

## Yee Hong Centre for Geriatric Care

<b>Developer:</b> DCD	<b>Division:</b> Corporate	<b>Category:</b> General Administration	<b>Policy Number:</b> CGA-III-20
<b>Effective Date:</b> February 2007	<b>Subject Title:</b> Influenza Pandemic Response Policy – Surveillance, Reporting, and Communication		<b>Approval:</b> CEO
<b>Reviewed/Revised Date:</b> New	<b>Next Review Date:</b> January 2008	<b>Supersedes:</b> N/A	<b>Pages:</b> 15

### **Purpose:**

#### **Surveillance and Reporting**

Surveillance is an essential component of any effective infection prevention and control program. *For pandemic flu management purposes the goal is to ensure identification of potential or actual outbreak in its early stages so that control measures can be instituted as soon as possible to protect clients/residents and staff at Yee Hong.*

Health services providers, including Yee Hong, are expected to keep local (public) health units i.e. PHU(s) apprised of all suspected outbreaks, and to cooperate with local system community response plans during an outbreak. In turn, it is expected that the PHU(s) will report outbreaks to the Public Health Division – Infectious Diseases Branch of the Ministry of Health and Long-Term Care (MOHLTC) for higher level directives.

#### **Communication**

In the event of a flu pandemic, it is essential that clear, accurate, and consistent communication be maintained, both:

- *Internally*, with
  - Yee Hong Centre Board of Directors
  - Yee Hong Centre staff, and volunteers
  - Affiliated service-providers to Yee Hong Centre Long-Term Care Homes (LTCH) i.e. physicians, rehabilitation therapists, and other health services providers
  - Yee Hong Community Wellness Foundation
  - Tenants and other users of Yee Hong premises
  - Students undergoing training at Yee Hong, and
  - Yee Hong clients/residents, and their families
- *Externally*, with
  - Government Agencies i.e. MOHLTC, and PHU(s)
  - Other health/social services providers e.g. local hospitals, other long-term care homes, and community support services agencies
  - Partner organizations e.g. universities, training programs, Villa Elegance

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- Contractors, goods and services suppliers
- News media, and
- Community at large

During a pandemic flu outbreak people will be exposed, through various sources, to information and rumors about the spread and virility of the virus, which will fluctuate according to prevailing circumstances. Amidst inevitable fear and panic reactions, people often expect their employer, and health service providing organizations, to provide accurate information about issues that may affect operations and personnel.

It is important that the Yee Hong Centre, as an organization:

- Demonstrates both awareness of the potential for a pandemic, and capability to manage it;
- Maintains vigilance in surveillance/reporting of potential/actual pandemic flu outbreaks;
- Coordinates information flow with the appropriate authorities;
- Communicates a business continuation plan; and,
- Provides clear, timely, and proactive advice to all stakeholders as events unfolds.

Communication, for the purpose of this policy, includes:

- Reporting to government to support health system surveillance integral to local and provincial pandemic plans;
- Managing information for purpose of providing essential care, support and reassurance to clients/residents
- Supporting staff and affiliated services providers by meeting their need for accurate information; and,
- Informing clients/residents, their families, and the public where appropriate and necessary.

### **Policy:**

#### 1 Surveillance and Reporting

Normally, Yee Hong will

- 1.1 Monitor flu outbreak indicators as per established policies and procedures for baseline infection control practice across all Yee Hong Centre LTCH(s).
- 1.2 Have an internal reporting protocol for staff to notify infection control practitioners at each Yee Hong facility 24 hours a day, 7 days a week, if an outbreak is suspected.
- 1.3 Have an external reporting protocol for each facility to notify the corresponding PHU 24 hours a day, 7 days a week, if an outbreak is suspected.
- 1.4 Regularly review and reinforce practice of such a protocol with all staff.

In the event of heightened alert level during the Inter-pandemic Period, and during the Pandemic Period, Yee Hong will

- 1.5 Switch to monitoring of such other indicators as might be specific to an anticipated pandemic flu outbreak issued by the World Health Organization and local PHU(s).

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- 1.6 Participate in local health system communication/liaison forums to keep apprised of risks, warning signs, and progresses associated with anticipated/actual pandemic flu outbreaks.
2. Activation of Influenza Pandemic Plan

Yee Hong has specific protocol for activating control, staff deployment, communication, and other elements of a business continuation plan in response to an influenza pandemic.
3. Communication
  - 3.1 This Influenza Pandemic Policy CGA-III-20 supplements the Yee Hong policy (CGA-III-01) – *Communication with News Media*, and addresses releasing of information and making announcement to the news media and other parties of interest. It is designed to ensure useful, consistent, and clear flow of accurate information during an influenza pandemic.
  - 3.2 In order to ensure useful, consistent, and clear flow of accurate information in the context of Influenza Pandemic Response:
    - 3.2.1 A centralized communication protocol will coordinate all communication activities associated with pandemic flu response undertaken across Yee Hong.
    - 3.2.2 A current listing of tenants and other users of Yee Hong premises will be maintained to facilitate communication.
    - 3.2.3 Designated members of an “Influenza Pandemic Response Command Team” will manage communication with external parties such as government agencies, other health care organizations, the news media, and the broader community.
    - 3.2.4 Specific communication channels will be established within the Yee Hong organization to provide timely and relevant information during the course of an influenza pandemic to internal stakeholders.
  - 3.3 The Yee Hong Privacy Policies (CGA-III-14, 15, and 16) apply in matters of communication regarding identifiable personal and personal health information even during a flu pandemic, except when privacy policy parameters for specific acts of information collection and disclosure are explicitly waived, and when so instructed to by the government, for the purpose of protecting the health and safety of Yee Hong stakeholders, and the interest/benefit of the wider community.
  - 3.4 All employees, affiliated service providers, and volunteers are informed of their expected and/or alternate roles/responsibilities in the event of an influenza pandemic.

### **Procedures:**

1. Surveillance and Reporting

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1.1 Until such time as a pandemic flu outbreak is declared, or if heightening alert is advised by the local PHU(s) during the Inter-pandemic Period, existing Yee Hong infection control policies apply.

1.2 When advised to by the local PHU(s) to enact Influenza Pandemic Response Policies and/or other extraordinary anticipatory surveillance measures, the Chief Executive Officer or designate will inform staff as to specific flu outbreak indicators to monitor for surveillance purposes.

1.3 Responsibility for linkage with external information sources

During the Inter-Pandemic Period, individual managers participating in external forums concerned with Pandemic Flu preparation will monitor system wide pandemic alert level and other relevant information, and report to Senior Management of Yee Hong to facilitate response planning and readiness review.

1.4 Responsibility for internal surveillance

1.4.1 The designated Infection Control Professional (ICP) at each Yee Hong facility is responsible for surveillance and outbreak management activities as per Yee Hong infection control policies.

1.4.2 In the absence of the ICP, including during weekends and holiday periods, the Director of Resident Care or his/her designate at each facility will be responsible for these functions.

1.5 Target Groups for Surveillance

Surveillance extends to: clients/residents; staff, students and volunteers; as well as families of clients/residents, and other visitors to Yee Hong premises.

1.5.1 LTCH residents surveillance and reporting

Continuous surveillance will establish baseline levels of infection throughout the year. Infection rates above the baseline will be taken as indicative of a seasonal influenza outbreak or the arrival of the pandemic strain.

1.5.1.1 The surveillance program will be enhanced when influenza activity is reported in the community, and when specific instructions are issued by local PHU(s).

1.5.1.2 The surveillance program will include:

- Strategies that reflect community disease prevalence and the unique epidemiology of infection in long-term care.
- Such measures as are already addressed in existing Yee Hong infection control policies, including but not limited to:
  - Screening of all new admissions in accordance with general infection control principles
  - Ongoing assessment of residents for signs and symptoms for acute infection cluster(s).
  - Monitoring for outbreaks during off peak activity time periods (e.g., weekends, holidays).
- Identifying sentinel events and trends.

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- Analysis of surveillance data by the ICP which will be used to trigger actions to reduce or eliminate disease transmission.
  - Implementing such other specific directives if/when required and available from local PHU(s), MOHLTC, and senior management of Yee Hong.
- 1.5.1.3 All direct care staff will be aware of the symptoms of respiratory illness, the criteria for a suspected and confirmed outbreak, and the procedures for reporting to the ICP.
- 1.5.1.4 Whenever there are clusters (as defined by the local PHU) of acute respiratory tract illness within 48 hours on a LTCH resident care unit, an “outbreak alert” is triggered and tests will be done to determine the causative organism as appropriate. (Note: During an influenza pandemic, lab testing through accustomed channels to confirm a diagnosis might not be feasible. In that event, the OHPIP section on Laboratory Services is to be referenced.)
- 1.5.2 Community Support and Social Services clients
- 1.5.2.1 Baseline infection control measures adapted from those designed for the LTCH(s) will be applied in the Community Support and Social Services areas during the Inter-pandemic Period.
- 1.5.2.2 Heightened surveillance measures will be implemented when so instructed to by the local PHU(s).
- 1.5.2.3 In the event that a Pandemic Period is declared, but operation of these areas in whole or in part is allowed to continue:
- 1.5.2.3.1 Staffed screening stations will be established at designated entrances to these areas. Anyone, including client and escort, seeking to enter the community clinics and social services areas will be screened in accordance with local PHU(s) issued protocols for symptoms of acute infection each time they enter. Those meeting criteria suggesting infection risk will not be permitted to enter.
  - 1.5.2.3.2 Signs instructing all visitors to perform hand hygiene and adopt such prophylactic measures before entering as might be prescribed by the local PHU(s) and hand hygiene stations are located at all entrances.
- 1.5.2.4 All visiting clients and escorts will be required to sign in and out, so that a record is maintained of who has been in a Yee Hong facility during the Pandemic Period.
- 1.5.2.5 All staff and other service providers operating in these areas are expected to be aware of the symptoms of acute infections, the criteria for a suspected and confirmed pandemic influenza outbreak, and the procedures for reporting to the ICP responsible for their respective areas.

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### 1.5.3 Staff, student and volunteer surveillance and reporting

1.5.3.1 Acute infection clusters among staff, students and volunteers is screened for throughout the year.

#### 1.5.3.2 Staff, students, volunteers

- Are made aware of early signs and symptoms of acute infections suggestive of influenza.
- Ill with such acute infections is not to come into work. Appropriate attendance management policy is in place to support this expectation.

This rule may be amended during a pandemic when infection is pervasive in the community, and the need for care providers to dependent clients/residents is desperate.

1.5.3.3 Staff, students and volunteers are expected to report acute infections to their supervisor, who will inform the ICP, wellness nurse, and Occupational Health & Safety (OHS) Manager of cases/clusters of employees/contract staff/volunteers who are absent from work for 72 hours with acute infections.

#### 1.5.3.4 The Wellness Nurse

- Will provide advice to the Influenza Pandemic Response Command Team during the Pandemic Period.
- Will, in conjunction with the OHS Manager,
  - Monitor impact of a pandemic flu outbreak on staff;
  - Assist with developing and delivering education, information, and training for staff as necessary; and.
  - Report to the Workers Safety and Insurance Board (WSIB) as appropriate.

#### 1.5.3.5 External Reporting of acute infections

The ICP will report clusters of acute infections in staff, students, or volunteers to the PHU, and alert the OHS Manager to any possible break in infection control procedures and occupational risk to workers. Staff involved with infection control, and OHS will work together to protect worker health and safety in the context of a pandemic flu outbreak.

#### 1.5.3.6 Internal Reporting requirements for acute infections include:

- Staff and students reporting their condition, through their supervisor, to the OHS Manager or delegate.
- Volunteers reporting through staff designated as their supervisor to the ICP.
- ICP alerting the OHS Manager about any clusters of acute infections in clients/residents so that the OHS Manager can monitor potential impact on staff.
- ICP alerting the OHS Manager about any clusters of acute infections in staff and volunteers so the OHS Manager can monitor impact.

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- Yee Hong, as employer, reporting through designated HR staff to the Joint Health and Safety Committee any occupationally acquired acute infection.
- Yee Hong reporting, through designated HR staff, any occupationally acquired infection to the Ministry of Labor (for investigation) and to the WSIB within 72 hours.

### 1.5.4 Family members, visitors surveillance and reporting

1.5.4.1 Instructions are posted for anyone entering or carrying on activities on Yee Hong premises – e.g. family members and friends of clients/residents, contractors – to self screen for symptoms of acute infections each time they enter.

Signs and hand hygiene stations are located at all entrances instructing all visitors to: perform hand hygiene, self-screen for symptoms of acute infections (e.g. new cough, new shortness of breath, fever), and not enter if they have such symptoms.

1.5.4.2 Signs are posted asking all family members and visitors to sign in and out, so that a record is maintained of who has been in a Yee Hong facility in the event of an outbreak.

1.6 The ICP(s) will report any potential or declared acute infection outbreak, internally and externally, in accordance with existing Yee Hong Infection Control Policies.

## 2. Activation of Influenza Pandemic Policies

2.1 Notification received by the Chief Executive Officer (CEO) of the Yee Hong Centre, or designate, from the relevant government agency – usually a PHU – is the trigger event for activating the Yee Hong Influenza Pandemic Policies CGA-III-20, 21, 22, 23 mandated procedures targeting the Pandemic Period.

2.2 Normally, only the CEO is empowered to activate these procedures. If s/he is unavailable when the flu pandemic is declared, a designated alternate in order of the cascade described below is authorized to activate these policies.

<b>Cascade of Officers authorized to activate the Influenza Pandemic Policies</b>	
<b>Primary</b>	Chief Executive Officer
<b>First Alternate</b>	Director of Corporate Development
<b>Second Alternate</b>	A pre-nominated Executive Director (ED) [as of Aug 2006: ED – Markham (MKH)]

### 2.3 The Influenza Pandemic Response Command Team (IPRCT)

#### 2.3.1 Team composition

A pre-identified IPRCT, comprised of managers with key responsibilities, will form a cabinet to assist the Officer in Command – normally the CEO – or the

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designated alternate, in managing operations of the Yee Hong Centre during the Pandemic Period.

<b>Influenza Pandemic Response Command Team</b>	
<b>Role</b>	<b>Scope of Responsibility</b>
<b>Officer in Command</b>	<ol style="list-style-type: none"> <li>1. Make corporate strategic decisions regarding all aspects of operations, including but not limited to:               <ul style="list-style-type: none"> <li>▪ Curtailing service scope and level;</li> <li>▪ Re-deploying staff and other resources.</li> </ul> </li> <li>2. Liaise with government departments/agencies other than Local PHU(s).</li> <li>3. Serve as Yee Hong spokesperson with respect to:               <ul style="list-style-type: none"> <li>▪ The News Media; and,</li> <li>▪ The Community at Large.</li> </ul> </li> <li>4. Authorize cessation of Influenza Pandemic Response Policies implementation, once the Post-pandemic Period is declared by the appropriate government authority.</li> </ol>
<b>Coordinator(s) – Local Centre Operation</b> (One per Yee Hong Centre)	<ol style="list-style-type: none"> <li>1. Liaise with the local PHU.</li> <li>2. Liaise with local health &amp; social services as necessary.</li> <li>3. Manage operation of each centre during the Pandemic Period</li> </ol>
<b>Coordinator – Medical Services</b>	<ol style="list-style-type: none"> <li>1. Maintain contact with centre medical directors, and physicians affiliated with Yee Hong, throughout the Pandemic Period.</li> <li>2. Manage, in consultation with the Coordinators for Local Centre Operations, essential medical coverage for essential Yee Hong service programs during the Pandemic Period.</li> <li>3. Liaise, on behalf of Yee Hong, with such external medical practitioners as might be necessary during the Pandemic Period.</li> <li>4. Assist the Officer in Command, and Coordinator for Pandemic Intelligence and Planning, with respect to:               <ul style="list-style-type: none"> <li>• Keeping pace with and interpreting emerging medical information through the Pandemic Period;</li> <li>• Reassuring internal and external stakeholders</li> </ul> </li> <li>5. Assist Coordinators for Local Centre Operation in consulting with local PHU(s) and other relevant health services.</li> </ol>
<b>Coordinator – Pandemic Intelligence and Planning</b>	<ol style="list-style-type: none"> <li>1. Monitor and compile information available from government departments/agencies, and other credible sources (e.g. WHO) during the Pandemic Period.</li> <li>2. Develop the most credible intelligence on the status of the pandemic flu outbreak, community response, and advice the Officer in Command on continued strategizing, and composition of communiqué to stakeholders.</li> </ol>
<b>Coordinator</b>	<ol style="list-style-type: none"> <li>1. Coordinate arrangements to optimize organizational capacity for continued operation as prescribed in the</li> </ol>

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<p><b>– Finance &amp; Information System</b></p>	<p>Business Continuation Policy (CGA-III-22).</p> <ol style="list-style-type: none"> <li>2. Maintain communication with contractors, and suppliers of essential goods and services, during the Pandemic Period to secure the best availability of such resources to Yee Hong to sustain operation of essential service programs.</li> <li>3. Optimize telecommunication and information system operation at Yee Hong during the Pandemic Period.</li> </ol>
<p><b>Coordinator</b> <b>– Human Resource Mobilization</b></p>	<ol style="list-style-type: none"> <li>1. Coordinate implementation of the Human Resource and Staff Deployment Policy (CGA-III-23)</li> <li>2. Coordinate with universities, colleges, and other training programs to manage practicum students as a resource during the Pandemic Period.</li> <li>3. Coordinate volunteers as might be available to supplement staff resources required to maintain essential Yee Hong services.</li> </ol>
<p><b>Recorder</b></p>	<ol style="list-style-type: none"> <li>1. Design/Refine a documentary system, during the Inter-pandemic Period, for record organizational decisions, and major actions taken to sustain Yee Hong operations during the Pandemic Period.</li> <li>2. Oversee daily entry of information into documentary system during the Pandemic Period.</li> <li>3. Facilitate after-event review and quality improvement initiatives in the Post-pandemic Period as per direction of CEO.</li> </ol>
<p><b>Officers at large</b></p>	<ol style="list-style-type: none"> <li>1. Provide advice to the Officer in Command.</li> <li>2. Support other IPRCT members where specific assistance is required.</li> <li>3. Undertake such previously unspecified role(s) as might arise, at the designation of the Officer in Command.</li> </ol>

2.3.2 When a designated primary manager is unavailable or unable, to continue to perform an IPRCT role, an alternate manager will be mobilized to do so. The cascades of primary/alternate IPRCT members are listed as follows:

<b>Influenza Pandemic Response Command Team</b>	
<b>Role</b>	<b>Cascade of Officers to Assume Designated Roles</b>
<p><b>Officer in Command</b></p>	<ul style="list-style-type: none"> <li>▪ Chief Executive Officer (Primary)</li> <li>▪ Director of Corporate Development (1<sup>st</sup> alternate)</li> <li>▪ A pre-nominated Executive Director (2<sup>nd</sup> alternate) <i>(as of Aug 2006: ED – MKH)</i></li> </ul>
<p><b>Coordinator(s)</b> <b>– Local Centre Operation</b>  (One per Yee Hong Centre)</p>	<ul style="list-style-type: none"> <li>▪ Executive Directors – LTCH (Primary)</li> <li>▪ Directors of Resident Care – LTCH (1<sup>st</sup> alternate)</li> <li>▪ Ass. Dirs. of Resident Care – LTCH (2<sup>nd</sup> alternate)</li> </ul> <p>Note: Coordinators for McN &amp; FCH will act in tandem with each other when liaising and coordinating with the Toronto PHU and other agencies within their shared local area.</p>

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<b>Coordinator – Medical Services</b>	<ul style="list-style-type: none"> <li>▪ Medical Director – Yee Hong Centre (Primary)</li> <li>▪ Physician to be named (1<sup>st</sup> alternate)</li> <li>▪ Physician to be named (2<sup>nd</sup> alternate)</li> </ul>
<b>Coordinator – Pandemic Intelligence and Planning</b>	<ul style="list-style-type: none"> <li>▪ Director of Corporate Development (Primary)</li> <li>▪ Medical Director – Yee Hong Centre (1<sup>st</sup> alternate)</li> <li>▪ Physician to be named (2<sup>nd</sup> alternate)</li> </ul>
<b>Coordinator – Finance &amp; Information System</b>	<ul style="list-style-type: none"> <li>▪ Chief Finance Officer (Primary)</li> <li>▪ Manager, Accounting (1<sup>st</sup> alternate)</li> <li>▪ Manager, Information Services (2<sup>nd</sup> alternate)</li> </ul>
<b>Coordinator – Human Resource Mobilization</b>	<ul style="list-style-type: none"> <li>▪ Director of Human Resources (Primary)</li> <li>▪ Director of Social Services (1<sup>st</sup> alternate)</li> <li>▪ Human Resources Manager (2<sup>nd</sup> alternate)</li> </ul>
<b>Recorder</b>	<ul style="list-style-type: none"> <li>• Director of Quality Improvement (Primary)</li> <li>• Manager, Information Services (1<sup>st</sup> alternate)</li> </ul>
<b>Officers at large</b>	<ul style="list-style-type: none"> <li>▪ Corporate Professional Practice Officer</li> <li>▪ Director of Quality Improvement</li> </ul>

2.3.3 Other Ad Hoc IPRCT Officers will be appointed to replace those who succumb to the flu during the Pandemic Period, and as need for further assistance to the IPRCT arises.

2.3.4 During the Inter-pandemic Period, the Primary and Alternates for each described IPRCT role will have conferred and devised a basic operating plan by which to discharge their assigned functions once a pandemic flu outbreak is declared.

2.3.5 Convening the IPRCT

The IPRCT Team will be activated at the call of the CEO, or designated Alternate, once a pandemic flu outbreak is declared by the local PHU, presumably in response to the World Health Organization doing so.

2.3.5.1 IPRCT members will be summoned via all communications means available to report to the Officer in Command. *A teleconference with the Officer in Command and as many IPRCT members as can be reached will be convened ASAP, using a pre-determined conference call code, to initiate appropriate procedures* contained in policies CGA-III-20, 21, 22, 23.

(Note: Those issued with RIM devices are to watch for e-mail messages with specific instructions pertaining to initial response measures as necessary).

2.3.5.2 During the Inter-pandemic Period, the Director of Human Resource and Manager, Information Services will have prepared and kept current staff contact lists. These will be made available to other IPRCT members with which to call in such staff as might be necessary upon activation of the Influenza Pandemic Response Policies by the Officer in Command.

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2.3.5.3 IPRCT members will utilize such lists to call in such staff as is necessary in each of the area for which they are responsible, in accordance with provisions of the Pandemic (Flu) Policies – Business Continuation Plan (CGA-III-22), and Human Resource and Staff Deployment (CGA-III-23).

2.3.5.4 Having been convened, among the first orders of business, the IPRCT will develop and issue, as quickly as possible, a concise and clear announcement about the Pandemic Period having been declared and the Yee Hong Influenza Pandemic Response Policies being activated both to inform and to reassure internal stakeholders.

### 2.4 A Centralized-Coordinated Influenza Pandemic Response

#### 2.4.1 A virtual command centre

2.4.1.1 Requirement for local decision making, and the desirability of dispersing the IPRCT so as to minimize risk of multiple key managers being exposed to the same risk of infection, dictates for the IPRCT to operate, scattered, from across all Yee Hong Centre sites. Gatherings in face-to-face meeting will be kept to a minimum.

2.4.1.2 Most IPRCT members will operate from their own local centre offices as bases of operation. Some exceptions will be necessary in order to protect role succession viability:

- Instead of at the Scarborough McNicoll (McN) Centre, The DCD (as 1<sup>st</sup> Alternate to assume function as Officer in Command) will be stationed at the Scarborough Finch (FCH) Centre – thereby distributing the three candidates for the Officer in Command role across McN, FCH, and MKH.

2.4.1.3 Where the Officer in Command is located will nominally be designated *the Command Centre* when in fact, the IPRCT as a whole, connected via telecommunication aids, constitutes a *Virtual Command Centre*. Internal and external stakeholders will be connected to the Virtual Command Centre via designated IPRCT Coordinators/Officers and Communication Leads (the latter are identified in Procedure 3.3.4 below).

#### 2.4.2 Centralized-Coordinated command using telecommunication technology

The IPRCT will coordinate actions and maintain ongoing and regular contact with the virtual Command Centre using available telecommunication channel(s).

##### 2.4.2.1 Dedicated IPRCT teleconference code

The CEO, as primary Officer in Command, will pre-designate a *dedicated conference call code* with which the IPRCT will conduct regular and urgent teleconferences during the Pandemic Period.

##### 2.4.2.2 E-mail

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For as long as is available, the internal e-mail system will continue to be utilized. A specific e-mail *Subject Tagline* will be pre-designated for exclusive communication use among the IPRCT during the Pandemic Period to signify communiqué concerning specifically related business.

Those issued with a RIM device are urged to pre-establish a secondary e-mail account, outside of the Yee Hong network, linked to the RIM device as an emergency backup channel in the event of a Yee Hong network breakdown.

### 2.4.2.3 Regular telephone line and teleconferencing

2.4.2.3.1 Use of regular telephone lines will continue to be relied upon for as long as they remain operational throughout the Pandemic Period.

2.4.2.3.2 The IPRCT will teleconference daily at a time specified by the Officer in Command to share intelligence, provide updates on the operational status of key functional area (e.g. human resource availability, essential supplies inventory, incidence morbidity and mortality among residents), and to receive such directive as is necessary from the Officer in Command.

2.5 The Officer in Command is responsible for de-commissioning the IPRCT and deactivating the Influenza Pandemic Response Policies at a suitable time, after the government and local PHU(s) have declared the Pandemic Period to have concluded and that a Post-pandemic Period is in effect, and instruct for Yee Hong to resume baseline operating and management practices.

## 3. Communication

### 3.1 Activating External Linkages as The Pandemic Period is Declared

3.1.1 Establishing linkage with government departments and agencies other than local PHU(s)

3.1.1.1 The Officer in Command (who is also the designated Coordinator to communicate with MOHLTC and LHIN(s), and such other government agencies as might be involved) will contact the appropriate contact government and other public officials to identify him/herself as the designated coordinator of communication for Yee Hong for the duration of the Pandemic Period.

3.1.1.2 Other staff already involved with community forums concerned with pandemic flu response preparation and liaison will maintain such contacts, and channel information available to the Coordinator – Pandemic Intelligence and Planning.

3.1.2 Establishing linkage with Local PHU(s)

Upon activation of the IPRCT, the Coordinators for Local Centre Operation will contact the respective local PHU to identify him/herself as the authorized

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Yee Hong representative, for purposes of communication as regards the flu pandemic. These Coordinators will also work with the IPC at their respective sites to coordinate reporting to the local PHU throughout the Pandemic Period.

### 3.1.3 Establishing linkage with other Key External Contacts

3.1.3.1 The Coordinators – Local Centre Operation will contact relevant local partner organizations, and external stakeholders e.g. hospitals, to identify themselves as the contact persons on behalf of Yee Hong for purposes of local communication during the Pandemic Period.

3.1.3.2 The Coordinator for Finance and Information System will contact contractors and suppliers, of essential services and material, to activate pre-established supply chain arrangements, if any, and negotiate for others to ensure continued delivery of such goods and services as might be feasible during the Pandemic Period.

### 3.2 External communication protocol

3.2.1 The Officer in Command will consult with IPRCT members as necessary to decide on specific information to be released to relevant external parties.

3.2.2 To ensure information about operations, pandemic management, and health status of Yee Hong clients/residents is accurately/consistently communicated to external stakeholders with legitimate interest, specific Communication Leads are designated for respective stakeholder groups.

See Procedure 2.3.2 above for the specific IPRCT member designated to liaise, communicate, and coordinate with each category of external stakeholders, and their intended alternates.

3.2.3 To inform and reassure external stakeholders and the community at large about the status of a pandemic flu outbreak and Yee Hong's response:

3.2.3.1 A specific location on the Yee Hong Website will have been pre-designated as one channel by which to broadcast official announcements.

3.2.3.2 A specific voicemail box will be pre-established, to be activated at the direction of the Officer in Command, as another channel by which to broadcast official announcements.

A Corp of announcers will have been pre-identified and trained to deliver such recorded messages, in English and Cantonese, as directed by the Officer in Command for posting on the voicemail box.

Both communication channels are to be activated by the Officer in Command. Only s/he can approve specific communiqués for posting on these channels. The Coordinator – Finance and Information System will direct Information Technology staff to post approved and remove outdated information from these channels.

### 3.2.4 Communication with News Media

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Yee Hong Policy on Communication CGA-III-01 will apply during the Pandemic Period. Essentially, only the CEO, or Alternate, as Officer in Command, is authorized to speak with the News Media on behalf of Yee Hong, including that pertaining to a pandemic flu outbreak.

### 3.2.5 Communication with other External Stakeholders

Whence the primary and alternate IPRCT members responsible for communicating with a category of external stakeholders are no longer available, the Officer in Command will appoint replacement Alternates.

Where no other IPRCT member has been pre-designated, the Officer in Command or delegate will be the authorized speaker on behalf of Yee Hong.

### 3.3 Internal communication protocol

3.3.1 During the Inter-pandemic Period, updates on influenza pandemic planning at Yee Hong will be communicated to all internal stakeholders through such channels as regular General Staff Meetings, the Yee Hong Staff Newsletter, ad hoc meetings with LTCH residents, and such other means as might be deemed appropriate by the CEO.

3.3.2 During the Pandemic Period, the Officer in Command will consult with the IPRCT as necessary and appropriate to prepare up-to-date information on the status of operation across Yee Hong for proactive sharing with all internal stakeholders with a view to providing the most timely, comprehensive, and useful information for all concerned.

3.3.3 In order to ensure information about operations, pandemic flu management, and health status of clients/residents are accurately and consistently communicated to internal stakeholders, constituency specific Communication Leads have been designated. (See Procedure 3.3.4 below)

### 3.3.4 Designated internal Communication Leads:

Constituencies	Communication Lead
<ul style="list-style-type: none"> <li>▪ LTCH Clients/Patients, and Staff</li> <li>▪ Affiliated Health Services Providers</li> <li>▪ Students, Volunteers</li> <li>▪ Tenants, other users of Yee Hong space</li> </ul>	<ul style="list-style-type: none"> <li>▪ Executive Director (Primary)</li> <li>▪ Director of Care (Alternate)</li> </ul> <p style="text-align: center;"><i>of each LTCH</i></p>
<b>Corporate Staff</b>	<ul style="list-style-type: none"> <li>▪ Executive Director (Primary)</li> <li>▪ Director of Care (Alternate)</li> </ul> <p style="text-align: center;"><i>of the LTCH where staff is located or linked with</i></p>
<b>Community Services</b>	<ul style="list-style-type: none"> <li>▪ Executive Director (Primary)</li> <li>▪ Director of Care (Alternate)</li> </ul> <p style="text-align: center;"><i>of the LTCH where staff is located or linked with</i></p>
<b>Supportive Housing</b>	<ul style="list-style-type: none"> <li>▪ Executive Director – McN (Primary)</li> <li>▪ Director of Care – McN (Alternate)</li> </ul>
<b>Medical Services</b>	<ul style="list-style-type: none"> <li>▪ Medical Director, and (Primary)</li> </ul>

## Yee Hong Centre for Geriatric Care

	<ul style="list-style-type: none"> <li>▪ Executive Director – Local Centre (Primary)</li> <li>▪ Director of Care – Local Centre (Alternate)</li> </ul>
<b>Yee Hong Garden Terrace</b>	<ul style="list-style-type: none"> <li>▪ Executive Director – FCH (Primary)</li> <li>▪ Director of Care – FCH (Alternate)</li> </ul>
<b>Yee Hong Community Wellness Foundation</b>	<ul style="list-style-type: none"> <li>▪ Executive Director – FCH (Primary)</li> <li>▪ Director of Care – FCH (Alternate)</li> </ul>
<b>Yee Hong Community Wellness Foundation – Board of Directors</b>	<ul style="list-style-type: none"> <li>▪ President – Foundation (Primary)</li> <li>▪ To be designated (Alternate)</li> </ul>
<b>Yee Hong Centre for Geriatric Care – Board of Directors</b>	<ul style="list-style-type: none"> <li>▪ Chief Executive Officer (Primary)</li> <li>▪ Director of Corporate Development (Alternate)</li> </ul>

3.3.5 Official announcements pertaining to a pandemic flu outbreak, and the operational status of Yee Hong

3.3.5.1 Such information will be posted on a pre-established site on the Yee Hong Intranet and voice mail boxes to keep staff and other internal stakeholders informed.

3.3.5.2 Only the Officer in Command can approve specific communiqués for posting onto and removal from this channel. The Coordinator – Finance and Information System will direct Information Technology staff to handle postings and removals.

3.3.5.3 A roster of staff with English and Chinese (Cantonese/Mandarin) language skills will have been identified through Corporate Managers during the Inter-pandemic Period, and called upon to record announcement messages during the Pandemic Period.

3.3.6 In addition to proactive communication on the part of the organization, internal stakeholders can also address specific query to the designated Communication Lead for their area. The latter will provide such information as is available or refer to the Officer in Command.

3.4 This communication plan, once implemented, will stay in effect until the Post-pandemic Period is declared by the relevant authority, and the IPRCT is disbanded at the instruction of the Officer in Command at the time.

Note: Portions of this policy has been reproduced or paraphrased from the document *A Guide to Influenza Pandemic Preparedness and Response in Long-Term Care Homes* (2005) produced by the MOHLTC-Emergency Management Unit.