

Ministry of Health

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February 1, 2022

MEMORANDUM

TO: Health Care Providers

RE: Gradual Resumption of Selected Clinical Activities

As you know, in response to the highly transmissible Omicron variant, earlier this month I reinstated in consultation with the Ministry of Health, Directive #2 to defer non-urgent and non-emergent procedures and surgeries and other clinical activities. While this was not an easy decision, these measures helped to preserve critical care and human resource capacity as we responded to a significant increase in hospitalizations and ICU admissions.

Since Directive #2 was reinstated, Ontario's COVID-19 case incidence as well as wastewater surveillance have shown a gradual decline in recent weeks. Additionally, latest modelling for hospitalizations and new admissions indicates that we have likely reached the peak of the current wave and will see a gradual decline in new hospitalizations in the coming weeks.

There has also been considerable load-sharing, redeployment and patient transfers across the health system to maximize the use of available resources. This has provided the opportunity to restore certain non-urgent and non-emergent clinical activity.

As a result, in line with the province's gradual approach to the easing of public health measures, the ministry intends to take a phased approach to resuming select health services deferred in January 2022 and will continue to monitor the impact of the gradual resumption on overall health system capacity.

The revised Directive #2 allows the cautious and gradual resumption of diagnostic imaging, cancer screening and scheduled ambulatory clinics as operationally feasible in public hospitals and in consideration of their local contexts. Additionally, non-urgent and non-emergent surgeries and procedures will cautiously and gradually resume in pediatric

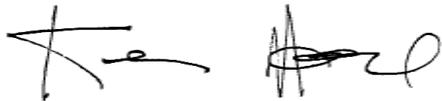
specialty hospitals and other settings such as private hospitals and independent health facilities to alleviate pressures from deferred care. Pediatric specialty hospitals will continue to work with their regional partners to accept patient transfers in alignment with Directive #2.1. Careful resumption of activities in these targeted areas will ensure we do not adversely impact inpatient capacity or health human resources in our hospitals.

While the changes to Directive #2 signal a positive turn toward the resumption of the full spectrum of care, hospitals and ICUs will continue to be operating at a high capacity in the coming months. It is imperative that health care partners that are resuming health services in accordance with the revised Directive #2 do so carefully and gradually, and consistent with the principles of proportionality, minimizing risk of harm to patients, equity and reciprocity.

The ministry will continue to monitor the effects of Directive #2 on our hospital systems and will pivot as necessary.

We will also continue to keep you apprised of changes to Ontario's COVID-19 situation and appreciate your ongoing partnership and dedication to this critical work.

Sincerely,

Handwritten signature of Kieran Michael Moore, consisting of a stylized 'K' followed by a series of loops and a final flourish.

Kieran Michael Moore, MD, CCFP(EM), FCFP, MPH, DTM&H, FRCPC, FCAHS
Chief Medical Officer of Health

c:

Dr. Catherine Zahn, Deputy Minister, Ministry of Health
Matthew Anderson, President & CEO, Ontario Health
Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery Division
Melanie Fraser, Associate Deputy Minister, Health Services
Peter Kaftarian, Assistant Deputy Minister, Hospitals and Capital
Susan Picarello, Assistant Deputy Minister, Emergency Health Services Division