

Section 1 Introduction and Overview

The Haliburton, Kawartha, Pine Ridge District Health Unit (HKPRDHU) Pandemic Influenza Plan (PIP) has been written to conform as close as possible to the Ontario Health Plan for an Influenza Pandemic (OHPIP). The HKPRDHU plan has also incorporated materials developed by various local health departments; a list of all information sources is listed in the references page. The Health Unit PIP is part of the HKPRDHU overall Health Emergency Plan (under development). Although this plan is specific to an influenza pandemic, it can also be used in the event of a large communicable disease outbreak (e.g., SARS or other respiratory infectious diseases) or any other health-related emergencies natural or manmade.

The goals of the Pandemic Influenza Plan for HKPRDHU are in keeping with the provincial goals, and 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 ethical and legal frameworks outlined in OHPIP for the province also provide the templates for response within HKPR District. The need for pandemic planning has risen from the existing threat of a possible influenza pandemic.

This document contains concrete plans for how a particular area of response will be implemented. It contains a range of recommendations and an inventory of resources to assist with the response in the event of a pandemic.

Most sections of the plan conclude with a list of activities related to pandemic phases. This approach makes this plan a working document that will undergo many iterations. It will require revision and constant updates as the international, national and provincial documents on which it is based are modified. As well, the HKPR plan will require the participation of all the Health Unit's departments and staff. The following provides an overview of the structure and content of this planning document.

Section 2. Influenza and Pandemic Influenza

This section describes the basic features of how the influenza virus spreads, typical symptoms, how long it takes for infection to develop and how long the virus persists in the environment. It reviews the difference between antigenic shift and antigenic drift and the prerequisites for an influenza pandemic to happen.

Section 3. Planning goals, assumptions and uncertainties

This section outlines the goals, lists some assumption and uncertainties. It provides an overview of the main sources that have been used to assist with pandemic planning from the World Health Organization (WHO), Public Health Agency of Canada (PHAC), Ontario Ministry of Health and Long-Term Care (MOHLTC) and the US Health and Human Services (HHS). This section provides a brief explanation of the Meltzer Model and outlines the estimated impact of influenza pandemic on HKPRDHU's residents.

Section 4. World Health Organization Pandemic Phases

This section outlines the WHO pandemic phases and provides example of each pandemic phase.

Section 5. Legal and Legislative Authority

This section provides an overview of all legislation relevant to emergency planning. It outlines the process of declaring an emergency and the power of the Medical Officer of Health.

Section 6. Health and Social Infrastructure in HKPR District

This section provides an overview of the key health organizations that can assist with service provision in a pandemic. It also provides information on the organizations that will require service and support during a pandemic. Listing these organizations and their numbers of clients and staff will assist in planning for the distribution of antiviral drugs and vaccines. It will also provide some estimates of the number of people who may require assistance during a pandemic and the number and types of people who are available to assist.

Section 7. Surveillance

This section reviews the importance of surveillance information in preparing for an influenza pandemic. The section outlines the websites and sources of information that provide information on the influenza situation around the world. The current mechanisms for monitoring influenza activity within HKPR District are reviewed. Additional surveillance mechanisms will be implemented to detect the arrival of a novel influenza virus in the community.

Section 8. Mass Vaccinations

This section describes the priority list for vaccinations based on the Ontario Ministry of Health and Long-Term Care (MOHLTC) criteria. It outlines the estimated number of priority groups and the mass vaccination process. The section also describes in detail the operation of mass vaccination clinics including staffing, supplies, volunteers and security.

Section 9. Antiviral Distribution

Antiviral drugs are an important disease management strategy, they can be used to treat and to prevent influenza. A plan to procure, store and distribute the antiviral drugs during a pandemic is pending further MOHLTC recommendations.

Section 10. Public Health Measures

This section describes public health measures to be implemented in response to an influenza pandemic, which are non-pharmacological interventions designed to slow the spread of influenza pandemic. These interventions may include early recognition of human-to-human transmission as well as instituting containment measures such as isolation or quarantine and follow-up of contacts. The section defines a series of infection control precautions that should be followed at all times including frequent hand washing, covering the mouth and nose when coughing and sneezing, environmental cleaning and staying home when ill. This

section contains MOHLTC recommendations with respect to closure of schools and day cares and use of quarantine.

Section 11. Communications

This section identifies the Health Unit's spokespersons, audiences and mode of communications. Strategies to communicate pandemic messages to the public are reviewed and include use of: the media, public inquiry hotline, internet, etc. It outlines procedures for teleconferencing and media releases.

Section 12. Service Continuity

This section provides proactive strategies and recommendations for the Health Unit that may assist in the continuity of essential programs and services during an influenza pandemic. These strategies and recommendations include staff training, staff deployment, attendance management, enhanced infection control in the workplace and other preventive health strategies, mechanisms to manage staff who become ill at work and workplace entry restriction.