

Grizli777

Pandemic Plan 2020

Drafted by: Emergency Management Team & Community Meeting

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James Smith Community Pandemic Plan Manual

Table of Contents

Purpose of Pandemic Plan	3
Plan Activation Overview.....	4
1. COORDINATION	5
A. Frequency of Pandemic Committee Meetings	
B. Location of Meetings	
C. Committee Members and their Roles	
D. Dealing with Community Anxiety	
E. Availability of Band Resources: Personnel & Facilities	
F. Protocol for TRIAGE: Day time/Night time	
G. Transportation	
2. COMMUNICATION.....	9
A. Chain of Command	
B. Communication Plan	
C. Method of Communication	
3. SURVEILLANCE.....	11
A. Prior to Pandemic	
B. Pandemic Declared	
4. VACCINATION.....	13
A. Promotion & Public Awareness of Vaccine	
B. Vaccinations: Pandemic Declared- Order & Public Access	
C. Vaccination Pick-up and Storage Plan	
D. Vaccine Security Plan	
5. ANTIVIRAL DRUGS.....	17
A. Stockpiling of Antiviral Drugs	
B. Priority Groups	
C. Pick-up, Storage & Security	
D. Documentation	
6. HEALTH CARE SERVICES.....	18
A. Potential Cancellation of Activities	
B. Promotion of Public Immunization	
C. Coordination of Patient Transport	
D. Triage of Patients	
E. Plans for Treatment of Ill Persons	
F. Plans for Non-symptomatic Patients	
G. Mental Health Issues	
H. Tracking Clients	
I. Education Regarding Clinical Guidelines	
J. Employed Staff on Reserve	

K. Patient Flow	
L. Health Clinic Supplies	
M. Use of Non-Traditional Sites	
N. Insurance Issues	
7. HUMAN RESOURCES.....	23
A. Human Resources Management Team	
B. Roles and Responsibilities of Management Team	
C. Essential Personnel Infection Control Training	
D. Replacement Personnel	
E. Volunteers	
F. Volunteer Training	
G. Protocol for Volunteer Supervision	
H. Incentives for Volunteers	
I. Management of Staff	
8. CARE OF DECEASED.....	31
A. Handling of Deceased	
B. Burial or Cremation	
C. Security	
D. Documentation of Death	
E. Infection Control	
F. Emotional Support	
G. Morgue Supplies	
H. Final Wishes & Instruction Booklet	
9. INFECTION CONTROL.....	34
A. Infection Control Guidelines	
B. Staff Education	
C. Housekeeping	
D. Cleaning Supplies	
E. Occupational Health & Safety	
F. Public Education	
10. Post Pandemic Evaluation.....	37
• Evaluate Plan	
• Collect Data for reassessment of Emergency Response Plan	
• Collect Outcomes from each department	
• Communicable Disease Data Collection (specific form to be filled out)	
11. Stock Pile List For Homes	

List of Appendices

- Appendix 1: Names, positions and phone numbers of Health Clinic and Band staff and Pandemic Committee members
- Appendix 2: Band members House and Phone Numbers

Appendix 3:	Clinical Guidelines: Care of Infected Patients
Appendix 4:	List of Required Nursing/Medical Supplies
Appendix 5:	List of Essential Personnel and their Phone Numbers
Appendix 6:	List of Replacement Personnel and their Phone Numbers
Appendix 7:	Ration Kit for Households in Need
Appendix 8:	Final Wishes & Instructions booklet
Appendix 9:	Documentation of Death Record
Appendix 10:	Infection Control Guidelines
Appendix 11:	Community Maps

PURPOSE of James Smith First Nation Pandemic Plan

The purpose of this document is to provide guidance and assistance for James Smith First Nation in the case of an Epidemic Disease or Pandemic Influenza.

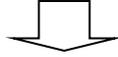
The goal of the Pandemic Community Plan is to reduce illness and death as well as societal disruption.

We will achieve this by providing access to appropriate prevention, care and treatment during and Epidemic or Pandemic. Our First Nation has gathered together to create a community pandemic plan that meets the needs of our community. This plan presents the course of action individuals and families would take to achieve our goal. This would give each individual more responsibility for their health and wellbeing.

- This is a community plan rather than a Health Clinic plan.
- Individuals and families must come together and take responsibility to support and protect their household.
- Health maintenance responsibility will include individuals and families.
- All Band employed staff will have a role & responsibility during the pandemic.
- The Holistic Health Support Team will be available for individuals and families to assist with crisis and lead to change for themselves, their families and the community.

Plan Activation Overview

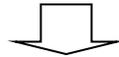
The Medical Health Officer is advised of a Pandemic.



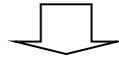
Medical Health Officer notifies Health Director (Mike Marion)



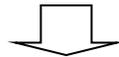
Health Director notifies Chiefs and Council of plan activation



The Chiefs advise the community that a **"State of Emergency"** has been called and that the Pandemic Plan is being implemented



Pandemic Coordinator (Mike Marion) calls a meeting of the Pandemic Committee members, Band Program Managers and Chief and Council



Band resources are mobilized according to the Pandemic Plan



Pandemic Coordinator (Mike Marion) and Assistant Coordinator (Carrie Marion) call a Pandemic Committee meeting to review roles and responsibilities. Coordinator ensures that designated alternates and health care providers and managers are aware of plan activation. (Refer to Phone Number Sheet: Appendix 1)

Frequency of Pandemic Committee Meetings: Pandemic Committee meets daily at 10:00 a.m. at the Upper Band Office Board Room.

Spokesperson between James Smith First Nation and Medical Health Officer is Nurse in Charge: Rey Lindain Alternate: CHN Eleanor Stonestand

Most routine programs will be cancelled and resources used in other ways. Health Director will inform programs of cancellation.

Nursing, Public Works, Social Assistance & Transportation will remain on duty.

All staff employed by the Band and Health Clinic **must be on call.**

1. COORDINATION

Pandemic plan implementation will be coordinated by the Pandemic Committee, based in the Pandemic Headquarters located in the upstairs Band Office Board Room.

A. Frequency of Pandemic Committee Meetings

Pandemic Committee will meet at 10 a.m. daily during the pandemic and will keep staff informed of any updates or changes.

B. Location of Meetings: Clinic Boardroom

C. Pandemic Committee Members and their Roles

Pandemic Area Coordinators	Primary Alternate
Pandemic Committee	Mike Marion 306-864-7309 Leadership- Chief Burns 306-864-8443 Chief Head 306-864-7011 Chief Sanderson 306-864-7278 Coordinators
Pandemic Coordinator	Mike Marion 306-864-7309
Assistant Pandemic Coordinator	Rey Lindain 306-221-2347
Media Relations Spokesperson	Dinah Marion 306-292-1742
Janitorial Coordinators	Ken Sanderson 306-864-7089 Art Sanderson 639-929-7063
Volunteers Coordinators	Chief Head 306-864-7011 Brian Head 306-864-7128 Barry Sanderson 639-314-0158
Transportation Coordinator	Alvin Sanderson 306-940-4183
Medical Supply Coordinator	Eldeen McKay 306-864-2454 Tina Sanderson & Merle Sanderson
Finance Management Team	Jean Sanderson 306-864-2454 Garth Sanderson 306-864-3636 Mildred Constant 639-929-7753

Social Development	Gerald McKay 306-980-6059 Judy Constant 306-864-3636
Family Wellness	Clergy People 306-864-3129 Wellness Team
Statistics Coordinator Alternate	Delores Marion 306-864-2454 Kayla Constant 306-864-3636
Ration Coordinator Alternate	Tracy Marion 306-864-3535
Hunters Coordinator Alternate	Michelle Constant 306-314-7554 Skye Sanderson 306-920-0333
School Coordinator (Cooks) Alternate	Cecilia Twist 306-864-2955 Randy Constant Homecare
Care of Deceased Coordinator (Morgue) Alternate	Rhonda Sanderson Christine Sanderson Stella Sanderson Ronnie Paul
Housing Coordinator Alternate	Denise Whitehead 306-864-7214 Brayden Burns
Security Coordinator Alternate	Herby Burns Herb Sanderson 306-361-3921
Block Leader Coordinator Alternate(s)	Chief Head 306-864-7011 Barry Head 306-864-7128 Barry Sanderson 639-314-0158
Medicine Gathering	Merle Sanderson Art Sanderson 639-929-7063

D. Dealing with Community Anxiety

Wellness Team (consisting of Holistic Health Therapists, Wellness workers, Clergy and Elders) will provide support to the community members by:

- Radio messages through MBC and CJVR that give Hope and Reassurance.
- Communication support for people who are experiencing high anxiety.
 - Community members will phone health clinic asking for support during regular working hours. The Health Clinic will record community member's phone number and call Wellness Team at to have them return call to band member in need.
 - The Wellness Team has added a James Smith Wellness Messenger Page on Facebook. Through this page, we can continue to offer support in the areas of Mental Health and Addictions through digital technology. People with Facebook can message them directly.

E. Availability of Band Resources

Personnel

All non-essential Band and Health Clinic programs will be cancelled.

All programs will be cancelled except **Health Clinic Nursing & Transportation Program and Band Public Works and Social Assistance Programs.**

All other staff employed by the Band Administration and Health Clinic must be on call. (See Appendix 1 for Phone Number List)

Facilities and Use of Facilities

Facility	Use
Clinic Boardroom – Command Centre	Pandemic Headquarters
Band Office Treatment Area	Clinic for Sick Patients
Band Office Back Door Entrance	Triage of Symptomatic Patients
Health Clinic	Vaccination Clinic for non-symptomatic patients
Store	Gas and supplies
ICFS	Community Information & Message Headquarters
School Classrooms	Traditional Medicine Gathering
School Kitchen	Cooking for Hot Lunch Program and Volunteers
School Gym	Rations and Volunteers
Sakwatamo Lodge	Isolation for ICU overflow
Fire Hall	Hunters
South Garage	TBA
School Garage	Storage
New Public Works Garage	Temporary Morgue; construction and storage of Wooden Caskets
Rink	Fire Wood Storage

F. Protocol for TRIAGE

The following system for triaging patients will be activated so that healthy clients and ill clients are not using the same area.

Day Time:

When patients phone clinic requesting transportation to the clinic during the daytime they will be asked to state their condition: describe own symptoms and symptoms of household members.

Patients will be triaged over the phone (i.e. non-symptomatic or symptomatic). That information provided to the masked taxi driver.

Taxi driver will then transport community member to the correct entrance:

- **Band Office Main ENTRANCE for vaccination of non-symptomatic clients**
- **Band Office Back ENTRANCE for Triage of symptomatic clients.**

If community members come to the clinic on their own, they will be directed to the proper area by trained volunteers located at the main Band Office entrance.

- **Band Office Main BACK ENTRANCE for Healthy Patients for vaccinations**
- **Band Office Back ENTRANCE for ill Patients for further assessment**

Symptomatic patients will be triaged at Band Treatment area. Community members will then be either given supplies and sent home or driven by Medical Taxi to hospital in Melfort.

If Melfort Hospital no longer accepting patients, assessed community members will remain at the Band Office Treatment Area for treatment (i.e. Oral hydration, IV if necessary, Tylenol, Anti-viral medications)

Night Time:

A skeleton staff of volunteers will be available at clinic at night to: 1) answer phones, 2) open main Band Office back entrance door and 3) triage clients. After Triage, patients will either be sent home with supplies or sent to Melfort Hospital or if hospital is full treated at Treatment Area in Band Office.

Security Coordinator: Herby Burns ALT: Herb Sanderson

G. Transportation

The Pandemic Committee will determine the necessary use of all the band vehicles (i.e. transportation of: members for triage or to the hospital, of rations for band members in need; supplies, deceased individuals etc.)

To accommodate transportation needs, a 24 Hour on call Medical Taxi service will be in place. Alvin Sanderson will coordinate Medical Taxi Driver assignments.

Contact: Transportation Coordinator- Alvin Sanderson

<i>Type of Vehicle</i>	<i>Color</i>	<i>Use During Pandemic</i>
Clinic Jeep	Navy Blue	Medical Taxi
Clinic 15 passenger Van	White	Medical Taxi
Clinic Truck	Red	Medical Taxi
Clinic Truck	Blue	Delivery of Rations
Daycare 15 Passenger Van	White	
Youth 15 Passenger Van	Grey	
Sports/Rec 15 Passenger Van	White	Transport of Deceased

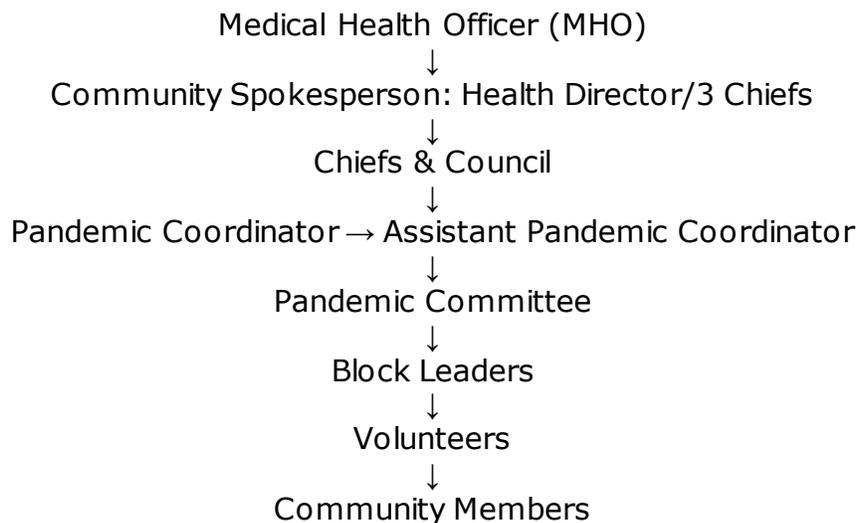
Taxi Contractor		Transport Patients
Taxi Contractor		Transport Patients
Taxi Contractor		Transport Patients
BCCS Bus Contract	Yellow	
BCCS Bus Contract	Yellow	
BCCS Bus Contract	Yellow	
BCCS 15 Passenger Van	White	
BCCS 15 Passenger Van	Grey	
Band Equipment/Supply Van	White	
Band Lands Truck	Grey	
Band Public Works Truck	Black	
ICFS 15 Passenger Van		
ICFS 15 Passenger Van		
ICFS Mini Van		
ICFS Mini Van		

2. COMMUNICATIONS

A. Chain of Command

Spokesperson for JSCN Community: Mike Marion (HD), 3 Chiefs

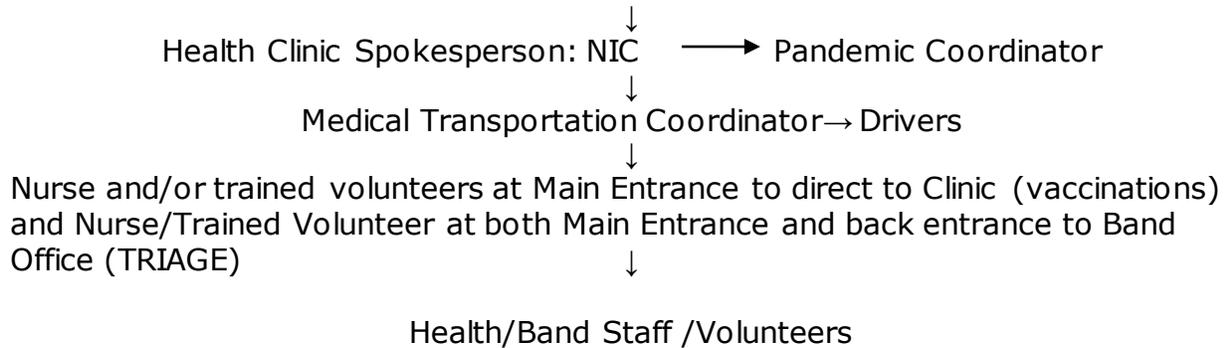
Community Chain Of Command



Spokesperson for the Health Clinic: Rey Lindain (NIC)

Health Service Chain Of Command

Medical Health Officer (MHO)



B. Communication Plan

MHO will communicate with health care workers regarding specific issues and responsibilities within their community. Nurse in Charge (NIC) will relay information updates from MHO to Pandemic Coordinator. Pandemic Coordinator will work closely with Communications Coordinators to distribute accurate information to the staff and community. Communication plan will be implemented after authorization from leadership.

Information released to the Band Members from outside the community will only take the form of a written public information release signed by Chiefs and Council or Health Director.

Any information released to the public/media that has originated from within the community must be approved by the Community Spokesperson (Health Director) before release to local media.

Other forms of communication will be delivered by volunteers directly to the recipients.

C. Methods of Communication

Methods of Community Communication

- Phone (land line and cell phones)(Refer to Appendix 2 for Household phone numbers)
- Health Clinic website and Facebook page
- Radio station announcements.

Methods of Communication between Program Managers

- Telephone (landline or cell phones)
- Health Clinic webpage or Face book page.

In order for communication to be effective there must be a clear understanding of the plan. Each person involved in the plan will have in

their possession a copy of this plan and must study it to fully understand their role and responsibility.

2. SURVEILLANCE

A. Surveillance Prior to Pandemic

Monitor absenteeism

At Schools: Health Director will meet with Day Care and Head Start Coordinators and Band school staff and principal, to notify them of the need to inform the Clinic or Community Health Nurses of any increase in illness or absenteeism.

Day Care and Head Start Coordinators and School Secretary will update class lists monthly and inform the Health Clinic of any increase in illness.

CHR's make classroom presentations, twice a year on hand washing & infection control. School teachers will reinforce need for proper hand washing.

Band Administration/Health Clinic Office Manager: Sandra Burns-Band Office Manager and Delores Marion Health Office Manager will monitor staff illness & attendance.

B. Surveillance after Pandemic Declared

"Hard to Reach Band Members"

Once Pandemic declared, hard to reach members of our community who are not as yet sick¹, located along the Pasture Road and Coxby Road and in the North End and South End of reserve, will be **checked by phone** if available (Refer to Household Phone List and Community Map) **or** by **CHR visit** to:

- 1) determine whether they are non-symptomatic or symptomatic
- 2) inform them of the JSCN Flag Protocol: Households are to display in their front window colored make-shift flags to indicate the health status of their family:

- **Green: message needs to be sent**
- **Red: someone is sick**
- **Yellow: rations are needed**
- **White: someone has died**

¹ If Hard to Reach Community members are found to be sick, they will be transported to Band Office for TRIAGE.

If household members are symptomatic, CHR will TRIAGE and dispense supplies or call medical taxi for transport to clinic.

If household members have not been vaccinated, then Clients who are hard to reach because of a lack of a vehicle or phone will be transported by Medical taxi to Clinic to receive immunization. Non-symptomatic Elders who cannot walk or bed ridden clients will receive vaccinations in their home by health staff.

Village Residents

Once Pandemic declared, Volunteer Coordinator will contact **BLOCK LEADERS** to inform them of duties. By use of a mega phone Block Leaders will inform them of the JSCN Flag Protocol: Household will to display colored make-shift flags in their window to indicate their health status:

- **Green: message needs to be sent**
- **Red: someone is sick**
- **Yellow: rations are needed**
- **White: someone has died**

BLOCK LEADERS will also contact households in their area by phone to review Flag Protocol.

Block Leader Coordinator will work with Block Leaders in designated areas for hard to reach members.

Break Down of Block Areas

Rural Areas

- MM Corner to 3 Lenvale Road (Lorne Burns')
- MM Corner to 1 New York Road (Esther Marion's)
- MM Corner to 5 Lenvale Road (Delbert Brittain's)
- Sand Trail
- MM Corner to North Cross Road & Coxby Road, East to West (Mabel Burns' to Greg Daniels')
- North Road, River Road, Fur Town & Sports Grounds Road
- North Road

Village Area

- Block A – John M. McLeod Pl, Angus McLean Dr & Sam Moostoos Pl
- Block B – James Head St, Angus McLean Dr & Melrose Pl
- Block C – Abel McLeod St, William J. Head Bay & Abel McLeod St
- Block D – Edward Burns Ave
- Block E – Edward McLean St & Solomon Sanderson Pl
- Block F – George Burns Lane, James Burns Pl & Edward Burns Ave

***Please See Attached Map

4. VACCINATION

A. Vaccination Promotion/Public Awareness

On an ongoing basis, information on a possible Pandemic and the necessity of FLU Vaccinations to PREVENT viral infections will be available to community members through/during:

- Health Newsletter
- Health Clinic Web page
- Facebook page
- Notices sent on the school bus
- Posters at the Band office, School, Clinic, Daycare, Head Start, store, Training Center, ICFS Building and Sakwatamo Lodge
- Display booth in lobby at the Band Office
- Discussions during Clinic programming (i.e. pre and post natal support groups, parent tot support groups, Elder's Day and Adult Day programming)
- Any Clinic school programming

B. Vaccinations

Pre- Pandemic

Flu vaccinations will take place at the Health Clinic as a way of prevention. Vaccinations are administered by Nurses during Flu Immunization Clinics.

Pandemic Declared

Mass vaccinations will take place at the Health Clinic as a way of preventing flu during an epidemic and pandemic. Vaccinations given by: Nurses and CHR's and Home Health Aides with proper training. Pandemic Packages are distributed to households when members arrive for vaccination. Patients will enter Health Clinic VIA Main Entrance to Band Office.

Order of Priority Groups for Vaccinations

Priority groups that receive the vaccine first are decided upon at a National and Provincial level.

- Health Clinic Staff & Pandemic Committee Members
- Front line Workers and Alternates (Refer to following list)
- Volunteers (Volunteer Coordinator maintains list & ensures volunteers vaccinated)
- Community Members

Front line workers and alternates will be among the first to receive the vaccinations after Pandemic declared.

Community Members

"Hard to Reach Client's" Vaccination Plan

Once Pandemic declared, hard to reach members of our community who are not as yet sick², located along the Pasture Road and Coxby Road and in the North End and South End of reserve, will be checked (Refer to Immunization log) to determine whether they have received their vaccinations. If not yet vaccinated, then Clients who are hard to reach because of a lack of a vehicle or phone will be transported by Band Vehicle to Clinic to receive immunization. Non-symptomatic Elders who cannot walk or bed ridden clients will receive vaccinations in their home.

Village Residents

Village Residents who have not as yet received vaccination will be called by phone or Block Leaders will contact them by MEGA Phone to inform them of need to visit clinic for vaccination. Medical taxi will be sent out for transport to clinic if required.

Sakwatamo Lodge

James Smith will not be primarily responsible for Sakwatamo Lodge clients and staff unless they are too sick to leave for their homes. If non-symptomatic, Sakwatamo clients will be sent to home communities.

C. Vaccine Pick-up & Storage

Vaccines will be stored at NITHA in Prince Albert. NITHA will call NIC to inform when vaccine may be picked up. Only Authorized Health Personnel, accompanied by security, will pick-up and transport the vaccine: the person picking up the vaccine must show I.D. Security will be in place to keep vaccine secure during transport & stocking in clinic.

Vaccine Storage

Vaccines will be stored in a specially designated fridge in Community Health Room. If more vaccine becomes available it will be stored in a secure manner in the Clinic Pharmacy, Lab or Dental Room.

D. Vaccine Security

24 hour Security Personnel for Health Clinic will be in place and the Security Alarm system activated. Security doors in main lobby of Clinic/Band Office will remain locked at all times. The Clinic has a back-up 72 hour battery pack and gas generator to maintain the fridges in case of a power outage.

² If Hard to Reach Community members are found to be sick, they will be transported to Band Office for TRIAGE.

5. ANTIVIRAL DRUGS

A. Stockpiling of Antiviral Drugs

There will be some situations where the use of antiviral drugs (drugs used to TREAT viral infections) will be necessary. Some antiviral medications will be stockpiled at the Federal level. It will be the Federal and the Provincial governments that will control the supply and distribution to communities.

Antiviral Drugs will be available from NITHA in Prince Albert. The decision to be able to start using them will be made by the Medical Health Officer.

B. Priority Groups for Antiviral Drugs

The Medical Health Officer will decide who receives the antiviral drugs; it is not up to the Pandemic Committee to decide who priority is.

Groups that could potentially receive these drugs are:

- Ill healthcare and emergency service workers
- Ill high-risk persons in the community

C. Pick-up, Storage and Security of Antiviral Drugs

As with vaccine pick-up, security will be in place to keep antiviral drugs secure during transport & stocking. Only Authorized Health Personnel, accompanied by security, can pick-up and transport these drugs: the person picking up the drugs will have to show I.D

Antiviral Drug Storage

Antivirals will be stored in a secure manner in the Community Health Room. If more storage space is necessary the Pharmacy, Lab or Dental Room can be utilized. Antiviral Drugs will be transported from Community Health Room to Band Treatment area as needed by NIC/CHN.

Antiviral Drug Security

To ensure the security of these drugs 24 hour Security Personnel for Health Clinic will be in place and the Security Alarm system activated after hours. Security doors in main lobby which allow access to Clinic/Band Office will remain locked at all times.

6. HEALTH CARE SERVICES

A. Potential Cancellation of Activities

Routine programs may need to be cancelled and resources used in other ways. Health Director will inform all programs of cancellation. **Nursing, Public Works, Social Assistance & Transportation will remain on duty.** All staff employed by the Band and Health Clinic must be on call.

B. Promotion of Public Immunization

Prior to and during plan activation, all health staff and volunteers in contact with the public will promote vaccination, inquire about vaccination status of individuals and reinforce need for vaccination.

Information on the necessity of vaccinations to PREVENT viral infections will be available to community members through:

- Health Newsletter
- Health Clinic Web Site and Facebook page
- Notices sent on the bus
- Posters at the Band office, School, Clinic, Daycare, Head Start, store, Training Center, ICFS Building and Sakwatamo Lodge.
- Display booth in lobby at the Band Office
- Discussions during Clinic programming (i.e. pre and post natal support groups, parent tot support groups, Elder's Day and Adult Day programming)
- Any Clinic school programming

C. Coordination of Patient Transport

If private transportation is not available, band members will phone into clinic and request transport to clinic. Receptionist will triage band member to determine whether they are symptomatic or non-symptomatic. Receptionist will then contact Transportation Coordinator and relay client information (i.e. Name, house number, symptomatic or non-symptomatic). Transportation Coordinator will then dispatch Taxi Driver to pick up household band member(s). Taxi will dispense face mask to band members before they enter taxi, and will transport to clinic.

If deemed necessary by the Visiting Doctor (if at clinic), NIC or CHN, transportation of ill patients will be provided to nearest hospital accepting clients. Transportation Coordinator will arrange for Taxi transport.

D. Triage of Patients

Trained Receptionists will inquire about the symptoms of the community members calling in for transportation to Health Clinic. They will then arrange for patient pick-up and inform the Transportation Coordinator. Transportation Coordinator will advise the Taxi driver which entrance patients should be transported to:

- Symptomatic patients to be delivered to the Back entrance of the Band Office
- Patients who are not symptomatic but require vaccinations are to be sent to the Main entrance of the Band Office.

Upon entering any entrance, Volunteers stationed at each entrance will also triage patients to ensure that they are going in the correct door.

Symptomatic clients will be further triaged in Band Office Treatment Area. Some assessed community members will be given supplies and sent home to be cared for by family members. If hospitalization is required Transportation Coordinator will arrange for a taxi to transport patient and volunteer care-giver to Melfort Hospital. Volunteer will be returned back to clinic in taxi. If hospital is not accepting patients, patients will be treated at the Band Office treatment area.

E. Plans for Treatment of Ill Persons

Triaging of band members will be undertaken by:

- trained receptionists and trained taxi drivers
- symptomatic patients will be further triaged by a trained volunteer who will meet the patient and confirm that they are at the correct entrance.

If band members have been triaged to confirm symptomatic status they will be sent into the Band Office Treatment Area. The NIC or CHN will further triage the ill patients and decide who should be referred to the hospital. Those who do not require hospitalization will be given supplies and sent home.

If hospital is full, ill patients who cannot be sent home, will be treated in the Band Office Treatment Area and sent home to be looked after by family when well enough.

F. Plans for Non symptomatic Patients

Non symptomatic patients will receive vaccinations as soon as possible. They will be encouraged to stay in their homes and take care of their families. Visiting between family members and travel outside the community will be discouraged.

Elderly or those living alone

Alternate living arrangements maybe made for members who are on their own or are Elderly. Home Care will confirm the identification of these people. Once identified, family will be encouraged to stay with them in their own home and provide care. Water and necessary essentials will be delivered to these homes by volunteers or staff.

Home Care staff will continue to visit non-symptomatic clients who are in need of insulin injections or wound care.

G. Mental Health Issues

Holistic health workers, Wellness workers, Clergy and Elders will provide:

- Radio messages that give Hope and Reassurance
- Phone calls to provide counseling as requested

At the end of the pandemic, Health Clinic/Band staff will organize a community memorial and volunteer appreciation event.

H. Tracking Clients

Location of Band Members in Community

Health Clinic and Band staff have prepared a Band Member list and a corresponding map which indicates:

- House number
- How many people are living in each home
- Name, Phone #, Treaty Number of each person living in the home.
- People who live alone, elderly, in need of ongoing in-home medical care etc. are flagged.

This list is confirmed annually and will be reviewed and distributed once Pandemic Plan is activated.

I. Education Regarding Clinical Guidelines

NIC will review the Clinical guidelines with HCN (Kendra McKay) and Senior CHN (Eleanor Stonestand). HCN and Senior CHN will review and instruct guidelines with Health clinic staff and with all of the volunteers, especially those posted to the Band Office and Clinic and taxi drivers.

Clinical guidelines are posted in Band Office Treatment Area and Health Clinic. (Refer to Appendix 3)

J. Employed Staff on Reserve

All Nurses on staff are current and up to date with treatment and assessment procedures. It is assumed that all or most Nurses will come to work according to schedule during the pandemic.

All other Health staff living on reserve and are up to date with First Aid and CPR (as of February 2012). Re-certification will take place as needed.

Volunteers will be asked whether they are currently certified with First Aid; this information will be recorded on volunteer sheet.

K. Patient Flow

Clinic will be run so that healthy clients and ill clients are not using the same area.

When patients phone in for transportation during the pandemic they must state their condition, symptoms etc. Receptionist will inform Transportation Coordinator of status of band member requiring transportation and Transportation Coordinator in turn will inform assigned driver of condition of patient. All drivers will wear masks and will distribute masks to passengers. Drivers will transport clients to correct entrance.

Masked Volunteers will be placed at each entrance to triage community members to ensure that they are entering proper area.

Triage:

Band Office Main Entrance – Healthy Patients for vaccinations

Band Office Back Door/Band Office Treatment Area – Ill Patients with Symptoms

L. Health Clinic Supplies

NIC has ordered and has on stock all necessary nursing supplies (See Appendix 4)

Clinic staff, Eldeen McKay (Annie Sanderson) is responsible for other health clinic supplies. She maintains an inventory of supplies and replenishes these as needed.

6. HUMAN RESOURCES

A. Human Resources Management Team

Pandemic Management Team consists of:

Pandemic Coordinator
Media Relations Spokesperson
Transportation Coordinator
Janitorial Coordinators
Volunteers Coordinators
Medical Supply Coordinator
Finance Management Team
Social Development
Family Wellness
Statistics Coordinator
Ration Coordinator
School Coordinator
Care of Deceased Coordinator
Housing Coordinator
Security Coordinators
Block Leader Coordinator
Volunteer Coordinators in each area

B. Roles & Responsibilities of Management Team

Site Management

Mike Marion

Duties Include:

- Management & Administration of Contribution Agreements, Funding Arrangements with FNIH

Pandemic Coordinator

Mike Marion

Duties Include:

- Overseeing the activation of Pandemic Plan
- Ensure Health Providers and Managers are aware of the current situation

Assistant Pandemic Coordinator

Rey Lindain

Duties Include:

- Assisting to oversee the proper activation of Pandemic Plan

Media Relations Spokesperson

Dinah Marion

Duties Include:

- Responding to any media inquiries by written response

Coordination of Patient Care

Rey Lindain

Duties Include:

- Coordinate and administer vaccinations
- Coordinate and administer appropriate treatment
- Leadership and Coordination skills, Human resource needs
- Refer patients to Hospital
- Ensure that infection control guidelines are practiced within all areas and by all staff

Medical Training, Staff Scheduling and Support,

Delores Marion
Kayla Constant

Duties Include:

- Ensure that volunteers are properly trained and have masks
- Schedule staff
- Provide support
- Ensure that infection control guidelines are practiced within all areas and by all staff

Volunteer Coordinator

Chief Robert Head
Brian Head
Barry Sanderson

Duties Include:

- Recruit volunteers
- Ensure that each area has sufficient volunteer resources
- Ensure that volunteers are properly trained and have masks
- Ensure that infection control guidelines are practiced within all areas and by all staff

Transportation Coordinator

Alvin Sanderson

Duties Include:

- Ensure that all vehicles are utilized in the appropriate manner and area of designation
- Ensure that drivers have Class 4 Licenses
- Ensure that drivers have masks
- Ensure that drivers have been trained to identify flu symptoms
- Ensure that drivers practice infection control

Finance management

Duties Include:

- Manage on-going financial activity of clinic/Board

JeanSanderson
Garth Sanderson

Clinic Supply Coordinator

Duties Include:

- monitoring of supplies, usage and re-ordering as necessary.

Eldeen McKay
Tina Sanderson
Merle Sanderson

Block Leaders/Flag Checkers

Duties Include:

- Travel around their area to check for flags: red-illness; white- death; green-message; yellow-rations needed
- At yellow and green flagged houses, block leaders knock on doors but **do not enter**. Ask about what supplies are needed or what message needs to be delivered. They report back to Ration Coordinator or Communication/Message Coordinator.
- When red flag identified, block leaders contact the NIC
- If white flag present, block leaders contact the NIC who then contacts the Care of Deceased Coordinator

Chief Rob Head
Brian Head
Barry Sanderson

Community Members

Duties Include:

- Community members must place flags on their front windows. Flags consist of household materials or items of the appropriate color.
- Ensure that they maintain contact with health clinic if required.
- Stay at home and provide care for their families for the first 72 hours
- If supplies are needed contact health clinic
- **No visiting—only by phone, Email, Internet etc.**

C. Essential Personnel

A list of essential community services & corresponding personnel with names & phone numbers can be found in attached Appendix 5.

The following are essential personnel areas (i.e. are key to the community's ability

to deal with this outbreak)

- Nurses
- Public Works staff- Bill Marion is the coordinator, Alternate: Devin Marion
- Health Clinic and Band Staff

D. Replacement Personnel

If KEY PERSONNEL are not available, back-up or alternatives will consist of:

- Student Nurses- if available
- Retired Community Health Care Workers
- Trained Volunteers

All replacement staff are required to leave name & number at the Clinic and speak to Human Resources Coordinator for assignment of duties. (Refer to Appendix 6 for Initial List of Replacement Personnel)

E. Volunteers

Volunteer Coordinator will identify and work with the existing volunteers in the community. He will:

- Post a volunteer sign-up list for the public to sign up for extra duties at the store, training center, Band Office, Health Clinic, school, Day Care, Head Start, ICFS Office, Sakwatamo and Community Churches
- Obtain and post phone numbers of all staff and volunteers
- Provide information sessions for all volunteers.
- Ensure that all volunteers are trained in infection control.
- Coordinator in the area an individual has volunteered for will provide specific job orientation

The need for volunteers and the areas that they are needed for will be posted on the Health Clinic Webpage and Facebook Page.

Volunteer Coordinator will attend daily briefing meetings of Pandemic Committee and then will report back to volunteers if required.

Volunteers Needed for the Following Areas: Sign Up Sheet located at Clinic or Volunteers can use Sign up Page on Clinic website

Each Band Member will choose an area:

Headquarters
Message Headquarters
Surveillance
Security Guards
Drivers
Block Leader/Flag Checker

Carpenters
 Public works
 Water Technicians
 Deliver Rations
 Transportation/Taxi
 Clergy
 Family Wellness
 Grief Therapists
 Janitorial/Maintenance
 Burial Sites
 Grader Operator/Back Hoe Operator
 Volunteer TRIAGE
 Volunteers to document Medical History
 Monitor Patients
 Cooks
 Morgue
 Hunters/Fishermen

Volunteers Needed in Major Areas

<i>Communication/Message Headquarters</i>	<i>Clinic & Treatment Area</i>	<i>Security & Surveillance</i>	<i>School</i>
Receive and send community messages to ICFS Office	Triage volunteers at main at back door to Band Office Shifts of 2 volunteers @ each of the 3 doors	Security personnel for: Band Office & Clinic, ICFS, Sakwatamo, School, Storage areas	Compiling rations into packages for delivery
Janitorial Supervisor & volunteers	Record keepers	Block Leaders/ Drivers	Drivers to transport rations
	Client medical history takers		Cooks
	Receptionists at Clinic front desk		Meal Servers
	Janitorial Supervisor & volunteers		Clean-up staff (dining area and kitchen)
	Security guards		Janitorial Supervisor & volunteers
	Taxi drivers		

Volunteer Duties

Headquarters:

Volunteers will be needed to post and remove messages at Pandemic headquarters. Duties include: Making sure up to date messages are posted and old messages are removed. Information will be changing constantly. You must date and time messages!

Volunteers needed to answer phones and relay messages. Duties Include: Answering phones at Pandemic Headquarters and at ICFS building. Inform community callers that the Hospital is not accepting anymore clients. Take down all messages with date and time and give them to the volunteers posting messages.

Volunteers needed to relay messages to community. Duties include: Checking in with Message Headquarters ICFS building- to see what messages you need to deliver by Megaphone to inform community. Tiffany M Sanderson the communication supervisor will follow up to make sure messages are being delivered. Each area of reserve will be covered.

Surveillance and Security

Volunteers needed for Surveillance: Block Leaders: walk around assigned areas and take note of flags displayed in windows the contact appropriate personnel (NIC, School Ration Coordinator; Communication Coordinator). Also deliver message by mega phone.

Volunteers needed for security. Duties include: Monitoring of any suspicious activity around Clinic/Band office(1), Band Office Boardroom- Headquarters(1), School(2), Sakwatamo Lodge(1), Store(1), Daycare/ICFS(1), and Fire Hall(1).

School

Volunteers needed to compile ration kit: See Appendix 7: Ration kit

Volunteers needed to deliver rations to homes. Duties include: Checking in at the school with Ration Supervisor to see what homes need rations; pick up rations from designated classroom; deliver rations to the homes and report back any messages to Ration Supervisor from each home.

Front Line Workers: House Keeping and Janitorial

Janitorial Coordinator will supervise and train the following volunteers

- 1 janitor supervisor for volunteer janitors for Health clinic and Band Office
- 1 janitor for supervisor for volunteer janitors ICFS (message center)
- 1 janitor for supervisor for volunteer janitors for the School.

F. Volunteer Training

All volunteers will be trained for the area they are volunteering in by the area Coordinator or Supervisor.

Infection Control Training

Volunteer Coordinator will organize training sessions with Training Coordinator on Infection Control and symptomology of the flu; all volunteers must attend.

In addition, Nurse in Charge will post Infection Control Protocol until further policy is received from Northern Inter-Tribal Agency:

- Information on Infection Control will be posted in lobbies of Clinic and Band Office, Daycare, School, Sakwatamo Lodge, ICFS, and John Godfrey Center.
- Basic infection control information is covered in Pandemic packages being delivered to homes only during the pandemic.

Shortly after Pandemic plan activated an in-service for health staff and volunteers on Infection Control will be provided by JSNS Nurses with direction from NITHA.

G. Protocol for Volunteer Supervision

Volunteers are assigned by Volunteer Coordinator and supervised by the Coordinator for the area they choose to help with.

Volunteer Coordinator will provide a list of volunteers to each Pandemic Program Area Coordinator. These Coordinators will then contact the possible volunteers to determine whether they are able to volunteer (i.e. whether they or one of their family members are sick would disqualify them from volunteering) and will ask them when they are available to volunteer and fit them into the volunteer schedule. Program Area Coordinator will contact the Medical Transportation Coordinator to request transportation for the volunteer.

H. Incentives for Volunteers

Volunteers will utilize the school gym for meals, snacks & beverages. The Daycare staff along with other help have volunteered and will be cooking in the School kitchen.

I. Management of Staff

During an outbreak, staff may be ill or have family members that are ill. These staff members will notify the Staff Scheduling Coordinator and their alternate and train them to do their duties.

Staff who are ill or on call are encouraged to phone into Pandemic Headquarters daily for updates of volunteers/staff needed, and possible duty assignment.

Ill staff maybe able to help by working from home: making posters, phoning clients, and sending e-mails etc.

7. CARE OF THE DECEASED

Discuss plans with Fedusiak Funeral Home

A. Handling of Deceased: Winter or Summer

Pandemic Headquarters will be informed of a death by phone call from a family member or by a Block Leader who has observed a WHITE FLAG placed in the window.

Pandemic Headquarter staff will inform Care of the Deceased Coordinator who will then inform and send out trained personnel, wearing long sleeved gowns, masks and gloves, who will respectfully deal with body: 1) place an identifying toe tag on the deceased and 2) place the deceased in a body bag 3) place deceased in van, 4) complete their reporting sheet and 5) transport the body to the Temporary Morgue in the new garage by the school. Deceased will be placed in wooden casket with proper documentation and stored in a C-CAN unit which has refrigeration for summer time use. Pandemic Coordinator will notify the Coroner in the case of a death.

During the 24 hours after death, Care of deceased Coordinator will contact the medical record keeper at the Health Clinic to determine the burial or cremation wishes of the deceased. Health Clinic will refer to Final Wishes & Instructions booklet (Refer to Appendix 8 to determine wishes). Once the individuals wish is determined appropriate arrangements will be made.

B. Burial or Cremation

Burial

According to Band member wishes, the deceased will be buried within the first 24 hours after death in the summer and if possible during the winter (i.e. if graves are able to be dug). Burial will take place in the previously consecrated areas within the graveyards of the St Luke's and St. Stephen's Churchyard.

Public Works Coordinator will contact Band Back Hoe operator to dig a few graves at the two churchyards as soon as Pandemic Plan implemented.

Care of the Deceased Coordinator will contact the appropriate Ministers, Clergy or Lay Readers to notify of burial. Trained volunteers will transport body to graveyard for internment. Timing of burial in the winter will depend upon availability of excavated graves

Cremation

According to Band member wishes, the deceased will be cremated within the first 24 hours after death.

Care of the Deceased Coordinator, after documentation of wishes, will contact the appropriate Ministers, Clergy or Lay Readers to notify of cremation. Trained volunteers will transport body to cremation grounds. Stored firewood will be used to cremate bodies. Security will remain in place until cremation is complete. Cremation date and time will be appropriately documented.

Wakes and grave site services are forbidden during the Pandemic period to prevent the spread of infection.

The JSCN will organize and hold Memorial Service at the end of the Pandemic when appropriate.

C. Security

The Care of the Deceased Coordinator and Alternate will be responsible for assessing and securing the C-CAN during the times that death has occurred in community. Security volunteers will be in place for night-time security of bodies. Security will also remain in place until cremation of bodies has been completed.

D. Documentation of Death

An Individual Documentation of Death Form (2 copies) will be completed per individual death. This form contains the following information (see Appendix 9): This form includes the:

Name

Date of Birth

Next of Kin

Date of Death

Burial or Cremation Date

Comments Section: if the body was moved within the house/yard (to include when, where and who moved it), who transported the body to where.

This sheet will be completed by the Care of the Deceased Coordinator. After burial or cremation, the form will be stored at the Temporary Morgue. After the Pandemic the forms will be submitted to the NIC who will then submit the forms to Sask Health.

E. Infection Control

Prior approval is needed from the RCMP out of the Melfort detachment and Chief Coroner's Office out of Regina. In cases where the coroner cannot be present the RCMP may receive verbal approval over the phone from the Chief Coroner. The toll free line is 1-866-592-7845.

The trained volunteers will then respectfully pick up the deceased and transport them to the temporary morgue. They must wear masks, eye-protection, long sleeved gowns and gloves when dealing with deceased.

No chemicals needed in the care of deceased.

After deceased has been respectfully stored, long-sleeved gown, mask and gloves are taken off and disposed of immediately. Proper hand-washing must also occur immediately after.

Supplies needed by volunteers are: masks, gloves, toe tags, body bags, blankets and/or wooden stretcher, gurney (1)

Supplies needed at the temporary morgue are: Documentation of Death Record Sheets, filing cabinet

E. Emotional Support

Holistic Wellness Team will provide on the phone emotional support during the Pandemic.

After the Pandemic is over the JSCN will organize and hold Memorial Service. Holistic Team members will also be available for grief counseling and de-briefing at the Health Clinic or at houses.

F. Final Wishes and Instruction Booklet (see Appendix 8)

A Final Wishes & Instructions booklet has been completed by most community members, including children and is stored in their medical file in a safe and secure area at the Clinic. The Care of the Deceased Coordinator will be informed of the wishes of the deceased.

Additional information in this booklet will be provided to family and Sask Health when appropriate.

9. INFECTION CONTROL

General Information:

Depending on the virus Incubation period may vary for Influenza is 1-3 days Communicability continues for up to 7 days after the onset of illness. Individuals affected with influenza tend to shed more virus in their respirator secretions in the early stages of their illness. Patients are more infectious in 24 hours before the on-set of the flu and during the most symptomatic period. (Refer to Appendix 3)

Viral shedding may be longer in infants and prolonged in young children and immune-deficient patients. The virus will survive for 24 to 48 hours on hard non-porous surfaces; 8-10 hours on cloth, paper and tissue; and 5 minutes on hands.

Influenza virus is readily inactivated by hospital germicides, household cleaning and hand wash or hand hygiene products. Therefore neither antiseptic hand-washing products in health care setting nor antibacterial hand-washing products in home settings are required because routine products along with proper hand washing procedures will inactivate the influenza virus.

A. Infection Control Guidelines

Prior to Pandemic

Nurses, Dental Therapist, Dental Aide & Home Health Aides are acquainted with their own Infection Control Guidelines.

Staff will be updated annually on Bio-Hazardous Shipping and Dangerous Goods. The Environmental Health Officer from Prince Albert Grand Council will provide the recertification.

Special masks have been ordered and fitted for: N95 mask fitting has been done in previous years and this is provided by Tiffany M. Sanderson and Eleanor Stonestand.

Mask Test Fitting Kit was purchased and received at Health Clinic. Masks will be distributed to all front line workers who have been fitted for the N95 mask.

Nurses are able to train or update staff on infection control guidelines; arrange with Environment Health Officer-PAGC for training.

B. Staff Education

Prior to Pandemic

Infection control information has been distributed to all staff. Infection control guidelines are reviewed every 3 months, prior to and during pandemic to keep staff current and up to date.

Staff have completed an In-Service on Infection Control annually. (see Appendix 10 for Infection Control Guidelines)

A nurse has completed a train the trainer course in Infection Control and will be responsible for training staff and volunteers.

C. Housekeeping

During Pandemic the Janitorial Coordinator (Ken Sanderson/Dave Burns) ensures ongoing sanitation of all of the facilities.

Hard non-porous surfaces will need to be cleaned on a regular basis

- Environmental Services staff should use appropriate personal protective equipment (PPE) (i.e., household gloves) as needed when preparing disinfectant and cleaning solutions and when applying these solutions by hand to wipes and/or surfaces.
- Clean and disinfect surfaces that are touched routinely by hand (e.g., doorknobs, bed rails, bedside- and over-bed tables, bathroom surfaces, safety/pull-up bars, television controls, call buttons) on a more frequent schedule than that used for large housekeeping surfaces.
- Follow manufacturer instructions for proper use of disinfectants, especially with regards to the proper concentration of product and the time the product should be in contact with the surface being disinfected.
- Consult medical equipment instructions for appropriate methods of cleaning and disinfection for these items, and consider using barrier coverings for equipment that may be hard to clean or has accessible electronic components.
- Clean large housekeeping surfaces (e.g., floors) in patient-care areas with detergent/disinfectants in accordance with manufacturer instructions on a regular basis as per facility policy (i.e., at least daily and terminally cleaned at patient discharge).
- Avoid large-surface cleaning methods that produce mists or aerosols or disperse dust in patient-care areas (e.g., use wet dusting techniques, wipe application of cleaning and/or disinfectant solutions).
- Detergent and water are adequate for cleaning surfaces in nonpatient-care areas (e.g., administrative offices).
- Follow facility procedures to ensure the cleanliness of cleaning and/or disinfectant solutions, rinse water, mop heads, and cloths (e.g., separate buckets for solutions

and rinse water, frequent exchanges of solutions, replacing soiled mops heads and cloths with clean items, using microfiber mopping methods).

- Avoid placing influenza patients in rooms with carpeting if possible; use vacuums equipped with HEPA filtration when vacuuming carpets in patient-care areas.
- Educate patients, staff, and visitors about the importance of handwashing and hand hygiene, emphasizing “hand awareness” (i.e., touching nose, mouth, or eyes after touching a potentially contaminated surface or object).

Garbage containing blood or secretions will need to be disposed and burnt in the incinerator; all other garbage will be transported to dump.

Janitorial Coordinator will oversee work of volunteer janitors at the band office, health clinic, school, ICFS building, Sakwatamo, store, new garage by school to ensure that infection control guidelines are carried out.

D. Cleaning Supplies

The following cleaning supplies are stored at Health Clinic and will be distributed by the Janitorial Coordinator as required.

E. Occupational Health & Safety

- A Health and Safety Committee is established and has recommended the Flu Vaccine to all staff
- Staff immunization records are on file at the clinic
- Staff have completed and need a refresher annually for Transporting Dangerous Goods WHIMIS and Mask Fitting

F. Public Education

A pandemic information booklet is delivered to all homes prior to an influenza outbreak. Educational tools are included about infection control for the public.

Appendix 11

Emergency Response Plan

*Emergency Response Plan requires updating from Inter-agencies.

*Designated Health Staff will take Emergency Response Training.

*The Chief and Council will activate the Emergency Response Team.

POST PANDEMIC EVALUATION

- After the Pandemic is over evaluate the plan and decide if it needs revising
- Decide on what information needs to be collected so an evaluation of the Emergency Response Plan can be done
- Every department will do their own paperwork on the outcome of the Pandemic
- There will be a form to fill out Re: Communicable Diseases
Collect information from other staff/Departments that would benefit the evaluation.

WHAT CAN YOU DO:

Prepare your families with Basic Infection Control, Hand washing, Practice Stock piling, and Household Cleaning & Chores around your home.

Each family will prepare a pandemic plan based on the awareness information provided.

Stockpile List for homes should include:

- *72 hour booklet
- *Bottled water
- *Canned Goods
- *Dry Goods
- *Medication Supply for 1-3 Months chronic clients
- *Diapers, Formula, baby wipes
- *Batteries
- *Candles
- *Tylenol/Motrin for children
- *Battery operated radio
- *flashlights
- *Pet Food
- *Isagel or other Anti-bacterial hand wash - no water needed
- *Saskatchewan Health Line 811