



alberta dental
association & college

Guide for Pandemic Influenza Plan

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EXECUTIVE SUMMARY

The Alberta Dental Association and College Pandemic Influenza Plan has been produced to assist Alberta dentists deal with the possible ramifications of a pandemic influenza outbreak. This document provides Alberta dentists with guidance on discharging responsibilities as care providers, employers and responding to potential business disruptions that may result from a pandemic influenza outbreak.

This Plan outlines responsibilities as health care providers to the healthcare system during a pandemic crisis, impacts on staffing, business practices and on the healthcare system itself, along with the Alberta Dental Association and College's role and responsibilities to member dentists.

This Plan provides specific guidance and counsel's careful attention to potential exposure to infection-carrying respiratory droplets from patients. Dentists as care providers and as employers have a responsibility to assess infection exposure risk, and should be prepared with infection prevention and control procedures and equipment such as surgical masks and properly fitted N95 respirators when providing emergency dental care to high-risk patients.

This Plan provides guidance on how to respond to potentially significant staffing disruptions from a pandemic influenza, including contingency planning and, in Appendix "B", workplace legal standards that may be relevant.

Each dental office should be familiar with each section of this Plan. It is intended to be a dynamic document and will be updated or supplemented as new information becomes available. In a pandemic influenza crisis it is inevitable that circumstances, and advice on how to respond, will change rapidly so dentists should be checking regularly the Alberta Dental Association and College website www.abdentists.com for updates.

INTRODUCTION

The Alberta Dental Association and College (ADA&C) provides leadership to the dental profession on professional regulations and member services; and provides the public with information and services; to ensure that Albertans receive safe, appropriate, ethical and quality dental care as an integral part of general health.

The ADA&C is mandated to govern Alberta dentists through the *Health Professions Act*. Alberta dentists practice in private dental offices, dental surgical facilities, non-hospital surgical facilities, public health settings, hospitals, continuing care facilities, mobile clinics and educational venues.

Under the *Dentists Profession Regulation*, dentists are authorized to carry out most of the restricted activities in Schedule One of the *Government Services Act*. In addition to the *Health Professions Act and Regulation*, the regulation of Alberta dentists is significantly influenced by the *Health Information Act*, *Personal Information Protection Act*, the *Health Care Protection Act*, the *Public Health Act*, and the *Alberta Occupational Health and Safety Code*.

This Alberta Dental Association and College Pandemic Influenza Plan incorporates key principles and practices of similar plans published by the Canadian Dental Association, Alberta Health, Alberta Health Services and other health care organizations and agencies.

It is intended to be a dynamic document and so it will be updated or supplemented as new information becomes available. Please check in regularly at the ADA&C website www.abdentists.com for updates.

Legislative Framework

The Alberta Dental Association and College recognizes that the Emergency Management Act and the *Public Health Act* take precedence over the *Health Professions Act* in Alberta during a public health emergency such as a pandemic influenza. Under the Emergency Management Act the Minister has the power to authorize the conscription of persons needed to meet an emergency.

Under the *Public Health Act*, when a public health emergency is declared the Minister has the power to compel health professionals such as dentists to provide, maintain and coordinate the delivery of health services.

In addition, under the *Public Health Act*, in public health emergencies like a pandemic influenza, the Minister and the Chief Medical Officer of Health have significant power to regulate the scope, role and location of services delivered by dentists including restricted activities under the *Health Professions Act*.

The Alberta Dental Association and College is committed to working collaboratively during a pandemic influenza outbreak with Alberta Health, Alberta Health Services, municipalities, and other health profession colleges under the direction of the Chief Medical Officer of Health.

Ethical Considerations

Health care workers have an ethical duty to provide care and respond to suffering. During a pandemic influenza outbreak, demands for care may create extreme challenges related to resource allocation and workplace safety. Health care workers may have to weigh their duty to provide care against competing personal obligations.

The Alberta Dental Association and College will guide and support dentists through such moral and ethical dilemmas. It will also strongly advocate for and support a system of public communication that is open, transparent, privacy sensitive and honest with Albertans about the public health responsibility during a pandemic influenza outbreak.

PLANNING OVERVIEW

Assumptions

1. A pandemic influenza is inevitable, and not predictable with respect to timing or severity.
2. The province of Alberta is responsible for the coordination and synchronization of pandemic influenza contingency plans between four levels of health jurisdictions; globally, nationally, provincially, and locally.
3. Time intervals with respect to first peak of illness and first peak of mortality may be shortened based on volume and speed of air travel and if pandemic arrives close to normal influenza season.
4. Vaccines and anti-viral medications will be provided according to public health plans through an open and transparent system.
5. It is possible to slow the spread of the disease, decrease the illness and death rates, and buy valuable time through;
 - good surveillance;
 - administration of vaccines and anti-viral medication where available;
 - education about other containment strategies such as hand washing and the use of protective equipment and clothing; and
 - coordinated health service planning.
6. Alberta dentists should be able to look to the Alberta Dental Association and College for instructions and information for responding to a pandemic influenza.

Objectives

7. Protect and support Alberta dentists and allied health workforce during a pandemic influenza.
8. Contribute to effective pandemic influenza response by public health authorities.
9. Guide Alberta dentists through the response and recovery phase of a pandemic influenza.
10. Contribute to the health protection of Albertans during a pandemic influenza.
11. Collaborate with Alberta Health and other health professions colleges in adaptive health workforce responses during a pandemic influenza.

12. Minimize business interruption for the Alberta Dental Association and College and dentists during the response and recovery phase of a pandemic influenza.
13. Maximize business continuity for the Alberta Dental Association and College and dentists in the restoration phase after a pandemic influenza.

Priorities for Alberta Dental Association and College

- Protect and support dentists as health care practitioners.
- Information system for communication with dentists.
- Pandemic link between dental offices and medical laboratories for patient surveillance and diagnostic purposes.
- Process for dealing with pandemic supply shortages for dentists.
- Consult with Alberta Health and inform dentists of any potential role of dentists and/or dental offices in surveillance and primary health assessment and advise members.
- Consult with Alberta Health and inform dentists of potential requirement of dentists to carry out activities outside normal scope in health workforce plan for general population.
- Inform dentists regarding liability insurance and extended indemnity requirements if necessary, for pandemic purposes.
- Plan for continuation of essential services.
- Plan for delay or discontinuation of non-essential services.
- Plan for re-deployment of internal resources and services at the Alberta Dental Association and College.
- Priority access and distribution of vaccines and anti-viral medication to dentists for administration to dental health care personnel or the public if this is ever required.
- Revise and update this Plan as required.

CARING FOR PATIENTS

Influenza is generally a respiratory illness characterized by rapid onset of a range of symptoms, including fever, headache, cough, sore throat and aching muscles and joints. The incubation period for influenza usually ranges from 1 to 3 days. Person-to-person transmission of influenza virus occurs through droplets from the respiratory tract that are spread by direct contact, through coughing or sneezing, or by hands (or other surfaces) contaminated with respiratory secretions. The importance of the airborne route in transmission is unknown. Influenza is highly contagious and can spread quickly in settings where groups of people are gathered together. Although information is evolving, the period of communicability for influenza is believed to be during the 24 hours before the onset of symptoms and during the most symptomatic period, usually 7 days from clinical onset. While viral shedding occurs in the 24 hours prior to symptom onset, transmission of the virus to another person is much more efficient once symptoms are present. In adults, the amount of viral particles shed (e.g. while sneezing or coughing) is related to the severity of illness and temperature elevation. For those receiving antiviral therapy, the duration of viral shedding is likely to be shorter.

Survival of the influenza virus outside the body varies with temperature and humidity. It generally survives 24 to 48 hours on hard, non-porous surfaces; 8 to 12 hours on cloth, paper and tissue; and 5 minutes on hands. Survival of the virus is enhanced under conditions of low humidity and in cold temperatures.

Prevention of Influenza Spread

During a pandemic influenza, vigilance regarding influenza-like illness (ILI) must be enhanced. Staff and patients should be educated about symptoms, transmission and prevention; individual actions are the key to spreading the transmission of a pandemic influenza.

Influenza Symptoms to Watch For

Symptoms of influenza include acute onset of respiratory illness with fever and cough and one or more of the following: sore throat, arthralgia, myalgia, or prostration (young children and elderly may not present with fever).

Pre-Appointment Screening

When patients are contacted by telephone to book or confirm appointments, they should be educated about influenza symptoms and encouraged to reschedule appointments if they have those symptoms.

Entrance/Waiting Room Practices

Hand sanitizers should be readily available at the entrance to the practice, in the waiting room and at the front desk. All patients should be asked, and/or notified by posters prominently displayed, to wash hands or use hand sanitizer on entering and before leaving the office.

Contact surfaces in the practice that have the potential to harbour infection should be limited as much as possible, for example, children's toys and magazines.

Initial Triage by the Office Staff

Patients and accompanying persons should be asked whether the patient has influenza-like illness symptoms. Individuals who report these symptoms should immediately be instructed to:

- Use 70-90% alcohol-based hand gel sanitizer
- Don a surgical mask, ensuring that the nose and mouth are covered
- Be seated at least two meters (6 feet) away from others
- Patient should be taken into an operatory, with door kept closed as soon as possible, for evaluation of influenza symptoms by the dentist

Initial Triage by the Dentist

An assessment of the influenza symptoms should be made by the dentist. Patients with influenza symptoms should be asked to delay all dental procedures, except for emergency dental treatment, until their illness is resolved and they are symptom free.

Infection Control During Patient Care

Strict adherence to hand hygiene – washing with soap and water or use of a 70-90% alcohol-based gel hand sanitizer – is the cornerstone of infection prevention. Routine practices must be used for all patients. Additional precautions including full personal protection (eye protection, mask, single use gown, gloves) should be used for patients with influenza-like illness symptoms.

Patients without Influenza Symptoms

Routine dental treatment on patients without influenza symptoms should be provided.

Patients with Influenza Symptoms

- Relatively few people with influenza symptoms will need emergency dental care.
- Whenever possible, schedule these patients at the end of the day or at a time when social contact with others can be minimized.
- Limit the treatment provided to the minimum necessary to address the patient's dental care emergency.
- Only staff essential to the provision of the care should be present in the operatory.

Routine infection control practices, including the use of personal protective equipment (PPE), should be used to assess whether the dental condition can be palliated with measures such as analgesia and/or antibiotics, or whether emergency dental care is necessary.

- Personal protective equipment should consist of a mask, eye protection, single use gown and non sterile gloves.
- Single use gowns should cover unprotected skin and protect soiling of clothing/regular clinic wear. They may be may be disposable or non disposable, but should only be used within the treatment room and for a single patient.
- Special handling of linen or waste contaminated with secretions from patients suspected or confirmed to have influenza is not required.
- Routine infection control practices for disinfection of counter tops and other operatory surfaces and for instrument reprocessing should be followed.
- Patient should wear a surgical or procedure mask at all times in the dental office even when not actively receiving treatment.

Respiratory Protective Equipment such as approved and properly fit-tested N95 masks or equivalent is recommended by the Government of Alberta *Best Practice Guidelines for Workplace Health and Safety During Pandemic Influenza* when providing emergency care to pandemic influenza patients

for any aerosol producing procedures (e.g. using an air/water syringe, suctioning or using dental hand pieces), where social distancing of at least 2 meters is not possible and where the patient is unable or unwilling to comply with respiratory hygiene practices. The Alberta Dental Association and College continues to monitor the utilization of N95 masks and will provide specific advice where appropriate. If not fitted and used properly, N95 masks are less effective than standard surgical masks. N95 masks will not fit properly over facial hair. Training and assistance in providing proper fitting is part of the responsibility of dentists who undertake emergency dental care.

Patient Access to Dental Services when Regular Dentist is Incapacitated

Arrangements should be in place to ensure that patients without influenza symptoms requiring emergency dental care can access appropriate care if their usual dental practice is not able to provide care owing to pandemic influenza-related illness or absence.

Individuals with pandemic influenza must be able to access emergency dental treatment, and should be referred to another dental office, clinic or hospital that have dentists and staff with approved, properly fit-tested Respiratory Protective Equipment such as N95 masks or equivalent.

In considering whether to treat patients with influenza symptoms requiring emergency dental care, it is expected that members of the dental team will put patient interests first and act to protect them.

Dentists have an ethical obligation to ensure that their patients are cared for during a pandemic and should work collaboratively in their local area to ensure access to care for patients and to support their colleagues during this stressful time. Referral to a hospital dental department may not be feasible in most regions, since hospital dental departments will face challenges of increased emergency caseload, dental staff illness and absence. Furthermore, as happened during the 2003 Severe Acute Respiratory Syndrome crisis, all ambulatory care areas within a hospital may be required to close, to improve the overall surge capacity response of the organization.

The Alberta Dental Association and College is maintaining a list of dental facilities and offices where dentists are equipped to provide emergency dental care for patients with influenza symptoms. Please contact the ADA&C at 780-432-1012 or 1-800-843-3848 for any assistance in seeking treatment for a patient with influenza symptoms.

Staff Education

Educational information for staff should include:

- What a pandemic is and that pandemic influenza is a novel strain of influenza
- The difference between an upper respiratory infection and influenza
- The mode of influenza transmission and the importance of:
 - Routine practices for all patients
 - Respiratory etiquette
 - Strict adherence to hand washing/hand antisepsis

- Frequent disinfection of common surfaces, such as computer keyboards, telephones etc.
- The practice-specific influenza plan, including:
 - Front desk procedures
 - Infection control for non-infected/asymptomatic patients
 - Infection control for essential staff providing emergency dental care to infected/symptomatic patients policies regarding absence from work and the importance of staying home when ill
 - The communication protocol for the office should practice interruption occur

BUSINESS IMPACT AND CONTINUITY

The primary impact on business, including small businesses such as dental practices, will be on staffing and human resources. The Association of Canadian Manufacturers and Exporters (CME) has projected that 15-35% of the workforce may be ill at any one time, with the number increasing to 50% absenteeism during the peak two week period in each pandemic wave. All businesses will be affected, and unlike natural disasters or other surge events, a pandemic will affect all sectors across the country and around the world, restricting the ability to move operations to another area or seek outside assistance. Furthermore, a pandemic will not be a short, solitary episode, but will present in waves, limiting the ability for a recovery phase to begin for some time. The provision of key infrastructure services such as telecommunications, energy supplies, financial services and transportation may be disrupted.

Vaccination of Employees

As employers, dentists have legal obligations to their employees (see appendix B for Alberta minimum employment standards). Employers are entitled to make reasonable workplace rules. Currently employers cannot require employees to submit to seasonal influenza vaccinations. Dentists who are employers should assume that this will also be the case for pandemic influenza vaccinations, subject to explicit direction from Alberta public health officials.

Staff Absences

It is anticipated that 25-50% of the dental and support staff could be absent from work for up to two weeks at the height of a severe pandemic wave, with lower levels of absence for a few weeks either side of the peak. Reasons for staff absence may include:

- Personal illness
- Caring for dependents who are sick
- Child care related to school and daycare closures
- Bereavement
- Transportation disruptions

To minimize the spread of disease, there should be no pressure or incentive for ill staff to return to work prematurely. If an employee is suspected of having pandemic influenza or has influenza-like illness symptoms and there is a risk of exposure to patients or staff, it is reasonable for the dentist to ask the employee not to work. Whether an employee is paid for time off of work will depend on the terms of their employment. Employees must not be allowed to return to work before it is safe for them to do so even in the face of personal financial need. The duty of care as an employer includes consideration of risk and safety for employees, as well as patients.

Many staff will experience anxiety, fear and some may experience bereavement and grief. Increased fatigue, conflict with coworkers, worry about the well-being of their families and personal financial concerns may be sources of stress and may affect work performance. Staff who are ill may feel abandoned and isolated, and be worried about future employment.

During the pandemic, more lenient office policies in terms of sick time and personal leave should be implemented.

Frequent and open communication with all staff (especially those who are away from work) to impart information and to hear their concerns, is one of the most important things an employer can do.

Dentists should maintain a current list of staff contact numbers and home email addresses.

Delegate a staff member and one backup person to take home the next day's patient schedule with contact numbers each evening, in case of multiple cancellations or closure of the practice the following day.

DISRUPTION OF THE SUPPLY CHAIN

(Source: Canadian Dental Association)

The demand for medical/surgical supplies and medications will increase substantially around the world. Local suppliers of dental products and equipment, dental labs and repair personnel may experience difficulties due to their own staff absences and transportation difficulties. Most dental supplies and medications are produced outside of Canada, and there may be barriers, which include medication embargoes, cross border issues and transportation disruption.

Critical clinical and office supplies, including those needed for infection prevention and control and emergency dental procedures, should be stocked and rotated, according to best estimates of need and shelf life/expiry dates.

Equipment should be well maintained and undergo preventive maintenance procedures.

ECONOMIC DISRUPTION OF DENTAL PRACTICE

There will be significant reduction in gross revenues of the practice, due to staff absences and patient cancellations. Accounts receivable may grow significantly during and immediately after the pandemic, as patients struggle with personal and financial issues and discretionary spending may be lower for some time. Fixed costs, including staff salaries and wages, rent, leasing, payments to suppliers, loan repayments and taxes will remain static. Supply shortages may lead to short term price increases. Credit may be in short supply as all business sectors are affected. Employee absenteeism will affect all sectors including banks, and it may be difficult for employees to readily access bank accounts. Payment in cash during the emergency, if feasible, may be very helpful for your staff.

Pandemic Outbreak insurance, to offset income loss during a pandemic, is offered as part of the TripleGuard™ insurance package by the Canadian Dentists' Insurance Program, administered by CDSPI. The plan automatically provides up \$1,000 per day after the first 24 hours up to a \$20,000 aggregate annual limit. Increased dollar coverage is available for additional premiums.

Pandemic outbreak insurance provides coverage if “you are prohibited from entering your office by an order from a civil authority or public health official.” – TripleGuard™ Insurance Plan brochure.

PROFESSIONAL RESPONSIBILITY TO THE PUBLIC

As health care professionals, dentists must act ethically if an influenza pandemic outbreak occurs. It is the professional duty of all dentists to put patients' interest first, while taking into account your own personal health and safety and that of your staff. The healthcare system may be overwhelmed with a shortage of trained medical staff due to illness. There will be a need for people with health care training to deal with increased demand in the health system. In addition, volunteers will be needed to assist in many roles. Dentists may be called upon to provide care and assistance in a number of domains.

If you are asked to do something outside your normal area of practice, be sure that you are competent for the task, working within current regulations with respect to regulated scope of practice. Also, be sure to check that you are covered by indemnity.

Remember that scope of practice alone does not qualify a dentist to perform certain care activities. Equally important is demonstrated competency. Competencies are defined as the skill, knowledge and judgment required to deliver a particular health service. A competency-based approach in pandemic planning identifies the competencies necessary and the competencies available to deliver the services that people need during an influenza pandemic.

Alberta Health is not planning on utilizing dentists for vaccine injections.

Dentists, who are asked to work outside their usual area of practice, must obtain approval from the Alberta Dental Association and College to:

- Ensure that the activities are within the legislation of the Alberta Health Professions Act; and
- That they are competent to perform those activities by virtue of appropriate training and recent experience.

Even when influenza care competencies are not restricted activities, they may require a certain level of education, training and judgment to be done effectively (from the Canadian Dental Association).

ROLE OF THE ALBERTA DENTAL ASSOCIATION AND COLLEGE

Leadership

The Chief Executive Officer will be the Alberta Dental Association and College Pandemic Chief / Commander and be responsible for ADA&C communications with the assistance of the ADA&C Director of Marketing and Communications. The Pandemic Chief/Commander and Director of Marketing and Communications will have designated individuals to assist during any illness.

Administration and Finance

Most administrative services carried out at the ADA&C office are created or available on computers and communicated electronically, by telephone, facsimile, or in writing. Many of these services could be performed from an alternate location with the proper equipment.

Financial services can all be processed online. Payment for specific member fees or service costs may be temporarily waived or delayed where electronic payment is not possible.

All payroll services can be processed online, including outsourced services.

Quarantined staff, if well enough, could work from home. Staff on extended sick leave will be replaced through role adjustments with those still working, or if necessary, replaced by those from a temporary placement service. Current job descriptions will be adjusted to reasonably accommodate essential service priorities and identify internal processes that will be temporarily discontinued or delayed.

Human Resource Policy Considerations

The Alberta Dental Association and College will follow the quarantine and social isolation guidelines recommended by the Chief Medical Officer of Health, Alberta Health and Alberta Health Services. All relevant health and safety regulations will be followed. Staff will be paid sick leave

while off due to pandemic associated illness within the framework adapted in keeping with local and regional changing norms for pandemic purposes. When applicable, the usual and customary process for WCB or LTD claims will be expedited.

The Alberta Dental Association and College will pay for the vaccination of Alberta Dental Association and College office staff and encourage staff compliance with anti-viral treatment for those who become ill.

Staff will report to work at a prescribed time daily if working from home. Timing and delivery of work will be agreed with usual supervision through email or telephone. The Alberta Dental Association and College will ensure return to work is safe and appropriate for employees if accommodation in the workplace is required.

Salary payment will continue on usual schedule through direct bank-deposit online.

Internal office processes and communications for human resources, payroll, collections and payables will be managed by the Finance Manager.

INTERNAL COMMUNICATION SERVICES

Communication with members will be the key essential office service during a pandemic influenza. The Primary method of communication would be electronically by e-mail.

Education and support services to members will provide education, instruction about containment strategies, fear reduction supportive messages, specific instructions for dental offices and personnel management, information on the involvement of dentists in essential pandemic services (e.g. vaccination), and advice about office adjustments. Communication tools such as fact sheets and FAQs would be developed and made available to dentists.

Telephone consultation with Alberta Dental Association and College pandemic influenza experts and officers will be made, if necessary.

The Alberta Dental Association and College will provide information updates on the members' website, www.abdentists.com, and send e-advisories to dentists when needed during a pandemic influenza crisis.

EXTERNAL SERVICES ADJUSTMENTS

Essential Services (to continue during the pandemic)

- Registration of new members
- Practice permit renewal
- Ethical guidance
- Guidance re essential, emergency, elective, non-essential services
- Discipline for unsafe practice
- Reportable Incidents investigations in accredited dental surgical facilities
- Reportable Incidents investigations for sedation cases
- Unforeseen Events Reporting for dental practices

Enhanced Services (minimum of four staff are required in this area)

- Registration may be fast-tracked for new students after examinations, transfers from other provinces; lapsed/retired professionals, as deemed appropriate by regulatory advisor
- Expedited email and fax communication capacity
- Policy development re surveillance and vaccine matters
- Consultation re adjustments to scope of practice or redeployment of dentists
- Decisions may need to be made on the prioritization of dental services (e.g. emergency or essential services only)

Delayed Services/Activities

- Continuing education monitoring
- Practice consultations/visits
- Component Dental Society meetings
- Annual General Meeting and congress

Adaptive Administrative Practices for External Services

- Allowance for fee payment delay, but not waiver
- Photocopies and faxes may suffice in lieu of some originals, as per advice of regulatory expert adviser

EXTERNAL COMMUNICATION SERVICES

Links to applicable experts and expert committees/panels

Advisory links to Alberta Health, Alberta Health Services, College of Physicians and Surgeons of Alberta, laboratories, Faculty of Medicine and Dentistry

Media pandemic communications management

APPENDIX A: WHAT PANDEMIC INFLUENZA MEANS

(Source: Alberta Health)

Understanding Influenza

Human influenza is an infection of the lungs and airways caused by a virus. Symptoms can include fever, headache, muscle pain, runny nose, sore throat, extreme tiredness and cough. Influenza is spread easily as the virus passes from person-to-person by droplets when an infected person coughs, sneezes or talks. The virus can also spread when a person touches tiny droplets from coughs or sneezes on another person or an object, and then touches their own mouth or nose before washing their hands. Droplets can enter the body through the eyes, nose or mouth.

Potential Effect of Pandemic Influenza

To determine the potential effects of a pandemic in Alberta and to be prepared, key assumptions have been developed. The assumptions are not predictions for the next pandemic, but serve as a way of facilitating pandemic planning and preparedness.

Impact on Health Care

A pandemic will place great pressure on Alberta's healthcare system. For a pandemic of moderate severity and without any intervention (for example, vaccine and antiviral medications), of those who are clinically ill:

- 50 per cent of people will seek outpatient care (four times a normal influenza year)
- One per cent of people will be hospitalized and recover (four times a normal influenza year); and
- 0.4 per cent of people will die - of these the majority will have required hospitalization, (eight times a normal influenza year)

Impact on Businesses

A pandemic will also affect businesses. Staff will be sick or may need to stay home to care for family members who are ill. Depending on the nature of services or products offered by the business, the demands for services and goods may increase dramatically, placing additional pressure on businesses already coping with increased absenteeism due to the pandemic. Alternatively, a business could suffer a negative economic impact due to the reduced number of customers. Businesses should consider the impact of a pandemic on their staff and customers and make appropriate plans to address the pandemic and its impacts.

Impact on Society

A pandemic will likely place pressure on a number of essential services. Disruption will be the greatest where rates of worker absenteeism impair essential services such as power, water, transportation and communications.

PREPARING FOR PANDEMIC INFLUENZA

The Government of Alberta has been preparing the health system and the province for an influenza pandemic since 1999. The work is led by Alberta Health, Alberta Health Services and the Alberta Emergency Management Agency and involves a range of partners, including other provincial ministries, municipalities, municipal essential services, utility and transportation companies and professional organizations.

[Alberta's Pandemic Influenza Plan 2014](#) is a provincial strategic plan jointly developed by Alberta Health, Alberta Health Services and the Alberta Emergency Management Agency. This plan guides the provincial response and recovery for pandemic influenza, with an emphasis on how these organizations work together.

It aligns with Canada's Pandemic Influenza Plan and supports coordination between the Government of Alberta and Alberta Health Services. It also serves as a reference for local authorities, business and industry and other emergency plans.

The goal of Alberta's Pandemic Influenza Plan is to provide guidance and direction for activities aimed at:

- Controlling the spread of influenza disease and reducing illness (morbidity) and death (mortality) by providing access to appropriate prevention measures, care, and treatment.
- Mitigating societal disruption in Alberta through ensuring the continuity and recovery of critical services.
- Minimizing adverse economic impact.
- Supporting an efficient and effective use of resources during response and recovery.

The health response plan will be used in coordination with the Canadian Pandemic Influenza Plan for the Health Sector, prepared by a partnership between the federal, provincial, and territorial governments, to respond to a pandemic influenza public health emergency.

Alberta's Plan for Pandemic Influenza is a work in progress and will be updated as new information becomes available. The plan is based on a moderate scenario consistent with the last two pandemics and is scalable to address the more extreme response requirements should a severe scenario present itself. A number of exercises in responding to a pandemic have been and will continue to be conducted across the province and analyzed to help ensure that the plans and written procedures for the provincial ministries, Alberta Health Services and municipalities are suitable for a pandemic influenza situation.

When describing pandemic influenza, jurisdictions use different descriptions to communicate the impacts from their perspective. Taken together, this information helps the province to assess the overall impacts of a pandemic influenza to the Alberta population.

In response to lessons learned from pH1N1, the World Health Organization (WHO) has simplified its pandemic influenza phasing from six phases to four. These phases reflect WHO's risk assessment of a virus with pandemic potential that is infecting humans and describes the spread of the new influenza subtype, taking into account the disease it causes around the world and also enable a more flexible response.

The WHO phases are:

- **Interpandemic Phase:** a new type of influenza virus has not been detected in people;
- **Pandemic Alert Phase:** a new influenza virus has been detected in the world, most likely outside of Canada, but only found in a small number of people and transmission of the virus is limited. This phase is characterized by extra vigilance and careful risk assessment;
- **Pandemic Phase:** the period of global spread of human influenza caused by a new subtype. Movement between the interpandemic, alert and pandemic phases may occur quickly or gradually. The new virus is present throughout the world, including Canada, and is easily transmissible from person-to-person; and
- **Transition phase:** reduction of the assessed risk resulting in de-escalation of global actions. (the number of cases and deaths due to influenza return to normal levels.)

While the WHO phasing describes the global view, Canada, like other countries, will also follow its own national risk assessment to describe impacts to its population as each country will face different risks at different times during a pandemic influenza. For example, when the WHO announces its global pandemic phase, Canada may already be experiencing domestic outbreaks (as happened in 2009) or still anticipating its first case.

Canada will also use terms such as "start", "peak" and "end" of a pandemic wave to describe pandemic activity in the country. Pandemic influenza activity can be further characterized for jurisdictions of any size using FluWatch definitions: no activity, sporadic activity, localized activity and widespread activity.

National, high-level potential triggers have been developed to provide guidance for the initiation of Federal, Provincial and Territorial activities and for their modification and cessation.

Similarly, Alberta will describe the pandemic based on impacts to the province; global and national levels of impact will provide health officials with a more complete picture when assessing the local situation.

Alberta has a graduated structure of emergency response, used for all emergencies including pandemic influenza. This means that assistance can be accessed at the next level if the affected level becomes overwhelmed. For example, emergency events are coordinated at the municipal level first through the Director of Emergency Management, through the Alberta Emergency

Management Agency at the provincial level, and through Public Safety Canada at the federal level. A parallel process is followed through the health system.

RESPONSIBILITIES DURING AN INFLUENZA PANDEMIC

Pandemic influenza is a worldwide health event. To effectively manage and respond to a pandemic influenza, coordination is required at the international, federal, provincial and local levels. Each province and territory participates in nationwide pandemic influenza planning and response activities and is responsible for planning, developing, organizing, directing and delivering the provision of emergency response services to their populations.

International

The World Health Organization (WHO) watches for the emergence of new strains of influenza throughout the world. If a pandemic influenza strain emerges, it will notify federal health authorities and provide information on a number of areas including situation monitoring, prevention and containment.

Federal

The Public Health Agency of Canada's Centre for Emergency Preparedness and Response is Canada's central coordinating point for public health security issues. In a response, Canada's Centre for Emergency Preparedness and Response will continuously monitor outbreaks and global disease events and assess emerging and ongoing public health risks, contribute to keeping Canada's policies in line with threats to public health security and apply federal public health rules governing laboratory safety and security, quarantine and similar issues.

The Public Health Agency of Canada is supported by a number of pandemic committees including the national Pandemic Influenza Committee, with representation from provincial, territorial and federal governments to aid in coordination of a national pandemic response.

Public Safety Canada is responsible for the nationwide coordination of the pandemic emergency response, including planning, management and recovery efforts. The role of Public Safety Canada is to direct the federal emergency response using the Federal Emergency Response Plan. This includes responsibility for coordinating security and the non-health component of the pandemic influenza response at the national level.

Provincial

Alberta Health will lead the health sector response. At the onset of a pandemic influenza, Alberta Health will establish an emergency operations centre. It will support coordination among Alberta Health Services and other health organizations; coordinate the delivery of antiviral medications and vaccine across the province; provide information; collect data on the spread of the disease in Alberta; and help resolve any health related issues that may arise.

Alberta Health Services is to provide continuity of health services to Albertans. Alberta Health Services responsibilities specific to response and recovery are to review and implement pandemic influenza operational health service response and recovery plans, prioritize delivery of critical health services and programs during a pandemic influenza, carry out the legislated roles of the Medical Officer of Health under the *Public Health Act* and the *Communicable Diseases Regulation*, including advising in consultation with the Chief Medical Officer of Health on the declaration of a local state of public health emergency, if necessary, collaborate with Alberta Health on matters related to policy, resource acquisition and cross-government, and in the delivery of influenza-related public information and education programs and liaise with and provide health advice and counsel to local authorities and stakeholders.

The Alberta Emergency Management Agency, under the *Government Emergency Management Regulation*, is responsible for acting as the coordinating and support agency for the Government of Alberta and its emergency management partners. In this capacity and in the context of this plan, Alberta Emergency Management Agency will coordinate the cross-governmental response to a pandemic, monitor and assess the impact of pandemic influenza on the Government of Alberta critical services, and if required, coordinate restoration of the Government of Alberta critical services list as per the Government of Alberta Business Continuity Plan, coordinate and support requests for assistance from local authorities as necessary and coordinate requests for assistance under existing federal, provincial, territorial and international mutual assistance agreements.

Local

Under the Municipal Government Act, the role of the local authorities (municipalities, Métis communities) is to ensure a safe and viable community through the continuity of local government and critical services and emergency response. Local authorities' responsibilities include reviewing and implementing response plans (Municipal Emergency Management Plans) and business continuity programs, maintaining the continuity of critical municipal services in consultation with Alberta Health Services and business and industry (fire, police, water treatment/delivery, waste management) and liaising with the Alberta Emergency Management Agency, Alberta Health Services and other partners to align with broader provincial response and recovery.

APPENDIX B: LEGAL OBLIGATIONS TO EMPLOYEES

(Source: Government of Alberta Employment Standards)

The Alberta Employment Standards Code establishes minimum standards regarding payment of earnings, hours of work, overtime, general holidays, vacations, maternity and parental leave and termination of employment.

Keeping your business open and functioning during a pandemic requires planning. Absenteeism could cause significant disruption. The plan should include specific policies you'll need to manage the employment relationship during pandemic influenza and steps for the return to regular operation following. Decide how you will:

- Treat employee attendance and absences,
- Ensure that employees get paid, and
- Apply temporary layoff and termination of employment provisions if you have to suspend some or all of your business for a period of time.

Prepare employees by telling them about the actions you will be taking in the event of pandemic influenza. The following tables provide information about minimum standards and strategies for the issues most likely to affect workplaces during pandemic influenza.

Issue	Minimum Standards
Attendance	<ul style="list-style-type: none"> • Work schedules must be posted where they can be seen by employees and 24 hours' written notice of a shift change is required. • When an emergency occurs, an employee's workday can be longer than 12 consecutive hours. • Employees can be scheduled to work overtime. • Employers must allow employees 1 day of rest per week. The Code permits employees to work up to 24 consecutive days before requiring the employer to allow a rest period of 4 consecutive days. • Employers and employees are encouraged to agree on mutually satisfactory vacation schedules. If agreement can't be reached, the employer can determine when the vacation will be taken and must provide at least 2 weeks' written notice of the date the vacation will be taken.
Absence	<ul style="list-style-type: none"> • The Code doesn't require paid or unpaid sick leave or time off for medical appointments. During a declared public health emergency, special rules apply to employers and employees. Employers must not discriminate against employees who are absent because they are complying with a public health certificate or isolation order or because they have been conscripted to provide medical services. • The Code doesn't protect the jobs of employees who access Employment Insurance for compassionate leave, but normal termination rules apply. • Human rights legislation defines protection against discrimination and employer responsibility to accommodate disability. For example, an employee may request a change in work shifts because of family responsibilities. The employer should accommodate the request if at all possible. [<i>Human Rights, Citizenship and Multiculturalism Act</i>]
Paying Earnings	<ul style="list-style-type: none"> • Earnings must be paid within 10 days of the end of each pay period.
Layoffs and Termination	<ul style="list-style-type: none"> • Employers must provide prior written notice containing the start and end dates for each temporary layoff. Temporary layoffs can be up to 59 days. Temporary layoffs can be extended if the employer is continuing to pay for an employee benefit program, or pays the employee wages or an amount instead of wages, or there is a collective agreement containing recall rights. • If employment is terminated, the proper notice requirements for both employees and employers must be met. • Special rules apply during a declared public health emergency and prohibit the termination of employees who are absent because they are complying with a public health certificate or isolation order or because they have been conscripted to provide medical services.

Issue	Strategies
Attendance and Work	<ul style="list-style-type: none"> • Establish work schedules and can stagger work hours and workdays to reduce contact between employees or offset problems created by pandemic influenza. • Adjust or reduce hours of work due to less product demand, supply problems, fewer available employees or employee fatigue. • Develop technology resources to open up telecommuting (working from home or another location away from the usual place of business) options—access to IT systems, phones and fax machines. • Establish communication and accountability processes for employees who may be able to work from home. • Designate a group of workers who could work from home as soon as pandemic influenza is identified, to limit the spread of disease. • Ensure supervisors provide support for employees who may make more mistakes or take longer to complete unfamiliar tasks. • Consider the effects and costs of ‘presenteeism’ (when employees who are sick come to work). If sick employees fear job loss or disciplinary action, they will be more likely to come to work and risk infecting their co-workers. • Attempts should be made to accommodate employees with sick dependents who will naturally be very concerned about their well being.
Absence	<ul style="list-style-type: none"> • Establish policies for reporting absences—who employees should contact, how they should contact (email, phone call, voice mail message), when they should contact. Ensure that employees who are experiencing pandemic influenza symptoms know not to come to work, even though they may not have been diagnosed with pandemic influenza yet. • Employers who provide paid sick leave should prepare for a large number of employees accessing this benefit. The high level of demand on the healthcare system may make it impossible for employees to get doctor’s notes to verify employee illness. Procedures to facilitate access to illness related benefit programs may need to be revised. • Absence policies should take into consideration other reasons (other than personal illness) why employees may not be able to come to work: <ul style="list-style-type: none"> - Public transit not available, nor other means of transportation to and from work - Needed at home to care for sick dependents or spouse - Needed at home to care for dependent family members if daycare facilities and schools close, or - The family/home is under quarantine. • Establish processes for regular communication with absent and sick employees.
Paying Earnings	<ul style="list-style-type: none"> • Cross train staff so that payroll occurs on time. • Set up automated pay systems and establish back-up manual pay systems to deal with possible disruption in established systems. • Clearly communicate wage rates for employees who do tasks that are different from their usual job.
Layoffs and Termination	<ul style="list-style-type: none"> • Use temporary layoff provisions whenever possible rather than terminating employment relationships permanently. • Continue paying for employee benefits like pension or insurance programs. • Communicate regularly with laid off employees about the status of the business and when you expect normal business to resume. • Be aware that employers may still be subject to civil action even though the Code’s minimum requirements for notice of termination are met.

APPENDIX C: RESOURCES

The Alberta Dental Association and College Pandemic Influenza Contingency Plan is based primarily on information from the following sources:

Alberta Dental Association and College

<http://www.abdentists.com/>

World Health Organization

http://www.who.int/influenza/preparedness/pandemic/influenza_risk_management/en/

Health Canada

<https://www.canada.ca/en/health-canada/services/health-concerns/diseases-conditions/influenza-flu.html>

Public Health Agency of Canada

www.phac-aspc.gc.ca/influenza

Government of Alberta, Employment Alberta

<https://www.alberta.ca/employment-standards.aspx>

Alberta Health / Alberta Health Services

<https://www.albertahealthservices.ca/>

Alberta Pandemic Influenza Plan 2014

<https://www.alberta.ca/pandemic-influenza.aspx>

Workplace Health and Safety, Alberta Employment and Immigration

<https://www.alberta.ca/labour-and-immigration.aspx>

Best Practice Guideline for Workplace Health and Safety during Pandemic Influenza

Including employment standards rights and obligations

<https://open.alberta.ca/publications/9750778568193>

Public Health Agency Canada – Emergency Preparedness and Response

<http://www.phac-aspc.gc.ca/ep-mu/index-eng.php>