

## Yee Hong Centre for Geriatric Care

<b>Developer:</b> DCD	<b>Division:</b> Corporate	<b>Category:</b> Corporate Administration	<b>Policy Number:</b> CAD-VIII-05
<b>Effective Date:</b> February 2007	<b>Subject Title:</b> Influenza Pandemic Response Policy – Human Resources and Staff Deployment		<b>Approval:</b> CEO
<b>Reviewed/Revised Date:</b> November 2009	<b>Next Review Date:</b> November 2010	<b>Supersedes:</b> Not Applicable	<b>Page:</b> 1 of 10

### **PURPOSE**

#### **Planning to Address Inevitable Health Care Personnel Shortages during an Influenza Pandemic**

Health care providers are no less susceptible to infection than clients/residents in their care. During a pandemic flu outbreak,

- A large number of Yee Hong staff will also fall ill;
- Their families falling ill will require their care; and,
- Other related complicating factors might precipitate hesitancy to report to work.

There will likely be insufficient staff available to continue operating all Long-Term Care Home (LTCH) and community support service (CSS) programs at normal operational levels. *Business Continuation* Policy CAD-VIII-04 addresses how decisions are to be made about specific programs to continue operating, and programs to be suspended so as to accommodate constricted availability of both human and material resources. The *Human Resources and Staff Deployment* Policy CAD-VIII-05, focuses on how human resources is to be managed to sustain service delivery during the Pandemic Period to residents/clients dependent upon the care provided by the Yee Hong Centre.

#### **Reinforcing the Commitment of Yee Hong and Staff as Health Care Providers**

Large numbers of seniors are dependent upon Yee Hong for residential care and community support services. As an organization, Yee Hong is committed to providing essential healthcare services during a pandemic flu outbreak. Employees of Yee Hong are obligated, both as a part of a seniors care organization, and by the ethical standards of professional colleges, to continue caring for clients even if their own well-being might be placed at risk when doing so.

These policies and procedures articulate the commitment of Yee Hong, in the context of an influenza pandemic, to:

- (i) Sustain a culture of safety within the organization;
- (ii) Create a work environment that supports the continued delivery of care/service;

- (iii) Translate ethical principles into action that takes into account professional codes of conduct and community values when deploying staff to deliver essential services; and,
- (iv) Ensure delivery of the best possible care to clients of essential service programs.

## **POLICY**

In the event of a pandemic flu outbreak, specific human resources management and staff deployment measures will be implemented to mobilize the largest possible complement of human resources available to sustain service delivery, including:

### *1. Adjusting levels of programs/services in operation*

As provider of choice, the Yee Hong Centre for Geriatric Care will provide as much essential healthcare services, and for as long, as possible during the Pandemic Period to those residents/clients who depend upon Yee Hong for care.

- 1.1 Yee Hong will make optimal use of available incumbent human resources, including staff, volunteers, and practicum students to maintain availability of essential services.
- 1.2 Yee Hong will explore and incorporate atypical but appropriate external community human resources to supplement incumbent human resources available to it.

### *2. Redeploying available human resources to sustain service delivery.*

- 2.1 The Influenza Pandemic Response Command Team (IPRCT) – will assume responsibility for coordinating human resources and staff deployment once the Yee Hong Influenza Pandemic Response Plan is activated.
- 2.2 The Master Schedule(s) – of all areas will be reviewed and adjusted as necessary to address staffing shortages across all departments, divisions and centres to ensure essential service coverage.
- 2.3 All Staff, placement students, and volunteers will be mobilized – to assume flexible functions in providing essential care to our clients/residents during this time of crisis.
- 2.4 Health care workers' duty to provide care – is interpreted as an inherent ethical expectation for all Yee Hong employees to continue providing services to dependent clients/residents in the event of a pandemic flu outbreak.
- 2.5 Specific guideline(s) to address issues of staff working at multiple sites, and/or for multiple employers – will be put into place.

### *3. Protecting and supporting employees*

As an employer of choice, the Yee Hong Centre,

- 3.1 Acknowledges a duty of care as employer to protect employees exposed to risks in the course of performing their work role.
- 3.2 Is committed to providing employees with appropriate protection against infection while expecting for them to continue working through the Pandemic Period.
- 3.3 Acknowledges the commitment of employees to their duties when working in high risk situations during the Pandemic Period.

- 3.4 Attends to staff well-being, by addressing the need to balance work and family demands when scheduling work shifts, and helping them address psychosocial concerns associated with working during a pandemic flu outbreak.
4. *Pre-establishing minimum staffing thresholds for all functional areas across Yee Hong to facilitate human resources deployment during the Pandemic Period.*
5. *Planning for knowledge/skills transfer to support redeployed personnel.*
6. *Referencing and acting in accordance to such legislations as might be applicable in Canada and Ontario.*  
 The Director of Human Resources will research and advise the IPPC and Senior Management of Yee Hong as to legal and legislative considerations associated with but not limited to provisions of the (Ontario) Emergency Management Statues, Occupational Health and Safety Act, the Employment Standards Act etc, as per their relevance to measures established to help Yee Hong cope with anticipated human resources challenges in the context of a pandemic flu outbreak.  
 Refusal to work issues will be managed in accordance with provisions of applicable legislations and statues, Yee Hong Human Resource Policy, and with due considerations given to the well-being of staff.
7. *To maintain ongoing readiness to respond to a pandemic flu outbreak, the human resource and staff deployment plan as described in these policies and procedures will be regularly reviewed to maintain currency in applicability.*

## **PROCEDURES**

1. *Adjusting levels of programs/services in operation*
  - 1.1 Optimizing availability of incumbent human resources
    - 1.1.1 Yee Hong will maintain delivery of a full range of service programs for as long as possible during a pandemic flu outbreak so long as human and material resources required to do so is available.
    - 1.1.2 Where a specific service is determined to be essential for the survival and medical well-being of incumbent clients/residents who have no alternative recourse, Yee Hong will strive to continue operating that service within the limits of resources available during a pandemic flu outbreak.
    - 1.1.3 Services not deemed essential for the survival and medical stability of clients/residents will be assigned a lower priority level, and be discontinued
    - 1.1.4 When human or material resources required is unavailable at a sufficient amount, the plan outlined in the Business Continuation Policy CAD-VIII-04 for curtailing or suspending lower priority level services/programs will be implemented by the IPRCT.

- 1.1.5 All human resources – i.e. staff, placement students, and volunteers – made available by the curtailment of specific services/programs will be redeployed by the IPRCT to help sustain operation of essential services/programs.

## 1.2 Accessing additional/atypical human resources

### During the Inter-pandemic Period

- 1.2.1 The Human Resources Department (HR) will explore with nursing service agencies about the practicability and cost of accessing additional human resources through them in the event of a pandemic flu outbreak. Prospective contractual agreements will be established where feasible.
- 1.2.2 HR, and Coordinator of Volunteer and Advocacy, will establish and maintain a database of all volunteers including information about qualification, experience, and special skills possessed (where applicable) to facilitate identification of available resource when targeted deployment is required during the Pandemic Period.
- 1.2.3 The Coordinator of Volunteer and Advocacy will conduct anticipatory discussion with local service clubs, church groups, schools, and other such potential sources of additional volunteers about their prospective availability.
- 1.2.4 HR, and relevant Division Heads, will ascertain through discussion with training organizations at all levels, to establish and maintain database of students as supplementary human resources available that might be activated during the Pandemic Period.

### During the Pandemic Period

- 1.2.5 When staff becomes aware of clients'/residents' family members expressing interest in assisting with delivery of some aspects of resident care at Yee Hong, the IPRCT is to be made aware through the Coordinators of Local Centre Operations.
- 1.2.6 Where volunteers, including family members of residents are involved in sanctioned functions, staff will maintain vigilance to ensure that volunteers are not performing unauthorized control acts or such tasks as they have not been trained to do.

## 1.3 Risk management and legal liability

- 1.3.1 In the Inter-pandemic Period, the Chief Finance Officer (CFO) will research and report through the Chief Executive Officer (CEO) to the Yee Hong Centre Board of Directors about insurance availability, affordability, and feasibility for utilizing volunteers, and family members of residents to deliver some aspects of care in the context of a pandemic flu outbreak, and take such action as deemed necessary by the Board.
- 1.3.2 The CFO will review this issue periodically as practice in the long-term care sector and insurance industry evolves and more information to guide future decision in this matter becomes available, and present such revised

recommendation through the CEO to the Board of Directors as might be necessary.

## 2 *Redeploying staff and other personnel*

- 2.1 The Coordinator – Human Resource Mobilization of the IPRCT, in consultation with other IPRCT members, will take lead responsibility for coordinating redeployment and assignment of staff, students and volunteers during the Pandemic Period.
- 2.2 Review and adjustment of Master Schedule and staff vacations  
Once the Yee Hong Influenza Pandemic Response Plan is activated,
  - 2.2.1 All employees are to continue reporting to their normal duties unless specifically directed to do otherwise.
  - 2.2.2 All previously approved vacations will be suspended until the staffing situation is stabilized, and the IPRCT advises staff otherwise.
  - 2.2.3 Yee Hong will compensate staff for expenses of cancelled vacation packages, that cannot be deferred, and if refund from the package retailer is not possible.
  - 2.2.4 All staff on leave will check in with their immediate supervisor. The latter will consult with the IPRCT and advise staff as to re-deployment as required.
  - 2.2.5 IPRCT Coordinators of Local Centre Operations, or designate(s) will review the Master (and associated) Schedules at all sites to identify areas vulnerable to shortages. They are to consult with the Coordinator of Human Resource Mobilization to arrange for staff re-deployment as necessary.
- 2.3 Minimum staffing levels for each program/service will have been established during the Inter-pandemic Period to accommodate reduced staff availability, and an augmented level of staffing defined with which to sustain essential program/service operations. (Refer to Procedure 4 below in this policy document for details.)
  - 2.3.1 Where lower priority programs/services are curtailed, staff resources made available will be redeployed to sustain essential services/programs. It is expected that staff will have to be redeployed across services/programs, departments, divisions, and centres.
  - 2.3.2 Consideration will be given to compatibility of skills required in adapted work roles and competence of personnel to be redeployed. Where instruction or training to perform specific tasks is required, such will be provided.
  - 2.3.3 Where infection prevention and control measures for managing seasonal flu outbreak might preclude or restrict deployment of staff who has not been vaccinated against the flu, in the event of a pandemic flu, in accordance with provisions of Emergency Management Statutes – when activated by the provincial government – and in response to staffing challenges at the time, Yee Hong Shadow HR Policy might:
    - 2.3.3.1 Utilize and deploy staff who might not have been vaccinated; and,
    - 2.3.3.2 Require of such staff to take antiviral medications except where medically contraindicated.

- 2.4 Health care workers' ethical duty to provide care will be referenced.
- 2.4.1 By virtue of Yee Hong being a health care provider organization, all employees engaged in delivering direct client/resident care or in support of organizational functioning, are considered health care workers, and are expected to honor the applicable ethical duty to continue providing care.
- 2.4.2 Employees who are members of regulated health and social services professional colleges are expected to abide by their respective ethical codes of conducts to continue meeting the needs of clients in their care.
- 2.4.3 Once a pandemic flu outbreak is declared, Yee Hong will constantly monitor the health and operational status of its workforce through provisions of the *Surveillance, Reporting, and Communication Policy CAD-VIII-02*, *Containment and Risk Reduction Policy CAD-VIII-03*, and other relevant Yee Hong infection control policies.

All staff, students, and volunteers will fall into one or more of the following categories at some point during the Pandemic Period:

- Those who have been struck down with the virus
- Those who are at home acting as primary caregivers;
- Those who have managed to avoid the virus;
- Those who are in recovery mode and physically able to return to work;
- Those who have been effectively protected through vaccination (when available)

In the event of severely restrictive availability of human resources to deliver essential care and services, decision will be made by the IPRCT with reference to directives issued by the local (public) health services (PHU) as to which categories of staff, students, volunteers, might work in resident care and non-resident-care areas.

- 2.5 Guidelines for Yee Hong staff working at multiple sites, or for multiple employers.
- 2.5.1 When the risk of the pandemic flu spreading is still considered low by the PHU, Yee Hong staff who are also concurrent employees of other organizations will be encouraged to choose and stay with only one employer through the Pandemic Period.
- 2.5.2 Where risk of infection is deemed high by the PHU, Yee Hong might require that individuals only continue working at Yee Hong facilities until the Pandemic Period is declared over.
- 2.5.3 As a general principle, within Yee Hong, unless otherwise instructed to, staff is to work exclusively at one centre so as to minimize the risk of the pandemic flu being spread inadvertently between sites.
- 2.5.4 Depending on the severity of staff shortage, the IPRCT will determine if Yee Hong staff might have to be shared between multiple sites within the organization, with due consideration given to minimizing the risk of inadvertent spread of the pandemic flu.

2.5.5 External expert advice by PHU, and the Ministry of Health and Long-Term Care – Emergency Management Branch, will be sought by the IPRCT, as necessary, to inform such decisions.

### 3. *Protecting and supporting employees*

#### 3.1 Protection for staff

In long-term care homes or community health services settings, where people with infectious diseases are treated, maintaining “total protection” or “zero risk” for residents/clients, visitors or health care workers is impossible. However, Yee Hong will take all possible steps to protect staff – and reduce the risk of infection while providing care, including:

- 3.1.1 Subscribing to the Ontario Health Plan for Influenza Pandemic (OHPIP) enumeration program for healthcare staff in essential positions, and maintaining the database of Yee Hong staff for purposes of prioritizing issuance of prophylactic medication, and immunization. This database is maintained by ICP of each Yee Hong Centre and kept updated.
- 3.1.2 Seeking instruction from the PHU(s) as to provisions for community services and other staff, who are not initially included in the OHPIP enumeration plan, but who will be deployed during the Pandemic Period to assist with resident care in essential services/programs areas.
- 3.1.3 Providing staff with appropriate personal protective equipment (PPE) – i.e., face shields, masks, gloves, gowns – as prescribed under the OHPIP.

#### 3.2 Appropriate Protection

- 3.2.1 The Manager – Occupational Health and Safety, the Infection Control Professionals (ICP) at each local centre, the Wellness Nurse, and the Joint Occupational Health and Safety Committee will jointly oversee implementation of appropriate health and safety, infection prevention and control programs; and augmenting them with directives issued by the PHU(s) during a pandemic flu outbreak.
- 3.2.2 The Coordinators for Local Centre Operations arranging for relevant training to be provided to staff as needed to promote better practice in surveillance, infection prevention and control while caring for influenza patients.

3.3 Acknowledging the commitment of employees working in high risk situations  
Yee Hong will commit to accessing all available resources through government and such other corporate/community resources as might be available to acknowledge gratitude for the commitment and sacrifices made by staff in continuing to care for residents/clients in the context of risk during an Influenza Pandemic.

3.4 Attending to staff well-being during the Pandemic Period  
Managers and supervisors at each level of responsibility will:

- 3.4.1 Give due consideration to the burden of stress on their direct reports engendered by working at a setting and time of risk and having to juggle between familial and work responsibilities;
- 3.4.2 Address staff need for rest and shift rotations when managing staff scheduling, and calling off-duty staff in to cover shortages;
- 3.4.3 Facilitate mobilization of peer support where appropriate, and facilitate access to more specific psychosocial support resources when necessary; and,
- 3.4.4 Support employees in addressing familial care needs and obligations, including but not limited to child and elder care provisions, and compassionate leaves for funerals etc.
- 3.4.5 Pre-plan with the Human Resources Manager, during the Inter-pandemic Period, for:
  - Provisions for staff choosing not to return home between work-shifts to access rest facilities – e.g. on-site designated staff quarters, and/or, contingency agreements with local hotels/motels to block rent rooms for use;
  - Meals for staff working extended shifts;
  - Transportation support;
  - Childcare and/or eldercare, and other family support assistance...etc.

The IPRCT will

- 3.4.6 Monitor and address issues of staff and client/resident morale during the Pandemic Period, and arrange for such intervention as available resources might allow during this period.
- 3.4.7 Delegate to the Wellness Nurse lead responsibility for helping staff who require them to access counselling support, referral to community resources, and other Employee Assistance Program (EAP) provisions.

#### 4 *Pre-establishing minimum staffing thresholds for all functional areas*

Where essential services/programs might have to be operated with reduced staff and modified functional objectives, it is essential that those who best understand the operation of each service/program be involved in pre-establishing what constitutes the absolute minimum level of essential services, and recommending human resources required to carry them out.

- 4.1 The Executive Director and Director of Resident Care of each LTCH, and the Director of Social Service, will convene working group(s) comprised of management and frontline staff during the Period to review service/program and operational support areas that normally report to them, and
  - 4.1.1 Identify the “*minimum* client/resident care needs” profile of each area if level of service delivered is to be compromised by staffing shortage;
  - 4.1.2 Identify and maintain a list of care tasks that can be delegated to personnel not normally involved in providing direct care in a long-term care home setting, with informational/instructional support;

(Note: “Controlled Acts” as described in the Registered Health Professions Act are not to be included unless they can be delegated to other Regulated Health Professionals authorized to carry out such “Controlled Acts”)

- 4.1.3 Identify the absolute minimum number and composition of regulated – i.e. number of RN, RPN...etc. – and non-regulated personnel required to continue providing essential care over a period of time that might last for 12 or more weeks – the projected time frame for a vaccine to be developed.
  - 4.2 Based upon the above information, an “**Absolute Minimum Staffing Plan**” to sustain operation of each service/program will be compiled.
    - 4.2.1 Each Manager/Supervisor is to maintain the Absolute Minimum Staffing Plan(s) for his/her area(s) of responsibility, and provide a copy to his/her Division Head. The latter will provide these to the IPRCT during the Pandemic Period to facilitate coordination of implementation.
    - 4.2.2 Senior Managers in non-client care areas will oversee similar processes during the Inter-pandemic Period to develop Absolute Minimum Staffing Plans for the areas that normally report to them.
    - 4.2.3 Senior Managers with no direct reports – i.e. the Director of Corporate Development, and the Director of Quality Improvement – will assist with such processes as per instruction of the CEO.
    - 4.2.4 The IPRCT Coordinator of Human Resource Mobilization will refer to these Absolute Minimum Staffing Plans when coordinating redeployment of staff and other human resources during the Pandemic Period.
  - 4.3 The IPRCT Coordinator of Medical Services will liaise with physicians affiliated with the Yee Hong Centre to coordinate delivery of medical coverage for essential services/programs during the Pandemic Period.
- 5 *Planning for knowledge/skill transfer to supporting personnel being redeployed*
- 5.1 To optimize utilization of available human resource in a time of scarcity, staff will be redeployed, and student workers as well as volunteers will be assigned, to perform diverse tasks. To ensure competent performance and confidence by all concerned:

A “Skills Inventory” will be maintained in which

- Each Division/Department is to define core activities in their respective functional area essential to business continuation during the Pandemic Period;
- All client care and business function departments are to document critical work processes that need to be maintained during the Pandemic Period. Department Heads are to ensure that such documentations are prepared and the location of their retention known to ensure accessibility;
- HR will help Division/Department Heads Identify staff categories that are already capable or can be made ready quickly to discharge those core activities;
- HR, and Division/Department Heads, with the assistance of the Corporate Professional Practice Officer where appropriate, will address how cross-training

and skills-development might be implemented in the most practicable way to ensure availability of human resource to discharge RHPA regulated acts.

- 5.2 When redeploying staff, students, and volunteers, care will be taken to:
- Match skills, capability and personal suitability with required tasks, and
  - Provide tasked individuals with the necessary information and instruction required to perform those functions.
  - Ensure such orientation and instructional information to be provided through incumbent staff modeling behavior, or access to job action sheets before they are put in a position of delivering specific services.

6. *Consistency with Legislative and Statutory Provisions*

- 6.1 The Director of Human Resource, during the inter-pandemic period, and as Coordinator of Human Resource Deployment during the Pandemic Period, will advise the IPPC and IPRCT respectively to ensure compliance of the Yee Hong Influenza Pandemic Response Plan with corresponding public policy provisions – including but not limited to “Emergency Management Statutes” concerning human resource practices.
- 6.2 A set of relevant “Shadow” Human Resources Policies will be developed to address issues arising from provisions of the Emergency Management Statutes.

7. *Maintaining currency of the Human Resource and Staff Deployment Policy CAD-VIII-05*

This policy, for managing human resources and staff deployment at Yee Hong under circumstances of constraint precipitated by a pandemic outbreak, will be reviewed by a standing “Influenza Pandemic Planning Committee” at least annually, and amended, as necessary.

Division/Department Heads will ensure that the “Absolute Minimum Staffing Plan” for each essential service/program is to be reviewed every two years and amended as necessary unless significant change in program design and profile of clients/residents has occurred requiring more immediate amendment.

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