

# Preparing for COVID-19 Community Spread — Response Planning Session

Lionel E Lalonde Centre, Greater Sudbury

9:30 – 15:30 Monday, March 9, 2020



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# Preparing for COVID-19 Community Spread

## Response Planning Session

**Welcome/Bienvenue/Aanii**

Dr. Penny Sutcliffe, Medical Officer of Health  
Brandon Petahtegoose, Atikameksheng Anishnawbek  
Brian Bigger, Mayor, City of Greater Sudbury



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# Logistics

- Nourishment
- Resources
- Photos/media
- You





# Almost 60 participating agencies:

1. Assignack Family Health Team
2. Atikameksheng Anishnawbek
3. Cambrian College of Applied Arts and Technology
4. Canadian Mental Health Association Sudbury/Manitoulin
5. Canadian Red Cross
6. Centre de santé communautaire du Grand Sudbury
7. Chapleau Health Services
8. City of Greater Sudbury
9. City of Lakes Family Health Team
10. Collège Boréal
11. Conseil scolaire catholique du Nouvel-Ontario
12. Espanola & Area Family Health Team
13. Espanola Fire Department
14. Espanola Regional Hospital and Health Centre
15. Extendicare Falconbridge
16. French River Fire Department
17. Greater Sudbury Police Service
18. Health Sciences North
19. Huron Superior Catholic District School Board
20. Killarney Health Centre
21. Laurentian University
22. M'Chigeeng Health Services
23. Manitoulin Central Family Health Team
24. Manitoulin Health Centre
25. Manitoulin-Sudbury District Services Board
26. Markstay-Warren Fire Department
27. Massey Medical Clinic
28. Mattagami First Nation
29. M'Chigeeng Health Services
30. Métis Nation of Ontario
31. Ontario Health Northern (NE LHIN)
32. Emergency Program Management Delivery Branch
33. Cental Ambulance Communications Centre
34. Municipality of Central Manitoulin
35. Municipality of Markstay-Warren
36. Noojmowin Teg Health Centre
37. North Eastern Ontario Medical Office
38. Northern Ontario School of Medicine
39. Pioneer Manor
40. Public Health Ontario
41. Public Health Ontario Laboratories
42. Public Health Sudbury & Districts
43. Rainbow District School Board
44. Sagamok Anishnawbek
45. Services de santé de Chapleau Health Services
46. Shkagamik-Kwe Health Centre
47. Sudbury Catholic District School Board
48. Sudbury Central Ambulance Communications Centre
49. Sudbury District Nurse Practitioner Clinics
50. Sudbury Student Services Consortium
51. The Corporation of the Municipality of Billings
52. The Corporation of the Municipality of Killarney
53. The Corporation of the Township of Sables-Spanish Rivers
54. Town of Espanola
55. Town of Northeastern Manitoulin and the Islands
56. Township of Assignack
57. Wahnapiatae First Nation

# Recognition

## Organizing Superheroes

- Sarah Akerman
- Julie Arlt
- Stephanie Bryan
- Ashley DeRocchis
- Lisa Doucet-Proulx
- Terri Gervais
- Jennifer Graffi
- Burgess Hawkins
- Jamie Lamothe
- Helene Leroux
- Rochelle McCann
- Rachel Quesnel
- Adam Ranger
- Anna Ranger
- Diane St Louis
- Katryn O'Leary (CGS)
- Jennifer Bastien, Jayson Martin, Line Dubreuil (LEL)

## Facilitators

- Aimee Belanger
- Veronica Charette
- Krista Galic
- Nicole Gauthier
- Stacey Gilbeau
- David Groulx
- Imran Khan
- Joëlle Martel
- Nastassia McNair
- Francine Pinard
- Sarah Rice
- Julia Ritchie
- Callan Rogers
- Renée Vaillancourt
- Laryssa Vares



# February 28



“We are on the highest level of alert or highest level of risk assessment in terms of spread and in terms of impact,” said Dr. Mike Ryan, executive director of WHO’s health emergencies program. The group isn’t trying to alarm or scare people, he said. “This is a reality check for every government on the planet: Wake up. Get ready. This virus may be on its way and you need to be ready. You have a duty to your citizens, you have a duty to the world to be ready.”

<https://www.cnn.com/2020/02/28/who-raises-risk-assessment-of-coronavirus-to-very-high-at-global-level.html>

# March 5

## Public Confidence – Our Duty

- This is not a drill.
- This is not the time to give up.
- This is not a time for excuses.
- This is a time for pulling out all the stops.
- Countries have been planning for scenarios like this for decades. Now is the time to act on those plans.

WHO Director-General's opening remarks at the media briefing on COVID-19

<https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---5-march-2020>

# March 7

## Consistent Messaging

### WHO statement on cases of COVID-19 surpassing 100 000

As of today's reports, the global number of confirmed cases of COVID-19 has surpassed 100 000. As we mark this sombre moment, the World Health Organization (WHO) reminds all countries and communities that the spread of this virus can be significantly slowed or even reversed through the implementation of robust containment and control activities.

Every effort to contain the virus and slow the spread saves lives. These efforts give health systems and all of society much needed time to prepare, and researchers more time to identify effective treatments and develop vaccines.

Allowing uncontrolled spread should not be a choice of any government, as it will harm not only the citizens of that country but affect other countries as well.



# Yesterday. And here?

## Italy prohibits travel and cancels all public events in its northern region to contain coronavirus

By Tara John and Ben Wedeman, CNN

🕒 Updated 2:49 PM ET, Sun March 8, 2020

**(CNN)** — Italy has imposed the most draconian lockdown [outside mainland China](#) as it attempts to control Europe's biggest outbreak of the novel coronavirus, restricting the movements of more than 10 million people in the northern part of the country.

As of Sunday evening, Italy has recorded 7,375 cases and 366 deaths, the most fatalities outside mainland China.



# Purpose and Goals

A face-to-face workshop linking community partners from Greater Sudbury and the districts of Sudbury and Manitoulin to ensure **coordinated** and **effective** responses to the potential community spread of COVID-19.

1. Decrease illness and death
2. Maintain health system capacity
3. Minimize societal disruptions (infrastructure, economic)
4. Maintain public confidence





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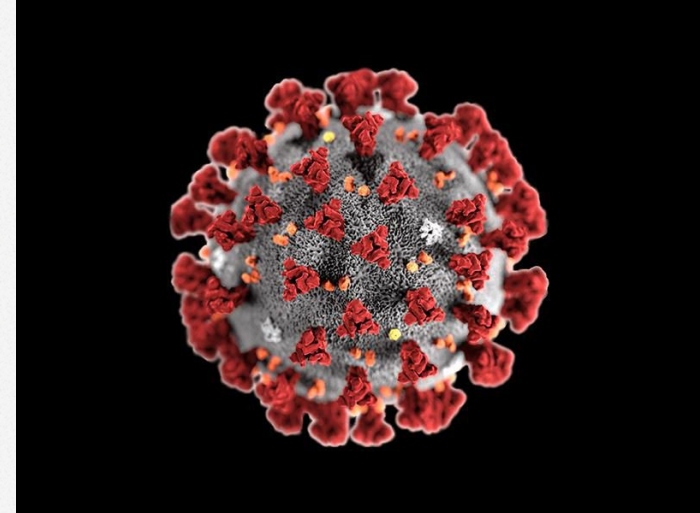
# COVID-19 Outbreak Status

Dr. Ariella Zbar, Associate Medical Officer of Health



# What is COVID-19?

- Terminology:
  - Virus: SARS-CoV-2
  - Disease: COVID-19 (formerly 2019-nCoV)
- What are coronaviruses?
  - Family of viruses typically causing mild respiratory disease in humans
  - Named for crown-like spikes on virus surface
  - More severe versions emerged, notably, SARS-CoV (2003), MERS-CoV (2012) and, now, SARS-CoV-2



# What is COVID-19?



- Where did the virus come from?
  - Not confirmed, though suggested origins include animal reservoir (bat) +/- intermediate host (pangolin)
- How long does it take for someone to get sick?
  - Average incubation period = 5 days, up to maximum of 14 days following exposure
- What are the symptoms?
  - May have no symptoms
  - Symptoms can range from mild to severe and can include fever, cough and difficulty breathing
  - Complications can include pneumonia, kidney failure, death



# What is COVID-19?

- How does it spread?
  - Transmitted via droplets during close, unprotected contact – no documented airborne spread
  - Limited evidence demonstrating transmission during incubation period or by asymptomatic cases
- How is it tested?
  - Swab(s) taken from respiratory tract to detect viral genetic material
- How is it treated?
  - No specific treatment, no vaccine
  - Most will recover on their own if infected



# Case Definitions

- Person under investigation (PUI)
- Probable case
- Presumptive confirmed case
- Confirmed case

# Characteristics of COVID-19 compared with other major viruses

Virus	Total # reported cases	Deaths reported	Crude fatality ratio	Countries affected /reporting	R <sub>0</sub>
Seasonal influenza (1)	3-5 million (severe cases)	290,000-650,000 (3500 in Canada/yr)	0.1%	Global	1.28
Ebola 2014	28,600	11,325	50% (average)	6 countries	± 1
H5N1 Bird Flu (human infections)	861	455	53%	17 countries	n/a
Nipah	265	105	40-75%	4 countries	0.33
SARS	8098	774	9.5%	26 countries	2.2-3.7
MERS (2)	2494	858	35%	27 countries	<1 (average)
H7N9 Bird Flu (3)	1568	At least 615	39%	3 countries	n/a
COVID-19 (4)	109,811	3,802	3.4%	102 countries	0.2-7.05

[1] Global burden estimates of annual epidemics

[2] Data from 2012 till November 2019

[3] Data from 2013 till September 2018

[4] Data as of 08 March 2020

Adapted from WHO 11/02/2020 with COVID-19 updates from WHO Situation Reports, Coronavirus COVID-19 Global Cases by Johns Hopkins CSSE, Wellington-Dufferin-Guelph Public Health situational updates

# COVID-19 Considerations

- It has spread quickly
- It is undercounted

## VELOCITY OF THE VIRUS

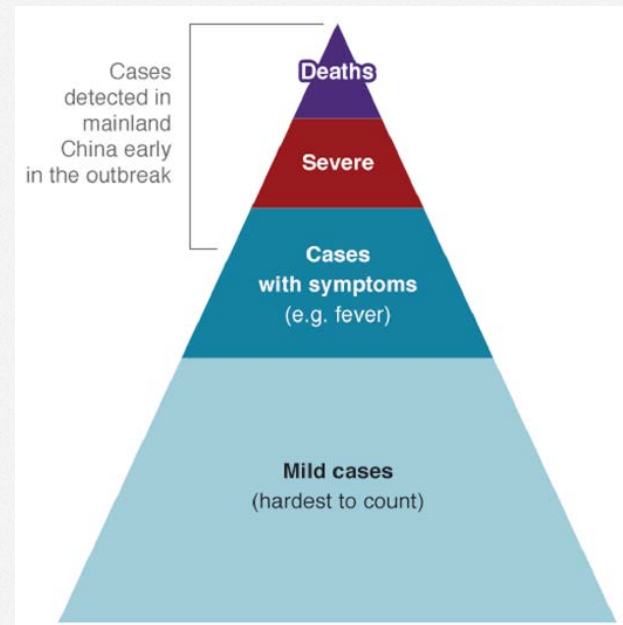
For the first 1,000 people to be infected,  
MERS took **903 days or 2.5 years**



SARS took **130 days**



and the new coronavirus took **48 days**



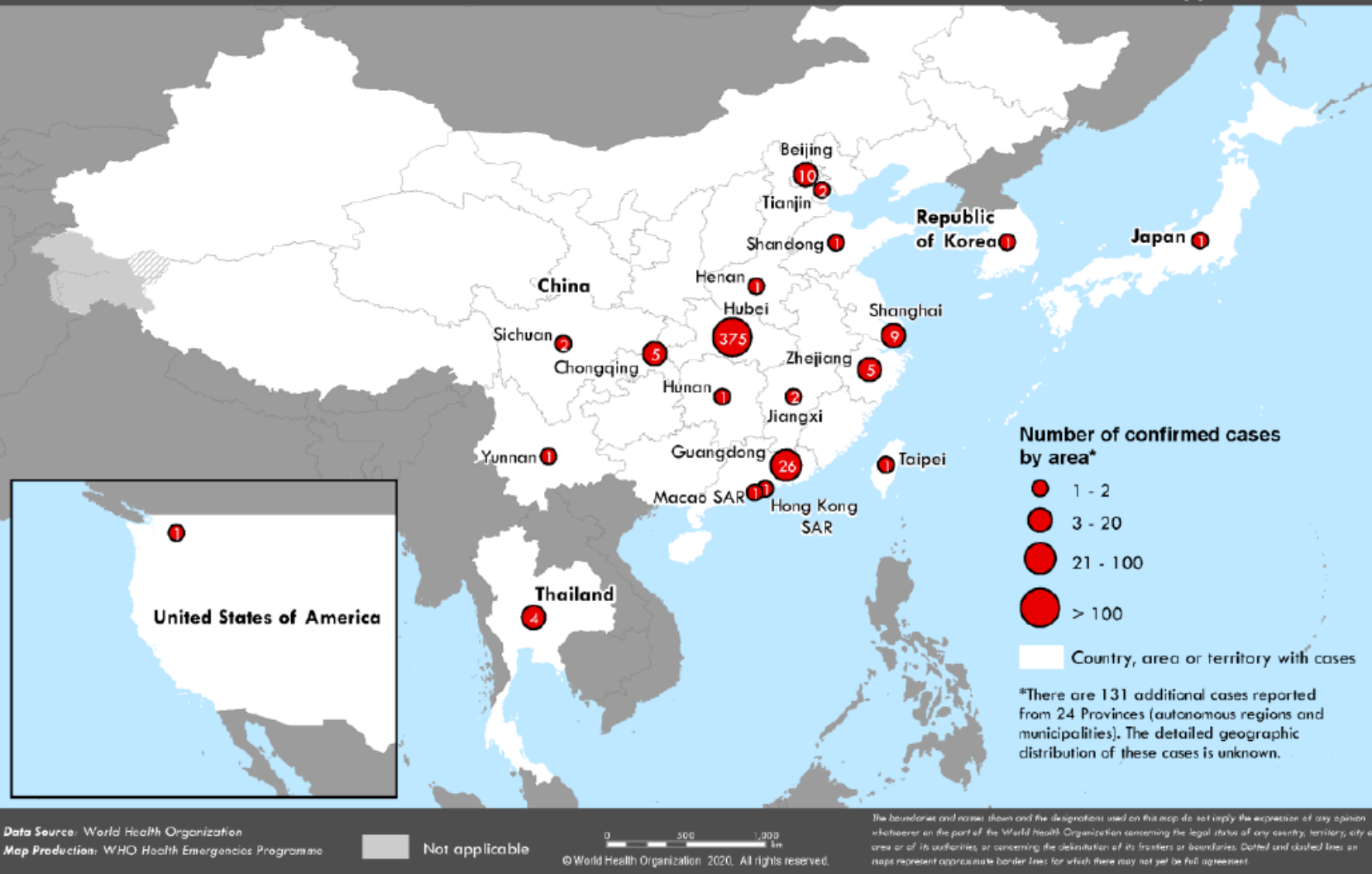
G. Evans, Kingston, ON, 05-March-2020



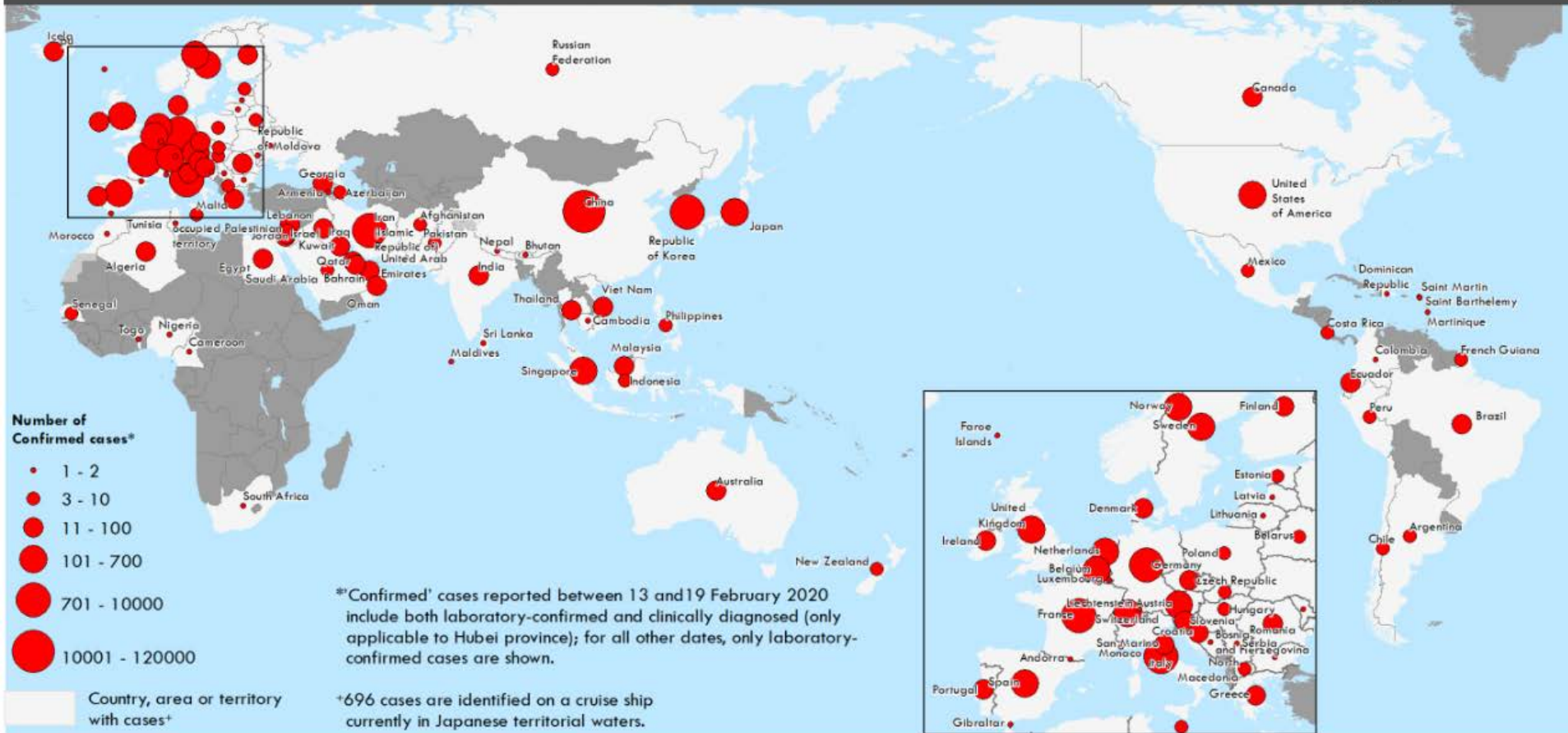
# Brief Timeline of Global Spread

- December 31, 2019: Chinese health officials report cluster of cases of acute respiratory illness in persons associated with the Hunan seafood and animal market in the city of Wuhan, Hubei Province, in central China.
- January 7, 2020: Chinese health officials confirm that a novel coronavirus (2019-nCoV) was associated with initial cluster.
- January 30, 2020: WHO declares 2019-nCoV outbreak constitutes a Public Health Emergency of International Concern.

# Distribution of 2019-nCoV cases as of 23 January 2020



# Distribution of COVID-19 cases as of 08 March 2020



Data Source: World Health Organization

Map Production: WHO Health Emergencies Programme

Not applicable



# Global Impact of COVID-19

- 105,586 confirmed cases
- 3,584 deaths
- 60,694 recovered
- 102 countries reporting



# COVID-19 in Canada

- January 25, 2020: first confirmed travel-related case in Canada (Ontario)
- March 5, 2020: first case reported with no known travel or exposure history (BC)
- Confirmed cases as of March 8, 2020:
  - Ontario: 31
  - BC: 27
  - Quebec: 3
  - Alberta: 1





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# COVID-19 Preparedness Status

Dr. Penny Sutcliffe, Medical Officer of Health

# Preparedness

- National
- Provincial
- Regional/Local
- Agency



# National Response

- Leadership by Canada's Chief Public Health Officer and Minister of Health
- Activation of Federal/Provincial/Territorial Public Health Response Plan for Biological Events
- Public Health Agency of Canada working with provincial and territorial partners and with global partners such as WHO to manage COVID-19 cases and response
- Laboratory support by National Microbiology Laboratory
- Travel advice and advisories maintained – as of March 8, 2020:
  - Avoid non-essential travel to China and Iran
  - Avoid all travel to Hubei province
- Screening at major Canadian airports to identify and manage affected travellers
- Repatriation and quarantine of citizens from Wuhan and Diamond Princess cruise ship in Japan

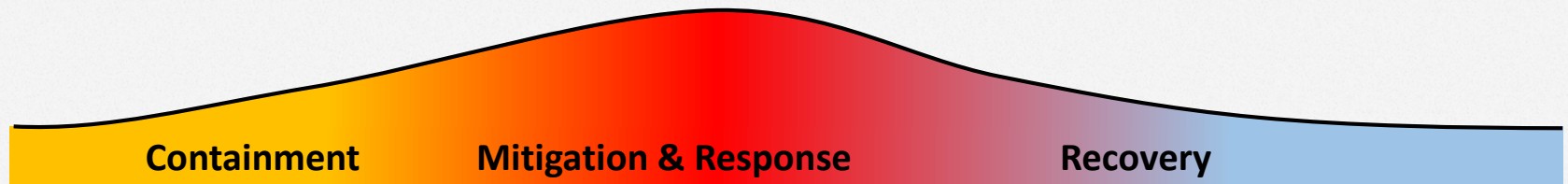
# Provincial Response

- January 22, 2020: novel coronavirus is a designated disease reportable under the Health Protection and Promotion Act to the local medical officer of health.
- Province continues to develop guidance documents to assist health care sector and beyond (ex. schools) in their management of COVID-19.



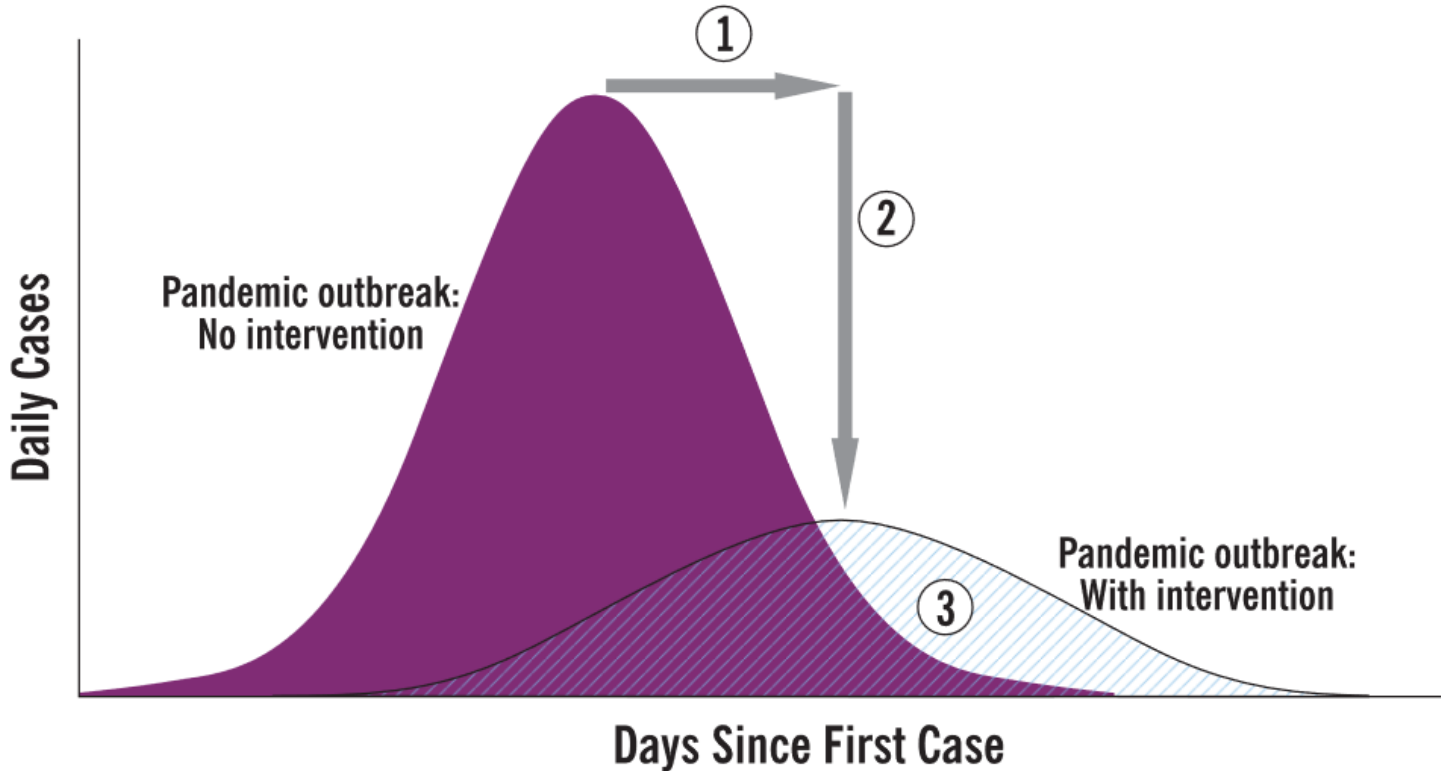
# Provincial Response

- Three phased, inter-lapping planning framework that considers a range of severity scenarios
  - **Containment:** to contain and eliminate the spread of virus in Ontario
  - **Mitigation & Response:** to decrease morbidity and mortality caused by COVID-19 in Ontario
  - **Recovery:** to routinize response to this virus across Ontario

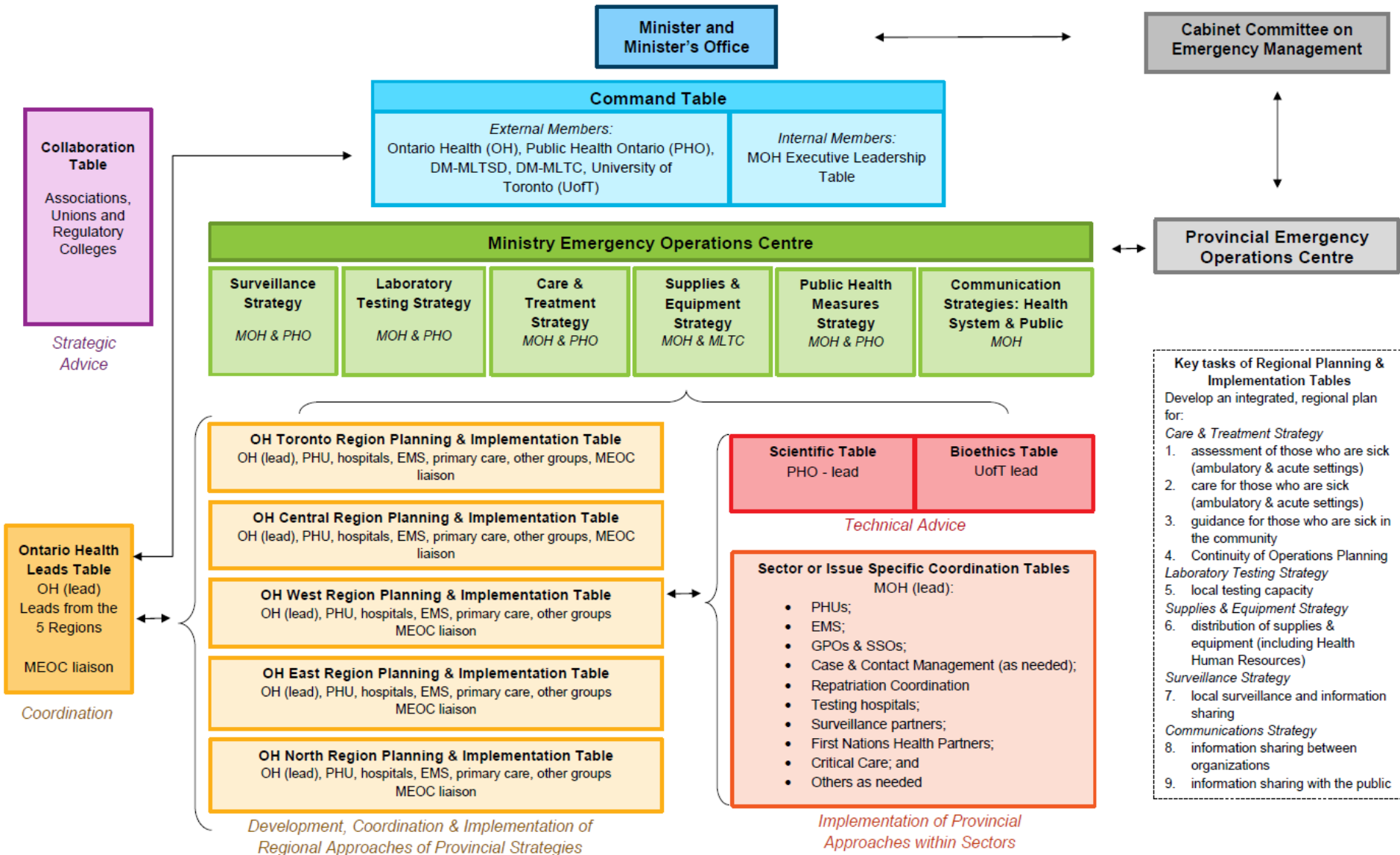


## Goals of Community Mitigation

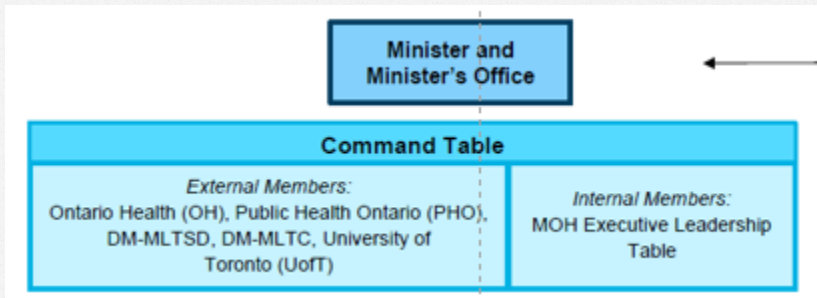
- ① Delay outbreak peak
- ② Decompress peak burden on hospitals / infrastructure
- ③ Diminish overall cases and health impacts







# Command Table



## Goals:

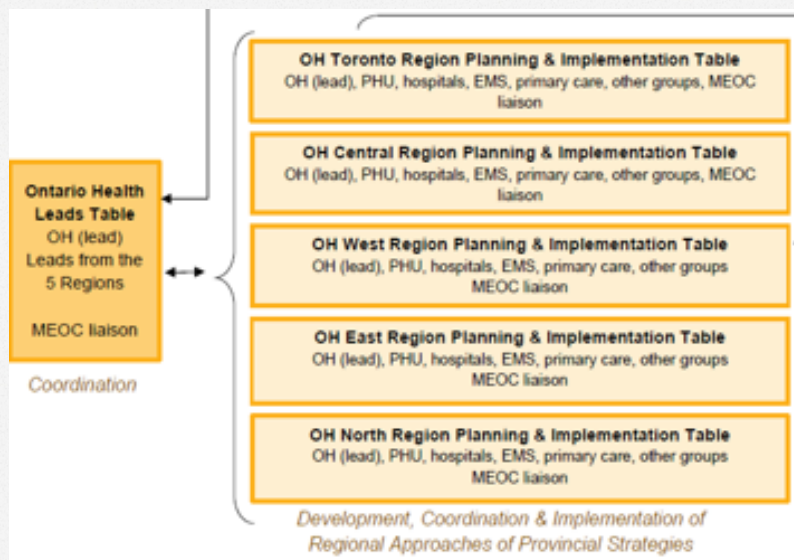
1. Minimize the impact of COVID-19 on the health of the population of Ontario.
2. Support and care for those who contract COVID-19.
3. Protect and support our health care workers.
4. Protect and maintain our health system for all Ontarians who need it for non-COVID-19 related illness and support.
5. Provide essential stewardship of vital supplies, equipment and public resources.

## Expectations of others:

- UTD pandemic and business continuity plans
- Participate in regional tables
- OHS and JHSC ready to support organizations and employees



# Regional Planning and Implementation Tables



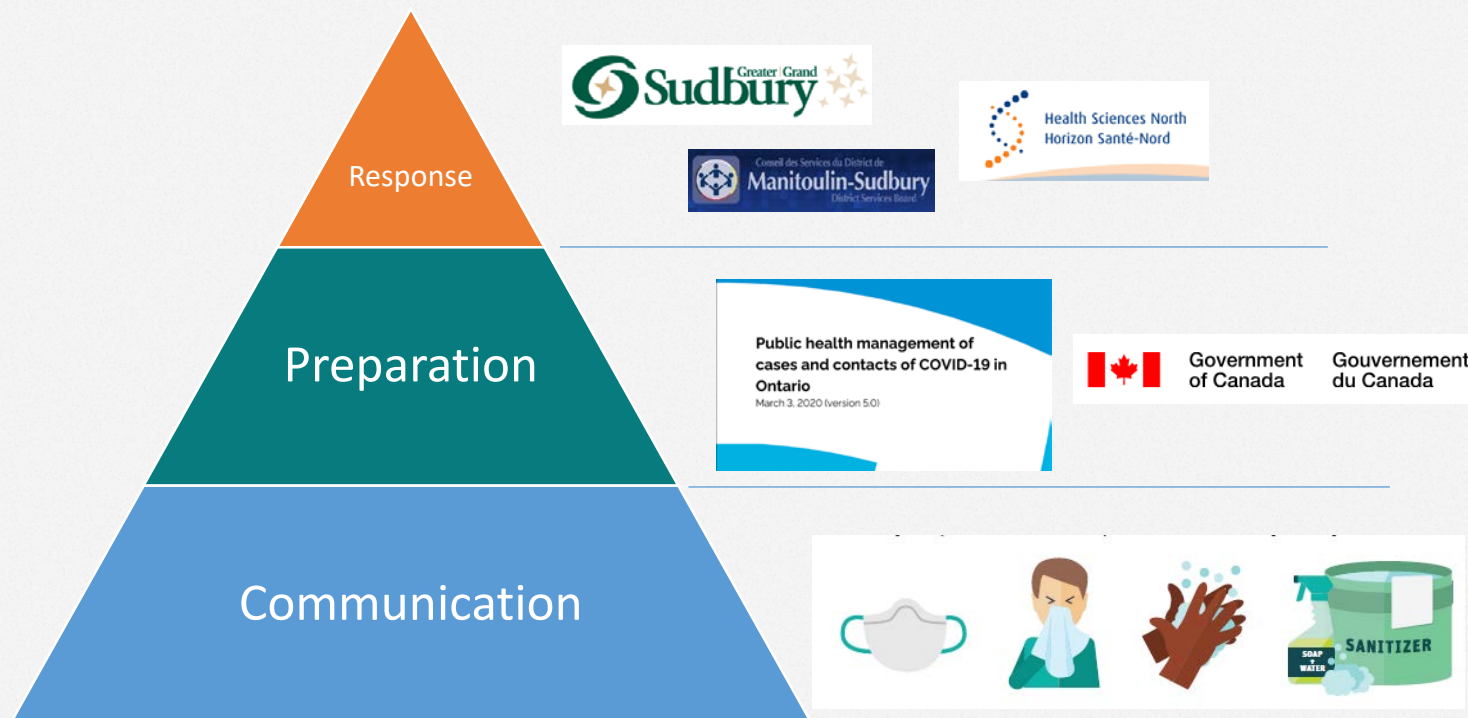
The scope of the Tables' work is to coordinate regional planning within the health care sector and to provide advice on approaches to implement Ontario's COVID-19 response.

# Regional/Local Response

- Health Care Sector
  - Coordinated through Regional Tables
- Community Response
  - Coordinated through Public Health
  - PH is lead agency for community emergency response when infectious diseases are the cause
  - Activation of Emergency Response Plan and internal exercises
  - Coordination with Provincial Chief Medical Officer of Health and MEOC
  - Coordination with health care partners infectious disease planning and response
    - HSN to coordinate planning, response and recovery for health services, surveillance, public health measures, emergency response and communications
    - Similar approaches taken for Sudbury East, Espanola, Manitoulin and Chapleau



# Public Health Actions



# Communications

- Ministry of Health: <https://www.ontario.ca/page/2019-novel-coronavirus>
- Public Health Ontario: <https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus>
- Health Canada: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>
- World Health Organization: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>





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# COVID-19 Scenarios and Processes

Stacey Laforest, Director, Health Protection

Renée St Onge, Director, Knowledge and Strategic Services

# Tabletops

## Sector

1. Acute Health Care
2. Community/Social Services
3. Education
4. EMS/Enforcement
5. Political Leaders
6. Primary Health Care
7. Public Health

## Geography

1. Chapleau
2. Espanola
3. Manitoulin Island
4. Sudbury
5. Sudbury East



# Overarching Task:

## Reflections and Actions

1. What are actions that are **easy** to think of and/or implement?
2. What are the actions that are more **challenging** to think through or operationalize?
3. What **gaps** have you identified (for yourself or others)?
4. What **follow-up actions** do you think need to take place? Who needs to be involved? What are the timelines?





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# Reflections and Actions

Renée St Onge, Director, Knowledge and Strategic Services

# Reflections and Actions

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# Communications



# Communications

1. Outstanding needs (inward facing)
2. Key messages from this meeting (outward facing)



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# Next Steps and Evaluations

# Commitments

1. Mutual accountability
2. Brief report on reflections and actions
3. Continuous improvement (evaluation)
4. Other



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