

# New Maryland Widespread Health Emergency Operation Plan

Revised Version No. 2

Adopted by Council  
January 22, 2015



Prepare for the Worst – Hope for the Best

<b>CONTENTS</b>	<b>PAGE</b>
<b>DECLARATION OF AGREEMENT</b>	<b>3</b>
<b>INTRODUCTION</b>	<b>4</b>
<b>1. <u>UNDERSTANDING THE HAZARD</u></b>	<b>5</b>
1.1. Characteristics of a Widespread Health Emergency	5
1.2. Impact on the Village of New Maryland	10
<b>2. <u>PLAN OBJECTIVES</u></b>	<b>11</b>
2.1. Maintaining Essential Services	11
2.2. Employee Protection	11
2.3. Responding to the Needs of the Emergency	12
2.4. Managing Financial Issues	12
2.5. Help with Recovery	12
<b>3. <u>PLANNING PROCESS</u></b>	<b>12</b>
3.1. Issue Identification and Analysis	12
3.2. Council Approval	17
3.3. Plan Distribution	17
3.4. Measures to Minimize Viral Transmission	17
3.5. Recovery Plans	20
<b>4. <u>MAINTAINING THE PLAN</u></b>	<b>21</b>
<b>5. <u>TRAINING AND AWARENESS</u></b>	<b>21</b>
5.1. Exercises	22
5.2. Resource Development	22
<b>6. <u>CONCLUSION</u></b>	<b>22</b>
<b>7. <u>APPENDICES</u></b>	<b>22</b>
7.1. Public Information Initiatives and Documents	22
7.2. Fire Department	23
7.3. RCMP District 2 Oromocto	24
<b>ACKNOWLEDGEMENTS</b>	<b>25</b>

**DECLARATION OF AGREEMENT**

**Widespread Health Emergency Operation Plan  
for  
The Village of New Maryland**

**Submitted to Council by the Emergency Response Plan Committee  
on January 7, 2015**

**Approved by Council  
on  
January 21, 2015**

Mayor Judy Wilson-Shee  
Deputy Mayor Gisèle McCaie-Burke  
Councillor Frank Dunn  
Councillor Paul LeBlanc  
Councillor Mike Pope  
Councillor Peter Wiggins

**Acknowledgements**

The former Widespread Health Emergency sub-committee members:  
Patricia Seaman (Chair)  
Jim McAnany  
Harry Farrell

## **INTRODUCTION**

---

Over the last several years, we have become increasingly aware of the eventuality of a widespread health emergency and its potential for affecting public health, provision of essential services, and our economy.

A widespread health emergency is a serious public health concern; however it is also much more than just a problem for the health care system - it is a crisis that affects all aspects of society. While it is important to remember that there is currently no widespread health emergency in the world, one *could* arise at any time with very short notice and cause a great deal of illness and death with major effects on society when one is declared.

A widespread health emergency will be best managed by the coordinated participation and cooperation of all levels of government, the business community, organizations, and citizens.

New Maryland, like other municipalities in New Brunswick, Canada and around the world, is preparing to respond when the next widespread health emergency arises even if we don't know when, or what, that will be.

As a widespread health emergency is a community hazard, New Maryland is responsible for taking the lead in preparing the community to respond to, and recover from, this type of emergency.

A widespread health emergency will likely result in significant and long-term shortages, including the availability of employees, supplies and services. This will be enough to affect our ability to provide services to our residents.

Unlike other hazards, a widespread health emergency represents unique challenges that may not be addressed in other existing community emergency plans; consequently, there was a need to develop a comprehensive and coordinated widespread health emergency contingency plan specific to our community.

This plan will help New Maryland respond to a widespread health emergency. While it cannot provide all the answers, this plan provides a coordinated and effective response to this unique hazard.

## **1. UNDERSTANDING THE HAZARD**

---

To develop a contingency plan, it is useful to apply a plausible, worst-case scenario describing the nature of the event causing the emergency and the specific challenges that the community will face.

This section provides some background on widespread health emergencies and the potential impact. This is useful in the preparation and implementation of this plan.

### **1.1 Characteristics of a Widespread Health Emergency**

Widespread health emergencies are those caused by biological agents (viral or bacterial) effecting large numbers of people either globally or nationally, to which most people do not have specific immunity to these agents and large numbers of individuals will become infected as it spreads.

For a biological agent to cause a widespread health emergency, it must be able to:

- a. infect people (not just animals and birds);
- b. cause illness in a high proportion of those infected; and,
- c. spread easily from person to person.

All previous widespread health emergencies had the above characteristics. Although no one knows exactly how the next widespread health emergency will affect us, we can make a number of assumptions, based on previous widespread health emergencies and medical research.

Avian Flu has already swept through millions of birds in Asia and Europe. The World Health Organization (WHO) reports that we are in phase three of a six phase Pandemic Preparation Cycle, triggered by the Avian Flu. Phase 3 is the last part of the Inter-Pandemic and Pandemic Alert Period, where human infections of a new virus are occurring but there are few (or zero) cases of the virus spreading from human-to-human contact. The Pandemic Period begins during phases 4, 5, and 6, when human-to-human infection starts occurring and it eventually spreads the virus throughout the world.

Influenza pandemics historically appear in waves, and each wave is projected to last between six to twelve weeks, with a second outbreak occurring three to nine months after the first wave. If history is any judge, an influenza pandemic may last as long as two to three years after the initial onset.

#### **1.1.1 Assumptions about Widespread Health Emergencies**

One of the key planning assumptions held by public health experts is that a widespread health emergency will behave somewhat like ordinary influenza. Influenza is highly contagious and spreads very quickly among the population, especially in crowded situations.

The virus enters the body through the nose or throat by inhaling droplets produced by the coughing or sneezing of infected persons touching the mouth, eyes or nose after:

- a. hand-to-hand contact with infected individuals; and/or

- b. touching surfaces or handling objects contaminated by infected individuals.

Once someone is infected with the virus, it usually takes from one to three days to develop symptoms. The disease typically follows these steps:

- i. persons can be contagious from two days before they develop symptoms and up to seven days afterwards (typically three to five days in healthy adults and up to seven days in children). This time frame may be longer in people with compromised immune systems;
- ii. not everybody who comes in contact with the virus will become ill; however, they may still spread the infection to others;
- iii. forty-eight hours after exposure, the symptoms start to appear;
- iv. flu symptoms can last four to seven days. A cough and general fatigue may persist for several weeks afterward;
- v. it is important to note that people can be infected and contagious before they become ill. This is one reason it is difficult to contain; and,
- vi. some people who get the flu also develop secondary bacterial infections including pneumonia, which can result in prolonged illness or death.

When a widespread health emergency does begin, the above assumptions about the strain of the disease will need to be checked against the latest available information. This plan can then be updated as necessary.

### **1.1.2 Population Impact**

During a widespread health emergency, much of the population may become ill and some will die. It is expected that there will be more illness and death during such an emergency than experienced during a regular influenza season. This may be made worse by decreased availability of health care during the widespread health emergency.

Public health experts assume that, during a widespread health emergency, a significant percent of the population will become ill enough to miss work, and up to 50 percent will stay home either due to illness, to care for family members, or because of the wish to minimize their exposure to the virus.

Some government officials have advised local governments and businesses to plan for 30 to 50 percent absenteeism for up to six weeks. Of those who become ill, many could die.

### **1.1.3 Management of Contagious Diseases**

#### **1.1.3.1 Social Distancing**

This is the first stage of a widespread health emergency response, where communities, businesses and other organizations take non-medical measures to reduce spreading the virus by discouraging or preventing people from coming into contact with each other.

In this stage, authorities may close schools, colleges, daycares, and other

public places, implement emergency plans for area organizations (including increased telecommuting and flex or staggered scheduling), promote better hygiene, or suspend some non-essential governmental functions. In this stage, organizations may be able to stay open, but many be running on reduced staff or in a different operating mode.

Social distancing can have several repercussions. If schools close, the Village of New Maryland and other governments, businesses and organizations will need to provide telecommuting options for parents who need to unexpectedly stay home with their children. Other employees may be forced to stay home for different reasons. This could involve supplying employees with the tools needed to continue operations from home. This could include computers, remote connectivity through high speed DSL Internet, and software.

To plan for increased tele-commuting, the Village of New Maryland could also look at a corporate license that allow web to access their office PCs and all their usual applications and data from their home PC.

The Village of New Maryland will implement flexible or staggered scheduling, where smaller groups of people work different shifts to cut down on the number of employees who will be in the Village Office at any one time.

The Village will accept email in place of paper documents in order to continue business. Critical customer documents, such as order confirmations, credit memos, invoices and water bills will be distributed and accepted electronically via email.

Distribution of reports within the community are digitized and emailed in PDF format. This will make it easier to provide this information to the telecommuting work force.

As Council Meetings, conferences, and other face-to-face meetings of decision makers will not likely take place due to social distancing out of concern of spreading viruses, the Village will implement alternatives such as instant messaging, and voice-conferencing.

Council Meetings that would normally be public will be closed; however, the public will be kept informed with the publishing of the minutes/reports on the Village's website.

Viruses on hard surfaces can survive up to 48 hours, possibly infecting anyone else who touches the surface during that time. As much as possible, the sharing of equipment should be minimized.

To reduce interaction between workers to try to minimize the spread of disease, the Village of New Maryland will supply each employee with their own work space and equipment, including desk, tools, phone and computer. Employees will be asked to strictly respect each other's work space and not share equipment.

The Village will also supply each employee with anti-bacterial cleaning

equipment and supplies as well as personal protective equipment (masks, gloves, etc.)

The Village will offer their employees more opportunities to wash their hands in order to minimize the impacts of a possible widespread health emergency by installing hand-washing stations.

The Village will remove or disable commonly used water fountains and other water stations.

Conference Rooms and lunch areas will allow employees to keep at least one metre away from anyone else.

### **1.1.3.2 Isolation**

The isolation phase occurs when authorities require ill and infected patients to remain separated from everyone else in order to prevent them from transmitting the disease to other people. Further breakdowns in community and business services due to the widespread health emergency will affect everyone's ability to keep businesses running.

As people actually start becoming sick, the amount of absenteeism will increase both from people who are getting sick and from people who are staying home with sick relatives.

Isolation and infection will start to reduce the number of people who are actually able to do the work. This is why the Village's widespread health emergency planning has included cross-training of critical Village personnel in case anyone is unable to perform their functions.

### **1.1.3.3 Quarantine**

As the widespread health emergency progresses, sick people will not be the only ones who are isolated. Health officials may also quarantine healthy people who have been exposed to the virus, in order to prevent further transmission. This is the time when there will be significant absenteeism. The Village staff will be further reduced, which could again drive up the need for more tele-commuting.

This is also the period where there will be an increased ripple effect from other organizations suffering from reduced on-site personnel. In particular, if NB Power is trying to maintain the electrical grid with only 60 percent of its personnel, the community may start to experience brown-outs or power outages.

### **1.1.3.4 Vaccines**

If the appropriate vaccine is available, vaccination is the most effective way to protect the public from widespread health emergency. Vaccines cause the body to produce specific antibodies against the virus in the vaccine, providing immunity from the virus.

Developing a vaccine to protect the population from a specific virus is our best defense. To develop a specific vaccine, the virus must be isolated in the laboratory before production can start. It could take six months or more



before the first shipment of vaccine is available in Canada.

The national goal is to immunize the entire population as quickly as possible once the vaccine becomes available. The vaccine will be available in batches, so people in New Brunswick will be immunized according to nationally agreed-upon priority groups.

#### **1.1.3.5 Antiviral Drugs**

Antivirals are drugs used to prevent and treat illness early. If taken within 48 hours of getting sick, they can reduce symptoms, shorten the length of the illness and potentially reduce serious complications and deaths.

Antivirals work by reducing the ability of the virus to reproduce but they do not provide immunity to the virus.

Antiviral drugs, given at the onset of the illness, may help but are not likely to be available in sufficient quantities to treat the majority of the population. Priority groups have been proposed through national collaboration and agreement. These priority groups will be front line workers, starting with medical staff.

#### **1.1.3.6 Antibiotics**

If the illness is caused by a virus, antibiotics will be of no value other than to help combat secondary infections, such as bacterial pneumonia.

### **1.1.4 Area of Impact**

A widespread health emergency may affect all people in New Brunswick, the rest of Canada, North America and the world.

In most emergencies, neighbouring local governments, other levels of government and non-governmental organizations can focus their personnel and resources on a small area. In a widespread health emergency, demand for people and resources will be high across the province and outside support will be limited, if available at all.

### **1.1.5 Warning Period**

Given the mobile nature of today's society, a disease can spread very rapidly. Disease surveillance and attempts to contain a widespread health emergency may slow the spread of the disease but it is unlikely it will be possible to contain it.

We anticipate having little warning from the time a widespread health emergency is declared to the time the virus arrives in New Brunswick. This is based on the assumption that a widespread health emergency will start elsewhere in the world and then spread to New Brunswick.

### **1.1.6 Duration**

A widespread health emergency may last up to two years and, based on previous widespread health emergencies, could occur in waves. Each wave could last six to twelve weeks and be separated by three to nine months.

## **1.2 Impact on the Village of New Maryland**

The widespread nature of widespread health emergency can be expected to have a significant impact on many aspects of society in Canada but specifically on our own Village.

### **1.2.1 Employee Absenteeism**

One of the most serious organizational risks posed by a widespread health emergency is a reduction in the workforce. This may be due to:

- a. fear of becoming infected at work and other public places;
- b. family commitments that include caring for sick family members, friends, neighbours, or because of school or day care closures;
- c. volunteering time in the community to other essential needs;
- d. illness/quarantine due to exposure to the virus; and
- e. death.

Absenteeism will also be affected by subsequent waves of the widespread health emergency. Some key employees may become ill or even die during the widespread health emergency, which means significant loss of specific or unique knowledge and skills to businesses and agencies.

### **1.2.2 Supply Chain Problems**

The New Maryland and New Brunswick municipal government operations depend on suppliers for services, materials, equipment, parts or supplies. During a widespread health emergency, both local suppliers and those located in other areas are likely to experience operational, production and shipping difficulties. They too, may be dealing with loss of workforce, loss of their own suppliers and shipping difficulties from potential border closures or delays as countries try to contain the spread of the disease.

The demand for certain types of supplies may increase dramatically during a widespread health emergency and may be very difficult to obtain quickly. Some supplies may not be available at all.

### **1.2.3 Impact on Other Local Government**

Neighbouring local governments will experience the same personnel and supply chain issues. Consequently, New Maryland may not be able to rely on mutual agreements with these communities; however, pooling staffing and equipment resources for various critical services may still be considered.

### **1.2.4 Impacts on Other Levels of Government**

Other levels of government, namely provincial and federal, will also experience personnel and supply chain problems. They have or are working on business continuity plans for key departments and agencies to maintain basic services; however, we should expect service disruptions to occur.

#### **1.2.4.1 Health Care**

Along with addressing the challenges of an affected workforce, the health care system is expected to be overwhelmed by demand for urgent care.

The New Brunswick Department of Health and all regional health authorities, including the Horizon Health Network, have plans and resources to manage these issues. New Maryland would be required to provide facilities, material and personnel to support health care operations, such as immunization sites.

#### **1.2.4.2 Schools and Daycare Centres**

The decision whether to order school and daycare centre closures will be made by Public Health officials after consideration of the current situation at the time of a widespread health emergency. They will likely be closed in the early stages of a severe widespread health emergency.

This could have a negative impact on the delivery of New Maryland's services as employees will be forced to care for their children at home.

#### **1.2.5 Impact on Businesses and Economy**

During a widespread health emergency, some businesses in areas such as hospitality, tourism, transportation and retail will also suffer loss of customers as the public may be cautious about visiting public places. The results will be potential financial losses and a drop in productivity and revenues.

Employee absenteeism and supply chain issues may significantly affect productivity and the provision of services in our community. The following are potential business issues during a widespread health emergency:

- a. some businesses that supply basic retail services, such as grocery stores and pharmacies, may not be able to operate or may run short of inventory due to production or shipping problems in other areas;
- b. financial losses to many small and mid-size businesses during a widespread health emergency will exceed their capacity to recover. It is possible that businesses may fail, adding to the long-term economic impact on New Maryland;
- c. unemployment, caused by layoffs and business failures, will reduce the amount of cash flow through the community with long term ripple effects throughout the local economy; and,
- d. tax revenue at all levels will diminish during an extended period of increased costs associated with emergency preparations, response and recovery.

## **2. PLAN OBJECTIVES**

---

### **2.1 Maintain Essential Services**

This Plan will address the protection and maintenance of critical community services including police, fire, transportation, water and sewer services. The loss of these would make the effects of the widespread health emergency on the community even worse.

### **2.2 Employee Protection**

Under this Plan, the Village will take reasonable measures to reduce employee absenteeism by creating a workplace that reduces the risk of exposure, as well as providing a caring,

supportive work environment during this time of increased stress.

### **2.3 Responding to the Needs of the Emergency**

The Village of New Maryland will be required to coordinate its own response to the widespread health emergency. It may be called upon to support the emergency response efforts of the province, regional health authorities and neighbouring communities. Support that may be requested of the Village of New Maryland could include:

- a. providing facilities for temporary health care services, immunization and quarantine;
- b. providing security services to hospitals and clinics where vaccines and antiviral medications may require additional protection;
- c. providing information on the affected population and other local needs;
- d. providing emergency social support to members of the community, including non-medical care, transportation and monitoring the health status of the sick;
- e. providing for increased burials and management of the deceased;
- f. support child and family services with care and shelter for orphaned children (or children in need of temporary care due to the illness of parents) or to help essential workers continue with their duties; and,
- g. providing advice or help to keep key businesses operating.

### **2.4 Manage Financial Issues**

The Village of New Maryland will need to manage the financial costs and economic impact of an emergency. This may include:

- a. tracking preparation, response and recovery costs for reimbursement of eligible costs, if financial assistance becomes available;
- b. taking action to protect the local economy; and,
- c. dealing with potential reduced revenue and increased expenditures.

### **2.5 Help With Recovery**

Village of New Maryland authorities are also responsible for coordinating recovery plans and programs, between waves of widespread health emergency and after they are over. They need to help with economic and organizational recovery and set up supports to recover as quickly as possible after the widespread health emergency.

## **3. PLANNING PROCESS**

---

### **3.1 Issue Identification and Analysis**

The following are the Committee's actions/reactions to the questions that are considered in the breakdown of a widespread health emergency hazard:

#### **3.1.1 How the hazard will affect the Village of New Maryland**

- a. All individuals, businesses, organizations and institutions will be affected to some

degree;

- b. it remains difficult to predict a solution to every scenario. Every effort must be made to determine the maximum number of scenarios which may arise with a corresponding solution;
- c. existing plans, such as those from the Province of British Columbia and the City of Winnipeg, can prove extremely useful as a guide for our Committee's planning, and reference to them and any others which become available, will continue;
- d. the Committee has met with the former District Medical Officer of Health, Dr. Christen Muecke, for guidance and a determination of what is expected of the village for widespread health emergency planning;
- e. an information telephone line will be established and staffed by volunteers for the provision of information to residents; and,
- f. it is anticipated that volunteers will come forward when required.

**3.1.2 The following specific issues will need to be addressed:**

**3.1.2.1 Public Education**

- a. A number of initiatives should be taken to educate the public, including general meetings, presentations to churches and other community groups, and mail outs. Education efforts are ongoing. Please see 7.1, *Public Information Initiatives and Documents* for a complete list of education sessions done in preparation for the 2009 influenza pandemic.
- b. The Chair of the Emergency Response Plan committee should hold a preliminary meeting with local pharmacist, Joe Valentino, to discuss the role of his pharmacy in a widespread health emergency event. Subjects such as reduced hours of operation to reduce his fatigue, closing the store for other than pharmaceutical purposes, and establishing a "no direct contact" with Mr. Valentino or his assistants through the use of a drop box for prescriptions should be discussed. The importance for him to remain healthy would be stressed.
- c. If possible, third year nursing students at the University of New Brunswick would be asked to create an interactive program on hand washing/infection control for the entire student body at the New Maryland Elementary School (NMES).

**3.1.2.2 Small Businesses**

Small business owners/operators will need to be educated by making them aware of the gravity of a widespread health emergency and the effect that it would have on their business. Preliminary information packages containing pertinent information and questions for small business owners to consider under widespread health emergency conditions should be produced and distributed. In addition, they will need to be directed to websites and other resources which they can use for their planning. Widespread health emergency plans already mentioned, particularly Manitoba's, should be useful for this.

### **3.1.2.3 People Living Alone**

The emergency Alert Program will identify and help vulnerable people through a registry, and encouraging neighbours to help each other.

### **3.1.2.4 Shortage of Essential Services**

The Chief Administrative Officer for the Village will determine which other services must be declared essential and which can be postponed until the situation returns to some normalcy. Each department will be required to identify the critical resources needed to carry out their functions. Any additional resources that would not normally be on hand must also be identified; i.e., a stockpile of chlorine for the water treatment plant.

### **3.1.2.5 Food / Fuel Shortages**

The Emergency Response Plan committee has reached a verbal agreement with the Direct Charge Co-Op for an emergency food supply. Menus will be planned to predict what food will be required. The Committee agreed that the Village cannot be responsible for the provision of food or fuel to residents. To that end, it is imperative that this information be disseminated to the public. The Village is responsible for the provision of its fuel supplies. Further options are being explored by Chief Farrell.

### **3.1.2.6 Shelter**

Arrangements will have to be made to provide shelter during prolonged power outages. The New Maryland Centre will be the primary shelter with Faith Baptist Church as backup.

In the event of an emergency evacuation during the course of a widespread health emergency, affected residents will be urged to take shelter with family or friends. If some residents do not have this option and it is determined that emergency shelter is needed, the Emergency Response Plan committee will look to public health authorities for assistance and/or guidance. If there are no options offered by public health authorities, two separate shelter sites will be activated. One shelter would house those who are ill, and/or persons who have been in contact with a person ill with the infectious agent for the previous seven days. These shelters would be those identified in the New Maryland Emergency Response Plan as reception centers.

The second shelter would house those who are symptom-free and have not been in contact with a person ill with the infectious agent or other infectious disease for the previous seven days.

In both shelters, strict precautions will be taken to minimize the risk of infection, including, but not limited to:

- maintaining a minimum spacing of two metres between cots,
- placing chairs one metre apart for meals,
- providing hand sanitizer and instructions for its use,
- emphasizing the need for hand washing, cough and sneeze etiquette and social distancing,
- providing facial tissues,
- providing secure waste disposal, and

- rigorous infection control measures.

Should a person in the “well” shelter show signs of infection, he/she will be relocated to the other shelter.

#### **3.1.2.7 Snow Removal**

Contractor(s) will be contacted by the Village staff and consulted on how best to provide this service if there are serious reductions to their staff due to illness. The New Brunswick Department of Transportation (NBDOT) will remain responsible for keeping Highway 101 open.

#### **3.1.2.8 Pharmaceuticals**

The New Maryland Pharmacy is an essential service and the owner needs to understand the role he has to play during a widespread health emergency. The Village has procured those products deemed necessary for provision to staff and Committee members as required. Residents will be advised to maintain the maximum amount of prescriptions by keeping them filled.

#### **3.1.2.9 Churches / Clergy**

Clergy will be asked to disseminate vital information to their congregations. Churches could be looked to as immunization sites. Both churches in the Village limits and three outside our boundaries should be given information session and supplied with written information.

#### **3.1.2.10 Morgue Services**

The District Medical Officer of Health has advised the Committee that the local funeral homes have indicated that they will be able to accommodate the anticipated death rate.

#### **3.1.2.11 Garbage Collection**

The Village may have to obtain a truck from one of the local contracting companies for the emergency collection of garbage. It is highly unlikely that the Department of Environment would allow a temporary landfill site anywhere in the Village, so the Department of Environment and Local Government should be contacted to determine their plans for the continued operation of their landfill.

#### **3.1.3.12 Communications**

Communications are to be addressed by the Mayor in conjunction with the Regional Emergency Management Coordinator. Laptop computers will be used as required in emergency situations.

#### **3.1.2.13 Volunteers**

The use of volunteers will be essential to minimize hardship and maximize recovery in a severe widespread health emergency. The Emergency Response Plan committee is working on an Emergency Volunteer Management Plan to address the complex issues of recruiting, training, screening and managing volunteers in a wide range of capacities.

#### **3.1.2.14 Animal Control**

Because pets will not be allowed in emergency shelters, residents requiring public shelter will need to make arrangements with kennels, family or friends

for the care of their pets.

**3.1.3 Summary of Issues: Agencies / Individuals Responsible**

3.1.3.1	Public Education	Emergency Response Plan Committee
3.1.3.2	Small Businesses	Small business owners with assistance of the Emergency Response Plan Committee
3.1.3.3	People Living Alone	Individuals, family members, churches/clergy
3.1.3.4	Essential Services	Fire Chief, RCMP authorities, Village of New Maryland
3.1.3.5	Food/Fuel Shortages	Village of New Maryland, residents and family members
3.1.3.6	Shelter	Village of New Maryland, residents and family members; Canadian Red Cross
3.1.3.7	Snow Removal	Contractors M.W. Price and C. T. Charters for streets and NBDOT for Highway 101
3.1.3.8	Pharmaceuticals	Local pharmacist with assistance of the Emergency Response Plan Committee
3.1.3.9	Churches/Clergy	Churches and clergy with the necessary assistance of the Committee
3.1.3.10	Morgue Services	Medical Officer of Health and Public Health
3.1.3.11	Garbage Collection	Contractor, Village of New Maryland Public Works with trucks from local contractors as required
3.1.3.12	Communications	Communications personnel under the Emergency Response Plan Committee.
3.1.3.13	Help Line/Volunteers	Emergency Response Plan Committee with assistance of volunteers from the Village
3.1.3.14	Animal Control	Animal Control Officer within the limits of his capabilities. A compound to be set up under the guidance of the local veterinary clinic. Residents assume responsibility for their own pets by having cages/carriers, food and medication.

**3.1.4 External Emergency Coordinator**

This task will have to be done in conjunction with the Chief Medical Officer of Health and/or Public Health in order to determine what the specific needs associated with a widespread health emergency would be.

**3.1.5 Internal Coordination Team**

This function will be included under staff policies.

**3.1.6 Emergency Operations Centre (EOC)**

The establishment and operation of the EOC will be the responsibility of the Emergency Response Plan Committee.

**3.1.7 Widespread Health Emergency Monitoring and Information Collection**

The agency primarily responsible for these functions will be the Medical Officer of Health who will be expected to provide up-to-date information. It is likely that the role of monitoring sources and alerting the Coordination Team would be given to a



designate.

### **3.1.8 Communications**

Communication should be driven by Public Health. The role of the Emergency Response Plan Committee would be to ensure residents are aware of local resources, to keep them current on the situation within the Village and to advise them of areas where they can help by volunteering. Our own Public Information Officer will be responsible for this.

## **3.2 Council Approval**

This, and all future Plan updates, will be presented to the Village Council for approval.

## **3.3 Plan Distribution**

Once the Plan is approved by Council, it will be printed and distributed to all key personnel and their backups.

## **3.4 Measures to Minimize Viral Transmission**

### **3.4.1 Hygiene**

The spread of viruses can be reduced with proper hygiene. Information in this regard will be communicated to staff, contractors, customers and visitors. These efforts will continue using posters, email, etc.

Frequent, thorough hand washing is very important, particularly after coughing, sneezing, or before eating, drinking, or smoking. Ensure facilities and supplies are available for staff and customers to wash their hands. Ordinary soap and water are adequate or, if running water is not available, alcohol-based hand sanitizers are effective.

Cover the nose and mouth when sneezing or coughing, preferable with a disposable tissue. Be sure to dispose of tissues immediately.

Avoid touching the nose, mouth, or eyes, all of which are points of entry for the virus.

### **3.4.2 Managing Sick Employees**

To reduce the spread of a widespread health emergency at work, the Village may need to change its policies to ensure that sick employees do not come to the workplace until they are well.

At the beginning of a widespread health emergency, clear policies and guidelines on when employees do or do not report to work will need to be communicated.

Assure those who do not report to work because of illness or quarantine that their benefits will be covered while they are away. The Village may need to adjust policies to provide special coverage for those who do not have any sick time available.

Provide employees with Public Health's information on how to look after themselves, their children and others during a widespread health emergency.

Monitor individual employee absenteeism (public health staff may notify local

governments when reporting of absenteeism rates is required).

The Plan should also have a process to manage staff who become ill at work, i.e.:

- a. send employees home if they are ill and tell them to stay there for a minimum of 24 hours after symptoms have completely disappeared;
- b. follow the advice of public health officials at the time of a widespread health emergency; and,
- c. backfill key positions when necessary.

### **3.4.3 Reduce Employee Interpersonal Exposure**

To reduce exposure of staff to the virus, minimize their contact with customers or co-workers during the widespread health emergency. This can be accomplished in several ways:

- a. Reduce interaction with customers: Visiting with people experiencing symptoms or having them in the workplace should be avoided wherever possible. Communicate this through notices, signs and word-of-mouth.
- b. Set rules for customer interactions:
  - i. talk to customers by alternate means such as in writing, by mail, fax, email or telephone; and,
  - ii. postpone meetings until the medical emergency is abated or reduced.
- c. If Village officials must meet customers:
  - i. create buffer zones of at least one metre (three feet) between employees and customers; and,
  - ii. keep the meetings as short as possible.
- d. Work from home: Consider giving key employees the necessary equipment to work from home. This may reduce their level of exposure to the virus and maintain a level of productivity. Where this is possible, write a plan to support or equip employees and test it to ensure the technology and procedures work.

### **3.4.4 Outside of Work**

Provide everyone any information that Public Health has provided about avoiding locations or activities that represent a high risk of exposure.

### **3.4.5 Essential Services - Business**

#### **3.4.5.1 Continuity Planning**

While protective measures may slow the spread of disease in the Village, absenteeism may still be very high; consequently, the Village may not be able to keep every municipal service operating and it is important to prioritize. Critical services will be kept operating at all times even if it is at reduced levels. Personnel and material resources will be focused to ensure priority services are protected, supported and maintained. Non-critical services may be suspended and resources reassigned to critical services. Residents will be notified of reductions in service or closures.

**3.4.5.2 Document all Municipal Services**

All municipal services have been listed and critical and non-critical services identified. (For example, a fire department provides firefighting and rescue services, which are critical. Fire prevention and inspection services are not and should not be considered non-critical.)

**3.4.5.3 Service Priorities**

The following have been identified as critical services:

- a. Water treatment and distribution;
- b. Sewage and treatment systems;
- c. Police, fire and paramedic services;
- d. Road maintenance and snow clearing (critical repairs);
- e. Garbage removal; and,
- f. Social services and housing services.

Non-critical services include:

- a. Parks, community centres and recreational facilities; and,
- b. Administration, taxation, licensing, permits and planning

**3.4.5.4 Required Resources**

Village staff have identified the staff and resources required to maintain essential services.

**3.4.5.5 Human Resources**

- a. Key positions, personnel and skills, and backups have been identified. These can include existing Village employees, contractors or recently retired employees who have the basic skills and knowledge to do the job.
- b. Council must address the issue of backups for decision-makers and financial authorities.

**3.4.5.6 Physical Resources**

- a. Critical physical resources can include key equipment, vehicles, computers, communication systems, supplies and other materials.
- b. Sources of goods, materials and services for the critical business operations have been identified.
- c. Resources that may have long lead times or may be difficult to find during a widespread health emergency have been identified. Inventories of critical supplies, parts, widespread health emergency related supplies, etc. have been stockpiled.

- d. Systems or equipment (computer or processing) which rely on regular intervention or maintenance to operate properly are being identified.

#### **3.4.5.7 Information Resources**

Steps will be taken to ensure that enough documentation and training is available for employee backups to do their jobs without other support people. Documents on key processes or equipment should be kept up-to-date and easy to find.

### **3.5 Recovery Plans**

Recovery is generally one of the most overlooked aspects of emergency planning. Even without obvious physical or structural damage, municipal governments, the economy, employees, and general community well-being will be affected. Planning for recovery, between and after the widespread health emergency waves, will help speed the return to normal, reduce stress and cut costs to the community.

The Village of New Maryland, aided by the Emergency Response Plan Committee and volunteers would facilitate:

- a. processes to manage donations of funds, goods and services;
- b. cooperation with government and non-government agencies and programs in the recovery effort;
- c. coordination of a multi-agency community needs assessment to focus on those affected and least able to cope financially or emotionally;
- d. coordination of recovery activities including counseling services, social services, food banks, etc.; and,
- e. keeping the public and target groups informed through the media, internet, written materials or community meetings.

#### **3.5.1 Economic Recovery**

Small and medium-size businesses are most likely to fail after a disaster. Specific sectors such as tourist and public venues, which may be closed during the widespread health emergency, are likely to be among the hardest hit.

The Village of New Maryland will work closely with business leaders to actively promote community support and economic development, through advertising and other development, incentives to restore the local economy.

#### **3.5.2 Psychological Recovery**

Fear, the stress of caring for the sick, grieving for the dead, unemployment and many other social issues related to the widespread health emergency will take an emotional toll on most of the population. People will be affected by the widespread health emergency and its aftermath in various ways and to different degrees. Many will recover on their own, but some will need information or additional support to cope. The Village of New Maryland will offer help by:

- a. distributing information provided by Public Health;

- b. providing feedback to the regional health authority on residents' concerns that were not addressed in information packages;
- c. working with the regional health authority to provide counseling and debriefing sessions;
- d. holding ceremonies to recognize the event; and,
- e. encouraging workers or residents with health concerns to seek medical advice and help from family doctors and the Horizon Health.

### **3.5.3 Organizational Recovery**

The Village of New Maryland may face a variety of internal recovery challenges:

- a. psychological stress, low morale and temporary loss of productivity are likely because of the death of co-workers, family or friends. Stress counselling and ceremonies to mark lost employees may be required;
- b. loss of corporate knowledge is possible if employees die during a widespread health emergency;
- c. there may be a need to recruit and train replacement employees and re-assign employees to maintain operations; and,
- d. there will be a backlog of work caused by business disruptions.

## **4. MAINTAINING THE PLAN**

This Plan will be updated periodically to include new information or practices and to reflect changes in the community and its organizations. It will be the responsibility of the Emergency Response Plan Committee Chair to initiate an annual review with committee members and staff each February.

## **5. TRAINING AND AWARENESS**

Education raises awareness of the risk and can prepare individuals and organizations for their roles during a widespread health emergency. The Village of New Maryland would consider the following:

- a. sending participants on general emergency preparedness and response training or widespread health emergency-specific training offered by government or private sector organizations;
- b. holding sessions with the public, local businesses, and other organizations to raise awareness of the risks of a widespread health emergency and the need to prepare themselves for this type of emergency;
- c. holding employee training and awareness sessions on the risks and outlining organizational response to a widespread health emergency; and,

- d. providing necessary job training to staff who are expected to serve as backups to other key personnel.

### **5.1 Exercises**

Exercises are a powerful tool that can be used to participate, educate, motivate and test plans, procedures, or technology. The Village has considered the following:

- a. participating in provincial or regional emergency response or widespread health emergency-specific exercises when invited, and
- b. conducting community and internal emergency response and widespread health emergency-specific exercises.

### **5.2 Resource Development**

Resources are critical to making sure that the widespread health emergency plan works and that critical equipment and services remain operating. The Village should budget for specific resources with long lead times or anticipated high demand to help the community cope with a widespread health emergency.

## **6. CONCLUSION**

---

The success of widespread health emergency planning and preparedness efforts depend on what is put into the process. Diligent planning by the Emergency Response Plan Committee and community stakeholders will pay big dividends by protecting employees and residents and minimizing the social, economic, and psychological effects of a widespread health emergency. Widespread health emergency planning is an opportunity to add to overall community preparedness. Parts of a widespread health emergency plan can be effective during many other local community crises, such as a labour interruption. It can also improve the Village's ability to manage other operational risks associated with supply chains and transportation disruptions.

## **7. APPENDICES**

---

### **7.1 Public Information Initiatives and Documents**

#### **Public Education Initiatives for 2009 Pandemic Preparation**

- Information flyer (Bird Flu: Why All The Fuss?) Sent out to all residents on September 12, 2006
- September 25, 2006 – A general public education meeting with guest speaker Marilyn Evans, Executive Director of the Nashwaak/Keswick Ambulance Service and Chair of the Pandemic Planning Group for Route 8. Attendees: 62
- A hand washing and infection control program at New Maryland Elementary School during October and November, 2006, which was developed and delivered by eight 3<sup>rd</sup> year Nursing Students from UNB who worked with our Committee.
- A pandemic information and planning forum for neighbouring municipalities, with panelist from River Valley Health, Public Health and New Brunswick Emergency Measures Organization on February 27, 2007.
- Presentations to First Congregational Church of Fredericton (November, 2006); Faith Baptist Church (February 11, 2007); Sts. John and Paul Catholic Church (March, 2007); Trinity Anglican Church (June 6, 2007); Nasonworth Pentecostal Church

(September 20, 2007); and Christ Church Cathedral (November 25, 2007).

- Presentations to Women’s Institute, Knights of Columbus, and Ground Search and Rescue.
- Information booths at school fairs, community days and other events.
- A guest column in the Daily Gleaner (January 23, 2007).
- Prepared and delivered pandemic preparation packages for Village businesses, including laminated hand washing posters for washrooms.
- Pandemic checklists are available at the Reception Desk of the Village Office and at the checkouts in our local pharmacy.

#### Presentations to Communities and Other Agencies

- Municipal Pandemic Planning Made Easier – a presentation to the Town of Nackawic Pandemic Planning Committee (June, 2007).
- Presentation to the City of Fredericton Emergency Measures Committee (January 10, 2008).
- Presentation to Provincial Pandemic Steering Committee (January 23, 2008).

#### Documents

- Bird Flu: Why All The Fuss? (New Maryland Pandemic Planning Committee – NMPPC)
- Pandemic Planning Checklist for individuals and Families (Center for Disease Control – CDC; Department of Health and Human Services USA)
- Cover Your Cough / Hand Washing Poster (CDC)
- Understanding Pandemic Influenza (Public Health Agency of Canada)
- You Should’ve Got Your Flu Shot Brochure (Canadian Coalition of Influenza Immunization)
- New Maryland Pandemic Plan Highlights (NMPPC)
- Pandemic Preparedness Checklist for Churches (NMPPC)
- Municipal Pandemic Planning Made Easier (NMPPC)
- Business Pandemic Influenza Planning Checklist (NMPPC)
- 10 Steps Organizations Can Take For Pandemic Influenza Preparedness (British Columbia Pandemic Influenza Preparedness)

#### Resource List

- Influenza Pandemic Emergency Checklist: Be Prepared, Not Scared (Bilingual – NMPPC)
- An Ounce of Prevention – Flu Shot mailer (NMPPC)

### **7.2 Fire Department**

In the event of a widespread health emergency, the New Maryland Fire Department will continue to provide service to the best of their ability. Depending on infection rates among

firefighters, and the fact that these volunteers may be required to work overtime at their normal workplaces, it must be recognized that response times could be longer than normal.

Firefighters will be provided with continuing education on personal infection control and risk-reduction. Hand sanitizer, masks, and other items that could reduce the risk of infection to firefighters and their families will be provided by the department. Some emergency food supplies will also be stockpiled.

During a widespread health emergency, every effort will be made to ensure the safety of firefighters and the people they serve. Infection control measures will be in place under the direction of the Fire Chief, based on guidelines from Public Health Authorities.

### **7.3 RCMP District 2 Oromocto**

Public Health Officials will have the lead role for health emergencies, whether they are natural or deliberate in origin. The Commanding Officer of the RCMP "J" Division will coordinate the direction and control of the RCMP response in New Brunswick.

One of the goals of the RCMP will be to reduce victim harm and/or death by reducing or eliminating exposure. Just one widespread health emergency could have profound consequences, both socially and economically, due to the number of people becoming ill or dying.

Intense pressure will be placed on RCMP members and other front line responders and the health care system may quickly become overwhelmed.

To minimize the morbidity and mortality caused by a widespread health emergency, it will be critical that health services are kept functioning as long and as efficiently as possible. Therefore, it is expected that members of the RCMP will provide support to the public health system by maintaining order, providing protective security, ensuring public safety, conducting criminal investigations and providing assistance to other emergency services as required.

Members will also provide assistance to the Public Health Officers who have the legislative authority to take all measures to carry out any preventive measure to control and prevent the diffusion of a disease. This could include enforcing orders of quarantine, restriction of travel, cancellation of public gatherings and closing of public buildings.

Depending on the nature of the health emergency, first responders, because of the nature of their responsibilities, are at a much greater risk than the general public during a health emergency and should take appropriate precautions. Therefore, RCMP members will be expected to practice good health habits.

If left unchecked, major health emergencies can undermine public confidence in government, especially if the event decimates the ranks of first responders and health care workers. A long duration widespread health emergency event, will have a negative impact on social order and social psychology.

*The above summary of the RCMP District 2 response during a health emergency has been prepared by Cst. Robert Vinet for the New Maryland Pandemic Preparedness Committee on 2007.06.01.*



**Acknowledgements**

**Pandemic Preparedness Committee (2007)**

Connie Storr (Chair)

Committee Members:

Dick Rogers

Pat Seaman

Jim McAnany

Harry Farrell

**Pandemic Preparedness Plan Approved by Council February 21, 2007**

Frank Dunn (Mayor)

Michelle Sawler (Deputy Mayor)

Paul LeBlanc (Councillor)

Judy Wilson-Shee (Councillor)

Scott Sparks (Councillor)