We are meeting with the Site Director this afternoon to discuss this.

From: [redacted-Site Director]@capitalcare.net>

Sent: Monday, July 22, 2024 3:55:48 PM

To: David Dickson <<u>david.dickson@dksdata.com</u>>; Aileen Wong <Aileen.Wong@capitalcare.net> **Cc:** [redacted Unit Manager]@capitalcare.net>; Karen Dickson <<u>karen.dickson@dksdata.com</u>>

Subject: RE: Masks & Outbreaks

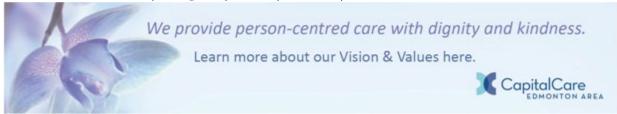
Hello Karen and David,

I would like to respond to your questions in person if possible. Are you available this Friday afternoon or next week Wednesday or Thursday afternoon?

[redacted-Site Director]

[redacted] | Site Director | <u>CapitalCare</u> Dickinsfield 780-371-6525

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From: David Dickson < david.dickson@dksdata.com >

Sent: Friday, July 19, 2024 10:28 AM

To: Aileen Wong < <u>Aileen.Wong@capitalcare.net</u>>

Cc: [redacted Unit Manager]@capitalcare.net>; Karen Dickson < karen.dickson@dksdata.com >; [redacted-Site

Director]@capitalcare.net> **Subject:** RE: Masks & Outbreaks

Importance: High

Good morning, Aileen.

Do we have any further on the masks? It has now been over 7 months since you initially said you had a solution in December 2023. Currently, we have multiple units on COVID Outbreak in CCD.

In addition, we still have no response on who was the unit manager who signed off on the unlawful isolation of Jean in February, nor any update on [redacted Unit Manager-2] relating to Informed Consent.

Now things appear to be getting even worse and we are aware that units on Outbreak have the fire doors closed. Not only is this a fire safety hazard, it restricts healthy residents from leaving the units, which we all agreed was not just cruel but unlawful. I know this is something that [redacted Unit Manager] ensures does not happen on 3D but the fact that multiple other units are doing this is a serious concern.

Thanks for your immediate attention to the above.

David & Karen

David T. Dickson

C.E.O. DKS DATA (www.dksdata.com)

Consulting C.I.O.

Disabled Police Officer (retired - injury on duty)

Management/Legal Consultant Privacy and Cybersecurity Expert.

Email: david.dickson@dksdata.com





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From: Aileen Wong < Aileen. Wong@capitalcare.net >

Sent: Wednesday, July 3, 2024 8:14 AM

To: David Dickson < <u>david.dickson@dksdata.com</u>>

Cc: [redacted Unit Manager]@capitalcare.net>; Karen Dickson karen.dickson@dksdata.com

Subject: RE: Masks

Hi David

Yes, we had a great Canada Day, thank you. I hope you did too.

I have ordered 2 other types of masks for you to look at, but they will not be here until between July 16 and 26th. I am a little concerned about the availability of these two masks, but I think it is good to look at them, they appear to be not as bulky as the full face option.

Once they arrive, I will send you and email and give them to [redacted Unit Manager] for you to review.

Thank you.

Aileen

Aileen Wong|Chief Operating Officer|CapitalCare|

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From: David Dickson < <u>david.dickson@dksdata.com</u>>

Sent: Tuesday, July 2, 2024 4:43 PM

To: Aileen Wong <Aileen.Wong@capitalcare.net>

Cc: [redacted Unit Manager]n@capitalcare.net>; Karen Dickson < karen.dickson@dksdata.com>

Subject: RE: Masks

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Afternoon Aileen,

We hope you had a great Canada Day.

We were wondering if the third mask option came in yet?

The full-face option[Mask 1] with a tiny filter (double use for breathing in and out) would be dangerous to wear due to;

- fogging up,
- being impossible to create a seal due to the single size (no ability to FIT test which would be required for a full face mask).
- bulky nature for wearing
- still creates an issue with communication with almost complete sound dampening. (All the care staff would sound like Darth Vader waring this one).

The second one [mask 2] would provide similar protection to a procedural mask and is close to the designs accepted by the Alberta Courts and other locations (Karen has a single piece one). The only issue I could see with the one provided related more to build quality.

Thanks,

David & Karen
David T. Dickson
C.E.O. DKS DATA (www.dksdata.com)
Consulting C.I.O.

Disabled Police Officer (retired - injury on duty) Management/Legal Consultant Privacy and Cybersecurity Expert.

Email: david.dickson@dksdata.com



Microsoft

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From: Aileen Wong < Aileen. Wong@capitalcare.net >

Sent: Thursday, June 20, 2024 12:57 PM

To: David Dickson < <u>david.dickson@dksdata.com</u>> **Cc:** [redacted Unit Manager]@capitalcare.net>

Subject: Masks

Hi David

I am bringing the masks tomorrow to [redacted Unit Manager]. One looks promising the other one not so as it does not have filters.

There is a third mask and right now they are out of it but will send me the order once they are in stock.

Sorry for the delay.

Aileen

Aileen Wong|Chief Operating Officer|CapitalCare|

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Masks being proposed so Care Home residents with hearing or cognitive difficulties can still see the face of the healthcare worker.

[Mask 1]



[Mask 3]



[Mask 2]



[Mask 4]



Hospital Protocol for COVID - Alberta 2024 - Also in Care Homes.

JULY 2024 - https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-contact-and-droplet-sign.pdf

CONTACT & DROPLET PRECAUTIONS



CLEAN YOUR HANDS WHEN ENTERING AND **EXITING ROOM**





STAFF and VISITORS

VISITORS:

PLEASE CHECK with Nursing Staff BEFORE entering room.

GOWN AND GLOVES if assisting with care.



PATIENTS

Any suspected or confirmed respiratory virus infection = N95 respirator or procedure mask (based on Infection Prevention and Control Risk Assessment) + eye protection + gloves + gown

Any suspected or confirmed respiratory virus infection + Aerosol Generating Medical Procedure (AGMP) = N95 Respirator + eye protection + gloves + gown



SINGLE ROOM RECOMMENDED WITH DEDICATED EQUIPMENT

July 2024

For more information contact ipcsurvstdadmin@ahs.ca



CONTACT & DROPLET PRECAUTIONS

Acute Care **Use in Addition to Routine Practices**

Additional Information

- As per the <u>Joint Statement intos://www.albertahealthsen/ices.ca/assets/news/nr/ne-nr-2020-03-27-joint-statement-covid-ppe_ddf;</u> There may be situations where a health care worker, based upon their PCRA or their assessment of all known and foreseeable risks and hazards, may choose to wear a medical mask instead of an N85 respirator." [Exception: Always use fit-tested N95 respirator for patient with suspected or confirmed viral respiratory infection with current or anticipated AGMP.1
- Single room recommend Door may remain open.
- Clean your hands before and after wearing gloves.
- Maintain a distance of at least 2 metres between patients.
 Dedicate equipment to the isolated patient or clean and disinfect shared equipment after use
- Soap and water recommended for hand hygiene when providing care of patient's diarrhea and/or vomiting after removing cloves instead of Alcohol-Based Hand Rub. (AHS Hand Hygiene Procedure, June 2017)
 Patient to leave room only for essential purposes.
 If patients are leaving the room they should be cognitively[intact or supervised, have clean hands and clothing, be masked,
- and any drainage and/or body fluids contained.

Common Organisms Requiring CONTACT/DROPLET Precautions (not all inclusive)

- Respiratory Syncytial Virus (RSV) Adenovirus
- Enterovirus
- Metapneumovirus
- Influenza Parainfluenza
- Rhinovirus
- SARS-CoV-2 (COVID-19)
- Invasive Group A Streptococcus
- Norovirus (vomiting +/- diarrhea present)

Rememberl

Any suspected or confirmed respiratory virus infection + Aerosol Generating Medical Procedure (AGMP) = N95 Respirator + eye protection + gloves + gown

If a patient is suspected or confirmed to have a viral respiratory infection and AGMPs are required (including but not limited to intubation, open tracheal suctioning, CPR, bronchoscopy, sputum induction, BIPAP, high frequency oscillatory venitation, tracheostomy care, aerosolized medication administratory, see

Refer to the AHS Infection Prevention & Control Manual for additional information

