Champlain Region increased activity: Phase 1 communications plan Objectives:

Build and maintain patient, physician, staff and community confidence in the regional approach to increasing care activity.

Create understanding of provincial framework, decision-making process based on fairness, equity and transparency and commitment to patient and staff safety.

Key Messages:

(see annex for further supporting messages for patient, staff, physicians, community)

- Work is being done in every department, in every hospital across the region, to increase services as safely, fairly and as quickly as the situation allows for as many people as possible.
- The pandemic has caused anxiety and stress for patients whose care has been deferred.
 Throughout the pandemic, hospitals have been delivering urgent and emergent care, with care providers constantly evaluating the care needs of people who are waiting and moving individuals into the urgent and emergent categories as needed
- The pandemic is not over; we are only in a new phase. Hospitals across the region remain vigilant to keep patients safe. It is safe to come to the hospital for your care. Patient safety is the region's top priority.
- Decisions about which services are increased and when will be guided by principles of fairness, equity and transparency.
 - You will be treated similarly to others who are similar to you, no matter what service you need or what part of the region you live in. Care teams make decisions on a case-by-case basis. They will also consider the risk of further delaying treatment.
- Hospitals in the region are collaborating to meet the <u>provincial framework</u> before increasing services. The criteria include:
 - regional occupancy (the number of patients in hospitals across the region) can't exceed
 85 percent of capacity.
 - PPE supply and staffing must be stable.
- The province acknowledges that meeting the <u>provincial framework</u> will take time and increasing care activity will occur slowly over weeks and many months. Decreasing care is possible if Covid-19 activity increases in hospitals

Tactics and Timelines

Week of May 25

<u>Patients:</u> holding line for physicians, admin assistants currently receiving calls (avail by end of day May 26, for dissemination to comms leads)

Staff/Physicians

- o prelim_email (in development or executed)
 - o FAQ creation (in development)
 - Scripts physicians/ admin assistants (in development)
 - Script for staff (in development)
 - o Script for Patient Relations/Ombudsman teams in hospitals (in development)
 - Script for clerks (in development)
 - Script for telecommunications (in development)

<u>Public</u>

- o Joint news release OR web statement (in development)
- o Media holding line (in development)

Other

o Email to Patient and Family Advisory bodies

Comms to follow:

- Early/ongoing planning work
- ethical framework explainer
- reinforce increased/decreased care message
- evolving process with real time evaluation and refinement
- regional IPAC and regional testing approach (once understood)

Spokespeople

<u>Internal Comms</u>: each CEO and CoS to respective audiences, and to comment on hospital-specific media requests/public statement

External Comms: case by case decisions with either local or regional spokes.

FOR CONSIDERATION

-share the Regional occupancy data and PPE supply publicly to create further understanding of complexity and constraints (exploring feasibility)