



**HUMBER COLLEGE INSTITUTE OF TECHNOLOGY AND
ADVANCED LEARNING**

PANDEMIC INFLUENZA PLAN

**Department of Public Safety
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Table of Contents

1.0	Planning Approach
1.1	Introduction
1.2	Goals
1.3	Objectives
1.4	Pandemic Influenza Committee
1.5	Framework for Decision Making
1.6	Planning Assumptions
1.7	Legal and Legislative Framework
1.8	Glossary of Terms
2.0	Organizational and Decision Making Structure
2.1	Phases of the Response
2.2	Critical Incident Preparedness Plan
3.0	Media and Communications
3.1	Information Flow Processes and Structure
3.2	Pandemic Alert Periods
4.0	Job Action Sheets / Action Item Lists

Section 1.0 Planning Approach

1.1 Introduction

Humber has established a Pandemic Influenza Plan that will act as a living document and be sensitive to emerging issues, while providing Humber's best thinking about how we prepare and might respond if a flu pandemic were to emerge. At its core, this document will act as a resource databank for the Humber community.

This Plan sets out a decision making approach to preparedness and response planning that aligns Humber's plan with influenza pandemic plans at the global, national, provincial and local levels. This Plan is based on the Toronto Public Health Plan as well as the plans developed by the Governments of Ontario and Canada. Ultimately, if an influenza pandemic were to occur, public health authorities would be responsible for implementing and coordinating a response.

This resource document is not intended to be a structured menu of decision points; rather it is a reference that contains information needed to inform decisions as necessary. Humber believes that it is vital for institutional planning to maintain flexibility and sensitivity so that decisions can be made to best suit the various situations that might arise during a pandemic, while reflecting and being linked with those taken by public health authorities.

This document sets out a Pandemic Influenza Plan for Humber College Institute of Technology and Advanced Learning and the University of Guelph-Humber, which for the purposes of this document will jointly be referred to as "Humber". It will be continuously reviewed, revised and updated as new information and inputs are available.

1.2 Goals

Humber's goals are based on the goals identified by public health authorities at the City of Toronto, the Province of Ontario and the Government of Canada. The three main goals are:

- a) To reduce the morbidity and mortality associated with detection of a novel and virulent strain of influenza
- b) To minimize disruption for students and staff at Humber during a pandemic influenza
- c) To provide information and education regarding pandemic influenza to family, guardians and spouses of students and staff

1.3 Objectives

Humber has seven main objectives in planning for pandemic influenza:

- i) To coordinate Humber's response to pandemic influenza
- ii) To ensure effective communication with stakeholders
- iii) To define and recommend preparedness activities that should be undertaken before a pandemic occurs that will enhance the effectiveness of a pandemic response
- iv) To make recommendations on interventions that should be implemented as components of an effective pandemic influenza response
- v) To develop a plan that can be adapted for other public health emergencies
- vi) To develop links with the community and effective working relationships with key stakeholders and public health officials, municipally, provincially and federally to improve Humber's preparedness for any public health emergency
- vii) To support municipal, provincial and federal planning initiatives

1.4 Pandemic Influenza Committee

In August of 2005, key personnel within Humber were identified and brought together to form the Pandemic Flu Committee coordinated under the leadership of the Vice President, Finance and Administrative Services. Key personnel were invited to join the committee because of their expertise in areas that would be significant in the management of Humber services during pandemic influenza.

Membership was expanded, as necessary skills were required to inform the resource databank. Also, keynote speakers were engaged to present to the Committee and the Humber community information about pandemic influenza and strategies for individuals and Humber to undertake to mitigate its spread. Consultants were contracted to conduct research and facilitate the compilation of the resource databank.

The membership of the Committee may continue to change and evolve in order to ensure the necessary expertise and skill sets are available.

1.5 Framework for Decision Making

Should an influenza pandemic occur, difficult decisions would need to be made. Humber believes that these decisions must be firmly rooted in a moral and ethical decision making framework. The University of Toronto Joint Centre for Bioethics Pandemic Influenza Working Group has developed an ethical framework, which is used by the Province of Ontario in its planning documents. Humber's planning processes reflect this framework and its response will be based on the core values and decision-making principles outlined in the Province's Plan.

Humber strives to ensure that all its decisions are open and transparent, reasonable, inclusive, responsive and accountable. Humber will balance individual liberty and protection of our staff, students and faculty from harm and ensure proportionality so that we can address the actual level of risk or need in our community. Humber will respect, as much as possible, the privacy of our staff, students and faculty, and strive for equitable treatment for all. Compassion, solidarity, stewardship and trust will be at the heart of all our decisions.

Humber has aligned the decision-making principles and values developed by the University of Toronto Joint Centre for Bioethics Pandemic Influenza Working Group with Humber's situation as a major college in the City of Toronto.

Humber's Decision Making Principles and Values

Open and Transparent – The process by which decisions are made must be open to scrutiny and the basis should be explained to students, faculty and staff.

Reasonable – Decisions should be based on evidence, principles, and values and be made by people who are credible and accountable.

Inclusive – Decisions should be made explicitly with stakeholder views in mind and stakeholders should have opportunities to be engaged in the decision-making process.

Responsive – Decisions should be revisited and revised as new information emerges, and stakeholders should have opportunities to voice any concerns they have about the decisions (i.e. dispute and complaint mechanism).

Accountable – There should be mechanisms to ensure that ethical decision-making is sustained throughout the pandemic.

Protection from harm – Humber will work to ensure its students, faculty and staff have a safe environment in which to learn and work.

Proportionality – Decisions will be made that balance, as far as possible, the needs of our students, faculty and staff and the needs of Humber and its community.

Privacy – Individuals have a right to privacy including the privacy of their health information.

Solidarity – During a pandemic some individuals will face greater burdens than others. Through solidarity we can help each other mitigate these burdens and develop a response to the pandemic that builds strength and bonds across the community.

Stewardship – Humber’s students, faculty and staff are committed to the protection and development of our learning community. We will act as good stewards to protect our resources and ensure future learners continue to benefit from an open and accessible learning environment.

Trust – Decisions will be made to ensure trust relationships are maintained among all members of Humber’s community.

1.6 Planning Assumptions

Planning Assumptions:

- Previous influenza pandemics have infected regions in multiple waves. The duration of each pandemic wave is likely to be 6-8 weeks.
- Ontario will have little lead-time between when the WHO first declares a pandemic and when it spreads to the province.
- 15-35% employee absence over an 8 week period as a result of illness, caring for sick family members or friends and closures of schools and child care facilities.
- Given the estimated mortality numbers, it may be an extended period of time before some employees or students are emotionally, financially, or otherwise capable of resuming their normal lives.
- There will be significant loss of people and specific expertise/skill sets within other organizations and infrastructure that Humber depends on (i.e. suppliers, contractors, IT providers, government agencies, transportation).
- Toronto Emergency Services and Public Utilities may not be able to provide a normal level of service to ensure the life safety of students and staff.

- Employee and customer health and safety (i.e. personal health and protection) will be a priority in order to mitigate the impact on Humber.
- During a pandemic actions in Humber's plan may be taken out of direct control of Humber by Toronto Public Health and/or External Emergency Response Agencies.
- The president will determine at which point the absence of students, faculty and staff becomes an academic disruption. The trigger point for full suspension of operations adopted by the School Boards in the GTA is 35%.
- Students in residence may not have access to food from normal sources on or off-campus.
- Humber should not rely on the Ontario health care system to provide arrangements for caring for sick students in residence who are unable to go home.
- Employees may be re-assigned to assist in responding to the pandemic depending on Humber's needs.
- Humber services which are particularly important during a critical incident such as a pandemic (e.g. Public Safety, Student Residences, Facilities Management, Food Services, Health Services, IT Services and Communications) may be disrupted.
- Provisions may be made for certain employees to work from home. Employees that will need remote connectivity should be identified during phase 4 of the pandemic.
- Humber will provide timely, updated information to its employees and students on an ongoing basis both during the planning and response phases of a pandemic.
- There will be potential for a disruption of transit services to Humber either leading up to or during the pandemic.
- It may not be possible to offer e-classes as a substitute for academic classes held on Humber property.
- In order to maintain services provided by commercial tenants on campus for as long as possible, mutual aid agreements may be pursued.
- The ability of Facilities Management to maintain Humber's infrastructure may dictate when closures begin.

1.7 Legal and Legislative Framework

The Province of Ontario has identified the need to pursue a collaborative inter-jurisdictional approach to pandemic planning to enable each level of government to act in a coordinated manner. Humber will need to coordinate its planning and response to a influenza pandemic with four main levels: the World Health Organization (WHO), the Government of Canada, the Province of Ontario, and the City of Toronto.

The WHO is responsible for coordinating a global response to an influenza pandemic. The WHO has identified the phases of pandemic planning, and recommendations have been made about how all jurisdictions should plan for and manage a pandemic. The Government of Canada is responsible for coordinating a nation-wide response and the Province of Ontario is responsible for managing the response within Ontario. Municipally, the City of Toronto and local health authorities are responsible for coordinating the local response.

Various legislations have been identified for the role they may play in responding to an influenza pandemic:

- Health Promotion and Protection Act R.S.O. 1990 c.H. 7 (HPPA)
- Emergency Management Act R.S.O. 1990, c.E.9
- Personal Health Information Protection Act, 2004 S.O. 2004, C. 3 Sched. A (PHIPA)
- Quarantine Act R.S.C. 1985, C. Q-1
- City of Toronto Municipal Code Chapter 59, Emergency Planning
- Coroners Act R.S.O. 1990 c. C. 37
- Occupational Health and Safety Act R.S.O. 1990 c. 0.1
- Ontario Colleges of Applied Arts and Technology Act 2002, O. Reg. 34/03
- Health Professionals Acts which direct professional responsibility and duty to care
- Public Hospitals Act, R.S.O 1990, C.40

1.8 Glossary of Terms

Antiviral	A medication that may be used to treat people who have been infected by a virus to help limit the impact of some symptoms and reduce the potential for serious complications. People who are in high-risk groups are often given antiviral drugs because of their increased potential to develop additional health issues.
CIPP	Humber's Critical Incident Preparedness Plan
CIRT	Critical Incident Response Team: The membership of CIRT is comprised of selected division/department heads and appointed by the Vice President of Finance and Administrative Services. Their role is to provide advice to the Incident Manager.
Command Centre	Is the identified area where CIRT gather to review the circumstances of the critical incident and to plan protective measures.
EOC	In the event of a pandemic, the Toronto Emergency Operations Centre will convene to manage emergency response and recovery operations.
Epidemic	An outbreak of infection that spreads rapidly and affects many individuals in a given area or population at the same time.
Epidemiology	The study of the distribution and determinants of health-related states or events in specified populations, and the application of this study to control of health problems.
High-risk groups	Those groups in which epidemiological evidence indicates there is an increased risk of contracting a disease.
H5N1	A strain of influenza type A virus that moved in 1997 from poultry to humans. While the outbreak of this virus was rapidly contained, it produced significant morbidity and mortality in persons who became infected, probably from direct contact with infected poultry. In 2003 a slightly different strain of H5N1 started circulating in avian species in Asia. As of 2005 this strain has become virtually endemic in the avian population, has infected other species such as swine and felines and has resulted in several fatal human cases.

IMS	Incident Management System. The recognized North American standard essential for the management of all emergency incidents. IMS identifies key roles needed to do key functions during a time of crisis.
Influenza	A highly contagious, febrile, acute respiratory infection of the nose, throat, bronchial tubes, and lungs caused by the influenza virus. It is responsible for severe and potentially fatal clinical illness of epidemic and pandemic proportions.
Influenza Type A	A category of influenza virus characterized by specific internal proteins and further sub-grouped according to variations in their two surface proteins (hemagglutinin and neuraminidase). It infects animals as well as humans and has caused the pandemic influenza infections occurring in this century.
Isolation	The physical separation of a person suffering from an infectious or contagious disease from others in a community.
LHIN	Local Health Integration Network
LMOH	The Local Medical Officer of Health will declare the first case of pandemic influenza within the City of Toronto.
MOHLTC	Ministry of Health and Long Term Care
TPH	Toronto Public Health
Pandemic	Referring to an epidemic disease of widespread prevalence around the globe.
Pandemic Alert Period	The interval following the Interpandemic Period. Characterized by the occurrence of human infection(s) with a new subtype of influenza virus in the absence of efficient human-to-human transmission of this new virus.
Pandemic Period	The interval characterized by increased and sustained transmission in the general population of a new influenza virus subtype, which is spreading efficiently between humans.
PHAC	Public Health Agency of Canada
PIO	Public Information Officer

Social Distancing	A disease prevention strategy in which a community imposes limits on social (face-to-face) interaction to reduce exposure to and transmission of a disease. These limitations could include, but are not limited to, school and work closures, cancellation of public gatherings and closure or limited mass transportation.
Tamiflu	An antiviral agent indicated in adults and children >1 year for the treatment of illness due to influenza and for prophylaxis following exposure to influenza type A viruses. It has no effect against the influenza type B virus.
Triage	A system whereby a group of casualties or patients is sorted according to the seriousness of their illness or injuries, so that treatment priorities can be allocated among them. It is designed to maximize the number of survivors in emergency situations.
Vaccine	A substance that contains antigenic components from an infectious organism. By stimulating an immune response (but not disease), it protects against subsequent infection by that organism.
WHO	World Health Organization, a special agency of the United Nations generally concerned with health and health care.

Section 2.0 Organizational and Decision-Making Structure

2.1 Phases of the Response

As part of the information flow process and to facilitate decision making, Humber has adopted a phased alert system to deal with various periods in a pandemic. This internal phased system is correlated with the World Health Organization's (WHO) six phases of a pandemic.

The Governments of Canada and Ontario are incorporating the WHO pandemic phases into their planning processes. The Public Health Agency of Canada and the Ministry of Health and Long-Term Care will declare when a pandemic period has begun in Canada and Ontario respectively. Likewise, Humber will align its planning and intervention strategies with that of the WHO phases.

The WHO has developed a classification system that identifies six phases of an influenza pandemic. These phases describe the developmental status of the virus subtype and its ability to be transmitted through the human population to cause disease. The WHO identifies which phase is occurring internationally and will be the agency to declare when a pandemic has begun. The local Medical Officer of Health in Toronto will inform the public of the first confirmed case of pandemic influenza in the city

World Health Organization Pandemic Phases

Estimated Probability of Pandemic	Description
Uncertain	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 reassortment virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human transmission sufficient to sustain community level outbreaks.
Medium to High	Phase 4. Human-to-human transmission of an animal or human-animal influenza reassortment virus able to sustain community-level outbreaks has been verified.
High to Certain	Phase 5. The same identified virus has caused sustained community level outbreaks in at least two countries in one WHO region.
Pandemic in Progress	Phase 6. In addition to the criteria defined in Phase 5, the same virus has caused sustained community level outbreaks in a 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.
Possible New Wave	Level of pandemic influenza activity in most countries with adequate surveillance is rising again.
Post-Pandemic Period	Levels of influenza have returned to the levels seen for seasonal influenza in most countries with adequate surveillance.

Table adapted from: World Health Organization, Pandemic Influenza Preparedness and Response, A WHO Guidance Document, April 2009.

The WHO uses six phases to describe the progression of an influenza pandemic. Humber's Pandemic Influenza Plan has sub-divided the WHO's phase 6 into phases 6a, 6b and 6c to allow for greater flexibility of response depending on the severity of the pandemic once it arises. Humber may move between these phases during a pandemic wave. Decision makers should remain sensitive to the potential for three waves of the pandemic and the potential for long-term suspension of services. The following describes Humber's phases:

Phases 4 and 5:

Alert/Warning. This is an alert phase that the Humber community must maintain their personal public health vigilance. Depending on the severity of the pandemic alert, consider limiting non-essential visitors to Humber.

- During this phase, the Humber community can take certain actions. Particularly, Humber can begin preparations, including public education campaigns to ensure that the community maintains good hygiene habits. Also, stockpiling of material for critical staff that may be asked to stay on campus, and residences in later stages of a pandemic should begin. This should include identifying sleep/residence accommodation for critical staff and food supplies and cleaning needs for residences.

Phase 6a:

Alert/Warning. This is still an alert phase that the Humber community must maintain their personal public health vigilance. The pandemic may have arrived in Toronto; however, Humber may not be seriously affected and thus can maintain academics as usual with heightened awareness and communication.

- During this phase, the Humber community can take certain actions. Particularly, Humber can begin preparations, including public education campaigns to ensure that the community maintains good hygiene habits.

Phase 6b:

- Suspend classes and all travel and all visitors to Humber.
- Isolate critical buildings based on function (for example, buildings housing IT infrastructure or critical physical plant equipment such as boilers and chillers).
- Suspend services at area campuses and off-site locations.
- Consider suspending field placements for students.
- Non-essential staff work remotely and essential staff are on-site.

Phase 6c:

- Suspension of all services, and only essential staff are asked to continue work.

Recovery:

- Develop scaled callback of personnel by function and need.
- Develop check list of actions for safe start-up (e.g. cleaning, building repairs).

WHO Phase	Canadian Activity Level	Definition	Humber Phase
4		Small clusters with limited human to human transmission	4
5		Larger clusters. Human to human transmission still localized	4
6	6.0	Outside of Canada increased and sustained transmission. No cases in Canada	4 and 5
6	6.1	Single human case(s) with the pandemic virus detected in Canada. No cluster(s) identified in Canada.	4 and 5
6	6.2	Single human case(s) with virus detected in Canada. Cluster(s) identified in Canada.	4, 5 or 6a depending on where initial cases are located
6	6.3	Localized or widespread pandemic activity observed in Canadian Population	6a, 6b or 6c depending on when and where widespread activity is located

The Canadian activity level number will be used with the WHO phase number to confirm the level of pandemic activity in Canada. The Ministry of Health and Long-Term Care and the local public health units will use the same indicators (no activity, low activity, higher activity) but without a numbering system to confirm pandemic activity in the province and at the local level. Humber’s internal phases will be dependent on when the pandemic is declared in the City of Toronto.

2.2 Humber's Critical Incident Preparedness Plan

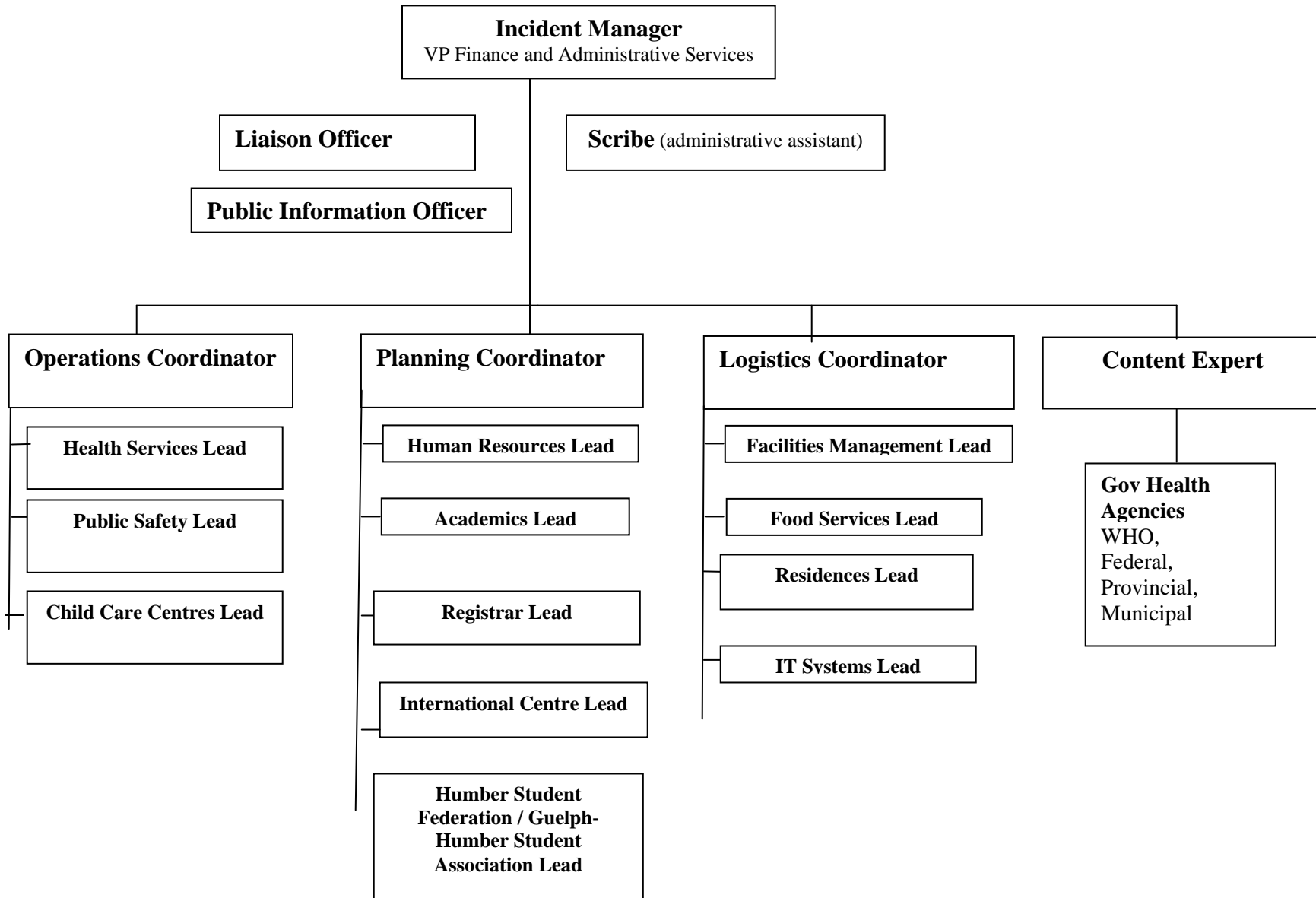
Humber has developed a Critical Incident Preparedness Plan (CIPP) that is designed to provide direction to and coordination of Humber's employees, students and visitors during an emergency or critical incident. The decision making structure, communication strategies and chain of command employed in response to an influenza pandemic will be congruent with that already established by the CIPP. Under the CIPP, pandemic influenza would fall within the definition of a critical incident.

A flow-chart delineating the organizational and decision-making structure put into effect by the CIPP is included in Figure 1. Due to the nature of an influenza pandemic, Humber should consider establishing at least three layers of back-up personnel to populate these decision-making structures. Critical staff should be identified early and measures should be taken to ensure they are able to either work remotely from home in home-quarantine or work from the residences if they are required to be on-site.

Particulars regarding the authority to act – to respond to, manage and control all aspects of a critical incident are detailed in the CIPP. The CIPP is a vital reference document and can be found on Humber's Public Safety website.

Figure 1

Critical Incident Preparedness Plan – Organizational Structure



Section 3.0 Media and Communications

3.1 Strategic Information Flow Processes and Structure

Rigorous communication processes that ensure the transmission of timely and accurate information into and out of the Humber community are essential. Particularly, Humber will need to develop strong linkages to the Local Medical Officer of Health (Toronto Public Health) and the Ministry of Health and Long-Term Care (MOHLTC) to ensure that their directives are received in a timely manner. The correct person(s) who can take the needed action and follow-up with the public health authorities to ensure accurate implementation must receive these directives.

Processes designed to ensure timely and effective information flow within the Humber community are also essential because they will ensure that the right messages and information are transmitted for action.

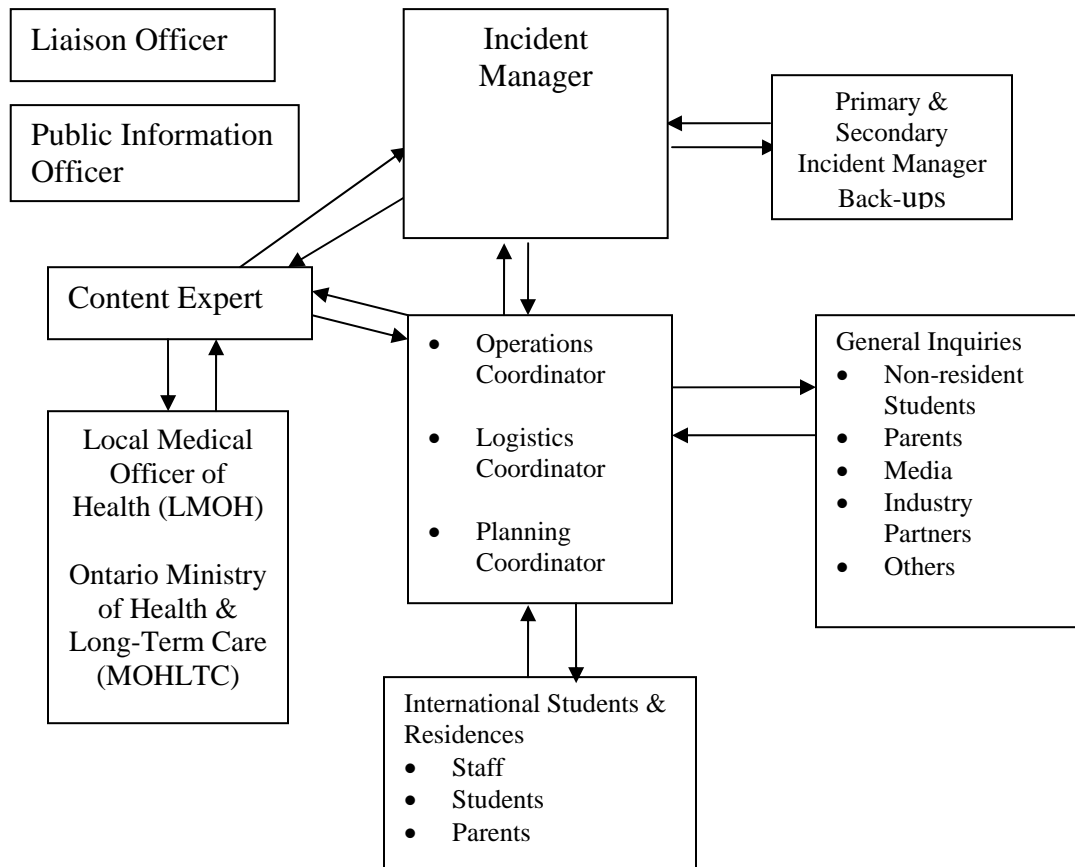
The following information flow chart (Figure 2) is recommended as a structure for transmission of information. Information should flow following the CIPP organizational structure for a Pandemic (Section 2.2, Figure 1). A 5:1 ratio of reporting should be maintained where possible.

3.2 Pandemic Alert Periods – Action Items

Objectives:

- To develop consistent coordinated messages for each pandemic phase
- To communicate accurate and timely information to the Humber community for each pandemic phase
- To share information among stakeholders

Figure 2 Information Flow Structure



Section 4.0 Job Action Sheets / Action Item Lists

Job Action Sheets or Action Item Lists have been prepared for each position identified in Figure 1. The Job Action Sheets and Action Item Lists drive the CIPP rollout by allowing staff in activated positions to carry out specific tasks grouped in Phases 4 and 5, Phase 6 and Recovery. The timing of these procedures and the actions themselves may change depending on the severity of the pandemic and the speed with which the pandemic moves through Phases 4-6.

The Job Action Sheets and Action Item Lists are not included in this website posting.