



Preparations and planning continues across the Winnipeg Regional Health Authority (WRHA) in the rare event we are faced with managing a suspected or confirmed case of Ebola.

I want to thank all staff involved in the planning so far, and all of you who have been preparing to respond in the event we are faced with a clinical presentation of Ebola.

While it is important we plan and prepare to respond to Ebola, it is also important we remember the Public Health Agency of Canada continues to indicate the likelihood of an Ebola case presenting in Canada and Manitoba remains very low.

As well, to date, there have been no positive Ebola cases detected in Manitoba or elsewhere in Canada.

Ebola transmission continues in the three West African countries of Liberia, Sierra Leone and Guinea, and the World Health Organization continues to recognize the Ebola outbreak in these countries as a public health emergency of international concern.

The following is a summary of recent planning and preparedness activity across the WRHA:

- The issue of Ebola screening in ambulatory care has been discussed at the regional Incident Command table and with Manitoba Health officials. Given all the measures in place for returning travelers, including screening at point of entry, follow-up by public health and advice on how to access the healthcare system if a returning traveler becomes ill, there is very low risk of an unknown person presenting at an ambulatory care clinic. Therefore, the consensus is that screening in ambulatory care is not necessary, and Ebola specific posters are not required in these settings. If the risk level changes, public health will advise and we will adjust our protocols accordingly. This should not, however, prevent professional staff from choosing to ask questions they feel are required to obtain a complete patient history.
- The Health Sciences Centre continues to be the designated the site within the WRHA, and within the province, to care for any suspected case of Ebola. However, we know that patients with symptoms consistent with Ebola may spontaneously present elsewhere in the health system. Our planning continues to be focused on addressing both of these important considerations.

- The Winnipeg Fire Paramedic Service is continuing to provide public updates on the screening of 911 emergency medical calls related to Ebola. Since the screening process was implemented on October 10, 2014, patients identified with potential exposure to Ebola have been appropriately screened and all deemed not to have Ebola. As such, no suspected case of Ebola has been transported to the Health Sciences Centre.
- The WRHA continues to coordinate the acquisition of Personal Protective Equipment (PPE) for the province. PPE has been distributed to all regional health authorities who are actively training staff in its use.
- Staff across the WRHA continue to be trained in the safe donning and doffing of PPE. To date, more than 2,000 staff have been trained in its use. Training documents and videos have been updated and we are redesigning the Ebola resource web page to simplify access to staff resources.

Many of you remain worried about what to do in the rare event you encounter a client or a member of the public who spontaneously presents somewhere in our health system with symptoms consistent with Ebola **and** they suggest they recently returned from an Ebola affected country.

To ensure your own safety and the safety of others you should follow these four key steps:

1. Take a “no-touch” approach to the patient, and maintain a two metre (six feet) distance;
2. Provide them with a mask;
3. Isolate them in a separate room; and
4. Contact your Infection Control Professional/Supervisor immediately.

If you are providing health services in a client’s home:

1. Take a “no-touch” approach to the client, leave the home, and contact your supervisor.

If you or your staff have any questions regarding the planning and preparedness relating to Ebola, or what you should be doing to prepare, I encourage you to contact your manager, site/area Infection Control Professional, the regional Infection Prevention and Control program, or the regional Public Health program.

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