



## HOMES AND SENIORS SERVICES

**POLICY & PROCEDURE NUMBER: 3.22**

**DEPARTMENT:** *Administration – H&S Emergency Preparedness*

**SUBJECT: Pandemic Plan**

**APPROVAL DATE:** July 2022

**REVISION DATE:** Dec. 2023

**REVIEW DATE:** October 2022

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**Page 1 of 5**

### **PURPOSE:**

The Homes will utilize a site-specific Pandemic Plan to support leaders to make best possible decisions to ensure safety and mitigate risk in the context of a pandemic and to ensure site readiness, including readiness of team members.

Pandemic Plans will be implemented and used in context with other organizational policy & procedure manuals, including Infection Prevention & Control, and Emergency Management.

The Homes will also reference tools and direction provided by Southwestern Public Health Unit. It is noted that in the event of a pandemic, information and requirements may change rapidly as the situation evolves. Provincial mandates will supersede local practice as the highest authority where applicable.

The Home's Pandemic Plan will be reviewed annually or more frequently as needed, with updates to site-specific processes as required. Emergency plans, including pandemic plans, will be evaluated and updated within 30 days of the emergency being declared over, ensuring that entities that have been involved in the emergency response are provided an opportunity to offer feedback (formal debrief).

**Pandemic:** an epidemic spread over a wide geographical area, across countries or continents, usually affecting a large number of people. It differs from an outbreak or epidemic because it:

- affects a wider geographical area, often worldwide.
- is often caused by a new virus or a strain of virus that has not circulated among people for a long time. Humans usually have little to no immunity against it. The virus spreads quickly from person-to-person worldwide.
- causes much higher numbers of deaths than epidemics.
- often creates social disruption, economic loss, and general hardship.

### **PROCEDURE:**

The Homes Pandemic Plan will be reviewed annually and approved by:

- Director of Homes and Seniors Services/Administrator



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**Page 2 of 5**

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- The Joint Health & Safety Committee
  - Local Public Health/Health Authority as required – Medical Officer of Health/Designate
  - Infection Prevention and Control (IPAC) Manager

The Pandemic Plan will also be reviewed with the Medical Advisory/Professional Advisory Committees and with Resident and Family Councils (where they exist), as well as with community agencies, healthcare service providers, partner facilities, and resources that may be involved in pandemic response at the local level.

The Director of Homes and Seniors Services, Administrator/designate will:

- 1) Develop and maintain a home-specific Pandemic Plan that ensures mitigation, preparedness, response, and recovery in the event of a pandemic.
  - Involve all members of the Homes Management Team in development of the home specific Pandemic Plan.
  - Ensure the Pandemic Plan for the home reflects current organizational guidelines and provincial directives along with Public Health and Health Authority guidelines and requirements.
- 2) Ensure the home is represented on any local level in the community for the planning and execution of pandemic guidelines, example Elgin Health System EOC.
- 3) Implement the Pandemic Plan as needed to direct communication flow, manage resident acuity, and allocate inventory of personal protective equipment, etc. and human resources to deliver resident care/services.
- 4) Review and update the home's Pandemic Plan annually (or more frequently as required).
- 5) Conduct specific education and practice sessions for Supervisors with building charge responsibilities.
- 6) Coordinate with the Director/CAO any budgetary considerations to ensure the necessary execution of the Pandemic Plan.
- 7) Ensure practice and documentation of orientation/training activities for staff related to pandemic preparation and response.
- 8) Communicate results to leadership teams/appropriate committees and implement improvements to process as needed.



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**Page 3 of 5**

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The Program Manager of Infection Prevention & Control or designate will:

- 1) Collaborate with Outbreak Management Team (as identified in Elgin County Homes Infection Prevention and Control (IPAC) Policy 5.1 – Outbreak Contingency Plan) and Public Health/Health Authority to implement safety measures to mitigate risk to residents, team members, and visitors including, but not limited to:
  - a. Identifying an area of the Home to be used for isolating residents as required– e.g. Adult Day Program space, resident home area, etc.
  - b. A process to divide staff and residents into cohorts as required
  - c. Staffing contingency plans during an emergency for all programs required under the Fixing Long-Term Care Act, 2021 and its regulation
  - d. Policies to manage staff who may be exposed to an infectious disease, including notifications (e.g. Ministry of Labour, Public Health, etc.)
  - e. A process to manage and isolate symptomatic residents and staff
  - f. Resourcing and supplies, personal protective equipment (PPE) and equipment for the emergency response, as well as a process to ensure that required items have not expired
  - g. Identification of emergency service providers roles and responsibilities
  - h. A plan for food, fluid and drug provision during the emergency
- 2) Collaborate with the Administrator to develop and implement a communications plan to ensure frequent and ongoing communication (staff, residents, families, care providers, etc.), initiated at the beginning of the emergency, when there is a significant status change, and when the emergency is declared over.
- 3) Maintain regular communication with Southwestern Public Health (including subscribe to Advisories Alerts and Information for scheduled and time-sensitive public health updates in the community), and local IPAC Hub.
- 4) Regularly review the Outbreak Status Report to continuously review the homes hazard risk based on community surveillance, and precautionary principle.
- 5) Follow MOHLTC recommendations, directives, orders and requests.
- 6) Follow PHU orders. Communicate and reinforce public health measures and other response strategies with residents, visitors, and staff.



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**Page 4 of 5**

- 7) Complete Hazard risk assessment annually and as required.

The Director of Homes and Seniors Services/Administrator/Designate will:

- 1) On an annual basis (or more frequently as required), review evidence of complete Pandemic Plan for each Home.
- 2) Monitor through regular operations reports that Pandemic Plans are practiced in accordance with relevant legislation and organizational policies and procedures.
- 3) Establish an Incident Management Team to ensure emergency response processes are in place to support business continuity and service delivery needs of residents across the Homes.
- 4) Communicate and activate the Incident Management Team in the event of a pandemic.

### Post Incident Plan for Recovery

Following a pandemic, a debrief will be conducted and will include staff, management, and, as applicable, others (students, volunteers, public health, hospital, EMS, etc.) involved in the incident. Debriefing is an opportunity to build morale, listen to concerns, document lessons learned, and plan for regular operations. Emotional/physical support for those directly involved/witness to the pandemic will be provided as determined by assessed need(s).

A documented evaluation of the incident, policy and procedure shall be conducted within 30 days of the pandemic including what went well, opportunities for improvement, those in attendance, and dates that changes were implemented.

### Testing and Evaluation

Homes are required to test emergency plans including arrangements made with emergency providers. Pandemic plan testing must be conducted annually.

Exercises can be developed to test essential elements, interrelated elements, or the entire plan. These can take the form of table-top exercises, drills, functional exercised and field exercises.

Testing shall include a written record of testing and changes made to improve the plans including the corrective action, and timeframes.



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**Page 5 of 5**

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Emergency plans must be evaluated and updated within 30 days of an emergency being declared over and annually should the plan not be activated.

References:

Fixing Long-Term Care Act, 2021

ON Reg. 246/22

Elgin Long-Term Care Home (LTCH)/Retirement (RH) Evacuation Process, April 14, 2022

Corporation of the County of Elgin COVID-19 Safety Plan, December 21, 2021, v. 5

Administration Policy 1.33 Staffing Plan

Administration Policy 1.36 Operational Scheduling and Cohorting Plan

Administration Policy 1.35 Visitors and Absences During a Pandemic

Elgin County Homes and Seniors Services Infection Prevention & Control Manual including but not limited to:

2.10 Immunization – Staff COVID-19

2.23 Pandemic Prevention and Control – Staff Testing

2.24 Universal Masking of Residents

2.8 a Screening and Surveillance – Staff

2.6 c Screening and Surveillance – Visitors

2.10 Immunization – Staff COVID19

2.26 Staff Immunization

4.7 Identification of Isolation Rooms

4.37 Disease Protocols-Required Level of Precautions

4.38 List of Diseases Requiring Work Restrictions

5.1 Outbreak Contingency Plan

5.2 Resident and Staff Surveillance – Line Listing

5.3 Outbreak Management – General

5.4 Outbreak Management – Roles and Responsibilities

5.4.1 Ministry of Labour reporting form

5.5 Respiratory Outbreak Protocol – Residents and Staff

5.6 Enteric Outbreak (contingency plan) – Residents and Staff