

Emergency Preparedness Planner

A Newsletter for the Health Sector

Emergency Management Unit, Ministry of Health and Long-Term Care

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Emergency Preparedness: A Team Effort!

One of the first things that we learn working in emergency management is that we can't do it alone! Planning for and responding to emergencies requires us to work together, to connect with other parts of the health care system and our communities. Only by forming these connections can we understand the full range of challenges that an emergency presents, discover the ways we can support each other in meeting these challenges, and carry out smooth, coordinated, and effective emergency responses.

In this month's issue of The Planner we bring you some notable examples of collaboration, of relationship-building, and of tools and processes to help us work together smoothly. Technical and operational experts are working together to answer difficult questions and develop the best plans possible, and service providers are reaching out to their communities to raise awareness of emergency preparedness and support future planning collaborations. And at the local level, we see one community's health system and other emergency responders pulling together to respond to a cold and watery dilemma.

We hope that these examples will help you in your own planning and may even give you some new ideas about possible partners in your work to keep our communities healthy and safe!

~ Allison J. Stuart, A/Assistant Deputy Minister, Public Health Division

Ice jams on the Sydenham River cause flooding in the Municipality of Chatham-Kent (see page 4)



Picture courtesy of Chatham-Kent Health Alliance

Ontario Researchers Tackle Pandemic Modelling

Last month's issue of The Planner announced the appointment of Dr. Brian Schwartz as the new Director of Emergency Management Support for the Ontario Agency for Health Protection and Promotion (OAHP). This month we're pleased to be able to profile a new pandemic-related collaboration between the ministry and the OAHP.

When the recommendations of the national Task Group on Antivirals for Prophylaxis (TGAP) were released in August 2008, Ontario and other jurisdictions agreed that there was a need for more research to inform policy decisions on antiviral use in an influenza pandemic.

With the help of Phil Jackson and Dr. David Fisman of the OAHP, as well as Dr. Schwartz, a number of Ontario researchers involved in pandemic-related mathematical modelling work were invited to take part in a two-day event, hosted jointly by the Ministry of Health and Long-Term Care (MOHLTC) and the OAHP. On January 30th and 31st, ministry representatives, OAHP representatives, and more than 15 Ontario researchers gathered to share existing work, examine possible roles for the Agency in facilitating further research, and discuss the potential for this research to address important questions regarding antiviral use during a pandemic in Ontario.

The ministry highlighted the work that has been done in pandemic planning to date in Ontario, as well as some of the feedback on the TGAP recommendations from Ontario's healthcare sector. The OAHP provided an overview of the influenza surveillance data currently collected by the Ontario Public Health Laboratories, and the kinds of information that the lab system could potentially make available in future. And the researchers shared a wide range of the impressive work that has already been undertaken in Ontario, from historical research tracking the epidemiology of the 1918 pandemic in Ontario, to health economics modelling on various possible pandemic interventions, to research looking at how influenza may behave both in populations and individuals.

Discussion is continuing on the best way to promote the excellence of the pandemic-related research being carried out in Ontario and to connect planners, researchers and decision-makers to create relevant research and informed policy. We hope to be able to bring you more news in future issues on the evolution of this exciting collaborative effort!

To contact Dr. Schwartz, email: brian.schwartz@oahpp.ca or call 647-260-7181.

You Asked...?

What is happening with the provincial Incident Management System project?

The Incident Management System (IMS) for Ontario project reached a major milestone earlier this month when the Deputy Minister of Community Safety approved the IMS doctrine on behalf of the provincial government. More than 30 stakeholder groups were involved in the process to develop a standardized Incident Management System (IMS) for use in the province.

This standardized system will provide common procedures for how we plan, respond, communicate and coordinate in an emergency, and will help to build functional interoperability at all levels of emergency management.

Various training courses in IMS are being designed, and will be rolled out starting this spring. For more details, watch this space, and visit Emergency Management Ontario's new IMS website at www.ontario.ca/ims.

Interesting Ontario Research Links:

Centre for Disease Modelling, York University:

<http://www.cdm.yorku.ca/>

An interdisciplinary Canadian research team established shortly after SARS, interested in modeling communicable diseases and promoting involving close interaction and collaboration between mathematical/statistical modelers, medical scientists, and public health policy makers.

International Infectious Disease Data Archive:

<http://iidda.mcmaster.ca/>

A website providing access to a wide variety of data, pulled primarily from books and documents stored in historical archives and libraries, useful for studying patterns of infectious disease incidence and mortality. Registration is required to use the site.

Emergency Management and Medical Isotope Shortages

Shortages of the medical isotopes produced at the Chalk River Laboratory Atomic Emergency Canada Ltd (AECL) have been in the news again recently. The age of the National Research Universal (NRU) reactor has led to several shutdowns in addition to normal maintenance, and as Chalk River is one of the world's most significant producers of these isotopes, problems there can seriously impact the world supply of these medically necessary isotopes. One of the most critical isotopes produced at Chalk River is Technetium-99m (Tc-99m), an isotope used primarily for cardiac and bone scanning and diagnostics.

Extensive collaborative work is going on right now to try and mitigate the results of any significant disruptions to the isotope supply. Under the leadership of the MOHLTC Medical Advisory Secretariat (MAS), an Ontario Isotope Working Group (OIWG) was formed, including stakeholders such as the Ontario Medical Association, the Ontario Hospital Association, Cancer Care Ontario, the Cardiac Care Network and the Ontario Association of Nuclear Medicine, as well as input from physician leaders in the field of nuclear medicine. With the technical expertise of this group, a plan has been proposed that includes a number of mitigation measures, including a prioritization framework for the use of available isotopes, possible replacement isotopes for Tc-99m, and the use of alternate diagnostic tools.

The MOHLTC Emergency Management Unit's (EMU) expertise in emergency planning and response is also being brought to bear on this challenge. The EMU has now taken the lead on this plan, and is working with the OIWG to develop an approach to putting the response framework designed by MAS and the OIWG into action. The EMU continues to work with the OIWG, and is linking with the federal government and other provinces and territories to make sure that key information and best practices are shared. The plan is currently being finalized and is expected to be available by spring, 2009.

Did You Know...?

On March 23rd and 24th, Noojimawin Health Authority is hosting an emergency preparedness planning workshop in Toronto for Aboriginal organizations and the Aboriginal community at large. Participants will also include representatives from various levels of government and public and private sectors.

As one of the five Aboriginal Health Authorities in Ontario, Noojimawin is unique in carrying out dedicated work focused on addressing the health needs of urban and rural Aboriginal people.

The March workshop will raise awareness within the Aboriginal Community about the importance of emergency preparedness and the role of different players - such as the City of Toronto and Ministry of Health and Long-Term Care - in responding to an emergency.

Workshop attendees will also participate in discussions on the needs of their clients during an emergency, the importance of integrated planning within the community to respond effectively to emergencies, and potential strategies to mount an effective emergency response. As well, the workshop will be an excellent opportunity for participants to network with each other about possible roles and future planning collaborations.

For more information about this workshop, contact Noojimawin Health Authority at 416-598-1001 or noojimawin@noojimawin.com.

Canadian Council of Churches Roundtable: Emergency Management

To provide a forum for faith leaders to discuss their role in emergency management, the Canadian Council of Churches and Public Health Agency of Canada co-sponsored a roundtable workshop for church leaders from across Canada in February. The goal was to explore how faith groups can be better integrated in local emergency preparedness and response activities. Emergency planners were on hand to provide an overview of the theories / principles that inform emergency management at all levels of government. As well, faith leaders shared their experiences in order to identify the potential roles and responsibilities of faith groups in supporting the local response.

Outcomes included recommendations to support faith groups to better link with local emergency management organizations, as well as strategies to build a pan-Canada network of faith groups to further enhance emergency management within this sector. For more information, contact Mary Marrocco at marrocco@ccc-cce.ca.

Local profile: Flooding in Chatham-Kent

Many of us are already hoping for warm weather – it's been a long winter characterized by extremely cold temperatures and large amounts of snow! However, the arrival of warmer temperatures can also create situations that require an emergency response. The Municipality of Chatham-Kent experienced this first hand this month in Wallaceburg.

On February 12, 2009, a combination of snow accumulation, sudden warm temperatures and heavy rains caused the winter ice on the Sydenham River to break up very quickly and form an ice jam downstream. The river swelled to its highest level since 1977, and water began to flood into low-lying streets of Wallaceburg and other neighbouring communities resulting in a declaration of emergency by the Mayor of the Municipality of Chatham-Kent. Community emergency response agencies, including officials from fire, police, emergency medical services (EMS), and municipal departments such as public health came together at the emergency operations centre (EOC) to coordinate the response.

At one point, the water was only a few metres from the entrance of a local hospital - Chatham-Kent Health Alliance's (CKHA) Sydenham campus – causing officials to consider the need for evacuation. The hospital's electrical generators, boilers and other infrastructure are below grade, and if the floodwaters had continued to rise, the building would have been without electricity, heat and water. With this risk in mind, the hospital worked with area long-term care facilities, CKHA's Chatham site, the Community Care Access Centre, EMS and others to make sure plans were in place to keep caring for their patients if they had to leave the Sydenham site. Fortunately, the ice jam broke up and the floodwaters started to recede before an evacuation was needed.

For Ken Tremblay, Hospital CEO and Executive on-call that day, it was a case of déjà vu. He was CEO of St. Boniface General Hospital in Winnipeg when the flood of 1997 caused major havoc in Manitoba and its health infrastructure. "Disaster plans are truly challenged in a flood scenario as many assumptions about patients, buildings, emergency evacuation, utilities, community infrastructure, staffing, etc. are inadequate. For example, how does home care work when the community is flooded? If staff cannot get to the hospital, staff probably cannot get home either. Do you evacuate when you still have road access, power and daylight or run the risk of those same events at night, in boats and inadequate power? Our team wrestled with those and other issues as we awaited news about the flood's crest."

As emergency personnel and public works engineers worked quickly to close off flooded streets, warn residents who were threatened by the floodwaters and arrange for an icebreaker, the Chatham-Kent Public Health Unit was also hard at work supporting the flood response. The public health unit activated its health emergency operations centre and crisis communication plan in coordination with the EOC. They quickly put together information on flooding, safe food and home restoration. In addition to issuing media bulletins through the EOC and posting information on the health unit website and municipal web portal, the public health unit joined police and firefighters to hand deliver the information to affected residents.

Responding to emergencies effectively involves a comprehensive coordinated response by all community agencies, as demonstrated by Chatham-Kent. We can't manage emergencies alone, and it's the strength of pre-existing partnerships and relationships across all sectors that ensures Ontario is ready to tackle any type of emergency that occurs within our province.

Congratulations to the Municipality of Chatham-Kent for proving once again that collaboration is the key to mounting a successful emergency response!

Important Dates

Webinar on Heat Impacts & Response Strategies:

March 17, 1:00 - 3:00

The Alliance for Resilient Cities hosts a webinar on building heat-resilient individuals and communities. Visit <http://www.cleanairpartnership.org/arc.php> for more details!

Cross Border Health and Safety Conference:

March 24 – 25, Grand Portage, Minnesota

With presentations from both sides of the border, this event looks at ways to improve the multijurisdictional response to cross-border incidents that affect the public's health and safety

Interested in the 1997 St. Boniface experience? An informative article can be found here:

<http://www.longwoods.com/product.php?productid=16388>