

BCHEMO CONTINGENCY PLAN – PANDEMIC

The following provides an outline of how the Barrington Clarks Harbour Emergency Management Organization intends to support the community response to a pandemic influenza outbreak. It has been developed to minimize the severity of impacts to human health, property and environment during a pandemic.

Pandemic influenza is an outbreak of a viral disease that affects the world population. All levels of government in Canada have been preparing for a pandemic for several years and international preparations and increases in surveillance are on-going. Global travel ensures that outbreak of a highly pathogenic strain occurring anywhere in the world will rapidly (within 3 months) become a worldwide outbreak.

The health response to such large numbers of people sick at the same time will be difficult. As well as responding to the influenza virus, health agencies will also be likely to face staff shortages due to illness. It is anticipated that several health services will have to be suspended during peak levels of illness.

The high absenteeism rates across all sectors may create supply problems. This could include food and fuel shortages, utility and communication interruptions, transportation, waste disposal and water treatment interruptions. There is also a possibility of social disorder if basic supplies require rationing or are unavailable.

Municipal units may face difficulty maintaining municipal operations and operating the Emergency Coordination Center if key staff members are infected.

Because of the provincial and worldwide nature of a pandemic, mutual aid partners may not be available to provide resources to BCHEMO and each other. As well, BCHEMO may be unable to full mutual aid requests from outside agencies and areas.

AREA OF IMPACT

Entire BCHEMO area, plus neighboring municipalities and districts.

NOTIFICATION

Due to the international, provincial and local health surveillance systems, it is likely that the local Dept of Health will have advance notice of a potential outbreak. Nova Scotia EMO, through the

Emergency Planning Officer for Region 5, will ensure situational awareness to the local BCHEMO. BCHEMO involvement will be required if emergency response agencies require resource assistance or if essential community services are disrupted due to absenteeism.

VULNERABLE POPULATIONS

Epidemiological investigation is likely to reveal vulnerable populations as the pandemic progresses. Typically, influenza outbreaks cause increased problems in elderly or very young children.

Other populations likely to be vulnerable include, immunocompromised individuals, health care workers and emergency response workers.

Vulnerable structures include health care facilities (acute and primary), continuing care facilities, emergency response services, governance structure and schools.

LEAD AGENCY (S)

Provincial and local Dept of Health and Wellness
BCHEMO (coordination during critical services disruptions)

ASSUMPTIONS

- The Provincial Dept of Health and Wellness will manage the public health response to a pandemic including providing public information on appropriate health actions.
- The Provincial Dept of Health and Wellness will provide information on public health recommendations such as social distancing and community closures to local governments.
- The inability to maintain essential community services such as power, communication and food supplies will be communicated to local governments and BCHEMO 24 hours or more in advance of shutdown
- BCHEMO will establish its ECC either physically or via communication links during a widespread outbreak. The ECC will maintain reporting structures between the Dept of Health and Wellness, NS EMO and emergency support partners as required and appropriate.
- Mutual Aid assistance from outside REMO will be limited.
- Local authorities should plan for a 15-35% rate of absenteeism over a wave of several weeks.
- There is a potential for 2 to 3 waves over a 12-24-month period.
- Other emergencies during a pandemic are still a consideration, i.e. hurricanes, power outages.

GENERAL APPROACH

BCHEMO will focus on the following objectives during a pandemic.

- Provide community warnings, alerts and messaging in conjunction with the Health Authority and provincial departments.
- Support emergency response agencies as required.
- Maintain situational awareness of essential community services (food, fuel, supplies) and support as necessary.
- Support municipal officials to develop business continuity plans in the event of a pandemic.
- Brief community leaders and decision makers on pandemic planning.

SUMMARY OF BCHEMO DECISIONS

- When to initiate alerts/warnings in support of the Health Authority or as required due to essential service disruption.
- When/where to hold media conferences and generate messaging during essential service disruption.
- ECC activation and de-activation.
- Manage requests from emergency support partners.
- Monitor status and manage request from essential community services.

5 LEVELS OF EPIDEMIC/PANDEMIC PLANNING SCENARIOS

Level 5 – World-wide health emergency or pandemic declared by the WHO, present in Canada. Dept of Health and Wellness monitoring cases and releasing information to the public. No known cases in the province.

Level 4 – Suspected or known cases of pandemic virus/epidemic within the province. Department of Health and Wellness monitoring cases and releasing information to the public on prevention and treatment guidelines.

Level 3 – Local health authorities requesting assistance from local BCHEMO for assistance with information dissemination. Suspected local cases of pandemic.

Level 2 – Pandemic/epidemic spread throughout local community areas. Illness/absenteeism rates are high and municipal units activating their business continuity plans in order to maintain essential services.

Level 1 – Pandemic/epidemic responsible for fatalities and illness spread across the province. Health care system overwhelmed province wide. Business disruption and essential services disruption due to decreased work force.

PANDEMIC ECC ACTION PLAN – ALERT PHASE

Action	Task	Responsible person/ Agency	Supporting Agencies	Comments
A.1	Monitor and maintain situation awareness during Pandemic alert phase	EMC, Asst EMC	NS EMO Dept of Health	Communication lines between departments/agencies established at notification level
A.2	Support public messaging from Dept of Health	Dept of Health, NS EMO, EMC, Asst EMC	Assistant EMC	Information to be distributed via Websites; media releases, public Information lines
A.3	Update plan, revise as necessary, ensure contacts and resources are current	EMC, Asst EMC, Asst. EMC	Emergency Support Partners	
A.4	Inventory and replenish supplies for ECC, including work from home options	EMC, Asst EMC		
A.5	Establish contact and availability of ECC staff	EMC, Asst EMC		
A.6	Review roles and responsibility of ECC staff	EMC, Asst EMC		
A.7	Provide up to date information to municipal CAO/Clerk and Councils	EMC, Asst EMC		

TRIGGERS FOR ECC ACTIVATION

- Level 3,2,1 impacts
- Shelter in place, quarantine support for communities

PANDEMIC ECC ACTION PLAN – RESPONSE PHASE

Action	Task	Responsible Person/ Agency	Supporting Agencies	Comments
ER.1	Activate ECC	EMC/Asst EMC	Asst EMC	<p>Activation request may come Dept of Health and Wellness, NS EMO or another Emergency Support Agency</p> <p>Activation may be established via teleconference</p>
ER.2	Hold situational awareness meeting	EMC/Asst EMC	Lead Agencies Including CAO, Clerk MODB, TOCH	<p>Determine present impact, imminent concerns, potential Impacts, vulnerable groups, resources and personnel Required.</p> <p>All currently involved agencies and partners be present for report either virtually or physically</p>

ER.3	Determine ECC requirements	EMC/Asst EMC	Support Personnel	Based on situational report and event analysis, appropriate resources and personnel will be assembled or contacted.
ER.4	Determine emergency response agency requirements	ECC	Emergency response Agencies, municipal Reps	Identify present or anticipated requirements for supporting personnel and equipment.
ER.5	Issue media release(s)	Mayor/Warden PIO/Communication Staff	ECC, public relations, NS Health, NS EMO	Communicate: <ul style="list-style-type: none"> . Present situation . Anticipated developments if applicable . actions being taken by officials and emergency responders . actions required of residents in the area . sources of further information . time of next release/update . information specific to public health will be generated through NS Public Health & Wellness
ER.6	Set schedule for situational reports	ECC	Responding agencies and essential community agencies	Set schedule for continued reports to monitor situation improvement or deterioration

ER.7	Set schedule for media releases and information sessions	ECC	Responding agencies and essential community agencies	Set schedule for continued communication of situation, anticipated needs and expected actions
------	--	-----	--	---

PANDEMIC ECC ACTION PLAN – RECOVERY PHASE

Action	Task	Responsible Person/Agency	Supporting Agencies	Comments
R. 1	Identify conditions indicating pandemic/surveillance threat removed.	ECC	Dept of Health, Emergency support partners	Decision to declare pandemic threat over made by health authority. Ensure that all supporting agencies aware of decision
R.2	Communicate conditions of assumption of pre-pandemic activities	ECC	Dept of Heath, Emergency support agencies	Prepare media release to communicate <ul style="list-style-type: none"> . what activities can be resumes . conditions of resumption of activities . actions required to ensure safety . method to obtain assistance if Required

R.3	Determine requirement for debriefing/counselling	Mayor/Warden CAO/Clerk	ECC	Identify need for debriefing(s) for residents, responders, other affected individuals.
R.4	De-Activate ECC	EMC/Asst EMC	ECC Members	
R.5	Hold debriefing sessions as appropriate	CISM/Mental Health	ECC Members	
R.6	Financial Assistance from Provincial/federal agencies as appropriate	CAO/Clerk	EMC, NS EMO	Identify if there are any financial assistance packages and requirements for completion. Communicate information to residents involved.
R.7	Identify costs for emergency response	CAO/Clerk	EMC members, Responding agencies, Partners/groups	Identify all costs incurred for response
R.8	Perform overall incident debrief (critique)	EMC/Asst EMC	All agencies and personnel involved in response	Formal report of incident compiled, lessons learned, gaps, meeting held to discuss report
R.9	Revise Emergency Plan and Procedures as appropriate	EMC	NS EMO	Incorporate lessons learned or gaps in resources into plans and procedures for future responses.