



COVID-19 PANDEMIC (SARS-CoV-19)

After-Action Review (AAR) Report

Executive Summary

July 2024



Thunder Bay Regional
Health Sciences
Centre

STRATEGIC PLAN



Exceptional **care** for
every patient, every time.



Background

In March 2020, Thunder Bay Regional Health Sciences Centre (TBRHSC) activated its Incident Management System (IMS) in response to the COVID-19 pandemic. The activation remained in place until transitioning to normal Senior Leadership Council operations in

March 2023; coinciding closely with the declaration of the end of the pandemic on May 4, 2023. This marked the most significant prolonged incident response TBRHSC had ever faced, with hospital operations changing rapidly to respond to the needs of our patients, staff, community,

and region (see *COVID-19 By The Numbers on page 5, and Incident Timeline on page 5*). To evaluate the response, TBRHSC conducted an internal COVID-19 Pandemic After Action Review (AAR) as required by Accreditation Canada.

After Action Review

The AAR project team reviewed best practice documents in order to develop a suitable review approach for TBRHSC with project objectives as follows:

- Provide opportunity for participants to express their thoughts, feelings, and insights related to TBRHSC's COVID-19 pandemic response.
- Identify response activities that were effective and well managed.
- Highlight valuable innovations that have been incorporated into hospital operations.
- Identify opportunities for response improvement.

- Provide recommendations for future emergency response

As a result, the methods selected included an initial document and data review period, followed by selective surveying of internal staff, circulation of an external stakeholder survey, and face-to-face interviews with key Incident Management Team (IMT) members. The entire review process took place between September and December 2023.

It is important to note that an AAR could not fully capture all of the data and detail in relation to this protracted emergency response, though it aimed to identify and evaluate key

activities in order to promote emergency preparedness best practice.

Approximately 150 participants responded from across all methodology types; 70% having been employed by the organization for more than 10 years. This means that the majority of respondents had experience with the organization before, during, and after the pandemic, allowing participants to apply significant institutional and operational knowledge to their responses.

Recommendations

As part of the AAR process, twenty-nine (29) recommendations were identified and grouped into the following themes:

1. Leadership
2. Emergency Preparedness
3. Innovation
4. Wellness and Safety
5. Communications
6. External Partnerships

Although multiple recommendations were identified under each theme, the following recommendations are being presented for the purpose of this report executive summary:

1. Develop the Influenza-like Illness Response Guide and review on an annual basis. During review it will be determined if additional leadership discussion

or training is required to increase pandemic emergency preparedness. As new processes are developed, they must be incorporated into the Guide.

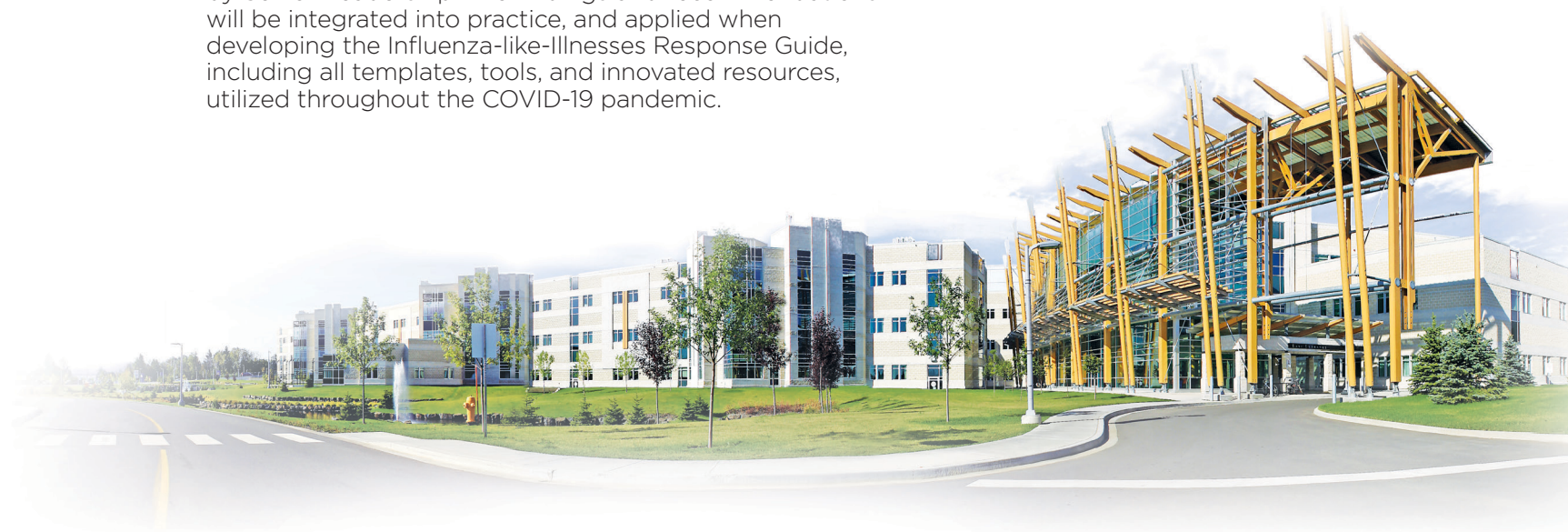
2. Additional and periodic Incident Management System (IMS) refresher training is required for all members of leadership who are anticipated to hold positions within the IMS for any emergency response.
3. Mental health focused debriefing and professional support must be normalized across the organization, with consideration for both individual and team sessions. As such, TBRHSC should develop an incident debriefing process.
4. Continue to maintain multiple communication resources, both internal (e.g., dedicated response intranet page) and external (e.g.,

social media), and adopt new modes and tools (e.g., WebEx virtual meetings) as they become available.

5. Maintain robust partner relationships developed throughout the COVID-19 response, to foster ongoing proactive communication and interoperability related to pandemic preparedness and response. Advocate for continued participation and ongoing activity as related to key cross-sectoral/multidisciplinary working groups, established during the pandemic.
6. Execute a COVID-19 tribute to all staff, to recognize and acknowledge the work that went into responding to the pandemic, led by Senior Leadership Team.

Next Steps

Each of the 29 recommendations will be delegated to the most appropriate associated department(s), executed throughout the organization as appropriate, and overseen by Senior Leadership. The findings and recommendations will be integrated into practice, and applied when developing the Influenza-like-Illnesses Response Guide, including all templates, tools, and innovated resources, utilized throughout the COVID-19 pandemic.





Note of Gratitude

The Hospital and Research Institute are deeply grateful to the community, patients, care providers and families for the tremendous support, encouragement and adaptability throughout the COVID-19 pandemic as we supported clinical operations. In preparing this report, it is recognized that COVID-19 continues to impact our operations, however over the last few years and through extended partnerships with many of our health care providers, we are able to sustain our operations.

COVID-19 By the Numbers

March 2020 - May 2023

\$43.8

MILLION Spent on COVID-19 response



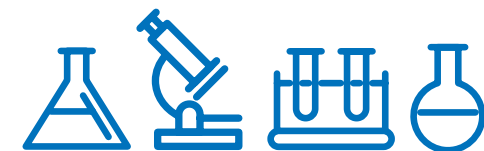
53,000

Vaccinations were administered through the Vaccination Clinic



109,354

Tests were administered through the Assessment Centre and in-house priority testing



60,120

Tests were processed by Laboratory Services

COVID-19 PCR test take

<4

HOUR turn-around time



2



MILLION isolation gowns

4



MILLION procedure masks

53,000



Goggles purchased

3000



Goggles reprocessed per week

Did you know?

The Assessment Centre trailer implemented in the Emergency Department parking lot up and running in only

5

DAYS



Did you know?



to implement the COVID-19 Unit each time our Hospital needed to activate it

48

HOURS

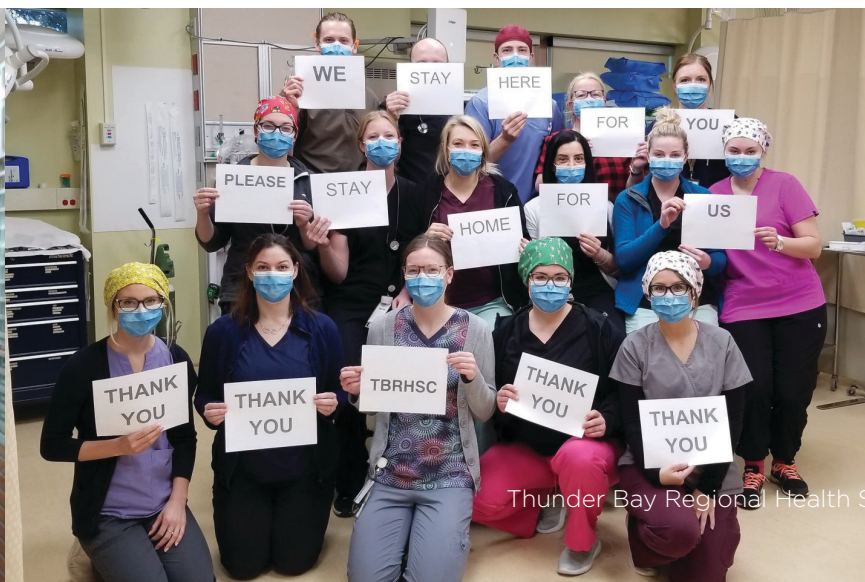
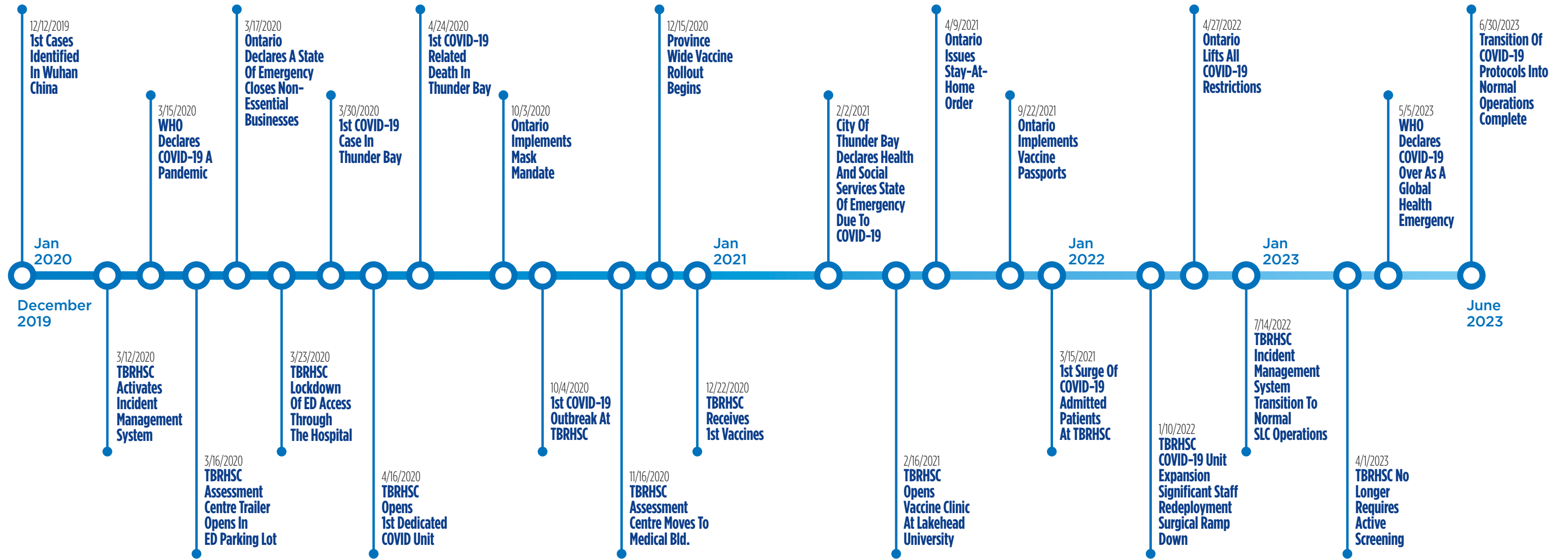
Did you know?

>200

Hospital staff were redeployed

COVID-19 Key Event Timeline

TBRHSC COVID-19 After-Action Review





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