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From: Hall, Krystie <KHall@GOV.NU.CA>

Sent: October 21, 2021 2:09 PM

To: Patterson, Michael <MPatterson@GOV.NU.CA>

Cc: Lavallee, Charlene <CLavallee@GOV.NU.CA>; DeMaio, Patty <PDeMaio@GOV.NU.CA>; Nolan, Christopher <CNolan@GOV.NU.CA>; Mgonja, Lucy <LMgonja@GOV.NU.CA>

Subject: Re: TB in Pangnirtung

Hi Dr. Patterson,

I wanted to update you with regards to the TB situation in Pangnirtung. Charlene Lavallee, Patti DeMaio and I had a conversation this morning to discuss solutions around how to manage this program given its significant staffing issues. I will list some concerns surrounding the workload and the staffing in Pang and safety consequences identified.

1. Currently 3 PHN on-site. Working up to 84/hours per week. Ultimately, overworked which leads to error. There has been some question regarding how efficiently things are being done in Pang when orientation is not able to be done properly due to the workload.
2. Next week will be 2 PHNs then the week of Nov 1 will be 1 PHN. The PHN will then be on her own for 3 weeks. This is her first time working within the TB model in Nunavut. **23. 1**
23. 1
3. An LPN will be arriving around Nov 8 who will be directed to the TB program for support. She has a PH background.
4. There will be 2 PHNs as of Nov 21. There will be 3 PHNs as of Dec 7.
5. There were some concerns expressed today on charting that was missing, med delivery safety such as inability to properly monitor pts who are self-administering, labs not being drawn in a timely manner which ultimately results in pt safety concerns all a result of workload.

6. Community safety to do with exposure, becomes an issue when screening is not done in a timely manner due to a lack of resources.

There were some suggested solutions:

1. People on 3-HP should be coming to the health centre to receive treatment. Investigation into a taxi service (unsure if there is one in Pang) and giving out taxi vouchers. Perhaps the hamlet can help with driving patients to the health centre (to be discussed with hamlet)
2. Charlene Lavallee has offered to come to Pangnirtung next week to offer some training and see if things could be done more efficiently
3. Prioritization of dispensing of medication while there is only one PHN in the community. Screening will be put on hold or done at a reduced rate to ensure those requiring treatment and regular labs/diagnostics will be prioritized.

My concern is that classifying this as a cluster rather than an outbreak means that it may get overlooked in the provision of resources. It will be very difficult to control this cluster given the lack of resources at our disposal. Staffing shortages are felt across all nursing sectors currently. Today, the total in Pang are: **23. 1** receiving treatment. Continued screening is uncovering more cases weekly. As was stated in the phone call, there isn't enough reassurance that things are moving forward safely.

I wanted to update you on the situation here in Pangnirtung. Thank you for your consideration.

Charlene, Patti, please add anything I may have missed.

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