

# Pandemic Influenza Plan

**BOARD OF HEALTH FOR THE HALIBURTON, KAWARTHA,  
PINE RIDGE DISTRICT HEALTH UNIT**

**Lindsay, 15 November 2007**

# Agenda

- Pandemic Influenza Plan (PIP) - Overview
- PIP – Next Steps
  - Short Term
  - Long Term
- Issues and Gaps
- Stakeholders Pyramid
- Questions

# PIP Objectives

- The goals of the Pandemic Influenza Plan for HKPR District Health Unit are in keeping with the provincial goals, which consist of the following:
  - 1- To minimize serious illness and overall deaths
  - 2- To minimize societal disruption as a result of an influenza pandemic

# The Plan

- 12 Sections
- Main Sections:
  - Surveillance
  - Mass Vaccination
  - Antiviral
  - Public Health Measures
  - Communications
  - Service Continuity

# Surveillance

- Objectives

- ❖ To detect the pandemic strain early in HKPR District Health Unit
- ❖ To track the occurrence, severity, and progression of the pandemic, based on the World Health Organization (WHO) pandemic phases\*
- ❖ To monitor influenza-like illness (ILI) activity
- ❖ To share surveillance information with pandemic responders to help identify disease, guide prevention, control, and research, and evaluate treatment, prophylaxis and education.

\*Section 4 page2

# Surveillance Activities\*

- The Health Unit surveillance activities will depend on WHO phases and will correspond to the local objectives.
- Changes in WHO phase will affect the surveillance activities that the health unit will undertake.

\*Section 7 – Page 3 &4

# Surveillance “Next Steps”

- Agency

- Review and Implement Surveillance activities
- Revise plan as Ontario Plan develops

- MOHLTC

- Explore the use of a **web portal** to allow institutions and flu centres to submit ILI reports electronically to the ministry
- Protocols for special studies
- Vaccine adverse events reporting form
- Vaccine uptake reporting form

# Mass Vaccination

- Objectives

- ❖ To provide a secure supply of safe, effective vaccine for all HKPR District Health Unit residents as quickly as possible
- ❖ To store, distribute, allocate and administer vaccine supplies efficiently and appropriately
- ❖ To monitor the safety and effectiveness of vaccine

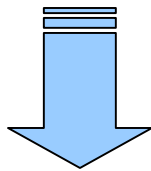
# Mass Vaccination Strategy

- **HKPR will use two strategies to distribute vaccine:**
  1. **“Push”** Vaccine will be provided to pre-identified organizations that will be responsible and accountable for vaccine administration to their own staff and patients/residents based on the priority groups.
  2. **“Pull”** HKPR will set up vaccine clinics in large municipal buildings or schools to administer vaccine initially to the identified priority groups or as direct by the Ministry of Health and Long Term-Care (MOHLTC).

# Mass Vaccination Strategy

- **Push**

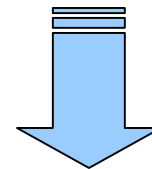
1. Hospitals
2. CCAC
3. Long Term Care



HU distributes vaccine

- **Pull**

1. Emergency/Essential Service Providers
2. Rest of HKPR District Health Unit Residents



HU administers vaccine

# Mass Vaccination “Next Steps”

- Agency
  - Review and Implement MV activities\*
  - Maintain an up-to-date pandemic inventory of assets and skills based on competencies to facilitate rapid mobilization of HKPR District Health Unit human resources for mass-vaccine clinics (MVC) during influenza pandemic
  - Determine the role and responsibility of each department with respect to the operation of MVCs (Using Incident Management System (IMS))
  - Determine vaccine storage capacity
  - Clarify vaccine delivery, the cost of clinic supplies and security strategies
  - Develop mechanism to determine eligibility for vaccination

\* Section 8, pages 6-7

# Antiviral

- Objectives

- ❖ To maintain the security of antiviral drugs supplied to HKPR District Health Unit by MOHLTC
- ❖ To store, distribute, allocate and administer antiviral drugs efficiently and appropriately
- ❖ To monitor the safety and effectiveness of antiviral drugs as well as any development of resistance to antivirals

# Antiviral “Next Steps”

- MOHLTC
  - Maintain antiviral stockpile
  - Establish a storage and distribution system for antiviral drugs to ensure access within 48 hrs.
  - Algorithm for antiviral treatment
  - Guidelines for handling and managing antiviral drugs, including dispensing procedures and how to limit wastage
- Agency
  - Develop procedures consistent with MOHLTC when they become available

# Public Health Measures (PHM)

- Objectives

- ❖ To decrease the number of individuals exposed to the novel virus and potentially slow the progress of the pandemic
- ❖ To slow disease spread and gain time for implementing medical measures (e.g., vaccine)
- ❖ To reduce the morbidity and mortality, and economic and social disruption associated with the pandemic

# PHM “Next Steps”

- Agency
  - Review and Implement PHMs activities\*
  - Educate appropriate staff
- MOHLTC
  - Case and contact management during a pandemic for public health units
  - The impact of public health measures and mitigating strategies on employers and businesses
  - Public health measures for daycares
  - Public health measures for elementary and secondary schools
  - Public health measures for post secondary schools
  - Public health measures for individuals and families

\*Section 10, pages 4 to 6

# Communications

## ● Objectives

- ❖ Educate HKPR residents about the pandemic plan
- ❖ Identify the communication activities that should occur during each phase of the pandemic
- ❖ Ensure both internal and external audiences have access to transparent, accessible, accurate, real time information that will help them respond to challenges during each phase of the pandemic
- ❖ Ensure that lessons learned during each phase of the pandemic are shared with planners

# Communications “Next Steps”

- Agency
  - Review and implement communications activities\*
  - Share with key partners and formalize an inter-agency communications plan

\*Section 11, page 9

# Service Continuity (SC)

- **Objective**

- ❖ Maintain essential public health services for the public in the event of an influenza pandemic
- ❖ Staff deployment to maintain these essential services
- ❖ Manage ill staff and contacts
- ❖ keep influenza out of the Health Unit facilities

# Service Continuity “Next Steps”

- Review and implement SC checklist
- Review and implement SC activities\*
- Review and implement Occupational Health and Safety/Infection Prevention and Control Pandemic Checklist - (JH&S) – Section 12, pages 11-12

\*Section 12, page 17

# PIP Next “Step”

- **Divided into two parts:**
- **Preparedness** (Interpandemic and Pandemic Alert Periods)
  - ✓ Outlines the various elements that are already in place and the planning that is underway to meet the challenges of a pandemic
  - ✓ Identifies unresolved issues
- **Response** (Pandemic Period)
  - ✓ Provides specific details on how HKPR will lead the health response to an influenza pandemic during the pandemic phase
  - ✓ Describes the systems and processes that will be put into place when the pandemic emerges in HKPR District

# Issues and Gaps

- Planning for Group Homes and Day Cares
- Stockpiling (Personal Protective Equipment (PPE) and other Products)
- Need to enhance SC plan
- Coordination of Communications/Emergency Information
- Public Education
- Media Education
- Inter-agency Planning (Health Sector)

# Future Steps

- Short term ~ 1year
  - Begin coordination process for Health Sector Plan (Hospitals, CCAC, LTCHs)
  - Engage the community in collaboration with Community Emergency Management Coordinators (CEMCs)

# Future Steps

- Long term +~1year
- Development of workable inter-agency plan
- Enhance the agency SC plan
- Tabletop exercise which brings municipalities, health sectors and other community partners together
- Ensure Health Unit staff have the necessary knowledge and training to competently respond to pandemic influenza
- Ensure that all roles in health unit response to pandemic are clearly defined

# Future Steps

- Long term +~1year Cont'd
  - Address orientation and training needs as identified in the HKPR District Health Unit PIP and SC plan and outline the training and resources needed
  - Identify orientation and training gaps and propose recommendations on how these can be addressed.

# Community Contacts Pyramid

**Physicians:**  
- Surveillance  
- Alert dissemination

**Health Unit Stakeholders Contacts**

**Pharmacists:**  
- Alert dissemination  
- Surveillance

**Municipal Chief Administrative Officers:**  
- Enumeration Tools

**Coroner**

**CEMCs:**  
- Educate on pandemic and public health  
- Coordinate Response (Communications, Mass vaccination )

**Stakeholders Cont'd**

**Health Unit Stakeholders Contacts**

- Hospitals:**
- Ensure they have own plan
  - Surveillance
  - Coordinate vaccine and antiviral distribution
  - Communications
  - Assessment Centres

- LTCHs:**
- Ensure they have own plan
  - Educate on pandemic, PHM
  - Communication

- Access Centres:**
- Coordinate Vaccine and antiviral distribution
  - Communication

- Day cares:**
- Education
  - Provide self care algorithm

- Correctional facilities:**
- Education
  - Coordinate vaccine

**Stakeholders Cont'd**



**Health Unit Stakeholders Contacts**

**School Boards**

**Private Schools**

**Colleges**

**Group Homes**

**Funeral Homes**

**Social Services**

**Retirement Homes**

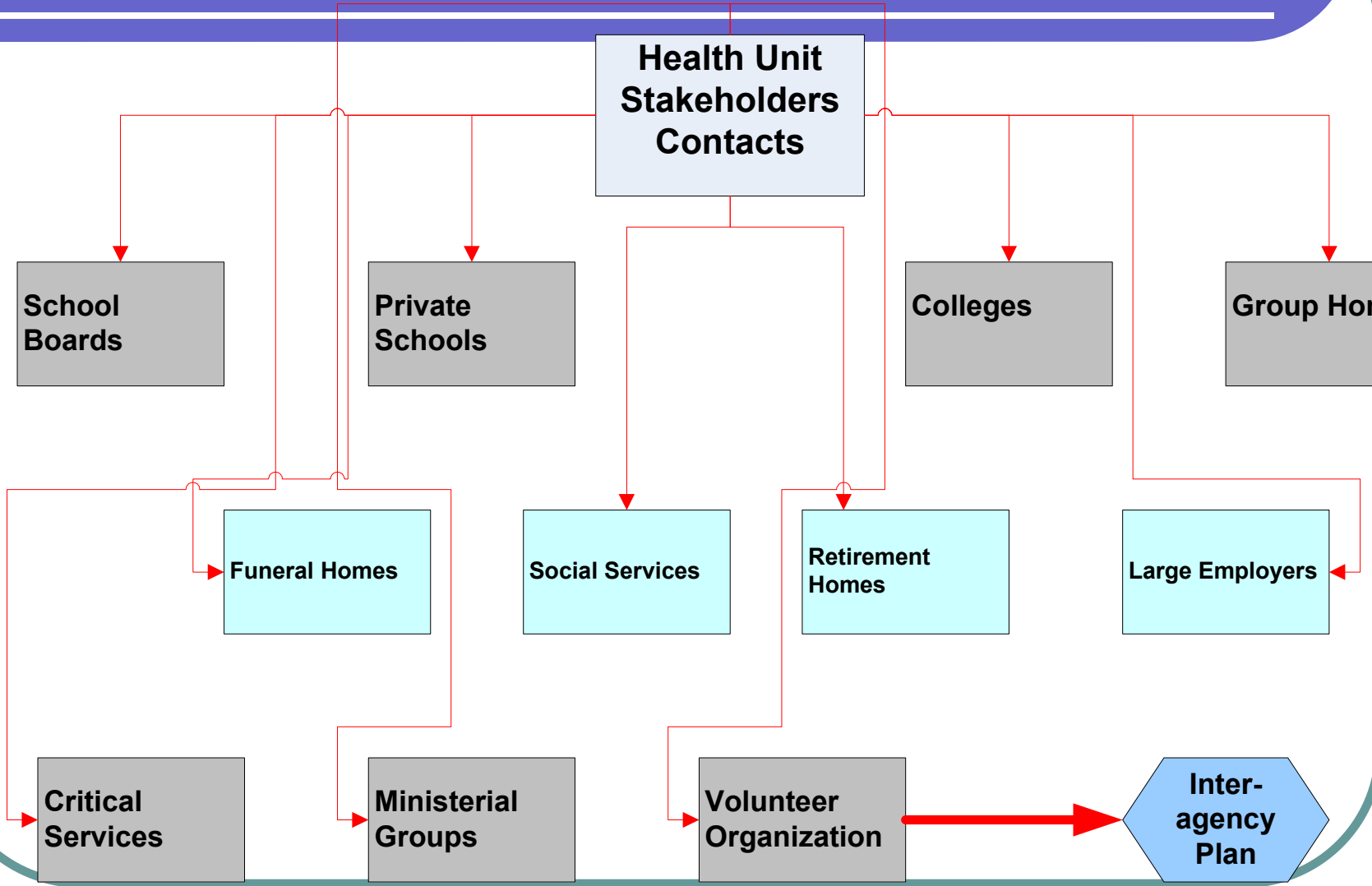
**Large Employers**

**Critical Services**

**Ministerial Groups**

**Volunteer Organization**

**Inter-agency Plan**



## In Summary:

- Still a work in progress provincially and locally
- Local activities and plans need to be consistent with provincial plans and guidelines
- Agency work is ongoing

# Acknowledgement

- Ontario Health Plan for an Influenza Pandemic (OHPIP), June 2007
- Canadian Influenza pandemic Plan (CPIP)
- Middlesex-London Health Unit (2006).  
Pandemic Influenza Plan for Middlesex-London, Version 1.0. London, Ontario: Author.
- New Zealand Business Continuity Planning Guide, October 2005
- Ottawa Public Health Influenza Pandemic Service Continuity Plan

# Acknowledgement

- US Centers for Disease Control and Prevention (CDC) and WHO resources
- Halton, Durham, Simcoe Muskoka and Toronto Public Health.



Questions