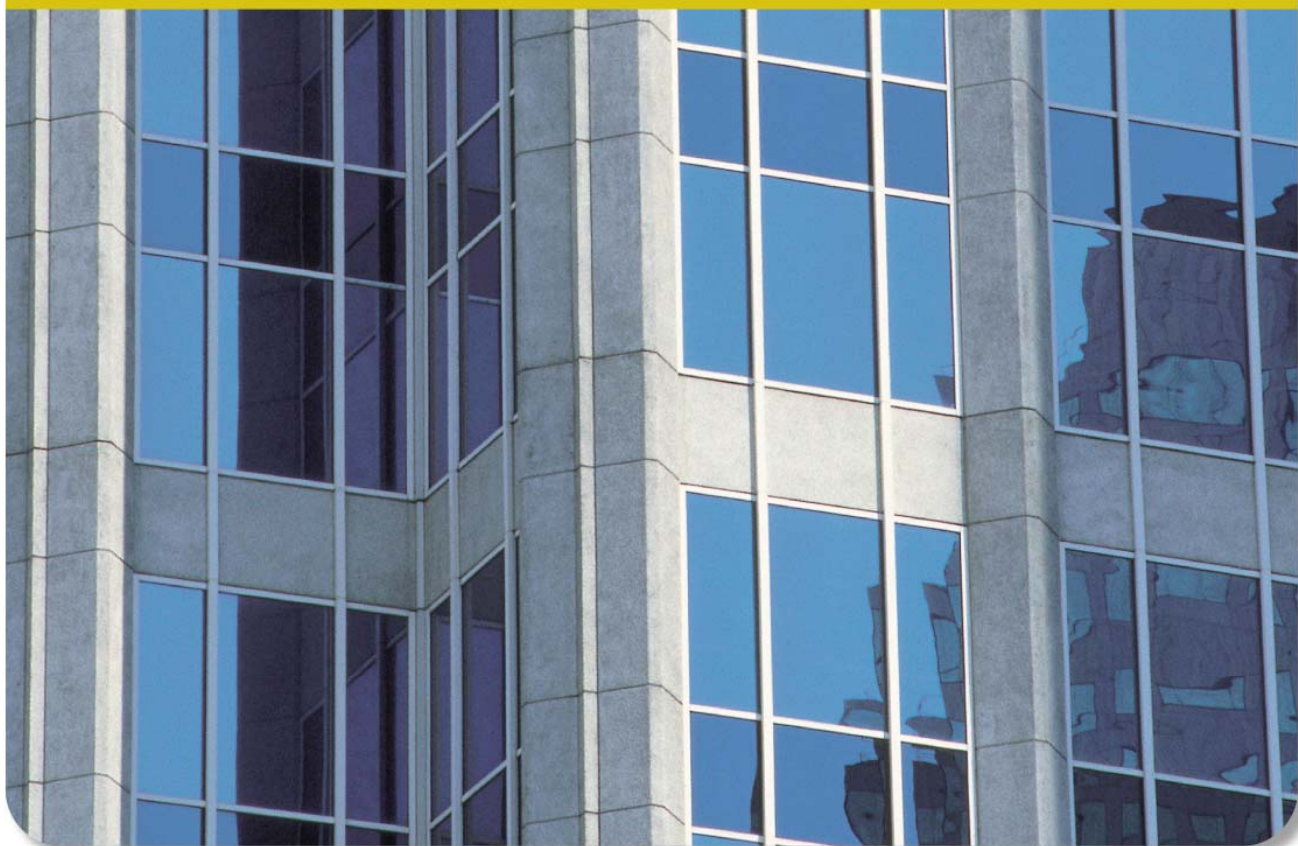


GUIDE

Planning Guide for Commercial Buildings
INFLUENZA PANDEMIC



www.bomacanada-pandemic.ca



Building Owners And Managers Association of Canada

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1. Introduction

1a Overview

This Planning Guide was developed by the participants of the National Industry Pandemic Planning Task Force (“the Task Force”) in cooperation with the Building Owners and Managers Association (BOMA) of Canada. The BOMA Canada *Pandemic Planning Guide for Commercial Buildings* (“the Guide”) is based on the Canadian Manufacturers & Exporters’ *Influenza Pandemic: Continuity Planning Guide for Canadian Business*¹ and portions of the on-line toolkit for pandemic planning prepared by eBRP Solutions.²

In response to growing concerns over the possibility of a widespread viral outbreak, a National Industry Pandemic Planning Task Force was established, comprised of representatives from major commercial real estate owners and managers across the country, as well as BOMA Canada. The group is supported by Marsh Canada as an expert in business continuity and by Dr. Donald Low, Chief of Microbiology at Mount Sinai Hospital in Toronto.

In the event of a pandemic, it is estimated that, without vaccines and antivirals, between 15 and 35 percent of the population - representing between 4.5 million and 10.5 million Canadians - could become ill. In addition, it is estimated that in Canada, between 2 million and 5 million people would require medical care, between 34,000 and 138,000 people could require hospitalization and between 11,000 and 58,000 deaths could occur. The impact would include not only tenants, building management and staff, but also key service providers, such as cleaning and security firms. Safety, business continuity and limiting transmission of illness are all crucial issues. Risk managers now advise that pandemic planning must become a central part of disaster preparedness plans and policies.

To mitigate the effects of any potential pandemic, the Task Force was committed to shaping strategies that reach beyond individual buildings’ boundaries and to cooperatively work together to provide common response strategies. The objective of the Task Force was to develop a national pandemic planning guide for commercial office owners and managers. The Guide encompasses elements of business continuity planning for the benefit of those firms that require a more complete template. The Guide layers industry-specific procedures, public domain responses and standard communication to assist BOMA members and the Canadian commercial real estate industry with relevant information relating to property operations.

BOMA Canada acknowledges the Task Force for their exceptional work in developing this Pandemic Planning Guide. The collaboration and expertise of this Task Force, comprised of senior industry representatives of numerous major commercial real estate firms, was crucial to the successful completion of this valuable new resource document, for the benefit of the entire industry.

The Building Owners and Managers Association (BOMA) of Canada is the voice of the Canadian commercial real estate industry with over 2,500 members in regional associations across Canada. On behalf of the building owners, managers, developers, facilities managers, asset managers, leasing agents, brokers, and the product and service providers to over 1.9 billion square feet of commercial real estate in Canada. BOMA Canada addresses issues of national concern, and promotes excellence in the industry through information, education advocacy and recognition.

1 Canadian Manufacturers and Exporters www.manufacturingourfuture.ca

2 eBRP Solutions www.ebrp.net

1b How to use this Guide

This Guide was created to help commercial building owners and managers plan for business continuity during a Pandemic. It is not intended as an “instant” plan where you can simply add some names or places and consider your Business Continuity or Pandemic Plan as being complete.

The Guide is based on a complete business continuity plan framework. However, work undertaken by the Task Force is added in some sections relating specifically to the commercial office building sector. These industry specific sections follow the corresponding generic plan from the preceding section.

The Guide contains:

- A background summary of the potential impacts of an influenza pandemic on business;
- An overview of the human resource issues involved; and,
- The critical elements incorporated into business continuity strategies for managing the impact of an influenza pandemic, including how to:
 - Maintain essential activities; and
 - Contain/minimize the spread of infection in the workplace.

In addition:

- Appendix 1 provides a series of charts, created as per the Task Force meetings, that illustrate the potential impact of absenteeism on various commercial building service providers;
- Appendix 2 provides a comprehensive list of Federal, Provincial and International contacts where businesses can find more information about pandemic influenza and emergency preparedness measures; and
- Appendix 3 provides a more detailed background on the nature of an influenza pandemic, from the World Health Organization (WHO).

The information on business continuity planning for a pandemic is necessarily generic, and will need to be adapted to meet the circumstances of each owner or manager and each property.

An accompanying document, the *Pandemic Planning Toolkit for Commercial Buildings*, which is available for download on the BOMA Canada Pandemic website, encapsulates the key elements of the Guide, specific to commercial buildings, and also includes template planning checklists, tenant correspondence, a service provider survey, and recommended building collateral.

BOMA Canada's web-site, the *Pandemic Planning Site for Canadian Commercial Real Estate*: www.bomacanada-pandemic.ca , also provides a wealth of useful links to such resources as federal and provincial health and emergency information sites, industry information, and other national and international pandemic flu resources.

To further assist property owners and managers in pandemic planning we also recommend the BOMA Toronto Workshop Report – *Addressing the Threat to Commercial Buildings of an Avian Flu Pandemic*. The link to this report can be found on BOMA Canada's Pandemic Planning Site for Canadian Commercial Real Estate, www.bomacanada-pandemic.ca

2. Disclaimer

By reading this Guide you hereby agree to abide, without restriction or limitation of any kind whatsoever, by the terms of this disclaimer.

The Building Owners and Managers Association of Canada, including all of its officers, directors, employees, advisors, consultants, committee members, Task Force members, agents and members (hereinafter collectively referred to as "BOMA") has assembled the material in this document for the purpose of canvassing potential practices in dealing with the potential for a Pandemic, and for no other health concern or other issue whatsoever. The information presented is solely and without exception, express or implied, for that purpose. BOMA makes no express or implied representations, warranties, guarantees, or promises, that the information presented is current or accurate at any point in time, be it presently, previously, or at any time in the future.

The information in these documents is not meant in any way to advocate, promote, or suggest any preferred method or methods for dealing with a Pandemic. Should the user confront any other emergency health or other related issues related to a Pandemic or any other illness, ailment, or any other health concern or emergency, the user should seek out professional medical advice or other professional assistance. This information should not be used during any medical emergency, diagnosis, or treatment of any medical condition. Any legal, financial, emergency, management, development, structural design or commercial issue whatsoever should be referred to a qualified professional who can properly assess any risks inherent in following any plan to address a given issue. The information provided is not a substitute for consulting with an experienced professional.

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The National Pandemic Task Force (the Task Force) and the Building Owners and Managers Association of Canada acknowledge the support and groundbreaking work of the Canadian Manufacturers & Exporters (CME) in sharing best practices across Canada's business community. The Task Force and BOMA Canada also wish to gratefully acknowledge the support and expertise derived from eBRP Solutions. This planning guide contains material drawn from both the CME document titled Influenza Pandemic: Continuity Planning Guide for Business and eBRP's Avian Flu Pandemic: Response Plan Template. This material is copyrighted and may not be reproduced without permission.

4. Context - Pandemic Characteristics and Estimated Impact on Canadians

Influenza viruses periodically cause worldwide epidemics, or pandemics, with high rates of illness and death. A pandemic can occur at any time, with the potential to cause serious illness, death and colossal social and economic disruption throughout the world. Experts agree that future influenza pandemics are inevitable, but the timing of the next pandemic cannot be predicted. Since there may be little warning, planning in advance is required to contain the potentially devastating effects of a pandemic.

- Pandemic influenza, or flu, is a global outbreak of disease that occurs when a new influenza A virus appears in humans, causes serious illness and then spreads easily from person to person.
- Seasonal flu is a viral infection of the lungs that appears each year between November and March.
- About 4,000 Canadians die each year from seasonal flu and as many as 8,000 in a severe season. Health Canada estimates that a pandemic flu could claim 11,000 - 58,000 lives if no vaccine or antiviral is available.
- Experts agree that it is not a question of if, but when the next flu pandemic will strike.
- An influenza pandemic could last for several months, infecting between 15% and 35% of the population of Canada, assuming no antiviral or vaccine is available.
- Despite all preparedness efforts, Canada will not be spared from a flu pandemic.
- All businesses, hospitals and government agencies will feel the effects of a pandemic.
- 15 to 35 percent of your workforce may be ill at any one time.
- Unlike other disasters, a flu pandemic will touch everyone in every part of the country, and every part of the world. Moving operations to another location is not likely to be a viable option.
- A flu pandemic could cost the Canadian economy billions of dollars in lost productivity and medical expenses.
- During a pandemic, it will not be business as usual.
- **Widespread impact:** The impact of a pandemic would be widespread, even global in extent, not localized to a single area. Therefore there may be little outside assistance. Many business continuity plans (BCP's) assume some part of an organization is unaffected and can take up the required capacity. That is not likely to be possible in the event of a pandemic.
- **Not a physical disaster:** A pandemic is not a physical disaster. It has some unique characteristics that require measures to limit social contact such as restriction of movement, quarantine or isolation, and reduction of public gatherings.
- **Duration:** A pandemic would not be a short, sharp event leading immediately to commencement of a recovery phase. Many BCP's assume the event is short/sharp and that recovery can start immediately.
- **Notice:** Based on the last two pandemics, it is estimated that the next pandemic virus will be present

in Canada within three months after it emerges in another part of the world, but it is, in fact, likely to occur much sooner due to increases in the volume and speed of global air travel. Upon arrival, the virus will spread across Canada with great speed (In 1918, returning soldiers with influenza traveling on trains carried the virus from Quebec to Vancouver in only a few weeks). The first peak of illness in Canada is likely to occur within two to four months after the virus arrives in Canada. The first peak in mortality is expected one month after the peak in illness.

When pandemic influenza appears in Canada it will probably be some weeks before the full impact on the workforce will be felt, although there may be some early impacts resulting from closures of schools and similar containment measures.

• **Primary effect is on staffing levels:** Unlike natural disasters, where any disruption to business service provision is likely to be asset-related, disruption to business operations in the event of a pandemic is anticipated to be mainly human-resource oriented. Businesses should plan for up to 30 percent staff absences for periods of about two weeks at the height of a severe pandemic wave, and lower levels of staff absence for a few weeks either side of the peak.

In addition, it has been observed that an influenza pandemic usually spreads in two or more waves, either in the same year or in successive influenza seasons. A second wave may occur within three to nine months of the initial outbreak wave and may cause more serious illnesses and deaths than the first. In any locality, the length of each wave of illness is likely to be six to eight weeks. Staff absences can be expected for many reasons:

- Illness/incapacity (suspected/actual/post-infectious);
- Some employees may need to stay at home to care for others who are ill;
- People may feel safer at home (e.g. to keep out of crowded places such as public transport);
- Some people may be fulfilling other voluntary roles in the community; and
- Others may need to stay at home to look after children (as schools and daycares are likely to be closed).

A pandemic may have other impacts on businesses, such as:

- The provision of essential services like information, telecommunications, and financial services, energy supply, and logistics may be disrupted or degraded;
- Supplies of materials needed for ongoing business activity may be disrupted. Further problems can be expected if goods are imported by air or land over the Canada-U.S. border
- The availability of services from sub-contractors or critical vendors may be affected (this may affect maintenance of key equipment, and is an area that merits close planning attention); and,
- Demand for business services may be affected, demand for some services may increase; while demand for others may decrease.

Across the country, impacts on critical infrastructure are likely to be moderate to serious.

The tourism industry would be badly affected. Sectors that depend on heavy foot traffic -- retail, leisure, gaming, lodging, and restaurant industries – could especially take a hit if the avian flu turns into a pandemic. During the SARS outbreak, people avoided densely populated public areas and any place where people congregated in confined spaces. Consumers are likely to cut down on travel and leisure-related expenditures, including transportation, hotels, cruises, entertainment, and visits to theme parks and other public venues.

Just as it would be difficult to forecast the severity of a pandemic, it is hard to predict its economic effects, even if the outbreak's scope and severity are known. However the Government of Canada has estimated that the economic impact (direct and indirect) on the health care system alone would be 10 to 24 billion dollars.

(Source: Public Health Agency of Canada)

5. Business Continuity Planning for a Pandemic

5.1 What is Business Continuity Planning?

Critical services or products are those that must be delivered to ensure survival, avoid causing injury, and meet legal or other obligations of an organization. Business Continuity Planning is a proactive planning process that ensures critical services or products are delivered during a disruption.

A Business Continuity Plan (BCP) includes:

- Plans, measures and arrangements to ensure the continuous delivery of critical services and products, which permit the organization to recover its facility, data and assets, if damaged.
- Identification of necessary resources to support continuity of critical processes, including personnel, information, equipment, financial allocations, legal counsel, infrastructure protection and accommodations.

Having a BCP enhances an organization's image with employees, shareholders and customers by demonstrating a proactive attitude. Additional benefits include improvement in overall organizational efficiency and identifying the relationship of assets and human and financial resources with respect to critical services and deliverables.

Why is business continuity planning important?

A continuity plan should be an essential element of any business' strategy or operating procedures. In recent years, the impacts that Y2K, 9/11, SARS and the power outage in Ontario, the ice storm in central Canada and other natural disasters have had on Canadian businesses only reinforce the need for continuity plans. Current concern about the risk of an avian flu pandemic further emphasizes the point that continuity planning must take the specific case of highly infectious diseases into account.

Creating and maintaining a BCP helps ensure that an organization has the resources and information needed to deal with a pandemic.

When critical services and products cannot be delivered, consequences can be severe. All organizations are at risk and face potential disaster if unprepared. A Business Continuity Plan is a tool that allows institutions not only to mitigate risk, but also continuously deliver products and services despite disruption. (Source: *Public Safety and Emergency Preparedness Canada* <http://www.ocipep.gc.ca/prg/em/gds/bcp-en.asp>.)

(Source: © *Public Safety and Emergency Preparedness Canada*)

5.2 Summary Checklist for Business Pandemic Continuity Planning

Planning for pandemic influenza is essential to ensuring the continuity of business operations. The following checklist identifies specific steps that all businesses can undertake now to prepare for a pandemic. Many are also applicable to other emergency situations.

The following information is necessarily generic, and will need to be adapted to meet the circumstances and needs of different businesses within the industry. Small and medium sized businesses may not have the resources to follow each of these suggested activities; however, it is recommended that every business, regardless of size, develop at least a basic plan to address pandemic influenza, incorporating each of the main sections listed below.

Steps to plan for the impact of a pandemic on your business:

- **Identify a pandemic coordinator** and/or team with defined roles and responsibilities for preparedness and response planning. The planning process should include input from employees and labour representatives.
- **Identify essential employees, based on skills required, and other critical inputs** (e.g. raw materials, suppliers, sub-contractor services/products, and logistics) required to maintain business operations by location and function during a pandemic.
- **Identify, train and prepare an ancillary workforce** (e.g. contractors, employees in other job titles/descriptions, retirees).
- **Develop and plan for scenarios** likely to result in an increase or decrease in demand for your services during a pandemic (security, sanitation, etc).
- **Determine the potential impact of a pandemic on company business financials** using multiple possible scenarios that affect different service lines and/or business locations.
- **Determine the potential impact of a pandemic on business-related domestic and international travel** (e.g. quarantines, border closures).
- **Find up-to-date, reliable pandemic information** from community public health, emergency management, and other sources and establish sustainable links.
- **Develop an emergency communications plan and revise periodically.** This plan includes identification of key contacts (with back-ups) and chain of communications (including suppliers and customers). It should include protocols for employee communications as well.
- **Implement an exercise/drill to test your plan**, and revise periodically.

Plan for the impact of a pandemic on your employees and customers:

- **Forecast and allow for employee absences** during a pandemic due to factors such as personal illness, family member illness, community containment measures and quarantines, school, daycare and/or business closures, and public transportation closures.

- **Implement guidelines to modify the frequency and type of face-to-face contact** (e.g. hand-shaking, seating in meetings, office layout, shared workstations) among employees and between employees and customers.
- **Encourage and track annual influenza vaccination** for employees (optional).
- **Evaluate employee access to and availability of healthcare services (public and employer provided)** during a pandemic, and improve services if needed.
- **Evaluate employee access to and availability of mental health and social services** during a pandemic, including corporate, community, and faith-based resources, and identify sources for employees as needed (if applicable).
- **Identify employees and key customers with special needs**, and incorporate the requirements of such persons into your preparedness plan (if applicable).

Establish policies to be implemented during a pandemic:

- **Establish Plan Activation Guidelines** (Trigger events).
- **Establish policies for employee compensation and sick-leave absences** unique to a pandemic, including policies on when a previously ill person is no longer infectious and can return to work after illness.
- **Establish policies for flexible worksite** (e.g. telecommuting) and flexible work hours (e.g. staggered shifts).
- **Establish policies for preventing the spread of influenza at the worksite** (e.g. promoting hygiene etiquette, and prompt exclusion of people with influenza symptoms). Consider requirement for increased sanitation.
- **Establish policies for employees who have been exposed to pandemic influenza**, are suspected to be ill, or become ill at the worksite (e.g. infection control response, immediate mandatory sick leave).
- **Establish employee contact control and tracking guidelines consistent with Human Resource policies.**
- **Establish policies for restricting travel to affected geographic areas** (consider both domestic and international sites), evacuating employees working in or near an affected area when an outbreak begins, and guidance for employees returning from affected areas.
- **Set up authorities, triggers, and procedures for activating and terminating the company's response plan** and alerting business operations (e.g. reducing services in affected areas).

Allocate resources to protect your employees and customers during a pandemic:

- **Provide sufficient and accessible infection control supplies** (e.g. hand-hygiene products, tissues and receptacles for their disposal) in all business locations.

- **Review and enhance communications and information technology infrastructures** as needed to support employee telecommuting and remote customer access.
- **Ensure availability of medical consultation** and advice for emergency response. Review Employee Assistance Provider capabilities.

Communicate with and educate your employees:

- **Develop and disseminate programs and materials covering pandemic fundamentals** (e.g. signs and symptoms of influenza, mode of transmission), personal and family protection and response strategies (e.g. hand hygiene, coughing/sneezing etiquette, contingency plans).
- **Anticipate employee fear and anxiety**, rumours and misinformation, and plan communications accordingly.
- **Ensure that communications are culturally and linguistically appropriate** (if applicable).
- **Disseminate information to employees** about your pandemic preparedness and response plan. Include guidance on how they can develop a personal preparedness plan.
- **Provide information for the at-home care of ill employees** and family members (Consult Medical Advisor or Local Health Authority for current advice on taking care of ill patients).
- **Consider development of platforms (e.g. hotlines, dedicated websites) for communicating pandemic status and actions to employees**, vendors, suppliers, and customers inside and outside the worksite in a consistent and timely way, including redundancies in the emergency contact system.
- **Identify community sources for timely and accurate pandemic information** (domestic and international) and resources for obtaining counter-measures (e.g. vaccines and antivirals).

Coordinate with external organizations and help your community:

- **Collaborate with insurers, health plans, and local healthcare facilities** to share your pandemic plans and understand their capabilities and plans.
- **Collaborate with federal, provincial, and local public health agencies** and/or emergency responders to participate in their planning processes, share your pandemic plans, and understand their capabilities and plans.
- **Share best practices with other businesses in your communities and industry** to improve pandemic response efforts.

(Checklist adapted from www.pandemicflu.gov)

These items are addressed in further detail in the remainder of this Guide.

5.2.1 General Pandemic Planning Checklist

Pandemic Planning Checklist

In the event of an influenza pandemic it is recommended that you consider the following items and develop policies / processes to address each in advance of a pandemic situation occurring.

Chart 1. Planning and Coordination

Completed	In Progress	Not Started	Not Applicable	Items	Considerations/Action
				Pandemic Preparedness	<i>Identify a pandemic coordinator and response team with defined roles and responsibilities for preparedness, response, and recovery planning.</i>
				Triggers – Continuous Pandemic Monitoring and Reporting	<i>Consider using the World Health Organization (WHO) as the primary trigger mechanism. Develop site specific response plans to be initiated when a pre-defined level has been reached and / or there are suspected cases within the city / province /country.</i>
				Legal Reporting Requirements	<i>Review with legal counsel all policies / processes developed to assess the legal implications, liabilities and reporting requirements associated with a pandemic.</i>
				Crisis Management Plan in Place	<i>If a Crisis Management plan for decision making is not already in place, consider developing with defined roles and responsibilities to ensure rapid escalation, notification, decision making and internal / external communications.</i>
				Travel Policy - Business	<i>Develop a travel policy for employees who are required to travel as part of their jobs. Consider when travel restrictions might be imposed, how to handle employees that are impacted by travel restrictions when visiting another country. Determine if travel insurance covers illness due to pandemic and under what conditions.</i>
				Travel Policy - Personal	<i>Provide guidance on traveling to potentially dangerous areas. Determine a return to work policy for employees and / or those with family members who choose to vacation in areas that have reported cases of the pandemic virus.</i>
				Mobility Between Offices	<i>Develop criteria (example – World Health Organization stage 4) for restricting mobility between offices.</i>
				Record Keeping Procedures	<i>During a pandemic situation data that is not normally collected may be required to be kept. Determine what data will be collected, the method for collection and who will be responsible for collecting it.</i>

Completed	In Progress	Not Started	Not Applicable	Items	Considerations/Action
				Hygiene Practices - Workplace	<i>Some actions to consider: Develop an employee awareness campaign. Emphasis on "Hand Washing". Provide antibacterial soap / hand sanitizer. Review with legal counsel the liabilities if specific medical supplies are or are not provided.</i>
				Employee Evacuation from Affected Areas	<i>Has a policy been developed for evacuation of employees from potential quarantine regions? Review with travel agent method for emergency evacuation. Consider purchasing open tickets. Determine if family members will also be evacuated if employee is working in an infected region.</i>
				Review with Legal Counsel	<i>Review all policies / processes developed to address a pandemic with legal counsel. Review existing contracts to determine if a pandemic can be a cause for invoking force majeure or if force majeure is limited only to unforeseen events.</i>
				Board of Directors -Liability	<i>Review with legal counsel the necessity of advising the Board of Directors of their responsibilities before, during and after a pandemic. Review applicable legislation and laws with legal counsel to ensure it is well understood. Arrange an awareness session with the Board of Directors if appropriate.</i>
				Review Pandemic Influenza Policies with Union(s), Work Councils, Employee Associations, etc.	<i>If employees are members of a union, review any policies developed for pandemic to ensure compliance with the collective agreements in place.</i>
				Community Aid Requests	<i>Consider how community requests for space /money /resources/ employee labor will be responded to.</i>

Chart 2. Corporate Governance and Management Responsibility

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Succession Planning	<i>Does a succession plan exist for all employees? Create a listing of all currently employed critical employees and the minimum required skill set to replace them. Look for situations where skills are limited to only one or a few employees. Consider if retired employees could provide the skills if necessary. Communicate the succession plan.</i>
				Policy Development Responsibility	<i>Has a Corporate policy statement on Pandemic Planning been written? Does the policy address unique geographic requirements? Determine who in the organization will be responsible for policy development prior to the pandemic situation.</i>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Policy Review and Signoff	<i>Is this policy statement signed by Senior Management? Who would be required to sign off on new policy during a pandemic situation?</i>
				Privacy Legislation	<i>Have privacy policies been reviewed relative to a pandemic?</i>
				Labor Negotiation Policies – Replacement Workers	<i>Review the status of agreements as they would pertain to Pandemic situation.</i>
				Investigation of Mitigation Options	<i>Review critical processes and determine if there are mitigation options (for example use of masks / moving critical resources to multiple sites etc.) that would reduce the possibility of contracting the virus or reduce the reliance on key resources.</i>
				Implementation of Mitigation Options	<i>Linked to the above, determine who would decide when these measures would be implemented and what triggers they would use to do so.</i>
				Command and Control Procedures	<i>Develop a Crisis Management Plan to include decision making in the event of a pandemic.</i>
				Decision Criteria Established	<i>Document as part of the Crisis Management plan.</i>
				Recording of Decisions etc.	<i>Document as part of the Crisis Management Plan.</i>

Chart 3. Business Continuity Arrangements

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Risk Assessment Performed	<i>Review end to end critical processes and determine the impact of a pandemic influenza situation. For example if parts arrive by water /air, how would travel restrictions impact production.</i>
				Business Impact Assessment Performed	<i>Determine the impact to critical processes if a percentage of employees were unable to come to work. For example, processes that could still be performed with 80 % of workforce, 75%, 70%, etc.</i>
				Employee Skills Inventory Completed	<i>Develop an employee skills inventory list. Identify skills that may be at risk in a pandemic influenza situation and determine if employees that have been promoted /retired / transferred, could perform them were a critical resource to become ill.</i>
				Minimum Resource Levels Defined	<i>Determine the minimum number of people, systems, resources, and equipment required to perform a critical function.</i>
				Identified Any Special Licensing /Certification Requirements	<i>Identify if any functions require special licensing or certification to be completed. Do any locations or positions require special security clearance?</i>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Exercise Plans with Pandemic Scenario	<i>As each area develops pandemic plans, test to identify any gaps in plans and address.</i>
				Call Trees Established	<i>Review current employee notification process and document employee call trees if not established. Communicate to employees in advance that virus alerts will be communicated during non-business hours through the call trees. If not already in place develop a central call in number for employee messaging. Ensure call trees are built for cascading messages down and sending information up to Executive level.</i>
				Emergency Communication Plan	<i>Develop an emergency communication plan and revise regularly. Pre-script employee communications and media communications. Identify key contacts with local and provincial public health officials.</i>

Chart 4. Operational Impacts

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Municipal Plans Reviewed by Location	<i>Review existing municipal health plans to identify what they will expect of your organization. What are the planning assumptions that were used?</i>
				Critical Infrastructure Identified	<i>Consider developing a letter requesting assurance of pandemic preparedness for all critical infrastructure providers such as power, heat, phones, technology, etc.</i>
				Transportation Requirements	<i>Identify how employees currently get to work and consider potential situations such as a transit shut-down.</i>
				Parking Requirements	<i>Determine if existing parking in close proximity to the organization is available in the event that an increased number of employees are required to drive to work due to public transit shut down or in order to reduce exposure to the virus.</i>
				Cash /Supplies Availability	<i>Determine if additional cash /supplies should be maintained in the event of a pandemic influenza situation restricting access to cash or if there is a reduction of supplies available. Communicate to employees that this should be part of their personal preparation plan.</i>
				Signing / Expenditure Authorization	<i>Review existing signing /expenditure policies to ensure operations can continue even if key Executive resources are unable to perform their current responsibilities. Develop an alternate process if current process breaks down.</i>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Administrative Support Agreements	<i>Review with any outsourced service providers, (call centres, technology support, etc) their capability to continue to provide services in the event of a pandemic situation.</i>
				Phone / Internet Traffic Capacity	<i>Many companies have identified working at home as their strategy to ensure their employee exposure to the virus is reduced and to ensure continued operations. Consideration therefore should be given to the number of users in a community that may be attempting to work at home and the existing capacity for internet /phone traffic in residential communities. Response time may be considerably slower due to congestion. Verify with providers their plans for pandemic readiness.</i>

Chart 5. Sickness and Absenteeism

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Quarantine Requirements	<i>Develop a quarantine policy that adheres to local laws. This will include asking employees to go home if suspected of exposure.</i>
				Quarantine Arrangements	<i>Determine what support will be provided to employees who are requested to quarantine themselves or are under self quarantine.</i>
				Work at Home Requirements	<i>Evaluate putting in place a work from home policy to support business continuity during a crisis.</i>
				Work at Home Arrangements	<p><i>Consider the following steps if planning to allow work at home arrangements.</i></p> <ul style="list-style-type: none"> • <i>Determine which critical processes can be sustained with a work at home policy.</i> • <i>Verify technology capacity and vendor capabilities to support them.</i> • <i>Develop a risk, cost and benefit analysis for subject functions.</i> <p><i>If the organization decides to implement “work at home” arrangements in the event of a pandemic influenza outbreak, test ability to work from home by having designated employees work from home one day each month leading up to the crisis, to ensure technology / passwords etc. will work when required</i></p>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Clean Team Requirements / Arrangements	<i>Determine functions that are required to be staffed 7/24 or are "Mission Critical".</i> <i>Identify if process is currently completed in one location only, or if duplication already exists. Develop split teams or duplicate processing sites to provide contingency. Allow for shift changes.</i>
				Absentee Pay Policy	<i>Review existing absentee pay policy. Consider encouraging employees to stay at home if not feeling well and determine if they will be compensated. Ensure conformity with collective bargaining agreements.</i>
				Overtime Pay Policy	<i>Consider developing a budget for special effort compensation during a pandemic. Ensure conformity with collective bargaining agreements.</i>
				Self Quarantine Policy	<i>Develop a policy for employees that do not wish to come to work for fear of exposure to the virus. Consider existing policy for employees that do not come to work for medical reasons.</i>
				Employees Who Are Unable to Work Due to Sick Family Members.	<i>Develop a policy for employees who are unable to work due to relatives requiring medical assistance. Determine how long employees may be absent from work and whether they will be paid while providing care to relatives. Communicate the policy well in advance of a pandemic influenza situation occurring.</i>
				Split Shifts	<i>Consider accommodating requests by employees to work outside normal business hours due to family care arrangements or desire to avoid contact with large groups of people during normal business commute hours.</i>
				Medical Supplies Required	<i>Determine if medical supplies will be purchased and provided to employees. Evaluate the cost and effectiveness of supplying masks. Determine if medical supplies will be for employee use only or immediate family will be supplied also.</i>
				Emergency Procedures in Place	<i>Develop emergency response plans in the event an employee collapses or dies on the company premises.</i>
				Human Resources Policy	<i>Has a Corporate policy been developed for Human Resources that addresses Pandemic issues? In the Crisis Management Plan define the role of HR.</i>
				Mass Vaccination Plans	<i>Determine if your organization is capable / willing to support mass vaccination as a means to mitigate the spread of the Flu if advised to do so by external authorities.</i>
				Antiviral Stockpiling	<i>Determine if your organization plans to purchase antiviral drugs, such as "Tamiflu" and develop a policy for the decision your organization adopts. Review the policy with legal counsel.</i>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Visitor Screening	<i>Determine a policy for visitor screening during a pandemic influenza situation and the triggers for implementation. Consider developing a screening tool (questionnaire) for all visitors to complete. Determine who will be responsible for screening visitors.</i>

Chart 6. Health Insurance and Benefits

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Legislation Requirements by Location	<i>Are local pandemic reporting requirements understood and documented? Review requirements for each company location.</i>
				Employee Access to Medical Info / Support / Assistance Programs	<i>Consider what medical support / helplines are available to employees, (employer provided, community, faith-based, local health authority, government programs, Red Cross)</i>
				Review of Benefits Program – Short Term Disability, Long Term Disability	<i>Review existing employee benefits program to understand coverage for employees impacted by pandemic influenza. Communicate coverage available as soon as possible through employee awareness program.</i>
				Pre-established Contacts With Medical Providers	<i>Develop contacts now with medical providers that will provide consulting services to the organization during the pandemic influenza situation.</i>
				Workers Compensation	<i>Have legal counsel review workers' compensation policies as they pertain to pandemic influenza.</i>

Chart 7. Supply Chain

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Critical Suppliers Identified	<i>Critical suppliers (external /internal) should be contacted and an assessment of their ability to support the business during a pandemic influenza should be conducted. Any gaps should be documented.</i>
				Contractual Penalties	<i>Review all client contracts to determine any penalties that could occur as a result of not meeting production schedules. Check force majeure clauses to determine if pandemic is specifically cited as a peril.</i>
				Potential for Force Majeure	<i>In customer contracts ensure pandemic is specifically named as a peril.</i>
				Review of Outsourcer Policies / Plans	<i>Have contractual terms with critical suppliers been reviewed for recourse if a pandemic interrupts the supply chain? Where possible request to participate in supplier tests / exercises.</i>
				Identification of Alternate Providers	<i>Identify critical single source suppliers and determine alternate providers if organization is unable to meet supply.</i>

Chart 8. Clients and Markets

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Service Capability	<i>Has an evaluation of the customers' reaction to a reduction in service capability been conducted?</i>
				Customer Demand for Services	<i>Has an assessment been made of the impact on the organization due to changes in demand during a pandemic?</i>
				Increased Opportunities	<i>Has an assessment of potential business opportunities due to increased demand at time of a pandemic been conducted?</i>

Chart 9. Internal and External Communications

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Employee Pandemic Flu Education	<i>Develop employee awareness /education program. Establish a timetable for communications including updates. Establish an interactive process to collect and respond to employee comments and queries.</i>
				Employee Personal Preparedness Kit	<i>Encourage employees to maintain a personal preparedness kit that would include medical supplies, food, water, cash, other supplies, etc.</i>
				Medical Helpline Available	<i>Review current Employee Assistance Provider capabilities. Determine if city / province provides medical inquiry phone support and communicate in employee awareness /education programs.</i>
				Hygiene Education / Notices - Employees	<i>Document hygiene best practices and incorporate into awareness / education programs.</i>
				Hygiene Education / Notices - Visitors	<i>Consider developing circulars to be distributed to visitors.</i>
				Communication Releases Pre-scripted	<i>Pre-script employee / media / medical / government notifications.</i>
				Access to Data Sources	<i>Determine where and how to access employee records, determine which employees are absent, and how to contact employees at home etc. in advance of a pandemic influenza situation and document in the Emergency Response Procedures.</i>
				Contract with Media Management Organization	<i>Consider hiring the services of a media monitoring organization or identify a resource within the organization that will monitor local and world health sites for disease updates. Request their assistance with pre-scripting communiqués.</i>
				Language Support Capabilities	<i>If internal / external communications are broadcast in multiple languages ensure translation services are in place to provide immediate service in the event that rapid communications are required to be developed.</i>
				Communication of Reduced Service Capability	<i>Consider developing a policy and supporting communications in the event that a reduction in service capability is experienced due to a reduction in staffing.</i>

Chart 10. Reputation Damage

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Policy Disclosure	<i>Determine how much and to whom your pandemic influenza policies will be shared. Consider sharing best practices with critical suppliers and stakeholders.</i>
				Response Plan Disclosure	<i>Determine how much and to whom your pandemic influenza plans will be shared. Consider sharing best practices with critical suppliers and stakeholders.</i>
				Media Monitoring	<i>Identify the resources who will be responsible for monitoring the media for any negative press that results from pandemic influenza policies, responses etc.</i>

Chart 11. Insurance

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Review of Insurance Policies	<i>Has the insurance coverage and limits for things such as property damage, business interruption, general liability, employers liability, workers compensation been reviewed recently and do they provide appropriate contagious disease coverage?</i>
				Review of Insurer's Policies	<i>Understand what will be covered and what will be required to support claims made as a result of a pandemic situation.</i>
				Liability Issues Identified	<i>Request legal counsel to review.</i>

5.2.2 Pandemic Continuity Planning Checklist for Commercial Buildings

Pandemic Planning Checklist for Commercial Buildings

In the event of an influenza pandemic it is recommended that you consider the following items and develop policies / processes to address each in advance of a pandemic influenza situation occurring.

Building Infrastructure

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Municipal plans reviewed by location	<i>Review existing municipal plans to identify individuals or departments that you will need to contact in the event of a pandemic. Review the local plans to coordinate actions. What are the planning assumptions in their plans that will impact your ability to continue service? For example, closing of transit, increased availability of police, expected response times for ambulance, underground citizen pathways, etc.</i>
				Critical infrastructure identified	<i>Send a letter requesting assurance of pandemic preparedness for all critical infrastructure providers such as power, heat, phones, elevators, water/sewage, fire suppression systems, technology, etc. Do your tenants have unique infrastructure requirements such as call centres, cheque processing, internet data centres, trading floors, etc.? Distribute a letter to tenants identifying your pandemic strategies that may impact the building services.</i>
				Building Operation Skills Inventory	<i>Determine any internal specialized or critical skills necessary to sustain building operations (see inventory checklist in section 4.4.2)</i>
				Transportation requirements	<i>Identify how employees/tenants currently get to work and plan for potential situations such as a transit shut-down. Is your building an integral part of the public transit system and if so what minimum access requirements must be accommodated?</i>
				Parking requirements	<i>Determine if existing parking structures, capacity, hours of operation, etc. will be impacted in the event of an increased number of employees driving to work due to public transit shut down or in order to reduce exposure to the virus. Develop a plan to address increased demand or protection requirements of parking attendants.</i>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Cash /supplies availability	<i>Determine if additional cash /supplies should be maintained in a pandemic influenza situation due to restricted bank access or if suppliers will only accept cash payment. Document other employee needs if required to remain on-site (food, medication, television, cots, etc.)</i>
				Public access by location (transportation, parking, residential access, medical clinic access, etc.)	<i>Does the general public have normal unrestricted access? How difficult would it be to restrict public access in the event of a pandemic?</i>
				Shelter in place capabilities	<i>Do you anticipate sheltering any or all of your employees within the building for an extended period time in order to continue building operations? Document requirements, assumptions, and plans to meet the needs.</i>
				Security support requirements by location	<i>Has there been a review of the expected security requirements during a pandemic? Will the number of security personnel be adequate? Do they expect Personal Protective Equipment to be provided? Document the plan to provide additional protection such as masks, gloves, glass screens, etc.</i>
				Janitorial services requirements by location	<i>Has there been a review of anticipated cleaning requirements during a pandemic? Will the number of janitorial personnel be adequate? Do they expect Personal Protective Equipment to be provided? Document the plan to provide additional protection such as masks, gloves, glass screens, etc.</i>
				Quarantine requirements	<i>Determine if a quarantine that adheres to local laws could be supported. What additional requirements would be required to support a building lock down? Document the procedure to verify quarantine orders, implement them, and return to normal operations.</i>
				Critical suppliers identified with particular focus on those that represent a potential single point-of-failure	<i>Critical suppliers (external /internal) should be contacted and an assessment of their ability to support the business during a pandemic should be conducted. Any gaps should be documented and an action plan developed. Minimum levels of supplies should be documented and maintained. Attention should be paid to those suppliers required to support unique tenant needs such as 24 x 7 access, call centres, high security clearances, etc.</i>
				Identification of alternate providers	<i>Identify critical single source suppliers and determine alternate providers if company is unable to meet supply.</i>
				Casualties	<i>Are current emergency response procedures able to support casualties due to a pandemic (potentially multiple occurrences)? Plan for increased sanitation after a death, decreased medical response times, and the need to potentially cordon off areas for medical investigation.</i>

Completed	In Progress	Not Started	Not Applicable	Policy / Practice	Recommendation /Action
				Building Staff Preparedness	<i>Ensure building staff receive appropriate pandemic preparedness training and Personal Protective Equipment in accordance with corporate or regulatory requirements.</i>

5.3 Critical Elements of a Pandemic Continuity Plan

5.3.1 Pandemic Manager and/or Committee

While it is not always possible for all companies to form a committee to address the risk of a pandemic, it is important for every business to identify one or more people within the organization to be responsible for workplace health and safety and for developing a Pandemic Preparedness Plan including measures to ensure business continuity and effective communications.

Medical Advisor

Some larger businesses and industrial establishments have medical practitioners, advisors or physicians on site or on payroll. Smaller businesses may not currently staff medical advisors.

In preparing your business continuity plan, it is advisable that you ensure access to a medical practitioner or advisor for assistance and advice in the event of a pandemic. If your company already has medical staff on site, they should be made aware of the nature of the disease, how it is transmitted, its symptoms and health care precautions available and appropriate. If your current practitioner is unable to fulfill the desired role for your organization, they should recommend another medical practitioner for that function.

Smaller businesses should consider contracting out the services of a local medical physician for this exercise. It is advisable that all businesses contact their local Health Canada office (http://www.hc-sc.gc.ca/home-accueil/contact/branch_sub_e.html) to obtain more information on available options.

5.3.2 Maintaining Essential Business Operations

In the event of a pandemic, it is important that core people and core skills are available to keep essential parts of your business operating. A Business Impact Analysis underpins the Business Continuity Planning process.

In planning for the impact of a pandemic on your business (Business Impact Analysis) you will want to identify essential employees and other critical inputs (e.g. suppliers, sub-contractor services/products, and logistics) required to maintain business operations by location and function during a pandemic.

Identification of Critical Operations and People

Issues you should consider include:

- ✓ What are the “essential” parts of the business?
- ✓ Who are the core people required to keep the essential parts of the business running?
- ✓ What are the core skills required to keep the business running?
- ✓ Are there sufficient back-ups for people and skills if there is a high level of absence?
- ✓ Are there other resources (e.g. volunteers, retirees) that could be drawn upon if necessary?
- ✓ Is it possible to co-ordinate or operate your business through a “virtual war-room” – that is, remotely, by using telephone and email?

- ✓ Who are the people required to manage your pandemic contingency plan?
- ✓ Do you have systems that rely on periodic physical intervention by key individuals, to keep them going? How long would the system last without attention?

Once the core people and skills are identified, ensure that they are aware of their position and how they will be managed in the event of a pandemic. Consider strategies for minimizing the possibility that they become ill with influenza: e.g. working from home even in very early stages of a pandemic, or other social distancing measures.

If working from home is not a well-established practice in your organization, you may wish to encourage staff to address computer connection or technological issues and enable this option. You may wish to have non-essential staff “stand down” (with appropriate pay arrangements) in the full pandemic phase to help minimize the number of staff who may be exposed to the influenza virus.

In the event of a pandemic, employees have the option of leaving their jobs. They also have the right to refuse to perform work if they believe it is likely to lead to their suffering serious harm. However, their belief must be based on reasonable grounds, and they must have attempted to resolve the matter with their employer before they can continue to refuse.

The right to refuse unsafe work does not apply unless the understood risks of the workplace have materially increased. To avoid such situations, it is best to have had discussions with staff prior to the occurrence of a pandemic.

5.3.3 Business Planning for Absences

Unlike natural disasters, where any disruption to business service provision is likely to be asset-related, disruption to business operations in the event of a pandemic is anticipated to be mainly human-resource oriented. Individual employers must consider their workforces and their particular circumstances. However, most should plan for up to 50% staff absences for periods of about two weeks at the height of a severe pandemic wave, and lower levels of staff absence for a few weeks either side of the peak. Overall, a pandemic wave may last about 8 weeks.

Issues you may wish to consider include:

- ✓ What are critical staff numbers and skills required to keep essential services running – at what level does business stop or are buildings closed?
- ✓ What arrangements need to be made to minimize risk to staff?
- ✓ Who should make the decision to shut buildings when absence rates threaten safe business continuity?
- ✓ Could some, or all, of your business operations shift to having most staff work from home with little warning?

An influenza pandemic may affect regions of Canada and the world differently in terms of timing, severity and duration. Some regions may be hit earlier, longer or harder.

Businesses with regional offices may need to consider rotating service delivery from hard hit areas to influenza-free areas, or areas that have been declared to be in a post-pandemic period. Restrictions on movement of people from region to region may be imposed, and rotation of staff may therefore be difficult.

You may want to consider training and preparing an ancillary workforce (e.g. contractors, employees in other job titles/descriptions, retirees). This might include training your current employees in several areas of the business or ensuring you have a pool of available workers outside the company on call if need arises.

5.3.4 Supply Chain Disruption and Border Closures

Pandemic planning should consider the need for stockpiling of essential supplies. Discuss with key suppliers a plan for regular shipments in the event of shortages or disruptions in transportation systems.

Shortages may occur because of disruptions in transportation systems or inability of suppliers to meet demands because of their own staff shortages. Canadian supplies travel long distances by truck, train and aircraft and are vulnerable to any disruption. Loss of up to 30 percent of workers/drivers and other transportation staff may affect both the production and delivery of needed supplies.

During a pandemic there are likely to be restrictions at ports and airports. Persons leaving an area affected by the pandemic will most likely be screened for signs and symptoms of influenza.

Persons who are ill will be asked to defer travel so as not to spread influenza to other areas that are pandemic free. Supply lines may also be affected by self-imposed travel restrictions, with truckers/transporters unwilling to travel through or to infected areas.

Difficulties at border crossings may substantially affect supply lines. Consideration should be given to purchase of products made in Canada/locally to avoid potential supply problems due to border crossing restrictions implemented at the time of the pandemic.

International air movements may be disrupted in a pandemic, and this may affect the delivery of imported goods, especially if they normally arrive in freight-holds of passenger aircraft.

Emergency funding can be critical immediately following an emergency like a pandemic. Consider the need for pre-approved purchase requisitions and whether special funding authorization may be needed.

Administration and Logistics

Maintain complete and accurate records at all times to ensure a more efficient emergency response and recovery. Certain records may also be required by regulation or by your insurance carriers. They may prove invaluable in the case of legal action after an incident.

All companies, large or small, should develop plans for ensuring that the impact of shortages of critical supplies and resources is minimized. Before a pandemic, logistics precautions may entail:

- Acquiring equipment.
- Stockpiling supplies.
- Designating emergency facilities.
- Establishing mutual aid agreements.
- Preparing a resource inventory.

During an emergency, logistics plans may entail:

- Providing utility maps to emergency responders.
- Providing material safety data sheets to employees.
- Moving backup equipment in place.
- Repairing parts.
- Arranging for medical support, food and transportation.
- Arranging for shelter facilities.
- Providing for backup power.
- Providing for backup communications.

Planning with Customers

Businesses may suffer from loss of economic revenue and sales due to a reduction in customer numbers. The general public will be advised to avoid crowded situations and to stay home as much as possible.

Businesses will have to alter usual practices in order to meet the needs of their customers during a pandemic. Possibilities of altered practices are:

Business-to-Consumer

- Extending business hours to accommodate customers wanting service at off peak hours.
- Taking orders over phone/fax for pickup or delivery to minimize the time people are in contact with others.
- Arranging for services to be provided via phone, Internet, fax or mail.

Gain customer confidence by maintaining a healthy workforce and workplace. Screen employees for influenza-like illness and maintain a clean work environment with scrupulous cleaning and hygiene.

Business-to-Business

Ensure that you not only have identified alternate suppliers and contractors, but, as a supplier, you have also given consideration to your customers. Your customers, especially international customers, should be made aware of your BCP and given instructions on how to minimize the impact of a pandemic influenza on their business. This might include identification of alternate suppliers or contractors or alternate transportation routes.

5.3.5 Communication with Staff

It is likely there will be a high level of anxiety regarding a pandemic and this is likely to contribute to increased work absence and/or increased distress to staff. Suggested ways to manage this include:

- Communicate the possibility of a pandemic – and your organization’s preparedness to manage it – very early to staff. The influenza fact sheet, available from Health Canada’s website (http://www.hc-sc.gc.ca/iyh-vsv/diseases-maladies/flu-grippe_e.html) will be helpful for this purpose;
- Discuss with staff possible health and safety issues, potential for stand down, and leave arrangements if they are ill or need to look after those who are, or those who have been “shut out” of childcare and school, etc;
- Have a comprehensive management plan in place which is clearly communicated to staff. Ensure that communications management during the pandemic is part of the plan. It will be important to have systems in place to allow your business to communicate effectively in a pandemic;
- In activating your plan, provide clear, timely and pro-active communications to staff, including how your organization is handling the situation; and
- You may wish to establish a “communications tree” so that people can keep in touch.

Knowledge Management

Key operating and emergency management information should be stored in known, accessible and shared locations.

5.4 Critical Elements of Pandemic Planning for Commercial Buildings

5.4.1 BOMA Canada Committee

The Building Owners and Managers Association (BOMA) of Canada has established a National Emergency Preparedness Committee that will continue to monitor the Pandemic issue in the context of the commercial real estate industry on an ongoing basis and, in the event of an outbreak, will facilitate communication through the publicly available BOMA Canada Pandemic news-site: www.bomacanada-pandemic.ca

BOMA Canada's National Emergency Preparedness Committee, which includes representatives from all local BOMA associations across the country, will ultimately assume responsibility for overseeing the Guide on a continuing basis. They will conduct semi-annual, or more frequent, reviews and updates of the Guide, as may be necessary, depending upon relevant developments relating to Pandemic planning.

5.4.2 Maintaining Essential Commercial Building Operations

It is important to evaluate the essential skills required to operate the property. These skills may include internal or external staff resources, may require special certification or security clearance, operation of specialized equipment or other similar unique characteristics that may be difficult to replace if the primary provider is unavailable to the property during a pandemic.

The following chart is a suggested inventory of required skills that are assessed relative to their importance at a property. A column has also been included to assist the property manager in determining if a function can be performed offsite (i.e. remote operation of BAS or security systems).

Building Operations Skills Inventory

Date:

Building:

Completed By:

Specialized Activity or Equipment Description	Essential to operations of Facility over expected term of Pandemic Yes/No	Remote Operation Through BAS? Yes/No	Critical? Yes/No	Experience Required? None/Limited /Proficient or Expert?	No Registered Heating or Cooling Plants Licensing or Certification Required? Yes/No	If Registered Heating /Cooling Plant Exists Licensing or Certification Required? Yes/No	Special Needs i.e. Security Clearance	Comments
Daily Rounds								
Water Treatment								
Equipment Operating Logs								
Building Automation System								
Attendance to Non-Emergency Tenant Service Calls i.e. hot/cold complaints								
Attendance to Emergency Tenant Service Calls i.e. water leaks, power outage								
General Building Cooling Systems								
Preventative Maintenance of Equipment								
Inspection and Testing of Life Safety Equipment								

Specialized Activity or Equipment Description	Essential to operations of Facility over expected term of Pandemic Yes/No	Remote Operation Through BAS? Yes/No	Critical? Yes/No	Experience Required? None/Limited /Proficient or Expert?	No Registered Heating or Cooling Plants Licensing or Certification Required? Yes/No	If Registered Heating /Cooling Plant Exists Licensing or Certification Required? Yes/No	Special Needs i.e. Security Clearance	Comments
Fire Panel								
Critical Systems Cooling Systems								
Uninterruptible Power Systems								
General Building Humidification Systems								
Critical Applications Humidification Systems								
Air Compressors								

Note: The Task Force acknowledges the assistance of Angus Consulting Management with this table.

5.4.3 Commercial Building Planning for Absences

Critical Suppliers

Additional considerations for the property operations or major projects:

- Who are your most critical (Mission Critical) suppliers or vendors?
- Who “owns” each of them (which person, function or process is their primary contact)?
- What aspects of the customer/supplier relationship are subject to negotiation - with the goal of assuring more reliable access to supplier resources in a pandemic?
- Can contracts be changed?
- Can new language be added?
- Can new contracts or agreements be initiated?

In every case - identify alternate suppliers for every Mission Critical Supplier

Single Points of Failure

Once you have identified critical suppliers:

- Identify “single points of failure” - those vendors (whether on the “mission critical” list or not) who, if they fail to deliver their goods or services, could effectively cripple or shut down your business; Identify backup or alternate vendors/suppliers (if possible). Initiate relationships with alternates; and
- Make certain existing “single point” vendors are aware of your strategy – and that they understand it will only be implemented IF they are unable to meet minimum performance standards

Utilities and Public Services

Utilities and other public services (garbage collection, snow removal, etc.) may be de facto single-points-of-failure. Consider the following:

- What alternatives exist? (phone/network providers, water supply, backup electrical supply, gas or other fuel supply etc.)
- What relationships with alternates can be initiated?
- What “guarantees” can be derived from Utilities and Public Services?
- What “guarantees” can alternate providers offer?
- What will it cost to mitigate potential loss of service(s) with backup vendors?

The objective is to be prepared. If government fails to maintain public services - will you be prepared?

Supplier Contracts and Communication

- Review any relevant supplier contracts. Understand contractual service level agreements.
- Consider assigning “owners” for each key supplier (if not already standard operating procedure) to monitor their status.
- Make sure suppliers know you have a plan. Find out if key suppliers have a plan of their own. Ask how suppliers expect to meet your needs in a pandemic.
- Keep key suppliers advised of your status during the event. Monitor supplier capability and compliance.
- Maintain contact with “backup” suppliers who have been identified.

Some vendors will be bound by government contracts that guarantee priority for public demand; some will be bound by commercial contracts guaranteeing minimum quantities or priority delivery. Find out where your vendors/suppliers are in the pecking order and don't just take their word for it – try to get any “promises” in writing. In certain sensitive cases, it may be worthwhile to negotiate the cost of preferential treatment in advance to guarantee vital supplies.

Building Staff

- Consider their impact and role as first responders in a pandemic situation to building emergencies and events;
- Determine ability to operate under split shift scenarios; and
- Develop cross training programs to mitigate gaps in manpower.

5.4.4 Commercial Building Supply Chain

Having identified mission critical and single point of failure vendors and suppliers, what can be done to plan in advance for disruptions to the supply chain – not just with mission critical but with all suppliers?

- Create sourcing diversity – create a larger pool of vendors;
- Stockpile – keep a longer-lasting supply of essential goods on hand;
- Disperse geographically – diversify to help assure availability;
- Understand where your organization is in each supplier's “pecking order” (how important are you?);
- Make sure your suppliers have their own pandemic plans in place; and
- Understand transportation alternatives – and be prepared to use them.

As leaders in the real estate industry, we must assess all major manufacturers' “Pandemic Plans” and evaluate the state of readiness within that industry.

Today's Typical Washroom Supplies

1. Paper Towels, Toilet Seat Covers and Toilet Tissue
2. Garbage Bags
3. Soap and Instant Hand Sanitizer
4. Cleaning Products

Suggested Pandemic Supply Requirements

1. Alcohol Based Hand Sanitizer
2. Disposable Disinfectant Wipes
3. Non-Latex Gloves
4. Surgical Procedure Masks
5. Eye Goggles or Face Shields
6. N95 Masks
7. Increased Cleaning/Janitorial Chemical Supplies

(Source: Ontario Ministry of Health and Long-Term Care for Personal Protective Equipment)

Issues on Retaining Access to Supplies

1. Distributor Issues
 - a) available warehouse space (stocking capabilities)
 - b) safety stock above normal inventory levels (cost associated with this)
 - c) location of warehouses (multiple locations, accessibility/timely delivery)
 - d) access to a variety of manufacturers (scale and dominance)
 - e) size and scope of your distributor to draw priority from specific manufacturers (helps to be a big market player with leverage)
 - f) market segments your distributor provides to (i.e. Healthcare etc., ranking priority)
 - g) ability of your distributor to outsource outbound freight to third party
 - h) union issues related to working conditions and/or outsourcing
2. Your Distributor's Manufacturers
 - a) location of production (cross border issues, multiple productions sites best)
 - b) offsite inventory capabilities (may manufacture in US but inventory in Canada - Stockpiling capabilities in Canada)
 - c) manufacturers' contingency planning
 - d) markets manufacturers sell their products into (i.e. Healthcare etc.) may mean they suddenly cannot provide to you

Key Considerations

1. Current product flexibility
 - If your paper products are **proprietary** this limits your ability to divert to alternate manufacturers if there is a supply disruption.
2. Governmental controls
 - Government may/will direct 'critical' items to prioritized service providers (i.e. hospitals). Where are you on the **priority** list?
3. Distributor's ability to divert product to alternate warehouses.
 - In having multiple warehouses, if the pandemic is regionalized, the distributors with **diverse locations and capacity** have the best ability to ensure the best flow of product to customers. (multiple partnerships and relationships).
4. Distributor's vendor base
 - the larger the vendor's base on critical items gives the distributor a better ability to **secure supply**, divert product to the best source domestically/regionally.
5. Your ability to **inventory** excess supplies of critical items on site at the property level.
6. Each property must **know its current inventory** and establish a new (higher) minimum inventory and pre-stock.

In general, and once all critical supplies (raw materials, forms, parts, office supplies etc.) have been identified in an impact analysis, decisions should be made regarding the stockpiling of "critical" supplies (those without which the property cannot function) in case suppliers cannot continue to provide the quantities needed during the pandemic.

(Remember, while your suppliers may be able to function, THEIR suppliers may not. In most cases, your suppliers will have commitments to others – in particular governments – that may supersede yours, or at least compete with you for materials in a short-supply market.)

Ask your critical service providers/vendors if they have pandemic plans of their own. If you don't get a response – ask again in writing. Do not accept a simple “yes” answer – ask for details:

- What does the plan entail?
- Does it include an impact analysis?
- When was the analysis performed?
- What were the criteria used in the analysis?
- Have critical suppliers been identified? Additional suppliers identified?
- How will they handle diminished workforce requirements?
- How will they handle restricted transportation?
- How will they communicate with you?
- Have they tested the plan?

*Refer to the Commercial Building Checklist - Section 5.2.2
and to the Template Supplier Letter and Survey in the **Pandemic Planning Toolkit Appendix.***

5.4.5 Building Supplies

Any Pandemic plan must consider the need for stockpiling of essential supplies. It is impossible to predict if and when a Pandemic will strike. When it does, governmental authorities will likely take precedence for sanitizing product inventory on hand, at least at the wholesale level.

Hand washing is the single most effective way to prevent the spread of infections. Using a hand sanitizer is not a replacement for good hand washing, but can be used when it is difficult to get to a sink.

Many suppliers are offering sanitizing products to assist in stopping the spread of illness. It is impractical to endorse one product over another. Building managers and owners must satisfy themselves with regard to sanitizing products provided at their buildings. However, it is recommended that sanitizing products should be introduced into buildings immediately to encourage early adoption of personal hygiene practices.

The following suggestions are made with regard to the provision of sanitizing products:

- The shelf life of sanitizing agents must be borne in mind when making decisions regarding the supply of products. The general shelf life of these products appears to be between one and three years, although at least one manufacturer claims eight years.
- Supplies of hand sanitizing product may be difficult to obtain once a Pandemic starts. Accordingly, building managers and owners should start introducing products to their buildings beforehand, so that sufficient stockpiles exist at the building.
- It is recommended that hand sanitizing stations be introduced at building entrances and exits, before a Pandemic. This will not only promote good health generally, but will also mean that sanitizing liquid is available on-site whenever a Pandemic commences. At least three to six months' supply should be on hand at all times. When choosing a station, preference should be given to those with sufficient capacity so that the liquid or other sanitizing agent does not run out

frequently during the day. With fewer on-site staff during a Pandemic, refilling may be a problem. In addition, larger buildings may keep a few stations in storage, to be used when necessary.

- It is recommended that antibacterial soap be placed in all building washrooms.
- It is recommended that hand sanitizing dispensers be placed in mechanical and electrical rooms, elevator machine rooms, janitorial closets, etc. prior to the start of a Pandemic. Third party contractors move from building to building, and can therefore spread illness easily. Again, refills should be kept on site, ensuring adequate supplies at all times.
- Personal protective equipment should be considered for front-line workers (i.e. building, janitorial and security staff etc.)

5.4.6 Six Phase Framework

The Task Force developed a standard six phase framework of potential impacts on building services and operations at varying levels of absenteeism. The framework should be used as a guide when evaluating the impact on internal staff as well as service providers and contractors to the property.

In order to ascertain some understanding of the potential impact on critical service areas, the Task Force held meetings with a number of national service firms in the following categories using the six phase framework as a guide for those discussions.

Security
Life Safety
Parking
Janitorial

The generic Six Phase Framework chart follows on the next page.

Please refer to the Charts in Appendix 1 for the potential impact by specific category per the Task Force meetings.

PANDEMIC INFLUENZA – EMERGENCY RESPONSE LEVELS (Generic Six Phase Framework)

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL - 1	Business as Usual 'STATUS QUO' Full Staff Complement	No Declared Emergency Normal Operating Conditions	N.A.	<ul style="list-style-type: none"> • Business Continuity Plans • Cross-training of Staff • Mutual Aid Work Agreements with Neighbouring Properties Etc. Etc. 	<ul style="list-style-type: none"> • Increased Resiliency in Operations • More Clearly Defined Roles and Responsibilities • Heightened State of Emergency Preparedness • Better Service
ERL - 2	Staff Absenteeism (1) 15%	Potential Exists for Some Delays in Service	List Anticipated Service Delays	List Proposed Mitigation Measures That You Intend to Implement to Reduce the Impacts of Service Delays	List Anticipated Residual Impacts with 15 % Staff Absenteeism
ERL - 3	Staff Absenteeism (1) 30 %	Anticipate Service Delays & Some Service Cutbacks	List Anticipated Service Delays List Anticipated Service Cuts	List Proposed Mitigation Measures That You Intend to Implement to Reduce the Impacts of Anticipated Service Delays and/or Service Cuts (e.g. suspend non-essential preventative maintenance)	List Anticipated Residual Impacts with 30 % Staff Absenteeism (e.g. clean offices every two days; garbage pick-up nightly)
ERL - 4	Staff Absenteeism (1) 50 %	Expect Service Cutbacks	List Expected Service Delays List Expected Service Cuts	List Proposed Mitigation Measures That You Intend to Implement to Reduce the Impacts of Expected Service Delays and/or Service Cuts	List Anticipated Residual Impacts with 50 % Staff Absenteeism (e.g. clean offices every 3 day; garbage pick-up nightly)

<p>ERL – 5</p>	<p>Voluntary Closure of Property for Health, Safety, Security or Other Reasons (Skeleton Staff)</p>	<p>Phased Transition to Full Lockdown Over 5 – 10 Business Days - Transition to Skeleton Staff - Provide Essential Services Only</p>	<p>List Essential Services To Be Provided Here:</p> <ul style="list-style-type: none"> • Administration • Fire and Life Safety • Building Security • HVAC, etc. 	<p>List Proposed Mitigation Measures That You Intend to Implement Under Full Lockdown Conditions to Reduce the Impacts of Service Delays and/or Service Cuts</p>	<p>List Residual Impacts That You Anticipate Under Full Lockdown Conditions</p>
<p>ERL - 6</p>	<p>Forced Closure of Property Under “Orders” Issued by Public Health Officials (Skeleton Staff)</p>	<p>Full Lockdown Within 48 Hours - Skeleton Staff - Provide Essential Services Only</p>	<p>Who will provide these essential services? List their names here:</p>		

Note 1 – Levels of staff absenteeism would affect regular staff, contract staff, contractors and other external service providers

5.4.7 Commercial Building Industry Communication - Tenants, Suppliers / Service Providers

In addition to the importance of internal staff communication, as in any property emergency, tenant and supplier/service provider communication will be critical in a pandemic. However, given the characteristics of a pandemic being an event that is more continuous or repetitive, communication strategies need to be modified to suit.

Tenant Education and Information Signage

It is recommended that you prepare in advance of the on-set of pandemic conditions by pre-ordering building signage for education and information purposes.

Two sets of posters are suggested, the first to give tenants and visitors clear messaging and education now, to help stop the spread of the pandemic, and the second is for informational purposes, while operating under pandemic conditions.

You may wish to produce your own campaign collateral, and recommended wording is provided in the Pandemic Planning Toolkit. The Task Force has also designed template posters that are made available to customize. A central ordering system through Poster One is available to expedite the ordering and production process. Visit www.PosterOne.com/bomacanada for details, and to order from the BOMA Canada library of posters. Note: if you do not already have an existing Poster One account, you may create one on their site.

Service Provider Communications

It is crucial to begin discussions and strategies in collaboration with service providers, to ensure communications and other Pandemic plans are aligned prior to on-set. Survey your service providers now to establish agreed upon contacts, communications tools and protocols.

BOMA Canada Communication News-Site

The Building Owners and Managers Association (BOMA) of Canada has established a National Emergency Preparedness Committee that will continue to monitor the pandemic issue in the context of the commercial real estate industry on an ongoing basis and, in the event of an outbreak, will facilitate communication through the publicly available BOMA Canada Pandemic Planning Site for Canadian Commercial Real Estate news-site: www.bomacanada-pandemic.ca

BOMA Canada, through its strong local BOMA Associations in all major regions of Canada, and through its national Emergency Preparedness Task Force, provides a national network of communication and information-sharing. The local BOMA Associations across the country have established local task forces, which will provide a critical link to regional and municipal authorities in major centres. The national multi-authored news site, with these contributors from across the country, is intended to be a central source to inform BOMA members, the industry at large, tenants, service providers and other stakeholders, about developments as they occur, both nationally and in the BOMA local associations across Canada. The site also includes numerous industry and government resource links, providing a wealth of valuable background information.

*Refer to the **Pandemic Planning Toolkit** for template tenant letters, information poster text, and template service provider correspondence and survey.*

5.4.8 Legal Considerations for Property Owners and Managers*

Is there a legal obligation for owners and managers to have a Pandemic plan?

The first consideration for owners and managers of properties is whether there is a legal requirement for them to have a Pandemic or Health Emergency Plan. At this time, there is no express legislation in Canada or Ontario which requires owners or managers of properties to have a specific Health Emergency Plan in place. Having said that, there are some provinces which do require employers to perform risk assessments and this of course may imply an obligation to prepare such a plan if in fact a risk is identified.

Notwithstanding this, a legal obligation to prepare for a potential Pandemic event may exist for reasons which include:

- (i) As an employer in Canada, applicable legislation requires employers to create and maintain a safe workplace for its employees.
- (ii) The possibility of a Pandemic or health emergency is now well known to be a significant possibility or likelihood. The relevant government agencies are suggesting businesses should have plans in place. Many businesses and industries are preparing and publishing plans. The possibility that a claim may be made against an owner or manager of a property in negligence for not having a Pandemic Plan or Health Emergency Plan in place given the above, is an open question.

Relevant Federal Legislation – Pandemics and Other Emergencies

It is outside the scope of this paper to deal with all of the various legislation, federal and provincial, which may come into play in a health emergency situation but listed below are some of the Acts which may be of importance.

Canada Emergencies Act

The Emergencies Act (replaces the War Measures Act – 1914) is a tool of last resort that covers four classes of emergency: public welfare, public order, international affairs and war. It is intended to respond to an emergency at the national level and can only be invoked after it has been determined that a critical situation cannot be dealt with effectively under any other law in Canada and that the situation is either:

- of such proportions as to exceed the capacity or authority of a province to deal with it (such as during a Pandemic); or
- a serious threat to the Government of Canada’s ability to preserve sovereignty, security or territorial integrity.

Emergency Preparedness Act

The Emergency Preparedness Act requires every federal ministry to develop and implement emergency preparedness measures. Since its inception, this Act has led to the development of several federal emergency response plans, including Health Canada’s Canadian Pandemic Influenza Plan.

** In addition to, and not to the exclusion of the comprehensive Disclaimer provisions set out at the beginning of this toolkit please note that this section provides only a brief overview of some of the legal issues that you may have to consider when developing a Pandemic or health emergency plan. No legal advice is being provided that may be relied upon by anyone for any reason in this paper and any appendices hereto. The authors accept no responsibility whatsoever for any liability for any acts or omissions done or omitted in reliance, in whole or in part on any information contained in this paper or any liability for any claims for loss, damage or other consequence, whether in contract, equity, tort, statute or law of any kind, whether such losses be direct or indirect, special, incidental, consequential or punitive that may relate to the use of this information, howsoever caused. In order to ensure that you have a clear understanding of any legal rights and obligations that you may have, you must obtain proper legal advice from a lawyer and refer to any and all relevant legislation and regulations.*

Owners and Managers as Employers

Any Pandemic or health emergency that involves a biological virus may constitute a hazardous substance that is regulated by *Canada Labour Code Part II* and its regulations and the Provincial Occupational Health and Safety Acts and their regulations. Reference should be made to the applicable federal and provincial legislation. A hazardous substance is defined as “a controlled product and a chemical, biological or physical agent that, by reason of a property that the agent possesses, is hazardous to the safety or health of a person”. The most relevant sections of the *Canada Labour Code Part II Occupational Health & Safety* are set out below:

Canada Labour Code, Part II Occupational Health and Safety
Section 124. Every employer shall ensure that the health and safety at work of every person employed by the employer is protected.
Section 125. (1) Without restricting the generality of section 124, every employer shall, in respect of every work place controlled by the employer and, in respect of every work activity carried out by an employee in a work place that is not controlled by the employer, to the extent that the employer controls the activity
(p) ensure, in the prescribed manner, that employees have safe entry to, exit from and occupancy of the work place;
(s) ensure that each employee is made aware of every known or foreseeable health or safety hazard in the area where the employee works;

Section 128. (1) Subject to this section, an employee may refuse to use or operate a machine or thing, to work in a place or to perform an activity, if the employee while at work has reasonable cause to believe that

(b) a condition exists in the place that constitutes a danger to the employee...

Section 145. (2) If a health and safety officer considers that a condition in a place constitutes a danger to an employee while at work,

a) The officer must notify the employer of the danger and issue directions in writing to the employer directing the employer, immediately or within the period that the officer specifies, to take measures to:

i) correct the hazard or condition or alter the activity that constitutes the danger,

(ii) protect any person from the danger...

If the employer agrees that a danger exists, the employer shall take immediate action to protect employees from the danger.

The full *Canada Labour Code Part II – Occupational Health and Safety* is available online at:
<http://laws.justice.gc.ca/en/L-2/146493.html#rid-146499>

Every provincial jurisdiction has the equivalent of an Occupational Health and Safety Act or Workplace Health and Safety Act which contain similar provisions. Please see Appendix 2 in the *Influenza Pandemic: Planning Guide for Commercial Office Buildings* for a list of statutes and regulations that may be applicable. Please note that this list may not be exhaustive and reference should be made to the particular legislation in each province. Having said that, it appears that Work Safe B.C. has considered it prudent to provide a draft Occupational Health and Safety Guideline for consultation purposes to address the expectations for plans to protect workers from possible exposure to a virus in B.C. workplaces. The proposed regulation will require employers to develop and implement an exposure control plan to protect workers where they have or may have occupational exposure to a blood borne pathogen or to other bio-hazardous materials. It appears that the proposed regulation has been ratified and is likely to become law shortly. The intent is that this would include an influenza Pandemic. Employers can likely expect that if these regulations are implemented in one province, then it is likely that they will be seriously considered by others and implemented.

Three Rights of Employees

Both federal and provincial occupational health and safety legislation provides three rights:

- Right to Know;
- Right to Participate;
- Right to Refuse.

Right to Know: Employees have the right to be informed of known or foreseeable hazards such as Pandemic influenza. They must be given the information, instruction, training and supervision necessary to protect their health and safety. Effective communication will be crucial in preparing for and controlling Pandemic influenza.

Right to Participate: Employees have the right and responsibility to identify and correct job-related health and safety issues. They could exercise this right during Pandemic influenza. Employees can also participate through a complaint process and may complain if Pandemic influenza has not been well handled.

Right to Refuse: Employees can refuse work where there is reasonable cause to believe:

- A dangerous condition exists;
- An activity constitutes a danger to one or more employees.

It is possible that employees may refuse work when Pandemic influenza poses a danger.

Duties of Employers and Employees

Under both federal and provincial occupational health and safety legislation:

- **Employers:** must ensure the health and safety of every employee is protected. This may require the implementation of programs, plans and response actions for Pandemic influenza, and
- **Employees:** have obligations to prevent occupational-related injuries and diseases. They must take reasonable and necessary precautions to ensure their own and others' health and safety.
- In the event of Pandemic influenza, employees could exercise this obligation and would require guidance, training, education, cleaning substances and protective clothing such as protective barriers, gloves and masks.

Owners as Landlords

There are very significant and varied issues that owners as landlords will face in any Pandemic or health emergency event. It is not possible to anticipate all of the legal issues that may arise however, it is possible to suggest that the following issues should be considered and included in any such discussion or plan as the case may be.

Quiet Enjoyment

- Landlord may wish to limit or restrict access to the property or any part thereof during a health emergency or Pandemic. It is questionable as to whether the landlord under existing leases has the right to do so.
- Can the landlord require that only employees of the tenant are permitted to enter the building as opposed to visitors or invitees?
- Can the landlord require a particular tenant or a particular type of tenant and its staff and invitees to use only one designated entrance, exit or escalator or elevator as the case may be? For example, you may have a medical clinic or doctor's office in the building. In the case of a health emergency, tenants in the building may be concerned about the fact that medical patients may be using the same entrance or elevator. The landlord may wish to have the right to designate a particular entrance or elevator to be utilized solely by a specific tenant or group of tenants in a health emergency.
- Can the landlord enter a tenant's premises to decontaminate any part of the tenant's premises? It is conceivable that an employee or invitee of the tenant may suffer from an illness or disease which may contaminate the leased premises. The landlord may wish to take steps to either require the tenant to decontaminate the premises or failing that, enter the premises to decontaminate at the tenant's expense. It may be that the landlord will wish to do this prior to any possible public health order. The legal basis for the landlord entering the leased premises

and taking steps to decontaminate would be questionable without a health emergency article contained in the lease. Of course, the landlord does not want to have the obligation to do this and any health emergency regulation must provide that any steps that the landlord may choose to take or omit to take are in its sole and unfettered discretion and that there is no obligation on the landlord to take any action.

Quarantine or Closing All or Part of Building

- Can the landlord close all or part of the building where it has been determined that there has been a health emergency notwithstanding that there has not been a closure or quarantine order by any governmental authority?
- Can the landlord close all or part of the building where it determines that it is not safe to continue to operate the building, it does not have the available staff, equipment or ability to maintain the operations of the building?

Force Majeure Clauses

- Most sophisticated leases have a well defined Force Majeure Clause but it may not include provisions that expressly include a health emergency such as a Pandemic or epidemic.

Limitation of Liability

- Ensure that lease provisions adequately protect landlord, its officers, directors, property managers and agents from liability in carrying out the terms of any Pandemic plan or in dealing with any health emergency situation.
- As an example, consider the situation where the cleaning staff (independent contractors) inadvertently spread a virus or other health emergency biohazard in the building. If there is any suit, it is likely that the “deep pocket” landlord defendant will be included in any negligence claim.

Tenant Reporting to Landlord

- During a Pandemic, the landlord will have an interest in knowing if there have been any incidences of illness experienced in a tenant’s premises or amongst the tenants’ employees. Can the landlord require the tenant to report any incidences of illness amongst its employees to the landlord?
- Are there privacy issues which put the landlord in a position where it cannot communicate the fact of illness in a particular tenant’s premises? Can the landlord generally disclose the fact of illness in the building? Does the landlord have a duty to disclose the fact that there have been any incidences of illness in the building to other tenants?

Rent Defaults

- In any health emergency, it is possible that there will be tenants that will default in the payment of rent. Landlords may wish to determine in advance what criteria they may utilize to decide whether any tenants may be offered rent relief and on what terms. In some circumstances, landlords may decide to request further security in exchange for any forbearance agreement.

Services to Leased Premises

- In a health emergency, the landlord may wish to or be forced to reduce or cease any particular services to the leased premises or common areas. In particular, the landlord may be in a position where it must reduce cleaning and trash removal services. Cleaning staff will be on the front line of dealing with any health emergency and many may become ill or not report to work. The landlord may wish to have a step down plan for certain services. It is probably a good strategy to have those discussions with tenants well before any emergency situation arises. Tenants will therefore be in a position to include in their own plans the fact that they may have to take on some of the cleaning or other obligations in the leased premises.
- Can the landlord download some of its obligations pursuant to the lease on the tenant in the case of the health emergency?
- Given the fact that social distancing will be a very significant strategy employed by many tenants to maintain their business operations, landlords may find many tenants requesting that the building hours of operation be extended to facilitate employees working in shifts which may include late evening hours. This is especially the case if there is a transit shutdown or limitations placed on public transit given potential staff reductions. In those circumstances, many more employees may find that the only way for them to travel to work is to drive to the office. Evening shifts will allow for tenants to maximize the parking facilities in the building to facilitate evening workers that have to drive to the office. There are a number of significant building operational issues that flow from this concerning building services and the costs relating to those services.

Emergency Drills

- Tenants generally understand that they have to participate in fire drills. At some point, a landlord may wish to conduct a health emergency drill in all or part of the building. Can the landlord require tenants to participate in health emergency drills?

Existing Leases Versus New Leases

Many of the above-noted issues may be considered by the landlord as a basis for amending their lease forms to include expanded health emergency rights or powers. These lease forms may include a specific definition of a health emergency and include a section on health emergency or general emergency powers that a landlord may invoke.

Insofar as existing leases are concerned, it is unlikely that the landlord can make any amendments to the lease form itself without the consent of the tenant. Having said that, most commercial leases do give the landlord the power to pass regulations relating to the operation of the building on an ongoing basis and landlords may wish to utilize that right to draft and deliver a set of health related regulations that may deal with a number of the issues set out above.

The question as to whether the landlord will wish to make amendments to its lease form to include rights concerning health emergency issues is one that will be of course specific to each landlord's situation and experience.

Landlord/Tenant Cooperation in a Health Emergency

During a Pandemic or other emergencies, it's important for landlords and tenants to work together. During a Pandemic, Medical Officers of Health, as well as other medical health professionals are expected to be given expanded powers to protect public health and safety. For instance, if a health professional identifies a patient as being a suspect, or confirmed case of seasonal influenza or Pandemic influenza, then that health professional will be required to commence contact tracing procedures in accordance with the protocols set by the Medical Officer of Health at that time. This is likely to involve making contacts with the patient's workplace so that those exposed to the infected person can be formally identified, notified and ordered into isolation or quarantine for time periods specified by public health officials.

If a landlord or tenant worker gets sick at work, strict procedures will be needed to minimize the risk of exposing others in the building to infection. For example, the infected person's workstation and other personal objects with will need to be disinfected, whether that responsibility rests with the landlord or tenant employer.

Property Managers

- Property managers and agents managing properties for owners will be charged with managing the building through any Health Emergency or Pandemic Event. They may be called upon to implement the landlord Pandemic plan and should of course become familiar with it or alternatively, they may be requested by the Owner/Landlord to prepare a plan.
- Property managers may wish to ensure that their contracts of engagement with Owners properly cover off and indemnify them for any claims that may be made in relation to their operation of the property on behalf of the Owner during a Pandemic or other health emergency.
- Property managers may wish to suggest to Owners/Landlords that they consider preparing or adopting a Health Emergency or Pandemic Plan as part of their business continuity planning and address the issues referred to above.

5.5 Activation of Pandemic Continuity Plan

Health Canada will widely publicize any changes to the pandemic phases that are designed to alert government agencies to action.

Alert levels established by the Task Force are based on the following alert levels and correspond to the World Health Organization (WHO) phases

GREEN	Limited number of cases transmitted from sick birds to humans
YELLOW	Recognized evidence of human to human transmission, but cases are limited to small clusters
ORANGE	Major outbreaks in specific areas.
RED	Global epidemic (Pandemic)

The table below provides summary guidance as to how a business might proceed as different stages of a pandemic are reached.

Table 2: Suggested Private Sector Responsibilities and Actions for Business for Each Alert Period

PHASE	Private Sector Responsibilities	Suggested Actions for Business
Interpandemic and Pandemic Alert Periods	<p>Establish plans and procedures to support Health Authority* initiatives to prepare for a pandemic.</p> <p>Develop a program, in conjunction with the Health Authority, to facilitate routine, annual influenza vaccinations of staff.</p> <p>Ensure that areas of responsibility essential for maintenance of your business have been backed up so that appropriate designated personnel can take over management in case of absence due to illness.</p> <p>Identify essential staff and develop contingency plans for operations under prolonged staff shortages and/or shortages of resources.</p>	<p>Review business continuity plans.</p> <p>Identify essential services (including contractors), facilities/plants and other production inputs.</p> <p>Plan for up to 50 percent staff absences for periods of 2-3 weeks at the height of the pandemic, and lower levels of staff absences for a few weeks on either side of the pandemic.</p> <p>Assess core staff and skill requirement needs, and ensure essential positions are backed-up by an alternative staff member.</p>

PHASE	Private Sector Responsibilities	Suggested Actions for Business
	<p>Develop plans for procedures to address supply and personnel shortfalls.</p> <p>Arrange and facilitate a meeting with local business leaders regarding the need for mutual aid and support among businesses.</p> <p>Meet with representatives of local businesses to ensure essential businesses stay open.</p> <p>Continue to monitor appropriate information sources for updated information.</p> <p>Consider implementing a telecommuting system so more people can work from home.</p> <p>Implement a health education plan through appropriate workplace health and safety programs.</p> <p>Working with the Health Authority, ensure that self help guidelines are distributed to staff/workers.</p> <p>Consult with the Health Authority on the need to close buildings and cancel public events.</p> <p>Consult with the Health Authority on the need to control the movement of people and commodities in and out of the community.</p>	<p>Identify ways to increase “social distancing” in the workplace, reduce movement etc.</p> <p>Consider organizational policies to encourage the sick to stay at home; and enable staff to work from home.</p> <p>Identify ways to minimize illness among staff and customers, and consider how essential messages (e.g. basic hygiene) can be communicated to staff.</p> <p>Identify needs for Personal Protective Equipment (PPE) and cleaning equipment, and check air conditioning. Purchase additional contingency supplies if needed.</p>
<p>Pandemic Period</p>	<p>Increase public information effort designed to keep ill workers at home.</p> <p>Ensure meticulous hand hygiene and environmental cleaning.</p> <p>Cease non-essential services.</p> <p>Be prepared to make arrangements for rotation of hours/days of operation and/or re-assignment of staff.</p>	<p>Alert staff to change in pandemic status.</p> <p>Activate staff overseas travel restrictions.</p> <p>Activate essential business continuity measures.</p> <p>Activate measures to minimize introduction and/or spread of influenza in work place (post notices; social distancing, managing ill staff members, workplace cleaning, etc.).</p> <p>Communicate with staff to promote confidence in the workplace.</p>

PHASE	Private Sector Responsibilities	Suggested Actions for Business
		<p>Activate contact tracing where staff become ill at work.</p> <p>Activate process for recovered and non-infected staff members to return to work.</p>
Post-pandemic Period	Review, evaluate and revise your business pandemic response as necessary.	Manage return to business as normal.

**Each region within each province has a local health authority. All regional health authorities for Canada can be found online at: <http://www.chrgonline.com/LinkRegAuthorities.asp>*

5.5a Government Action Monitoring

One of the potential sources of information that will be monitored is the response by various governments in countries where confirmed cases have been reported. Not only are their actions/reactions indicative of the situation but will also potentially impact each organization’s response. The following represent potential actions by governments at increasing WHO levels of risk as well as the potential impact. Suggested responses are included.

WHO Pandemic Stage	Possible Government Actions	Potential Impact	Suggested Response
4	Border management options may be executed, which may include the closure of borders, screening/quarantine of all people entering, or travel bans to infected or suspect countries.	An international travel ban should be in effect. Therefore, no impact, other than for business travelers that may already be in transit.	Maintain a travel ban. Follow up on any business travelers in transit who may be caught up in quarantine. Take action to ensure their safety. Consider communications with tenants to ensure similar actions by their employees.
	People may also be prevented from leaving a country or city.	No impact, other than for business travelers already in transit.	As above.
	Overseas citizens in high-risk or infected areas will be instructed to leave (if possible).	No impact.	As above.
	Health services would go on a high state of alert.	Access to non-emergency medical services may be restricted or unavailable for any business travelers in transit.	Consult with medical advisor on appropriate response. Ensure training for front line employees is completed.
	Government programs to manage fear, uncertainty and doubt among citizens and business would be implemented.	No impact.	Monitor government communications. Include relevant government key messages in internal and tenant communications, as appropriate.
5	Border management is strictly enforced. Borders are sealed, and no travel is allowed in or out. Only essential supplies are permitted to be imported, such as food and medicine (low probability).	An international travel ban should be in effect. Therefore, no impact, other than for business travelers already in transit. Possible impact on suppliers & purchasing.	Maintain travel ban. Follow up on business travelers in transit who may be caught up in quarantine. Take action to ensure their safety. Defer non-vital purchases to a time of less risk. Seek alternate local Canadian sources/suppliers for vital purchases.
	Quarantine and isolation of patients, households and even entire cities may occur. Restrictions may be put in place on movement in and out of infected areas.	No impact unless quarantine occurs in Canada.	Where possible, employees should work from home. For business functions requiring on-site workers, consider the need to invoke orderly shut down plan for non-vital functions.

WHO Pandemic Stage	Possible Government Actions	Potential Impact	Suggested Response
5	Schools could be closed, and limits would be put on other places where people congregate. Mass gatherings of any kind could be prohibited to reduce the risk of spread — for example, restaurants, churches, entertainment centres and sporting events.	School closures would result in higher numbers of employees unable to come to work, due to child care needs. Buildings where events/gatherings are normally held may be closed.	As above. Consider security implications.
	Government programs to manage fear, uncertainty and doubt among citizens and business will be expanded. There will probably be speculation about the situation, misinformation and rumour.	Employees and tenants would be affected.	Monitor applicable government communications. Include relevant government key messages in internal and external communications, as appropriate.
	Social distancing measures are recommended and put into place.	Work practices would need to adjust to include social distancing – teleconferences instead of face-to-face meetings, etc.	Restrict travel between cities and buildings. Increase use of teleconferences and videoconferences. Eliminate non-essential meetings to maximize business value of limited teleconference/ videoconference resources.
	After a period of several months and as vaccine becomes available, widespread vaccination programs begin to be rolled out.	Vaccinated employees would be able to return to work. However, due to child care needs or transport disruption/restrictions may not be able to do so.	Work with public health authorities to have workers performing critical business functions vaccinated at the earliest possible opportunity.
	Public transport may be halted, as it is seen as a high-risk location where many people could be exposed to the virus.	Employees could be affected – unavailable to work or unable to come to work. Ability to operate business functions could be jeopardized. Tenants may implement “shelter-in-place” programs. Access from transit to buildings may be closed.	Where possible, employees could work from home. For business functions requiring on-site workers, consider the need to invoke orderly shut down plan for non-vital functions. Review security procedures given tenant and transit actions.
	Government reaches out to industry and business to help ensure that critical supply chains remain intact as best as possible.	Priority for this likely will go to businesses deemed to be critical infrastructure. Many buildings will probably not be deemed critical infrastructure, and may not be able to participate.	Take advantage of any opportunity to participate in government efforts to keep critical supply chains open. Identify buildings that may qualify as critical infrastructure and confirm with local authorities.
6	If the outbreak expands out of control in a city/location, then it is possible that the government will consider quarantining the entire population, with only essential personnel able to move around (low probability)	Individual building managers may be unable to operate vital business functions requiring on-site workers.	Consider need to invoke orderly shut down plan for vital functions and temporarily close buildings in affected cities.
	Strict border management remains in place. Expect occasional scares and quarantines.	No further impact beyond impact already caused by pandemic.	None required.
	Social distancing measures continue.	No further impact beyond impact already caused by pandemic.	None required.
	Vaccination delivery could begin if one exists.	Increased numbers of employees (and their families) would be vaccinated and able to return to work.	Consider need to invoke orderly re-start plans for vital and non-vital business functions temporarily previously shut down in affected cities.

WHO Pandemic Stage	Possible Government Actions	Potential Impact	Suggested Response
Recovery	<p>Public health services begin to function normally again; isolation and facilities specifically allocated to pandemic response will be released.</p> <p>Widespread vaccination programs begin to take effect.</p> <p>Public transport begins to function again. Infrastructure is fully intact, unlike a physical disaster, and it is a safety decision as to when such infrastructure will begin functioning again.</p> <p>Schools reopen gradually.</p>	<p>Much greater number of employees, tenants, and their families would be vaccinated or immune (infection survivors) and able to return to work.</p>	<p>Return to business as usual, when safe to do so.</p>

5.6 Medical Precautions and Information

This section contains preliminary and notional suggestions to control and prevent the spread of pandemic influenza in a company. Businesses are advised to follow the explicit instructions of Public Health Agency of Canada (PHAC), Health Canada and Provincial and Municipal Health Authorities with respect to the following activities.

The main strategies include:

- Restricting workplace entry of people with influenza symptoms.
- Practicing good hygiene and workplace cleaning habits.
- Increasing social distancing (i.e., enable telecommuting; avoid face-to-face contact).
- Managing staff who become ill at work.
- Managing staff who travel overseas, or those with family members who travel overseas.

Table 3: Summary of Influenza Protection Measures

Protection Measure	Where Applicable
Hand hygiene, cough etiquette, ventilation	Everyone, all the time
Departmental BCP Policies related to pandemic influenza	Senior Management
Social distancing	Everyone, all the time (leverage technologies)
Protective barriers and HVAC	Physical security staff - to avoid close contact with the public and maintain a clean environment
Health related equipment. Temporary surgical masks, gloves, cleaning substances	Work place health and safety committees- for distribution to all employees
Respiratory masks, eye protection, gloves, gowns, aprons	Front line health care workers in close contact with patients and other high risk areas

5.6.1 Restrict Workplace Entry of People with Influenza Symptoms

On declaration of the pandemic phase, companies should consider posting notices at all entry points advising staff and visitors not to enter if they have influenza symptoms. This notice could be communicated to all employees.

Employees should be advised not to come to work when ill or under quarantine until symptoms are resolved or the quarantine has ended. They should be directed to their family physician and/or to information materials on the websites of health service providers such as the Public Health Agency of Canada (PHAC) (http://www.phac-aspc.gc.ca/new_e.html) and Health Canada.

Table 4: What is the Difference Between Influenza and a Common Cold?

SYMPTOM	INFLUENZA	COMMON COLD
Fever	Usual, sudden onset 38-40 degrees and lasts 3-4 days	Rare
Headache	Usual and can be severe	Rare
Aches and pains	Usual and can be severe	Rare
Fatigue and weakness	Usual and can last 2-3 weeks or more after the acute illness	Sometimes, but mild
Debilitating fatigue	Usual, early onset can be severe	Rare
Nausea, vomiting, diarrhea	In children < 5 years old	Rare
Watering of the eyes	Rare	Usual
Runny, stuffy nose	Rare	Usual
Sneezing	Rare in early stages	Usual
Sore throat	Usual	Usual
Chest discomfort	Usual and can be severe	Sometimes, but mild to moderate
Complications	Respiratory failure; can worsen a current chronic condition; can be life threatening	Congestion or ear-ache
Fatalities	Well recognized	Not reported
Prevention	Influenza vaccine; frequent hand-washing; cover your cough	Frequent hand-washing; cover your cough

5.6.1a Sample Influenza Notification (Taken from the Government of New Zealand's Business Continuity Planning Guide, 2005)

INFLUENZA NOTIFICATION

Influenza is a contagious disease. There is currently an increase in the numbers of people in New Zealand with influenza. In order to reduce the spread of influenza in this workplace, the following is required of everybody:

DO NOT COME TO WORK if you have:

- chills, shivering and a fever (temperature >38°C)
- onset of muscle aches and pains
- sore throat
- dry cough
- trouble breathing
- sneezing
- stuffy or runny nose
- tiredness.

If some of the above apply to you, please go home and wait until you have recovered before returning to work.

If you have recently arrived from overseas or returned from overseas, please ask to speak to the Influenza Manager (see below)

If you start to feel ill at work, **DO NOT** leave your work area

Call your Influenza Manager Ext.....

5.6.2 Personal Hygiene

Personal hygiene measures minimize influenza transmission. Communicate these to employees. They include:

- Cover nose and mouth when sneezing or coughing - encourage people to cough or sneeze into the crease of their elbow as opposed to their hands.
- Dispose of used tissues immediately.
- Wash hands frequently.
- Keep hands away from eyes, nose, and mouth.

Ensure supplies of hygiene products (soap, hand towels, gloves, and masks) are available while recognizing that their supply will be reduced in pandemic influenza. Ensure the environment is cleaned regularly.

Post hygiene notices at entrances, washrooms, hand washing stations, and public areas.

Brochures, newsletters, global emails, notice boards, and pay-slips are some of the materials that can be used to communicate this advice.

Hand washing (with soap and water, alcohol-based hand rub, or antiseptic hand wash) is the single most effective measure to reduce risks of transmitting infection.

Hand Hygiene

Hand hygiene is an important step in preventing the spread of infectious diseases, including influenza. Hand hygiene can be performed with soap and warm water or by using waterless alcohol-based hand sanitizers.

Transmission of influenza can occur by indirect contact from hands and articles freshly soiled with discharges of the nose and throat of an acutely ill individual. By frequently washing your hands you wash away germs that you have picked up from other people, or from contaminated surfaces, or from animals and animal waste.










The influenza virus is readily inactivated by soap and water. Antibacterial hand wash products are not required because routine products, along with proper hand washing procedures, will inactivate the influenza virus.

Waterless alcohol-based hand sanitizers can be used as an alternative to hand-washing and are especially useful when access to sinks or warm running water is limited. Placing alcohol-based hand sanitizers at the entrance of facilities is useful in preventing transmission of infectious diseases.







5.6.2a Basic Hygiene Notice**PROTECTING YOURSELF AND OTHERS
AGAINST RESPIRATORY ILLNESS**

- ❖ **HANDWASHING IS THE MOST IMPORTANT THING YOU CAN DO TO PROTECT YOURSELF**
- ❖ Cover your nose and mouth when coughing or sneezing
 - Use a tissue and dispose of this once used in the waste
 - Always wash hands after coughing and sneezing or disposing of tissues.
- ❖ Keep your hands away from your mouth, nose and eyes.
- ❖ Avoid contact with individuals at risk (e.g. small children or those with underlying or chronic illnesses such as immune suppression or lung disease) until influenza-like symptoms have resolved.
- ❖ Avoid contact with people who have influenza-like symptoms.
- ❖ Ask people to use a tissue and cover their nose and mouth when coughing or sneezing and to wash their hands afterwards.

5.6.2b Hand Hygiene Notice - Soap and Water

<h2 style="text-align: center;">Hand Hygiene with Soap and Water</h2>		
<p>1. Remove jewelry. Wet hands with warm water</p> 	<p>2. Add soap to palms</p> 	<p>3. Rub hands together to create a lather</p> 
<p>4. Cover all surfaces of the hands and fingers</p> 	<p>5. Clean knuckles, back of hands and fingers</p> 	<p>6. Clean the space between the thumb and index finger</p> 
<p>7. Work the finger tips into the palms to clean under the nails</p> 	<p>8. Rinse well under warm running water</p> 	<p>9. Dry with a single-use towel and then use towel to turn off the tap</p> 
<p>Minimum wash time 10-20 seconds.</p>		

5.6.2c Hand Hygiene Notice – Hand Sanitizer

<h2>Hand Hygiene with Alcohol-based Hand Sanitizer</h2>		
<p>1. Remove jewelry. Apply enough product to open palms.**</p> 	<p>2. Rub hands together palms to palms</p> 	<p>3. Rub in between and around fingers</p> 
<p>4. Cover all surfaces of the hands and fingers</p> 	<p>5. Rub backs of hands and fingers. Rub each thumb.</p> 	<p>6. Rub fingertips of each hand in opposite palm</p> 
<p>7. Keep rubbing until hands are dry. **The volume required to be effective varies from product to product. Enough product to keep hands moist for <u>15 seconds</u> should be applied. Do not use these products with water. Do not use paper towels to dry hands.</p>		
<p>Note: Wash hands with soap and water if hands are visibly dirty or contaminated with blood or other body fluids. Certain manufacturers recommend washing hands with soap and water after 5-10 applications of gel.</p>		

5.6.3 Workplace Cleaning

Virus transmission can also be reduced by cleaning the environment and hard surfaces (sinks, handles, railings, objects, counters) with neutral detergents followed by a disinfectant solution. Influenza viruses can live for up to two days on hard surfaces but are inactivated by disinfectants. Good disinfectants are sodium hypochlorite, granular chlorine and alcohol.

- Surfaces that are frequently touched with hands should be cleaned often.
- Do not share cups, dishes, and cutlery and ensure they are thoroughly washed with soap and hot water.
- Clean the workspaces of employees that have recently become ill.

5.6.4 Increase Social Distancing

Social distancing means minimizing human-to-human contact in peak phases of pandemic influenza. Contacts are those persons who have had close (one metre or less) physical or confined airspace contact with an infected person within four days of that person developing symptoms. These are likely to include family members and/or other living companions, workmates (if in confined airspace environments) and possibly recreational companions.

Epidemiological evidence from a developing pandemic may change the definition of “contact”. In Canada contact management with respect to reportable diseases is mandated by law (for instance the *Quarantine Act* and other health related *Acts*).

Employees will probably elect not to circulate in crowded places and large gatherings of people during pandemic influenza. It is recommended that business consider the use of new technologies to facilitate social distancing by using communications networks, remote access and web access (among other techniques) to maintain distance.

Suggestions on how to minimize close contact include:

- Avoid face-to-face meetings.
- Minimize meeting times.
- Meet in large rooms.
- Use communications and network technologies and devices to communicate.
- Avoid unnecessary travel (especially to endemic regions).
- Cancel or postpone non-essential meetings/workshops/training sessions.
- Leave a gap between shifts.
- Ventilate the workplace between shifts.

- Avoid cafeterias and restaurants.
- Introduce staggered lunch time

5.6.5 Summary: How to Stay Healthy During the Pandemic Influenza

Personal Health

- Eat, rest well and exercise in moderation.
- Wash your hands frequently with warm water and soap.
- Cover your nose and mouth when coughing or sneezing.
- Minimize visitors to your home.
- Check up on friends and family who live alone.
- Watch for regular influenza updates from Health Canada.
- Get the influenza vaccine when available.
- It is recommended that people at high risk of getting influenza and its complications and their caregivers receive an annual influenza vaccine.

**Washing hands is one of the most important ways
to prevent the spread of influenza**

Stay away from crowds

- Stock up on basic items.
- Shop at smaller stores with smaller line-ups.
- Shop at off peak hours and find out which stores stay open late/24 hours.
- If possible phone ahead your grocery order for quick pick up.
- Order groceries over the phone/on line for delivery.
- Arrange to pay bills at ATMs, on line or over the phone.
- Cancel or postpone family gatherings, outings or trips.

**If you cannot avoid crowds, minimize the
amount of time you spend around people**

Stay healthy at work

- Work from home or arrange to work flex hours if possible.
- Wash your hands frequently with warm water and soap.
- Use waterless sanitizing gel to clean hands if soap & water are not available.
- Clean objects and hard surfaces that are handled by many people with a disinfectant.
- Use stairs instead of crowded elevators.
- Cancel non-essential meetings: use teleconferencing/video conferencing/emails/fax.

**If you feel unwell stay home,
rest, and drink plenty of fluids**

5.6.6 Personal Protection Materials

In the event of a pandemic, refer to the Public Health Agency of Canada's web site for the most current information on the appropriate Personal Protective Equipment (PPE).

Broadly defined, personal protective equipment or PPE is specialized clothing or equipment worn to protect someone against a hazard. It can range from just a mask or a pair of gloves to a combination of gear that might cover most or all of the body. In the case of influenza, PPE may include using masks and protective barriers.

- ✓ *Using masks:* People with respiratory infection symptoms should use a disposable surgical mask to help prevent exposing others to their respiratory secretions. Any mask must be disposed of as soon as it becomes moist or after any cough or sneeze, in an appropriate waste receptacle, and hands must be thoroughly washed and dried after the used mask has been discarded.
- ✓ *Protective Barriers:* Protective barriers (i.e., glass or plastic) may provide useful protection for people such as front-counter staff or public transport drivers, whose duties require them to have frequent face-to-face contact with members of the public where social distancing is either not possible or not practical.

5.7 Policies for Exposed Employees

All decisions regarding infectious diseases should be based on accurate and up-to-date information, considered in light of your particular situation. When in doubt, contact your local Medical Officer of Health.

Your business may decide to screen employees prior to coming to work or at the workplace to minimize the risk of a sick individual coming to work and infecting the rest of the workforce. Sick employees are encouraged to stay home until their symptoms have disappeared. **In the event of a Pandemic, it is recommended that employers check the Public Health Agency of Canada's website (<http://www.phac-aspc.gc.ca>) for the latest advice.**

Develop a workplace policy around when an employee is fit or unfit to work. The Influenza Like Illness (ILI) Assessment form (see section 5.7a) may be used as a template for screening employees. The criteria for determining fitness to work may depend on the size of the organization and the job responsibilities of the employee.

If a person feels ill, or if someone observes that another person is exhibiting symptoms of influenza at work, they are to contact a designated contact person **by telephone** if at all possible. Workers who are ill should stay at home until symptoms are resolved.

The designated contact person should then do the following:

1. Avoid visiting this person if it can be avoided – manage the process over the phone.
2. Check if the employee has any of the symptoms.
3. If the employee does not have any symptoms like those listed, they are very unlikely to have influenza, and should be reassured but advised to call the designated contact person again later or to see their physician if they are still concerned.
4. If the employee does have symptoms that match some of those listed, they should be treated as a “suspect case.”

It may be helpful to have a staff influenza notification form completed, including details of any staff and/or visitors they have been in contact with. This information will permit the designated contact person to identify recent movements and monitor well-being during the Pandemic.

5. The employee should be informed where they can find a surgical mask and instructed to wear it immediately. This is to help protect other staff.
6. The employee should leave work and immediately contact a health professional in the manner advised by Public Health Agency of Canada on its website at that time. This may involve phoning the person's normal doctor or nurse, or a specially designated centre to seek further advice.
7. The employee's manager should be informed that they have left work.
8. The employee should, if at all possible, avoid public transport when leaving work.

9. Contact management – It is helpful for employers to:

- Identify contacts (once an employee is suspected to be infected);
- Advise contacts that they have been in contact with a person suspected of having influenza; and,
- Ask contacts to go home, and stay at home until advised otherwise.

10. The employee's work station should be cleaned and disinfected.

11. Your designated contact person will need to set up a system to manage the absence and return to work of the employee and their contacts. Some issues to consider include:

- Advice to the employee on how long to stay away from work (the Public Health Agency of Canada website will have advice on this once the characteristics of a Pandemic are known);
- Decisions on leave and cover arrangements;
- Checking on the staff member during his/her absence from work. This will facilitate treatment, contact tracing, etc., if they become ill;
- Establishing a process in your plan to ensure that:
 - Employees are healthy before allowing them to return to work; and,
 - They are encouraged to return to work once they are well.

Isolation and Quarantine

The *Quarantine Act and Regulations* helps protect Canadians from dangerous and infectious diseases. Under this Act, Public Health Quarantine Officers have the authority to ask a person suspected of having an infectious disease to undergo a medical examination and to detain that person if necessary.

Quarantine may be used in the early stages of the Pandemic to slow or stop the spread of influenza.

A person may be placed on quarantine if they have been in contact or exposed to a person with an infectious illness such as influenza. This is because a person with influenza is infectious for 24 hours before they know they are sick. In order to protect the public, Public Health Quarantine Officers can place people on quarantine to prevent influenza from spreading to others. Quarantine means staying at home or in a designated building for 3 days from last exposure until the Public Health Quarantine Officer is sure that the person is not infected with the flu. Quarantine means not going outside, not going to work, school or other public places and not meeting with other people unless given permission by the Public Health Quarantine Officer.

Quarantine Q&A for Exposed Employees

Why am I on quarantine?

You have been identified as being in contact with someone who has influenza or have recently been in an area with a high rate of influenza. You may have been exposed to the influenza virus and may have spread it to other people. Although you feel well today, you may become ill in a few days. Persons having influenza can spread the virus even when they are still feeling well.

How long do I have to stay on quarantine?

You must stay on quarantine for at least 3 days or until a Public Health Quarantine Officer tells you that it is safe for you to be off quarantine. While on quarantine, someone from public health may call you to see how you are doing and will ask you questions about having fever, chills, aches or a cough. While on quarantine you must stay inside and not go to work or school or visit anyone until you are off quarantine. It is advised that you do not have visitors while on quarantine.

What will happen if I develop symptoms of influenza while on quarantine?

If the person on quarantine becomes ill with influenza, notify the Quarantine Officer via your local health authority. You may also seek advice from your family physician. If symptoms are severe and need immediate action, call 911 (Ambulance, Paramedics) or go to the closest emergency department.

Is my family safe?

If you are on home quarantine, you and your family should take certain steps for protection. Your family should stay at least one metre away from you. All of you should wash your hands frequently with warm water and soap. Items handled by the person on quarantine should be washed thoroughly with soap and hot water or a disinfectant such as a 10% bleach solution (made up of one part bleach and nine parts water).

Human Rights Legislation

Under both federal and provincial human rights legislation, employers have a duty to accommodate employees with infectious diseases or those who have been exposed to same. The level of accommodation will depend on the circumstances.

5.7a Influenza-Like Illness (ILI) Assessment Form

An ILI assessment tool may be used as a screening tool to determine if employees should be excluded from work due to illness.

Influenza-Like (ILI) Assessment Form

Please check the following:

ILI (Influenza-Like Illness) in the general population is determined by the presence of items 1, 2, 3, and any of 4 a-c, which could be due to the influenza virus.

Please indicate if any of the following apply:

1. _____ Sudden onset of respiratory illness **AND**
2. _____ Fever greater than 38.0 degrees C **AND**
3. _____ Cough **AND**
4. _____ One or more of the following
 - a. _____ sore throat
 - b. _____ joint aches
 - c. _____ muscle aches or weakness

Persons with influenza like illness should remain at home until they have fully recovered (usually 7 days or 5 days after symptoms stop)

Persons who have been exposed within the last three days to someone with an influenza-like illness should stay at home for 3 days until they are sure they are not ill.

Fit to Work

- Recovered from influenza-like illness (ILI)
- Immunized for longer than two weeks
- On antiviral medication
- Asymptomatic

Unfit to Work

- Has influenza-like illness (see ILI Assessment Tool above)

Fit to Work with Restrictions

- Due to limited resources, persons with ILI may be asked to work with restrictions
- Recommend such individuals be isolated physically from other employees or customers
- Maintain meticulous hand hygiene and environmental cleaning.

5.8 Contact Management and Tracing

Contact Definition

Close contact is defined as having cared for or lived with a person known to have an infectious disease or having a high likelihood of direct contact with respiratory secretions and/or body fluids of a patient known to have an infectious disease. Examples include kissing or embracing, sharing eating or drinking utensils, close conversation (within one metre), physical examination, and any other direct physical contact between people. Close contact does not include activities such as walking by a person or briefly sitting across a waiting room or office.

Epidemiological evidence from a developing Pandemic may change the definition of “contact”. In Canada, contact management with respect to infectious diseases is mandated by law (for instance the *Quarantine Act and Regulations* and other health related Acts).

Contact Tracing

The role of contact tracing may vary according to the phase of the Pandemic. At an early phase, when efforts are directed at keeping the Pandemic out or in managing small clusters, contact tracing and associated quarantine of cases and contacts will be vigorous. However, if the Pandemic affects larger numbers of people across the country, it will not be effective as a strategy to contain the Pandemic, and may therefore be dropped.

In any circumstances, employers should urge sick staff members with influenza-like symptoms to return home immediately and contact a health professional in the manner advised by the Public Health Agency of Canada on its website at that time. This should involve phoning the person’s normal doctor or nurse, or a specially designated centre to seek further advice, rather than the patient calling in without prior notification.

If the health professional identifies the patient as being a suspect or confirmed case, then the health professional will commence contact tracing in accordance with the protocols set by Health Canada at that time. This is likely to involve making contact with the patient’s workplace. As indicated in the previous section, it is helpful for employers to:

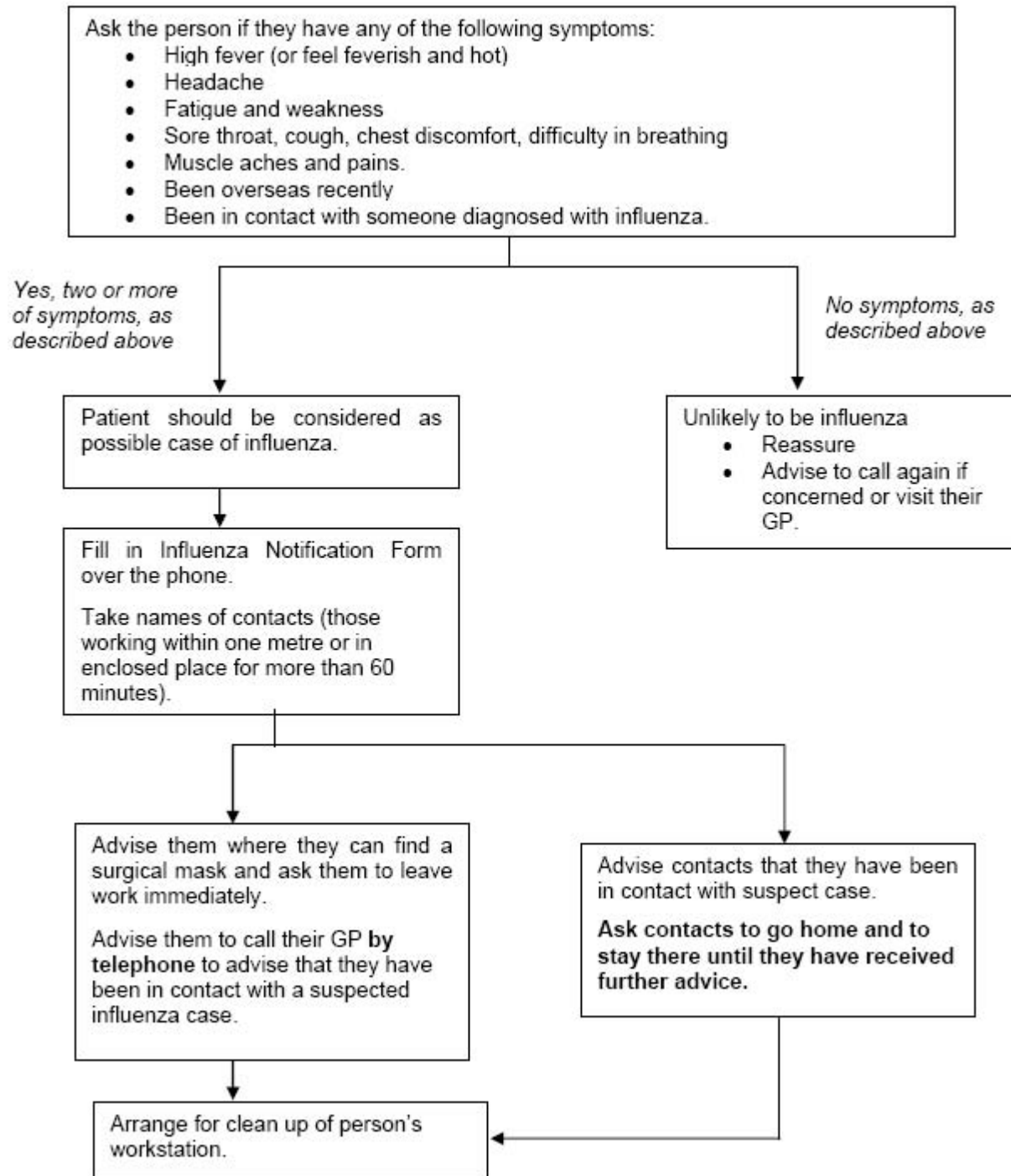
- Identify contacts (once an employee is suspected to be infected);
- Advise contacts that they have been in contact with a person suspected of having influenza; and
- Ask contacts to go home, and stay at home until advised otherwise.

Refer to the following three pages for additional resources for contact management and tracing.

5.8a Screening Checklist for Detection and Management of Suspected Pandemic Influenza Cases

Process

- 1) The Pandemic Manager receives a call from a person suspecting they may have influenza;
- 2) Do not visit the person if this can be avoided – manage the process over the telephone;
- 3) Follow the flowchart below.



5.8b Notification Form: Suspected Influenza Case at Work

Details of Affected Staff

Name:	Worksite:	Location of Isolation:
Job title:	Nationality if Visitor to Site:	Date of birth:
Address:		
Telephone no: _____ (W) _____ (H) _____ (M)		
Symptoms noticed:		
Fever <input type="checkbox"/>	Body aches <input type="checkbox"/>	
Headache <input type="checkbox"/>	Fatigue <input type="checkbox"/>	
Dry cough <input type="checkbox"/>	Others <input type="checkbox"/>	Details: _____
Cold <input type="checkbox"/>		
Time of fever on-set: _____		
Time of isolation: _____		
Travel history over the past 8 days:		
Countries visited _____		
Flights taken: _____		
Where referred:		
Contact List (See separate page)		

Details of Reporter

Name:
Job title:
Telephone no: _____ (W) _____ (H) _____ (M)

5.8c Contact List

Close contact is defined as having cared for or lived with a person known to have an infectious disease or having a high likelihood of direct contact with respiratory secretions and/or body fluids of a patient known to have an infectious disease. Examples include kissing or embracing, sharing eating or drinking utensils, close conversation (within one metre), physical examination, and any other direct physical contact between people. Close contact does not include activities such as walking by a person or briefly sitting across a waiting room or office.

Epidemiological evidence from a developing pandemic may change the definition of “contact”. In Canada, contact management with respect to infectious diseases is mandated by law (for instance the *Quarantine Act* (<http://lois.justice.gc.ca/en/Q-1/99147.html>) and Regulations and other health related Acts).

Retain this list and provide to his/her designated officer on request.

Persons with whom the affected staff has interacted, since displaying symptoms:

Name	Email	Telephone No.	Address
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

5.9 Communications

You may have the most comprehensive and up-to-date plan possible, but without effective and up-to-date communication of that continuity plan with your employees, management, other business units in your organization, government, key suppliers, key customers, and key contractors, your plan will fail.

Some suggested steps to take to ensure an effective communications network include:

- Implementation of a dedicated email database to send information and receive feedback
- Translation and posting of all influenza-related documents on corporate intranet sites in all applicable languages
- Distribution of BCP Influenza Crisis Management Plan and key points to all Managers/Communicators/Security Officers
- Translation/distribution and web posting of pandemic fact sheet
- Leverage all internal communications tools
- Conduct ongoing media monitoring

It is important to ensure that communications are culturally and linguistically appropriate, and that your supply chain is involved in developing and executing the plan.

Leverage New Communication Technologies

It is possible to leverage technologies to avoid face-to-face meetings, increase social distancing and cut down on human-to-human virus transmission. Contact your technical staff to further explore the following options.

Technologies you may want to consider include:

- ✓ Remote Access Technologies: These technologies promote telecommuting and permit employees to work at home or at an alternate site while maintaining connectivity to the headquarters network access server.
- ✓ Distributed Computing Environment (DCE): We live in the world of the distributed computing environment (DCE) often called the “client server model”. This model permits employees to work remotely from their normal workstation. Connectivity is maintained by the Internet, extended networks, remote access, telecommunications devices, wireless devices and other technologies.
- ✓ Application Web Enablement: Web enabling applications facilitate secure access to applications via a browser software client over the Internet. This capability can be harnessed to facilitate flexible end-user application access during pandemic influenza. If applications are web-enabled, end-users can access them using the Internet from anywhere (including their homes) using a client device that supports a browser.

- ✓ Communications Systems: Employees working remotely during pandemic influenza must be able to communicate with headquarters or an alternate site using telecommunications systems. It is paramount to ensure the high availability of such systems.

Communications systems include:

- Internal and external voice communications systems
- Video and phone conferencing
- Local Area Networks (LANs)
- Virtual Local Area Networks (VLANS)
- Wireless implementations and devices
- Local loop phone systems using the Plain Old Telephone System (POTS)
- Wide Area Network (WAN)
- Private Branch Exchange (PBX)
- Facsimile services
- Cell-phones
- Blackberries
- Personal digital devices
- Satellite phones.

The objectives of the BCP coordinator working with IT network staff and communications specialists are to ensure that during pandemic influenza:

- ✓ Communications systems are interoperable with other systems;
- ✓ Layers of redundancy are built in (if they fail, other systems will take over);
- ✓ Systems are highly available (robust and resilient);
- ✓ Sensitive information is protected (encryption and other technologies); and,
- ✓ Systems are regularly tested to ensure these objectives.

Without the ability to communicate with stakeholders, partners, the media and employees during pandemic influenza there will be no command and control and the “chaos” period is likely to be prolonged. Building highly available communications systems is a must for both normal operations and disruptions. This is vital to the successful recovery of critical services.

The BCP coordinator should work with the network staff to ensure the safeguards implemented are cost-effective and are justified by a business case to which the coordinator should have input.

1-800 Information Line

Employees working remotely will need instructions, information on reporting to work, and information related to the scope, risks, magnitude and possible duration of disruptions. A 1-800 information line is a common BCP solution to this problem.

The voice message can be pre-recorded and updated when required. Access to the voice recordings can be controlled by using a PIN provided to all employees. It is advisable to keep the length of the recording to a minimum.

6.0 Human Resource Considerations

***Please note that this section provides a brief overview of some of the human resource issues you may have to consider when developing your BCP. Please refer to the specific provincial and federal legislation applicable to your jurisdiction and type of business, and consult the health and safety officer or human resource expert in your company when developing your BCP in order to ensure a clear understanding of the rights and obligations involved for both employer and employee. Federal and provincial government labour ministries and corresponding regulations are listed at the end of this section.**

Planning to face an influenza Pandemic in Canada must include preparing your workplace to deal with the spread of communicable diseases, and employees (including unions, if applicable) must be involved in such planning.

Any Risks to Employees and Others Must be Reasonable

Any employer or other person who controls the workplace has responsibility for the health and safety of employees and others there, and to ensure that employees' actions or inactions do not cause harm to others.

Independent contractors and volunteer workers have the right to withdraw their labour or services at any time, including when they feel the work environment presents an unsatisfactory level of risk.

Preparing for the Possibility of a Workplace or Business Closure

It is strongly recommended that employers discuss this possibility with staff, staff representatives, and contractors as part of their preparedness planning.

This discussion should include identifying whether services can be delivered outside of the workplace in a way that does not pose any health and safety risk, and implementing methods of communicating workplace closure to employees.

Statutory requirements relating to the employment relationship and any specific requirements of employment agreements will not be affected by workplace closure during a Pandemic.

In the event that the employer decides, or is required, to suspend business during a Pandemic, it is important that the employment conditions during the business suspension are discussed with employees. Those discussions may include, for example, the use of annual leave.

Contractors for services will be subject to their contracts, and contract law generally applies.

If a Workplace or Business Stays Open

If a workplace or business stays open during a Pandemic, the appropriate provincial and/or federal legislation (i.e. *Canada Labour Code* and Federal and Provincial *Occupational Health and Safety* regulations) will continue to apply according to the circumstances.

Appendix 1: Six Phase Response - Service Provider Categories

The Task Force developed a standard six phase framework of potential impacts on building services and operations at varying levels of absenteeism. The framework should be used as a guide when evaluating the impact on internal staff as well as service providers and contractors to the property.

PANDEMIC INFLUENZA EMERGENCY RESPONSE LEVELS – BUILDING SECURITY

PANDEMIC EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES SHOULD YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
<p>ERL - 1</p>	<p>Business as Usual</p> <p>'STATUS QUO'</p> <p>Full Staff Complement</p>	<p>No Declared Emergency</p> <p>Normal Operating Conditions</p>	<p>NONE</p>	<ul style="list-style-type: none"> • Assess building security requirements for ERL-1 to ERL-6 • Identify security staffing requirements for ERL-1 to ERL-6 • Retain additional security staff (as required) for ERL-1 level of service • Acquire additional security equipment to suit actual and perceived security needs • Develop prioritized ranking system for responding to security service calls. (e.g. 1 – Highest Priority, 2 – Moderate Priority and 3 – Lowest Priority) • Develop internal and external Communication Plans for ERL-1 to ERL-6 • Develop “Continuity of Operations” and “Business Recovery Plans” for ERL-1 to ERL-6 • Develop Post Orders or Standard Operating Procedures (SOPs) for ERL-1 to ERL-6 • Cross-train staff (as required) • Commence Table-Top-Exercises and Practice Drills for ERL-1 to ERL-6. Debrief and refine Continuity of Operations Plans, to suit • Communicate and disseminate information to tenants, contractors, customers and other affected stakeholders 	<ul style="list-style-type: none"> • Increased resiliency of operations • More clearly defined roles and responsibilities during emergencies • Heightened state of awareness and emergency preparedness • Improved levels of service, faster reaction and response times • Optimized allocation of resources by focusing security efforts (i.e. time, labour and expenditures) on prioritized security needs and staffing requirements • Improved levels of communication between all affected stakeholders

PANDEMIC EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES SHOULD YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL - 2	<p>Staff Absenteeism (1) 15%</p>	<p>Reduced staffing levels could give rise to service delays in some areas</p>	<p>No major interruption of existing building security services anticipated.</p>	<ul style="list-style-type: none"> • Re-assess and (if necessary) refine building security requirements to suit ERL-2 • Re-assess ERL-2 staffing requirements and (where possible) reassign & redeploy security staff focusing on the most important security tasks only • Retain additional security staff to suit ERL-2 security needs • Evaluate adequacy of existing security equipment and (if necessary) acquire and install supplementary equipment to suit • Review and (if necessary) revise ERL-2 SOPs or Post Orders • Cross train staff (as required) • Continue Table-Top exercises and Practice Drills • Continue communications with affected stakeholders 	<ul style="list-style-type: none"> • Response times for some (lower-priority) security service calls may increase • Otherwise, existing security services will not be affected

PANDEMIC EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES SHOULD YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
<p>ERL - 3</p>	<p>Staff Absenteeism (1) 30 %</p>	<p>Reduced staffing levels will give rise to service delays (e.g. longer response times) and certain non-essential security services should be suspended or deferred</p>	<p>No major interruption in critical security services anticipated</p>	<ul style="list-style-type: none"> • Re-assess and (if necessary) revise building security requirements for ERL-3 • Re-assess ERL-3 staffing requirements and (where possible) reassign & redeploy security staff focusing on the most important security tasks only • Retain additional security staff to suit ERL-3 security needs • Evaluate adequacy of existing security equipment and (if necessary) acquire and install supplementary equipment to suit • Review and (if necessary) revise ERL-3 SOPs or Post Orders • Cross train staff (as required) • Continue Table-Top exercises and Practice Drills • Continue communications with affected stakeholders 	<ul style="list-style-type: none"> • Response times for lower priority and moderate priority security service calls will increase • Response times for High - Priority 1 Security Service Calls to remain the same • Critical security services will be provided, non-essential security services will be suspended or temporarily deferred until things return to normal
<p>ERL - 4</p>	<p>Staff Absenteeism (1) 50 %</p>	<p>Reduced staffing levels will give rise to certain service delays (e.g. longer response times for low and moderate priority service calls) and certain non-essential security services should be eliminated</p>	<p>No major interruption in essential security services anticipated</p>	<ul style="list-style-type: none"> • Re-assess and (if necessary) revise building security requirements for ERL-4 • Re-assess ERL-4 staffing requirements and (where possible) reassign & redeploy security staff focusing on essential security tasks only • If necessary, retain additional security staff to suit ERL-4 security needs • Evaluate adequacy of existing security equipment and (if necessary) acquire and install supplementary equipment to suit • Review and (if necessary) revise ERL-4 SOPs or Post Orders • Cross train staff (as required) 	<ul style="list-style-type: none"> • Response times for lower priority and moderate priority security service calls will increase • Response times for High - Priority 1 Security Service Calls to remain the same • Critical security services will be provided, non-essential security services will be suspended or temporarily deferred until things return to normal

PANDEMIC EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES SHOULD YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
				<ul style="list-style-type: none"> Continue Table-Top exercises and Practice Drills Continue communications with affected stakeholders 	
ERL – 5	Voluntary Closure of Property for Health, Safety, Security or Other Reasons (Skeleton Staff)	Phased Transition to Full-Lock Down Over 5 – 10 Business Days - Transition to Skeleton Staff - Provide Essential Services Only	List Essential Services To Be Provided Here: <ul style="list-style-type: none"> Administration Fire and Life Safety Building Security Building Operations Other (Specify): 	<ul style="list-style-type: none"> Implement ERL-5 or ERL-6 Continuity of Operations Plan Review and (if necessary) revise ERL-5 or ERL-6 SOPs or Post Orders Reassign or redeploy security staff focusing on “essential” security tasks only If necessary, retain additional security staff to suit ERL-5 or ERL-6 security requirements Continue communications with affected stakeholders Implement Business Recovery Plans – Post-Pandemic phase 	<ul style="list-style-type: none"> Essential services only Controlled access to building Certain tenants, such as government services and medical practitioners, etc. may require pre-authorized or pre-approved access to their leased premises
ERL - 6	Forced Closure of Property Under “Orders” Issued by Public Health Officials (Skeleton Staff)	Full Lockdown Within 48 Hours - Skeleton Staff - Provide Essential Services Only	Who will provide these essential services? List their names here:		

Note 1 – It is assumed that the various levels of staff absenteeism would affect regular staff, contract staff, contractors and other external service providers

PANDEMIC INFLUENZA EMERGENCY RESPONSE LEVELS – LIFE SAFETY

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE?	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL - 1	Business as Usual 'STATUS QUO' Full Staff Complement	No Declared Emergency Normal Operating Conditions	N.A.	<ul style="list-style-type: none"> • Business Continuity Plans • Cross-Training Staff • Mutual Aid Work • Agreements with affiliated service providers 	<ul style="list-style-type: none"> • Increased Resiliency in Operations • More Clearly Defined Roles and Responsibilities • Heightened State of Emergency Preparedness • Better Service
ERL - 2	Staff Absenteeism (1) 15%	Potential Exists for Some Delays in Service	Routine maintenance	<ul style="list-style-type: none"> • Continued Cross-training of Staff • Management support if required to Reduce the Impacts of Service Delays 	<ul style="list-style-type: none"> • Minimal Impact to regular service
ERL - 3	Staff Absenteeism (1) 30 %	Anticipate Service Delays & Some Service Cutbacks	Routine maintenance Non-essential service calls may be cut	<ul style="list-style-type: none"> • Continued Cross-training of Staff • Management support if required to Reduce the Impacts of Service Delays • Suspend non-essential preventative maintenance as required 	<ul style="list-style-type: none"> • Regular service may be rescheduled due to staffing

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE?	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
<p>ERL - 4</p>	<p>Staff Absenteeism (1) 50 %</p>	<p>Expect Service Cutbacks</p>	<p>Routine maintenance Non-essential service calls may be cut</p>	<ul style="list-style-type: none"> • Continued Cross-training of Staff • Management support if required to Reduce the Impacts of Service Delays • Suspend non-essential preventative maintenance and non-essential service calls as required • Heightened alert with affiliated service providers • Communications with on site staff to help in solving problems over the phone 	<ul style="list-style-type: none"> • Regular service will most likely be cancelled with calls being prioritized by importance <p>(e.g. Healthcare, police, fire, phone companies (911) etc.....</p>
<p>ERL - 5</p>	<p>Voluntary Closure of Property for Health, Safety, Security or Other Reasons (Skeleton Staff)</p>	<p>Phased Transition to Full-Lock Down Over 5 – 10 Business Days - Transition to Skeleton Staff - Provide Essential Services Only</p>	<p>Emergency calls only</p>	<p>Communications with on site staff to help in solving problems over the phone</p>	<p>Regular annual maintenance calls cancelled with emergency calls being prioritized by importance</p>
<p>ERL - 6</p>	<p>Forced Closure of Property Under "Orders" Issued by Public Health Officials (Skeleton Staff)</p>	<p>Full Lockdown Within 48 Hours - Skeleton Staff - Provide Essential Services Only</p>			

Note 1 – Levels of staff absenteeism would affect regular staff, contract staff, contractors and other external service providers

Additional Life Safety Notes

1. The trades need to have current contact information at properties (both cell and e-mail). It is apparently rare that this occurs.
2. As there are typically employees on site who can be talked through some issues with respect to fire panels or generators, a list of these people needs to be available to the trades under emergency situations (specifically level 5 when a tech may not be able to come on site).
3. The trades need to be informed of the status of the Pandemic (or any other emergency situation) at a building when being contacted. Management needs to consider how this is to be done.

PANDEMIC INFLUENZA EMERGENCY RESPONSE LEVELS – PARKING

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL - 1	Business as Usual 'STATUS QUO' Full Staff Complement	No Declared Emergency Normal Operating Conditions	N.A.	<ul style="list-style-type: none"> • Business Continuity Plans • Cross-training of Staff • Mutual Aid Work Agreements with affiliated service providers • Parking companies are recommending automation to reduce the impact of absenteeism. This should be considered before a Pandemic becomes apparent. 	<ul style="list-style-type: none"> • Increased Resiliency in Operations • More Clearly Defined Roles and Responsibilities • Heightened State of Emergency Preparedness • Better Service
ERL - 2	Staff Absenteeism (1) 15%	Potential Exists for Some Delays in Service.	15% absenteeism is not expected to cause undue difficulties.	<ul style="list-style-type: none"> • Continued cross-training of staff • Management support if required to reduce the impact of service delays 	<ul style="list-style-type: none"> • Minimal impact to regular service

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
<p>ERL - 3</p>	<p>Staff Absenteeism (1) 30 %</p>	<p>Anticipate Service Delays & Some Service Cutbacks</p>	<ul style="list-style-type: none"> • Monthly parkers – <i>should</i> be unaffected (See note 1 below). • Transient parkers – likely to experience disruption, especially during morning and afternoon peaks. Morning peaks will be worse, as the parking companies can only assess what the staff situation is in the morning. 	<ul style="list-style-type: none"> • Management support if required to reduce the impacts of service delays • Suspend non-essential preventative maintenance as required • Parking companies will begin prioritizing; a management company with 5,000 stalls is likely to receive better service than one with 500 stalls; residential properties are likely to be the highest priority. 	<ul style="list-style-type: none"> • All parkers could experience difficulties, but transients to a greater degree. Mitigation not likely to improve the situation.

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
<p>ERL - 4</p>	<p>Staff Absenteeism (1) 50 %</p>	<p>Expect Service Cutbacks</p>	<ul style="list-style-type: none"> • Monthly parkers – <i>should</i> be unaffected. (See note 1 below). • Transient parkers – almost certain to experience significant problems. 	<ul style="list-style-type: none"> • Management support if required to reduce the impacts of service delays • Suspend non-essential preventative maintenance and non-essential service calls as required • Heightened alert with affiliated service providers • Communications with on site staff to help in solving problems over the phone • Entrance and exit gates will be open (or closed, depending on owner viewpoint) most of the time. • Prioritization continues to tighten, and will therefore impact service to an increasing number of facilities. 	<ul style="list-style-type: none"> • The public could benefit as parking could be free for transients; owners' would then forego revenue, depending on owner viewpoint. Some owners could close decide to close garages to transients.

PANDEMIC - EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL – 5	Voluntary Closure of Property for Health, Safety, Security or Other Reasons (Skeleton Staff)	Phased Transition to Full-Lock Down Over 5 – 10 Business Days - Transition to Skeleton Staff - Provide Essential Services Only	Emergency calls only	<ul style="list-style-type: none"> • Communications with on site staff to help in solving problems over the phone • Where automation is in place, monthly users should remain unaffected, expect where systems malfunction and cannot be repaired; likely no transient parking at all. 	
ERL - 6	Forced Closure of Property Under "Orders" Issued by Public Health Officials (Skeleton Staff)	Full Lockdown Within 48 Hours - Skeleton Staff - Provide Essential Services Only			

Note 1: Parking companies all use similar automation equipment, supplied by relatively few companies. The automation equipment suppliers have only a few service crews on the road. In the event of system malfunction, all property management companies will be relying on a reduced service component. The result is that service delays for monthly parkers could be experienced under these circumstances.

Additional Parking Notes:

Parking may seem an unlikely concern in a Pandemic, but do not fail to consider it in your plans. If any significant segment of the employee population take mass transit – and mass transit is curtailed during the event – where will they park if they drive to work? If employees park in a controlled-access garage, what happens if the garage closes? (If the garage management cannot field enough manpower to operate the garage – and their insurer will not allow them to throw open the gates – they may be forced to close)

If employees park in your own lot, and other public lots are closed due to quarantine or manpower shortage, are you prepared to deal with non-employees parking (or attempting to park) in your lot?

PANDEMIC INFLUENZA EMERGENCY RESPONSE LEVELS – JANITORIAL

PANDEMIC EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL - 1	Business as Usual 'STATUS QUO' Full Staff Complement	No Declared Emergency Normal Operating Conditions	None	<ul style="list-style-type: none"> • Business Continuity Plans • Cross-training of Staff • Mutual Aid Work Agreements with Neighbouring Properties Etc. Etc. 	<ul style="list-style-type: none"> • Increased Resiliency in Operations • More Clearly Defined Roles and Responsibilities • Heightened State of Emergency Preparedness • Better Service
ERL - 2	Staff Absenteeism (1) 15%	Potential Exists for Some Delays in Service	<ul style="list-style-type: none"> • Minimal changes to regular routines assuming status quo • Some deferral of removal of recycling materials (paper only) • Review of dusting and vacuuming frequencies • High Level cleaning i.e. floor stripping to be deferred 	<ul style="list-style-type: none"> • With Building Manager and Tenant input, identify expendable tasks or those that can be deferred or reduced 	<ul style="list-style-type: none"> • Periodic cleaning services will be reduced • Low impact tasks eg. paper recycling removal will be cutback
ERL - 3	Staff Absenteeism (1) 30 %	Anticipate Service Delays & Some Service Cutbacks	<ul style="list-style-type: none"> • Service provider requires right to alter frequency of cleaning schedules; Manager and Tenants have to alter expectations • Centralized pick-up of Waste/Recycling materials • Focus on public areas only • Reduce touch points on Tenant work areas • Reduce specialty services unless deemed critical 	<ul style="list-style-type: none"> • Building Manager to consider interchangeable security clearances so janitorial staff can be brought in from other local locations • Consider staggered shifts (longer hours, day shifts) • Pre-determine services that can be dropped in ERL-3 to focus on key areas 	<ul style="list-style-type: none"> • Centralizing areas for pick-up requires coordination with Tenants • Tenants more involved With cleaning activities of their own premises • Building flexibility required for security and access levels

PANDEMIC EMERGENCY RESPONSE LEVEL (ERL)	DESCRIPTION OF EMERGENCY RESPONSE LEVEL	ANTICIPATED CONDITIONS	WHAT SERVICE DELAYS OR SERVICE CUTS DO YOU ANTICIPATE? (List Them Below)	WHAT MITIGATION MEASURES WILL YOU IMPLEMENT TO MINIMIZE IMPACTS OF SERVICE DELAYS/SERVICE CUTS?	FOLLOWING MITIGATION - WHAT RESIDUAL IMPACTS DO YOU ANTICIPATE ON BASIC LEVELS OF SERVICE?
ERL - 4	Staff Absenteeism (1) 50 %	Expect Service Cutbacks	<ul style="list-style-type: none"> • Unoccupied area cleaning ceases (i.e. tenanted but no active staff) • Tenants required to provide self cleaning of all individual work areas (dusting, waste removal) • All non-essential cleaning services cease (Priority focus on public touch points, washrooms, waste removal) 	<ul style="list-style-type: none"> • All Supervisors and Management to be cross-trained • Additional phones and pagers provided to enhance communication and mobility of workforce • Internal transportation to be considered if public transportation unavailable • Staff from closed facilities (i.e. schools) to be re-deployed • Gloves and masks to be provided as preventative measure for remaining work staff 	<ul style="list-style-type: none"> • Only washrooms and high traffic public areas cleaned • Focus on critical services only within tenant space • Tenant “self-clean” requires product distribution • Manage inventory of products to ensure maximum use for duration – potential for shortages of certain items
ERL – 5	Voluntary Closure of Property for Health, Safety, Security or Other Reasons (Skeleton Staff)	Phased Transition to Full-Lock Down Over 5 – 10 Business Days - Transition to Skeleton Staff - Provide Essential Services Only	<ul style="list-style-type: none"> • All general cleaning activities cease with only critical services maintained with supervisory staff/ skeleton shifts 	<ul style="list-style-type: none"> • Maintain full inspection of facility to ensure basic services performed (waste removal, washroom cleaning) 	<ul style="list-style-type: none"> • Depending upon building activity levels in lockdown mode, minimal impact assumed as no occupancy in property
ERL - 6	Forced Closure of Property Under “Orders” Issued by Public Health Officials (Skeleton Staff)	Full Lockdown Within 48 Hours - Skeleton Staff - Provide Essential Services Only			

Note 1 – Levels of staff absenteeism would affect regular staff, contract staff, contractors and other external service providers

Appendix 2: Where Can I Find More Information?

The following websites provide further information about Pandemic influenza:

National Updates: Public Safety and Emergency Preparedness Canada

(<http://www.psepc-sppcc.gc.ca/>)

Phone: 1-800-484-8302

Email: PHAC_Web_Mail@phac-aspc.gc.ca

Health Canada – Latest Headlines, Advisories and Warnings

(<http://www.hc-sc.gc.ca/>)

Local Health Canada Phone Numbers:

http://www.hc-sc.gc.ca/home-accueil/contact/branch_sub_e.html

Travel Advisories: www.travelhealth.gc.ca

International

- ***World Health Organization***

Epidemic and Pandemic Alert and Response (EPR)

(http://www.who.int/csr/resources/publications/influenza/WHO_CDS_CSR_GIP_2005_5/en/index.html)

- ***U.S. Centre for Disease Control (CDC)***

Pandemic Influenza

(<http://www.cdc.gov/flu/pandemic/>)

- ***PandemicFlu.gov*** – The official U.S. government Web site for information on pandemic flu and avian influenza – Includes a Business Pandemic Influenza Planning Checklist.

(<http://www.pandemicflu.gov/plan/tab4.html>)

- ***New Zealand Ministry of Economic Development***

Influenza Pandemic Planning: Business Continuity Planning Guide

(http://www.med.govt.nz/irdev/econ_dev/pandemic-planning/business-continuity/planning-guide/index.html)

Federal

- ***Public Health Agency of Canada***

Canadian Pandemic Influenza Plan

(<http://www.phac-aspc.gc.ca/cpip-pclcpi/index.html>)

- ***FluWatch*** Reports: (<http://www.phac-aspc.gc.ca/fluwatch/index.html>)

- Immunization and Vaccines

(<http://www.phac-aspc.gc.ca/im/index.html>)

- **Public Safety and Emergency Preparedness Canada**
A Guide to Business Continuity Planning
(<http://www.psepc-sppcc.gc.ca/prg/em/gds/bcp-en.asp>)
- **Health Canada**
Global Pandemic Influenza Readiness
(http://www.hc-sc.gc.ca/ahc-asc/intactiv/pandem-flu/index_e.html)
- **Government of Canada – Canada Health Portal**
NEWS ROOM
(http://chp-pcs.gc.ca/CHP/index_e.jsp?pageid=4060)
- **SafeCanada.ca – Pandemic Preparedness**
(<http://www.safecanada.ca/>)
- **Canadian Centre for Occupational Health and Safety**
(<http://www.ccohs.ca/>)
- **Canadian Food Inspection Agency**
Avian Influenza - Latest Information (includes email updates)
(www.inspection.gc.ca/english/anima/heasan/disemala/avflu/situation_e.shtml)
- **Canadian Centre For Emergency Preparedness**
(<http://www.ccep.ca>)

Provincial and Territorial

Provincial and Territorial Emergency Management Organizations (EMOs):

Alberta

Emergency Management Alberta Tel: 780-422-9000 Fax: 780-422-1549 Web site:
<http://www.gov.ab.ca/ma/ema>

British Columbia

Provincial Emergency Program (PEP) Phone: (250) 952-4913 Fax: (250) 952-4888
Web site: <http://www.pep.bc.ca>

Manitoba

Emergency Measures Organization Phone: (204) 945-4772 Toll-free: 1 (888) 267-8298 Fax: (204) 945-4620 Web site: <http://www.manitobaemo.ca>

New Brunswick

Emergency Measures Organization Phone: (506) 453-2133 Toll-free: 1 (800) 561-4034 Fax: (506) 453-5513 Web site: <http://www.gnb.ca/cnb/emo-omu/index-e.asp>

Newfoundland & Labrador

Emergency Measures Division Phone: (709) 729-3703 Fax: (709) 729-3857
Web site: <http://www.gov.nf.ca/mpa/emo.html>

Northwest Territories

Emergency Measures Organization

Phone: (867) 873-7785 Fax: (867) 873-8193

Web site: http://www.maca.gov.nt.ca/safety/emergency_organization.html**Nova Scotia**

Emergency Measures Organization

Phone: (902) 424-5620 Fax: (902) 424-5376

Web site: <http://www.gov.ns.ca/emo/>**Nunavut**

Nunavut Emergency Management

Phone: (867) 975-5300 Fax: (867) 979-4221

Ontario

Ontario Emergency Management Ontario Ministry of Community Safety and Correctional Services
77 Wellesley St. West, Box 222 Toronto, ON M7A 1N3 Telephone: (416) 314-3723 Fax: (416) 314-3758

Web site: http://www.mpss.jus.gov.on.ca/english/pub_security/emo/about_emo.html**Prince Edward Island**

Emergency Measures Organization

Phone: (902) 368-4000 Fax: (902) 368-5544

Web site: <http://www.gov.pe.ca/caag/emo-info/index.php3>**Québec**

Direction générale de la sécurité civile et de la sécurité incendie

Phone: (418) 644-6826 Fax: (418) 643-3194 Or one of the regional offices: Gatineau: (819) 772-3737

Montréal: (514) 873-1300 Rimouski: (418) 727-3589 Trois-Rivières: (819) 371-6703

or your municipality Web site: http://www.msp.gouv.qc.ca/index_en.asp**Saskatchewan**

Emergency Management Organization

Phone: (306) 787-9563 Fax: (306) 787-1694

Web site: <http://www.cps.gov.sk.ca/Safety/emergency/default.shtml>**Yukon**

Emergency Measures Organization

Phone: (867) 667-5220 Toll free (In Yukon): 1 (800) 661-0408 Fax: (867) 393-6266

Web site: <http://www.gov.yk.ca/depts/community/emo/>

Other Provincial and Territorial Contacts

Alberta

- ***Alberta Health and Wellness***
Alberta's Plan for Pandemic Influenza
(<http://www.health.gov.ab.ca/influenza/PandemicPlan.html>)

British Columbia

- ***British Columbia Ministry of Health***
(<http://www.healthservices.gov.bc.ca/pho/pandemic.html>)
- ***BC Centre for Disease Control***
Pandemic Influenza Preparedness Plan
(<http://www.bccdc.org/content.php?item=150>)

Manitoba

- ***Manitoba Health***
Office of the Chief Medical Officer of Health
Preparing for Pandemic Influenza in Manitoba
(<http://www.gov.mb.ca/health/publichealth/cmoh/pandemic.html>)

New Brunswick

- ***New Brunswick Department of Health and Wellness***
New Brunswick Pandemic Influenza Plan
(<http://www.gnb.ca/0053/influenza/index-e.asp>)

Newfoundland & Labrador

- ***Newfoundland & Labrador Department of Health and Community Services***
(<http://www.health.gov.nl.ca/health/>)

Northwest Territories

- ***Government of the Northwest Territories Health and Social Programs***
(<http://www.gov.nt.ca/agendas/health/index.html>)

Nova Scotia

- ***Nova Scotia Department of Health***
(<http://www.gov.ns.ca/govt/pandemic/>)

Nunavut

- ***Nunavut Department of Health and Social Services***
(<http://www.gov.nu.ca/hsssite/hssmain.shtml>)

Ontario

- **Ontario Ministry of Health and Long-Term Care**
Ontario Health Plan for an Influenza Pandemic
(http://www.health.gov.on.ca/english/providers/program/emu/pan_flu/pan_flu_plan.html)
- **HealthyOntario.com**
(http://www.healthyontario.com/Health_Feature/Avian_Flu_Facts.htm)
- **Workplace Insurance Safety Board**
(<http://www.wsib.on.ca>)

Prince Edward Island

- **Prince Edward Island Department of Health and Social Services**
(<http://www.gov.pe.ca/health/>)

Quebec

- **Santé et Services sociaux Québec**
(<http://www.msss.gouv.qc.ca/sujets/santepub/pandemie/index.php?pandemic>)

Saskatchewan

- **Saskatchewan Health**
(<http://www.health.gov.sk.ca/>)
- Influenza Avian Flu Pandemic Fact Sheet
(http://www.health.gov.sk.ca/rr_flu.pdf)

Yukon

- **Yukon Health and Social Services**
(<http://www.hss.gov.yk.ca/>)

BOMA Canada's Pandemic Planning Site for Canadian Commercial Real Estate: **www.bomacanada-pandemic.ca**, provides these and other links to such resources as federal and provincial health and emergency information sites, industry information, and other national and international pandemic flu resources, updated on a regular basis.

Appendix 3: WHO Pandemic Phases and Corresponding Management Strategies

Table 1 World Health Organization (WHO) Pandemic Phases and Corresponding Management Strategies

Influenza Pandemic – Phases and Strategic Actions				
	Phases	Transmission	Objectives	Strategic actions
Inter-pandemic period (planning and preparedness)	1	Influenza virus subtype in animals only (risk to humans low)	Strengthen pandemic preparedness at all levels	<ul style="list-style-type: none"> • Prepare Pandemic Preparedness Plan • Establish surveillance in animal • Establish human influenza surveillance • Establish collaboration between human and animal sectors
	2	Influenza virus subtype in animals only (risk to humans substantial)	Minimize the risk of transmission to humans; Detect and report rapidly, if it occurs	<ul style="list-style-type: none"> • Enhance animal surveillance and aggressive response to animal outbreaks • Strengthen human surveillance • Stockpile antiviral, PPE etc • Strengthen collaboration between different sectors and WHO/OIE/FAO • Develop and implement risk communication strategy • Prepare health and essential service contingency plan
Pandemic Alert (emergency and pre-emptive response)	3	Human infection (transmission in close contacts only)	Ensure rapid characterization of new virus Detect, notify and respond to additional cases	<ul style="list-style-type: none"> • Enhance animal surveillance and aggressive animal outbreak containment • Enhance human surveillance and aggressive outbreak management • Early strategic use of antivirals • Social distancing • Implement risk communication strategy • Issue alert for quick implementation of health and essential service contingency plan
	4	Limited human-to-human spread; small clusters <25 cases lasting <2 weeks	Contain the virus or delay its spread	
	5	Localized human to human spread; Larger clusters 25-50 cases over 2-4 weeks	Maximum efforts to contain or delay the spread	
Pandemic (minimizing impact)	6	Widespread in general population	Minimize the impact of the pandemic	<ul style="list-style-type: none"> • Implement health and essential services contingency plan • Risk communication; • Treat cases and contacts with antivirals, if available, • Social distancing: close schools, ban gatherings

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