MUNICIPALITY OF NORTHERN BRUCE PENINSULA — EMERGENCY MANAGEMENT PROGRAM

SCHEDULE C

Pandemic Influenza Plan

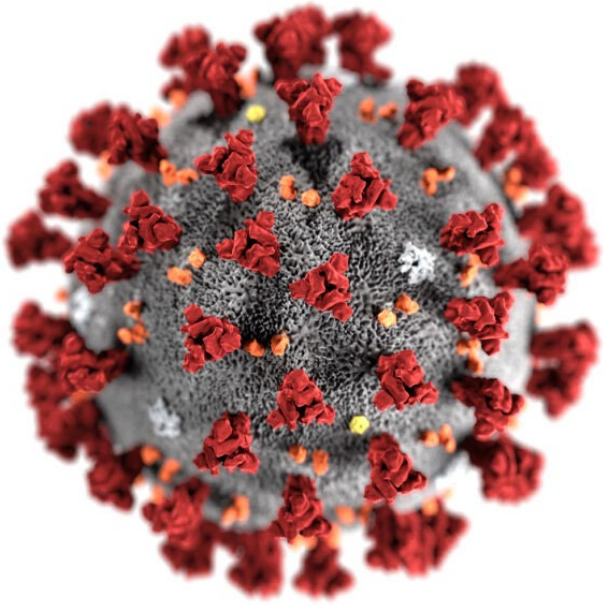


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Background

Generally, pandemic flu will arise every 11 to 44 years. The five major pandemics in the past century include the Spanish (1918), Asian (1957), Hong Kong (1968), SARS (2002) and COVID-19 (2019). The truth is, we have no idea when a pandemic may occur. Pandemic flu is an infection of many people by an influenza virus on an intercontinental scale. Infection may result in serious illness. Since there is little natural immunity in humans, the disease can spread easily from person to person.

An influenza pandemic affects much more than just the health care system. It is a crisis that affects all aspects of society. It must be managed by the coordinated participation and cooperation of governments, businesses, other organizations, and citizens. Because it is a community hazard, each municipal government is responsible for leading its community in preparing to respond to and recover from this type of emergency.

Comprehensive early planning will reduce the effects of a pandemic on society; if preparation is delayed until a pandemic arrives, it may be too late to take the actions that can mitigate its impact. It is important for our Municipality to prepare for any type of pandemic and to apply the lessons learned from the COVID-19 pandemic.

Work has occurred at the Federal level that has resulted in the development of a contingency plan, which reflects the role of the Federal government in a pandemic influenza response. Similarly, at the Provincial level, the Ministry of Health has undertaken a planning process in collaboration with various stakeholders for an Ontario response to a pandemic influenza. The Municipality completed a pandemic influenza plan in 2009 and continues to update this Plan accordingly.

Avian influenza is a type of viral infection that occurs naturally among wild birds and is spread through secretions and droppings.

The H5N1 virus is a particular strain of avian influenza which is deadly to most domestic fowl and can be transmitted from birds to humans. There is a chance that the virus can mutate or change, allowing a new virus to form. This virus might spread easily from person to person, resulting in a pandemic influenza, to which humans have little or no immunity.

H1N1 Influenza is a severe respiratory disease of pigs caused by type A influenza viruses. Normally, this type of influenza is limited to pigs; however, cases of H1N1 viruses have been reported in humans and can spread from person-to-person. More than 168 countries have reported cases of H1N1 Influenza in multiple parts of the world. Cases have also been reported in Mexico, the United States, and Canada. Most cases of human H1N1 flu in Canada and the U.S. have been mild, and people recover fully at home without the need for medical care.

On December 31, 2019, the World Health Organization was alerted to several cases of pneumonia in Wuhan, China. The virus did not match any other known virus. On January 7, 2020, China confirmed 2019-nCoV. The novel coronavirus outbreak began in Wuhan, China and has spread to other countries in Asia and Oceania, Europe, the Middle East, and North America, with three confirmed cases reported in Ontario, as of February 11, 2020. The World Health Organization declared the outbreak a Public Health Emergency of International Concern. Ontario's health system put measures in place to detect and handle cases of 2019-nCoV. On March 9, 2020, Canada confirmed its first death of COVID-19. On March 11, 2020, the World Health Organization declared the global outbreak of COVID-19 a pandemic.

The first COVID-19 vaccines, called Pfizer-BioNTech, were injected into the arms of Canadians in December 2020, a historic moment some have dubbed 'V-Day', as the Country enters a new phase of the ongoing fight against the novel coronavirus. It is anticipated that all Canadians will be vaccinated by the fall of 2021.

In Canada, from 3 January 2020 to 8 November 2023, there have been 4,716,205 confirmed cases of COVID-19 with 53,297 deaths, reported to WHO. As of 2 June 2023, a total of 97,596,974 vaccine doses have been administered in Canada.

On May 5, 2023, the World Health Organization (WHO) declared that COVID-19 would be an ongoing public health emergency of international concern and declared the pandemic phase of the illness over.

Here is what you should know about an Influenza Pandemic:

Ordinary Flu	Influenza Pandemic
Seasonal flu happens every year	An influenza pandemic happens only two or three times a century
Seasonal flu is usually around from November to April – and then stops	An influenza pandemic usually comes in two or even three waves several months apart. Each wave lasts about two months

Ordinary Flu	Influenza Pandemic
About 10% of Ontarians get ordinary seasonal flu each year	About 35% of Ontarians may get the influenza over the course of the full outbreak
Most people who get seasonal flu will get sick, but they usually recover within a couple of weeks	About half of the people who get influenza during a pandemic will become ill. Most will recover, but it may take a long time and some people will die
Seasonal flu is hardest on people who don't have a strong immune system: the very young, the very old, and people with certain chronic illnesses	People of any age may become seriously ill with influenza during a pandemic. This depends on the virus
In a normal flu season, up to 2,000 Ontarians die of complications from the flu, such as pneumonia	During an influenza pandemic, Ontario would see many more people infected and possibly many more deaths
There are annual flu shots that will protect from seasonal flu	There is no existing vaccine for an influenza pandemic. It will take 4 to 6 months after the pandemic starts to develop a vaccine
There are drugs that people can take to treat seasonal flu	These same drugs may also help people, but we will not know their full effectiveness until the virus is identified

Introduction

The goal of the Municipality's Pandemic Influenza Plan is to provide a series of guidelines that can be utilized in order to minimize service disruptions to the residents while maintaining an environment that is safe for employees, residents, businesses, and the environment.

The Municipality works very closely with the Grey-Bruce Medical Officer of Health, as well as receiving information from Emergency Management Ontario. The Municipality also has access to information supplied by the Ministry of Health, Health Canada, and the World Health Organization. These agencies monitor the spread and severity of a pandemic influenza outbreak and advise precautionary measures to prevent the spread of disease and to assist the medical community with planning initiatives.

Once a situation has developed, the Municipality will focus on monitoring and, if necessary, call together key stakeholders to review the global, national, provincial, regional, and municipal situation(s). The Municipal Emergency Control Group (MECG), with the guidance of the Medical Officer of Health, will determine the implications for the Municipality, which portion(s) of this Plan need to be activated, and

whether precautionary or control measures should be initiated. Activation, with or without the declaration of an emergency, is described under Activation below.

As the event continues, the MECG will determine if there needs to be any changes to items such as service levels and staffing. A loss of workforce is expected, and in the event of a severe pandemic influenza outbreak the Municipality may have to limit certain services; services will be prioritized as set out under Scope. Staff members who are able to report to work may be assigned other work to assist with other municipal services as required.

A careful evaluation of hazards, including the potential for increased exposure to influenza, will be conducted on behalf of staff who is reassigned. Appropriate health and safety controls and/or personal protective equipment may be provided, if necessary.

The Plan will assist and facilitate appropriate planning and response for all Municipality of Northern Bruce Peninsula departments by:

1. Developing a municipal plan that will clearly identify roles, responsibilities, and protective measures,
2. Developing a plan that is flexible, to account for the uncertain number of losses of staff and resources,
3. Recommending planning considerations for appropriate prevention and care during a pandemic influenza, and
4. Recommending planning considerations for appropriate communications and preventative measures to minimize service disruptions.

The goal of this Plan will only be realized through the coordinated efforts of all municipal departments. It should be noted that in the case of a pandemic influenza outbreak, the Grey Bruce Public Health - Medical Officer of Health will be the authority and source of advice and information regarding disinfection, personal protective equipment, and other health-related issues.

During the phases of a pandemic influenza, the Municipality will be required to provide appropriate materials and protective devices, and employees are required to use the equipment, materials, and/or protective devices, as defined by the Occupational Health and Safety Act.

Plan Maintenance

It is the responsibility of the Community Emergency Management Coordinator (CEMC) to review and amend the Plan annually or as required. The Plan will also be tested periodically through table-top or other exercises.

Declaration of an Emergency and Activation of the Pandemic Influenza Plan

Authority and Declaration

The Emergency Management and Civil Protection Act states "the head of council of a municipality may declare that an emergency exists in the municipality or in any part thereof and may take such action and make such orders as he or she considers necessary and are not contrary to law to implement the emergency plan of the municipality and to protect property and the health, safety and welfare of the inhabitants of the emergency area." RSO 1990, c.E.9, s.4 (1)

For further information regarding the process to declare an emergency, refer to the Municipality's Emergency Plan.

The Grey-Bruce Medical Officer of Health or alternate may activate this Plan. The Premier of Ontario may declare that a Provincial pandemic emergency exists. See Figure 1 – Activation and Communication Structure During a Pandemic Emergency.

The Health Protection and Promotion Act (HPPA)

The Health Protection and Promotion Act, RSO 1990, c.H.7 provides legislative authority for the public health unit and the medical officer of health to respond to health emergencies. The medical officer of health (MOH) or designate determines the actions needed to protect the community from a communicable disease as outlined in Chapter H.7.

Under Section 13, the MOH is granted the authority to require a person and or groups of persons to take or refrain from taking any action which is determined by the MOH or health inspector to be a health hazard.

In addition, the MOH has the authority to issue an order under Section 22 of the HPPA with respect to communicable diseases if 'he or she is of the opinion (upon reasonable and probable grounds) that a communicable disease exists or may exist, or that there is an immediate risk of an outbreak of a communicable disease in the health unit served by the medical officer of health".

As stated in the Ontario Health Plan for an influenza pandemic, the local MOH can implement national or provincial recommendations regarding containment strategies. These can include, but are not limited to, cancellation of public gatherings and school closures. The local MOH can also implement national or provincial recommendations for the duration of isolation (e.g., 5 days, 10 days, etc.). Influenza is a reportable and communicable disease as defined by the HPPA; therefore, health professionals must report diagnoses of influenza meeting the case definition to the local medical officer of health or designate.

The Quarantine Act, Bill C-12 Chapter 20

An Act introduced into law May 13, 2005, (Bill C012) to prevent the introduction and spread of communicable diseases in Canada.

The Occupational Health and Safety Act RSO 1990, c.C.37

States that all employers have the duty to take all reasonable precautions to protect the health and safety of workers.

Activation

Only the Municipal Emergency Control Group has the authority to request the activation of the Municipality's Emergency Plan and/or Pandemic Influenza Plan. It is to be noted that the MECG can be called together in whole or in part with or without the declaration of an emergency.

Activation Criteria

Upon notification of the Medical Officer of Health or designated member of the MECG, the Pandemic Influenza Plan will be activated in whole or in part when:

1. An influenza pandemic is declared by the Premier of Ontario or the Ministry of Health, or
2. A local case(s) or outbreak of a pandemic strain of influenza is confirmed, or
3. The Emergency Plan for the Municipality is implemented as a result of pandemic influenza in the community, or
4. The World Health Organization has changed the Pandemic Phase. (In this case, the members of the MECG may wish to convene to discuss world, community, and workplace issues).

The Plan will be activated in a series of phases. These phases are dependent upon the spread of the virus and the severity of the symptoms. In order to remain consistent with the World Health Organization, Health Canada, and Public Health, the phases identified by WHO will be utilized by the Municipality (see Pandemic Phases).

Termination

The Mayor, or Deputy Mayor, may declare that an emergency has terminated. The Premier of Ontario may at any time declare that a provincial and/or municipal emergency is terminated.

The Head of Council, or designate, shall ensure that Emergency Management Ontario and members of Council are notified forthwith that the emergency has been terminated. Once terminated, the CAO will notify municipal staff. The Community Emergency Management Coordinator will conduct an internal debriefing process for the MECG. The debriefings should occur within a reasonable period after the termination of the emergency.

The lessons learned and/or evaluation report (e.g., summarizing all the debriefings) will be prepared by the CEMC.

Roles and Responsibilities in the Emergency Operations Centre

Unless otherwise directed by the Mayor, individuals who comprise the Municipal Emergency Control Group will assume the roles and responsibilities as stated in the Municipal Emergency Plan. Refer to this document for an in-depth description of these duties.

Figure 1: Activation and Communication Structure during a Pandemic Emergency

World Health Organization Pandemic Phases

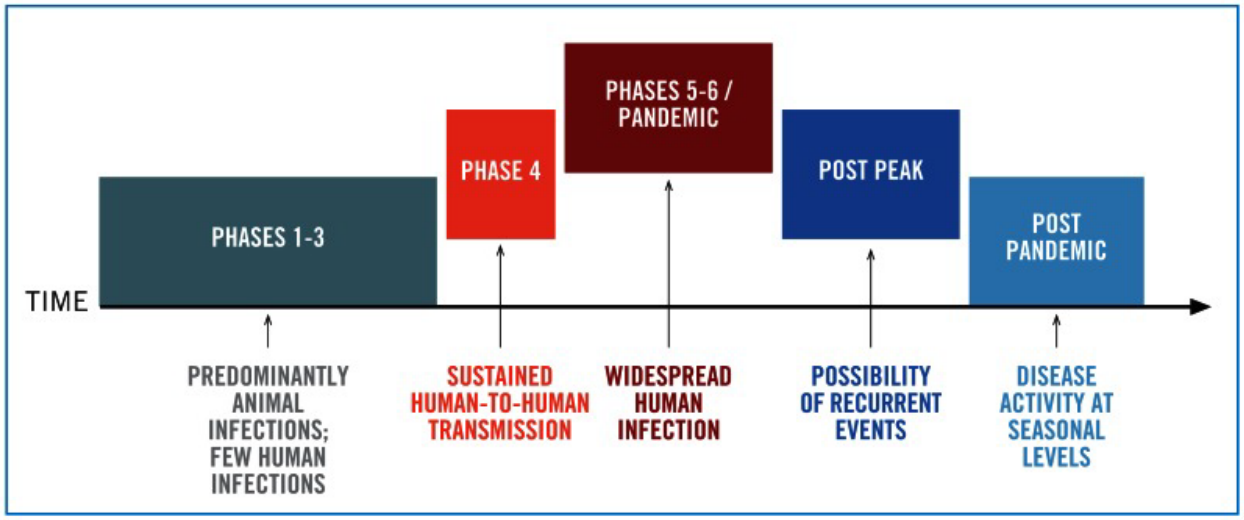
WHO phases reflect the international risk or activity level, but do not necessarily reflect the situation in Canada; therefore, an adaptation of the WHO numbering scheme has been developed nationally to reflect the Canadian situation. The WHO phase number will be followed by a period, and then a number from 0 to 2 indicates the level of activity in Canada. The Canadian adaptation of the WHO phases is as follows:

0 – no activity observed in Canada
1 – single case(s) observed in Canada but no clusters; and
2 – localized or widespread activity in Canada

For example, WHO Phase 6, a declared pandemic with sustained human-to-human activity, would be represented by Health Canada's Phase 6.0 if it has not yet arrived in Canada (taken from 'Pandemic Influenza Plan for the Health Care Sector in Peel 2007').

The following charts and description were taken from the WHO's website:

"In the 2009 revision of the phase descriptions, WHO has retained the use of a six-phased approach for each incorporation of new recommendations and approaches into existing national preparedness and response plans. The grouping and description of pandemic phases have been revised to make them easier to understand, more precise, and based upon observable phenomena. Phases 1-3 correlate with preparedness, including capacity development and response planning activities, while Phases 4-6 clearly signal the need for response and mitigation efforts. Furthermore, periods after the first pandemic wave are elaborated to facilitate post-pandemic recovery activities."



World Health Organization Pandemic Phases

Communication Phases Chart – WHO Pandemic Influenza Phases (2009)

Phase	Description
Phase 1	No animal influenza virus circulating among animals has been reported to cause infection in humans.
Phase 2	An animal influenza virus circulating in domesticated or wild animals is known to have caused infection in humans and is therefore considered a specific potential pandemic threat.
Phase 3	An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people but has not resulted in human-human transmission sufficient to sustain community-level outbreaks.
Phase 4	Human-to-human transmission of an animal or human-animal influenza reassortant virus able to sustain community-level outbreaks has been verified.
Phase 5	Human-to-human spread of the virus in two or more countries in one WHO region.
Phase 6	In addition to the criteria defined in Phase 5, the same virus spreads human-to-human in at least one other country in another WHO region.
Post-peak period	Levels of pandemic influenza in most countries with adequate surveillance have dropped below peak levels.

Phase	Description
Post-pandemic period	Levels of influenza activity have returned to the levels seen for seasonal influenza in most countries with adequate surveillance.

For municipal planning purposes: Phase 4 marks a significant increase in the risk of a pandemic, although a pandemic is not a foregone conclusion. Phase 5 is a strong signal that a pandemic is imminent and that little time remains to finalize the organization, communication, and implementation of planned mitigation measures. Phase 6 means a global pandemic is underway. The post-peak period does not mean the pandemic is over: previous pandemics came in waves that can be separated by months, so an immediate 'at-ease' signal may be premature and the Municipality must remain prepared for another wave. In the post-pandemic period, surveillance continues and pandemic preparedness and response plans are updated accordingly.

Pandemic Phases – Municipal Actions

The actions the Municipality will take are based on the WHO's Pandemic Period descriptions. While Health Canada has also devised a numbering alert system, due to the rapid spread of information and world travel, employees and residents will be well aware of world situations, thus the Municipality will implement, if necessary, the following actions:

Phase 1 – 3

Establish communications between the County of Bruce Community Emergency Management Coordinator and Grey-Bruce Medical Officer of Health. Develop a municipal plan and departmental procedures and plans.

Potential community triggers:

1. A new animal virus has been reported by the Ministry of Agriculture, Food and Agribusiness Animal Health and Welfare Branch and/or Health Canada.
2. Additional information on public health issues released by the Ministry of Health.
3. Local hospitals reporting cases of animal-to-human transfer.
4. Notices from Grey Bruce Public Health on general information relating to the new strain.
5. Health-related items in the media are to be observed.

Phase 4

Inform employees and the public that the Municipality has a plan and is prepared to provide service with minimal disruptions.

Determine communications protocols for businesses and residents in the event that there may be changes to municipal services.

Ensure ongoing communications with the County of Bruce and Grey Bruce Public Health for the latest updates.

Potential community triggers:

1. Local hospitals and Grey Bruce Public Health report cluster cases within the community and/or Municipality.
2. Local schools report illness and absenteeism.
3. Notice a trend in employee absenteeism.
4. Decrease in use of municipal services.
5. Increase in emergency services calls for respiratory distress and influenza-like illness.
6. Monitor media reports for updates.

Phases 5 – 6

The MECG will be alerted, either on stand-by or full alert, and the Emergency Operations Centre may be opened if necessary. The MECG would convene and hold business cycle meetings on a timetable set by the CEMC.

MECG discussions and/or decisions would include, but are not limited to:

1. Implementing a vaccination program, if available and on the recommendation of Public Health.
2. Initiating municipal department contingency plans, including employee segregation and/or work shifts, if necessary.
3. Initiating a comprehensive communication strategy for residents, businesses, media, and employees.
4. Monitoring staffing levels and adjusting services as necessary by the CAO.
5. Initiating ongoing liaison protocols with the Emergency Management Office and Grey Bruce Public Health.
6. Initiating hand sanitizer program (Municipality of Northern Bruce Peninsula facilities only) if directed by Grey Bruce Public Health.
7. Initiating personal protective equipment if necessary or if directed by Grey Bruce Public Health.

Potential community triggers:

1. Local hospitals and Grey Bruce Public Health report large number of cases within the community.
2. Increase in the number of residents who are clinically ill.

3. Increase in the number of employees who are not reporting to work.
4. Decrease in use of municipal services that results in service cancellations.
5. Travel advisories issued.
6. Overwhelming increase in emergency service calls for respiratory distress and influenza-like illness.
7. Increase demand for burial requirements.

Post Peak and Post Pandemic Period

1. Maintain communications with various partners, as required.
2. Maintain health messaging, as required.
3. Prepare a status report on all employees, supplies and equipment.
4. Evaluate the effectiveness of all measures taken and adjust accordingly.

For information on the actions to be taken by the Provincial and Federal Governments for each WHO Pandemic Period, refer to the "Ontario Health Pandemic Influenza Plan" or "The Canadian Pandemic Influenza Plan for the Health Sector".

Scope

This Plan outlines the coordinated actions to be taken for the protection of the life and health of the residents and employees of Northern Bruce Peninsula in the event of an influenza pandemic outbreak and provides direction to all departments within the Municipality.

This Plan only considers the effect of a pandemic influenza on the operation of municipal services and outlines the manner in which those services deemed critical and vital will continue to be delivered throughout the outbreak. Effects on the general population, business continuity for private businesses and social/recreational activities are the responsibility of Grey Bruce Public Health to manage.

Factors that were considered in prioritizing services include, but are not limited to:

1. Regulatory requirements
2. First response obligations
3. Minimum manpower required to provide services

Critical services that must be provided immediately, without which, loss of life, infrastructure destruction, and loss of confidence in government will result. These services for our Municipality are:

1. Continuation of emergency services (fire)
2. Continuation of road maintenance services

3. Continuation of water and wastewater operations
4. Payroll

Vital services that must be provided within 72 hours without which would likely result in loss of confidence in government or disproportionate recovery costs.

1. Finance and administration
2. Waste collection services
3. Waste site operation(s)
4. Noncritical road maintenance

Desired are services that may be delayed for an extended period of time without any serious repercussions. Initial cancellation of these services will be directed by Grey Bruce Public Health and not a decision of our local authority, except where, due to a lack of employees to safely operate that service is not available. In such a case, Council or the Municipal Emergency Control Group may exercise their authority and order the closing or cancellation of those services.

1. Recreation activities (arena and community centres)
2. Recreation amenities (marinas, airports, playgrounds, campgrounds, etc.)
3. Noncritical administration services
4. Building Department (building permits)
5. Taxes, water and sewer administration

Communications

Communication between Grey Bruce Public Health and the Municipal EOC

The Medical Officer of Health, or designate, is the official spokesperson for pandemic/health emergencies. The need to provide immediate public safety directives, the need to provide general public information, and the requirement to provide specific information to targeted groups must all be addressed throughout the emergency. When the Pandemic Influenza Plan is activated, the Emergency Information Officer must work to establish and implement the necessary public communications to ensure the accurate and timely delivery of information related to the emergency.

The Emergency Information Officer will also establish the necessary communications system with the Mayor and CAO so that consistent information is relayed.

There will be a requirement to coordinate public health communications with information on the provision of municipal services. To accomplish this, the Emergency Information Centre will be established in accordance with the Emergency Information Plan to coordinate the dissemination of information regarding

essential services and to perform inquiry functions. If social distancing measures have been put in place, information will be communicated to the MECG via email, in the event that the MECG can't physically meet.

Daily or as information becomes available from the Grey Bruce Public Health, it will be posted on the municipal website.

Communications planning and operations for a pandemic will include the following components:

- Public information
- Media information and media monitoring
- Public inquiry
- Rumour control
- Staff information
- Other targeted groups, such as cottage associations

A comprehensive approach to communication reflects and supports the ethical framework for decision-making during a pandemic, and its purpose is threefold:

1. To educate by:
    - Encouraging Ontarians to take the threat of the pandemic seriously
    - Explaining how to prevent and treat influenza
    - Providing information about influenza symptoms
    - Describing the measures required to protect those at greater risk
    - Conducting regular technical briefings for members of the media
    - Providing transparent, accessible, useful, accurate, technical, real-time information for healthcare professionals that they can use to protect themselves and the public during each phase of the pandemic
2. To reassure by:
    - Demonstrating that the government is prepared and has plans in place before a pandemic occurs
    - Demonstrating that the government has initiated its emergency response plan, when required, is working with all other levels of government and is taking all necessary steps to address the situation
    - Issuing regular, timely updates that provide accurate and relevant information

- Being responsive to information from the field/front lines and using that information to shape/adapt communication messages
- Recognizing the hard work and dedication of all health care workers and essential workers (if applicable)
- Modelling a calm approach designed to reduce fear, avoid panic and encourage vigilance

3. To be accountable by:
    - Reporting regularly on the health care system's ability to respond to the emergency

Mitigation Measures

Purchasing

Prearranged agreements for the purchasing, stockpiling, and rotating of supplies are necessary to ensure PPE and disinfectants are readily available. The MECG and municipal staff will ensure that they have current and adequate arrangements to ensure the availability of supplies during the pandemic.

The CEMC and Fire and Emergency Services will continually monitor their inventory levels with regard to PPE and disinfectants. This material is stored in the Lindsay Works shed and the Municipal Office.

General supplies required for a pandemic influenza may include the following:

1. Nitrile gloves
2. Appropriate Respiratory Protection 3
3. Antiseptic wipes
4. Disinfectant (may include bleach)
5. Hand sanitizers

Tracking of Absenteeism

Managers will be responsible for tracking and compiling the absentee data and reporting to the CAO on a daily basis unless otherwise directed.

Provide daily (unless otherwise directed) absence statistics to include:

1. Number of new absences,
2. Due to illness,
3. Required to provide family support, and

4. Number of employees returned to work and length of their absence.

Hand Hygiene

Thorough and frequent hand washing is the most effective way to prevent infections from spreading. An aggressive program is required to encourage staff to wash their hands before and after any of the following (hand sanitizers are to be used in areas where hand washing is not available):

- Being in close contact with groups of people
- Using the washroom
- Eating, handling food or smoking
- Handling garbage
- Visiting with ill people
- Ensuring front counters and eating areas are cleaned daily
- Blowing their nose, coughing, or sneezing

Reduce Exposure – Social Distancing

The CEMC will ensure the Municipality can help reduce exposure of staff to influenza by minimizing their contact with customers or co-workers during the pandemic. The Grey Bruce Public Health may direct the implementation of guidelines on social distancing in the community and workplace during a pandemic influenza.

- Become familiar with social distancing methods that may be used during a pandemic to decrease the frequency of person-to-person contact (e.g., reducing handshaking, limiting face-to-face meetings, avoiding shared workstations, promoting working from home or through telephone, stagger shifts, etc.).
- Reduce interaction with customers, and avoid having people who are experiencing flu-like symptoms at the workplace. Where possible, communicate with customers by alternate means such as in writing, mail, fax, e-mail or telephone; if you must meet customers in person, create buffer zones of at least two meters (six feet) between each person and keep the meeting as short as possible.
- Identify public meetings, services, and events that can be postponed until it is safe to do so.
- Consider closing the Municipal Office and facilities to in-person services and implementing virtual meetings, where possible.
- Develop and exercise, with key personnel and stakeholders, plans for alternate delivery of services that would usually require direct interaction with customers (e.g., work from home, telephone or mail, local broadcasts).

Travel Restrictions

Travel health advice and restrictions will be provided by the Province of Ontario or Grey Bruce Public Health officials, depending on the severity of the pandemic. Cancellation or postponement of non-essential travel may be necessary. Those who have to travel should talk to a travel medicine provider, public health official, or doctor about their trip and any measures that they should take.

Staff and Visitors to Municipal Properties

Upon direction of Public Health or the MECG, staff and visitors entering municipal buildings will be required to disinfect their hands. Disinfection stations with a supply of hand sanitizers will be set up at the entrances to all municipal buildings.

Personal Protective Equipment Program

Depending on the severity of the virus and recommendations from the Medical Officer of Health and/or the MECG, certain staff may be requested to wear personal protective equipment. This may include nitrile gloves and/or appropriate respiratory protection.

Compensation and Benefits

The CAO will establish any policy regarding any applicable compensation and benefit policies. At this time, all Human Resources policies will be followed and may have to be reviewed before or at the time of pandemic influenza onset.

Departmental Contingency Plans

Each municipal department has prepared a pandemic business continuity contingency plan. These plans have been distributed to the appropriate staff members.

Each department will forward a copy of its plan to the Community Emergency Management Coordinator. It is the responsibility of the manager to ensure that their staff is made aware of their plans and associated procedures.

Support for People at High Risk

Some people will be more vulnerable to an influenza pandemic and more affected by infection control measures than others. People at high risk include the elderly, those with chronic health conditions, and the homeless. Other groups who may have special needs during the pandemic include:

- The working poor, who would likely find it difficult to stay home when ill
- Single parents of young children who may find it hard to look after their children and household responsibilities when they are ill

- Members of ethnic cultural groups who need infection control information and messages delivered in culturally appropriate ways (e.g., in different languages, in video format, etc.)
- Essential workers who may become 'burnt out' due to long hours and stress

Public Health officials will assess the needs of all vulnerable and high-risk groups and work with emergency social service providers and volunteer organizations to find ways to offer support and assistance.

During COVID-19, nursing homes have been the target of too many deaths.

Important Reminder

During a pandemic, it will be important to:

- Follow the directions of Grey Bruce Public Health.
- Stay informed, as directions may change as more information becomes available about the characteristics of the particular virus causing the outbreak.
- Follow infection control procedures at all times. Providing care to someone with influenza will be common during a pandemic (seniors in the community). The likelihood of transmitting the disease is reduced by following basic precautions.

Recovery Phase

The recovery phase starts when the influenza pandemic is declared over. This may not take place until all the recurring pandemic influenza waves have passed. It is important to evaluate the Pandemic Influenza Plan in preparation for the next influenza pandemic wave, to return services and infrastructure to normal levels as quickly as possible, and to address long term health and psycho-social needs of the community.

Activities will include the following:

- Standing down EOC and media information centre
- Preparing a statement for media release
- Evaluating staffing levels, determining areas of shortage
- Arranging a debriefing session with key stakeholders from the Municipality
- Assessing remaining PPE and restocking inventories to normal levels

Summary

The success of pandemic influenza planning and preparedness comes with effort and commitment on the part of all stakeholders. Diligent planning by local government and all community stakeholders will pay big dividends by protecting employees and residents and limiting the social, economic, and psychological effects of a pandemic. Pandemic planning is an opportunity to add to overall community preparedness. This certainly came to light in early 2020 when the Municipality was the only one in Bruce County that had a Pandemic Plan in place.

Amendments

Amendments to the Plan require formal Council approval. Formal Council approval is not required for changes or revisions to appendices, or for minor editorial changes to the text, including page numbering, section numbering, reference changes or changes to references to Provincial statutes.

Amendment	Review Date	Change Date	Changed By
Updated COVID-19 information and status	November 21, 2023,	November 21, 2023.	J. Burt
Annual Review and Revisions	November 21, 2023	November 21, 2023.	J. Burt
Annual Review and Revisions	November 19, 2024	November 21, 2024.	J. Burt
Annual Review and Revisions	December 2, 2025.	December 2, 2025.	J. Burt
Annual Review and Revisions	November 10, 2026.	November 10, 2026.	J. Burt

Appendix 1 - Planning Checklist – Pandemic Influenza Preparedness

By preparing for and managing outbreaks of a pandemic influenza, the Municipality can and should ensure continuity of government, maintain essential community services, and assist individuals, local businesses, and neighbouring communities in coping with illness and its impact.

MNBP will be required to coordinate its own response to a pandemic. It may also be called upon to support the emergency response efforts of the Province, regional health authorities, and neighbouring communities.

Pandemic influenza preparedness builds upon the Municipality's Emergency Plan (Schedule A), which sets out lines of authority, Emergency Operations Centre operations, and contact information for staff and stakeholders.

The following checklist will assist with municipal planning to initiate, develop and implement a pandemic influenza response plan.

Tasks	Responsible	Not Started	In Progress	Completed and Dated
List of essential business functions				
Prepare a list of alternate personnel				
List of alternate suppliers				
Prepare employee policies and guidelines for dealing with a pandemic				
Prepare employee awareness materials				
Plan to stockpile essential resources				
List of essential employees				
Maintaining the integrity of essential public works, municipal water and sewer services, waste management delivery, road maintenance and snow removal, fire and emergency services				
Working with Grey Bruce Public Health, Bruce County and other partners in providing information and advice to the public in a timely fashion				
Closing municipal facilities where it is deemed necessary by the Province or other agencies to prevent the spread of infection				

Tasks	Responsible	Not Started	In Progress	Completed and Dated
Assist Grey Bruce Public Health and other partners with establishing alternative care facilities, if necessary				
Ensure mutual aid agreements with neighbouring municipalities or other agencies are in place				
Provide services as requested to support hospitals, Grey Bruce Public Health and other agencies, if required				
Maintain essential lists of services and facilities along with up-to-date contact information (e.g., sign company, printing company, etc.)				
Provide for increased burials and management of the deceased in coordination with the Bereavement Authority of Ontario				
Maintaining open lines of communication with employees, government agencies, the public, businesses and other organizations within MNBP				
Municipal staff working from home options				