Pandemic Plan

2019-2020
EXECUTIVE SUMMARY

The following plan should be read in the context of the University’s broader Emergency Response Plan. A pandemic is simply one of a possible range of emergencies for which the University must be prepared. However, a pandemic brings with it unique challenges, in that it will not be of short duration, but will occur over an extended period, and potentially in more than one wave. Given the concerns raised by health officials around that world that a pandemic is likely, all major institutions as well as countries and municipalities are being asked to prepare specific pandemic plans. This report identifies for the university issues of primary concern and those units that perform essential functions.

The report identifies the characteristics of a pandemic and the unique challenges it presents. The report identifies actions that need to be taken up to the most extreme of pandemics – very contagious with a high mortality rate. However, the pandemic may also present as a contagious influenza with limited serious health consequences. In this instance, not all the actions identified in this report will need to be implemented.

Pandemic Influenza

An influenza is a common and highly contagious viral respiratory illness which presents with acute onset of fever, cough and one or more of the following: sore throat, fatigue, and sore joints. Influenza epidemics occur in our community almost every year, usually in the winter. A pandemic is declared when a new strain of influenza virus appears in which people have little or no immunity and there is no immediate vaccine. It spreads over a large area, crossing international boundaries and usually affects a large number of people. It will cause serious clinical illness or death, but the percentage of the population affected seriously could be very small or large dependent upon the nature of the strain.
Challenges
Challenges unique to a pandemic include: 1) high absenteeism (over the course of a moderate pandemic, 15 – 30% of the population may become ill; 2) the cyclical nature of a pandemic (e.g., not a single occurrence and each occurrence lasting up to several weeks); 3) Close involvement and co-ordination with the city response team and public health; and, 4) possible supply chain disruption; and communication (many different health units as well as other bodies will be communicating making consistent messages difficult).

Authority
As in any emergency, the Campus Control Group (CCG) has full decision-making authority and responsibility. However, in a pandemic, the City or our Public Health unit may assume responsibility over the CCG. The University Emergency Plan identifies the authority of the CCG.

Looking After Those Affected
As a residentially intensive university, plans must be developed to support those students who are affected, both medically and personally. In addition, our faculty and staff must also be provided with support, where appropriate, both those who are working as well as those who are home.

Department Plans
The report identifies the essential functions of the University. All departments identified in this plan as performing essential functions will develop individual plans to ensure they meet these commitments.
OBJECTIVE

The objective of this plan is to provide direction to the members of the University of Guelph Community to respond effectively in the event of an influenza pandemic. The University of Guelph will take steps necessary to strengthen influenza pandemic preparedness; minimize the risk of transmission in order to contain or reduce the spread of the virus; communicate clearly the status of cases on campus and action being taken by the University; and, to minimize the impact of the pandemic on the University of Guelph community. The main goal of this plan is to minimize illness during an influenza pandemic and limit the impact on the University’s ability to achieve its mission of research and teaching. The goals of the Pandemic Plan for the University of Guelph are consistent with the Provincial and Wellington–Dufferin–Guelph Public Health’s goals.

DEFINITION OF A PANDEMIC

Pandemic Influenza

A pandemic is declared when a new strain of influenza appears in which people have little or no immunity and there is no immediate vaccine.

In contrast to the pattern of spread for some infectious diseases, the appearance of a pandemic may be abrupt and the spread rapid. In addition, the influenza will work in waves rather than one incident that dissipates. Except for very early index cases, quarantine will not provide adequate isolation or prevent the spread of the virus. It is unknown how much advance warning there will be, how long the pandemic will last, how many cycles of illness will occur, the age group that will be affected, or what percentage of those who become ill will be seriously affected.
The table below shows the phases of a pandemic as determined by the World Health Organization (WHO). The University will most likely become more active in its education and containment programs at level 5 and engaged in more detailed planning and response at level 5 or 6. It must be recognized that a level 6 pandemic could be called and the immediate danger to the Guelph community relatively minimal. Therefore, decisions must be made based on the location, severity, and spread of the pandemic.

**TABLE 2.1. PHASES OF A PANDEMIC**

<table>
<thead>
<tr>
<th>New Phases</th>
<th>Overarching Public Health Goals</th>
<th>University of Guelph Goals</th>
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<tbody>
<tr>
<td><strong>Interpandemic period</strong></td>
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<tr>
<td><strong>Phase 1</strong>. no viruses circulating among animals have been reported to cause infections in humans.</td>
<td>Strengthen influenza pandemic preparedness at the global, regional, national and if present in animals, the subnational levels. Minimize the risk of transmission to humans; detect and report such transmission rapidly if it occurs.</td>
<td>Normal Business Operations; Regular Self-Care campaigns; Reminder re: Basic Infection, Prevention and Control measures (e.g., hand hygiene); Annual Flu Clinics</td>
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<tr>
<td><strong>Phase 2</strong>. an animal influenza virus circulating among domesticated or wild animals is known to have caused infection in humans</td>
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<tr>
<td><strong>Pandemic alert period</strong></td>
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<tr>
<td><strong>Phase 3</strong>. An animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people but has not resulted in human-to-</td>
<td>Ensure rapid characterization of the new virus subtype and early detection, notification and response to additional cases. Contain the new virus within limited foci or delay spread to gain time to implement preparedness measures, including vaccine</td>
<td>Normal Business Operations Student Health Services will receive updates from Wellington-Dufferin-Guelph Public Health Unit of any pertinent information or warnings received.</td>
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<tr>
<td>New Phases</td>
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<td>human transmission sufficient to sustain community-level outbreaks.</td>
<td>development. Maximize efforts to contain or delay spread, to possibly avert a pandemic, and to gain time to implement pandemic response measures.</td>
<td>Increase self-care campaigns re: hand hygiene, proper coughing/sneezing protocol; Campus Control Group (CCG) may be assembled (Refer to Appendix 5 Emergency Management Responsibilities)</td>
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<td><strong>Phase 4.</strong> human-to-human transmission of an animal or human-animal influenza reassortant virus able to cause “community-level outbreaks”</td>
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<tr>
<td><strong>Phase 5.</strong> human-to-human spread of the virus into at least two countries in one WHO region.</td>
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<tr>
<td><strong>Pandemic period</strong></td>
<td>Minimize the impact of the pandemic.</td>
<td>Assembly of the CCG will be required and can be established either virtually or by attending to the Primary EOC. (Refer to appendix 5 for EOC locations). This determination will be made by the Chair of the CCG with the goal of ensuring that timely decisions are made based on assessment of the entire situation. It is the goal of the CCG to ensure that there is ongoing support to</td>
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<tr>
<td><strong>Phase 6.</strong> Pandemic: community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in <strong>Phase 5.</strong></td>
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</table>
**New Phases**

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<tr>
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<th>University of Guelph Goals</th>
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<tbody>
<tr>
<td>the campus community through business continuity planning and through increased communications as well as enhanced communication with the Wellington - Dufferin -Guelph Health Unit.</td>
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Post Pandemic Period

Pandemic activity appears to be decreasing; however, it is uncertain if additional waves will occur and countries will need to be prepared for a second wave.

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**CHALLENGES DURING A PANDEMIC**

**Challenges to the Broader Community**

**Employee Absenteeism**

The epidemiological characteristics of the pandemic strain will be similar to seasonal influenza with respect to incubation period, period of communicability and mode of transmission.

Health Canada estimates that 15% to 35% of the population will become ill during the course of a pandemic and will be unable to work for a period of time (a minimum of half a day). Individuals may experience symptoms from mild to severe. Many people who are not ill may stay home to care for children, other family
members, or friends who are ill. As well, some people may stay home due to concerns or fears about potential exposure to influenza in the workplace. The resulting high rates of employee absenteeism will affect every sector and every part of the City. Individuals who recover from illness with the pandemic strain will be considered immune to that strain.

A vaccine for pandemic influenza will not be available for four to six months following the identification of the pandemic virus and will not be available for the first and possibly the second wave. Once a vaccine is available it will initially be in short supply and high demand. Antiviral medications which are used for treatment and prevention of seasonal influenza will be in limited supplies.

Communication
Regular mediums of communication may be affected due to absenteeism and increased demand.

Supply Chain Disruption
High absenteeism will likely affect the delivery of services and goods, nationally and internationally, as transportation and manufacturing staff will be ill. The pandemic will affect countries around the world, with some regions hit earlier, longer, and harder than others. If border crossings or transportation systems are disrupted, the delivery of supplies may be delayed. It is anticipated that a pandemic will result in interruption of services and a shortage of supplies and fuel. Identifying contingency plans for sustaining basic functions in case of loss of telecommunications, utilities, and IT capability needs to be included.

Social Issues
The psychological impact on the public will likely be significant.
Public Health Measures
Public health measures are non-medical interventions that may be imposed by provincial or local Public Health Care Officials to reduce the spread of the influenza virus in the community. These measures may include public education, case and contact management, and community-based disease control measures such as cancellation of public gatherings (e.g., conferences, classes or sporting events) or closure of schools and day nurseries. In addition, the federal government may issue travel restrictions and screening of travelers.

The Provincial Chief Medical Officer of Health will make specific recommendations about the measures recommended for use province wide. This will help to ensure that the types of public health measures implemented across Ontario are consistent.

Changes in Demand for and Access to Services
During an influenza pandemic, the people of Guelph may be demanding in greater numbers access to information and City services that could help reduce the impacts of the pandemic on their health (e.g. emergency services, public health services, and clean water) and daily activities (e.g., public transit). However, the services may actually be limited.

Challenges to the University of Guelph
The University of Guelph will face of number of significant challenges as a result of the widespread pandemic that will affect business continuity and the health and safety of students, staff and faculty. The University will focus on the following areas to reduce and/or overcome the challenges caused by the pandemic.

Employee Absenteeism
High absenteeism will present challenges to campus leadership and delivery of services as human resources will be strained in all
aspects of the operations. In some sectors (eg Student Housing Services) there is high reliance on students to provide support to other students. In such an environment the challenge will be that these students live directly with the population they service and will be experiencing the outbreak at the same time. Strategies to manage staffing shortages including canceling non-critical activities will need to be developed. Procedures will need to be established to allow for the redeployment of staff from non-urgent activities to essential services, or drawing on additional workers such as recent retirees, students, or volunteers.

**Residential Intensive University**

Given the highly residential nature of the U of G campus, social distancing and interaction will be a factor due to the density and relative youth and inexperience of the population in managing their own health and the perceived need to attend class and other functions.

**Compliance**

While the University may recommend that members of the community who are ill stay home, compliance is likely to be an issue. This is particularly true for students with exams or labs or seminars.

**Communication**

Communication will be critical to an effective response to the pandemic. The University of Guelph will have to plan to ensure accurate and effective communication to students, staff, faculty and visitors. Strategies should also be developed for communicating with parents, alumni and community stakeholders about changes to, or disruptions in, services. One communication tool that will assist in alerting campus community members is the UofG Alert system.
Education and Training

Education and training sessions will need to be developed and provided to staff, faculty and students regarding emergency and service continuity plans, so they will know their roles and responsibilities. Staff, faculty and students should also be oriented in infection control precautions and, where applicable, the proper use of personal protective equipment (Refer to Appendices 4 & 5).

Supply Chain Disruption

Supply chains may be interrupted. The pandemic will affect countries around the world, with some regions hit earlier, longer, and harder than others. If border crossings or transportation systems are disrupted, the delivery of supplies may be delayed. Planning is required to ensure that critical supplies are determined and stockpiled (six to eight weeks), alternate suppliers are identified. In addition, there needs to be an adequate supply of disposable tissues, hand sanitizers and hand-washing supplies.

Service Continuity Plan

The University of Guelph will need a plan to reduce the negative impact of the pandemic on its operations and to ensure continuation of services wherever possible. The University must also prepare for the specific disruptions that could be faced during a pandemic and develop a business continuity plan. Service continuity planning includes:
1. Service impact analysis
2. Service continuity plan
3. Readiness procedures
4. Quality assurance

PLANNING AND PREPAREDNESS

Authority and Control

The many complex decisions that will be made during a pandemic must be coordinated and carefully managed. If the situation moves
to phase 5, the University may assemble the Campus Control Group (CCG) which will have overall authority in this regard. If the situation moves to phase 6, the University will assemble the CCG. Actions taken by the CCG will depend upon the location and severity of the outbreak, and advice from Public Health.

The Campus Control Group
The University’s response to a pandemic will be directed and controlled by the Campus Control Group (CCG) expanded to include the Director of Student Health Services and the Manager of Occupational Health and Wellness. Additional personnel may be called or added to the CCG including:

- Community Emergency Management Coordinator – City of Guelph;
- Guelph City Police Representative
- Public Health Representative
- Director of Student Housing

All members of the CCG will identify to ensure continuity in the event of member illness. If an outbreak appears imminent on campus, planning should occur to have as many meetings by conference call, to avoid close contact.

The CCG will determine the decision-making structure including incident command, accountability and legal and ethical issues. The CCG will work closely with representatives of the major stakeholder groups on campus (employee and student groups) as communication and consistent messaging will be very important.

The members of the Campus Control Group (CCG) will follow the guidelines for an emergency crisis response. However, it must also consider additional issues unique to a pandemic including:
Confirming that a pandemic is potentially going to impact campus and declaring that the CCG is assuming responsibility for the coordinated response

- Ensuring that actions taken to mitigate impact of the pandemic are not contrary to law
- Identifying protocols for using volunteers to perform critical functions
- Authorizing and coordinating the evacuation and/or quarantine of part, or all, of the University
- Notifying, assistance from and/or liaison with various levels of government and any university or public agencies, as considered necessary
- Confirming that the pandemic, within the University jurisdiction is over and noting that the CCG is relinquishing its responsibility

**Emergency Operating Committee**

The CCG will establish the Emergency Operating Committee and the Operations Manager will act as the liaison between the two. The Group will normally meet by conference call to prevent transmission of the illness to the group.

**ROLE OF WELLINGTON-DUFFERIN-GUELPH PUBLIC HEALTH DURING A PANDEMIC**

Wellington–Dufferin–Guelph Public Health takes the lead in developing a local pandemic influenza plan for the City of Guelph. Although local planning is critical, many decisions made at the federal or provincial levels must be followed locally, such as establishing who has priority in receiving vaccination once a pandemic vaccine becomes available.

The specific Wellington–Dufferin–Guelph Public Health roles during a pandemic influenza emergency response will include:

- Disease surveillance and reporting
o Case investigation and management
o Identification and follow-up of close contacts
o Health risk assessment and communications
o Liaison with the hospitals and other agencies
o Community-based disease control strategies
o Vaccine and antiviral medication administration and distribution

ROLE OF THE UNIVERSITY OF GUELPH DURING A PANDEMIC

The University of Guelph has two primary functions that it must consider during a pandemic:
1. the health and safety of its students, staff and faculty.
2. business continuity

HEALTH AND SAFETY OF THE UNIVERSITY COMMUNITY

There are three components to caring for our university community: 1) education to minimize the number who become ill; 2) containment of the influenza once on campus; and 3) caring for those affected.

EDUCATION AND TRAINING

In order to be proactive, education and training regarding Pandemic Planning is paramount to the success of the University of Guelph minimizing the impact of a pandemic on the community.

Student Health Services and Occupational Health and Wellness will need to assemble and distribute information to increase awareness of pandemic influenza and other infectious diseases. Materials will be shared freely with all members of the campus community using a variety of media tools including: Internet Websites, emails, contests, posters and presentations.

CONTAINMENT AND INFECTION CONTROL
1. **Training**
   All personnel who come in contact with significant numbers of individuals (work-term students, receptionists, secretaries, administrative staff, nurses and physicians), Fire Prevention, members of First Response Team (FRT), and student volunteers will need to be trained in infection control procedures, the use of protective equipment, biological waste disposal procedures and the U of G pandemic plan.

2. **Cleaning Workplaces**
   People with influenza may contaminate their surroundings with respiratory secretions from their nose and mouth. During an outbreak on campus, surfaces that are touched frequently by people (e.g., doorknobs, computer terminals, bathroom faucets or other shared equipment) should be cleaned more often than usual during a pandemic, if possible. See Appendix 6–Custodial Services Outbreak Protocol.

3. **Social Distancing**
   During a pandemic social distancing (reducing or avoiding contact with other people) should be practiced as much as possible. Generally, it is recommended that individuals be 2 meters apart, where possible.

4. **Infection Control Supplies and Estimating Requirements**
   The use of masks and N95 respirators during a pandemic is determined based on a risk assessment of the level of care one would provide to a person exhibiting influenza-like symptoms or the frequency of necessary and unavoidable face-to-face interactions between two individuals. According to the Canadian Pandemic Influenza Plan, there is no evidence that the use of masks in public will protect an individual from infection when the influenza virus is circulating widely in the community. The use of respirators/masks or any other form of personal...
protective equipment is always considered the last line of defense used only when other hazard control options have been evaluated.

Once a pandemic influenza virus is circulating widely, masks will have little impact on the risk of infection in the community as the number of potential sources of infection and exposure circumstances will be too numerous. N95 respirators/masks are most beneficial when used to protect an individual during a specific exposure situation such as a health care worker caring for an individual possibly infected with influenza. Departments providing essential functions will work with the Environmental Health and Safety Department to determine the need for masks and/or respirators. The University will work closely with Public Health when making these decisions. The University will need to have sufficient supplies for those individuals who are performing essential services.

5. **Vaccination and Antiviral Drugs**

Canada has trivalent influenza vaccine available and uses approximately 10 million doses a year. [2] In the event of a Pandemic, Public Health will be responsible for the distribution of the vaccine as per availability, on a priority basis.

Information on Containment is found in Appendix 3, and Infection Control in Appendix 4

**CARING FOR AFFECTED MEMBERS OF THE COMMUNITY**

**UNIVERSITY OF GUELPH STUDENTS**

Students will be of primary concern to the University. Unlike faculty and staff, most students do not have family in the city or a family doctor. With approximately 24,000 registered students, and over 5,000 students in residence, student safety will be a primary issue. Reducing the number of students on campus during an epidemic is the most advantageous option so the first preference is to send
them home. This assumes that classes are cancelled. If not, or if many students fall ill, the institution would be expected to provide the resources and care for those students throughout the pandemic.

It is assumed that in the event of pandemic influenza some students will return home to rejoin their families. Many factors will contribute to the decision to leave campus including whether classes are cancelled; number of sick students on campus, perceived risk of infection, nature of living arrangement (residence, off campus, living alone or with roommates), loss of academic courses or year, lack of available campus services, family situation, distance from home, ability to travel, ability to cross boarders, to name but a few.

**STUDENT HEALTH SERVICES:**
There will be many ill students that will require the support of Student Health Services. Numerous issues need to be addressed:

1. A clinic schedule needs to be developed based on 24/7 operations to determine staffing needs.
2. Develop a protocol for transport of students to the hospital if traditional methods are not available.
3. Develop a plan in collaboration with other departments in SWS for setting up an infirmary and expanding clinical space, including identification of alternate locations and equipment and determine supply and staffing needs.
4. Develop a contingency plan for managing health care needs in the event that human resources and supplies are exhausted.
5. If unable to provide infirmary care due to limited resources, identify community resources that students could access.
6. Develop a communication plan that includes a map, to provide ill students directions about access services.
7. Develop a protocol for monitoring cases residing on and off campus apartments/residences.
8. Develop a protocol for care of the deceased that addresses storage until transfer and notification of the family.
9. Develop a plan for conducting mass immunization clinics, that would depend on vaccine availability.

STUDENT HOUSING SERVICES

Students with mild flu symptoms will be advised to return home and to remain home until the period of communicability has elapsed. For students with roommates, returning home will create problems both real and perceived. Because of the close contact with roommates, it is reasonable to assume an increased risk of infection exposure despite all practical protective measures. However, because the period of communicability can predate the first appearance of symptoms, it is possible that roommates will have already been infected. In the atmosphere of anxiety surrounding an influenza pandemic it is unlikely that the logic of the preceding statement will be recognized let alone acted on. It may be necessary to relocate some if not all, students with symptoms during the period of communicability. One possible approach would be setting aside residence blocks for students who are ill and unable to return home. However, this will require moving healthy students to other areas.

Numerous challenges exist for residence staff in supporting ill students. Such challenges include infection control, housekeeping, food distribution, isolation and cleaning of eating utensils, periodic checks on sick students, medical assessment, controlling anxiety levels of other students and staff and coping with reduced staff numbers.

Significant planning needs to occur for residence students:
1. Identify rooms and buildings that could be used for quarantine, isolation, and residence for students who cannot go home. Public health authorities may suggest utilizing residential space that does not have a centralized ventilation system to avoid spread of aerosolized pathogens. Residential space with self-contained heating and cooling in individual rooms or suites may be more desirable settings in which to isolate or quarantine persons (Refer to Appendix 3. Containment).

2. Develop a procedure for closure and evacuation of campus residence halls and houses in use.

3. Develop a monitoring system for students to know who has gone home, who is ill and being taken care of and who has been isolated.

4. Develop procedures for notifying and relocating students.

5. Develop plans for continuation of housekeeping services and stockpiling items such as cleaning and disinfecting supplies, toilet paper, disposable towels, and eating utensils.

6. Identify communication protocols between housing services and residence life staff as well as with custodial staff, building mechanics and Campus Police.

7. Establish communication protocols with student health for surveillance and reporting illness in the residence halls.

8. Formulate and rehearse plans to address anticipated student needs ranging from delivery of food and medication to providing emotional support.

**NEIGHBOURHOOD RELATIONS**

Off-campus students, and particularly those students living alone, will require assistance. Monitoring the health and status of these students will present a formidable challenge and the establishment of a campus-based helpline will need to be undertaken. Volunteers could be used to assist these students. Returning home with the
assistance of parents or other family members may be advisable for some of these students.

INTERNATIONAL STUDENT AND STUDY ABROAD STUDENT SERVICES

During an influenza pandemic, the federal government or international governments may impose travel restrictions to delay the spread of influenza to other areas. This may prevent out-of-province and international students from returning home. It may also impact the ability of Canadian students to return home. The Centre for International Programs and the International Student Advisor will:

1. Develop procedures for monitoring student travelers entering the campus from affected regions and providing information to health services as well as a plan for communicating with international students and their families regarding travel restrictions and re-entry.
2. Develop procedures of cancelling the arrival of exchange students to Guelph from countries abroad if the government has decided to restrict travel from that area.
3. Develop a plan for communicating with students who are studying abroad or plan to study abroad.
4. Develop guidelines for temporary closure of study abroad programs.
5. Communicate with study abroad program leaders about planning procedures for shelter-in-place, closure decisions, and resources for assisting students who cannot go home.

The decision to call students home or to cancel semester abroad or exchange programs will rest with the CCG. When making this decision, CCG will refer to the Department of Foreign Affairs and International Trade (DFAIT) recommendations regarding travel.
COUNSELLING SERVICES
There will be a significant call on Counselling Services as students deal with illness and possible death of friends and family, and anxiety. The unit needs to:
1. Develop a plan for providing 24/7 counseling services for students, including protocols for providing services via telephone and internet.
2. Plan for recovery:

OCCUPATIONAL HEALTH AND WELLNESS
A pandemic will likely cause a high level of fear and anxiety among the general population. Employees will be concerned about their own health and the health of their families. They may be concerned about potential exposure to influenza in the workplace and, as a result of these concerns, some may refuse to work. Employees will have questions relating to occupational health and safety. Informing employees of their rights, providing training and equipment as appropriate, and communicating openly about emergency planning processes will help to alleviate anxiety. Working with faculty and staff Occupational Health and Wellness will need to provide advice on:
1. Absenteeism and back to work protocols
2. Employee Assistance programs
3. Supplies and containment protocols

2. BUSINESS CONTINUITY
The University must take steps to ensure its core business – research and teaching – continue to the extent possible. There will be significant challenges and difficult decisions to be made. Every attempt will be made to keep critical functions operating. If at all possible, staff need to be paid; supplies need to be purchased; buildings need to be maintained; technology infrastructures need
to be protected. Decisions may need to be made regarding the cancellation of classes or the closing of research labs.

BUSINESS CONTINUITY ISSUES

IDENTIFY ESSENTIAL FUNCTIONS AND PERSONNEL
One of the key elements in any plan is to define the essential functions that are critical to maintain. These services are identified in Appendix 1 Essential Services. Some of these critical functions and personnel will vary according to the extent of the illnesses in the city on campus. In addition, it will depend upon whether classes are cancelled. All essential services need to be reviewed to determine which can be performed from off-site. At all times, minimizing human to human contact should be a goal.

DEVELOP A COMMUNICATION STRATEGY
A spokesperson for the University will be identified by the CCG to communicate to the community. The messages will be informative, factual and clear and aim to minimize undue panic in the community. A central reporting plan will be established that monitors the phase of illness, number of reported cases, employee absences, students in isolation, and transports to hospital. Phone trees or email lists will be employed to ensure rapid and efficient communication with a large number of students, staff and faculty. The university will communicate early in the pandemic and as often as possible to keep the information current and reduce anxiety. Details on communication issues are identified in Appendix 2 – Communicating.

RESPOND TO ISSUES OF ABSENTEEISM
High rates of absenteeism may result in changes to staffing, chains of command, hours of work, or employee responsibilities. During an emergency, the University may need to delegate new job functions to employees or move employees to other job sites where they are most needed. During a pandemic, some employees
will develop symptoms of influenza while at work. These individuals should immediately leave the workplace to help slow the transmission of the virus. Ill employees should be requested by their manager or supervisor to leave work even if they do not have sick day credits. There are numerous policies that will need to be considered. Human Resources, working in consultation with the employee groups will need to:

1. Review with list of essential personnel and essential functions
2. Encourage staff and faculty to update emergency contact information.
3. Review vacation/sick leave guidelines for applicability
4. Develop and articulate clearly the University’s position on employee requirements for those who are ill, and for those who have ill members at home.
5. Establish return-to-work guidelines including recommended number of hours/days before returning to work that is consistent with the case definition.
6. Prepare communications for supervisors and the campus work force addressing guidelines related to reporting of ill, business travel procedures, information to persons returning from affected areas, and access to mental health resources. (i.e., Employee Assistance Programs).
7. Develop work-at-home guidelines that address telecommunicating issues.
8. Assist in the recruitment of a volunteer work force and identification of cross-training needs.
9. Develop procedures for changes to hours of work (i.e., work outside of normal business hours)
10. Cross training
MAINTAINING THE CLASS SCHEDULE
The University of Guelph will work hard to maintain classes. However, Public Health will likely close large gatherings if many are developing symptoms on-campus. Every attempt should be made to offer courses on-line, so students do not lose their year.

ADHERING TO SAFETY ISSUES
During a pandemic, there will be increased incidents of emergency calls, students needing support, and individuals looking for information on students. Campus Police will need to:
1. Develop procedures for securing buildings, protecting stored supplies, and restricting access to campus.
2. Establish ongoing communication with local police, fire, and emergency response personnel in order to coordinate efforts for managing safety issues.
3. Develop triage protocols for responding to students in distress or requesting calls for transport
4. Establish a communication plan with student health and counseling services, residence life, and student affairs for reporting calls and transport in the case of emergency.

BUILDING MAINTENANCE
Buildings will need to continue to be lit, heated and cleaned. Physical Resources will need to:
1. Develop a contingency plan for maintaining the central utilities plant in times of high employee absenteeism. This may be particularly difficult due to the specialized nature of some of these positions.
2. Discuss contingency plans in case of fuel, water, and energy shortages including the availability of emergency generators.
3. Identify building ventilation systems especially in those areas considered for quarantine, isolation, and health care delivery.
ACADEMIC AFFAIRS

Students will miss class as will faculty. In addition, there is the potential that classes will need to be cancelled. The Provost, working with the deans will need to:

1. Develop a policy regarding student academic status and accommodation for students missing classes, assignments, labs and exams due to illness or absence due to the risk of illness.

2. Requests for physician notes will contribute to the demands on the health care sector unnecessarily. Current policies that may pose a barrier to effective disease control and prevention should be suspended or revised as appropriate.

3. Develop a procedure for students who are in isolation or quarantine to obtain class notes.

4. Develop and disseminate alternative procedures for completing course work (i.e., web-based instruction, lessons and assignments delivered via snail mail).

5. Develop back-up plans to offer the course if faculty are ill.

6. Determine the criteria to be employed to determine when classes should be cancelled.

7. Identify ways to continue classes on-line.

RESEARCH

Some researchers may be able to continue working during a pandemic, especially if they are working alone or in small groups in spacious labs and buildings have not been closed. The ability to continue research will to some extent be dependent upon safety issues and the availability of other support services such as Environmental Health and Safety and Physical Plant. The Office of Research, working with the deans will need to:

1. Determine campus buildings that may remain open for research.

2. Establish a plan for maintaining security in laboratory spaces.
3. Establish a plan for care of laboratory animals if research ceases due to safety issue or high absenteeism among the animal handlers.

4. Establish a plan for specimen storage and managing experiments in process.

**BUSINESS AND FINANCE**

The University will need to continue to operate, although many services will be reduced or discontinued. Issues arising to consider include:

- Identification of emergency funding to cover purchases for stockpiling and costs of rapid procurement and payment for supplies, equipment, and services.
- Additional expenses that arise due to the loss of service.
- Intangible expenses such as loss of image or reputation.
- Identification of any insurance requirements.

**HEALTH SERVICES SUPPLIES**

Once a pandemic starts, it will be difficult, if not impossible, to obtain medical supplies; therefore, Occupational Health and Wellness and Student Health Services will pool their resources and supplies. Purchasing ahead and storing nonperishable goods is a prudent strategy. Quantities should be based on a best estimate of the number of students and employees (i.e., RA’s) who may not be able to leave campus and the attack rate discussed earlier. Supplies will need to be controlled and items such as masks provided to essential personnel and those using Health Services only. The University will not have the capacity to provide supplies for all members of its community. Community members will be urged to purchase home survival kits well in advance of stage 5 of a pandemic.

1. Compile a list of supplies that would be needed, such as respiratory protection equipment, gloves, gowns, protective eyewear, medications (antibiotics), disinfectants, and IV fluids.
2. Identify supply sources and a storage area.
3. Provide administration with a cost estimate for securing supplies.
4. Maintain a stock supply of necessary medications and equipment; inventory and rotate supplies prior to expiration, or as appropriate.
5. Investigate the feasibility of establishing negative pressure rooms in the clinic, equipment necessary, and cost/benefit. Consult with the Environmental Health and Safety Department for assistance in this area.
6. Establish a plan for continuation of cleaning services and waste removal services including triggers to increase the frequency of the scheduling of these services.

HOSPITALITY SERVICES
During an influenza pandemic, Hospitality Services will need to continue to operate, but primarily for residence students. Consideration should be given to:
1. Determine non-perishable foodstuffs and drinks that can be stockpiled and stored.
2. Develop a procedure for delivery of foodstuffs to residential areas, quarantined students, and the infirmary.
3. Consider moving to disposable cutlery and pre-packaged pre-heated food to reduce need for staff.

LEGAL ISSUES
Legal counsel will be called on to provide advice on legal issues (e.g., restricting access or travel, isolation/quarantine, liability, compulsory vaccination for students, and prohibition of mass gatherings). Other issues include insurance issues and labour and employment law issues.
- Address liability, insurance and temporary licensing issues for retired health-care workers and volunteers who may be
working in areas outside their training and competence in health and emergency services.

- Ensure a legislative framework for compliance with the International Health Regulations.

**BIOLOGICAL WASTE DISPOSAL**

Plans need to be developed in the event that the Waste Disposal Company does not have sufficient staff to do normal pick-up.