



Hamilton

Public Health Services Emergency Plan

**Public Health Services
City of Hamilton
Planning and Continuous Improvement Division**

Revised 2008/03/19

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Glossary of Terms and Abbreviations

Emergency Operations Centre (EOC)

A central facility that serves as a focal point for the Emergency Control Group to effectively direct, coordinate, communicate and support emergency operations within its jurisdiction; also known as the 'Nerve Centre'.

Emergency Control Group (ECG)

An established, recognized body responsible for providing direction, coordination, communication and support during emergency operations. The Emergency Control Group is composed of the following municipal officials, or their designated alternates, holding the following appointments:

- Mayor
- City Manager
- Chief of Police Service
- Director of Emergency Services Division / Fire Chief
- Medical Officer of Health
- General Manager, Community Services
- General Manager, Public Works
- Lead, Human Resources
- Manager of Corporate Services
- General Manager, Planning & Development
- City of Hamilton Emergency Management Co-ordinator
- Hamilton Hydro Electric System
- Public Information Officer

Emergency Management Ontario – EMO

Emergency Support Group (ESG):

A group of designated support personnel from city departments or adhoc that provide support to the Emergency Control Group. Support staff operate out of the Emergency Support Room. They are responsible for operating the phones, portable radios, computers, printers, faxes and distributing and collecting information at the direction of their Emergency Control Group members.

Ministry of Health and Long Term Care – MOHLTC

Public Health Emergency Operations Centre (PHEOC):

A central facility or meeting room that serves as a focal point for the Public Health Emergency Control Group to effectively direct, coordinate, communicate and support public health staff and their emergency response operation.

Public Health Emergency Control Group (PHECG):

An established, recognized body of public health staff responsible for responding to an event or emergency that may affect the health of the community. The Public Health Emergency Control Group is composed of the following members:

- Medical Officer of Health
- Associate Medical Officer of Health
- Director of Health Protection Division
- Administrative Assistant to the Health Protection Division
- Director of Healthy Living Division
- Director of Family Health Division
- Director of Planning and Continuous Improvement Division
- Manager from Health Protection Division
- Manager of Applied Research and Evaluation
- Public Health Emergency Response Planner

Public Health Emergency Program Committee: Note, during an emergency this group is called the Public Health Emergency Control Group

An established group of the public health physicians, directors and managers that to review the components of emergency planning: a) preparedness, b) mitigation, c) response, d) recovery, for all staff at Public Health Services. This committee is chaired by the Public Health Emergency Response Planner.

IMS – Incident Management System

The Incident Management System (IMS) consists of staff, procedures, equipment, facilities and communications operating within a structure designed to manage the emergency. Authority is based on top-down approach, originating at the Incident Commander.

Executive Summary

0.1 Executive Summary

The Ministry of Health and Long Term Care (MOHLTC) Public Health Standards states that the board of health shall ensure timely response to reports of health hazards through the provision of a written response plan. It is also stated in the Emergency Management and Civil Protection Act (June 2006) that each municipality must include departmental emergency plans as part of their emergency management program. Hence PHS, as part of the City of Hamilton and mandated by the MOHLTC must have an Emergency Plan.

The Public Health Services Emergency Plan is to operate within the overall scope of the City of Hamilton Emergency Plan and has been designed to complement the City of Hamilton Emergency Plan. In the event of a city emergency, the City of Hamilton Emergency Plan supersedes the Public Health Services Emergency Plan.

The Public Health Services Emergency Plan has been prepared to provide Public Health officials and staff with a general guideline for responding to an emergency in the City of Hamilton.

This plan is designed to identify the roles and responsibilities of physicians, directors, managers, staff and support staff in the event of an emergency in the City of Hamilton.

For the Public Health Services Emergency Plan to be effective, all physicians, directors, managers and support staff must be well versed with the plan's provisions and contents.

Over time, the organizational structure, policies and procedures of the physicians, directors, managers and administrative assistants may change. It is essential that the information within this plan be continuously reviewed, updated and tested to ensure an effective response.

0.2 Short Title

The Public Health Services Emergency Plan may be cited as the Plan throughout this document.

0.3 Format

Under normal operating circumstances, Public Health Services is a single unit with 5 divisions. Other plans may be annexed to the Plan, such as divisional business continuity plans, and response plans for infectious disease outbreaks, contaminated water and hydro outages.

The plan is organized into two main sections, the basic plan and supporting documents or annexes. The basic plan describes Public Health's authority, responsibilities, concept of operations and operational response structure. The annexes contain pertinent reference information and are written independently of the entire plan. Certain annexes contain confidential information and will be available to members of the PHECG.

It is expected that this information will assist in responding to a declared emergency or incidents that have potential to become a natural or man-made disaster and need to be responded to as if responding to a declared emergency.

The contents are based on the principle that effective response preparations must be kept simple and flexible allowing for common sense and good communication processes to prevail. It is intended that this plan will be used in conjunction with other 'emergency/disaster' response plans that are activated as a result of disasters.

The plan is considered a living document and will reside with each member of the Public Health Emergency Program Committee, their alternates, and with the Emergency Response Planner. A copy of the plan with all confidential information deleted will be stored electronically under the 'N' drive/Departmental Info/Emergency Planning. This plan will be titled, '**Public Health Services Emergency Plan, Public Copy**'.

0.4 Amending Formula

Any identified key official, director, manager or administrative assistant may propose amendments to this Plan or any section of it to reflect organizational changes in structure, personnel, policy or procedure.

Any change in organizational structure, personnel, policy or procedure must be reported to the Public Health Emergency Program Committee to ensure that the Plan is amended to reflect these changes. The Emergency Response Planner will make changes to this plan based on approval from the Public Health Emergency Program Committee.

0.5 Authority

The legislation under which the City of Hamilton, and its employees are authorized to respond to an emergency is as follows:

BY-LAW-05-105, The City of Hamilton (April 27th, 2005)

The Emergency Management and Civil Protection Act (2006) is the principle statute governing emergency management in Ontario. The Act governs all municipalities, ministers presiding over a provincial ministry, and agencies, boards, commissions and other branches of the provincial government designated by the Lieutenant Governor in Council. A summary of key emergency orders that may be issued by Cabinet or its delegate are:

- Implementing emergency plans
- Regulating or prohibiting travel or movement
- Establishing facilities such as emergency shelters and hospitals
- Closing any place, whether public or private
- Authorizing facilities such as electrical generating facilities to operate as necessary
- Using and making available any necessary goods, services and resources
- Fixing prices for necessary goods, services and resources and prohibiting price-gouging
- Authorizing those who would not otherwise be eligible to do so, to perform certain duties
- Requiring any person to collect, use or disclose information that may be necessary to respond to the emergency

Acts Governing Health Units

In environmental emergencies or situations with definite or potential health implications, public health has a duty to prevent, eliminate and decrease the effects of health hazards. The **Health Protection and Promotion Act** R.S.O. 1990, c.H.7 provides legal authority for Public Health Units and the Medical Officer of Health to respond to health emergencies. The Act allows the Medical Officer of Health or alternate to take any actions necessary to respond to a health emergency, without necessarily having the City of Hamilton Emergency Plan implemented.

Under the Health Protection Promotion Act (HPPA)

- Physicians, laboratories, school principals and others must report certain diseases, including influenza to the Medical Officer of Health
- Person who pose a risk to the public health may be ordered to be, or to stop doing anything to reduce the risk of disease transmission
- Information about patients who are infected with communicable diseases may be disclosed to the Medical Officer of Health, while protecting the confidentiality of sensitive health information
- Physicians and registered nurses in the extended classes are required to report to the Medical Officer of Health the name and residence address of any person who is under the care and treatment of the physician of a communicable disease and who refuses or neglects to continue the treatment in a manner and to a degree satisfactory to the physician or nurse
- Appropriate action may be taken to prevent, eliminate or decrease a health risk
- Under certain conditions, premises may be required to be used as a temporary isolation facilities

The Health System Improvement Act was passed June 4th, 2007 and amends the HPPA as well as a number of other health statutes. These amendments provide additional powers to the Minister and Chief Medical Officer of Health (CMOH) which may be invoked without the declaration of a provincial emergency. These powers are intended to mitigate an incident such as an outbreak of infectious disease from escalating to the level of a provincial emergency. These powers include authorizing the Minister of Health and CMOH to procure, acquire or seize medications and supplies (subject to reasonable compensation) when regular procurement processes are insufficient to address the needs of Ontarians.

The **Ontario Public Health Standards** (January 2008) are province-wide standards that steer the local planning and delivery of public health programs and services. They set minimum requirements for fundamental public health programs and services by promoting health, preventing disease and injury and facilitating social conditions to ensure equal opportunity in attaining health. The Standards also specify Emergency Preparedness standards for all Public Health Units in Ontario.

Through the **Health Hazard Investigation Program** minimum requirements are set for controlling threats to human life and function and providing direction for emergency response. The goal of the program is to prevent or reduce adverse health outcomes resulting from exposure to health hazards including biological, physical, and chemical agents, natural or man-made.

Other Emergency Legislation

The federal **Emergency Management Act (EMA)**, which came into force on August 3rd, 2007 establishes the federal framework for emergency management, similar to the provincial framework. Under the EMA, the Minister of Public Safety is responsible for providing leadership and coordination among government institutions and with the provinces regarding emergency management activities.

The **Quarantine Act** provides general and emergency powers to the federal government to inspect, issue orders and enforce quarantine on travellers and cargo arriving in Canada for the purpose of preventing the introduction and spread of communicable diseases through the country.

Section 1.0 Scope

1.1 Introduction

Public Health Services is prepared to facilitate a prompt and effective response should an emergency occur in the City of Hamilton.

This plan is to assist the physicians, directors, managers and staff during a response to an emergency. It is intended to be consistent with the resources, and capabilities of the employees within the department. This plan will also identify the authority and manner under which the Public Health Emergency Control Group responds to an emergency.

1.2 Aim

The aim of the plan is to determine a course of action to be followed by Public Health Services staff in the event of any emergency affecting the public health of the community in order to:

- Provide a prompt response to the emergency in order to control, reduce, or mitigate adverse health outcomes affecting the public;
- Assist in the management and control of the emergency by effectively and efficiently coordinating Public Health personnel and resources;
- Support the Medical Officer of Health so that s/he can carry out her/his responsibilities as a member of the City Emergency Control Group; and
- Provide resources and/or assistance to other city departments in response to the emergency, as requested.
- Provide accurate information to officials, the media and concerned citizens
- Assist in restoring the community and Public Health Services to normal services

The plan has been designed as a generic document that is applicable to all types of health emergency and/or other emergencies which may have an impact on the health of the community.

The most likely types of emergencies which may occur in the City of Hamilton include:
(As defined by the Hazardous Identification Risk Analysis (HIRA) completed in October 2004 by the City Of Hamilton Emergency Management Program)

- Hazardous Materials Spill - Fixed Site
- Hazardous Materials Spill - Transportation
- Drinking Water Quality Incident
- Human Health Emergencies (Epidemics)
- Terrorism
- Civil Disorder

- Explosion / Fire

1.3 Definition of an Emergency

Emergencies are distinct from the normal daily operations carried out by municipal first response agencies/departments such as fire, police, emergency medical services etc.

The Emergency Management and Civil Protection Act, R.S.O. 1990, Chapter E.9 defines an emergency as:

“a situation or an impending situation that constitutes a danger of major proportions that could result in serious harm to persons or substantial damage to property and that is caused by the forces of nature, a disease or other health risk, an accident or an act whether intentional or otherwise”. By its nature, an emergency often elicits an atypical response from authorities that goes beyond their regular activities or procedures.

Emergencies are caused by hazards. These are described as events or conditions that have the potential to cause harm or loss to life and property, such as a tornado or a chemical explosion. These events can be sudden, where they occur instantaneously. Others are gradual and can manifest themselves progressively over time. Emergencies are sometimes predictable, but often are unexpected and without warning.

Emergencies could be classified in three categories:

1) Natural Emergencies:

- Severe weather including floods, storms (ice, snow, high winds, rain, thunder and lightening) and tornadoes
- Forest fires, earthquakes, drought, heat waves and human health emergencies and epidemics

2) Technological Hazards

- Building/Structural Collapse
- Critical Infrastructure Failures
- Energy Emergencies
- Hazardous Material Spill
- Radiological Emergencies
- Transportation Emergencies

3) Human-Caused Emergencies

- Civil Disorder
- Sabotage
- Special Events
- Terrorism
- War and International Emergencies

An emergency by its nature or magnitude requires a controlled and co-ordinated response by multiple agencies, under the direction of the City Emergency Control Group (ECG). This group can be assembled at any time to activate the City Of Hamilton Emergency Plan without actually declaring an emergency.

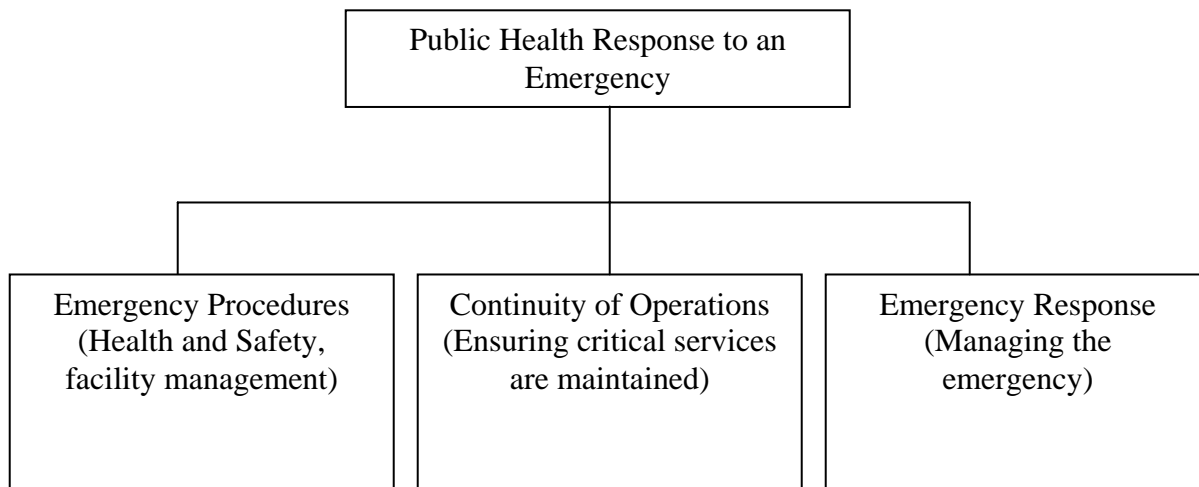
Public Health Services is required to respond to any level of emergency, and thus this plan must reflect this readiness.

A "**Declaration**" of the City of Hamilton Emergency Plan refers to the decision and action by the Mayor having the legislative authority under the Emergency Management and Civil Protection Act (2006) - to declare an 'Emergency to Exist' within the boundaries of her/his municipality. The authority to declare that an emergency exists and to take measures to protect property, health, safety and welfare of the inhabitants in the emergency area rests with the elected head of council. Depending on the extent of the emergency, a state of emergency may also be declared by the Premier of a Ministry. The declaration of a Provincial emergency and activation of the Provincial plan would supersede this plan and the City of Hamilton Emergency Plan.

1.4 How does Public Health Services respond to an Emergency?

The Public Health Services Emergency Plan functions as a general emergency response plan for Public Health Services. While it may be activated for any emergency, this plan focuses particularly on the response to health emergencies per the Emergency Management and Civil Protection Act.

This plan addresses three distant areas of response in which Public Health Services may respond as depicted in the figure below:



These three components are discussed in further detail below:

1) Emergency Procedures

Emergencies of any type can affect Public Health Services facilities and its staff. In such cases, PHS first responsibilities are to protect the health and safety of its employees. This responsibility is defined in the City Of Hamilton facility management operational procedures

and the City Of Hamilton Health and Safety manual. These procedures are not part of this emergency plan.

2) Continuity of Operations

If a PHS facility and staff are impacted by an emergency, this may result in the interruption of one or more critical services. In such cases, over and above the responsibility for employee health and safety, PHS must take immediate steps to restore the affected services to operational status in a timely and coordinated manner. Business continuity plans are not part of this emergency plan and will be available as a separate document.

3) Emergency Response

PHS must manage the impacts caused by the hazard and the potential health impacts on the community. This may involve a number of tasks such as assessing the damage or impact of the hazard on the environment and the health of the community, coordinating public health resources and relaying important public health information. The focus of this document is on the tasks involved in responding to an emergency. As the general emergency response plan for PHS, the structures and resources that are presented in this document are applicable to any hazard.

While the primary audience for this plan is the Public Health Service employees, it is anticipated that other city departments and the City of Hamilton Emergency Management Coordinator will utilize this plan to coordinate all aspects of an emergency response between the municipality and city departments.

1.5 Activation and Activating Authority of the Public Health Services Emergency Plan

Public Health Services staff must be prepared to respond to any emergency in which the potential exists for adverse health affects on the public.

If a member of the Public Health Emergency Control Group receives a warning of a real or potential health emergency, he/she will immediately contact the Medical Officer of Health or alternate and provide him/her with the pertinent details.

The decision to implement the Public Health Services Emergency Plan may be activated by the Medical Officer of Health, by any other member of the Public Health Emergency Control Group or by a Director or Manager responding to a health emergency. The Public Health Services Emergency Plan may be activated without a declaration of an emergency. The plan may be invoked as a stand-alone plan and does not necessarily imply that the City of Hamilton Emergency Plan will be activated.

'*Activation*' refers to the starting up (implementation) of all or part of the Public Health Services Emergency Plan. The normal trigger to activate the Plan is the commencement of the notification procedure of the Public Health Emergency Control Group. Note that implementation of the Public Health Services Emergency Plan or the City Emergency Plan never constitutes, in itself, an emergency declaration.

This Plan may be implemented in the following situations:

- As a component of the City of Hamilton Emergency Plan during a city emergency
- During an emergency of a health or environmental nature which does not require the implementation of the City of Hamilton Emergency Plan
- During a provincially declared emergency, as directed by Emergency Management Ontario and/or the Ontario Ministry of Health and Long Term Care or other designated provincial ministry
- During a federally declared emergency, as directed by Health Canada or other designated federal ministry
- During a large scale non-emergency event (including planning)
- During an exercise or a training session

The Graduated Response Protocol

The Graduated Response Protocol is similar to the four-tired approach that is currently in place at the Ministry of Health – Emergency Management Unit. This protocol provides a framework for steps to be taken, including activation as noted above, in response to a mounting emergency.

There are four Graduated Response levels:

- 1) Routine
- 2) Enhanced
- 3) Emergency Response
- 4) Recovery

PHS may elevate or reduce its response level depending on the circumstances of the emergency. Such action would be based on information received concerning the status of the incident and how it is (or is not) developing within the City of Hamilton.

Routine status refers to the continual process of planning, developing and implementing mitigation and preparedness initiatives within PHS. The ongoing monitoring and surveillance of reportable diseases by the Surveillance Unit as well as monitoring of known threats such as Avian Influenza and Pandemic Flu will continue as routine.

PHS may move to the Enhanced status once it has been alerted to the presence of an emergency. Enhanced level of activation is typically adopted for an emergency that has been detected at the early stages of development or if PHS receives warning of a hazard that has yet to materialize within the City of Hamilton i.e. a tornado warning. At this level there may be a partial notification of the PHECG members.

Activities at the Enhanced level are meant to ‘ramp up’ or prepare for a large scale emergency, but also to attempt to mitigate the emergency at its early stage of development. Activities at this level could involve increase surveillance at hospital emergency rooms and physicians office and increase communication to stakeholders (i.e. labs, hospitals and physicians).

Should the situation continue to escalate to an Emergency Response status, PHS will confirm the emergency situation, notify all members of the PHECG and will establish an initial strategic direction. The Incident Management System will be formally established and an operating cycle will be initiated based on the scope of the incident. If the situation requires the PHECG to operate beyond normal business hours up to a 24 hour basis, shift rotations will be implemented to establish ongoing coverage with procedures for transferring responsibilities between shifts.

As the emergency situation ends or begins to de-escalate, the PHECG will initiate Recovery activities, which are intended to return PHS to routine operations. At this stage, PHS is not expected to deactivate immediately, but is expected to continue coverage at a reduced level so that it may continue to oversee the return to routine business.

Section 2.0 Emergency Notification Procedure

2.1 Notification of the Medical Officer of Health (MOH)

An emergency is usually reported or discovered by the Fire, Police or Ambulance Services. These organizations will be among the first on the scene of a potential emergency.

Depending upon the situation, the senior on-site official may make the decision to alert a member of the City of Hamilton Emergency Control Group. Notification of the City of Hamilton Emergency Control Group may occur by either a member of the Emergency Control Group or through the Communication Division of the Police Department.

The MOH as a member of the City of Hamilton Emergency Control Group, on receipt of the information, may decide to alert the Public Health Emergency Control Group to notify them of the potential for a full activation. If the MOH is not available, the alternate listed on the Public Health Services Emergency Notification Form (Annex 1) will be notified.

2.2 Administration of the Public Health Services Emergency Notification Procedure

Notification refers to the official pre-determined process of contacting the members of the Public Health Emergency Control Group and alerting them to either attend the Public Health Emergency Operations Centre or to stand by. The Public Health Services Emergency Plan is considered implemented upon activation of the Public Health Notification Procedure.

2.3 Activating the Public Health Services Emergency Notification Procedure

The notification procedure uses individual telephone calling to notifying members of the PHECG.

The Medical Officer of Health may initiate the notification procedure as a consequence of having been notified by the Communications Division of the City of Hamilton Police Services or because of an emerging public health crisis that extends beyond a single Public Health Division ability to respond. The notification procedure may also be activated by a member of the Public Health Emergency Control Group in response to an emerging public health issue.

(Please note: The MOH or alternate responding as a member of the City ECG will be contacted directly by the Communication Division of the City of Hamilton Police Services. The exception is the contact of the Administrative Assistant to the MOH in the EOC who will be contacted directly by the MOH or another member of the Public Health Emergency Control Group).

If a member of the PHECG is not available during the notification process, the alternate will be notified and will *fulfill the duties of the PHECG member* who was unavailable.

Depending on the situation, management staff will be notified according to the fan out list.

2.3.1 Business Hours Activation of the PHECG

Contacting members of the Public Health Emergency Control Group during working hours, (8:30 a.m. to 4:30 p.m. Monday - Friday)

The process of notifying members of the PHECG will be initiated by the Administrative Assistant to the Health Protection Division as directed by the MOH, AMOH or any member of the PHECG. He/she will contact the members of the Public Health Emergency Control Group through the use of the Public Health *Emergency Notification Form (Annex 1)*. This form includes contact numbers for the Public Health Emergency Control Group and their alternates.

The number of staff called to report to the PHEOC will be based on the following criteria:

- Nature of the emergency
- Severity of the emergency
- Impact of the emergency on the community
- Impact of the emergency on PHS
- Location of the emergency
- Anticipated duration of the emergency

The AA would ask the members of the PHECG or alternate to:

- report to the Public Health Emergency Operations Centre (primary or alternate site)
- standby
- report to normal worksite
- report to a designated site as determined by the emergency

Due to the fluidity of an emergency, it may be possible to utilize a combination of the abovementioned options for different staff. Those not notified to attend the PHEOC will be notified of the emergency event and updated on a regular bases.

2.3.2 After Hours Activation of the PHECG

Contacting Members of the Public Health Emergency Control Group after hours (4:30 p.m. – 8:30 a.m. Monday – Friday, weekends and holidays)

If the MOH requests activation of the Public Health Emergency Control Group, the MOH or a designate will notify the Emergency Response Planner, who would contact the members of the Public Health Emergency Control Group using the Public Health Services Emergency Notification Form.

The **completed** Public Health Services Emergency Notification form would be forwarded to the chair of the Public Health Emergency Control Group.

2.3.3 Algorithm of Notification for City Emergencies during Working Hours

Notification Flowchart during Working Hours

Any member of the City of Hamilton Emergency Control Group could notify members of the City Emergency Control Group or could notify the City of Hamilton Police Department Communication Division who will notify

City Activation



The Medical Officer of Health (MOH)
The MOH notifies the following or assigns a designate to notify the following:



Public Health Activation

The Associate Medical Officer of Health
Administrative Assistant to the MOH in the EOC
Director of the Health Protection Division



If requested the Administrative Assistant to the Health Protection Division will contact members of the Public Health Emergency Control Group using the *Public Health Emergency Notification Form (Annex 1)*



The following members of the Public Health Emergency Control Group will contact the following:

Environmental Health Manager will contact the PHI – Emergency Responders as required

Logistics Sector Leader will contact PHN's as required

PHECG members will notify their respective alternates to inform them of the emergency and to request back-up as required.
Members of the PHECG will notify divisional managers, staff, and support staff as required.

2.3.4 Notification for City Emergencies after Working Hours

Any City Emergency Control Group member will notify the Communication Division of the City of Hamilton Police Services who will initiate the notification procedure for the City Emergency Control Group.

The communication staff from the City of Hamilton Police Services will notify the *Medical Officer of Health* or designate.

The Medical Officer of Health will notify the:

- *Associate Medical Officer of Health and/or the Director of Health Protection Division*
- *Administrative Assistant to the MOH in the EOC*

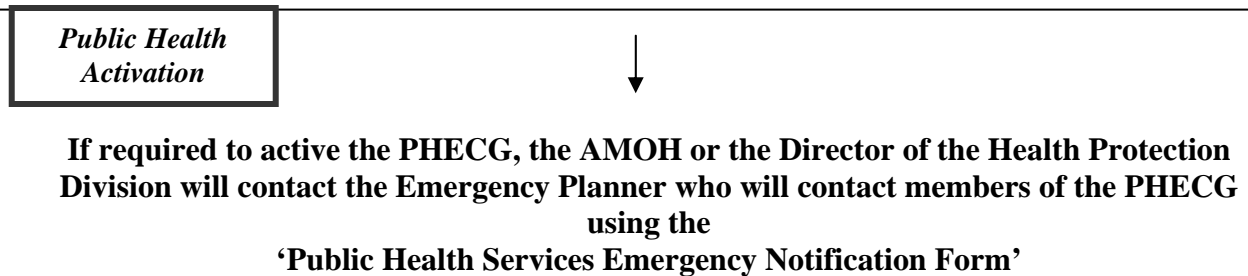
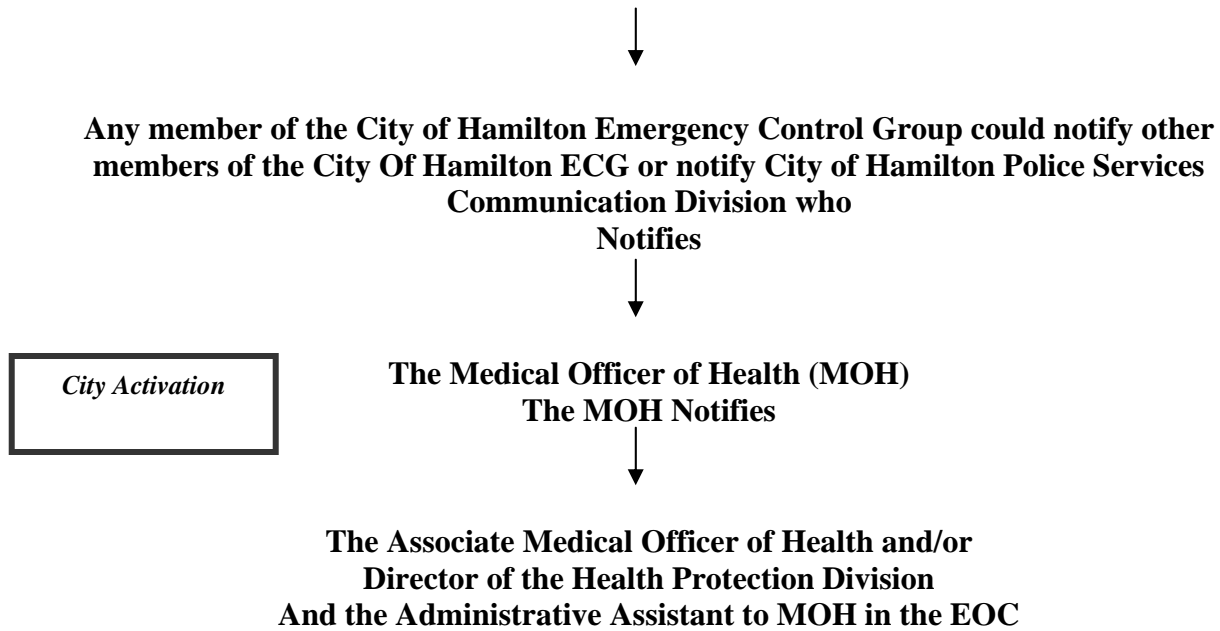
*The AMOH or the Director of the Health Protection Division will contact the Emergency Planner to initiate the notification procedure of the members of the **Public Health Services Emergency Control Group**.*

The Directors are responsible for ensuring that a fan-out list is in place to notify divisional managers, staff and support staff in the event of an emergency.

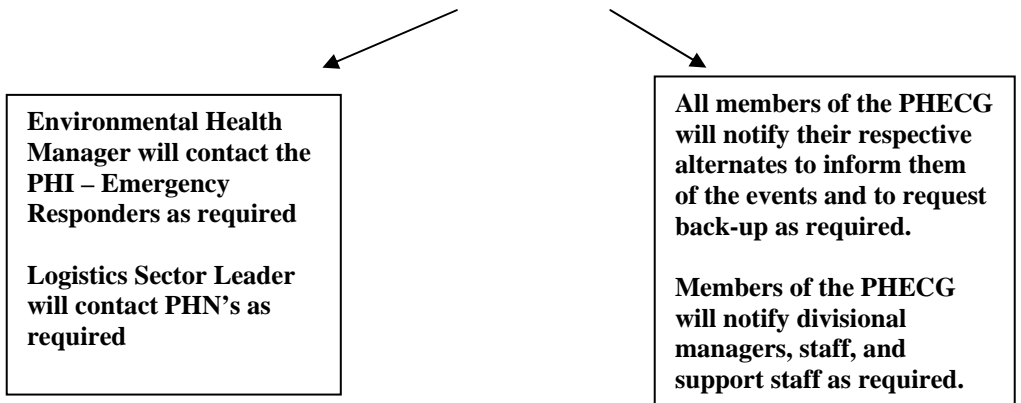
On call staff notified of an emergency situation is to notify the On Call Environmental Health Manager. The On Call Environmental Health Manager will notify the Director of the Health Protection Division and the Medical Officer of Health or the On Call AMOH as **deemed necessary**.

2.3.5 Algorithm of Notification for City Emergencies after Working Hours

Notification Flowchart after Hours



The following members of the Public Health Emergency Control Group will contact the following:



2.4 Emergency Notification Levels

The threat of an emergency situation developing or the potential for such a situation to change or develop in severity may require different levels of emergency notification. The three emergency notification levels at which emergency personnel can be alerted are:

Full Notification

When a *full notification* is directed all members of the Public Health Emergency Control Group will be contacted and instructed to respond to the Public Health Emergency Operations Centre at a given time.

Partial Notification

In a *partial notification* only selected members of the Public Health Emergency Control Group will be contacted and instructed to respond to the Public Health Emergency Operations Centre at a given time.

This notification level may be used if there is an emergency situation developing, or the threat of an emergency occurring which does not yet merit assembling all members of the Public Health Emergency Control Group.

Members not assembled may be informed and updated of the situation via email.

Stand-by-Notification

In a *stand-by-notification* all, or selected members of the Public Health Emergency Control Group are contacted, and *may* be instructed to stand by and be ready to respond to the Public Health Emergency Operations Centre at a given time.

This notification level may be used if there is an emergency situation developing or the threat of an emergency occurring which does not merit assembling members of the Public Health Emergency Control Group.

2.5 Continuity of Operations Planning

Each Division shall prepare functional emergency procedures or guidelines to ensure the continuation of critical services during an emergency. These procedures or guidelines will become the Continuity of Operations Plan (COOP). The development of COOP defines a hierarchy of core Public Health Services business functions. This hierarchy will dictate which Public Health Services functions will be suspended in a progressive manner as the emergency situation consumes increasing numbers of Public Health Services staff.

The hierarchy of services provided and used will be defined as critical and non-critical services.

See Annex 3 for a list of Critical and Non-Critical Services for each division of PHS.

Section 3.0 Public Health Emergency Operations Centre

3.1 Operational Concept

The Public Health Emergency Operation Centre (PHEOC) is where the Public Health Emergency Control Group and other support personnel assemble to share information, evaluate options and make decisions regarding the administration of the emergency, and provide support to the emergency site as requested. The Public Health Emergency Operation Centre should serve as the co-ordination and a control point for all Public Health Services Divisions involved in the emergency response.

There is a primary and alternate location for the Public Health Emergency Operation Centre.

Primary location is:

Fourth Floor Boardroom, 1 Hughson Street, North, Hamilton (Main Office)

Alternate location is

Ottawa Room – 1447 Upper Ottawa, Hamilton. (Mountain Office)

3.2 PHEOC amenities

The PHEOC will have the following amenities:

- sufficient tables and chairs for all present
- an accurate clock
- network drops for internal access
- maps of suitable scale for depicting and updating emergency operations
- a visual board or team board (PHEOC.net) for logging emergency operations status, key decisions and other information
- devices for recording the Public Health Emergency Control Group meeting
- a television with cable, and a radio for media updates
- a computer or laptop computer connected to the network, projector and printer
- flashlights, batteries,
- all necessary stationary requirements and office supplies for those to take notes and record information
- Emergency Response Plans, contact numbers, stairwell codes
- required documentation forms
- Emergency Response Guide book and other reference materials as requested by the Medical Office of Health

3.3 Meeting Cycle

It is essential that the Public Health Emergency Control Group members meet on a regular basis to share information, identify actions, set priorities, make decisions and resolve problems. The meetings will be scheduled by the Incident Commander on a regular rotation, allowing time between meetings for the members of the Public Health Control Group to deal with assigned responsibilities.

3.4 Meeting Process

When the Public Health Emergency Control Group meet there will be no interruptions (unless urgent) until the meeting is concluded. All members of the PHECG will assemble and each IMS Sector leader will briefly update the group on the actions taken since the last meeting.

Components of the Meeting include:

1. Update on the emergency event
2. Update on the response efforts and the impact on the community and PHS
3. Identify actions to be taken.
4. Identify most responsible person for all actions to be taken
5. Develop an action plan (who does what, where, when & how)
6. Develop a process for monitoring response efforts
7. Establish a response cycle (set times for the next meeting)

Each IMS Sector member must be prepared to answer:

1. Response efforts as the IMS Sector lead
2. Impact of the emergency event on their Division or program
3. Their worst case scenario
4. Resources required

* There will no discussion until each member has had their turn

As the PHS response is formally launched, the PHECG will meet frequently to evaluate the status or the response and issue further direction. Requests for assistance from other divisions or city departments are discussed at the PHECG meetings and will be forwarded to the City ECG as required.

Minutes of the meeting will be recorded by the AA to the PHECG. Each individual member of the PHECG will record all actions taken on the Emergency Log Sheet. (Annex 7)

3.5 Mutual Assistance

The ability to maintain operations of Public Health Services under the provisions of this plan will vary with the intensity, scale, and duration of the emergency situation.

When demand for services exceeds the capacity to respond, mutual aid agreements with adjacent public health units will be activated. The Public Health Emergency Control Group will make the decision to pursue one or more of the following options:

- Seeking mutual aid from one or more other local public health units by directly contacting their respective Medical Officers of Health as directed by the Medical Officer Health or the City of Hamilton Emergency Control Group.
- Activating mutual assistance agreements via the City of Hamilton Emergency Control Group.
- Asking another level of government or other city departments or employees for assistance via the City of Hamilton Emergency Control Group.

3.6 Relief for Public Health Emergency Control Group Members

Public Health Emergency Control Group members must plan for relief from their alternates in the event of an extended emergency. Most persons require relief after 12 hours of work. Two shifts per 24-hour period would therefore be considered an absolute minimum. In very protracted emergencies, 8-hour shifts involving three people in a 24-hour period may become necessary. An overlapping period of time (e.g. 15 minutes) should be planned to permit the new person to be thoroughly briefed and to have a chance to start working while still having access to a representative at the PHECG.

Refer to Annex 1 for a list of alternate members for the PHECG. Members of the PHECG will notify their alternates as required.

3.7 Emergency Site

The location where an emergency occurs or exists is the 'emergency site'. For purposes of this plan, the 'Emergency Site' will be the staging area in the outer perimeter, which surrounds the inner perimeter as designated by the Emergency Site Team. The outer perimeter is restricted to emergency personnel. Personnel from PHS will enter the outer perimeter only.

Section 4.0 Public Health Emergency Control Group

4.1 Members

The Public Health Emergency Control Group will be composed of the following members and support staff:

- Medical Officer of Health
- Associate Medical Officers of Health
- Director of Health Protection Division
- Administrative Assistant to the Health Protection Division
- Director of Healthy Living Division
- Director of Family Health Division
- Director of Planning & Continuous Improvement Division
- Manager from Health Protection Division
- Manager of Applied Research & Evaluation
- Public Health Emergency Response Planner

Representatives may be added on an adhoc basis depending on the emergency.

The Public Health Emergency Control Group may function with only a limited number of members depending on the emergency and the notification level initiated.

4.2 Public Health Emergency Control Group Responsibilities

The **Public Health Emergency Control Group** anticipates how the emergency may evolve and what resources and strategies will be required to support the frontline staff and ultimately fulfill the stated aims of the Emergency Plan. The Public Health Emergency Control Group is also responsible for coordinating the provision of the essential services necessary to maintain critical public health services.

The collective responsibilities of the **Public Health Emergency Control Group** include but are not limited to the following:

- Supporting the Medical Officer of Health at the City Emergency Operations Centre
- Advising the Medical Officer of Health on all actions to be taken to support emergency workers at the emergency site, evacuation centres or any other location where staff, people, or volunteers are working to respond to an emergency.
- Co-ordinating all Public Health Services emergency support operations during the emergency and during the recovery phase.
- Calling out and/or mobilizing any public health staff to respond to the emergency as required.

- Co-ordinating and directing all Public Health Services staff responding to the emergency and ensuring that all actions taken to mitigate the emergency are not contrary to law.
- Ensuring that adequate emergency service provisions are maintained outside and separate from those responding at the emergency site.
- Ensuring that all persons who are required to be informed are informed of any emergency declaration by the Head of Council.
- Ensuring the discontinuation of any service - where continuation of such service constitutes a hazard to emergency operations or public safety.
- Collecting and, at the direction of the Medical Officer of Health, disseminating information on the emergency and communicating factual information to officials involved in emergency operations, the news media, and the general public through:
 - The City of Hamilton Customer Call Centre
 - The City Information/Media Centre (if activated), or
 - A Public Health Information Centre/phone line, if so directed by the Medical Officer of Health
- Requesting assistance through the Emergency Control Group for assistance from other Health Units or governmental departments/agencies, volunteer organizations, the private sector or the general public.
- Maintaining a log of all communications, decisions and actions taken by the Public Health Emergency Control Group.
- Ensuring that all persons who are required to be informed are informed of the termination of any emergency declaration.
- Determining—before emergency response efforts have been completed—if a Public Health Emergency Recovery Committee needs to be established, and, if so, determining the chair and composition of that committee, along with its reporting structure.
- Participating in a post-emergency debriefing and providing the necessary information to assist the City Emergency Management Co-ordinator with the preparation of a report on the emergency, upon request.

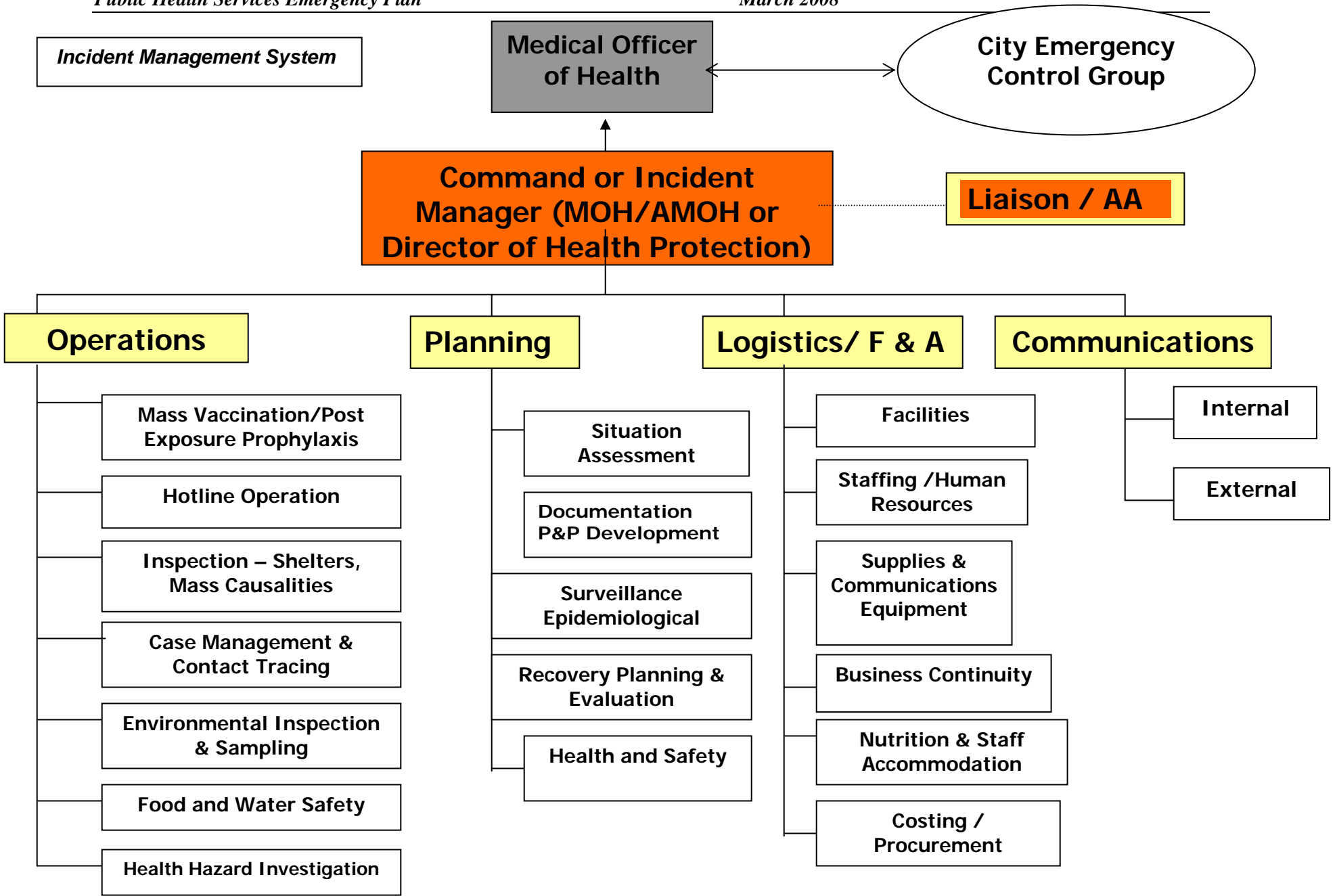
4.3 Incident Management System

The Incident Management System (IMS) consists of staff, procedures, equipment, facilities and communications operating within a structure designed to manage the emergency. Authority is based on top-down approach, originating at the Incident Commander.

IMS provides the basic command structure and functions required to manage an emergency situation effectively. It has five components:

- Command (supported by Liaison and Administrative Assistant)
- Planning
- Operations
- Logistics
- Communications

The specific organizational structure established for an emergency will depend on the nature and resources required for managing the incident. Structures may vary from one emergency to another. A general IMS structure is displayed below.



4.4 Functional Sections of the Incident Management System

4.4.1 Command or Incident Manager

The PHECG will select an Incident Manager to oversee the emergency response within the PHECG. This also includes ensuring the safety of the responders, coordination with external organizations and communication to the public. The Incident Manager may be the MOH, the AMOH, the Director of the Health Protection Division or a member of the PHECG with responsibilities related to the emergency.

The key role of the incident manager is to oversee the implementation of the IMS Sector leads. The Incident Manager will be responsible for managing the functional sections, providing recommendations and implementing decisions from the PHECG. The Incident Manager will provide regular updates (as required) on the emergency to the PHECG. The Incident Manager will oversee the coordination and contact of key staff, local, provincial and other officials. The Incident Manager will oversee the provision of additional staff and major equipment requested and will approve requests for other material resources as needed. The Incident Manager will maintain constant communication with City Emergency Control Group members and the PHS Communication Officer.

4.4.2 Liaison

The Liaison lead will be the responsibility of the Emergency Response Planner. The Liaison will establish a formal link with other organizations and community groups involved in the response in order to effectively coordinate the emergency operations within the PHEOC.

4.4.3 Administrative Assistant to the PHECG

The Administrative Assistant to the PHECG will be the responsibility of the AA to the Health Protection Division. The AA to the PHECG will act as the link between the PHECG and the City Emergency Operations Centre. Other responsibilities will be to:

- Contact members (during working hours) of the Public Health Emergency Control Group and request they proceed to the Public Health Emergency Operations Centre or to stand-by as requested by the MOH.
- Forward the completed Public Health Emergency Notification Form to the chair of the PHECG.
- Establish an electronic communication link with members in the City Emergency Control Group at the City Emergency Operations Centre.
- Relay information received from the emergency site or shelters to the PHECG
- Monitor and log all emails and phone calls received within the PHEOC.
- Take minutes of the PHECG meetings.
- Log all requests and actions taken by the Public Health Emergency Control Group on the PHEOC.net.
- Plan for her/his relief.
- Participate in the post-emergency debriefing as requested.

4.4.4 Planning

The Planning sector is led by the Manager of Applied Research and Evaluation and is responsible for the following activities:

- Assume responsibility for gathering all data and intelligence related to the incident, looking ahead and anticipating the needs of the emergency based on the incident status
- Assist in developing objectives and strategies for the Incident Action Plan.
- Assess the present situation and project possible contingencies.
- Receive updates from the Surveillance Unit on epidemiology data (if collected)
- Identify epidemiological investigations required.
- Develop policies and procedures for the event if required.
- Collaborate with the Health, Safety and Wellness Specialist to ensure the health and safety of Public Health Service employees.
- Develop databases and/or applications required to respond to the emergency.
- Forecast possible scenarios (24 hours, 48 hours, 2 weeks, 2 months).
- Recovery Planning.

4.4.5 Operations

The Operations section is led by the Director of the Health Protection Division and will be responsible for the following activities:

- Coordinate all emergency response activities
- Respond to immediate issues.
- Coordinate Environmental Inspections and sampling.
- Coordinate all actions related to food and water safety and protection of people from potentially dangerous animals and environmental hazards.
- Coordinate mass vaccination / post exposure prophylaxis with designated Vaccine Preventable Manager.
- Coordinate Hotline Operations.
- Coordinate inspection of reception/shelter centres.
- Coordinate with Infectious Disease Manager outbreak response including case management and contact tracing to an infectious disease outbreak.
- Provide advice, in consultation with the MOH, on issues related to decontamination.
- Provide information on the current situation to the PHECG and the MOH.
- Provide daily situation reports to key stakeholders and internal staff as necessary.
- Request additional resources as needed.

4.4.6 Logistics & Finances

The Logistics section is led by Director of Healthy Living and is responsible for the following activities:

- All necessary supports to carry out the response to the emergency.

- Provide facilities, human resources, supplies and communication equipment and nutritional support to operate the emergency
- Provide for the needs of the PHEOC such as supplies, equipment, coordinating technical support and provide security
- Coordinate volunteers
- Assume responsibility for Public Health Services business continuity.
- Ensure critical services are maintained.
- Contact Finance and Administration to track all expenses, expenditures, claims, purchases and contracts initiated during the emergency.

4.4.7 Communications

The Communications sector is led by the Director of Planning and Continuous Improvement and is responsible for the following activities:

- Assume responsibility for all internal and external communications for Public Health Services.
- Coordinate media releases relating to public health issues as directed by the MOH/AMOH.(this may be in collaboration with the Public Information Officer)
- Prepare all written and electronic communiqués.
- Prepare staff for media interviews and act as a moderator
- Coordinate communications with identified community partners (i.e. daycares, hospitals) in collaboration with all divisions of Public Health Services.
- Coordinate media releases, updates to the intranet and city website with the Public Information officer
- Prepare Question & Answer sheets for the PH information line and the Customer Contact Centre.
- Link with all sectors to ensure all communication needs are identified.

4.5 Functional Roles of MOH, AMOH, Directors, Manager and Staff

4.5.1 The Medical Officer of Health

The Medical Officer of Health will be responsible for:

- Activating the Emergency Notification Procedure. If the Medical Officer of Health initiates the emergency response within the City of Hamilton, he/she will activate the City of Hamilton Emergency Notification Procedure through the Communication Division at the City of Hamilton Police Department, as required.
- Responding to the City of Hamilton Emergency Operations Centre as requested. The Medical Officer of Health will respond with employee identification. The MOH may also be requested to 'stand by' for further information.
- Fulfilling City of Hamilton Emergency Operations Centre responsibilities: The Medical Officer of Health will work with the City of Hamilton Emergency Control Group to plan for and resolve any long or short term issues. The Medical Officer of Health is responsible for

providing the City of Hamilton Emergency Control Group with information and advice on all areas of public health.

- Notifying the Administrative Assistant or scribe to the MOH in the City of Hamilton EOC and request he/she to report with a laptop computer to the EOC or to standby.
- Activating the Public Health Services Emergency Plan either as a consequence of responding to the City of Hamilton Emergency Operations Centre, or as a consequence that affects Public Health Services.
- Maintaining regular communications with the Associate Medical Officer of Health or the Director of Health Protection and the PHEOC
- Ensuring a log outlining communications, decisions and actions taken.
- Planning for her/his relief.
- Consulting with the Director of the Health Protection Division to provide a Public Health Inspector as part of the Site Management Team, as required.
- Advising and providing consultation to the City Emergency Control Group on the issue of evacuation relative to the jurisdiction of the Medical Officer of Health, as required.
- Consulting, as appropriate, with toxicologists, Ministry of Health and Long-Term Care, Ministry of Labour, and Ministry of Environment, to provide the City Emergency Control Group with additional information that may impact the emergency site and the perimeters of the established evacuation zone.
- Advising and providing consultation to the City Emergency Control Group on the issue of re-population relative to the jurisdiction of the Medical Officer of Health, as required.
- Co-ordinating responses to disease-related emergencies, epidemics, or mass immunization programs.
- Liaising with Emergency Medical Services, area hospitals, & CCAC regarding issues of mutual concern.
- Providing consultation to staff, the public and emergency responders regarding potential contaminated drinking water, food safety, and other public health matters.
- Arranging for the provision of emergency portable water supplies and sanitation facilities in co-ordination with the Director of Water and Wastewater Management, who will arrange for the delivery of such provisions.
- Providing advice about public health matters to the public through the City of Hamilton Public Information Officer.
- Providing appropriate Public Health officials and personnel to inspect and support evacuation/reception centres.
- Liaising with voluntary and private health agencies to augment and support public health resources.
- Fulfil role of Incident Commander at the PHEOC
- Participate in the post-emergency debriefing as requested

4.5.2 The Assistant to the MOH (attends the City EOC)

The Assistant to the MOH will be responsible for:

- Upon notification from the MOH, the AA will obtain a laptop computer and report to the City EOC or standby as requested.
- The AA will provide support to the MOH at the City EOC.

- The AA will establish electronic communication via email with members of the PHECG in the PHEOC.
- The AA will maintain a detailed log of all actions requested by the MOH.
- The AA will participate in the post-emergency debriefing as requested.

4.5.3 Associate Medical Officer of Health

The Associate Medical Officer of Health will be responsible for:

- In the absence of the Medical Officer of Health, he/she will perform all functions of the Medical Officer of Health, hence proceed to the City Emergency Operations Centre, or stand by for further information.
- Notifying the Administrative Assistant to the MOH in City EOC to respond to the City EOC with a laptop computer or to stand by for further information.
- Notifying the AA to Health Protection Division to initiate the emergency notification procedure of the PHECG if required. After hours, notify the Emergency Response Planner to initiate the emergency notification procedure of the PHECG if required.
- Ensuring that any activity and incoming and outgoing communications are recorded.
- Ensuring that communication links are established with the City Emergency Operations Centre and with the designated official at the Emergency Site.
- Keeping apprised of updates from the designated official at the Emergency Site and relaying this information to the PHECG.
- Providing regular updates on the emergency so that these may be passed on to staff not involved in the emergency response.
- Liaising with the Ministry of Health and Long-Term Care, Ministry of Labour, and the Ministry of Environment, if required.
- Liaising with other agencies as required.
- Co-ordinating additional Public Health staff for adjacent communities if required.
- Co-ordinating activities of Public Health staff in relation to Public Health's role in the emergency.
- Supporting the emergency response with the provision of Public Health medical expertise.
- Ensuring that all media calls will be referred to the Emergency Public Information Co-ordinator at the City Emergency Operations Centre unless otherwise directed by the Medical Officer of Health.
- Designating—if directed by the Medical Officer of Health—appropriate staff to respond to media inquiries.
- Limiting the time spent at the Public Health Emergency Operations Centre in order to be rested to replace the Medical Officer of Health at the City Emergency Operations Centre.
- Planning for her/his relief.
- If required, fulfil role of the Incident Commander at the PHEOC
- Participate in the post-emergency debriefing as requested.

4.5.4 The Director Health Protection Division

The Director of the Health Protection Division will be responsible for:

- Proceeding directly, as requested, to the Public Health Emergency Operations Centre, to receive further instructions or to stand by for further information.
- Notifying the Administrative Assistant to the Health Protection Division to initiate the notification procedure of the PHECG if required. After hours, notify the Emergency Planner who will initiate the emergency notification procedure of the PHECG.
- Consulting with the Manager from Environmental Health Program to respond to the site or to designate a Public Health Inspector to proceed directly to the Emergency Site or to stand by for further information.
- Monitoring and assessing the emergency and the emergency site conditions via the Manager from the Environmental Health Program or Public Health Inspector onsite and communicate information to the Medical Officer of Health and AMOH.
- Providing public health expertise to the Manager from Environmental Health Program or the Public Health Inspectors at the emergency site and co-ordinate others as necessary.
- Notifying the 'After Hours Manager on Call for the Health Protection Division' (Environmental Health Manager) and directing her/him to stand by for further information if required.
- Notifying Health Protection Managers and staff that an emergency has occurred and directing them to required duties as needed.
- Providing direction and support to the Health Protection Division.
- Providing sufficient professional and clerical staff to assist in the emergency management and implementation of the response.
- Ensuring that all activities and incoming and outgoing communication are recorded.
- Assuming responsibility of business continuity for the Health Protection Division or assign a manager for business continuity for the division.
- Advising the Public Health Emergency Control Group of the status of business continuity for the Health Protection Division.
- Advising the Public Health Emergency Control Group of staffing (i.e. resources) of the Health Protection Division during the emergency situation.
- Remaining at the Public Health Emergency Operations Centre for no more than 12 hours (after which a replacement will assume the duties).
- If required, fulfill role of Incident Commander or Operations Sector Lead at the PHEOC
- Planning for his/her relief.
- Limiting the time spent at the Public Health Emergency Operations Centre in order to be rested to replace the Medical Officer of Health at the City Emergency Operations Centre.
- Participating in the post-emergency debriefing as requested.

4.5.5 Manager - Health Protection Division

The Manager of the Health Protection Division will be responsible for:

- Proceeding directly to the PHEOC or to stand by for further information.
- Arranging for a PHI to attend to the Emergency Site or shelter as required.

- Monitoring and assessing the emergency and site conditions (via the PHI at site) and report all information to the Director of the Health Protection Division or to the Public Health Emergency Control Group.
- Supporting the MOH as required.
- Providing direction and support to all PHI's of the Environmental Health Program.
- Logging all requests and action taken.
- Requesting additional Public Health Inspectors as required.
- Following the business continuity plan as requested by the Health Protection Director.
- Fulfill role of Operations Sector Lead at the PHEOC
- Planning for her/his relief.
- Participating in the post-emergency debriefing as requested.

4.5.6 Director of Healthy Living Division

The Director of the Healthy Living Division will be responsible for:

- Proceeding directly to the Public Health Emergency Operations or standing by for further information.
- Relaying all information to the Medical Officer of Health as it relates to the Healthy Living Division and providing updates on any involvement with the Healthy Living Division in the emergency response.
- Providing direction and support to Healthy Living Division staff as required.
- Ensuring notification procedures are in place to notify Healthy Living staff to respond to the shelter as required.
- Assuming responsibility of business continuity for the Healthy Living Division.
- Advising the Public Health Emergency Control Group of the status of business continuity for the Healthy Living Division.
- Advising the Public Health Emergency Control Group of staffing (i.e. resources) of the Healthy Living Division during the emergency situation.
- Ensuring activities, including incoming and outgoing communications, are recorded.
- Fulfill role of Logistics Sector Lead at the PHEOC
- Planning for her/his relief.
- Participating in the post-emergency debriefing as requested.

4.5.7 Director of Family Health Division

The Director of the Family Health Division will be responsible for:

- Proceeding directly to the Public Health Emergency Operations or standing by for further information.
- Relaying all information to the Medical Officer of Health as it relates to the Family Health Division needs affected by the emergency or evacuation.
- Providing direction and support to Family Health Divisional staff as required.
- Ensuring notification procedures are in place to notify Family Health staff of the emergency event.
- Assuming responsibility of business continuity for the Family Health Division.

- Advising the Public Health Emergency Control Group of the status of business continuity for the Family Health Division during an emergency situation.
- Advising the Public Health Emergency Control Group of staffing (i.e. resources) of the Family Health Division during the emergency situation.
- Ensuring that activity and incoming and outgoing communications are recorded.
- Providing sufficient professional and clerical staff to assist in the emergency management and implementation of the response.
- Fulfill role of Operations Sector lead at the PHEOC if required
- Planning for her/his relief.
- Participating in the post-emergency debriefing as requested.

4.5.8 Director of Planning and Continuous Improvement Division

The Director of the Planning and Continuous Improvement Division will be responsible for:

- Proceeding directly to the Public Health Emergency Operations or standing by for further information.
- Relaying all information to the Medical Officer of Health as it relates to Planning and Continuous Improvement Division needs affected by the emergency or evacuation.
- Providing direction and support to Planning and Continuous Improvement staff as required.
- Ensuring notification procedures are in place to notify Planning and Continuous Improvement staff of the emergency event.
- Assuming responsibility of business continuity for the Planning and Continuous Improvement Division.
- Advising the Public Health Emergency Control Group of the status of business continuity for the Planning and Continuous Improvement Division during an emergency situation.
- Advising the Public Health Emergency Control Group of staffing (i.e. resources) of the Planning and Continuous Improvement Division during the emergency situation.
- Ensuring that activity and incoming and outgoing communications are recorded.
- Providing sufficient professional and clerical staff to assist in the emergency management and implementation of the response.
- Fulfil role of Communications Sector Lead
- Planning for her/his relief.
- Participating in the post-emergency debriefing as requested.

4.5.9 Manager of Applied Research & Evaluation

The Manager of the Applied Research & Evaluation will be responsible for:

- Proceeding directly to the Public Health Emergency Operations or standing by for further information.
- Relaying all information to the Medical Officer of Health related to AR&E program needs affected by the emergency or evacuation.
- Assuming responsibility of business continuity for the AR&E program in coordination with the Director.

- Providing direction and support to program staff as required.
- Ensuring that notification procedures are in place to notify program staff as required.
- Fulfil role of Planning Sector lead
- Planning for her/his relief.
- Participating in the post-emergency debriefing as requested.

4.5.10 Managers

The primary role of Public Health Services in an emergency is to provide staffing and expertise to manage any public health issues that have arisen as a result of the emergency as well as to maintain essential services. Depending on the type of emergency, the day to day activities of management will be under the direction of the MOH. Managers will be responsible for operational issues which arise specific to their program responsibilities. These responsibilities include but are not limited to the following activities:

- Ensuring immediate notification of all staff members regarding the emergency if deemed necessary
- Coordinating assigned tasks
- Ensuring that available staff members are on stand by
- Ensuring that a record is maintained of each order given, actions taken and completed
- Ensuring that staff members are relieved and rotated as the need arises
- Provide immediate and ongoing support for those staff members involved in the emergency response
- Participate in the debriefing to evaluate the effectiveness and efficiency of staff members response to the emergency.

4.5.11 Health, Safety and Wellness Specialist

The Health, Safety and Wellness Specialist will be involved in the emergency response by:

- Providing advice to the PHECG as related to the health, safety and wellness of PHS employees.
- Developing health and safety policies and procedures for PHS employees based on the emergency event
- Relaying directives and public health information regarding employee health and safety from the PHECG to the Health, Safety and Wellness Committee.
- Relaying concerns and queries from the Health, Safety and Wellness Committee to the PHECG.

4.5.12 Public Health Emergency Response Planner

The Public Health Emergency Response Planner will be responsible for:

- Ensuring that the Public Health Emergency Operations Centre is set-up and operational immediately upon notification of the Public Health Emergency Control Group meeting.

- Establishing the meeting cycle with the Incident Manager of the Public Health Emergency Control Group, and ensuring the Public Health Emergency Control Group adheres to it.
- Ensuring that a record of issues and problems identified and resolved, and yet to be resolved, is maintained during the emergency.
- Assisting the Administrative Assistant of the Public Health Emergency Control Group.
- Collecting, collating, summarizing, displaying and circulating information concerning the emergency operation.
- Fulfil Liaison role at the PHEOC
- Maintaining operational maps.
- Maintaining the master operational log.
- Maintaining telecommunications.
- Arranging and conducting a post emergency debriefing within a reasonable period after the termination of the emergency with members of the Public Health Emergency Control Group and other staff members involved in the response.
- Preparing and circulating the post-emergency debriefing report.

4.5.13 Public Health Inspector

The Public Health Inspector may be asked to respond to an emergency event by providing support to the response. The primary role of the PHI is to advise on and enforce health standards under authority of the HPPA related to community health protection. Support required may be in the form of answering telephones, inspecting sites or shelters, delivering public health information, inspecting food premises or interviewing potentially exposed person(s). The Public Health Inspector may be asked to provide further supportive interventions not recorded in this plan.

The Public Health Inspector reporting to the Emergency site will:

- Proceed directly to the outer perimeter of the Emergency Site and report to the Emergency Site Co-ordinator.
- Record all pertinent information regarding the emergency.
- Consult with other members of the Emergency Site Team (Emergency Medical Services or Public Works) regarding events surrounding the emergency and other pertinent facts i.e. number of people being evacuated, environmental issues – spills, flooding, plumes.
- Inspect (if safe) the emergency/disaster area for health hazards. Also inspect for risk to public safety and need to evacuate any areas.
- Report to an Environmental Health Manager or the Director of the Health Protection Division issues related to the risk to public health (degree of flooding, degree & risk of air, water or food contamination, location & perimeter of affected areas, areas at risk, concerns of other agencies, etc).
- Provide advice in consultation with the Environmental Health Manager and/or the MOH/AMOH /Director of the Health Protection Division on issues related to potential/degree of flooding and potential/degree of air, water and food contamination.
- Provide information on health and safety matters for first responders in consultation with the Environmental Health Manager and the AMOH /MOH/Director of Health Protection Division.

- Ensure that activities including incoming and outgoing communications are recorded.
- Planning for her/his relief.

The Public Health Inspector reporting to the Evacuation Shelter will be responsible for:

- Identifying themselves to the Shelter Coordinator.
- Inspecting the Shelter for:
 - food storage and handling facilities
 - sleeping space
 - toilet facilities
 - washing and bathing facilities
 - water supply (source and quality)
 - ventilation, temperature
 - garbage facilities
- Establishing communication with the PHEOC and the Environmental Health Manager
-

4.5.14 Public Health Nurse

There is a binder that provides general guidelines for the Public Health Nurse when responding to an emergency. The binder has been distributed to the Public Health Nurses who are considered the first call out and will be readily available in the following locations:

- Mountain Office, 1447 Upper Ottawa - located at front reception.
- Main Office, 1 Hughson St. N – located on the 6th floor, first aid cupboard.
- Central Office – 4 Hughson St. N. – 2nd fl.
- Dundas Office, 2 King St. W. – located at front reception.
- Stoney Creek Office, 2757 King St. E.– locate at front reception.

All information in this binder is available on the following drive: N/ Departmental Information/ Emergency Planning/ PHS Training/PHN Training.

The Binder Contains:

- PHN Roles and Responsibilities at a Shelter and at a Site
- Emergency Operations Log Sheets to record all events and communications related to the emergency
- Client Worksheet to record interactions with clients
- Important Contact Numbers
- Physician Numbers
- Hospital and Walk-in-Clinic Numbers
- Sexual Transmitted Infections and Sexual Health Services

- Pharmacy Numbers
- Locations of Culture and Recreation Centres

The Public Health Nurse will act under the authority of the Medical Officer of Health.

The Public Health Nurse will provide support and assistance as required.

Roles of the PHN include:

- responding to the emergency site
- responding to the emergency shelter
- coordinate the provision of medication or supplies needed to prevent health related problems or complications
- providing immunization
- providing education
- providing support to the emergency response
- answering information telephone line
- provide assistance during an outbreak
- gathering surveillance or other epidemiological data
- responding to a designated office to provide support to the emergency response
- assisting at an assessment and treatment centre

The Public Health Nurse will be responsible for documenting all actions on the emergency log sheets or the client log sheet.

PHN Response at an Emergency Reception Centre / Evacuation Centre / Shelter

The Public Health Nurse may be requested to respond to an emergency reception centre or evacuation centre/shelter. Only one Public Health Nurse will be dispatched to the emergency reception centre or evacuation centre/shelter unless there is a request for further assistance.

When responding to the emergency reception centre or evacuation centre/shelter, the Public Health Nurse should carry the following:

- Binder titled 'Emergency Role of Public Health Nurse '
- Cell Phone with car battery charger (if available)
- Resource Numbers
- City of Hamilton Map

- Corporate identification
- Business Cards
- Extra clothes or sweaters
- Personal items that may be required (medication, contact lens solutions etc.)

Upon arrival to the emergency reception centre or evacuation centre/shelter, the Public Health Nurse will report to the Shelter Manager. The Shelter Manager is a Community Services employee from the Community Services Department.

The Public Health Nurse will:

- Take direction from the Shelter Manager concerning the operational issues of the evacuation centre/shelter. The Shelter Manager is to oversee the entire operation and allocate resources to the areas requiring assistance. Shelter Managers are to ensure all community partners, response agencies and city employees are working together.
- Provide support and counselling to the evacuees as needed.
- Provide health information or education to the evacuees as needed.
- Provide assistance in obtaining medication or other supplies as requested by the evacuees or those affected by the emergency.
- Facilitate access to community resources (i.e. pharmacy) or translation services as needed.
- Notify the Shelter Manager with any questions or concerns
- Relay all necessary information to the Manager or Director responsible for dispatching the PHN's.
- Make accurate and detailed records of all actions on the Emergency Log Sheet or the Client Log Sheet, i.e. who you spoke with, what was done, when and where.
- Refer media interviews to the Shelter Manager or the appointed spokesperson for the shelter.

Communications

The Public Health Nurse is responsible for updating the Director or Manager who was responsible for requesting the PHN to attend the evacuation centre/shelter. **All requests for resources must go directly to the Director or Manager...** The Manager or Director may be located in the Public Health Emergency Operations Centre. **The contact number is: 905-546-2424 ext. 3708, or if the city's phone network is not functioning, use 905-540-6401. There is no voice mail on these lines.**

Please note: the primary location of the PHEOC may not be activated and the secondary site may be activated. The contact phone number for the secondary site is ext. 5019.

Site Response

(The site refers to the emergency site – this could be the site of a chemical fire, the site of an explosion or fire or the site where the incident occurred. The site is dependent on the emergency.)

The role of the PHN at the site is to provide health information, education and counselling to those affected by the emergency event as required. The PHN may also assist in retrieving medication, linking those affected by the emergency to health care agencies or community agencies as needed. The PHN may also be asked to assist the Public Health Inspector.

When the PHN is asked to attend the site, he or she must identify themselves to the Emergency Site Co-ordinator from the lead agency. The lead agency refers to the agency that is taking the

lead on the Emergency. It is usually the Fire Department, the Police Department, Hamilton Hydro or the Public Works Department. The Lead agency may not be obvious. You may need to ask for assistance identifying the Emergency Site Coordinator or the department leading the response initiatives.

Please note: the site may be considered a crime scene or may be potentially contaminated. Do not enter areas that have been identified with yellow tape. Consult with the Emergency Site Coordinator or the Police Officer in charge of the area identified with yellow tape of safe areas to locate.

The Public Health Nurse will:

- Act under the authority of the Medical Officer of Health.
- Work in collaboration with the Emergency Response Team and/or with other community response agencies i.e. Community Services, Red Cross, Salvation Army, Good Shepherd Centres etc.
- Provide access to health care facilities or assistance in retrieving necessary medications.
- Notify the Director or Manager responsible for dispatching the PHN of any concerns or questions.
- Make accurate and detailed records of all actions on the Client Log Sheet or the Emergency Log Sheet, i.e. who you spoke with, what was done, when and where.

The Public Health Nurse may be asked to assist with other duties that may not be located at the emergency site such as providing support to an information line, immunization clinics, contact tracing, surveillance, obtaining translation services in the community and providing assistance at an assessment / treatment centre.

4.5.15 Program Staff

Program staff refer to all other staff within Public Health Services i.e. health promoters, dental assistants, dental hygienists, epidemiologist, nutritionists, project managers, youth advisors, health educators, data analyst, Child and Adolescent staff etc.

The responsibilities of program staff will be determined by the individual's scope of practise and their competencies as well as demands of the emergency. Duties may include education and communication (information searches, responding to public inquiries, and instructions on specific issues such as survival techniques). Other duties may include project/task management and victim support or support for Public Health Nurses or Public Health Inspectors responding to the emergency. All staff will be fully briefed on their role prior to redeployment.

4.5.16 Support Staff

Support staff will provide administrative support to the emergency response and program activities as directed by the managers and directors.

Section 5.0 Training Procedures

Training Procedure

Public Health Services will develop and deliver emergency response training programs for Public Health Services staff. The training will provide a means to evaluate the Public Health Services Emergency Plan and will prepare staff to respond to an emergency. Public Health Services staff will also actively participate in appropriate drills and exercises developed and implemented by the City of Hamilton and Emergency Management Ontario.

All staff will require basic training regarding the Public Health Services Emergency Plan, its purpose, aims, and execution. All PHS staff will receive training on the role of PHS and their potential role as a city employee/PHS staff during an emergency event.

Members of the PHECG and their alternates will receive training on the following:

- Role of City EOC
- Incident management system and their role
- Operational procedures in the PHEOC including use of the PHEOC.net
- Media training

Staff responsible for responding to site or shelters will be trained on the following

- Their emergency response role at site or shelter
- Response role during a chemical, biological or nuclear event (i.e. suspicious packages)
- Other specific roles as it relates to the emergency event (i.e. response during a pandemic etc.)

A log of all training sessions and attendees will be maintained by the Emergency Response Planner.

This training will be conducted as follows:

- **Frequency:** Every year or as per the exercise designate
- **Place:** Public Health Emergency Operations Centre or location designated for training i.e. EOC city hall
- **By:** The Public Health Emergency Response Planner

Section 6.0 Plan Maintenance & Testing Procedure

This emergency plan will be tested on a regular basis to ensure that the contents remain current and up to date.

6.1 Annual Exercise

The Public Health Services Emergency Plan should be tested to ensure the overall effectiveness of the plan. Revisions to this plan should incorporate recommendations stemming from an exercise.

This emergency plan should be tested using the following methodologies:

- Paper Exercise
- Case study
- Telecommunication Exercise

Testing of the Emergency Notification Procedure should be performed bi-annually by the Public Health Emergency Response Planner.

6.2 Revision Procedure

The Public Health Emergency Control Group must approve all major revisions. Approval is not required for ordinary maintenance, such as updating a staff person's contact information or changes to the PHECG.

This Emergency Plan will be revised by the Public Health Emergency Response Planner.

This Emergency Plan will be revised annually after testing.

It is the responsibility of PHECG members to ensure that their personal contact information is current. Any change of information must be provided to the Emergency Response Planner.

Each Director and/or Manager is also responsible to ensure that their staff contact information is up-to-date.

6.3 Maintenance Procedure

This Emergency Plan will be maintained by Public Health Emergency Response Planner.

This Emergency Plan will be maintained according to the following schedule:

Reviewed: Annually in November

By: The Public Health Emergency Response Planner

Section 7.0 Resources

Resources

The following additional resources will be required to fulfill the aim of this Emergency Plan:

- Cell phones for all members responding to an emergency.
- Laptop for the MOH responding to City Emergency Control Group
- Supply Box in the City of Hamilton Emergency Operation Centre, the Alternate City of Hamilton Emergency Operations Centre, and the Public Health Emergency Operation Centre and the alternate Public Health Emergency Operations Centre
- Walkie-talkies and hand held radios.

These resources will be obtained from consultation and approval within the Public Health Services Department Emergency Control Group.