, it has already devastated many families in the region and turned our frontline professionals into true heroes. Today, we lost another hero – a compassionate colleague, friend and selfless caregiver.

Scenario 2:

The hospital and the family are collaborating.

It is with great sadness that we write that NAME, a long-serving ROLE on SECTOR at NAME Hospital, sadly passed away on WEEKDAY at the NAME Hospital.

NAME, TITLE, said: "All our thoughts are with NAME's family at this time and we offer them our sincere condolences. She will be sadly missed by all those who knew and worked with her. I'd like to express my sincere gratitude to NAME for her dedication to her patients, colleagues and friends over many years."

(OPTIONAL) In honour of NAME, the hospital will lower its flag to half-mast this afternoon until TIME.

(INTERNAL MESSAGE) It is a difficult and anxious time for all members of staff, and we encourage everyone to look after one another in the days and weeks ahead. For anyone who is struggling, help is always available via the Staff Support Service – details can be found on the intranet.

Thank you to each and every staff member for your commitment, compassion and care, both to our patients and to one another – together we will get through this.

And here's another example:

A ROLE from the HOSPITAL in Ottawa has died after testing positive for COVID-19. NAME died in the hospital's Critical Care Unit late on DATE. She was AGE. (SHORT BIO NOTES.)

SECTOR manager NAME said the whole team had been left devastated by her death. She said: "She was such a kind and caring TITLE, and she had a really special relationship with her patients and colleagues.

SEVERAL TESTIMONIALS

NAME, VP, HOSPITAL, said everyone who worked alongside NAME was heartbroken at her death.

NAME, CEO, HOSPITAL, said the thoughts of everyone at the hospital were with NAME's family and friends.

(OPTIONAL) There will be a permanent memorial at the hospital to remember NAME and her care and commitment to her patients and colleagues. This will be arranged in discussion with NAME's family, friends and the staff who worked with her.

Communications cascade

Here's a communications cascade template.

TIMING TBC	STAKEHOLDER	TOOLS	DETAILS	STATUS
In advance of media reporting	Senior Leadership Team	Email/call	Notify of case and describe announcement to staff and public Request heavy leadership presence for next 2 days	
In advance of media reporting	Family Notification	Call by Family liaison Officer	Senior Leader and Family Liaison Officer call the family to share that it will be made public at TIME and with general details of what will be shared The family's decision will set the tone of the messaging	
In advance of media reporting	Leadership Call & Touch Base	Call	Notify of case and announcement to staff and public	
In advance of media reporting	Affiliated educational partner (if relevant)	Call	If the deceased was a student/intern/resident/clinical physician	
In advance of media reporting	Treating hospital (if relevant)	Call	If the deceased was not treated at the hospital where they worked	
In advance of media reporting	Unit Notification & Physicians	Huddles in-person	Unit Leadership will notify staff, offer support and share it will be communicated publicly later in the day	
In advance of media reporting	Corporate Services	Huddles in-person	Huddles with teams to provide reassurance of measures in place to keep staff safe	

TIMING TBC	STAKEHOLDER	TOOLS	DETAILS	STATUS
In advance of media reporting	Board Notification	Email	Notify of case and announcement and copy of all staff memo.	
In advance of media reporting	Foundation	Call	Share information	
In advance of media reporting	Evening/Weekend Leader On-Site Briefing	Memo	Brief evening/weekend leaders on details and ask to round across all units	
In advance of media reporting	Unions; Councils; Professional Staff Association	Call	Place brief courtesy calls to unions simultaneous to press briefing to reinforcePatient/Family Advisory committees the availability of hospital protocols in place to maintain staff safety and health	
In advance of media reporting	All Staff & Professional Staff, Learners and Volunteers,	Memo	Inform staff and reassure them of measures in place to keep staff and patients safe, reminder of protocols	
In advance of media reporting	Patient/Family Advisory committees	Email		
In advance of media reporting	Ottawa Public Health	Call	OPH will be in contact with the institution to validate if they will issue their own PSA OPH will only mention death of a HCW in Ottawa, no additional info (either in media availability or in Epidemiology report).	

TIMING TBC	STAKEHOLDER	TOOLS	DETAILS	STATUS
			All media enquiries will be forwarded by OPH to the organization	
	Media and Community	Web + social media channels	Post a full statement on hospital website + Hospital and CEO post condolences on social media channels	
	Media	Media briefing	Only if deemed appropriate under the circumstances	
	Cross Site Leadership Rounding	Memo	Leaders who are on site will round across all our sites on all units	
	Elected Officials Notification	Call or email	Share information	
	Partner Hospital Notification	Calls or emails	As part of hospitals ongoing collaboration	
	Evening Shift Rounding	Memo	Leaders will continue to be present across all sites and in the evening.	