



KAPUSKASING EMERGENCY PLAN

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KAPUSKASING EMERGENCY PLAN

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ABBREVIATION USED IN THIS PLAN

EOC	Emergency Operation Centre
MECG	Municipal Emergency Control Group
ESM	Emergency Site Manager
OPP	Ontario Provincial Police
CEMC	Community Emergency Management Coordinator

ANNEXES

- "A" Notification List
- "B" Emergency Operations Centre Layout and Equipment
- "C" Vital Services Directory
- "D" Mutual and Automatic Aid Plan and Program for the District of Cochrane
- "E" Emergency Public Information Plan
- "F" Evacuation Procedures
- "G" Street Map
- "H" Declaration and Termination of an Emergency form
- "I" Emergency Plan for Animals
- "J" Kapuskasing Pandemic Plan

1.0 PREAMBLE

This plan has been prepared to provide key officials, agencies and departments within the Town of Kapuskasing with a general guideline to the initial response to an emergency and an overview of their responsibilities during an emergency.

For this plan to be effective, it is important that all concerned be made aware of its provisions and that every official, agency and department be prepared to carry out their assigned functions and responsibilities in an emergency.

The ***Emergency Management and Civil Protection Act, 2006*** is the legal authority for this plan. It states that "***The head of council of a municipality may declare that an emergency exists in the municipality or in any part thereof and may take such action and make such orders as he or she considers necessary and are not contrary to law to implement the emergency plan of the municipality and to protect property and the health, safety and welfare of the inhabitants of the emergency area.***"

With respect to personal liability and compensation, the ***Emergency Management and Civil Protection Act*** further states that "No action or other proceeding lies or shall be instituted against a member of council, an employee of a municipality, an employee of a local services board, an employee of a district social services administration board, a minister of the Crown, a public servant or any other individual acting pursuant to this Act or an order made under this Act for any act done in good faith in the exercise or performance or the intended exercise or performance of any power or duty under this Act or an order under this Act or for neglect or default in the good faith exercise or performance of such a power or duty. 2006, c. 13, s. 1 (6); 2006, c. 35, Sched. C, s. 32 (6)."

.... "Where money is expended or cost is incurred by a municipality or the Crown in the implementation of an emergency plan or in connection with an emergency, the municipality or the Crown, as the case may be, has a right of action against any person who caused the emergency for the recovery of such money or cost, and for the purposes of this section, "municipality" includes a local board of a municipality and a local services board. R.S.O. 1990, c. E.9, s. 12; 1999, c. 12, Sched. P, s. 8."

Emergencies are defined as situations or the threat of impending situations abnormally affecting property and the health, safety and welfare of the community, which by their nature or magnitude require a co-ordinated response by a number of agencies under the direction of the Municipal Emergency Control Group. These are distinct from the normal, day-to-day operations carried out by the first response agencies.

While many emergencies could occur within the Town of Kapuskasing, those most likely to occur are: blizzards, transportation accidents involving hazardous materials, air or rail crashes, toxic or flammable gas leaks, electrical power blackouts, building or structural collapse, uncontrollable fires, explosions, or any combinations thereof.

2.0 REQUEST FOR ASSISTANCE

Assistance may be requested from the Province of Ontario at any time without any loss of control or authority. Such request can be done by contacting Emergency Management Ontario:

Provincial Emergency Operations Centre: 866-314-0472
416-314-0472
Fax: 416-314-6220
Email: peocdo01@ontario.ca

3.0 AIM

The aim of this plan is to make provisions for extraordinary arrangements and measures that may have to be taken to protect the health, safety and welfare of the inhabitants of the Town of Kapuskasing and/or evacuated communities when faced with an emergency.

4.0 EMERGENCY NOTIFICATION SYSTEM

The Municipal Emergency Notification System may be activated by any member of the Municipal Emergency Control Group (refer to Section 7, page 7), or other emergency service personnel by contacting the **Chief Administrative Officer** directly or through the **911** dispatch.

Upon receipt of a warning of a real or potential emergency, the responding department will immediately contact the **911** dispatch, to request that the notification system be activated.

Upon receipt of the warning, the **911** dispatch will notify, or cause to have notified all members of the Municipal Emergency Control Group (MECG).

Upon notification, it is the responsibility of all MECG officials to assemble and manage the situation using the procedures set out in this emergency plan.

Where a threat of an impending emergency exists, the MECG will be notified and placed on "standby".

The emergency notification list is attached as **Annex "A"**.

4.1 EMERGENCY NOTIFICATION PROCEDURE

A. Initiation

Notification regarding an actual or pending emergency can be initiated by:

- (a) **Directly contacting the Emergency Operations Officer; or**
- (b) **Contacting the 911 dispatch.**

If notification is initiated through the 911 dispatch, the 911 dispatch centre shall ensure that the Emergency Operations Officer (Chief Administrative Officer or his alternate) is contacted in order that the emergency notification procedure may continue.

B. Fan-Out

Kapuskasung Emergency Operations Officer initiates the emergency fan-out procedure in accordance with the following:

Stage 1	Operations Officer contacts	Mayor Emerg. Mgt Coordinators OPP Fire Chief Public Works Director Senior Health Officer Related agencies/services
Stage 2	Clerk contacts	Council Members Support Staff (as required)
	Fire Chief contacts	Mutual Aid Co-ordinator
	Social Services Officer contacts	Health Officer (as required)

The content of messages transferred during Emergency Notification procedures will be standardized and kept as brief as possible, and including the following:

- *Reason for call: describe (pending) emergency situation.
- *Status of notification: "**STAND-BY**" or "**CALL TO ASSEMBLE**".
- *Location of Emergency Operations Centre (EOC).
- *Special precautions to take (i.e. routes to EOC, hazards, etc.).
- *Reminder and instructions concerning notification fan-out.
- *Request to repeat message to ensure information is understood.

5.0 DECLARATION OF A MUNICIPAL EMERGENCY

When an emergency exists but has not yet been declared to exist, municipal employees may take such action(s) under this emergency plan as may be required to protect lives and property in the Town of Kapuskasing.

The Mayor or Acting Mayor of the Town of Kapuskasing, as the Head of Council, is responsible for declaring that a municipal emergency exists. This decision is usually made in consultation with other members of the MCEG.

When a community declares an emergency, it must notify Emergency Management Ontario immediately at **1-866-314-0472**, and fax a copy of the declaration as soon as possible to 1-416-314-6220.

Declaration form (**Annex H**)

Upon such declaration, the Mayor will notify:

- (a) Emergency Management Ontario
- (b) Town Council
- (c) the public
- (d) neighboring municipal officials (as required).

A municipal emergency may be declared or terminated at any time by:

- (a) the Mayor or Acting Mayor, or
- (b) Town Council, or
- (c) the Premier of Ontario.

Upon termination of a municipal emergency, the Mayor will notify:

- (a) Emergency Management Ontario
- (b) Town Council
- (c) the public
- (d) neighboring municipal officials (as required).

6.0 EMERGENCY OPERATIONS CENTRE (EOC)

The MCEG will report to the Emergency Operations Centre located in the Council Chambers at the Kapuskasing Civic Centre at 88 Riverside Drive.

In the event this location cannot be used, then the secondary location will be the Kapuskasing Fire Department at 76 Brunelle Road North.

The layout and equipment of the Emergency Operations Centres are detailed in **Annex "B"**.

7.0 MUNICIPAL EMERGENCY CONTROL GROUP (MECG)

The emergency responses will be directed and controlled by officials who are responsible for providing the essential services necessary to minimize the effects of an emergency on the municipality.

This group is known as the MECG which consists of the following officials:

- (a) Chief Administrative Officer
- (b) General Manager of Protective Services/CEMC
- (c) General Manager of Public Works
- (d) Municipal Clerk
- (e) Evacuation Coordinator/Alt CEMC

Additional personnel called or added to the MECG may include:

- (a) A representative of the Ministry of Natural Resources
- (b) Liaison staff from provincial and federal ministries
- (c) Any other officials, experts or representatives as indicated in **Annex "C"**, deemed necessary by the MECG.

The Control Group may function with only a limited number of persons depending on the emergency. While the MECG may not require the presence of all the people listed as members of the control group, all members of the MECG must be notified.

7.1 BUSINESS CYCLE

Members of the MECG will gather at regular intervals to inform each other of actions taken and problems encountered. Frequency of meetings and agenda items will be established by the Operations Officer. Meetings will be kept as brief as possible thus allowing members to carry out their individual responsibilities. Maps and status board will be prominently displayed and kept up to date by the Operations Officer.

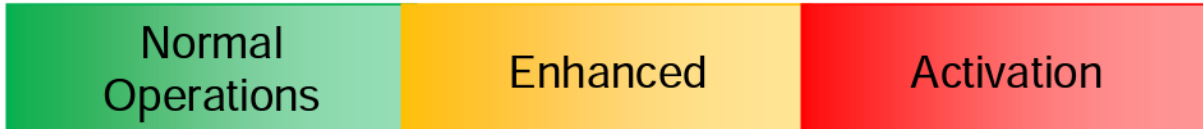
8.0 EMERGENCY RESPONSE PLAN

One of the many components of the Emergency Management Program is the establishment of a municipal emergency response plan. The Town of Kapuskasing's Emergency Response Plan establishes an operational framework to ensure that the Town is prepared to deal with all potential community hazards. It is the methodology through which the Town will mobilize its resources in the event of an emergency, coordinate the earliest possible response, and restore the municipality to a state of normalcy.

The Emergency Response Plan alone cannot guarantee an efficient, effective response to an emergency, but rather it is a tool that ensures all agencies involved in an emergency are fully aware of their respective roles and responsibilities.

8.1 CONCEPT OF OPERATIONS

The Town of Kapuskasing has adopted three operational levels to identify the nature of municipal emergency management response required in the community at any given time. They are:



Normal Operations

Normal Operations consists of the daily responsibilities that agencies must carry out to ensure readiness in the event of an emergency situation. Agencies are engaged in preparedness, training, exercise activities, review of departmental response plans and equipment checks to ensure a continuous state of readiness should the need arise.

Enhanced

At the Enhanced Level, there is an indication of a highly probable hazardous condition and a strong potential for property damage or loss of life. During this operational level, the MECG is meeting regularly in anticipation of the Town's Emergency Response Plan being activated.

Activation

Activation indicates that extremely hazardous conditions are imminent or occurring requiring the activation of the Town's Emergency Response Plan. During this level, the Emergency Operations Centre may be partially or fully activated as per article 8.2.

As information about an incident is gathered and the situation is better understood, the level may be modified.

8.2 ACTIVATION OF THE PLAN

The Town of Kapuskasing's Emergency Response Plan can be activated by:

- i) The MECG or the most senior on scene official (Police, Fire, Paramedic Services, Public Works) of the agency most directly involved in the response and/or mitigation of an emergency. The request for activation will be based on the size, seriousness, or complexity of the emergency and the response capability of that agency.

9.0 RESPONSIBILITIES

Upon notification of an emergency, for the purpose of this plan, the following Town employees shall assume the roles and responsibilities:

MUNICIPAL EMPLOYEE TITLE	RESPONSIBILITIES
Chief Administrative Officer and/or alternate	Operations Officer Public Information Coordinator Telecommunications Coordinator
Treasurer and/or alternate	Senior Social Services Officer Property Management Officer
Clerk and/or alternate	Emergency Plan Coordinator Human Resource Officer Citizen Inquiry Supervisor
Recreation Director and/or alternate	Transport Coordinator
General Manager of Public Works and/or alternate	Infrastructure
Fire Chief and/or Community Emergency Management Coordinators	Incident Management Operations Officer Evacuation Coordinator

9.1 GROUP RESPONSIBILITIES

The actions or decisions which the members of the MECG are likely to be responsible for are:

- (a) Calling out and mobilizing their emergency service, agency and equipment.
- (b) Co-ordinate and directing their service and ensuring that any actions necessary for the mitigation of the effects of the emergency are taken, provided they are not contrary to law.
- (c) Determining if the location and composition of the MECG are appropriate.
- (d) Advising the Mayor as to whether the declaration of an emergency is recommended.
- (e) Advising the Mayor on the need to designate all or part of the Town as an emergency area.
- (f) Ensuring that an Emergency Site Manager (ESM) is appointed.
- (g) Ordering, coordinating and/or overseeing the evacuation of inhabitants considered to be in danger.

- (h) Discontinuing utilities or services provided by public or private concerns (i.e. hydro, water, gas, closing down the business sectors, including the Mall and Circle).
- (i) Arranging for services and equipment from local agencies not under municipal control (i.e. private contractors, volunteer agencies, service clubs).
- (j) Notifying, requesting assistance from and/or liaison with various levels of government and any public or private agencies not under municipal control, as considered necessary.
- (k) Determining if additional volunteers are required and if appeals for volunteers are warranted.
- (l) Determining if additional transport is required for evacuation or transport of persons and/or supplies.
- (m) Ensuring that pertinent information regarding the emergency is promptly disseminated to the media and the public by the Public Information Coordinator and Citizen Inquiry Supervisor.
- (n) Determining the need to establish advisory group(s) and/or sub-committees.
- (o) Authorizing expenditure of money required to deal with the emergency.
- (p) Notifying the service, agency or group under their direction, of the termination of the emergency.
- (q) Maintaining a log outlining decisions made and action taken, and submitting a summary of the log to the Chief Administrative Officer within one week of the termination of the emergency, as required.
- (r) Participating in the debriefing following the emergency.

9.2 INDIVIDUAL RESPONSIBILITY

The following sections indicate specific responsibilities according to position/agency:

9.2.1 Mayor

The Mayor is responsible for:

- (a) Declaring an emergency to exist within the designated area.
- (b) Declaring that the emergency has terminated.
(Note: Council may also terminate the emergency).
- (c) Notifying the Solicitor General of Ontario of the declaration of the emergency, and termination of the emergency.
- (d) Ensuring that the members of Council are advised of the declaration and termination of an emergency, and are kept informed of the emergency situation.

9.2.2 Chief Administrative Officer

The Senior Administrative Officer for the Town of Kapuskasing is responsible for:

- (a) Activating the emergency notification system through the local detachment of the OPP.
- (b) As the Operations Officer, co-ordinate all operations within the Emergency Operations Centre, including the scheduling of regular meetings.
- (c) Advising the Mayor on policies and procedures, as appropriate.
- (d) Approving, in conjunction with the Mayor, major announcements and media releases prepared by the Public Information Coordinator, in consultation with MCEG.
- (e) Ensuring that a communication link is established between the MCEG and the ESM.
- (f) Calling out additional Town staff to provide assistance, as required.

9.2.3 Local OPP Detachment

The Senior OPP Officer of the local detachment is responsible for:

- (a) Notification of necessary emergency and municipal services, as required.
- (b) The establishment of a site command post with communication to the EOC.
- (c) Establishing an ongoing communication link with senior police official at the scene of the emergency.
- (d) The establishment of an inner perimeter within the emergency area.
- (e) The establishment of an outer perimeter in the vicinity of the emergency to facilitate the movement of emergency vehicles and restrict access to all but essential emergency personnel.
- (f) The provision of traffic control to facilitate the movement of emergency vehicles.
- (g) Alerting persons endangered by the emergency and coordinating evacuation procedures.
- (h) The designation and opening of evacuee centres, as required.
- (i) Liaison with the Social Services Officer regarding the establishment and operation of evacuation and reception centres.
- (j) The protection of life and property and the provision of law and order.
- (k) The provision of police service in evacuee centres, morgues, and other facilities, as required.
- (l) Notifying the coroner of fatalities.
- (m) Liaison with other municipal, provincial, and federal police agencies, as required.
- (n) Providing an Emergency Site Manager, if required.

9.2.4 Fire Chief and/or CEMC

The Fire Chief is responsible for:

- (a) Activating the emergency notification system through the local detachment of the Ontario Provincial Police force.
- (b) Providing the MECG with information and advice on firefighting and rescue matters.
- (c) an ongoing communication link with the senior fire official at the scene of the emergency.
- (d) Informing the Mutual Aid Fire Coordinator and/or initiating mutual aid arrangements for the provision of additional firefighting manpower and equipment, if needed, detailed in **Annex "D"**.
- (e) Determining if additional or special equipment is needed and recommending possible sources of supply (i.e. breathing apparatus, protective clothing, etc.).
- (f) Providing assistance to other municipal departments and agencies and being prepared to take charge of or contribute to non-firefighting operations if necessary (i.e. rescue, first aid, casualty collection, evacuation, etc.).
- (g) Providing an Emergency Site Manager, if required.
- (h) Chairing meeting of the Municipal Emergency Control Group.

9.2.5 General Manager of Public Works

The General Manager of Public Works is responsible for:

- (a) Activating the emergency notification system through the local detachment of the Ontario Provincial Police.
- (b) Providing the MECG with information and advice on engineering matters.
- (c) Liaison with the senior public works officer from the neighboring municipality(ies) to ensure a coordinated response.
- (d) The provision of engineering assistance.
- (e) The construction, maintenance and repair of Town roads.
- (f) The maintenance of sanitary sewage and water system.
- (g) The provision of equipment for emergency pumping operations.
- (h) Liaison with Fire Chief concerning emergency water supplies for firefighting purposes.
- (i) The provision of emergency potable water, supplies and sanitation facilities to the requirements of the Medical Officer of Health.
- (j) Discontinuing any public works service or utility to any consumer, as required, and restoring these services when appropriate.
- (k) Liaison with public utilities to disconnect any service representing a hazard and/or to arrange for the provision of alternate services or functions.
- (l) Providing public works vehicles and equipment as required by any other emergency services.

- (m) Maintaining liaison with conservation and environmental agencies and being prepared to take preventative action.
- (n) Providing an Emergency Site Manager, if required.

9.2.6 Emergency Health Services Representative

The Medical Officer of Health or alternate is responsible for:

- a) **Liaison:** ensure liaison with the Ontario Ministry of Health and Long Term Care (MOHLTC), Public Health Branch.
- b) **Monitoring of water supplies:** including approval of sources, advice on treatment methods, monitoring to prevent pollution of selected sources, and sampling of the distribution system to ensure quality.
- c) **Food safety:** including ensuring the sanitary control of food supplies at the point of supply, during distribution, packaging and processing, providing advice on potentially safe or contaminated foods, and providing information on mass feeding including storage, food handling, personal sanitation and refuse disposal.
- d) **Evacuation centers:** in the event of mass evacuation to a central location, the Health Unit will monitor and provide information on the provision of sanitary facilities, the safety of the water supply and the food service system. The Health Unit will also provide surveillance for communicable disease illness and outbreaks.
- e) **Waste disposal:** including advice on the disposal of all sanitary waste and monitoring of disposal of refuse.
- f) **Communicable Diseases:** provide information and direction on communicable diseases including such areas as follow up, immunization, and isolation. Provide public health management of cases of reportable diseases.
- g) **Disease-related emergencies:** in the event of a disease-related emergency or pandemic, ensure coordination of all efforts and response to control and prevent the spread of disease, according to MOHLTC policies.
- h) **Mass Casualties:** in the event of mass casualties, monitor the situation to ensure the early and sanitary disposition of human remains in order to eliminate the spread of disease.

Information and advice on pest control, personal sanitation, emergency cleanups and disinfections, waste disposal and food and water safety will be provided to the public as required.

The Health Unit will provide advice, in consultation with other agencies, to the public and to local physicians with regards to health consequences, both acute and long term, of exposure to toxic chemicals.

The Health Unit will perform closure and placarding of public and commercial facilities because of health hazards.

Although Health Unit staff cannot become involved in the provision of First Aid, triage or other medical functions, as employees of the Health Unit are under the direction of the Medical Officer of Health, all

local staff not required during an emergency to perform Health Unit work, could be utilized as volunteers under the direction and responsibility of the local municipality or hospital.

9.2.7 Telecommunications Coordinator

The Telecommunications Coordinator is responsible for:

- (a) Activating the emergency notification system of the local radio stations and television networks.
- (b) Initiating the necessary action to ensure the telephone system at the municipal offices functions as effectively as possible, as the situation dictates.
- (c) Ensuring that the emergency communications centre is properly equipped and staffed, and working to correct any problems which may arise.
- (d) Maintaining an inventory of municipal and private sector communications equipment and facilities within the municipality which could, in an emergency, be used to augment existing communications system.
- (e) Making arrangements to acquire additional communications resources during an emergency.

9.2.8 Public Information Coordinator

The Chief Administrative Officer will act as the Public Information Coordinator during an emergency. The Public Information Coordinator is responsible for the dissemination of news and information to the media and the public as described in the public information plan detailed in **Annex "E"**.

9.3 KEY AGENCIES

In an emergency, a number of key agencies including the local school boards and Sensenbrenner Hospital may be required to work with the Municipal Emergency Control Group. Responsibilities of the two agencies indicated include but are not limited to the following:

9.3.1 School Boards

The School Boards are responsible for:

- (a) The provision of any school (as appropriate and available) for use as an evacuation or reception centre.
- (b) Upon being contacted by the Senior Social Services Officer or designate, providing representative(s) from each School Board to coordinate and provide direction with respect to the maintenance, use and operation of the facilities being utilized as evacuation or reception centres.
- (c) In the event of an emergency during school hours, the principal(s) of the affected school(s) (until directed otherwise) is/are responsible for
 - i) implementing the school "Stay-Put" Emergency Plan; or
 - ii) Implementing the school "Evacuation" Plan;As advised by the MCEG, depending on the nature and scope of the emergency.

9.3.2 Sensenbrenner Hospital Administrator

The Sensenbrenner Hospital Administrator is responsible for:

- (a) Implementing the hospital emergency plan.
- (b) Liaison with the Medical Officer of Health and local ambulance representatives with respect to hospital and medical matters, as required.
- (c) Evaluating requests for the provision of medical site teams/ medical triage teams.
- (d) Liaison with Ministry of Health, as appropriate.

9.3.3 Other Lead Agencies

Additional personnel called or added to the Municipal Emergency Control Group may include:

- (a) A representative of federal and/or provincial government ministry/agency.
- (b) Liaison staff from provincial and federal ministries.
- (c) Any other officials, experts or representative deemed necessary by the Municipal Emergency Control Group.
- (d) The Canadian Red Cross agency for disaster relief and assistance related to evacuations. (Registration and inquiry to help reunite families and locate missing persons. Assistance with immediate basic needs such as provision of lodging, food, personal services and emergency clothing).

9.4 SUPPORT AND ADVISORY STAFF

The following staff may be required to provide support, logistics and advice to the MECG:

- (a) Clerk.
- (b) Treasurer
- (c) Recreation Director.
- (d) Legal Services Officer.

9.5 INDIVIDUAL RESPONSIBILITIES

9.5.1 Clerk

The Clerk is responsible for:

- (a) Assisting the Chief Administrative Officer as required.
- (b) Ensuring all important decisions made and actions taken by the MECG are recorded.
- (c) Upon direction from the Chief Administrative Officer, notifying the required support and advisory staff of the emergency, and the location of the Emergency Operations Centre.
- (d) Initiating the opening, operation and staffing of switchboard at the municipal offices, as the situation dictates, and ensuring operators are informed of MECG members' telephone numbers in the EOC.
- (e) Assuming the responsibilities of the Citizen Inquiry Supervisor.
- (f) Arranging for printing of material, as required.
- (g) Coordinating the provision of clerical staff to assist in the Emergency Operations Centre, as required.
- (h) Upon direction by the Mayor, ensuring that all Council members are advised of the declaration and termination of declaration of the emergency.
- (i) Upon direction by the Mayor, arranging a special meeting(s) of Council, as required, and advising Council members of the time, date and location of the meeting.
- (j) Procuring staff to assist, as required.

9.5.2 Human Resources Officer

The Human Resources Officer is responsible for:

- (a) Coordinating and processing requests for human resources.
- (b) Under the direction of the MECG, coordinating offers of, and appeals for, volunteers.
- (c) Selecting the most appropriate site(s) for registration of human resources.
- (d) Ensuring records of human resources and administrative detail, that

- may involve financial liability, are completed.
- (e) When volunteers are involved, ensuring that a Volunteer Registration Form is completed, and a copy of the form is retained for Town records.
- (f) Ensuring identification cards are issued to volunteers and temporary employees, where practical.
- (g) Arranging for transportation of human resources to and from site(s).
- (h) Obtaining assistance, if necessary, from Employment and Immigration Canada, as well as other government departments, public and private agencies and volunteer groups.

9.5.3 Treasurer

The Treasurer is responsible for:

- (a) The provision of information and advice on financial matters as they relate to the emergency.
- (b) Liaison, if necessary, with the Treasurer of neighboring municipalities.
- (c) Ensuring that records of expenses are maintained for future claim purposes.
- (d) Ensuring the prompt payment and settlement of all legitimate invoices and claims incurred during an emergency.

9.5.4 Senior Social Services Officer

The Senior Social Services Officer is responsible for:

- (a) Ensuring the well-being of residents who have been displaced from their homes by arranging emergency lodging, clothing, feeding, registration and inquiries and personal services.
- (b) Supervising the opening and operation of temporary and/or long term evacuee centres, and ensuring they are adequately staffed.
- (c) Liaison with the OPP with respect to the pre-designation of evacuee centres which can be opened on short notice.
- (d) Liaison with the Medical Officer of Health on areas of mutual concern regarding operations in evacuee centres.
- (e) Ensuring that a representative of each School Board is notified when a facility(ies) is/are required as evacuee reception centre(s), and that staff and volunteers utilizing the school facility(s) take direction from the Board representative(s) with respect to its/their maintenance, use and operation.
- (f) Liaison with the North Centennial Manor and Extendicare Nursing Home, as required.

9.5.5 Transportation Coordinator

The Transportation Coordinator is responsible for:

- (a) Coordinating the acquisition, distribution and scheduling of various modes of transport (i.e. school buses, trains, and trucks) for the purpose of transporting persons and/or supplies, as required, by members of the MECG and the support and advisory staff.
- (b) Procuring staff to assist, as required.
- (c) Ensuring that a record is maintained of drivers and operators involved.

9.5.6 Property Manager

The Property Manager is responsible for:

- (a) Opening and maintaining the municipal offices.
- (b) Providing security for the municipal offices, as required.
- (c) Providing identification cards to MECG members and support staff.
- (d) Coordinating the maintenance and operation of feeding, sleeping and meeting areas of the MECG, as required.
- (e) Procuring staff to assist, as required.

9.5.7 Community Emergency Management Coordinator

The Municipal Emergency Plan Coordinator is responsible for:

- (a) Acting in a resources and advisory capacity to the Emergency Municipal Emergency Control Group, and other emergency and support staff on emergency planning matters, as required.
- (b) Providing guidance and assistance to the various sub-committees, groups, department and personnel involved at the Emergency Operations Centre, and any other location, as required.
- (c) Co-ordination and preparation of the report on the emergency and the post emergency debriefing, as required.
- (d) Liaising with other agencies, as required by the MECG.
- (e) When required, assisting the Emergency Site Coordinator as appointed by the MECG in fulfilling their responsibilities.
- (f) Chairing meeting of the Municipal Emergency Control Group, if required.

9.5.8 Legal Services Officer (Town Solicitor)

The Legal Services Officer is responsible for:

- (a) The provision of advice to any member of the MECG on matters of a legal nature as they apply to the actions of the Town of Kapuskasing

in its response to the emergency, as required.

9.5.9 Emergency Site Manager

An Emergency Site Manager will be appointed by the MECG from one of the lead agencies responding to the emergency.

A senior officer of the police force or fire department, or other officials will be appointed depending on the nature of the emergency.

Once appointed, the Emergency Site Manager will be responsible for directing the activities of all agencies at the scene, and will be relieved of all other responsibilities.

The Emergency Site Manager is responsible for:

- (a) Ensuring access to the site is limited to essential personnel, and that the site is appropriately organized.
- (b) Establishing and maintaining communications.
- (c) Deciding what is the aim of the emergency response (i.e. Can the problem be solved, or should you allow the event to run its course and simply act to preserve life or property? Do you fight the emergency or flee from it?).
- (d) Defining priorities, because resources are limited. In doing this, it is helpful to remember what the aim is.
- (e) Administration and logistics - food, fuel sanitation, rest areas, etc.
- (f) Acquire information about the emergency and the actions which are being taken to bring it under control, and make sure that information is disseminated to the appropriate agencies.
- (g) Establishing a meeting and briefing cycle where all agencies involved with the site operations meet to exchange information, make decisions and ensure all information is disseminated.
- (h) Establishing and maintaining communications, ensuring that information flows from the site to the EOC, and direction from the EOC is transmitted to the site.
- (i) Learning what resources are available within the municipality and from other sources.
- (j) Maintaining a reserve of resources and manpower to deal with the unexpected.
- (k) Arranging shifts, and ensuring rest schedules are enforced in a protracted operation.

10.0 PLAN MAINTENANCE AND REVISION

10.1 Annual Review

This plan will be reviewed annually and, where necessary, revised by a meeting(s) of the MCEG/Emergency Management Committee.

Each time this plan is revised, it must be forwarded to Council for approval. However, revisions to the annexes and minor administrative changes can be made without resubmitting the plan to Council each time.

It is the responsibility of each person, agency, service department named within this emergency plan to notify the Community Emergency Management Coordinator forthwith, of any revisions to the annexes, administrative changes.

10.2 Testing of Plan

An annual exercise will be conducted in order to test the overall effectiveness of this emergency plan and provide training to the MCEG. Revisions to this plan should incorporate recommendations stemming from such exercises.

10.3 Internal Procedures

Each service involved with this emergency plan will prepare functional emergency procedures or guidelines how it will fulfill its responsibilities during an emergency. Each service will ensure that it designates a member of its staff to maintain and revise its own emergency procedures or guidelines.

KAPUSKASING EMERGENCY PLAN
ANNEX "A"
MUNICIPAL EMERGENCY CONTROL GROUP

NOTIFICATION LIST		
TITLE	NAME	ALTERNATE
Mayor dave.plourde@kapuskasing.ca	DAVE PLOURDE 705-337-4250 (Mayor's Office) 705-335-1615 (Cellular)	DEPUTY MAYOR Name and phone number supplied by Operations Officer or alternate
Chief Administrative Officer guylain.baril@kapuskasing.ca chantal.guillemette@kapuskasing.ca	GUYLAIN BARIL Chief Administrative Officer 705-337-4253 (Office) 705-337-1194 (Residence) 705-332-2755 (Cellular)	CHANTAL GUILLEMETTE Clerk 705-337-4254 (Office) 705-335-1068 (Cellular)
Public Works Director Eric.Cote@kapuskasing.ca pierre.quevremont@kapuskasing.ca	ERIC COTE 705-337-4269 (Office) 705-367-6145 (Cellular)	PIERRE GUEVREMONT 705-337-4460 (Office) 705-367-0332 (Cellular) 705-335-1236 (on call)
Fire Chief pat.kennedy@kapuskasing.ca roger.isabelle@kapuskasing.ca marc.sawyer@kapuskasing.ca luc.genier@kapuskasing.ca	PAT KENNEDY Fire Chief and CEMC 705-335-4225 (Office) 705-367-0301 (Cellular) 613-980-2913 (Satellite)	ROGER ISABELLE (Cel 705-335-0545) MARC SAWYER (Cel 705-367-0590) LUC GENIER (Cel.. 705-332-1645) Captains On Shift Officer 705-335-0747
Ontario Provincial Police daniel.foy@opp.ca daniel.crowell@opp.ca	DAN FOY Inspector 705-363-7864 (Cellular)	DANIEL CROWELL A/Staff Sergeant 705-362-4245(Office) 705-372-8987 (Cellular)
Health Official inspections@procupinehu.on.ca emergency@porcupinehu.on.ca	Kapuskasing Office 705-335-6101 (during business hours): Public Health Insp. Leanna Bouffard 705-267-1181 x 2332 leanna.bouffard@porcupinehu.on.ca	DUTY INSPECTOR/ALTERNATE Timmins Office 800-461-1818 (after hours/on-call) Dr. Lianne Catton Medical Officer of Health 705-267-1181 x 2310 Lianne.catton@porcupinehu.on.ca Suzanne Lajoie Manager of Inspection 705-267-1181 x 2304 suzanne.lajoie@porcupinehu.on.ca
Hospital Official fdallaire@senhosp.ca llamontagne@senhosp.ca jallarie@senhosp.ca julie.culverhouse@senhosp.ca	FRANCE DALLAIRE Chief Executive Officer 705-337-4001 (Business) 705-372-3472 (Cellular)	CHANTAL BOYER-BROCHU 705-337-4002 (Business) 705-335-0508 (Cellular) LUCIE LAMONTAGNE 705-337-4003 (Business) 705-367-5743(Cellular) JESSICA ALLARIE 705-335-4004 (Business) 705-335-0538 (Cellular) JULIE CULVERHOUSE 705-337-4012 (Business) (Cellular)
Ambulance Services potvinfr@cdssab.on.ca CarrierJ@cdssab.on.ca	FRED POTVIN 705-372-3064 (Cellular) 800-290-3019 (Dispatch)	JEAN CARRIERE 705-266-1208 (Office) 705-266-3691 (Cellular)

Clerk Chantal.guillemette@kapuskasing.ca	CHANTAL GUILLEMETTE Clerk 705-337-4254 (Office) 705-335-9060(Residence) 705-335-1068 (Cellular)	
Evacuation Coordinator guyaine.ouellette@kapuskasing.ca	GUYLAINE OUELLETTE Alternate CEMC 705-337-4457 (Office) 705-335-8967 (Residence) 705-332-2840 (Cellular)	

EMERGENCY NOTIFICATION LIST

1. The notification may be activated by the Chief Administrative Officer, the Community Emergency Management Coordinator, the Fire Chief, the local senior OPP Officer or the Public Works Director.
2. Upon activation, the notification process will be carried out at once by the Fire Department (705-335-4225) dispatcher, who will note the detail of the message to be passed (e.g. description of the emergency, instructions to remain on standby or assemble at the EOC, etc.). This dispatcher will ensure this information is passed to and understood by each person called.
3. Persons on the notification list will be called in order, starting with the Mayor.
4. If the primary person cannot be reached at any of the listed numbers, telephone the alternate.
5. If neither can be reached, go on to the next appointment on the list.
6. Once the end of the list has been reached, try again to reach those who were not available on the first attempt.
7. Note the time each person was reached.
8. To report emergencies affecting municipal buildings and/or infrastructure, please contact the Public Works Department at 705-337-4268.

KAPUSKASING EMERGENCY PLAN

ANNEX "B" EMERGENCY OPERATIONS FACILITIES

The following is a list of facilities that may be used by the Kapuskasing Municipal Emergency Control Group in the event of an emergency.

KAPUSKASING CIVIC CENTRE

Office/Meeting Space	Rest Areas etc.	Communications	Parking	Equipment	Comments
<ul style="list-style-type: none"> • Second floor Council Chambers seats approx. 100 - 150 persons. • Extra meeting rooms available • Auditorium w/kitchen • Office Space 	<ul style="list-style-type: none"> • 2 men's washrooms • 2 ladies washrooms 	<ul style="list-style-type: none"> • 15 telephone units • 1 Fax line • Wireless High Speed Internet • Teleconferencing 	<ul style="list-style-type: none"> • Space for approx. 50 vehicles 	<ul style="list-style-type: none"> • 2 kitchens on both upper & lower floor • Computers • Photocopiers • Tables & chairs • Elevator 	<ul style="list-style-type: none"> • Air Conditioner • Backup Generator

KAPUSKASING FIRE HALL

Office/Meeting Space	Rest Areas etc.	Communications	Parking	Equipment	Comments
<ul style="list-style-type: none"> • 1 Meeting room Seats • Approximately 16 people • Two offices 	<ul style="list-style-type: none"> • 3 washrooms • 2 shower facilities 	<ul style="list-style-type: none"> • 2 telephone units • 1 Direct line dispatch 	<ul style="list-style-type: none"> • Space for 50 vehicles (approx.) 	<ul style="list-style-type: none"> • 2 kitchen areas • Auxiliary power supply • Photocopier • Computer • Tables & chairs 	<ul style="list-style-type: none"> Backup Generator

Hydro One Emergency # 1-877-363-7464
 Kapuskasing Office 705-335-6851
 Sudbury Office 1-888-835-9444
 Timmins Office 1-705-267-1533
 Ontario Power Generation emergency # 800-434-1235 or 705-335-8403
 Atlantic Power Ltd. 705-337-4052
 Shift Engineer 705-337-4055

EMERGENCY & MEDICAL ASSISTANCE

Community Care Access Centre 888-668-2222
 Centre de Santé..... 705-337-1201
 Porcupine Health Unit 705-335-6101
 VON 800-265-5379
 Vital Air 705-268-5511
 Motion Specialties 705-360-1941
 Sensenbrenner Hospital..... 705-337-6111
 North Centennial Manor 705-335-6125
 Extencicare Nursing Home 705-335-6633 or 705-335-8337
 Victim Crisis Assistance (VCARS) cell 705-335-0720 or 705-367-4280

GAS STATIONS

Esso 705-335-3345
 Shell/Mac's 705-335-2556
 Flying J 705-337-1333

GUENETTE FUNERAL HOME 705-335-2433

GENERAL CONTRACTORS

Big O Construction 705-335-2929
 Innovations..... 705-335-4804
 Nadeau Haulage 705-335-8285 or 705-335-0926
 Tremblay Construction..... 705-335-4491/705-335-4433
 Maurice Lebrun 705-335-2490
 Lachance Construction 705-335-3021/705-335-3442
 Gates Grading 705-337-6794
 Cooper Equipment 705-335-3622
 P & J Gelinis Enterprise (Service Master)..... 705-335-6000

DANGEROUS GOODS INFORMATION CENTRE

Canutec Emergency # 1-613-996-6666
 Transport Canada Dangerous Goods 1-416-973-1868
 Environmental Spill Reporting..... 1-800-268-6060

GOVERNMENT MINISTRIES

Ministry of the Environment 1-800-565-4923
 Office of the Fire Marshal 1-866-314-0472
 Fire Protection Advisor, Chad Harvey 1-705-531-2614
 Cell 705-531-2614

Ministry of Natural Resources & Forestry

 Bill Greenaway 705-337-9306(O)/705-337-1856(H)
 Cell 705-367-4375
 Josée Tourville 705-372-2227(O)/705-362-8661(H)
 Forest Fires 705-310-3473 or 705-372-2235
 Emergency Measures Ontario 416-314-0472 or 866-314-0472

Ministry of Transport 705-369-2034
 Ministry of Labour 1-800-461-9847
 Ministry of Northern Dev. Mines (J. Richard) (C)705-367-5683

KAPUSKASING INDIAN FRIENDSHIP CENTRE

Michele Murphy (Exec. Director) 705-337-1935

MEDIA

Moose Radio Station (CKAP) 705-335-2379
 On Air Line 705-335-8555
 D Puska (C)705-332-0029
 CKGN (Radio Communautaire Kapnord) 705-335-5915
 After Hours (C. Chabot) 705-337-1523 (C) 705-367-0373
 On Air Line 705-335-8165
 Radio de L'Épinette Noire (Hearst) 705-372-1011
 CBC Radio (Sudbury) 1-800-461-1138
 CHYK Radio (Timmins) (Le Loup) 705-269-8307
 CKGB Radio (Timmins) 705-264-2351
 Eastlink (television) 888-345-1111
 MCTV Television
 Timmins 705-264-4211
 Sudbury 866-389-6288

HAM RADIO OPERATORS

 Kevin Lovequist 705-335-4263
 Marc Brown 705-335-8367

MOTELS

Advantage Motel (22 rooms).....	705-335-4170
Apollo Motel (42 rooms).....	705-335-6084
Chain of Lakes (8 rooms).....	705-335-2213
Comfort Inn (65 rooms).....	705-335-8583
Travelodge Motel (58 rooms).....	705-335-6171
Park Inn (30 rooms).....	705-335-2366
Super 8 (65 rooms).....	705-335-8887

NATURAL GAS

Enbridge (Union) Gas.....	705-335-2373
Manager (Claude Baril).....	(Cell) 705-367-0537
Emergencies.....	1-877-969-0999
TC Energy (TCPL) Emergency.....	1-888-982-7222
M. Picard.....	(C)705-372-2183/(W)705-335-5500
Atlantic Power (P.Sigouin).....	705-337-4052 (C) 705-337-0252

NORTHERN TELEPHONE.....	800-360-8555
After Hours - call Operator.....	-0-

PEST CONTROL

Orkin PCO Services.....	800-726-7378	800-461-3505
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POLICE SERVICES

Ontario Provincial Police.....	911 or 705-335-2238
After Hours.....	1-888-310-1122

PHARMACIES

Rexall Drug Store.....	705-337-1777
After Hours (Lina Levesque).....	(H) 705-335-5370 (C) 705-347-0070
Shoppers Drug Mart.....	705-335-2249
After Hours (Manon Gosselin).....	705-335-8506
Your Independent Grocer.....	705-337-4920
Walmart.....	705-335-6111

PUBLIC WORKS.....	705-337-4268
After Hours (On Call).....	705-335-1236
GM of Public Works (E. Côté).....	(C)705-367-6145
Ontario One Call.....	(ID #3253) 800-400-2255
Water Treatment Plant.....	705-335-4107
Tammy Richard.....	705-367-0771
Waste Water Treatment.....	705-335-4992
Terry Riopelle.....	cell 705-335-0249

GREENFIRST FOREST PRODUCTS(RAYONIER).....	705-337-1311
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SCHOOL BOARDS

District School Board ONE (KDHS) . 705-335-6164/ Norm Bélanger(c)	705-367-0667
After hours (Chris Wilson).....	(c) 705-367-0014
Conseil Scolaire Catholique Grandes Rivières (Jérémie Lepage).....	335-6091
705-367-4207 or 705-367-4600	
After hours (Alain Comeau).....	(c)705-335-0961
North East C.D.S. Board (St.Pat's)	705-335-3241
After hours (Gretchen Morgan).....	(c)705-367-0592 (h) 705-367-2034
After hours (Barry Shadd)	(c)705-347-1450/705-335-5358
Conseil publique du Nord-Est de l'Ontario.....	705-472-3443
Regional Office (Timmins)	705-264-1119
École publique Coeur du Nord	705-335-2199
École publique Écho du Nord	705-335-6600
After hours (Yanik Boudreau).....	(c)705-367-5428
(Irene Charette).....	(c)705-358-4024
Centre d'apprentissage du Nord-Est de l'Ontario (CANO)	705-337-1021

SCHOOLS

Diamond Jubilee Public School.....	705-335-2811
Kap. District High School.....	705-335-6164
André Cary School.....	705-335-6197
Le Coeur du Nord	705-335-2199
Jacques Cartier	705-335-4013
St. Patrick	705-335-3241
Cité des Jeunes.....	705-335-6057
École secondaire publique Écho du Nord	705-335-6600

SOCIAL SERVICES

Habitat Interlude	705-337-1122
Terry Allard, Director of Victims' Programs and Services.....	(c) 705-367-0668
Kapuskasing – Smooth Rock Falls – Hearst Counselling Services.....	705-335-8468
Steve Fillion, Executive Director	(c) 705-367-4280
Alternate Simon Dubosq.....	(c) 705-367-4259
Kunuwanimano Child and Family Services	705-268-9033
Kapuskasing (Kelly Litt)	(c) 705-406-3248
North Eastern Ontario Family and Children Services.....	705-335-2445
Lola Dufour, Program Dir.(ext 6017).....	(c)705-335-1447
Alternate, Josée Bélanger	705-360-7100, ext 5130/(c) 705-363-8974
Nathalie Rochon	705-335-2445, ext 6025/(c)705-332-1108
North Cochrane Addiction Services.....	705-335-8408
Sonia Gravel	(c) 705-335-1127

TRANSPORTATION

Bluebird Bus Line	705-335-3341
Handi-Trans.....	705-335-2555
Lacroix Bus Line	705-362-5279
Dupont Taxi	705-335-5491
Five Star Taxi	705-335-5552

ONTC Rail Traffic Control 800-558-4129

TOILET RENTALS

Environmental 360 Solutions Inc..... 705-335-3031

TOW TRUCKS

Murray OK Tire 888-335-8496

Nadeau Haulage 705-335-8285 or 705-335-0926

B&D Towing 705-335-4300 or 705-335-1430

VETERINARY SERVICES

Kap Veterinary Clinic..... 705-335-8446

After hours 705-335-2388

WEATHER

Environment Canada 416-739-4826

WORSHIP AND CLERGY

Abundant Life Christian Fellowship..... 705-335-8847

Baptist Church 705-335-3240

Elim Pentecostal 705-335-8847

Gospel Hall (H)705-335-3712 705-335-2005

Immaculée Conception..... 705-335-3915/705-335-3473

Kingdom Hall..... 705-335-6750

Notre Dame des Victoires (Val Albert) 705-335-3407

St. John's Presbyterian 705-335-5338

St. Mark's Anglican 705-335-2921

St. Patrick Church..... 705-335-4673

Victory Freedom..... 705-337-5144

KAPUSKASING EMERGENCY PLAN

“ANNEX D”



Office of the Fire Marshal

Mutual and Automatic Aid Plan and Program

for the

District of Cochrane

Fire Coordinator: Richard Vallée
Alternate Fire Coordinator: Pat Kennedy



APPENDIX A
Running Card Assignments

Help and Cover Assignments

Add a Fire Department	For Fire Department:	For Station (if applicable):	For Service Area (if applicable):
	Town of Kapuskasing	N/A	Kapuskasing

FIRST Help Call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
	Val-Rita-Harty Township	Opasatika Township					

SECOND Help Call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
	Moonbeam Township	Faugnier-Strickland Township					

THIRD Help Call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
	Opasatika Township	Mattice-Val Core Township					



APPENDIX A
Running Card Assignments

Help and Cover Assignments

Add a Fire Department

For Fire Department:
Moonbeam Township

For Station (if applicable):
N/A

For Service Area (if applicable):
Moonbeam

FIRST Help call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
Faugner-Strickland Township		Town of Smooth-Rock Falls					

SECOND Help call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
Town of Kapuskasing		Not Required					

THIRD Help call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
Town of Kapuskasing		Val Rita-Harty Township					



APPENDIX A
Running Card Assignments

Help and Cover Assignments

Add a Fire Department	For Fire Department: Opasatika Township	For Station (if applicable): N/A	For Service Area (if applicable): Opasatika
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FIRST Help call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
	Val Rita-Harty	Town of Kapuskasing					

SECOND Help call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
	Matice-Vai Coie Township	Town of Hearst					

THIRD Help call							
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call
	Town of Kapuskasing	Not required					



APPENDIX A
Running Card Assignments

Help and Cover Assignments

Add a Fire Department		For Fire Department:	Val Rita-Henry Township	For Station (if applicable):	N/A	For Service Area (if applicable):	Val Rita
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FIRST Help call								
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call	Cover
	Town of Kapuskasing	Not required						

SECOND HELP Call								
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call	Cover
	Opasauka Township	Martice-Val Cote Township						

THIRD Help call								
Add resource	Help Call	Cover	Help Call	Cover	Help Call	Cover	Help Call	Cover
	Moornbeam Township	Fauquier-Strickland Township						

Office of the Fire Marshal and Emergency Management



Emergency Contact Information and Mutual Aid Plan Asset Report (Appendix B & C)

Cochrane District

The Provincial Emergency Operations Centre (PEOC) may be reached 24 hours a Day,
7 days a week at **1-416-314-0472** or toll free at **1-866-314-0472**

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Data Source: FDM (Profiles & Contact Forms)
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Emergency Contact Information

Fire Coordinators

Fire Department	Name	Position	Email	Phone Numbers
Kapuskasing Town Fire Department	Kennedy, Pat	Alternate Fire Coordinator	pat.kennedy@kapuskasing.ca	Emerg: (888) 402-1111 Cell: (705) 367-0301

Appendix B & C - Cochrane District

Mutual Aid Plan Asset Report

Kapuskasing Town Fire Department

Business: (705) 335-4225

Profile Number:2018-566600

<p>Fire Chief Kennedy, Pat pat.kennedy@kapuskasing.ca Emerg: (888) 402-1111 Cell: (705) 367-0301</p>	<p>Staffing (Suppression)</p> <table border="1"> <tr><td>Full Time</td><td>8</td></tr> <tr><td>Part Time</td><td>0</td></tr> <tr><td>Volunteer</td><td>21</td></tr> </table>	Full Time	8	Part Time	0	Volunteer	21	<p>Vehicle Summary</p> <table border="1"> <tr><td>Pumper</td><td>1</td><td>Rescue Unit</td><td>1</td></tr> <tr><td>Tanker</td><td>1</td><td>HazMat</td><td>0</td></tr> <tr><td>CAFS System</td><td>0</td><td>Mobile Command Post</td><td>1</td></tr> <tr><td>Elevating Device</td><td>1</td><td>Rehab</td><td>0</td></tr> </table>	Pumper	1	Rescue Unit	1	Tanker	1	HazMat	0	CAFS System	0	Mobile Command Post	1	Elevating Device	1	Rehab	0																				
Full Time	8																																											
Part Time	0																																											
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CAFS System	0	Mobile Command Post	1																																									
Elevating Device	1	Rehab	0																																									
	<p>SCBA</p> <table border="1"> <tr><td>MSA</td><td>18</td></tr> <tr><td>Draeger</td><td>0</td></tr> <tr><td>Scott</td><td>0</td></tr> <tr><td>Survivair</td><td>0</td></tr> <tr><td>Interspiro</td><td>0</td></tr> <tr><td>Other</td><td>0</td></tr> </table>	MSA	18	Draeger	0	Scott	0	Survivair	0	Interspiro	0	Other	0	<p>Resources</p> <table border="1"> <tr><td>Mobile Light Unit</td><td>1</td></tr> <tr><td>Mobile Air Unit</td><td>0</td></tr> <tr><td>Fire Boats</td><td>0</td></tr> <tr><td>Water Rescue Boats</td><td>0</td></tr> <tr><td>HazMat Trailer</td><td>0</td></tr> <tr><td>Portable Generators</td><td>3</td></tr> <tr><td>Portable Pumps</td><td>1</td></tr> </table>	Mobile Light Unit	1	Mobile Air Unit	0	Fire Boats	0	Water Rescue Boats	0	HazMat Trailer	0	Portable Generators	3	Portable Pumps	1	<p>Equipment</p> <table border="1"> <tr><td>1</td><td>Extr. Equip (Hand)</td><td>Yes</td></tr> <tr><td>0</td><td>Extr. Equip (Power)</td><td>Yes</td></tr> <tr><td>0</td><td>Air Bags</td><td>Yes</td></tr> <tr><td>0</td><td>Fixed Air Fill Station</td><td>Yes</td></tr> <tr><td>0</td><td>High Volume Water Supply</td><td>Yes</td></tr> </table>	1	Extr. Equip (Hand)	Yes	0	Extr. Equip (Power)	Yes	0	Air Bags	Yes	0	Fixed Air Fill Station	Yes	0	High Volume Water Supply	Yes
MSA	18																																											
Draeger	0																																											
Scott	0																																											
Survivair	0																																											
Interspiro	0																																											
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0	High Volume Water Supply	Yes																																										
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KAPUSKASING EMERGENCY PLAN

ANNEX "E" EMERGENCY PUBLIC INFORMATION PLAN

1.0 PREAMBLE & ADMINISTRATION

1. Upon implementation of the Kapuskasing Emergency Plan, it is important to co-ordinate the release of accurate information to the news media, issue authoritative instructions to the public, and respond to or redirect individual requests for, or reports on, information concerning any aspect of an emergency.
2. In order to fulfill these functions during an emergency, the following positions shall be established:
 - (a) A Public Information Coordinator;
 - (b) An on-scene media spokesperson; and
 - (c) A Citizen Inquiry Supervisor.
3. The media information centre will be located at the Civic Centre
4. Depending on the nature of the emergency, it may be necessary to establish a media information area adjacent to the emergency site. This area, if established, will be staffed by a site media spokesperson appointed by the Emergency Site Manager.
5. The Citizen Inquiry Section is located in the Emergency Operations Centre, under the direction of the Emergency Operations Officer.

2.0 RESPONSIBILITIES

2.1 Public Information Coordinator

The Public Information Coordinator is responsible for:

- (a) Establishing a communication link with the site media spokesperson, the Citizen Inquiry Supervisor and any other media coordinators (i.e. provincial, federal, private industry, etc.) involved in the incident, and will ensure that all information released to the media and public is consistent and accurate.

- (b) Ensuring that an area to host various media is set up and staffed.
- (c) Liaison with the MCEG to obtain up-to-date information for media releases, co-ordinate individual interviews and organize press conferences.
- (d) Ensuring that the following are advised of the telephone number of the media centre:
Media;
Municipal Emergency Control Group;
Switchboard (Town Hall and Fire Department);
Police Public Relations Officer;
Neighboring municipalities;
Citizen Inquiry Supervisor; and
Any other appropriate persons, agencies or businesses.
- (e) Providing direction and regular updates to the Citizen Inquiry Supervisor to ensure that the most accurate and up-to-date information is disseminated to the public.
- (f) Ensuring the media releases are approved (in consultation with the Mayor) prior to disseminating hard copies of media releases to the Public Information Centre, the MCEG, the Citizen Inquiry Supervisor and other key persons handling inquiries from the media.
- (g) Monitoring news coverage, and correcting any erroneous information.
- (h) Maintaining copies of media releases and newspaper articles pertaining to the emergency.

2.2 Site Media Spokesperson

The Site Media Spokesperson is responsible for:

- (a) Establishing and coordinating a media information centre in a safe, appropriate location, at or near the site, for the media to assemble.
- (b) Establishing a communication link and regular liaison with the Public Information Coordinator at the EOC.
- (c) Redirecting all inquiries regarding decisions made by the MCEG and the emergency as a whole, to the Public Information Coordinator.

- (d) Advising the following persons and agencies of the local and telephone number(s), as available, of the site Media Information Centre:
Emergency Site Manager;
Police Public Relations Officer;
Emergency Personnel at scene (where possible);
Public Information Coordinator;
Media; and
Any other appropriate personnel or agencies.
- (e) Ensuring that media arriving at the site are directed to the Site Information Centre.
- (f) Where necessary and appropriate, coordinating media photograph sessions at the scene.
- (g) Coordinating on-scene interviews between emergency services personnel and the media.

2.3 Citizen Inquiry Supervisor

The Citizen Inquiry Supervisor is responsible for:

- (a) Establishing a Citizen Inquiry Service, including the appointment of personnel and designation of telephone lines.
- (b) Informing the Public Information Coordinator of the establishment of the Citizen Inquiry Service and designated telephone number(s).
- (c) Apprising the affected emergency services, the MCEG and municipal switchboard of the establishment of the Citizen Inquiry Service and designated telephone number(s).
- (d) Liaison with Public Information Coordinator to obtain current information on the emergency.
- (e) Responding to and re-directing inquiries and reports from the public based upon information from the Public Information Coordinator. Such information may be related to school closings, access routes or the location of evacuee centres.

- (f) Responding to and redirecting inquiries pertaining to the investigation of the emergency, deaths, injuries or matters of personnel involved with or affected by the emergency to the appropriate emergency service.
- (g) Responding to and re-directing inquiries pertaining to persons who may be located in evacuation or reception centres to the registration and inquiry telephone number(s).
- (h) Procuring staff to assist, as required.

3.0 PUBLIC INFORMATION AND INQUIRY

1. Generally speaking, information concerning an emergency situation will be communicated to the public through a number of means, depending on availability. These include: newspaper, radio, television/cable, public addressing system, telephone, social media, Internet and individual visitation.
2. Where appropriate, public meetings will be held at pre-advertised locations to provide information to members of the public concerning an emergency situation. Such meetings will be coordinated through the Municipal Emergency Control Group, including the Public Information Coordinator.

4.0 PUBLIC WARNING AND PUBLIC INFORMATION PROCEDURES

4.1 General

- (1) This procedural sequence outlines the methods of ALERTING the public and providing adequate, accurate public information.
- (2) Public alerting is the first responsibility of the Mayor and must be done quickly, warning first those near or in the real or potential emergency area, and finally those who may otherwise be affected.

4.2 Alerting the Public

The public is divided into three (3) areas:

- (a) Area 1 - immediate emergency area.
- (b) Area 11 - potential spill-over area.
- (c) Area 111 - reception area.

4.3 Danger Area Alerting

(a) 24 Hours Basis:

- i) Notify required media as listed in Annex "C".
- ii) Put police cruisers and/or fire trucks sounding sirens in vicinity of danger area.
- iii) Walk into danger area and knock on doors to alert residents if required.

4.4 Spill-Over Area Alerting

Same as for danger area, accent on public system.

4.5 Reception Area Alerting

Use radio/tv stations in lieu of sirens, etc.

4.6 Information to be Provided

The following is the information to be contained public alerts:

- (1) Nature of danger.
- (2) Immediate action by the public.
- (3) How to obtain further details.

5.0 PUBLIC INFORMATION PROCEDURES

- 1. All public information must be approved for release by the Mayor.
- 2. All releases will be written with sufficient copies for news media and operation files.

- 3. All releases will include:
 - (a) Current basic situations.**
 - (b) Required action by public.**
 - (c) Additional data for safety and control of the public.****

- 4. All releases shall be numbered, timed, and logged.**

KAPUSKASING EMERGENCY PLAN

ANNEX "F" EVACUATION PROCEDURES

Kapuskasing, due to its geographical location, will only be able to evacuate the residents by air, rail, and/or by road which consists of Highway 11 East or West.

In the event of an evacuation, the Canadian Red Cross is available to assist with the emergency/evacuation centre(s), assembly area/facility and/or shelter(s) by means of evacuee registration, provide aid/assistance to meet basic needs of evacuees, provide assistance to address gaps in assistance provided through the municipality and other essential needs for the emergency.

MUNICIPAL RESPONSIBILITIES

EMERGENCY MANAGEMENT. As provided in this plan, first responders to an emergency scene will assess the situation and advise the Operations Officer for the Town of Kapuskasing, if required. The Operations Officer will then invoke the emergency notification system to inform members of the Municipal Emergency Control Group of the call to assemble or stand-by status.

COORDINATION OF ASSISTANCE EFFORTS. Should an emergency situation escalate beyond the capabilities of the community and a need to evacuate the residents of Kapuskasing becomes necessary, assistance may be requested from one or more of the following:

- Adjacent municipalities, emergency response agencies.
- The Kapuskasing Airport.
- The Ontario Northland Railway.
- The Ontario Northland Transportation Commission.
- Transportation agencies within the municipality.

It is the responsibility of the emergency management personnel (MECG and Emergency Site Manager) to co-ordinate the requesting and employment of outside assistance efforts.

Mass Evacuation

The evacuation of a large number of evacuees is best done in stages; the most urgent priority is to get people out of the danger zone as quickly and safely as possible.

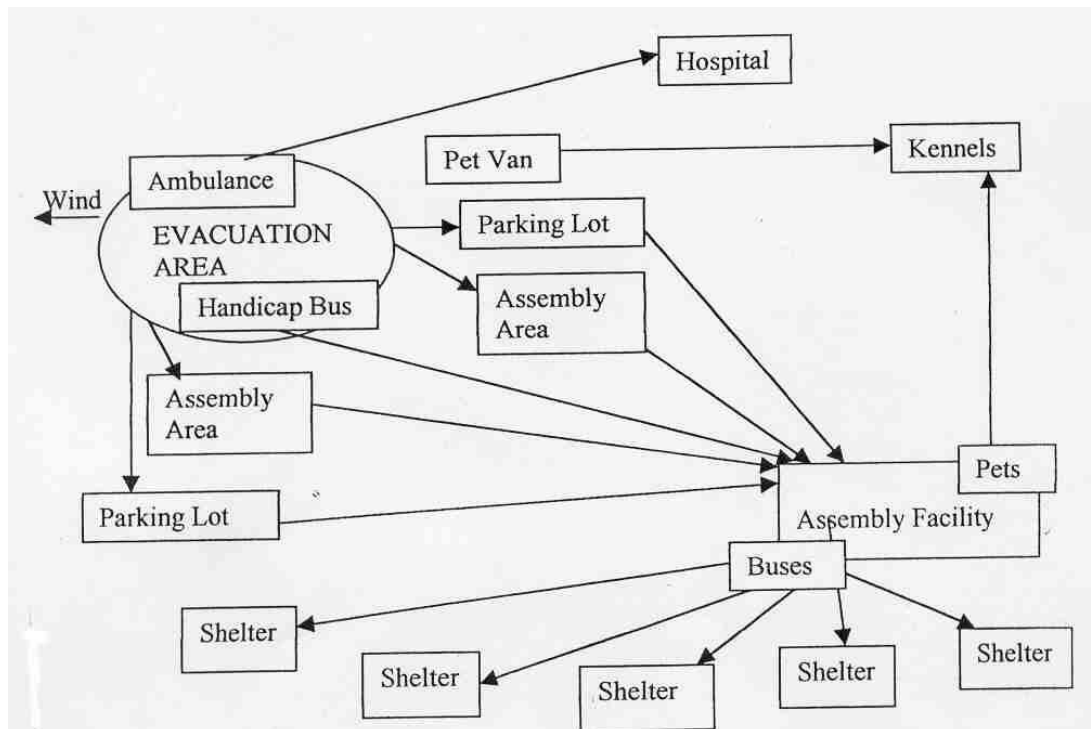
Stage 1: Evacuate to nearest safe area

- Direct evacuees with vehicles to nearest temporary shelter or parking lot(s) and instruct them to wait for bus transportation to assembly facility or long term shelters;
- Escort evacuees on foot (preferably via any available transportation) to nearest temporary shelter(s);
- Transport sick or injured people to medical facility(s);
- Transport handicapped/special needs evacuees to nearest temporary shelter(s), or if time permits, preferably to assembly facility or directly to long-term shelter(s).

Stage 2: Transport evacuees from parking lots and safe buildings to assembly facility(s).

Stage 3: Transport evacuees from assembly facility to long-term shelters.

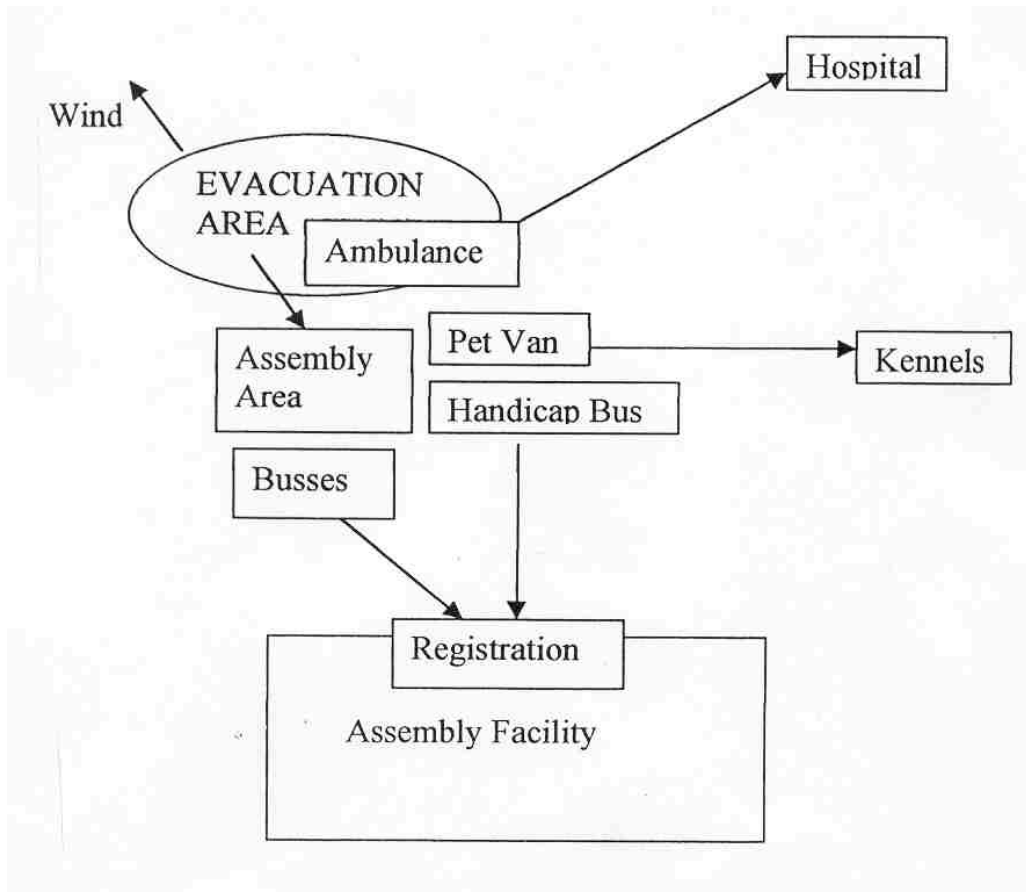
Stage 4: Arrange for pet care facilities and transportation of animals to the pet care facility(s).



Neighborhood Evacuation

Small area, less than 100 people.

- Stage 1: Evacuate to nearest safe area**
- Direct evacuees with vehicles to assembly facility;
 - Escort evacuees on foot (preferably via any available transportation) to temporary assembly area;
 - Transport sick or injured people to medical facility(s);
 - Transport handicapped/special needs evacuees to assembly facility.
- Stage 2: Transport evacuees from temporary assembly area to assembly facility.**
- Stage 3: Arrange for pet care facilities and transportation of animals to the pet care facility(s).**



Aim:

The aim of the Evacuation Plan is to effectively evacuate and care for the inhabitants of the Town of Kapuskasing.

Evacuation Tasks and Considerations

The following key tasks must be considered during any emergency:

- . Assessment of the threat
- . Coordination of activities
- . Determine who is to be evacuated
- . Transportation considerations
- . Alerting the public
- . Care of evacuees

Assessment of the Threat

The following factors must be considered in assessing the threat of any emergency:

- . Options available, i.e. evacuation, sheltering and/or other protective measures.
- . Factors that may make an evacuation difficult, i.e. severe weather, limited road network, large numbers of summer residents who are unfamiliar with the area, etc.
- . The time required for safely evacuating inhabitants versus the time remaining before the impact of the emergency is experienced.
- . The availability, suitability and capability of evacuation centres and associated equipment to handle the expected number of evacuees.

When determining the area to be evacuated, the following must be considered:

- . The area of potential danger given the emergency situation.
- . The approximate number of persons to be evacuated.
- . Special assistance requirements (sick, aged, infirm)
- . Transportation assistance available.
- . Duration of evacuation.

The following logistical considerations may be encountered in evacuation situations:

- . Transportation out of the area may be difficult. (Congestion can occur on major routes)
- . Families may be separated during the evacuation, possibly resulting in emotional trauma and evacuation problems.
- . Individuals may refuse to leave because they fail to perceive any threat, fear for the security of their property, or are worried about absent family members or pets. In such instances, instruct these individuals as to the severity of the problem and the need for evacuation. It should be stressed that these individuals should not expect to be rescued if they remain there.
- . Adverse weather conditions especially in combination with a limited road network may adversely affect evacuation procedures.

- People unfamiliar with the area, i.e. tourists or visitors may have difficulty evacuating.
- Evacuation of large groupings of people, i.e. community centres, church, school may be difficult.
- Evacuated buildings must be searched for persons remaining on the premises and all potential utility hazards must be eliminated by the utility companies in the evacuated buildings, i.e. turn off hydro and propane. Utility companies must also restore services at the termination of the emergency.

In the event that the evacuation of an area would expose the population to hazardous toxic fumes, it may be necessary to implement a sheltering plan. The people in the affected area will be advised to remain in their homes, school or place of business and follow these steps:

- Close all windows and doors.
- Turn off furnace (or turn down to 15°C during the winter), air-conditioning and fans.
- Close drapes and curtains and put moist towels at the base of doors to act as an air seal.
- Have battery-powered radio and portable lights at hand.
- Listen to the radio for information on the emergency.
- Obtain water for future use (fill pails, tub, etc.)
- Move to the central basement part of the building to minimize any impact to the emergency.
- After the toxic cloud has passed and outside air is safe, increase the ventilation rate of the building immediately and go outside for fresh air until the building has been thoroughly ventilated.

Coordination of Activities

Coordination of evacuation and sheltering will be handled by the Evacuation Coordinator, who will ensure residents are taken to safety or sheltered with minimum delay and confusion in the event of an emergency. This will be done under the overall direction to the Municipal Emergency Control Group.

When residents of the Town of Kapuskasing are evacuated to another community, a representative from the Town will attend the receiving community to be part of the receiving Municipal Emergency Control Group. Coordination between the Town of Kapuskasing and the receiving community and other key agencies, i.e. Police, Health Officials, is essential. A list of evacuees to be transported must be prepared by the Citizen Inquiry Supervisor in conjunction with all coordinating agencies.

Alerting the public

The Evacuation Coordinator is responsible for alerting the public of an existing or impending emergency or arranging for notification through the media as required. In the first moments of an emergency and at times requiring immediate pre-emergency evacuations, this responsibility falls to the OPP/Fire Department.

Notification may encompass a warning that an emergency exists followed by instruction on the appropriate action to take, i.e. evacuation, sheltering, etc. The initial alert may advise the public where additional information can be obtained, i.e. radio.

Alerting messages, information circulars, etc. will be provided. To ensure all members of the public receive notification and information on procedures, the following mechanisms are available:

- . Radio messages
- . Door to door notification
- . Mobile public access

The warning should be:

- . Accurate
- . Consistent
- . Clear
- . Repeated
- . With as much prior notice as possible

Tell the community:

- . What to take (toiletries, clothing, medication, bedding, food, recreational items, etc.)
- . Where to go and how, i.e. wait for bus, do not use private cars, no parking within one mile of evacuation centre.
- . Route to take.
- . Transportation available/collection points.
- . Lock doors.

- . Turn off stove, utilities, etc.
- . What to do about pets and livestock, i.e. leave behind with food and water, loose, take with you, etc.

Care of evacuees

Evacuees need the following basic care:

- . Accommodation
- . Feeding
- . Sleep
- . Clothing
- . Registration and inquiry
- . Personal services, i.e. funds, counseling
- . Communications
- . First Aid/Health Services
- . Other, i.e. recreation for children, special assistance for elderly, handicapped

The Evacuation Coordinator is responsible for making arrangements for accommodation, feeding, sleeping, clothing and communications.

The Citizen Inquiry Supervisor is responsible for Registration and Inquiry.

- Prior to transportation, Emergency Services are responsible for First Aid
- At the shelter, the Evacuee Centre Manager is responsible for First Aid, Health Services in cooperation with the Medical Officer of Health/Ambulance Service
- The Health Official in cooperation with the area hospitals and/or area senior care homes should address care of elderly and bed-ridden individuals
- the Social Services officer is responsible for Personal Services
- The chair of the Recreation Committee is responsible for recreation.

Evacuee Centre Manager

An evacuee centre manager will be appointed by the “agency in charge” for each evacuee centre, and will be responsible for the daily functioning of the centre and liaison with other supporting agencies.

Returning Evacuees to their homes

Once the emergency is over and it is safe for evacuees to return home, a re-entry plan must be prepared. Some of the tasks that should be considered include:

- Ensure evacuees are notified that the emergency is terminated and that they can return home.
- Determine if any work must be done before residents can return home, i.e. switch utilities back on, test drinking water, check for extent of damage, etc.
- Determine if basic foods and clothing are required, i.e. hydro has been off and food in fridge/freezer has spoilt, houses have been damaged, and arrange for supplies to be sent to the community with the returning evacuees.
- Make transportation arrangements for those requiring assistance to return home.
- Prepare list of people to be transported.
- Ensure registration and inquiry services are available for a period of time after the emergency is over to provide people with post emergency information.

KAPUSKASING EMERGENCY PLAN

ANNEX "H"

Declaration of Emergency

Municipality: _____(print)

I, _____ hereby declare a state of
(Mayor or Elected Head of Council or First Nation Chief)
local Emergency in accordance with the Emergency Management and Civil
Protection Act, R.S.O. 1990, c E.9 s.4.(1) due to the emergency described
herein: *(nature of emergency)*

for an Emergency Area or part thereof described as: *(geographic boundary)*

Signed: _____

Title: _____

Dated: _____ at _____ (time)

in the Municipality/First Nation of:
_____ .

(Note: Fax to EMO Duty Officer @ 416-314-6220)

KAPUSKASING EMERGENCY PLAN

ANNEX "H"

Termination of a Declared Emergency

Municipality: _____(print)

I, _____ hereby declare a state of
(Mayor or Elected Head of Council or First Nation Chief)
local Emergency terminated in accordance with the Emergency
Management and Civil Protection Act R.S.O. 1990, c E.9 s.4.(1) due to the
emergency described herein: *(nature of emergency)*

for an Emergency Area or part thereof described as: *(geographic boundary)*

Signed: _____

Title: _____

Dated: _____ at _____ (time)

in the Municipality/First Nation of:
_____.

(Note: Fax to EMO Duty Officer @ 416-314-6220)

KAPUSKASING EMERGENCY PLAN

ANNEX "I"

Emergency Plan for Animals

A disaster is defined as any occurrences, which causes widespread suffering to humans, animals, and or, catastrophic damage to property. Included are hurricanes, tornadoes, floods, explosions, building collapse, transportation wrecks, earthquakes, nuclear accidents, hazardous material spills, riots, terrorism, and contagious outbreak of disease.

The Kapuskasing Animal Control Department is dedicated to respond with its resources to assist in helping humans and animals in disaster situations.

SCOPE OF HELP

This Manual is designed to provide guidelines for rapid response in disasters to rescue, protect, and care for domestic animals and to assist, when possible, with the protection and rescue of wildlife. It gives procedures on how to handle both displaced animals and animals in need of emergency care.

Goals of response:

- Provide effective, safe handling of displaced animals;
- Relieve suffering amongst animals;
- Effectively coordinate first aid and veterinary care needed by animals;
- Provide assistance to veterinary practices directly affected by the disaster.
- Help transport animals and help arrange for transportation of animals.

SHELTER AID STATION

During a disaster, the Kapuskasing Animal Control Department shall be staffed with at least two staff members to take in displaced animals, to offer first aid treatment and initial evaluation of sick and injured animals, and to care for incoming animals. Animals will be held for at least three days, and if the disaster continues, or if there is a need for further assistance, the Kapuskasing Animal Control Department will seek the help of volunteers to assist in handling the animals. In the event, the shelter sustains damage, and we are unable to house the animals at the shelter. On the property adjacent to the shelter, we will use whatever resources we have available to us to create a makeshift shelter at an alternative location.

ACTIVITIES OF STAFF

Provided that there are sufficient human resources to do so, the following services will be provided to the community:

- Sheltering of animals
- Transportation of animals to veterinary care, when possible
- Assistance in disposal of dead animals
- Active identification of owners of animals taken into custody
- Control of stray animals
- Identification on temporary and permanent housing for animals, when needed.
- To coordinate rescues when necessary, and receive lost and found reports
- Search and rescue efforts, when possible

PERSONNEL/VOLUNTEERS

- Personnel will bring a change of clothing, food, and bottled water. Personnel may bring their own pets (within reason). At least one vet or vet tech should be on staff if possible.
- Personnel will be cross-trained to handle a variety of jobs in case some staff may be affected by the disaster and unable to respond to shelter needs. Those who do respond will be trained and prepared
- Volunteers will be under the direction of staff, and unless pre-trained will not take part in search and rescue operations. They may be used for care of animals at the shelter, or at temporary shelter sites.

Volunteer Support

The Animal Control Department should train volunteers to assist with any response to an emergency. Unless they have specialized training, volunteers will not be engaged in any search and rescue operations, but will support remaining shelter staff as they are dealing with an increased influx of animals or the management of an off-site temporary shelter location.

The volunteer training session should be a one-day event that is intended to provide volunteers with the ability to effectively respond in an emergency. Although it is clearly impossible to provide volunteers with all the information that they will need in an emergency in one day, the goal of the sessions are:

- To familiarize potential volunteers with the disaster planning efforts and the efforts of other organizations that may be involved,
- Outline recommended personal emergency planning measures,
- Work through a mock shelter set-up exercise,
- Provide training on dealing with frightened animals in a shelter or intake situation,
- Detail common wildlife emergencies,
- Provide basic animal first aid training.

After completing a training session, volunteers who are interested may sign up to be placed on a roster of possible emergency responders and be provided with ID cards.

In an emergency, the decision to mobilize volunteer responders will be made by the senior Animal Control Officer on site. The following factors should be considered:

- The scale of the disaster;
- The availability of staff resources to support the response;
- The length of time that the response is expected to last; and
- The availability of other external support for the emergency response.

If a decision is made that volunteers should be asked to support the response to an emergency, the needed volunteers should be contacted by email and/or telephone, depending on the facilities available, and asked if they are able and willing to respond. Although volunteers who come forward at the time of the event may also be used if they are needed, volunteers who have completed the training (or disaster response training) will be sought out initially. A list of trained volunteers will be kept at the shelter at all times.

Broadcast Stations:

Radio:

MOOSE FM (100.9 FM)

CKGN (89.7 FM)

Television:

**Eastlink
MCTV**

**Channel 6
TIMMINS**

DROP OFF SERVICE

If a disaster is imminent, information on protective services, including drop-off sites, and pickup services, will be given to emergency broadcasting stations and emergency response agencies.

INTAKE OF ANIMALS

- A log sheet will be filled in for each animal taken into custody.
- Each animal will be tagged with a chain and number or a plastic identification collar.
- The identification number will be listed on the log sheet.
- All owners leaving or sending animals for protective custody will fill in a liability release form.
- Except for medical expenses, no charge will be levied for protective custody unless animals are left for more than three days. Donations are always welcome.
- Animals with special-needs-food or medicine-will be marked with a red tag with instructions on its kennel or cage.
- Volunteers will not handle volatile, aggressive or frightened animals that may bite, or scratch.
- Animals will be cared for at the Town of Kapuskasing/Animal Control Office.
- To the extent possible, animals will be examined and weighed as they are admitted.

RELEASE OF ANIMALS:

- Owners may reclaim animals when they are able to care for them.
- Each animal will be examined before it leaves, and notes will be put on the log sheet to condition of animal.
- Owners may be required to show proof of ownership.
- Some animals may have to be transported to the owner's quarters. This will be arranged whenever possible.
- Identification will be removed before the animal leaves the shelter.
- However, if the animal has no identification, a collar and free identification tag will be placed on the animal.

EMERGENCY TELEPHONE NUMBERS

Use 9-1-1 only for urgent police, fire and ambulance assistance.

Ontario Provincial Police 1-888-310-1122

Kapuskasing Fire Department 705-335-4225

Ambulance: 9-1-1

Central Ambulance Communications Centre 1-888-788-0054

Winter road conditions 1-800-268-4686

Community Emergency Management Coordinator 705-335-4225

Alternate Community Emergency Management Coordinator 705-337-4457

Canadian Red Cross 705-335-4200

Sensenbrenner Hospital 705-337-6111

ANIMAL CONTROL: 705-337-4268

Other:

Poison Treatment Centre	1-800 268-9017
Spills Action Centre	1-800 268-6060
Porcupine Health Unit	705-335-6101
Hydro One	1-800 434-1235
Union Gas	1-877 818-8212
Public Works Department	705-337-4268
Ontario Ministry Agriculture Foods and Rural Affairs	1-888 466-2372
Ministry of Natural Resources	705-335-6191

MOTELS

That Accept Companion Animals

Apollo Motel
100 Government Rd West
Kapusksing, Ont.
705-335-6084

Chain of Lakes Motel
470 Government Road
Kapusksing, Ont.
705-335-2213

Comfort Inn
172 Government Road
Kapusksing, Ont.
705-335-8583

Travelodge Motel
25 Kolb Street
Kapusksing Ont.
705-335-6171

Park Inn Motel
6 Government Road
Kapusksing Ont.
705-335-2366

Super 8
430 Government Road East
Kapusksing, Ont.
705-335-8887

* SOME MOTELS / HOTELS MAY
CHARGE A SMALL FEE FOR ANIMALS

Animal Hospitals – Town of Kapusksing

Kapusksing
Veterinary Hospital
2 Brunelle Road South
Kapusksing, Ont.
705-335-8446

COMMUNICATION PROTOCOL

- Establish contact with Canadian Red Cross at 705-335-4200
- Contact all Kapuskasing Animal Control Officers to determine their activities during the disaster to coordinate their efforts.
- Contact the Emergency response services, designated emergency media outlets to determine what their needs are, and give them information on how residents can get their pets to shelters.
- Call the Ontario Provincial Police to give information on the intake of domestic animals.
- Determine if veterinary practices will be available for assistance, and what type of response is required (i.e. shelter, search and rescue.)

INTAKE FORM - OWNED ANIMAL

Owner's Name: Owner's Home Address:	Cat/ Dog/ Other (identify other) :	Usual Veterinarian's Name: Owner's Signature:	Intake number:
Owner's Current Location : Phone Number: Cell Phone: Alternate contact (relative or friend living outside disaster area):	Breed: Description: Approximate age:	Medications: Special Needs: Notes:	Intake location: Outcome (returned to owner, adopted, etc):

INTAKE FORM - STRAY ANIMAL

Location Found: If found in a building address of location found:	Cat/ Dog/ Other (identify other) :	Current Location of Animal:	Intake number:
Intake Condition:	Breed: Description: Collars/ Tag: License number	Treatment:	Intake location: Outcome (returned to owner, adopted, etc):

KAPUSKASING EMERGENCY PLAN

ANNEX “J”

**TOWN OF KAPUSKASING
PANDEMIC INFLUENZA PLAN**

Approved by Kapuskasing Council
June 22, 2009

FOREWORD

The Town of Kapuskasing's Pandemic Influenza Plan is a Risk Specific Plan in the Municipality's emergency plan. This plan details the Municipality's response to an influenza pandemic in the Town of Kapuskasing.

The Porcupine Health Unit will have the lead in managing the response to a pandemic and will have detailed plans to address all public health related issues in order to prepare for and respond to an influenza pandemic. This plan is closely coordinated with the Kapuskasing Pandemic Influenza Plan and the Porcupine Health Unit Influenza Pandemic Plan.

Holders of the plan are responsible for keeping it current by incorporating any amendments that may be issued in the future.

This plan is administered by the Community Emergency Management Coordinator (CEMC) and is issued under authority of the town of Kapuskasing Bylaw # 3077.

Comments or suggestions relating to this plan should be directed to:

Community Emergency Management Coordinator (CEMC)
Town of Kapuskasing Fire Department
76 Brunelle Rd N
Kapuskasing, ON
P5N 2L8

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TOWN OF KAPUSKASING PANDEMIC INFLUENZA PLAN

1.0 GENERAL

1.1 Background

1.1.1 Influenza is a contagious respiratory illness caused by a virus. Influenza is directly transmitted from person to person primarily when people infected with flu cough or sneeze and droplets of their respiratory secretions come into contact with the mucous membranes of the mouth, nose and eyes of another person (droplet spread). Influenza can also be transmitted indirectly when people touch contaminated hands, surfaces and objects (contact spread).

1.1.2 Influenza viruses are unique in their ability to cause sudden, pervasive illness in all age groups on a global scale. An outbreak on a worldwide scale of a new strain of influenza that is capable of causing serious illness is called a pandemic. There have been three pandemics in the last century, with the worst being the 1918 -1919 Spanish flu that caused over 20 million deaths worldwide.

1.1.3 The timing and pattern of the next influenza pandemic is unpredictable but a short lead-time is likely. Outbreaks will occur simultaneously and in Ontario an estimated 22,000 to 52,000 people could become clinically ill and between 5,000 to 12,000 could die.

1.2 Aim

1.2.1 The aim of this plan is to ensure that the Town of Kapuskasing is prepared to effectively respond to an influenza pandemic in the Municipality.

1.3 Objectives

1.3.1 The objectives of the response to an influenza pandemic as detailed in this plan are:

- to maintain essential services in the Municipality during a pandemic.
- to support the Porcupine Health Unit in mitigating, preparing for, responding to and recovering from an influenza pandemic.
- to provide timely, authoritative information, to the public and the media on the provision of Municipal services.

1.4 Scope

1.4.1 This plan outlines the coordinated actions to be taken for the protection of the life and health of the citizens of the Town of Kapuskasing in the event of an influenza pandemic outbreak.

1.4.2 This plan provides direction to all departments within the Town of Kapuskasing.

1.5 Legal Powers

The Medical Officer of Health , under the *Health Protection and Promotion Act (HPPA), R.S.O. 1990*, has the authority to control communicable diseases and the power to identify, reduce or eliminate health hazards. Under the HPPA, public health inspector also has the authority to identify, reduce or eliminate health hazards.

1.5.2 The Mayor, as Head of Council, under the *Emergency Management and Civil Protection Act, R.S.O.1990*, may declare that an emergency exists in the City or any part thereof and may take action and make orders as he/she considers necessary to protect the property and the health, safety and welfare of the citizens.

2.0 PLANNING BASIS

2.1 Risk Assessment

2.1.1 To understand the magnitude of the problem and to develop contingency plans, estimates on the potential impact of an influenza pandemic are required. No one can accurately predict when the next pandemic will occur, nor can they accurately forecast who will become ill and suffer adverse health outcomes. However, the U.S. Centres for Disease Control (CDC) in Atlanta has developed a software programme to estimate impacts.

2.1.2 The Ontario Health Plan for an Influenza Pandemic utilized the CDC program and provides an estimate of the impact of an influenza pandemic in Cochrane Region shown in the table that follows. The figures are based on a worst-case attack rate of 15 % & 35 %.

	15%	35%
Clinically ill	7,200	30,600
Require Outpatient Care	12,600	30,600
Hospitalization Required	180(0.2%)	360(0.4%)
Deaths	36(0.04%)	864(18%)

2.2 **Assumptions on the Virus Characteristics**

2.2.1 The characteristics of a new virus strain are assumed to be consistent with other known influenza strains:

- Incubation period: 1 to 3 days (with no symptoms).
- Period of communicability: 24 hours before the onset of symptoms and up to 5 days after the onset of illness (usually 3 – 5 days in adults, up to 7 days in young children).
- Symptoms: sudden onset, fever, chills, headache, muscle aches, dry cough, sore throat, runny/stuffy nose.
- Method of Transmission: *direct* transmission from person to person when the infected individual coughs or sneezes and droplets of secretions come into contact with the mucous membranes of the mouth, nose or possibly eyes of another individual. It can also be transmitted *indirectly* when people touch contaminated surfaces, objects and hands.
- Transmission while an individual has no symptoms is possible but it is more likely when symptoms such as coughing are present.
- The virus will have the ability to survive for extended periods of time on environmental surfaces:
 - 24 - 48 hours on hard surfaces
 - 8 - 12 hours of porous surfaces e.g. paper, cloth
 - 5 minutes on skin.

2.3 **Municipal Planning Basis**

2.3.1 An influenza pandemic will affect all of Ontario and the rest of Canada. For planning purposes, a worst-case prediction must be used.

2.3.2 As a basis for planning, it is therefore assumed:

- Little or no direct assistance will be provided by neighbouring communities, the Province or the Federal government (with the exception of the provision of vaccine and antiviral drugs, and other clinic supplies when available).
- The Town of Kapuskasing must plan to respond to an influenza pandemic on its own, using its own resources.
- An influenza attack rate of 35% will be assumed when planning for the effects of an influenza pandemic. (Note: An attack rate of 35% means that over the course of a pandemic, about 35% of the population will have influenza severe enough to take 3 days off work).

2.4 Planning Assumptions

2.4.1 The following are the assumptions that will apply to pandemic influenza planning in the Municipality:

- Ontario will have a lead-time of at most three months, possibly less, from the time a pandemic is first declared by the World Health Organization (WHO) to when it spreads to the province.
- An influenza pandemic usually spreads in two or more waves. A second wave could occur within three to nine months of the initial outbreak wave and may cause more serious illnesses and deaths than the first. The length of each wave of illness is approximately six - eight weeks.
- There will be an attack rate of 35% during the first wave.
- For planning purposes, it will be assumed that 35% of staff could be off work at the same time.
- About 55% of those who fall ill with influenza will require some form of care. At least one third of deaths are likely to be in people under the age of 65.
- A vaccine will not be available for at least four months after the virus is identified and therefore will not be available for the first wave of illness.
- Once available, the vaccine will be in short supply and high demand.
- Because Ontario will not have a large enough initial supply of vaccine to immunize everyone, the province will have to set priorities for who receives limited vaccine and antiviral drugs.
- The availability of health care workers during the pandemic could be reduced by up to one-third and the health care system will have to supplement existing resources through a variety of mechanisms.
- Individuals who recover from illness with the pandemic strain will likely be immune to future infection from that strain.
- An influenza pandemic will impact the provision of essential services provided in the Municipality. During a pandemic, the availability of employees could be reduced by up to one-third due to illness over the approximately eight weeks of the first wave. In addition, there will be absenteeism due to concern about disease transmission in the workplace and employees staying home to care for ill family members.

3.0 **CONCEPT OF OPERATIONS**

3.1 General

3.1.1 In the Cochrane Region, the Medical Officer of Health (MOH) has the overall responsibility for directing the public health response to an influenza pandemic. The MOH will direct health operations from the Health Emergency Operations Centre (HEOC).

- 3.1.2 Based on the projected effect in the Municipality, the Mayor, on the advice of the Medical Officer of Health or as directed by the Province, will declare an emergency under the *Emergency Management and Civil Protection Act* and fully activate the Municipal Emergency Operations Centre (MEOC).
- 3.1.3 The Medical Officer of Health at the Porcupine Health Unit will implement public health measures and manage the health response to the outbreak. The role of the Municipality will be to support the Health Unit efforts (see Annex D) and to maintain essential services in the Municipality. Coordination for support to the Health Unit and the maintenance of essential services will take place in the MEOC.
- 3.1.4 A provincial emergency will likely be declared early in the onset of a pandemic. The overall response to a declared emergency will be managed from the Provincial Emergency Operations Centre (PEOC) with the Ministry of Health and Long Term Care (MOHLTC) providing command and control services for the health care sector.
- 3.1.5 See Annex A for a schematic diagram showing the emergency management and health sector response structures.

3.2 World Health Organization (WHO) Pandemic Phases

- 3.2.1 The notification and response by the Municipality to a pandemic influenza will follow the 2005 WHO pandemic periods and phases shown below. There is no timeframe for going from one phase to the next.

PERIOD	PHASE	DESCRIPTION
Interpandemic Period	Phase 1	No new virus subtypes have been detected in humans.
	Phase 2	No new virus in humans but an animal subtype poses a substantial risk of human disease.
Pandemic Alert Period	Phase 3	Human infections with a new subtype but not human-to-human spread.
	Phase 4	Localized small clusters with limited human-to-human spread.
	Phase 5	Larger clusters but human-to-human spread still localized, suggesting that virus is becoming better adapted to humans (substantial pandemic risk).
Pandemic Period	Phase 6	Sustained transmission in the general population.
Post Pandemic Period		Return to interpandemic period.

3.3 Essential Services

3.3.1 Each Department will examine its operational functions and services provided and categorize them using the following planning categories:

PRIORITY 1	Affects, or has the potential to affect, health and safety.
PRIORITY 2	Major inconvenience but does not affect health and safety.
PRIORITY 3	Major loss of revenue, legal exposure, damage to the image of the organization.

3.3.2 Essential functions and services are those that are identified as Priority 1 - those services whose reduction affect, or have the potential to affect, the health and safety of the public.

3.3.3 Priority 2 are those services whose reduction may cause a major inconvenience but do not result in a risk to the health and safety of the public.

3.3.4 Priority 3 is other services whose loss or degradation may affect the image of the organization, legal exposure, or non-critical support to other Priority 1 and 2 services/functions.

3.3.5 Each Department within the Municipality should undertake an assessment of essential services requirements including materials and personnel.

3.3.6 For an outline of the business continuity process and steps to produce a pandemic business continuity plan for each essential service, see Annex B.

3.3.7 Within the Municipality organizational structure, examples of essential services include:

- Fire Services
- MEOC Staff & Support Staff
- Road/Winter Maintenance
- Fleet Maintenance
- Facility Maintenance
- Finance
- Etc.

3.3.8 Examples outside the Municipality level structure:

- Ontario Provincial Police
- EMS
- Hospitals.
- Health Care facilities.
- Individual physicians.
- Central Ambulance Communications Centre.
- Community Care Access Centres.
- Essential staff at local utilities companies.

3.4 Communications

3.4.1 The Medical Officer of Health will be responsible for providing public health information, direction and advice to health care stakeholders, other Regional stakeholders, the general public and the media.

3.4.2 There will be a requirement to coordinate public health communications with information on the provision of Municipal services. To accomplish this, the Emergency Information Centre and Public Inquiry Centre will be established in accordance with the Emergency Information Plan to coordinate the dissemination of information regarding essential services and to perform inquiry functions.

4.0 PLAN IMPLEMENTATION

4.1 Notification

4.1.1 The Medical Officer of Health will be responsible for determining the pandemic phase for Cochrane Region including the Town of Kapuskasing and for notifying all internal and external stakeholders and the public. Sources for determining the pandemic phase will come from WHO, Federal, Provincial and local influenza surveillance data.

4.1.2 Once the MOH has determined the pandemic phase for the Municipality, EMO will contact the CEMC. The CEMC will consult with the Chief Administrative Officer and will advise the emergency management structure on the response level to be adopted. This will include notification of the response level to all departments. Departments are responsible for notifying all employees in their respective Divisions.

4.2 Response Actions

4.2.1 Actions to be undertaken by the Municipal emergency response structure at each phase of notification are summarized below (refer to section 3.2 for detailed Phase descriptions).

PERIOD	PHASE	REGIONAL RESPONSE
Interpandemic Period	Phase 1 – no new virus	Routine Monitoring
	Phase 2 – new animal virus	Routine Monitoring
Pandemic Alert Period	Phase 3 – human infections	Enhanced Monitoring
	Phase 4 – limited human to human spread	Enhanced Monitoring
	Phase 5 – larger clusters human to human spread	Enhanced Monitoring
Pandemic Period	Phase 6 – sustained transmission	Partial Activation (Virus not in North America)
		Full Activation (Virus in North America)
Postpandemic Period		Routine Monitoring/Recovery

4.2.2 Note that the response action at each phase indicated in the chart above is a guide and the response may be modified at any time, depending on requirements.

4.2.3 Interpandemic Period, Phase 1 - 2

- Routine Monitoring.
- Health Unit implements routine influenza programs and services.
- CEMC and appropriate departmental and municipal emergency coordinators will monitor the situation from their normal workplaces.
- Emergency plans and procedures will be reviewed annually, and updated, if required.

4.2.4 Pandemic Alert Period, Phase 3 – 5

- Enhanced Monitoring.
- Health Unit will provide enhanced communications on details of the situation in the world.
- Designated staff will monitor the situation from their normal workplace and ensure that information from the Health Unit is passed to all staff.
- Depending on the situation, Partial Activation may be implemented at Phase 5.

4.2.5 Pandemic Period, Phase 6 (Virus Outside North America)

- Partial Activation.
- All emergency operations centres to be opened and staffed with sufficient personnel and to operate 24/7, if required.
- All communication links will be tested (Departmental, Municipal, Regional and Provincial).
- All emergency response and emergency management personnel placed on standby.
- All planning arrangements to be reviewed and confirmed.

4.2.6 Pandemic Period, Phase 6 (Virus in North America)

- Full Activation.
- Full activation of all emergency operations centres with full staffing, and capable of operating 24/7, if required. (NOTE: see 4.3 below).
- Emergency Information and Public Inquiry Centres to be fully staffed.
- On the recommendation of the Medical Officer of Health in accordance with the *Emergency Management and Civil Protection Act*, the mayor may declare an emergency in the town of Kapuskasing.
- Public health measures as directed by the Health Unit will be reviewed/implemented.

4.2.7 Post Pandemic Period

- Return to Routine Monitoring.
- Staffing and hours of operation of emergency operations centres to be reduced to a level commensurate with the requirement.
- Preparations will be made for the arrival of the “second wave” which could occur 3 to 9 months after the initial outbreak.
- Review response actions and lessons learned and revise plans and procedures.
- Recovery process to return the community back to normal or near normal once the immediate threat has passed.
Essential Services such as Grocery Stores, Financial Institutions, Gas & Service Stations, Municipal Infrastructure.

4.3 Emergency Operations Centres

4.3.1 As noted, the response actions outlined in 4.2 are guidelines for planning purposes and response actions will be confirmed as the pandemic progresses.

4.3.2 Given the characteristics of the virus, at some point in the pandemic it may not be advisable to assemble all required personnel in emergency operations centres. Given the slower developing nature of a health emergency, the frequency of the requirement to meet face-to-face can likely be reduced.

4.3.3 Kapuskasing’s Municipal Emergency Operations Centre shall have a plan to operate in a decentralized manner. Features will include:

- the ability of the Control Group to conduct meetings via teleconference.
- staff in the emergency operations centre to answer and reroute telephone calls.
- minimal administrative staff at the MEOC to process faxes, record and issue minutes, etc.
- emergency operations centre layout to be rearranged if possible to facilitate distancing beyond “close contact” (1 metre).
- strict cleaning procedures for phones, computer, fax machines and workspaces.

4.3.4 The Public Inquiry Centre will also have plans to operate in a decentralized manner.

4.3.5 At Full Activation response, the Municipal Emergency Operations Centre will establish a daily “Operational Cycle” for meetings, briefings, situation reports and media releases in conjunction with the Emergency Operations Centre and Health Unit.

4.4 Declaration of a Municipal Emergency

4.4.1 As the virus spreads and essential services are threatened (Pandemic Period, Phase 6), the Mayor will consider the declaration of an emergency for the town of Kapuskasing. The timing is flexible and will depend on the effects to essential services provided by the Municipality and to the health care system. Advice on the timing of the declaration of a Municipal Emergency will be provided by the Medical Officer of Health via the Regional Chair.

4.5 Surveillance and Monitoring

4.5.1 A Regional influenza surveillance and monitoring system will be implemented by the Porcupine Health Unit:

- to detect the entry and escalation of a pandemic influenza virus into the Town of Kapuskasing.
- to continue to track the spread of the influenza virus through the community, after initial detection.
- to confirm resolution of activity and monitor for reoccurrence of activity in the Municipality.

4.5.2 The Health Unit will focus on the clinical surveillance of influenza-like illness in order to detect the arrival of influenza promptly and to provide timely information on influenza activity locally. The surveillance system will include the following:

- Sentinel Physician Reporting
- School and Daycare Reporting
- Hospital and Urgent Care Facility Reporting
- Emergency Room visits
- Respiratory illness admissions
- All cause mortality in hospitals
- Long Term Care Facility Reporting
- Community Case Reports.

4.5.3 The surveillance program will be flexible and scalable so that routine surveillance and be expanded quickly with the arrival of a pandemic virus in the Municipality.

4.6 Antivirals and Vaccines

- 4.6.1 Antivirals: There are currently two classes of antiviral medications for the treatment of influenza A and B. Studies have shown these drugs to be 70-90% effective in preventing illness. Similar levels of efficacy can likely be achieved with new (pandemic) strains.
- 4.6.2 Recommended dosage for antiviral drugs to prevent influenza would require approximately 30 doses per month for each medication for the healthy population for as long as the exposure continues. For the treatment of ill people, doses would be approximately twice daily for five days, totaling 10 doses per ill person.
- 4.6.3 Both the Federal and Provincial Governments are securing a stockpile of antiviral agents, which may be available for defined groups. Because of the large volume of medication that would be required for prevention and the anticipated short supply, antiviral drugs may not play a significant role in reducing the mass effects of a pandemic. At the direction of provincial and federal authorities, the Health Unit will be responsible for implementing the distribution of available antiviral medications.
- 4.6.4 Vaccines: Inactivated influenza vaccine has long been considered the cornerstone of influenza and control. It is assumed that vaccination will also serve as the central preventative strategy during the next pandemic. The Health Unit will be responsible for making arrangements for the acquisition, transport, storage, security and delivery of vaccines. The Ontario Provincial Police will provide assistance as required.
- 4.6.5 Supply: Because of the anticipated short supply, antiviral drugs will likely be reserved for designated priority groups, both in areas of treatment and prevention. Vaccination will serve as a central preventative strategy and as such, a mass immunization program will be implemented. However, it is expected that the new vaccine will not be available for at least 4 - 5 months after the pandemic strain is identified, and thus initially, vaccine will be in short supply and high demand.
- 4.6.6 Prioritization for Immunization: The influenza strain in a pandemic will be unique. While the goal will be to obtain enough vaccine for the entire population of Kapuskasing, in the early stages of a pandemic, vaccine may be in short supply. In this situation, the Province will follow the national recommendations for priority groups for influenza immunization, adapting them as required to meet provincial needs.
- 4.6.7 To help ensure a consistent approach to the use of vaccine, the Province has developed working definitions and criteria to determine

priority groups for immunization. The priority groups for vaccine during a pandemic are as follows:

1. Front-line health care workers and key health decision makers.
2. Remaining health care workers.
3. Emergency/essential service providers.
4. Persons at high risk of fatal outcomes (e.g. people in nursing homes, long-term care facilities, people with high-risk medical conditions, people over age 65, children between the ages of 6 and 24 months)
5. Healthy adults.
6. Children 24 months to 18 years of age.

These groups may be redefined by the Province depending on the characteristics of the new pandemic virus.

- 4.6.9 Priority Group Enumeration. The Health Unit will distribute priority group enumeration tools in order to determine the requirement for vaccine and antivirals. Detailed descriptions for defining each priority group will be provided.
- 4.6.10 Mass Immunization Program. The Health Unit will be responsible for the organization and staffing for a mass immunization program for the general public in the Municipality. Public clinics will be established at designated locations, the number to be based on population requirements, available vaccine and staffing. The most likely location will be recreation facilities in local municipalities. Locations will also be identified for non-public clinics that will be set up to administer to designated priority groups. Local municipalities will provide assistance with the set up and operation of clinics as requested by the Health Unit. The OPP will arrange for security. Municipalities will be requested to make available community centres as required.
- 4.6.11 Immunization Teams. The operation of clinics will involve a specific team of people to administer the vaccine and to run the clinic. The optimum number of teams will be pre-determined. As vaccine becomes available, team lists will be drawn up and clinic locations confirmed. The Health Unit may require assistance from other departments and local municipalities in staffing or setting up the clinics.

4.7 Public Health Measures

- 4.7.1 In addition to the use of vaccines and antivirals to combat the spread of the pandemic virus, other infection control measures will be

implemented. Public health measures are non-medical interventions including infection control that may be used to reduce the spread of the pandemic influenza virus.

4.7.2 The Medical Officer of Health is responsible for the implementation of public health measures in the Cochrane Region. Implementation of these measures will be coordinated with the Province.

4.7.3 Both individual and community public health measures will be considered for implementation. However, it is difficult to predict the effectiveness of various public health measures until the characteristics of the influenza pandemic strain becomes known.

4.7.4 Individual public health measures include:

- case management and contact tracing.
- self-isolation (remain at home with influenza-like illness until symptoms resolve).
- individual activity restrictions.

4.7.5 Community public health measures include:

- closing schools and daycares.
- banning public events such as sports/cultural gatherings.
- closing public centres such as recreation complexes (cinemas, theatres, bars, restaurants).
- reducing personnel at workplaces to critical process staff.
- closing work places.
- travel restrictions.

4.7.6 Infection control measures that should be implemented at all times include:

- hand hygiene
- sneeze and cough etiquette
- stay at home if ill
- environmental cleaning

4.7.7 See Annex C for details of public health measures.

4.8 Communications

- 4.8.1 Concept: Communications will provide the backbone for a coordinated response to an influenza pandemic. A wide range of groups will need to share accurate, timely and consistent information. The Health Unit, Regional and local municipal information/communications programs will be integrated in order to prevent mixed messages or duplication of effort.
- 4.8.2 For the Interpandemic and Pandemic Alert Periods (Phases 1 – 5) the Health Unit will direct the communications effort. At Pandemic Period, Phase 6, the Porcupine Health Unit Influenza Pandemic Plan will be implemented and the Emergency Information Centre and the Public Information Centre will be opened and staffed appropriately.
- 4.8.3 The Health Unit will be responsible for providing health related information and direction to the health care community and other Regional stakeholders. The Region and Municipal emergency information effort will focus on the status of essential services.
- 4.8.4 Components: Communications planning and operations for a pandemic will include the following components:
- public information.
 - media information and media monitoring.
 - public inquiry.
 - rumour control.
 - staff information.
 - other targeted groups such as schools.

4.9 Personnel Administration

- 4.9.1 Succession Planning: All Departments will have a succession plan in the event of absenteeism by key decision makers. Lists will be prepared and shared with other stakeholders at Phase 6.
- 4.9.2 Staffing for Essential Services: As the pandemic develops in the Municipality, Priority 1 Municipal Services, as well as other essential services must be maintained. Each Department and essential service organization is responsible for maintaining those identified services using their own resources first. If there is difficulty meeting the staffing or other resource requirements, organizations will work through the Municipal Emergency Operations Centre (MEOC) for assistance.
- 4.9.3 Attendance Reporting: At Pandemic Period, Phase 6, all Departments will provide a daily report on staff status and the effect on the delivery of Priority 1 functions to the Director of Human Resources.

- 4.9.4 Volunteer Management: As the pandemic spreads, there may be individuals or groups who are able and capable of volunteering to provide assistance where needed. Human Resources will be tasked as the initial point of contact for all volunteers. The Department will record name, address, phone number, as well as any specialty experience. HR will then forward the names of volunteers to any department or agency in need of assistance. (Note: Those who have been ill with the pandemic strain and recover will be immune to further infection from that strain).
- 4.9.5 Municipal Employee Reassignment: During a declared emergency, By-Law _____ designates all Municipal employees as emergency workers. They may be called out and assigned responsibilities to assist in the implementation of the Emergency Plan. Human Resources will maintain a list of those employees not working in Priority 1 essential services and who may be available to provide assistance elsewhere in the Municipality. These employees will not be utilized in any high-risk environment.
- 4.9.6 Employee Special Arrangements: In order to ensure as high an employee turnout as possible throughout a pandemic, especially for those services deemed essential, special arrangements may be required. Human Resources will monitor employee needs and will establish a number of phone lines as “employee only” information lines. Other provisions may include the setting up of ad hoc daycare centres for children of employees should those facilities be closed in a pandemic
- 4.9.7 Employee Non-Medical Support: In conjunction with attendance reporting, each Department will contact those absent and determine any non-medical assistance that may be provided to those who may be ill. Support may include pickup and delivery of food and other household items.

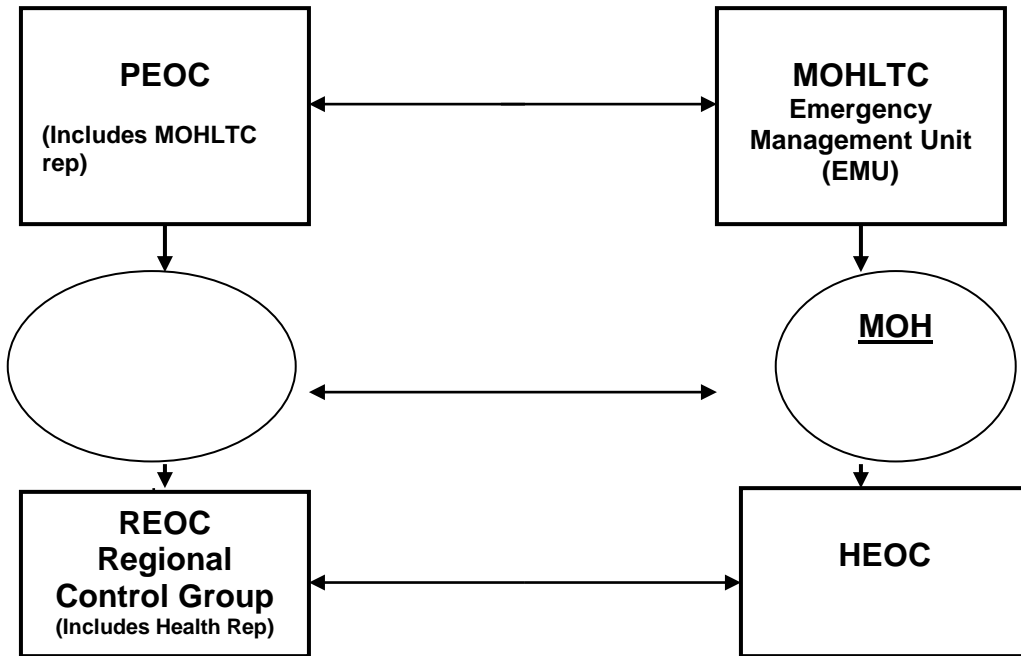
4.10 Emergency Mortuary Arrangements

- 4.10.1 The Health Unit maintain a list of all funeral homes in the Area. When directed, a reporting system will be established with the funeral homes. This reporting system will ensure that the Health Unit can track the effectiveness of the funeral homes in meeting any increased requirements.
- 4.10.2 The Health Unit will assist funeral homes in the development of a plan to deal with a worst-case scenario where the funeral homes are overloaded. The plan will include provision for the establishment of emergency temporary mortuary location(s) such as cold storage units.

5.0 Responsibilities

The responsibilities of Departments are found at Annex D.

**INFLUENZA PANDEMIC
EMERGENCY RESPONSE STRUCTURE**



- REOC Roles
- Essential Services
 - Business continuity
 - Municipal coordination
 - Departmental coordination
 - Support for the Health response
 - Public Inquiry
 - Communications

- HEOC Roles
- Lead the health response
 - Precautionary & protective measures
 - Health response (e.g. surveillance, vaccines)
 - Public direction
 - Public Inquiry
 - Communications

- Kapuskasing Municipal Emergency Ops Centre Roles
- Essential Services
 - Business continuity
 - Departmental coordination
 - Public Inquiry
 - Communications

Health Care Community

MOH = Medical Officer of Health
 PEOC = Provincial Emergency Operations Centre
 REOC = Regional Emergency Operations Centre (Porcupine Health Unit)
 HEOC = Health Emergency Operations Centre

↔ Indicates close coordination required

MAINTAINING ESSENTIAL SERVICES – BUSINESS CONTINUITY FOR A PANDEMIC

General

Business Continuity Management is the process of identifying potential risks that could threaten business operations of an organization and the development of plans to respond to such incidents. Business Continuity Management (also referred to as Continuity of Operations) includes:

- Risk assessment and management
- Disaster recovery
- Personnel management
- Supply chain management
- Facilities management
- Safety management
- Security management

A complete business continuity plan must take into account all potential risks to an organization as well as disaster response.

This guide will focus only on business continuity relating to an influenza pandemic.

Primary Threat

The primary threat or risk to maintaining essential services during a pandemic is **high absenteeism**. The objective of a business continuity plan for a pandemic is to determine how to maintain essential services/functions given high rates of absenteeism for reasons that may include:

- Sickness
- Staying at home to care for those family members who are ill
- Staying at home to care for children in the event that schools and daycares are closed
- Fear of coming into the work environment

Outline Business Continuity Plan for a Pandemic

Step 1	Assume Responsibility
Step 2	Assign a Coordinator/Team
Step 3	Identify Essential Services
Step 4	Identify Staff to Maintain Essential Services
Step 5	Develop the Plan
Step 6	Educate/inform Staff

Annex B

Step 1- Assume Responsibility

The Town of Kapuskasing must recognize the requirement to prepare for a pandemic and provide commitment and support to the creation of a business continuity plan.

Department Heads must assume responsibility for the preparation of viable business continuity plans in advance of a pandemic.

Step 2 – Assign a Coordinator/Team

- Each Director will act as coordinator for developing a business continuity plan for a pandemic.
- Depending on the size of the department, a team may be designated to assist the Director.

Step 3 – Identify Essential Services

- Complete Appendix 1.
- List all services/functions provided by your department.
- Using the definitions provided at Section 3.3 of this plan, categorize each service/function as Priority 1, Priority 2 or Priority 3.
- Priority 1 services are those that relate to health and safety and these are the essential services that must be maintained throughout a pandemic.

Step 4 – Identify Required Staff to Maintain the Essential Services

- Complete Appendix 2. This will assist in identifying:
 - number of staff currently assigned to perform the service/function.
 - minimum staff assessed to be able to perform the function.
 - any potential staffing shortfall given a 35% reduction because of absenteeism.

Step 5 – Develop the Plan to Maintain the Essential Services

- Complete Appendix 3 for each functional activity of an identified essential service. This is an outline that will assist in developing a plan of action to ensure that essential services can be maintained throughout a pandemic.

Annex B

- Considerations will include identifying:
 - succession planning - who are the key decision makers, who are the alternates.
 - surge requirements that may arise for the service during a pandemic.
 - alternate delivery options.
 - alternate staffing from other non-essential services/volunteers.
 - training requirements to ensure an adequate number of trained personnel are available.
 - critical supplies and suppliers.

Step 6 – Write the Plan, Train and Educate Staff

- Once the plan is developed in Step 5, it must be documented.
- Each essential service must have a plan and where applicable, these should be combined to produce an overall departmental/municipal plan.
- Once completed the plan must be communicated to all staff.
- Where required, make a plan to train additional staff in the delivery of the essential service according to the plan.
- Complete and maintain a staff qualification/certification inventory which identifies transferable skills if staff are needed elsewhere in the Corporation.

PUBLIC HEALTH MEASURES

General

Public health measures are non-medical activities that may be used to reduce the spread of the influenza virus. These include individual public health measures and community public health measures.

The type of public health measures used will depend on the characteristics of the new influenza virus. Measures directed toward community disease control have not been well studied or reported in scientific literature. However, there is broad agreement that when cases infected with a new virus first appear, aggressive measures will be valuable in delaying the impact or possibly containing an evolving pandemic.

Infection Control – NOW

The following are infection control measures that should be instituted and promoted now as common practices by Departments.

Annual Influenza Vaccination - encourage all staff to get the annual flu vaccination. While this will not protect from the new pandemic virus strain, it will prevent other forms of influenza in 70% of the healthy population.

Hand Hygiene – frequent hand washing with soap and water or the use of hand sanitizers is very effective in limiting the spread of infection. Effective hand washing involves wetting hands, applying liquid soap, scrubbing for 15 seconds, rinsing and drying with a paper towel. Effective use of sanitizers involves applying enough sanitizer for hands to stay wet for 15 seconds, spreading sanitizer over all surfaces of hands and rubbing hands together until dry.

Hands should be washed or sanitized;

- After coughing, sneezing or blowing the nose.
- After using the washroom.
- Before preparing food.
- Before eating.
- Before touching the eyes, mouth or nose.
- After shaking hands.

Sneeze/Cough Etiquette – Covering your mouth and nose while sneezing and coughing will help limit the spread of infection. If possible cover your mouth and nose with a tissue or cough/sneeze into your upper sleeve. Dispose of used tissue and wash your hands after coughing or sneezing.

Annex C

For information on implementing an effective hand washing and sneeze/cough education program, contact the Porcupine Health Unit. Information and posters are available on the Health Department webpage.

Stay at home if ill – Staying at home when ill will help limit the spread of infection. In all workplaces, schools and childcare centres, it should be a common practice to stay home when ill.

Environmental Cleaning – Because the virus can survive on environmental surfaces (up to 48 hours on hard surfaces) frequent cleaning can reduce the spread of the virus in the home or at workstations. Cleaning should take place using common household disinfectants.

Community Based Public Health Measures During a Pandemic

During an influenza pandemic, infection control measures outlined above should be reinforced at all levels. Additional public health measures for community based disease control will be considered.

The trigger for these measures will depend on the way in which the pandemic unfolds. Decisions on implementing these measures will be made by the Medical Officer of Health. However, directions may also be forthcoming from the Federal and Provincial governments to ensure consistency. Some measures have been assessed as being effective as a community based strategy. However, all community based public health measures will be assessed and these include:

Self-Isolation – Individuals who are ill will be asked to stay home from public locations. Adults recommended for self-isolation should remain home for a minimum of 5 days after onset of symptoms (7 days for young children) or until symptoms have resolved, unless they need to visit a health care provider. During this period, people should avoid close contact with unexposed household members. “Close contact” is defined as face-to-face exposure within 1 metre (3 feet) of another individual. Frequent disinfection of household surfaces should be practiced.

Quarantine – At the very early stages of a pandemic, contacts and individuals linked to exposure sites may be promptly identified and if this is the case, these individuals may be quarantined in an effort to slow transmission in the community. This measure would only be applied if there were sporadic infections or clusters in the Region and not if there was efficient virus spread in the general population.

Annex C

School/Daycare Closure – Children are known to be efficient transmitters of influenza. Closing schools and daycare facilities may reduce transmission or delay the spread of the disease, particularly if the pandemic was causing high attack rates in school aged children. This control measure will have an effect on the parents and caregivers and could divert essential workers to child-care responsibilities. School boards or daycare administrators may choose to independently close their facilities based on their own criteria for safe facility operation.

Restriction of Large Gatherings – This would involve closing of indoor gathering places for people. Gatherings may include sporting events, theatres, conferences as well as mass public transportation services. Because the effectiveness of this measure is not documented and the difficulty with sustainability of canceling or restricting indoor gatherings, this measure is not recommended in the Canadian Pandemic Plan as a broad public health measure. However, this measure remains an option for targeted events to reduce transmission.

Social Distancing – Once a pandemic has arrived in a community, people should use “social distancing” as a way to reduce the risk of being exposed. The Health Unit will provide advice. Some strategies for social distancing include:

- Avoid “close contact” with individuals (i.e. within 1 metre).
- Minimize visitors to homes
- Cancel family gatherings
- Avoid shaking hands, hugging, or kissing people as greetings
- Stock up of groceries and shop less frequently
- Work from home
- Minimize contact at work by teleconferencing
- Utilize means other than public transit

Use of Masks By Well Individuals – This measure is not recommended in the Canadian Pandemic Plan as a community based intervention. It is assessed that it is not likely to be effective in reducing disease spread in the general population. It is recognized that wearing a surgical mask properly at the time of an exposure may provide a barrier, if used with other infection control measures. If masks are used, they should only be used once and must be changed if wet (because they become ineffective when wet). As well, masks must be removed properly to avoid contaminating the wearer. It is not feasible to wear masks for the duration of a pandemic wave and there may be supply problems. Again, advice will be provided by the Health Unit.

Annex C

Hand Sanitizing Stations in Public Settings – Frequent hand washing is an effective infection control measure. However, the Canadian Pandemic Plan does not recommend establishing sanitizing stations in public settings such as public transit stations. It is assessed that this would not be effective in significantly reducing the spread of the disease in the general population. Compliance would not be assured and these stations would require human and financial resources to maintain. Hand washing must be encouraged and existing public washrooms should be appropriately stocked with supplies at all times.

Increased Frequency of Cleaning Surfaces in Public Settings – The frequency of hand contact with various “public” surfaces would require constant cleaning to have any effect on reducing the virus on these surfaces. Realistically this measure cannot be implemented. However, individuals can reduce their risk of exposure to infectious droplets by more frequent cleaning of their own environments and limiting hand contact with “public surfaces” (e.g. elevator buttons, public telephones). These strategies will be included in public education messages.

Screening at Critical Infrastructure Locations – Passive screening of staff by use of a questionnaire at the entrances to critical infrastructure locations (e.g. a water treatment plant) may assist in limiting the spread of infection. If deemed appropriate, the Health Unit will provide advice on the implementation of screening including questions to be asked.

Travel Restrictions – Depending on the characteristics of the pandemic, the Federal or Provincial governments or the local Medical Officer of Health may recommend postponement of all non-essential travel to the affected geographic areas in Canada.

RESPONSIBILITIES INFLUENZA PANDEMIC PLAN

The Town of Kapuskasing Emergency Plan provides a framework and an emergency management structure to respond to any natural or human-caused emergency. It establishes policies, strategies and concept of operations for an effective system of emergency management.

The Town of Kapuskasing Emergency Plan assigns responsibilities to Departments, before, during and after an emergency. The Plan can be found under Emergency Planning on the Town of Kapuskasing website.

In addition to those listed in the Emergency Master Plan, there are responsibilities that apply specifically to an **influenza pandemic emergency**. These are listed below.

Interpandemic Period (Phase 1 -2)

- Write a pandemic response plan for your department based on this plan and the guides at Annex B. Conduct annual reviews of the plan.
- In the absence of a corporate business continuity plan, identify/confirm departmental Priority 1 functions/essential services (see Section 3.3).
- Determine/confirm the resources required to ensure the continuance of the essential Priority 1 functions including personnel, supplies and outside services. Essential personnel must have sufficient backups identified/trained and plans must be in place for the continuing supply of critical commodities such as fuel and chlorine.
- Maintain up-to-date personnel contact lists and after hours notification procedures.
- Develop and maintain a succession planning list e.g. if the Department Head is not available, who is in charge? If that person is not available, who is next in line? (A succession plan should be in place for any emergency event).
- Complete forms provided by the Health Unit to enumerate individuals for priority access to vaccine in accordance with defined Provincial criteria.
- Assist the Health Unit in distributing information on the influenza pandemic.
- Promote hand washing and cough etiquette as common hygiene practices at work and in the community.

Pandemic Alert Period (Phases 3 – 5)

- Assist in communicating information from the Health Unit on influenza pandemic and on new virus activity in the world.
- Increase promotion of hand washing and cough etiquette as common hygiene practices at work and in the community.

Annex D

- Update enumeration lists of priority individuals as directed by the Health Unit.
- The CEMC is the primary contact for the receipt of influenza pandemic information from the Health Unit and is responsible for disseminating that information to Municipal staff.
- Assist in the education campaign by providing information to residents, businesses and other community organizations.
- At Pandemic Phase 5, review/update plans.

Pandemic Period (Phase 6) [Virus “OUTSIDE” North America]

- The MEOC may be set up and staffed to appropriate levels.
- All MEOC staff and alternates to be placed on standby as required.
- All staff to be notified that the Municipality is at Pandemic Phase 6.
- Review procedures to run emergency operations centres in a decentralized manner (i.e. teleconference).
- Ensure all staff is informed of the influenza pandemic plan and procedures as well as Health Unit updates on the pandemic.
- Confirm Municipal support to Health Unit requirements such as mass immunization clinics and support to people who may be quarantined.
- Human Resources to confirm daily personnel reporting and recording procedures with Departments.
- Implement any public health measures ordered by the Medical Officer of Health (e.g. reduce non-essential travel/crowds, personal respiratory hygiene, cleaning and disinfecting surfaces, workplace screening, staying home if feeling sick) and assist in educating the public.
- Assist the Health Unit in public education on public health measures and infection control.
- Review and reassess the supply chain for critical supplies.

Pandemic Period (Phase 6) [Virus “IN” North America]

- Declaration of a Municipal emergency by the Mayor on the advice of the Medical Officer of Health.
- Implement all components of respective pandemic plans including attendance reporting, support for employees, emergency information and public inquiry centres.
- MEOC to be fully staffed and capable of operating 24/7 if required -operating by teleconference if directed to do so.
- As required or directed, reduce operations to essential services only.
- Implement public health measures as directed by the Health Unit.
- Implement daily personnel attendance reporting to Human Resources.

Annex D

- Conduct daily contact of those personnel who are off sick and provide any assistance where possible (e.g. if self-quarantine is in effect, deliver groceries if required).
- Departments to provide MEOC with a daily status report on the provision of essential services.
- MEOC to issue daily situation reports to departments.
- Provide support to mass immunization clinics when vaccine is available.
- Assist the Health Unit in public education on public health measures and infection control.

Post Pandemic Period

- Post pandemic period will be declared by the Medical Officer of Health. Depending on the status of the provision of essential services, the Municipal emergency may be terminated.
- Return to routine monitoring. MEOC may close and staffing levels reduced to a level commensurate with the requirement.
- The Municipality will establish a committee to assist the community in returning to normal or near normal, once the immediate threat has passed.
- On direction of the Health Unit, public health measures will be lifted.
- Commence preparations for the “second wave” of the pandemic which may occur 3 to 9 months after the start of the initial wave.
- Provide critical incident stress counseling for staff.
- Assess the impact of the pandemic on the community and the timelines to return to normal levels of service.
- Recovery process to return the community back to normal or near normal once the immediate threat has passed.
 - Essential Services such as Grocery Stores, Financial Institutions, Gas & Service Stations, Municipal Infrastructure.
- Review response actions and lessons learned and revise plans and procedures.

Specific Tasks In Addition To The Above

Human Resource Services

- Maintain a list of employees not working in designated Priority 1 essential services.
- When required, match employees with skill sets for employees to be reassigned to provide assistance elsewhere in the Municipality.
- When required, establish an "employee only" information phone line to update staff on the current situation.
- Monitor employee needs and implement any special arrangements that will assist in reducing absenteeism, especially for essential services workers.

Annex D

- Act as the initial point of contact for any individuals or groups who may wish to volunteer their assistance. Record names, addresses, contact numbers and any specialty experience. Forward the names of volunteers to any department in need of assistance. (Note that individuals who recover from illness will be immune to future infection from that pandemic strain).
- Review personnel policies (sick, absent, work refusal, quarantine, holiday, overtime, temporary employees, care of family members, etc) in advance of a pandemic and prepare policies that may be required to be implemented for a pandemic emergency.

Finance Services

- Review critical supplies and suppliers with Departments and identify alternate suppliers if required.
- Set up a financial tracking system for expenses directly related to a pandemic and provide direction to other Departments.
- Implement this system at Phase 6.

Information Technology Services

- Ensure the technology and personnel are available to meet the increased demands and requirements for remote access to facilitate staff working from home (including full access to files as well as email).

Clerk's Services

- Make plans to ensure that essential Committee and Council meetings can be safely conducted during a pandemic. The Health Unit will provide advice on how this can be achieved, given the public health measures that may be implemented.

Ontario Provincial Police

- Arrange for the security of vaccine and antivirals:
 - during transportation to the Municipality.
 - for receipt and storage.
 - at clinic sites.
- Arrange for security at immunization clinics – crowd control and vaccine/antiviral protection.

The Health Unit will provide OPP with details of transportation, storage locations and dispensing locations as soon as known