

COVID-19

**Directive #2.1 for hospitals within the meaning of the *Public Hospitals Act*, private hospitals within the meaning of the *Private Hospitals Act*, psychiatric facilities within the meaning of the *Mental Health Act* and regulated health professionals who practice within them
(Health System Coordination re: Hospital Patient Transfers)**

**Issued under Section 77.7 of the *Health Protection and Promotion Act* (HPPA),
R.S.O. 1990, c. H.7**

WHEREAS under section 77.7(1) of the HPPA, if the Chief Medical Officer of Health (CMOH) is of the opinion that there exists or there may exist an immediate risk to the health of persons anywhere in Ontario, he or she may issue a directive to any health care provider or health care entity respecting precautions and procedures to be followed to protect the health of persons anywhere in Ontario;

AND HAVING REGARD TO the considerations set out in the preamble to Directive #2 issued on January 4, 2022 under section 77.7(1) of the HPPA;

AND HAVING REGARD TO the need to coordinate health system resources in hospitals in order to respond to the surge in demand for hospital services as a result of widespread COVID-19 infection;

AND HAVING REGARD TO the need to coordinate health system resources in hospitals in order to respond to periodic shortages of available resources, including health human resources, as a result of widespread COVID-19 infection;

I AM THEREFORE OF THE OPINION that there exists or may exist an immediate risk to the health of persons anywhere in Ontario arising from COVID-19 or caused by the impact the infection is having on the ability of hospitals to provide care to patients;

AND DIRECT pursuant to the provisions of section 77.7 of the HPPA that:

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Date of Issuance: January 14, 2022

Effective Date of Implementation: January 14, 2022

Issued To:

The following health care providers or entities referred to at subsection 77.7(6) of the *Health Protection and Promotion Act*:

- (a) a hospital within the meaning of the *Public Hospitals Act*, a private hospital within the meaning of the *Private Hospitals Act*, and a psychiatric facility within the meaning of the *Mental Health Act*; and
- (b) a regulated health professional who practices at a place set out at (1),
(collectively referred throughout this Directive as "**Hospital Care Providers**").

* Hospital Care Providers must provide a copy of this directive to the co-chairs of the Joint Health & Safety Committee or the Health & Safety Representative (if any)

Introduction:

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV), Severe Acute Respiratory Syndrome (SARS-CoV), and COVID-19. A novel coronavirus is a new strain that has not been previously identified in humans.

On December 31, 2019, the World Health Organization (WHO) [was informed](#) of cases of pneumonia of unknown etiology in Wuhan City, Hubei Province in China. A novel coronavirus (COVID-19) [was identified](#) as the causative agent by Chinese authorities on January 7, 2020.

On March 11, 2020 the WHO announced that COVID-19 is classified as a [pandemic](#) virus. This is the first pandemic caused by a coronavirus.

On March 19th, 2020, May 26th, 2020, and April 20th, 2021, Directives were issued, or re-

issued, to require health care providers to temporarily cease non-emergent and non-urgent surgeries and procedures in response to earlier pandemic waves.

On November 28, 2021, the first case of the more transmissible Omicron variant of concern (B.1.1.529) was detected in Ontario. There is emerging evidence of community spread of the Omicron variant and it is rapidly increasing daily case counts of COVID-19 in Ontario. Hospitalizations are also increasing.

Symptoms of COVID-19

For signs and symptoms of COVID-19 please refer to the [COVID-19 Reference Document for Symptoms](#) dated January 4th, 2022 or as amended. Complications from COVID-19 can include serious conditions, like pneumonia or kidney failure, and in some cases, death.

Variants of Concern

The recent increase in cases of COVID-19 in Ontario are being driven by the Omicron variant of concern. Recent data and evidence estimate the Omicron variant is four to eight times more infectious than the Delta variant, and that two doses of a COVID-19 vaccine provides 70% protection against hospitalization with Omicron variant compared with 90% against the Delta variant.

Further, recent data and evidence has highlighted significant changes in the trajectory of the COVID-19 pandemic. Specifically, cases are at the highest level since the start of the pandemic (>18,000 per day) and a continued acceleration in cases, and increased hospitalizations are expected throughout January 2022. New data demonstrates two doses of a COVID-19 vaccine provide only some protection against severe Omicron infection, and three doses are needed for better protection.

COVID-19 threatens health system ability to deal with hospital admissions and the ability to care for all patients. In particular, COVID-19 is resulting in staff absences at hospitals and thereby reducing the ability of hospitals to provide care to patients.

CMOH Directive # 2

On January 4, 2022, the CMOH issued Directive #2 for Health Care Providers requiring the cease all non-emergent or non-urgent surgeries and all non-emergent or non-urgent diagnostic imaging and ambulatory clinical activity in public hospitals to respond to the threat COVID-19 poses to the health system's ability to deal with hospital admissions and the ability to care for all patients.

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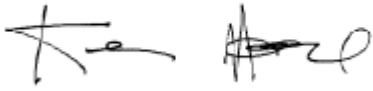
Directive #2.1 for hospitals within the meaning of the *Public Hospitals Act*, private hospitals within the meaning of the *Private Hospitals Act*, psychiatric facilities within the meaning of the *Mental Health Act* and regulated health professionals who practice within them (*Health System Coordination re: Hospital Patient Transfers*)

1. Every Hospital Care Provider, acting individually and collaboratively, shall, in accordance with applicable law, use best efforts to:
 - (a) Transfer or support the transfer of patients, as appropriate, within a hospital to improve the treatment and expedite the flow of patients from admission to discharge for the purpose of increasing the capacity of that hospital to admit new patients;
 - (b) Transfer or support the transfer of patients, as appropriate, to other hospitals which have the capacity to provide treatment to patients, in order to maximize the capacity of the hospital system to provide and maintain care to the greatest number of patients as possible;
 - (c) Admit or take measures to support the admission of patients from other hospitals to relieve and support overall Ontario hospital system capacity and patient movement in the system where it is safe to do so;
 - (d) Maximize the use of resources within hospitals and share resources between hospitals to maximize the capacity of Ontario's hospital system to provide and maintain quality care to as many patients as possible.
2. Hospital Care Providers shall participate in any system coordination and reporting processes that may be established by Ontario Health for the purpose of optimizing the capacity of Ontario's hospital system to provide quality services to the greatest number of patients as possible.
3. Directive #2 continues to apply and shall be read harmoniously with this Directive #2.1

Questions

Hospital Care Providers may contact the Ministry of Health by email at emergencymanagement.moh@ontario.ca with questions or concerns about this Directive.

Hospital Care Providers are also required to comply with applicable provisions of the [Occupational Health and Safety Act](#) and its Regulations.

A handwritten signature in black ink, appearing to read 'Kieran Moore', with a stylized flourish at the end.

Kieran Moore, MD, CCFP (EM), FCFP, MPH, DTM&H, FRCPC, FCAHS

Chief Medical Officer of Health