

Supplementary materials

Supplementary Box 1

Question guide to leaders involved in identified themes
<ul style="list-style-type: none">• What were the operational initiatives and strategies that kept RVH prepared and successful for the COVID-19 pandemic?
<ul style="list-style-type: none">• What was the reason and purpose behind each operational initiative?
<ul style="list-style-type: none">• Was there formal guidance available to help with establishing the initiative?
<ul style="list-style-type: none">• What strategies did you use to make the initiative a success?
<ul style="list-style-type: none">• Were there barriers to implementing the initiative?
<ul style="list-style-type: none">• What were the strengths and weaknesses of the initiative?
<ul style="list-style-type: none">• What were the lessons-learned from the initiative?
<ul style="list-style-type: none">• What guidance would you provide peer hospitals so that they can be successful in the event of a future pandemic?

Supplementary Table 1: Absence Scenarios document for healthcare workers during the COVID-19 pandemic

Note, definitions (e.g., “exposure”, “self-isolate”) and worker compensation have not been provided, as they may differ among organizations

SCENARIO 1: Healthcare worker (HCW) displays COVID-19 symptoms or receives a positive COVID-19 test

If at home, stay home:

1. Self-isolate
2. Immediately contact your direct leader and staffing office via email or phone
3. Immediately contact Occupational Health and Wellness (OHW) via email or phone; an OHW nurse will conduct a telephone assessment and discuss next steps

If at work:

During OHW hours of operation and you develop COVID-19 symptoms:

1. Social distance from others, continue to wear a surgical/procedural mask and eye protection, ensure your work is handed off safely, and leave the unit as quickly as possible
2. Immediately contact your direct leader from your personal phone (to limit potential contact transmission to a public phone)
3. **If at the main hospital campus:**
 - a. Report in person to OHW for immediate assessment; an OHW nurse will provide next steps, including direction on return to work, testing requirements/results, and COVID-19 information
4. **If at a remote hospital site:**
 - a. Return home, self-isolate, and immediately contact OHW via email or phone; an OHW nurse will conduct a telephone assessment and discuss next steps

During OHW hours of operation and you are notified of a positive COVID-19 test:

1. Social distance from others, continue to wear a surgical/procedural mask and eye protection, ensure your work is handed off safely, and leave the unit as quickly as possible
2. Immediately contact your direct leader from your personal phone (to limit potential contact transmission to a public phone)
3. Return home and self-isolate
4. Immediately contact OHW via email or phone; an OHW nurse will conduct a telephone assessment and discuss next steps

During OHW closed hours and you develop COVID-19 symptoms or are notified of a positive COVID-19 test:

1. Social distance from others, continue to wear a surgical/procedural mask and eye protection, ensure your work is handed off safely, and leave the unit as quickly as possible
2. Immediately contact your direct leader and/or delegate, health services leader, and staffing office from your personal phone (to limit potential contact transmission from a public phone)
3. Return home and self-isolate

4. Immediately contact OHW via email or phone; an OHW nurse will call you to conduct a telephone assessment and discuss next steps

Note: If the HCW received a dose of the COVID-19 vaccine in the last 48 hours, go to Scenario 19

SCENARIO 2: HCW has been exposed outside of work to a person that they do not live with and who has COVID-19 symptoms or who has received a positive COVID-19 test

1. If notified that you have been exposed to someone with COVID-19 symptoms, self-monitor for 14 days from date of last exposure and continue to come to work following any work self-isolation requirements, unless notified that you are required to self-isolate by a public health agency, in which case do not come to work and, instead, self-isolate
2. If notified that you have been exposed to a positive COVID-19 case, do not come to work and, instead, self-isolate for 14 days from date of last exposure
3. If COVID-19 symptoms develop or you receive a positive COVID-19 test, go to Scenario 1

Note: Staff are expected to adhere to all COVID-19-related public health measures directed by the relevant public health agencies; COVID-19 exposures outside of work and home with will be greatly reduced if this direction is followed

Note: In exceptional circumstances, if HCW remains asymptomatic, at the leader's request and with approval from the relevant public health agency, the HCW may be permitted to work

SCENARIO 3: HCW has been exposed to a person that they do live with (e.g., child, partner, roommate; "cohabiter") who has COVID-19 symptoms, has a pending COVID-19 test, or has received a positive COVID-19 test

1. In all situations, cohabiter must self-isolate as directed by a public health agency. If cohabiter is not able to self-isolate, contact OHW to discuss next steps. Options such as temporary housing may be explored
2. Contact direct leader to advise of situation and confirm whether cohabiter will be tested for COVID-19:
 - a. If cohabiter will be tested, come to work following all work self-isolation guidelines or work remotely, if possible. Remote work should occur, if possible. In most circumstances, HCWs are considered critical, unless otherwise directed by a public health agency. On the rare occasion that your role is determined not to be critical or if your cohabiter had a known exposure prior to developing COVID-19 symptoms, they will be presumed to be COVID-19 positive and you will be placed on a leave of absence or, if possible, will work remotely pending test results
 - b. If cohabiter is not tested, you will be placed on a leave of absence until the period of communicability has expired (Note: this could range from 14-24 days depending on your ability to self-isolate from the cohabiter)
3. Once the COVID-19 test results are received:

- a. If cohabiter has a positive result, and you have been exposed, you must stay home for 14 days from the date of last exposure.
Note: In exceptional circumstance, if you remain asymptomatic, at your leader's request and with approval from the relevant public health agency, you may be permitted to return to work earlier
- b. If cohabiter's test result is negative, you may return to work and continue to self-monitor, unless worker has been identified by a public health agency as being required to self-isolate, in which case do not come to work and, instead, self-isolate
4. If you develop COVID-19 symptoms or test positive for COVID-19, go to Scenario 1
5. If you cannot work due to child care challenges or you are required to provide care to an ill family member with COVID-19, go to Scenario 7
6. If you cannot work due to COVID-19-related child care challenge where your child is required to self-isolate, go to Scenario 10
7. If cohabiter symptoms resolve, but they were a COVID-19 exposure, go to Scenario 17

Scenario 4: HCW suspects a potential exposure at hospital to someone (e.g., patient, colleague, visitor) who has a pending or positive COVID-19 test result and the HCW is not exhibiting symptoms

1. Immediately notify your direct leader and/or delegate/or health services leader to advise of the potential exposure. Your leader will determine if you will be permitted to complete your shift based on whether your work is critical to continued operations at that time
 - a. If you are determined to be critical, continue to wear your mask and stay at work
 - i. At the time of potential exposure and before resuming work, complete an employee incident report
 - b. If you are determined to not be critical at the time, ensure your work is handed off safely and contact the staffing office to report your absence, then go home and self-isolate
2. Immediately contact OHW via email with your name, employee number, phone number, and reason for contact; an OHW nurse will call you to confirm if there was an exposure and discuss next steps. Note: OHW may request that you be tested for COVID-19
3. You will not be permitted to work on-site following a confirmed exposure (outside of completing your shift), except in exceptional circumstances. Stay home and self-isolate for 14 days after the confirmed exposure. If you are determined to be critical and permitted to work you must follow work self-isolation requirements

Note: If you have another employer go to Scenario 12

Scenario 5: HCW has been exposed to a person that they do live with (e.g., child, partner, roommate; "cohabiter") who has travelled outside of Ontario with a return date within the last 14 days

1. Come to work if cohabiter does not have COVID-19 symptoms
2. If cohabiter has or develops COVID-19 symptoms, go to Scenario 3
3. If cohabiter has a pending or positive COVID-19 test, go to Scenario 3
4. If cohabiter remains asymptomatic, but is notified that they have been exposed, go to Scenario 17
5. If you develop COVID-19 symptoms or receive a positive COVID-19 test, go to Scenario 1

Scenario 6: HCW has travelled outside of Canada within the last 14 days

1. At the time of your return to Canada advise the Canada Border Services Agency (CBSA) agent that you are an employee of a hospital
 - a. If you have symptoms, you will be advised to self-isolate for 14 days. Immediately contact OHW via email with your name, employee number, phone number, and reason for contact; an OHW nurse will call you to conduct a telephone assessment and discuss next steps
 - b. If you do not have symptoms, the CBSA agent may advise that you are an essential worker and permit you to work during the 14 days after your return from travel; alternatively, the CBSA agent may advise that you are not an essential worker and you will be required to self-isolate for 14 days
2. Follow the direction of the CBSA agent and immediately return home from travel. If you do not have symptoms continue to self-monitor. Immediately contact your direct leader to advise of the CBSA agent's determination
 - a. If you were advised by the CBSA agent that you are essential and could attend work during the 14 days period, your leader will determine if you are a critical HCW
 - i. If you are permitted to work by the CBSA agent and you are determined to be critical, continue to self-monitor, come to work, and ensure that appropriate personal protective equipment is worn at all times. You are required to follow all work self-isolation requirements
 - ii. If your direct leader determines that you are not critical to continued operations at this time, your direct leader will contact the Staffing Office
 - b. If you are asymptomatic, but are not permitted to work by the CBSA agent, immediately contact your direct leader, who will contact the staffing office
3. If you develop COVID-19 symptoms, go to Scenario 1

Note: The Government of Canada has recommended to avoid all non-essential travel outside of Canada at this time

Note: HCWs wishing a letter describing their duties at the hospital to present to the CBSA agent must make this request to their direct leader at least 3 weeks in advance of travelling

Note: HCWs should tell their direct leader that they are travelling outside of Canada at the time of making the vacation request

Scenario 7: HCW is unable to attend work due to child care challenges (unrelated to when a child is ordered to self-isolate or HCW elects not to return the child to school/daycare) and/or providing care for an ill family member with COVID-19

1. Contact your direct leader to discuss options; standard accommodation processes will apply
2. Consider which, if any, leave of absence is appropriate based on your individual circumstances; an absence from work will require standard approvals
3. If your child has been ordered to self-isolate by the school/daycare or public health agency, go to Scenario 15
4. If your child's school/daycare is closed or moved to remote learning only, go to Scenario 15

5. If you have elected not return your child to school/daycare, go to Scenario 16

Scenario 8: HCW is pregnant and concerned that their current work assignment puts them at higher risk as a result of COVID-19

1. If you are eligible to begin pregnancy leave, then you may do so by advising your direct leader
OR
2. Contact OHW via email to advise that you are concerned the current work assignment places the pregnancy at high risk; OHW will review and assess the situation, and either confirm or deny the request. No medical assessment will be required at this time
 - a. If the work assignment is confirmed to place the pregnancy at high risk, your direct leader, Human Resources (HR) department, and/or redeployment team will attempt to provide you with accommodation
 - i. If accommodation is unavailable, then you will be placed on a leave of absence

Scenario 9: HCW is at high-risk for COVID-19 complications and concerned that current work assignment puts them at higher risk

1. Contact OHW via email to advise that you are at high risk for contracting COVID-19, as per the hospital or public health agency, and that you are concerned about your current work assignment; OHW will review and assess the situation, and either confirm or deny the request. No medical assessment will be required at this time. If you are confirmed to be at high-risk, your current work assignment will be assessed
 - a. If the current work assignment is deemed to be high risk to you, your leader, HR, and/or redeployment team will attempt to provide the employee with accommodation
 - i. If accommodation is unavailable, the employee will be placed on a leave of absence

Scenario 10: HCW lives with someone who is at high-risk for COVID-19 complications and is concerned

1. You should still attend work and follow best practices when returning home from work
2. If possible, you may wish to consider exploring alternative housing accommodation options
3. Speak to your direct leader to discuss alternative work assignments, if available
 - a. If alternate work is not available, you will be expected to continue to work in your current assignment

Scenario 11: HCW suspects a potential exposure at another employer to a patient who has a pending or positive COVID-19 test result and the HCW is exhibiting no symptoms

1. Advise OHW via email of the potential exposure. Provide your name, employee number, reason for contact, phone contact information, and information on what your other employer has advised, if known
2. If an exposure is confirmed, you will be placed on a leave of absence for 14 days from the date of last exposure

Scenario 12: HCW suspects a potential exposure at RVH to a patient who has a pending or positive COVID-19 test result and the HCW is exhibiting no symptoms and has another employer

1. Follow Scenario 4
2. Once exposure has been confirmed, contact your other employer to advise of the exposure

Scenario 13: HCW works in a unit/department/location that is a declared COVID-19 outbreak

1. If you believe you have been exposed to COVID-19, go to Scenario 4
2. If you develop COVID-19 symptoms or receive a positive COVID-19 test result, go to Scenario 1
3. If you are tested for COVID-19 as part of surveillance or prospective testing, go to Scenario 18
4. If you remain asymptomatic, continue to attend your scheduled shifts at the outbreak location. You may not be able to work at another location until the outbreak is declared over. If you have shifts scheduled at another location, contact your direct leader as soon as possible. Review the 'Mobility Between Work Locations' document for further information

Scenario 14: HCW has travelled outside of Ontario, but within Canada within the last 14 days

1. Self-monitor for symptoms
2. If you are asymptomatic, continue to come to work, follow any work self-isolation requirements, and wear appropriate PPE
3. If worker develops symptoms, go to Scenario 1

Note: HCWs are expected to follow public health agency recommendations on travel

Note: HCWs should tell their direct leader that they are travelling outside of Canada at the time of making the vacation request

Scenario 15: HCW's child is unable to attend school/daycare at the direction of the school/daycare/ or public health agency as a result of COVID-19 (e.g., child develops COVID-19 symptoms, school/daycare closures)

If at work:

1. Advise your direct leader of the need to leave work due to child care commitments. Ensure your work is handed off safely before leaving
2. If you will be absent beyond the initial shift, you must advise your leader and Staffing Office, as per usual practice. You should indicate when you anticipate being able to return to work
3. If you develop COVID-19 symptoms, go to Scenario 1
4. If your child develops COVID-19 symptoms, go to Scenario 3
5. If your child was exposed to COVID-19, go to Scenario 17

If at home:

1. If your next shift will not be impacted, no action is required
2. If any shifts will be impacted you must advise your leader and Staffing Office, as per usual practice. You should indicate when you anticipate being able to return to work
3. If you develop COVID-19 symptoms, go to Scenario 1
4. If your child develops COVID-19 symptoms, go to Scenario 3
5. If your child was exposed to COVID-19, go to Scenario 17

Note: If your child is diagnosed with COVID-19, go to Scenario 3. If your child is ordered to self-isolate as a close contact, you may not be required to self-isolate at this time

Scenario 16: HCW has elected to not return their child to in-person school or is unable to secure a daycare provider

1. Contact you leader to discuss next steps. You may be required to participate in the accommodation process to determine what is appropriate for your individual circumstances

Scenario 17: HCW lives with someone who has been exposed to COVID-19, but cohabiter does not have symptoms (e.g. child exposed at school, partner exposed at their workplace)

1. Self-monitor for 14 days and continue to come to work and follow work self-isolation requirements
2. If you are required to self-isolate by a public health agency, you must stay home
3. If a cohabiter develops COVID-19 symptoms or receives positive COVID-19 test, go to Scenario 3
4. If you develop COVID-19 symptoms or receive a positive COVID-19 test, go to Scenario 1
5. If you cannot work due to childcare challenges, go to Scenario 7
6. If you cannot work due to child being unable to attend school or daycare at the direction of the school/daycare or public health agency, go to Scenario 15

Scenario 18: HCW is asked to participate in prospective/surveillance testing (non-exposure conditions)

HCWs may be requested to participate in prospective/surveillance testing for COVID-19 (e.g., during a COVID-19 outbreak). The worker will be required to accept the test or decline a test.

If the test is accepted:

1. Undertake the COVID-19 test
2. Continue to work
3. If you test positive, go to Scenario 1
4. If you develop symptoms while waiting for test results or anytime after, go to Scenario 1

If the test is declined:

1. Advise your leader and OHW via email that you are declining COVID-19 prospective/surveillance testing; this will be documented and recorded in the OHW file
2. Continue to work following any work restrictions for the duration of the outbreak and 14 days following the end of the outbreak, or as otherwise directed by OHW
3. If you develop symptoms, go to Scenario 1

Scenario 19: Absence following COVID-19 vaccination

When offered, HCW may elect to receive a COVID-19 vaccine. HCWs may experience temporary side effects that are similar to COVID-19 symptoms.

Option 1:

1. You have headache, fatigue, muscle ache, joint pain, and/or pain at the injection site that began after vaccination
 - a. If you feel well enough to work continue to come to work
 - b. If you feel unable to come to work, stay at home. Immediately call your leader and staffing office
 - c. Contact OHW via email with your name, employee number, and reason for contact; an OHW nurse will call you to conduct a telephone assessment and discuss next steps. This process must be repeated for each day of absence

Option 2:

1. Worker has any other COVID-19 symptom that began after vaccination (e.g., fever)
 - a. Self-isolate and go to Scenario 1
 - i. It is strongly recommended that you book a COVID-19 test as soon as possible

Supplementary Table 2: Mobility Between Work Locations/Sites Scenarios document for healthcare workers during the COVID-19 pandemic

Note, definitions and worker compensation have not been provided, as they may differ among organizations

Guiding Principles

- To the extent possible, a healthcare workers (HCW) will be assigned schedules that limit their work to a single location (department/area/site).
- Mobility between organizational sites will continue to be permitted, unless the work location is a declared outbreak or a COVID-19 zone (e.g., Intensive Care Unit)
- HCWs at long term care (LTC) homes, retirement homes, or congregate settings on a long-term work assignment will be limited to the single work location until the end of the work assignment
- HCWs on a short-term work assignment will continue to have mobility unless the worker experiences a COVID-19 exposure, develops COVID-19 symptoms, or is notified of a positive COVID-19 test
- HCWs who work in an outbreak location will be restricted to the outbreak location until the outbreak is cleared or the work assignment ends. Float nurses will continue to be permitted to move between units unless otherwise instructed
- A waiting period will not be required following the end of an assignment that had mobility restrictions, unless the worker experiences a COVID-19 exposure, develops COVID-19 symptoms, or is notified of a positive COVID-19 test
- Further restrictions on mobility may be imposed by each employer or a public health agency in order to respond to an outbreak at any work location
- Having received a COVID-19 vaccine does not impact mobility restrictions, except in Scenario 10, where fully vaccinated staff will not be restricted by emergency orders pertaining to LTC homes or retirement homes.

SCENARIO 1: HCW works at a remote hospital site on a long-term work assignment

1. The remote hospital site is viewed as comparable to the main hospital campus (primary site)
2. If you are working at a remote hospital site on a long-term work assignment, you will be able to pick up shifts at the primary site. If you have another employer, you should discuss the impact of this assignment with them
3. If you are deployed to the remote hospital site, you will be eligible to return to the primary site at the end of the work assignment. If you posted into a position at the remote hospital site, you will be able to continue to apply to postings at the primary site
4. To resume work at the primary site, a waiting period is generally not required, but may be applied if a COVID-19 exposure has occurred, you develop COVID-19 symptoms, or you receive a positive COVID-19 test. In this case, please refer to the Absence Scenarios document
5. If an outbreak is declared at the remote site, go to Scenario 9

SCENARIO 2: HCW works at a remote hospital site on a short-term work assignment

1. The remote hospital site is viewed as comparable to the primary site
2. If you are on a short-term work assignment at a remote hospital site, you will be permitted to move between sites (e.g., if you worked at the remote site for two hours, then you would be expected to return to the primary site for the balance of your shift)
3. If a COVID-19 exposure has occurred, you develop COVID-19 symptoms, or you receive a positive COVID-19 test, you may not be able to return to the primary site. In this case, please refer to the Absence Scenarios document
4. If an outbreak is declared at the remote site, go to Scenario 9

Scenario 3: HCW is deployed to an LTC home, retirement home, or congregate setting on a long-term work assignment

1. If you are deployed to an LTC home, retirement home, or congregate setting on a long-term work assignment, you will not be able to pick up shifts at the primary site. If you have another employer, you should discuss the impact of this assignment with them
2. At the end of the work assignment, you will be eligible to return to the primary site. If you posted into a position at the LTC home, retirement home, or congregate setting, you will be able to continue to apply to postings at the primary site
3. To resume work at the primary site, a waiting period is generally not required, but may be applied if a COVID-19 exposure has occurred, you develop COVID-19 symptoms, or you receive a positive COVID-19 test. In this case, please refer to the Absence Scenarios document
4. If an outbreak is declared at the remote site, go to Scenario 9

Scenario 4: HCW is deployed to an LTC home, retirement home, or congregate setting on a short-term work assignment

1. Workers deployed on a short-term work assignment to an LTC home, retirement home, or congregate setting will continue to be permitted to move between sites (e.g., if you worked at the LTC home, retirement home, or congregate setting for two hours, then you would be expected to return to the primary site for the balance of your shift)
2. If a COVID-19 exposure has occurred, you develop COVID-19 symptoms, or you receive a positive COVID-19 test, you may not be able to return to the primary site. In this case, please refer to the Absence Scenarios document
3. If an outbreak is declared at the remote site, go to Scenario 9

Scenario 5: HCW works at another hospital

1. If you work at another hospital, you will be permitted to work at both locations, but you should consult with your other employer for more information on their own multi-employer requirements
2. If you develop COVID-19 symptoms or you receive a positive COVID-19 test, please refer to the Absence Scenarios document
3. If you have a COVID-19 exposure while at your other employer, please go to the Absence Scenarios Document

4. If an outbreak is declared at the other hospital, go to Scenario 9

Scenario 6: HCW is assigned work in multiple units/departments/areas at primary site

1. You will be permitted to move between units/departments/areas at the primary site, as long as no unit/department/area is a COVID-19 unit/department/area. If you are assigned to a COVID-19 unit/department/area, go to Scenario 7
2. If a COVID-19 exposure has occurred, you develop COVID-19 symptoms, or you receive a positive COVID-19 test, you may not be able to return to the primary site. In this case, please refer to the Absence Scenarios document
3. If an outbreak is declared in one of your units/departments/areas, go to Scenario 9

Scenario 7: HCW works in a COVID-19 unit/department/area at primary site

1. To the extent permitted, efforts will be made to schedule your work exclusively in COVID-19 units/departments/areas
2. You will not be permitted to move from COVID-19 units/departments/areas to non-COVID-19 units/departments/areas on the same shift; once a you enter a COVID-19 unit/department/area, you will be restricted to that unit/department/area for the duration of the shift
3. If a COVID-19 exposure has occurred, you develop COVID-19 symptoms, or you receive a positive COVID-19 test, you may not be able to return to the primary site. In this case, please refer to the Absence Scenarios document
4. If an outbreak is declared in one of your units/departments/areas, go to Scenario 9

Scenario 8: Worker works in a field hospital (non COVID-19 patients) located at the primary site

1. Field hospitals located at the primary site that treat non COVID-19 patients are treated like a unit at the primary site, go to Scenario 6

Scenario 9: HCW works in a location that is a declared outbreak

- A. HCW worked in declared outbreak location on a short-term work assignment:
 - 1. You will be permitted to work at another location, provided you did not experience a COVID-19 exposure and remain asymptomatic
 - 2. You may be asked to take a COVID-19 swab test, if requested by local Infection Prevention and Control (IPAC) department or public health agency

- B. HCW worked in declared outbreak location on a long-term work assignment and the outbreak is ongoing:
 - 1. You will be limited to shifts in the outbreak location, until the outbreak is cleared or the work assignment ends
 - 2. You may be asked to take to a COVID-19 swab test, as per the local IPAC department or public health agency
 - i. A negative swab will not permit mobility to a non-outbreak location during the outbreak, unless the work assignment ends. If the work assignment ends, review Scenario 9C

- C. HCW worked in a declared outbreak location and the long-term work assignment has ended:
 - 1. If your work assignment ends prior to the outbreak being declared over, a waiting period will not be required before the worker can work at another location provided the worker remains well and did not have an exposure to COVID-19
 - 2. You may be asked to take a COVID-19 swab test, if requested by local IPAC department or public health agency

- D. HCW worked in a declared outbreak situation on a long-term work assignment and the outbreak is declared over:
 - 1. When the outbreak is declared over a waiting period will not be required before you can work at another work location, provided you did not experience a COVID-19 exposure and remain asymptomatic
 - 2. You may be asked to take a COVID-19 swab test, if requested by local IPAC department or public health agency

- E. HCW has shifts scheduled in an outbreak location
 - 1. You must notify your direct leader and Occupational Health and Wellness (OHW) in advance of working scheduled shifts in a newly declared outbreak location to discuss options and next steps. Options may be limited if you have already worked at the outbreak location
 - 2. If the outbreak location is at another organization, you will be required to advise if you can be assigned work that is not in the outbreak location
 - i. If you can be assigned work in a non-outbreak location, the appropriate above scenarios apply with respect to mobility
 - ii. If you cannot be assigned work outside of the outbreak location, you will be required to discuss with your leader a choice between the outbreak location and the non-outbreak location. For clarity, you will not be permitted to work in an outbreak location and a non-outbreak location concurrently. Exceptional circumstances may apply in consultation with your leader, IPAC, and/or OHW (e.g., to meet essential staffing needs). Note: As per the guiding principles above, float nurses will continue to be permitted to move between units, unless otherwise instructed

3. If you must work in an outbreak location, you will not be able to work at other hospital sites
4. You may be asked to take a COVID-19 swab test, if requested by local IPAC department or public health agency

F. HCW has shifts scheduled in a variant of concern (VOC) outbreak location

1. You must notify your leader and OHW via email in advance of working scheduled shifts in a newly declared VOC outbreak location to discuss options and next steps. Your options may be more limited if you have already worked at the VOC outbreak location
2. You must notify your leader and OHW via email if you work at the VOC outbreak location; however, if you do not work in the unit/area where the VOC outbreak is occurring, mobility may be permitted, as per the applicable above scenario. When you provide notification, you should advise if you work in the outbreak department/area/site and if you can be assigned work in the non-outbreak department/area/site
3. If you have already worked a shift in the VOC outbreak location, you will be required to work self-isolate at that location. At the direction of a public health agency, this restriction may also apply if the worker has not worked in the VOC outbreak location, but has worked in the facility where the VOC outbreak has occurred
4. If you have not yet worked scheduled shifts in a VOC outbreak location, you will be required to choose between work locations. At the direction of a public health agency, this choice may also be required if you are scheduled to work in a VOC outbreak location on a non-outbreak department/area/site
5. You must work self-isolate in a VOC outbreak department/area/site. At the direction of a public health agency, work self-isolation may also apply more broadly to all workers at the facility where the VOC outbreak has occurred. Exceptional circumstances may apply in consultation with your leader, IPAC, and/or OHW (e.g., to meet essential staffing needs). These circumstances should be even more limited in application than under Scenario 9E
6. You may be asked to take a COVID-19 swab test, as often as every 3-4 days, if requested by local IPAC department or public health agency

Note: Further restrictions may be required at the direction of a public health agency

Scenario 10: HCW is employed by an LTC or retirement home and hospital

If there is a government or public health agency order requiring HCWs to elect a single employer:

1. If you elect to work at the LTC or retirement home, you may not return to the hospital until either the order is lifted or you are no longer employed by the LTC or retirement home.
2. If you have experienced a COVID-19 exposure, you develop COVID-19 symptoms, or you receive a positive COVID-19 test, please refer to the Absence Scenarios document
3. If an outbreak is declared, go to Scenario 9 of this document.

Scenario 11: HCW works at an immunization clinic conducted by the hospital

1. The immunization clinic is treated like a unit at the primary hospital site. Please review Scenario 6 of this document.

Supplementary Table 3: Patient eligibility criteria for admission to the Pandemic Response Unit (PRU)

Patient Profile	Inclusion Criteria	Exclusion Criteria
Group A (Ideal)	<ul style="list-style-type: none"> • COVID-19 negative* • General medicine patient • Estimated 5 days or less length of stay • Level 2 ICU transferable patients • ALC patients with a discharge plan and date <p>*Recovered COVID-19 patient may be accepted, if clearance provided by IPAC department</p>	<ul style="list-style-type: none"> • Unstable patients • Paediatric patients • Patients requiring increased levels of monitoring • Mental health patients • Surgical patients • Patients on isolation precautions • Patients requiring counterweights • Bariatric patients • Patients with responsive behaviours, are a flight risk, or require constant re-direction • ALC patients without a discharge date • Direct outpatient or Emergency Department admissions
Group B (Less ideal)	<ul style="list-style-type: none"> • Group A PLUS • Select and non-complex surgical patients with MRP approval • Patients on isolation precautions, as directed by IPAC (no CPE or C-diff) • Bariatric patients that are ambulatory, but do not exceed weight and width allowance of equipment, and no requirement for use of a portable lift • ALC patients without a discharge date 	<ul style="list-style-type: none"> • Unstable patients • Paediatric patients • Patients requiring increased levels of monitoring • Mental health patients • Complex surgical patients • Patients on isolation precautions • Patients requiring counterweights • Bariatric patients exceeding capacity of resources • Patients with responsive behaviours, are a flight risk, or require constant redirection

<p>Group C (Least ideal)</p>	<ul style="list-style-type: none"> • Group B PLUS • ALC patients without a discharge date • Surgical patients with MRP input of acceptability • Patients on IPAC precautions, as directed by IPAC • Mental Health patients that are a voluntary admission, close to discharge, and appropriate as per MRP 	<ul style="list-style-type: none"> • Paediatric patients • Patients requiring increased levels of monitoring • Patients requiring counterweights • Bariatric patients exceeding capacity of resources • Patients with responsive behaviours, are a flight risk, or require constant redirection
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ALC: Alternate Level of Care; C-diff: Clostridioides difficile; CPE: Carbapenemase-producing enterobacteriaceae; IPAC: Infection Prevention and Control; MRP: most responsible physician