



Media Release

For Immediate Release

Waterloo Wellington COVID Report

Waterloo Region & Wellington County | February 4, 2022 – Attached is the Waterloo Wellington COVID Report for Friday, February 4, 2022 that local hospitals have committed to jointly providing on Tuesdays and Fridays.

[Revisions to Directive #2](#), released earlier this week, enable hospitals to increase imaging and screening to support diagnostics for patients while most other scheduled procedures continue to be on hold. Although the ramp down of non-urgent and non-emergent surgeries allowed hospitals to redeploy staffing and available resources to deal with the increased demand during the Omicron wave, it has meant wait lists for surgeries and procedures has grown by approximately 2,300 additional patients each month.

The continued pressures on hospitals from COVID-19 limits the ability to ramp up scheduled procedures. The gradual ramp up of surgeries and procedures, hopefully something that can begin within the next two weeks, will be a slow and gradual process. The capacity to do this rests on our ability as a community to continue to adhere to Public Health measures to reduce transmission and the severity of illness requiring patients to be hospitalized.

In comparison to [Tuesday's report](#), we are seeing a downward trend in the number of COVID-positive patients and staff impacted by COVID locally. Today, there are 108 patients in our care, down from 133 on Tuesday, and 225 staff who are impacted, down from 257. This trend is encouraging however, we do continue to care for more patients than there are beds across Waterloo Wellington. This has required our hospitals to transfer patients within and out of the region due to capacity challenges seeing between 10-20 transfers each day this week.

Also, in support of COVID-related care, Health Canada has approved the use of Paxlovid, a prescription-only COVID antiviral treatment. Supply is limited and is being prioritized for individuals based on the Ontario Science Table recommendations on its use. This includes those who are COVID-positive, at higher risk for severe outcomes, and who meet very specific eligibility criteria. [St. Mary's COVID-19 Assessment Clinic](#) is designated as a hub for referrals made for Paxlovid by other COVID assessment centres, primary care clinicians or other physician specialists, or by self-referral. [Appointments for St. Mary's COVID-19 Clinical Assessment Clinic must be made in advance by booking online](#). Antivirals do not in any way replace vaccination that continues to be one of our most effective defenses against

severe illness from COVID-19 and one that will help us to get through the Omicron wave together.

"We are starting to see infection rates coming down in our communities," says Grand River Hospital President and CEO, Ron Gagnon. "This is promising but we are not yet seeing the impact of this reduction in local hospitals to any great extent. Hospital team members continue to work harder than ever during this wave to care for unprecedented volumes of patients who require urgent care within the challenges of COVID-19. We continue to work as hospital partners to monitor volumes and resources with the goal of increasing access to non-urgent care and procedures as soon as possible."

"It is promising to see some new drug therapies being made available to those with COVID for specific groups," says Lee Fairclough, Regional Hospital Lead for COVID response and President, St. Mary's General Hospital. "It is also good to see some reduction in the number of new hospitalizations for COVID in our community, though it is still precarious as we continue to work across Waterloo Wellington and with neighboring regions that remain under significant pressure."

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Waterloo Wellington Hospital Capacity Report (Omicron Wave)

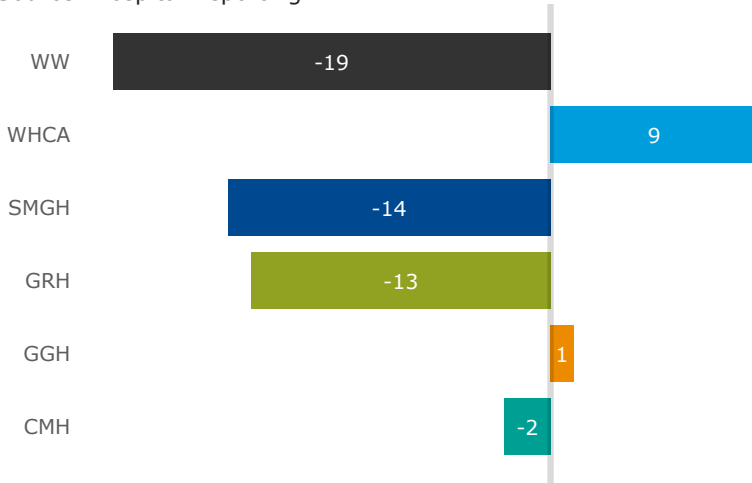
Beds Available and ED Activity

This section highlights available beds at a point in time to support patients presenting at our hospitals. Positive numbers suggest there are beds available to support patients. A negative number means that a hospital is full, and supporting patients waiting for admission from the ED.

Reminder: The total beds in our region has increased by 235, (nearly a third more for each hospital that was able to add beds). To support the recent Omicron surge further additional beds have been added.

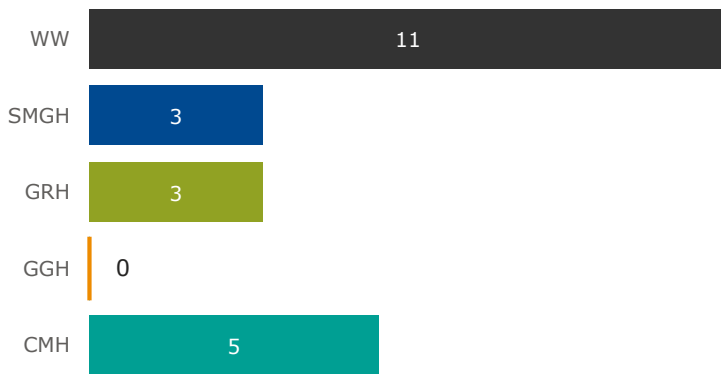
Available Med/Surg Beds (as of 9am)⁽¹⁾

Source: Hospital Reporting



Available ICU Beds (as of 9am)⁽²⁾

Source: Hospital Reporting



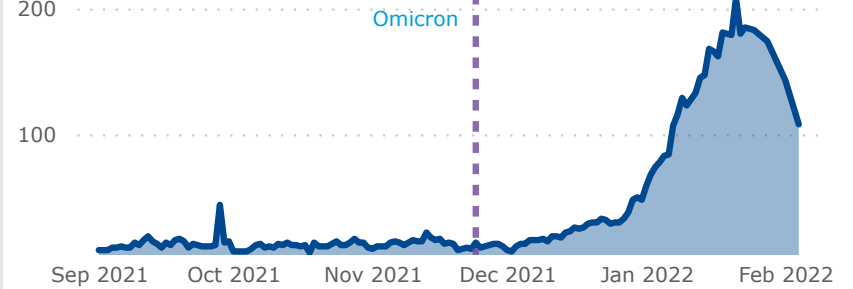
COVID information

● WW ● WHCA ● SMGH ● GRH ● GGH ● CMH

This section describes the number of patients requiring COVID care at our hospitals.

COVID +ve Hospitalizations

Source: MOH SAS



WW COVID +ve Hospitalizations by Vaccination Status(%)

Source: MOH SAS

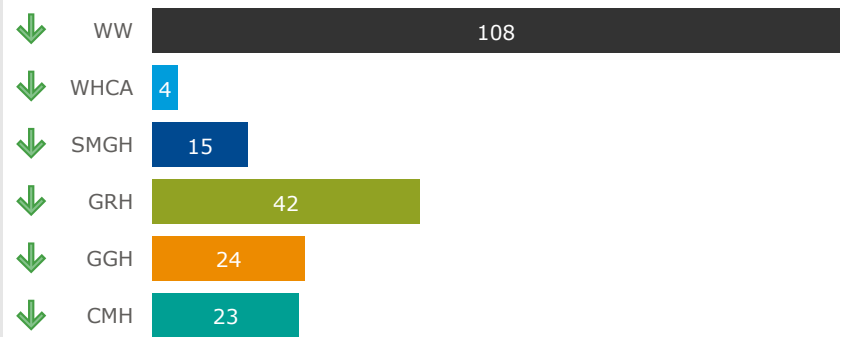


* "In the past 30 days, unvaccinated adults 60 years of age and older were approximately 11.8 times more likely to be hospitalized due to COVID-19 compared to adults 60 years of age and older who have completed the primary vaccine series."

- Ontario Science Table, Enhanced Epidemiological Summary as of Jan 17, 2022

Current COVID +ve Hospitalizations

Source: Hospital Reporting



Arrows: Compared to last report

Implications of COVID for the workforce

Prevalence of COVID in the community is very high and across all sectors/organizations, and the workforce is being impacted. This section describes the number of staff impacted by COVID (COVID positive, and/or isolating at home due to high-risk contact). It does not reflect additional reasons staff may not be at work.

Staff Impacted by COVID-19⁽³⁾

Source: Hospital Reporting



(1) Incl. open and staffed Med./Surg. beds net of admitted patients waiting in ED or in decant units.

(2) ICU beds are those that are open and staffed.

(3) Staff impacted by COVID (excluding work isolation and other reasons staff may be off)

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For more information please contact the reporting team at reporting@smgh.ca