Subject: Single Site List- 01 May 2020

Good afternoon,

Over the past few weeks Island Health has been working closely with the Health Employers Association of BC (HEABC) and many of our affiliate and licensed providers of long-term care and assisted living to continue our work towards assigning staff to a single site in an effort to prevent COVID-19 outbreaks in these facilities. Thank you for your support in maintaining the initial staff assignments and providing greater clarity on your staffing needs, assignments and providing additional required data.

A key deliverable for us is the creation and maintenance of a master inventory of employees across the health sector and across occupations, including previous and current assignments. Data quality and consistency is varied and we are continuing to update, refine and clean-up data and sources to ensure a more accurate foundational asset. We have amassed a database of over 30,000 employee roles and assignments and we are now confident to share the first fulsome Site Report for employees associated with your site(s).

The attached report provides an extract from the database applicable to your site. This is a detailed view of all employees we understand to be assigned solely to your site, including applicable employee details. Next week we will be sending out a second part to this report, which will be your site dashboard: this will provide a summary view of your site, highlighting the number and type of staff required in your staffing model, the volume assigned and any variances between the two. This information is broken down by occupation and includes both a count of people and their associated FTE. Also included is the number of casual staff assigned to your site. Please note that if you did not submit a staffing model/plan for your site, some of the above data will not be included (if you have not submitted a staffing plan/model for your site- please reply to this email for a template).

We ask you to review the report, assess gaps and mitigation methods. First approach should be to work with those assigned to your site to try to increase their worked hours (e.g. part-time employees working closer to full-time, casuals working more regular assignments, etc.). In addition, you should continue to post and fill vacant positions. If risks and gaps continue following these actions, please connect with us to determine other mitigating strategies.

These reports represent the first step in a three-part process:

- Part 1 is to finalize employee assignments. Building on the work completed under the original MHO order, we need to complete the assignments of employees to each site, work through any revisions to assignments in order to address surpluses/deficits and to finalize assignments across all Restricted Sites.
- Step 2 is to seek regional approval of the assignments from our Medical Health Officer. This will follow the final assignments and include clarifications on issues related to exceptions, hiring, etc. likely reflected in a new or revised MHO order.
- Step 3 is to complete the employee-specific 'total compensation' adjustments required under the order. This will include any changes to FTE, wages, benefits, accruals etc. to ensure employees are kept 'whole' for the duration of the pandemic response.

These three steps are occurring in parallel and the Regional Working Group required under the order has been meeting frequently over the past few weeks to plan these details. More information will follow next week.

For some, this data may be familiar, as you have been working closely with us to share and refine the information over the past few weeks. For others, you may have more questions than answers. If you have a specific question, please email our Workforce Scheduling, Optimization and Business Solutions team at wsobs@viha.ca. If you have more than one question, please email us with a time you would be available to meet (virtually) and we would be happy to run through the details. At the current time, we are not adding new people to the database and I have been advising them that a process for additions and/or other routine updates will follow.

Thanks again for your patience as we continue to advance this important and extraordinary work, which will continue to protect our vulnerable clients and residents, and the teams who care for them.