

Pandemic Emergency Management – Challenge & Tested Solution

Challenge identified:

Risk Management and Planning

Solution:

Collaborative Risk Management Strategies: working with other agencies and MCCSS Program Supervisors to share resources through the local planning table

- Connecting informing and advocating
 - o Offered of shared resources to be part of the solution. Offered PHU resources to make the vaccination clinics happen, which helped to further the relationship with PHUs
 - o Working closely together this last year, the region has operated and administered a series of pop-up vaccination clinics in 2021 and early 2022: delivering 3000 first, second and third dose boosters for persons supported, essential family members and front-line staff
- IPAC co-leads, represented at both OHTs
 - o Collectively ensure the DS sectors is represented at the OHT tables
 - o IPAC leads are involved in several of the OHT working groups
 - o By sharing representation, it is ensured the DS sector is at the provincial network table, OHTs and local PHU townhalls
 - They also pass PHU townhall invitations out to all MCCSS funded agencies
 - Provide *interpretation application* to PHU guidelines, ensuring Agencies are aware of them (i.e. return to work option for day 6-7 return to work protocol)
- Management of critical supplies
 - o Program Supervisors have worked alongside the local planning table to schedule, facilitate, and capture discussions of inventory (mainly PPE and RATs) across all Agencies, allowing organizations to focus on solutions
 - o Created a MCCSS supplied *central supply hub* for backup PPE and RATs
- Above and beyond the MCCSS central supply hub the region conducts *weekly huddles*
 - o Focus lately has been on staffing solutions, RATs and PPE – sharing where each Agency is at with PPE, outbreaks and staffing

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- Identifying where one Agency may have extra supplies that can help another Agencies running low – bit of match making process, live on Zoom
- Share vendor contact information for ordering PPE and RAT supplies direct (cost recouped through the Covid Relief Fund)

Steps to Implement:

1. Weekly meetings, often with MCCSS Program Supervisors
2. Identifying areas of concern/issues at all Agencies
3. Creative problem solving at the table (informal exchange of supplies or information where to acquire supplies)
4. Regional IPAC lead triages MCCSS funded supplies as needed, others exchange information for direct purchase when needed

Results

1. How effective was this?
 - Very. Collaborative problem solving has proven extremely useful. It is about the relationship and being in each other's back pockets
2. Was this efficient? Was it quick to implement?
 - Yes. It has helped to mitigate critical supply shortages and navigate the different waves of the pandemic.
3. Would you recommend this to other agencies?
 - Yes. This collaborative team-based approach has evolved to enable Agencies experiencing critical shortages (i.e. critical supplies, mask fit testing) to be able to put a call out to whole planning table and have others come to their aid

Additional Considerations:

- Ensure Program Supervisors are kept in the loop
- Include all Agencies in the area
- Regional specific demands (i.e. rural vs. urban, etc.)

Lessons learned:

It is an evolving process that really centres on relationships and taking a team-based approach to helping each other. This way, it is ensured that the people supported are provided with the care they need.

Further contact Person:

Ann Bilodeau (ED, KW Habilitation Services): abilodeau@KWHAB.ca

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