

DEPARTMENT COVID-19 UPDATE #4 - March 19, 2020

To all members of the Department:

As pressures continue to build, I hope you are all coping and finding this regular communication helpful. These updates include information presented during the daily teleconferences that involve the leaders and administrators of our education, research and clinical programs, and which allow us to share information and look at opportunities for collective problem solving.

The issues facing us change each day. Amongst those that are now emerging are: Redeployment of our clinicians and learners; maintaining services for acute and urgent care and covering call; preparing now for times in the near future where increasing numbers of frontline staff may be unavailable; the importance of finding ways to support each other; and the need for clarity in areas where there may be some confusion about guidelines or expectations.

Maxine Lewis and Ellen Lipman both reported that there has been a terrific response from all faculty and learners when asked to step up and cover for colleagues who are away, or fill gaps as they emerge. It is greatly appreciated as this will be key to getting through the next few weeks. And my thanks to everyone who has been stepping up in ways none of us could have imagined at the start of last week.

Here are some recent developments:

Access to resources on our website - We have created a separate button on our website for COVID-19 which links to a page where we have grouped the different resources and documents we have received (please keep sending them to us) <https://psychiatry.mcmaster.ca/news-events/covid-19> It includes a link to the University's site <https://covid19.mcmaster.ca/>

The MD Program will be suspending clinical activities for 6 weeks. All second year students will have a 2 week vacation and after Easter they are looking at ways in which every discipline might be able to offer a 4 week elective. Plans beyond the middle of May remain under review. The current final year clerks finish their last rotation (including psychiatry) next week, with modified duties / expectations, followed by an exam after that to enable them to graduate this summer.

The Psychiatry Residency Program

StACERs – For residents on 3 month rotations who have been observed already, the StACER will be waived. For current 6 month rotations the requirement will be reduced to a minimum of 1.

Mock OSCEs have been cancelled in Hamilton and Waterloo. We will make sure that all PGY5s have an opportunity to complete a mock exam before the Royal College exam.

New Inpatient Call Experiences originally planned to come into effect on July 1st. will be deferred for the time being, with the goal of starting later in the coming academic year.

Psychotherapy patients for our Hamilton Residents are being registered via the ATRC so their sessions may continue via Virtual Dovetale, which has been very helpful and much appreciated. WRC residents are moving their psychotherapy to virtual care.

Senior's Mental Health rotations continue to look at consolidating placements due to reduction of most outreach programs.

OTN - Thanks to the diligent work of our residents, we think we have found a way for residents to get registered on OTN. There may still be a wait for an account due to volume.

Backup call rotas - We appreciate the work the residents have done in developing back up call rotas, and also for their flexibility and commitment with all that is going on.

The Ron Joyce Centre is now closed. Child psychiatry residents have been reallocated to in-patient units and some virtual outpatient care.

Psychology Residents at St. Joe's continue in their placements, but have been withdrawn from clinical services at HHS.

Fellows mostly come from abroad and are away from family and may have few supports. We are looking at ways in which we can provide additional support during the next few weeks, including the use of a WhatsApp group.

Support for our Indigenous partners - A conference call has been organized for Friday to look at ways in which we may be able to assist our Indigenous partners, who have fewer resources to enable them to handle the current health care challenges.

Clinical Diversion will become increasingly important as clinical demand grows. Connect is prioritizing urgent cases and looking at options for diversion and SJH is looking at additional telephone support to family physicians. Many faculty and residents have offered to help with this.

HR Issues - All staff will be paid until April 5th. and then we will need to look at people on contracts individually. The most up to date HR information can be found at <https://hr.mcmaster.ca/resources/covid19/>

Using Zoom and Web Ex for meeting - We continue to look for ways to make these platforms available as to members of the Department. If you have any questions contact Bev Pindar-Donick pindon@mcmaster.ca

Research - Arrangements have been made to maintain the Wetlab at W. 5th. and we are working with MiNDS and Clinical Psychology Program to meet the needs of their students.

The Vice-President Research's office has updated their research site to include the research-specific FAQs and some additional resource materials. The link below will direct you to information that is readily available. <https://research.mcmaster.ca/covid19/>

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Guidelines for research at FHS – Yesterday's Directive

- No research should continue with subjects that require face-to-face contact, unless these are on-going interventional or clinical studies that impact human health.
- No new animal-based research should begin; and completion of current, on-going animal studies to continue with some adaptations, in consultation with the Central Animal Facility.
- No initiation of new research experiments that require campus access, unless they are associated with emergency COVID-19 funding or involve activities focusing on patient health and safety. These plans need to be discussed in advance with Jonathan Bramson, FHS vice-dean, research (bramsonj@mcmaster.ca) and Karen Mossman, McMaster's acting vice-president, research (vprsrch@mcmaster.ca).
- Research that can be completed remotely (e.g. on line) that is not impacted by social distancing policies may continue.
- Researchers and groups must develop plans to close down existing research within university facilities on short notice, including plans for waste disposal and identification of essential services to maintain research samples, facilities and infrastructure where appropriate.
- For clinical trials and patient-based research, active accrual should be interrupted until further notice and no new studies should be started.
- Trials with scheduled interventions that have already begun should be allowed to continue as long as the individuals registered in the trial pass the active screening that will be in effect at our host hospitals until further notice.
- Questions regarding these directives should go to Jonathan Bramson or Tracy Arabski (arabski@mcmaster.ca).

Use of Ibuprofen (Advil) - There appears to be a link between the use of Ibuprofen by people with COVID-19 and an increased mortality rate. The WHO suggest it be avoided and other drugs used in its place. https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf?sfvrsn=6d3578af_8

Handwashing - Just as a reminder, I am attaching a copy of a video demonstrating the WHO's method for washing your hands <https://www.youtube.com/watch?v=3PmVJQUcm4E>

Travel between sites - All travel between sites is being kept to a minimum and should be avoided, except when necessary for clinical work or coverage.

Supporting each other - This is a stressful time for all of us, particularly if we are apart from families or key supports or have additional health issues in themselves or a family member, especially if we find ourselves working in relative isolation. To help us manage this, we will continue to list self-help materials on our website such as the helpful tip sheet created by the peer mentors at the Youth Wellness Centre, or the wellness resources our residents have prepared, so please keep sending links or things that you think may be helpful to Bev.

Karen Saperson will also be leading a (virtual) working group to come up with ideas for helping to reduce the stress and isolation and we will be circulating these as they are identified. If you are interested in joining the working group or have any suggestions please contact Karen directly Saperson@mcmaster.ca Perhaps we could build on the concept of "caremongering" <https://www.bbc.com/news/world-us-canada-51915723>

And just to finish on a lighter note, my son, who is a pilot, has been told by his airline that no, he definitely can't work from home.

Nick Kates