



Pandemic Influenza Preparedness Planning

Unit Planning Guide and Workbook

Table of Contents

	Page
Executive Overview	1
 Section 1 – Pandemic Influenza Planning Guide	
1.1 Introduction.....	2
1.2 Pandemic Influenza.....	2
1.3 Pandemic Preparedness and Planning.....	3
1.4 Scope of Planning.....	4
1.5 Some Key Issues for Consideration.....	5
1.6 Contingency Planning Strategies.....	6
1.7 How to Get Started.....	8
1.8 Use of Worksheets, Sample Forms and Other Resources.....	9
 Section 2 – Workbook	
2.1 Instructions - Worksheet #1 - Unit Program Priorities & HR Requirements	10
2.2 Worksheet #1 (blank form).....	11
2.3 Instructions for Worksheet #2 - Pandemic Influenza Risk Assessment.....	12
2.4 Worksheet #2 (blank form).....	15
2.5 Instructions for Worksheet #3 - Pandemic Influenza Response by Stages.....	18
2.6 Worksheet #3 (blank form).....	20
 Appendices	
Appendix A - Important Planning Considerations.....	22
Appendix B - Sample Worksheet #1.....	28
Appendix C - Sample Worksheet #2.....	29
Appendix D - Sample Worksheet #3.....	33
Appendix E – Resources	35

Executive Overview

Background

Pandemic influenza occurs about every 30-40 years on average, with the last one occurring in the mid-1960's. If the historical trend continues, another could occur at any time. Governments and health authorities have invested significant resources preparing for the next pandemic, and have advised organizations to develop plans as well.

The President's Executive Committee has initiated a Pandemic Planning Workgroup (PPW) to develop a University of Saskatchewan pandemic plan to address institutional concerns, including infection control, identification of critical risks, measures to support programs and services that must be maintained or even expanded, and identification of operations that could be reduced or postponed during a pandemic if necessary.

Unit Pandemic Plans Required

Institutional plans will be developed centrally by the PPW; while unit plans must be prepared by individual units or divisions to address issues at the unit level. The enclosed Guide and Workbook, and associated resources, are intended to guide and assist planning efforts at the unit level.

For the purpose of this initiative, pandemic plans should be based on the assumption that 3 pandemic waves will occur with an absentee rate of 35% for a duration of 8 weeks per wave over a 2 year period.

Recommended Process

This workbook provides a sample planning process, information and resources to assist units to develop reasonable plans to respond in the event of pandemic influenza. We suggest that units follow this approach:

- a. Scope of plan – Determine if a separate plan will be developed for each unit within a division or, alternatively, if the division will develop a single plan to cover all its units.
- b. Determine an appropriate leader or chair to spearhead the unit or division planning team.
- c. Using Worksheet #1, identify programs and services offered by the unit or division, and the number and type of employees required to deliver those services.
- d. Using Worksheet #2, conduct a unit risk assessment; identify critical functions, assess the ramifications of reducing or cancelling services, list program/service priorities.
- e. Determine minimum staffing levels needed to continue critical programs/services.
- f. Explore possibilities of alternate service delivery methods; choose most feasible course(s) of action to suit unit circumstances.
- g. Prepare draft pandemic plan using Worksheet #3; **submit plan to PPW by May 15, 2007** for review and comment.
- h. Test plan using table-top or paper exercise; amend plan where needed
- i. Review plans regularly, amend/update to keep them current

Timelines

It is recognized that some units have more complex operations and higher current work loads than others. Although there is no specific due date for submission of plans at this time, it is hoped that administrative unit plans will be complete by June 30, 2007.

Section 1

Pandemic Influenza Planning Guide

1.1 Introduction

Pandemic influenza occurs two to three times per century on average, and the World Health Organization (WHO) along with many other authorities, have stated that the next expected occurrence is overdue.

A severe flu pandemic could have significant effects on the University community and operations, and much of the population could be off work for several weeks while sick or caring for others at home. Governments and health authorities across Canada have advised universities to prepare reasonable plans to respond in the event of pandemic influenza.

In March 2006, the University of Saskatchewan began to develop a pandemic influenza plan. A Pandemic Planning Workgroup (PPW) has been established and planning is well underway at the institutional level. The next phase requires each administrative unit to prepare plans to respond to the effects of pandemic influenza in their own critical areas of operation. This Guide and Workbook has been developed to assist in the development of those plans. Other resources such as workshops and consultation services are available as listed in *Appendix E – Resources*.

1.2 Pandemic Influenza

Pandemic influenza can occur when a strain of influenza virus shifts in such a way that human immune systems have no specific resistance against it, causing severe illness and death on a widespread basis around the world. The last three influenza pandemics occurred in 1918, 1957, and 1968. The 1918 flu pandemic or the ‘Spanish Flu’ claimed the lives of approximately 50 million people worldwide. The next world-wide influenza pandemic could happen with very little notice.

World Health Organization (WHO) has been monitoring the spread of the avian or bird flu strain identified as H5N1 for some time. Although avian flu primarily affects poultry and wild fowl, it can affect humans that have direct contact with infected bird species. As of February 2007, WHO reported that there were 166 deaths out of 272 verified human cases of H5N1.

For any influenza strain to become a pandemic concern, its genes must mutate from its original form into a strain that can be spread efficiently from human to human. There are 8 such genes in the H5N1 virus, 4 of which have already mutated as feared. Since H5N1 is such a deadly strain and mutation towards a human-to-human transmittable strain seems to be underway, WHO is monitoring it very closely. However, it should be noted that avian flu is not pandemic influenza.

A severe flu pandemic would have dramatic effects on the University community and operations. History indicates that the disease would likely occur in 2 or 3 separate waves lasting from 6-10 weeks each over a 2 year period, with the 2nd wave generally being the most deadly. Based on an attack rate of 15-35%, 150,000 to 350,000 people in Saskatchewan would become clinically ill. Based on these projections and a peak daily population of 30,000, the University of Saskatchewan could experience:

- 4500-10,500 clinically ill
- 30-84 hospitalized
- 9-30 deaths
- up to 10,500 absentees (35% impact rate)
- classes cancelled or postponed

Although scientists are actively working on ways to address pandemic influenza, a vaccine could not be developed until an actual pandemic strain of influenza surfaces. Using current technology, it takes about 6 months to develop a vaccine. Once the vaccine is in production, first priority will likely be given to those already infected, health care workers, emergency responders, persons in key areas of responsibility (e.g. critical infrastructure) and 'at risk' persons (e.g. those with compromised immune systems).

Medical facilities would be overwhelmed in a severe flu pandemic, and much of the population could be off work for several weeks while sick or caring for others at home. Potential loss of life depends on the specific strain, and current estimates for an adapted form of H5N1 avian flu vary widely. Minimizing the spread of infection will be a very high priority. The scenario could include:

- Public health restrictions on large gatherings (classes cancelled, etc.)
- Many students, faculty and staff staying home due to sickness, fear of infection or caring for sick family members; absences of up to 10 weeks at a stretch
- Some interruption or reduction of essential services due to labour shortages, particularly in positions where there is contact with the public (doctors/nurses, emergency responders, retail workers, bus drivers, etc.)
- Imposed transportation restrictions reducing supplies of essential commodities such as food, gasoline and other staples; shortages of medical items such surgical masks and rubber gloves
- Stockpiling of items due to supply and demand issues
- climate of fear stemming from infection potential
- Increased reliance on electronic technology and remote methods of communication (e.g. phone, fax, email, internet, regular mail, etc.)
- Disruptions stemming from staff and contractor service shortages in key functional areas
- Surge in demand for medical care, medicines, disinfectants, advice etc.
- Increased demand for support from existing systems (including Student Health Services, Payroll & Benefits, Employee Assistance Program, etc.)

1.3 Pandemic Preparedness and Planning

A 'Pandemic Planning Workgroup' (PPW) has been established to guide the development of pandemic influenza plans at the U of S. Under the leadership of emergency planner Don Litz in Risk Management and Insurance Services, the PPW reports to the University Emergency Measures (UEM) Planning Committee and the UEM Coordinator. Where possible, plans will utilize generic systems and processes that can respond to other types of major emergencies or disasters, i.e. an "all hazards" approach.

The two categories of pandemic contingency plans to be developed are:

- a) Institutional plans** to address campus-wide issues including:
- public education on flu protective measures
 - campus-wide flu case surveillance/tracking/reporting
 - internal and external communications
 - staff reallocation planning and procedures; collective agreement issues
 - maintenance of critical services, e.g. heating plant, safety, IT & utility services
 - building closures/re-openings

- program & operational reductions/cancellations/restarts
- coordination with civic/provincial/union authorities
- application of corporate policy (sick leave, vacation, etc.)

The institutional plan is being prepared by the Pandemic Planning Workgroup (PPW).

b) Unit plans that should address:

- department flu surveillance/tracking/reporting of sick employees
- areas where units could experience a surge in demand
- areas where work must continue, could be contracted out, postponed, or cancelled
- identification of areas where work could be adversely affected due to circumstances occurring off-campus (i.e. supply interruption, etc.)
- determination of trigger points for surge or scale back/cancellation of service
- identification of work that could be done from home/preparation to allow for same
- development/maintenance of employee/supplier/client contact lists
- development of procedure manuals for critical service areas
- staff skills inventories and possibility for cross training in critical areas
- impact of utility problems (electricity, natural gas, water, or telecommunications) on operations
- impact of critical computer & network service interruptions on operations
- disruption in regular supply of other critical resources or services (supplies, fuel, parts, service and maintenance contracts, etc.) and stockpiling where deemed necessary
- health, safety and environmental concerns (laboratories, safety systems, storage of chemicals and hazardous material, etc.) where employee expertise or availability has been compromised

Individual units are required to prepare 'unit-level' pandemic plans to deal with potential effects within their specific areas of responsibility. In addition to this Guide and Workbook, units may utilize workshops, consultation and other services listed in *Appendix E – Resources* as needed.

Pandemic plans should be drafted to address an absenteeism rate of 35% over an 8 week period on 3 occasions over a 24 month period.

1.4 Scope of Planning

Units may need to prepare more than one contingency plan to get ready for an influenza pandemic. Each unit will definitely need a plan for maintaining every high priority service or program they provide. Additional plans may be needed to describe the process envisioned to reduce/cancel medium or low priority activities and to start them up again after a pandemic wave.

The term "high priority" refers to services that could affect human health, safety, the environment, or could have a significant impact on the academic program, research, or key operations of the University or one of its units. Worksheet #1 in Chapter 2 of the attached workbook provides more detailed information on 'high', 'medium', and 'low' priority assessments. High priority services **MUST** continue throughout a pandemic phase. Medium and/or low priority services will be continued for as long as is practical.

1.5 Some Key Issues for Consideration:

- a) **Human resource issues:** Since the biggest impact will be felt in areas that are human resource intensive, units must identify services or activities that could be postponed or cancelled, and those that cannot due to their critical nature. Services that must be continued will need close attention. Base assumptions for your unit on an average absenteeism rate of 35% over 8 weeks occurring 3 times over 2 years.

Depending on what is needed, units may need to prepare procedure manuals, conduct cross training of existing staff, and/or find other service-providers, contractors or volunteers to fill gaps. Unit call-out lists need to be developed and kept current.

- b) **Service interruptions:** Most utility providers (e.g. SaskPower, SaskEnergy, SaskTel and City of Saskatoon) are preparing their own pandemic plans, but service interruptions are always possible. Consequently, unit plans should consider:
- short term power, water, or natural gas outages of 8 hours or less; and
 - intermittent interruptions of telephone and other communications services

Although utility providers might be able to supply unimpeded service for the duration of any pandemic, service is never guaranteed and could be subject to short term interruptions stemming from labour shortage issues during a pandemic. The Pandemic Planning Workgroup (PPW) will address overall University utility systems, and colleges/units should only plan for issues within their own buildings.

Particular attention must be devoted to freezers, refrigerators and other temperature controlled areas. The availability of emergency power will dictate needs.

Emergency power back-up is limited to designated services, and will vary by building and specific area. Units are required to develop plans for both total and partial power outages. Critical power interruption concerns should be sent to pandemic@usask.ca

- c) **Health, safety and environment issues:** Consider the need for additional resources that unit personnel may require, e.g. protective equipment, surgical masks, rubber gloves etc. Units must develop strategies to mitigate the potential effects of interruptions in power and heat with respect to health and safety concerns (breakage of containers as a result of freezing temperatures, fume hoods will not operate, etc.). Strategies may include proper chemical storage, limiting the use of laboratories during a pandemic, social distancing and identification of alternate resources or procedures to care for animals.
- d) **Special Security concerns:** Electronic security systems may be impaired in the event of a power outage. High-value items may be at increased risk of theft or vandalism because fewer employees may be present. Some units may have supplies, e.g. food, safety items, that may be particularly targeted for theft during a pandemic. Campus Safety and Saskatoon Police response times may be adversely affected as a result of labour shortages.

- e) **Animal care:** The University is responsible for the care of many teaching, research, and herd animals, including fish and a variety of other creatures. In addition, WCVM cares for many privately-owned animals. Strict ethics and regulations govern animal care provided by the University, and the care and safety of animals is a prime concern. Where animal care concerns exist, units must either ensure day-to-day care during a pandemic will continue to meet regulatory guidelines, or develop procedures to reduce the number of animals to a manageable level. For guidance and assistance with prioritizing animal welfare and care issues, contact the University Committee on Animal Care and Supply office at 966-4126 or Dr. Ernest Olfert directly at 966-4124 or ernest.olfert@usask.ca
- f) **Research programs:** Units should consider the potential impact that a pandemic would have on research being carried out.
- g) **Network computer services:** Potential service disruptions or interruptions (on or off campus) could arise due to labour shortages in IT network support or maintenance. During a pandemic, internet usage will likely experience a surge in demand, which could affect the quality or availability of 'work from home', as well as remote learning mechanisms. If in doubt regarding network systems, coordinate planning with your college/work unit IT representatives.
- h) **Unit computer systems and applications:** Units plans should include continuity of 'stand alone' computer systems and applications operated within the unit. Ensure that plans are in place to provide ongoing maintenance and use of essential equipment, including UPS (uninterruptible power supply) equipment.
- i) **Unit-specific equipment:** Specialized equipment that is unique to your unit may be extremely important to your operations. Ensure plans are developed that ensure availability of critical equipment throughout a pandemic wave.
- j) **Severe shortages or external events** may affect items that the University has no capacity to replace or repair during a pandemic. Units should consider the effect of shortages of consumables such as paper stocks, parts, lab supplies, fuel or any other item stemming from transportation restrictions imposed by Public Health officials. In addition, delivery of available goods directly to campus may not be practical, and external delivery/pickup points may need to be established for such items.

1.6 Contingency Planning Strategies

Contingency planning is the process of devising alternative strategies to mitigate impact of a critical event such as a pandemic on existing operations, services, systems and equipment. Mitigation strategies must account for these subject areas until normal operation can be restored. Contingency planning strategies can be separated into three categories:

- a) **Pre-emptive strategies** are defined as measures that can be taken before a pandemic strikes that will reduce its severity or impact.

Pre-emptive strategies at the **institutional level** include:

- public education regarding flu self-protective measures (posters, brochures, etc.)
- development of workshops, presentations and other information to ensure clear understanding of the need for flu surveillance and related reporting methods

Pre-emptive strategies at the **unit level** include:

- measures to protect and preserve programs, services and research, e.g. developing procedure manuals, cross training staff, etc.
- procurement/storage* of adequate consumable supplies for duration of an 8 week pandemic wave (surgical face masks, disinfecting hand gel, animal feed products, etc.)

***Stockpiling is expensive. Funding and approval must be received before any stockpiling strategy is implemented and purchases are made.**

b) Response strategies are measures that are developed in advance, but implemented during the pandemic wave including:

- methods and procedures to ensure continuity of operations, such as configuring computers to enable some employees to work from home, or delivery of services in different ways (e.g. on-line or via 'group chats', etc),
- consideration of need for alternate means to deal with critical labour shortages, e.g. cross training, temporary staff, equipment and services, etc. ***No contracts for temporary outsourcing or staffing should be entered into without prior consultation with Human Resources Division (HRD).***
- emergency shutdown procedures for immediate protection of people, equipment, work areas and/or buildings if necessary
- planned reductions in service based on staff absenteeism levels; including list of stakeholders to be notified about the service reduction
- protective hygiene methods, e.g. cough etiquette, hand washing, alcohol dispensers, plexi-glass counter barriers, stay at home if sick policies, social distancing, conference calls in lieu of meetings, etc.
- procedures for communication with staff, students, clients, suppliers and contractors about status of work unit, e.g. phone, email, web, media, signage, etc.
- call-out lists and procedures for key personnel (also consider use of retirees, etc.)
- development of procedures to preserve valuable data that may be at risk

c) Resumption Strategies are actions and activities that must be undertaken to restore normal operations following a pandemic wave including:

- communication with staff, students, suppliers, contractors regarding details of resumption of regular services
- catch-up on work postponed/cancelled during pandemic;
- relocation of removed equipment or biological material to unit; addressing any biosafety issues related to re-start of vent hoods, freezers, etc.
- replacement of recovering, disabled or lost workers
- grief counselling, other support and accommodation where needed, etc.

Guiding principles for the development of effective and efficient contingency plans:

- ⇒ **Accuracy** - Ensure critical information is accurate.
- ⇒ **Brevity** - Where possible, keep plans brief.
- ⇒ **Clarity** - Use simple terminology and clear sentence structure.
- ⇒ **Continuity** - Plans must include the “how to’s” that describe the procedures for maintaining service, trigger points for scaling back or cancelling activities, and then bringing them back to normal operating mode. Mitigation strategies should provide end-to-end unit operational continuity.
- ⇒ **‘Minimax’** - Planners should strive to develop the minimum number of mitigation strategies needed to cover the maximum number of risks.
- ⇒ **Simplicity** - Mitigation strategies should be as simple as possible.
- ⇒ **Cost Efficiency** - The cost of measures should be weighed in terms of effectiveness, impact, public confidence, health and safety, etc. (e.g. don’t build a reinforced steel structure when an elastic band will do, or vice versa)

All departments will retain the original copy of their plan(s) for ongoing update and review. A second copy shall be forwarded to the Pandemic Planning Workgroup for review and feedback. **Units are reminded that some of this work may already have been completed as part of previous contingency planning efforts. Please keep plans as simple as possible.**

1.7 How to Get Started

Preparing contingency plans to deal with the effects of pandemic influenza may seem intimidating to most people. Surprisingly, it’s not that difficult. Here is a sample approach to consider:

- 1) Identify a leader or chair for the unit pandemic planning effort** - Often, the best person to choose is actually the one who seems most interested in the topic. Other useful attributes include a solid understanding of unit functions and processes, and the ability to recognize and draw practical suggestions from other staff.
- 2) Assemble unit staff information using Worksheet #1** - Identify the number of employees/supervisors assigned to each service you provide, then the minimum number of staff needed to be effective. You will also need contact information for all personnel and key stakeholders (include suppliers, contractors, clients, etc). Identify work cycles (if applicable); and key resources and consumables.
- 3) Conduct unit risk assessment using Worksheet #2** – Contingency planning should focus on high priority programs and activities. Assign a priority rating to each one based on ‘high - must continue’, ‘medium - can be cut back’, and ‘low - could temporarily suspend’. Determine the impact reductions, etc. will have. For those that can be cut back or suspended for the duration of a pandemic wave, units should develop scale back or suspension and business

resumption procedures. Those that will be continued (even if reduced) will need plans that address what the unit will continue to provide and how it intends to provide it.

4) Determine minimum staffing needs for those activities that will continue to operate - Perhaps employees from non-critical areas could be re-assigned to meet critical services. Be aware that some operations will see a 'surge' in demand during a pandemic wave, so an allocation of additional resources may be needed. If staffing resources are available, consider cross-training or preparing procedure manuals for critical tasks.

5) Consider alternate service delivery methods - In some cases, work from home, or remote learning via internet, setting up shifts, or even contracting out may be the safest and best approach to continue work and minimize infection. Planners must be prepared to think 'outside the box' when considering non-traditional service delivery methods. **No 'outsourcing' contracts should be arranged without consulting HRD.**

6) Using Worksheet #3, prepare a written draft plan taking into account all of the above. Submit a copy to pandemic@usask.ca for review and feedback.

7) Review, amend and update the plan as needed every 3 months or so. Ensure that personnel are trained and familiar with the plan.

1.8 Use of Worksheets, Sample Forms and Other Resources

Worksheets have been provided to assist your unit planning efforts. Sample completed forms, important considerations and planning resources have been included in the appendices at the back of the workbook. Additional copies can be downloaded at <http://www.usask.ca/pandemic/>.

Worksheet #1 - Unit Program Priorities and Human Resource Requirements is used to help determine the unit priority for each activity, and the number of employees available while facing a 35% absenteeism rate. Program/activity names and priority ratings need to be transferred to Worksheet #2.

Worksheet #2 - Pandemic Influenza Risk Assessment is used to assess the degree of risk to unit programs or operations during a pandemic. List each one, and fill in the blanks based on rating of importance, consequences if reduced or cancelled, and any planning needs that arise while doing so.

Worksheet #3 - Pandemic Influenza Response by Stages is the actual plan developed to guide unit response to a pandemic. Review the items already listed on the form to provide an idea of content. This is the only form you have to submit to Risk Management & Insurance Services for review.

Worksheet #3 is to be submitted by units for review to pandemic@usask.ca since it will form a part of the overall University of Saskatchewan Pandemic Influenza Plan.

Section 2

Pandemic Influenza Planning Workbook

2.1 Instructions for Worksheet #1 - Unit Program Priorities and Human Resource Requirements

Unit Operational Priorities

During a pandemic influenza, operations and services may be reduced when staffing resources diminish to certain levels or when public health officials issue a closure order to control the spread of infection. Conversely, it is expected that some areas of operation or service will experience a 'surge' in demand for services based on the nature of their work. Units should categorize services, programs and activities on Worksheet #1 according to priority as follows:

- a. **High Priority** - must continue throughout pandemic wave. For example, activities that:
 - Are essential to support health, safety and well-being of the campus community, e.g. DHSE, Student Health, Student Counselling, etc.;
 - Preserve the health and safety of animals;
 - Protect or sustain critical infrastructure and major assets, e.g. continued operation of heating plant, security, operation and maintenance, IT and communications networks;
 - Protect the reputation of the University (President's Office, Communications, etc);
 - Support critical operations, e.g. IT, Payroll, Human Resources, etc.;
 - Senior level decision makers, critical research projects; and,
 - Other activities to be determined through the planning process
- b. **Medium Priority** - could be scaled back if necessary, for example:
 - all academic programs
 - all athletic programs
 - any on-going processes that have no fixed completion deadline
 - seasonal activities that are time sensitive, etc. (i.e. summer road repair)
- c. **Low Priority** (can be cancelled or postponed during pandemic wave)
 - Off-season maintenance (i.e. lawn mower repair in winter)
 - Most professional development and training courses (MS Office, etc.)
 - Travel – visits, exchanges, conferences, etc.
 - Preventative maintenance on low priority equipment or assets
 - Anything that exists purely for aesthetic purposes

Human Resource Requirements

Personnel issues will be predominant in any pandemic scenario. Worksheet #1 will help units weigh normal human resources available in the unit against what would be needed when facing a 35% absentee rate. If an employee works in more than one program or activity, try to determine how much of that employee's time is spent on each one. For example, if an employee spends 70% of his time working on one activity, and 30% working on another, mark his position as .7 for the first, and .3 in the second.

Transfer the appropriate information to the first two columns of Worksheet #2. Sample completed worksheets are included in the appendices for your reference.

2.3 Instructions for Worksheet #2 - Pandemic Influenza Risk Assessment

A risk assessment is needed to determine the number and nature of contingency plans required. Unit personnel should have input into this risk assessment, since they may best understand the impact of staff shortages, malfunctions or system failures. The risk assessment will also help determine how critical the continuation of a program or service may be to the University as a whole.

Worksheet #2 is intended to assist units to:

- identify and assess the importance of programs, activities, and processes;
- determine how long it takes for a business interruption to cause serious problems;
- assess the consequences that could result from those problems; and
- identify any contingency planning needs that derive from the assessment

1) Program/Activity Column:

List the name of the program, service or activity to be assessed in this column. The headings below in this column include several planning categories that have been established to assist you. Unit planners should NOT feel restricted to the categories listed, and are free to add others that may be more appropriate. Categories on the form include:

- a) Human Resource Issues** – Consider the number of employees available by category (manager, supervisor, technician, etc.) in the unit. If, when completing Worksheet #1, it was discovered that a staff shortage would adversely affect service delivery, this is where the specifics relating to the shortage would be shown. After that, list any planning needs that have arisen as a result of your discussions about those consequences. Many employees fulfil key roles in more than one area. You must factor the time spent on each activity into your decisions concerning any planning implications.
- b) Service or Supply Interruptions** - Consider the dependency of the unit's processes on products or services from internal and external suppliers. Identify potential interruptions including:
 - Lack of supplies (e.g. parts, consumables, media, paper, fuel, etc.) essential to unit operations
 - Lack of key services (e.g. repairs, contracted maintenance, any service or function obtained outside the unit, etc.)
 - Lack of key data sources (both internal & external) – If an activity depends on getting data from another source, you should check with that source to determine if access to the data would be available, cut-back or cancelled during a pandemic episode
- c) Campus Computer Network Failure** - Consider the potential effect to the unit of disruptions in computer services including:
 - No access to network, internet or email services, etc.
 - Interruption of data interface to external sources (i.e. campus servers). Note that computer networks may not be operational in the event of a power failure, and/or could suffer break downs that take longer to repair due to staff shortages. Would this situation present any additional concerns that are not identified under categories b) or f)?
- d) Health, Safety and Environmental** – A critical risk during pandemic is the spread of infection. Under the institutional plan, units will be provided with information that will help to

control this risk. Information will include guidelines on social distancing, alternate work methods, proper hand-washing techniques, etc. All units should advise staff and students that a 'stay home if sick' policy will be strictly administered.

There could be other risks in the unit that would be a hazard to human or animal health, safety or the environment including:

- Circumstances that could affect the safe handling, storage or disposal of chemicals, radioactive sources or hazardous materials.
- Disruption of safety and other detection or testing procedures or devices.

e) Security Concerns - Identify any unit security concerns arising due to staff shortage including:

- Access to work areas if people with keys are absent, etc.
- Potential increased vulnerability due to criminal or other human activity, e.g. fewer employees present, fewer personnel available to watch over University assets, targeted items due to shortages in the community, etc.
- Access to key data if employee with password is absent
- Fewer security patrols or adjusted security levels

f) Unit Computer Systems and Applications - Identify items such as maintenance of computing equipment including laptops, critical computing systems and support, required paper or other supplies, or access to data provided by non-U of S entities that may be interrupted or adversely affected by a pandemic episode.

g) Unit-Specific Equipment - Identify any important specialized items unique to the unit that could be affected by shortages in staff or service personnel. For example, if you have a unique device that is either operated or maintained by a specifically trained employee, you must make arrangements to ensure that the resource continues to be available even if the employee is absent.

h) Other Items Affected by Severe Staff Shortages or External Events - Identify essential equipment and systems that may be affected due to a power outage, water main break, telephone system failure, or gas line rupture.

2) Program/Activity Importance (high, moderate, low)

How **critical** to the University or to the work unit in particular is each program, service or activity listed? This determination was made on Worksheet #1, and should be copied here. Items listed should include individual programs/activities or specific equipment and processes that overlap one or more service areas.

Please assign an appropriate level of importance for each item or event identified under Step 1 using the following definitions of high, medium, and low risk as a guideline:

High: Mission-critical programs/items are those that must remain operational in order for your unit to meet its mandate or that would seriously impact University or unit operations. It also includes anything that either supports or would pose a threat to the health & safety of humans or animals and the environment. Those services must continue to function during a staff shortage.

Medium: Programs/items that could have a significant impact on unit operations, but do not pose an immediate threat to the overall achievement of the unit's goals or continued maintenance of health, safety or environment. These may be scaled back to some degree, but must continue to operate during a severe staff shortage.

Low: Those systems that are not considered to be mission-critical or important to the preservation of health, safety or environment or to the unit mandate. They probably don't have a serious impact on the unit's continued operation. These can be severely cut back or even postponed till a pandemic wave passes.

3) Estimate the Maximum Duration that an Event or Failure of an Item May Occur 'Without Consequence' to the Unit.

- What is the maximum period of time that each identified program or line item can be withheld or interrupted without consequence to the unit **or**,
- What is the duration of time that may pass before failure of an item poses significant consequences to the unit?
- Duration should be estimated in seconds, minutes, hours, days, or weeks as appropriate.

4) Estimate What the 'Possible Consequences' of the Interruption/Loss of the Program/Item Could Be

- Provide an estimate of the impact (human, operational and/or financial, etc.) that the loss would create for the University or work unit.
- Only rough estimates are required.

5) Planning Needs

- Indicate the contingency planning actions that will be required to address the identified concerns.
- Include enough detail so that you will know what to address when preparing your contingency plan on Worksheet #3.

*** NOTE: Completed sample worksheets are included in the Appendices.***

2.4 WORKSHEET #2 - PANDEMIC INFLUENZA RISK ASSESSMENT

Unit/Division/College _____ Date _____

Prepared By _____ Phone _____ Page ____ of ____

This form is designed to help units identify risks and assess the potential impact of Pandemic Influenza related issues and events. Users should add additional categories or factors as necessary. Please provide an estimate of the maximum potential impact to your unit and/or the University as a result of a single 8 week pandemic event that creates a 35% staff shortage situation.

Complete this form by repeating each of the categories (Human Resource Issues, Service Interruptions, etc.) listed for every program or activity you provide. Please add additional categories that may be important to your unit.

Program/Activity	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
<i>Name of Program/Service or Activity Here</i>				
a) Human Resource Issues				
b) Service Interruptions				

Program/Activity	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
c) Health, Safety & Environmental Concerns				
d) Security Concerns				
e) Animal Care Issues				
f) Network Computer Services				
g) Unit Computer Systems and Applications				

Program/Activity	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
h) Unit Specific Equipment				
h) Other Items affected by severe staff shortages or external events				

...etc.

Complete this form by repeating each of the categories (Human Resource Issues, Service Interruptions, etc.) listed for every program or activity you provide. Please add additional categories that may be important to your unit.

2.5 Instructions for Worksheet #3 - Pandemic Influenza Response by Stages

This form will become the actual contingency plan that will guide unit response when a pandemic occurs. The column headings are the ‘triggers’ that will signal unit management when to elevate the response from one stage to another. The 4 response stages are explained below.

College/Unit Name

Write the name of the unit/division or college, and identify the specific service, program or activity being addressed. If several services are provided, identify each.

Stage 1 - Planning, Preparation, Training

This is the stage we are in now. We don’t know how long it will last, since no one can predict when the next pandemic influenza will strike. Everything that can reasonably be done now to prepare for it should be listed in this column. Examples are shown in Appendix E, and other samples may be provided as plans are developed. If a unit, division or college prefers, a sub-section may be designated for each service or program offered. It may be helpful to have separate sections for different activities, especially if some operations will continue, some will be curtailed, or some postponed. It is important to identify specific ‘trigger events’ that will signal when it’s time to implement a plan component.

Stage 2 – Pandemic Conditions Confirmed

The World Health Organization (WHO) has a ‘pandemic alert level’ chart that shows the world at level 3 as of February 2007. Alert level 6 will signify that a pandemic has definitely started. University administration will be checking the WHO chart on a regular basis, and will advise all colleges and work units when level 6 is confirmed. This will be the trigger to move University response to ‘Stage 2 – Pandemic Conditions Confirmed’. When this stage is reached, we may have only a short period of time to implement and adjust plans before the effects of the pandemic will begin to appear in Saskatchewan. This is the time when any additional stockpiling will be sanctioned and funded, and when public education activity will be raised to a much higher level. During this stage, we will distribute any required daily flu surveillance forms to units. There may even be enough time to exercise and test some of the strategies developed. At this time, any additional cross-training of staff should begin and all stakeholders should be advised about what to expect over the coming months.

WHO Pandemic Alert Chart (as of Feb 07)

Inter-pandemic phase New virus in animals, no human cases	Low risk of human cases	1
	Higher risk of human cases	2
Pandemic alert New virus causes human cases	No or very limited human-to-human transmission	3
	Evidence of increased human-to-human transmission	4
	Evidence of significant human-to-human transmission	5
Pandemic	Efficient and sustained human-to-human transmission	6

Stage 3- Pandemic Reaches Saskatchewan

Once the pandemic appears locally, the response will be implemented as the situation dictates. For example, your unit may experience far less than 35% absenteeism, so you may be able to continue uninterrupted operations. Conversely, there may be school closure orders issued, transportation restrictions and curfews imposed, etc., so you may be implementing your contingency plans for all the services you provide. At this point we will cope as best we can, and the effectiveness of the response will rely heavily on the effort put into these plans.

Stage 4 – Recovery after a Pandemic Wave

Pandemic influenza has historically occurred in 3 separate waves that could last up to 8 weeks each. The length of time between waves is variable. After a pandemic wave has passed, we intend to resume normal operations as quickly as possible. This stage requires us to evaluate the response throughout the wave, and to make any adjustments necessary to get ready for the next one. It includes replacement of personnel that fall victim to the flu, restarting postponed or cancelled services, and advising stakeholders about the changes underway. Any lessons learned during the 1st wave must be applied to the planned response for the 2nd wave. Medical experts have observed that the 2nd wave of pandemic influenza is usually the deadliest. Unit planners should be aware that those that did not catch the flu during the first wave could have just been lucky, or they could be immune. If they have developed immunity, they are the employees that we will depend on the most to get us through the next wave.

The development of a vaccine depends on the specific nature of the virus that caused the pandemic. Current methods of vaccine production involve the use of fertilised chicken eggs, and take about 6 months to complete. If a vaccine can be developed and distributed before the 2nd wave hits, the effects will be dramatically reduced.

A few words before you start:

- **Keep plans as simple as possible.** The complexity and depth of a plan should be proportional to the complexity of the system or item, its cost, and its importance to the mission of the University or unit. Don't "over plan".
- A contingency plan should be a **series of "action" statements related to loss mitigation and recovery** - nothing more, nothing less. Provide **practical information** that a person under stress can implement.
- Good contingency plans are usually developed using a **team approach**, involving key operational staff, users and management.
- Some strategies may be as simple as identifying a vendor that can quickly replace a critical piece of equipment. Others may involve outlining a series of manual steps to perform certain activities that are normally automated. You may be able to identify a resource, such as a private contractor, that can perform a critical function for you on a temporary basis
- Your plans may involve a technical solution (e.g. involving hardware, software, or equipment), a business solution (e.g. such as manual procedures for staff to follow), a "quick fix" (e.g. such as using rented equipment or facilities on an emergency basis), or combinations of all three.

* **Note: Completed sample worksheets are included in the Appendix E.** *

2.6 Worksheet #3 - Unit Pandemic Influenza Response by Stages

College/Unit	Stage 1 (Planning, Preparation, Training)	Stage 2 (Pandemic Conditions Confirmed)	Stage 3 (Pandemic Reaches Saskatchewan)	Stage 4 (Recovery After Pandemic Wave)

College/Unit	Stage 1 (Planning, Preparation, Training)	Stage 2 (Pandemic Conditions Confirmed)	Stage 3 (Pandemic Reaches Saskatchewan)	Stage 4 (Recovery After Pandemic Wave)

Appendices

Appendix A - Important Planning Considerations

College/Work Unit _____

Prepared By _____ Date _____

1. **Planning efforts should focus on the following:**
 - **assign someone to lead your college/work unit efforts**
 - **determine the priority of your programs ('high' - must continue, 'medium' - can be reduced in scope, or 'low' - can be delayed for 8 weeks or so)**
 - **prep contingency plans for 'high' programs (procedure manuals, cross training needs, work from home, etc.)**
 - **prep plans detailing how you would reduce/delay the others**
 - **include the 'trigger points' that would indicate when the contingency plan should be put into effect**
 - **ensure contact lists for staff & stakeholders (clients, suppliers, etc.) are current**
 - **identify any animal care issues pertaining to your programs**
2. **Base all planning on 35% absenteeism for 8 weeks per wave and 3 waves over 18-24 months**
3. **Campus-wide issues (unions, website, utilities, etc.) should be identified, but will likely be planned for centrally**
4. **Significant budget impacts should also be identified, but will also be dealt with separately**

General Information & Questions

Does your college/work unit have any emergency plans in place now? If yes, does it address a staff shortage situation?

Could your college/work unit prepare its own pandemic business continuity plan if proper guidance was provided?

Ensure the plan identifies the person(s) who would have responsibility for activating such a plan for your college/unit? Name a back up as well.

Would you be able to assign a priority rating to the various programs/services provided by your unit? (i.e. programs that must continue vs. programs that could be cut back or cancelled for periods of time)

Do you have enough staff to continue high priority services if there is an absenteeism rate of 35% over an 8 week period? If yes, indicate if there are any employees who could be temporarily assigned to another unit to provide assistance if needed. If no, prepare a plan to meet your human resource needs.

If possible, identify specific trigger points where staff shortages would indicate the need for a contingency plan to be activated.

Develop a communication strategy for advising employees/stakeholders about matters affecting/relating to the services you provide. (i.e. contact lists)

List those services which could experience a 'surge' in demand. (Note that these services must be addressed in your contingency plan.)

Planning Resource Needs

Obtain the input you need from others (both internally and externally) to prepare and review a business continuity plan for your college/unit. They may include:

- Senior administration
- College/unit staff
- Staff from other depts/units (including an emergency planner)
- Union/prof assoc, etc.
- Other stakeholders

Do you have a clear idea of the tasks/functions of your staff? Should the tasks be documented (procedure manuals) for use during a pandemic wave?

Assign someone to this pandemic planning project with a view to being 90% done by summer 2007.

If unable to assign someone, how do you propose to address this contingency planning issue?

Decision-making and Reporting

Ensure someone will be in charge of making decisions within your college/unit about service levels during a pandemic. Devise a succession list showing who is second, third, fourth in line in this respect.

Who in your organization has responsibility for collecting/managing information about staff absenteeism? Does that person have a back up?

Develop a mechanism to identify absentees within one hour of scheduled start times. Specify the number of absentees that would trigger implementation of the contingency plan.

Develop a procedure that alerts your unit management if there are resource (human or materiel) problems that affect the delivery of your services.

Ensure you have a mechanism for regular reporting to your senior management during an emergency event.

Prepare a contact list (including preferred method for contact – phone, fax, newspaper, etc.) of all those who need to be notified about a service reduction or cancellation of any 'medium' or 'low' rated programs.

Surveillance/Attendance

If any of your programs require employees to be in close contact with others for any length of time, consider alternate ways to provide service. i.e. social distancing, use of protective face masks, plexi-glass counter barrier, etc. Are there any other alternatives that you could employ?

Would your program be adversely affected if Public Health Officials closed schools, etc. as a protective measure? What would you have to do in the face of such an order?

If necessary, could employees work from home? Are there any other alternatives?

Do you have any data on the average number of staff absences due to illness and vacation at different times of the year (monthly rates)?

Is there a requirement within your college/unit to monitor and report increasing staff absenteeism due to illness to other authorities? (e.g., Health and Safety Coordinator, Public Health, etc... an increase in staff absenteeism due to illness might be attributed to the spread of infections among co-workers suggesting an outbreak of disease.)

Do you encourage your staff to take part in the annual flu shot campaign? How many of your staff got a flu shot this year?

Materials and Supplies

Do you maintain an equipment/supply inventory to support your programs?

Do you keep shelf stocks of needed supplies, or do you replenish just before you run out?

Are you currently stocked with all necessary supplies for regular day-to-day functions? Are there enough supplies to last through an 8 week flu pandemic episode? If not, how long would they last under normal circumstances?

Do you foresee a need to stockpile any resources that may be in short supply during a pandemic episode? If so, what items? Can you estimate the cost attached?

Does your college/work unit foresee a need to use specialized equipment or facilities during a pandemic episode? (Surgical masks, rubber gloves, etc.)

Do you have processes in place that will ensure additional equipment, e.g., pagers, cell phones, masks, rubber gloves, etc. can be obtained with minimum delay?

Collect the serial and model numbers of all computer equipment, printers, fax machines, photocopy machines, etc. in case repairs are needed.

Who authorizes repairs and supply/equipment orders? Arrange for other staff to have signing authority for purchases/acquisitions as a back-up.

Is there a pre-approval process in place for purchasing additional supplies? If not, how long does it take for approval to be granted?

Delivery of Services

Ensure there will always be someone present to make decisions about reducing levels of service and/or cancelling services temporarily.

How will reduction/temporary cancellation of regular services be communicated to the campus community, local stakeholders, the public and business partners? Determine the method(s) and ensure availability of contact lists.

Have you got programs that provide health services to the campus or to the public? If so, is the program/service likely to experience a 'surge' in demand? Determine and describe how you will handle any 'surge' in demand.

Could any of the college/unit services be provided from another work location? Remotely from home via computer links? Determine where alternate, if any, should be.

Is it possible that alternative service providers could assist with maintaining your critical services? What duties would they have and what additional training would they require? Are there insurance coverage issues involved?

Has your unit developed a list of staff skills and professional competencies that are transferable to other job functions?

Do you foresee a need to develop support services for workers, such as transportation, day-care, meals and grief counselling?

Human Resources

Do you have a current list of staff, suppliers, and clients complete with contact information? Assign someone with the responsibility to keep lists current.

Do you have a current list of recently retired staff (complete with telephone numbers) who may be contacted in the event of extreme staff shortages?

Could you have staff/students stranded out of province or out of country when a pandemic strikes? Determine how you would communicate with and/or support them under these conditions.

Assign 2-3 people to handle communicating with the employees in your unit about pandemic issues. Ensure you have enough for backup.

If your college/work unit has employees on emergency response team(s), are there back-ups for them? Keep track of the teams/persons involved.

Who in your college/work unit is responsible for payroll data submissions? Designate and train staff to backup this function.

In preparation for a staff shortage, identify critical roles/responsibilities that co-workers could fill. Are there any critical roles/responsibilities that could be contracted out or handled by volunteers?

Who has the authority to hire contract/temporary workers and to take on volunteers? Be sure you are aware of University rules in this regard. There are liability issues to be addressed for volunteers and re-assigned staff members who assist in non-traditional roles; be sure you are aware of rules governing this subject area. Coordinate with HRD if necessary.

Ensuring Program Continuity

Alternative methods to assist in program delivery include moving staff from one job to another (cross training and procedure manuals), use of retirees, work from home, shifts, contracting out, or making adjustments in HOW things are currently done, etc. List where any of these methods will work in your unit.

Describe what must be done to prepare your staff to switch to these methods.

If coordination/support from another college/unit is needed to facilitate these alternatives, describe how that coordination should be handled.

Do you have programs that must continue, but do not lend themselves to these alternatives? Are there any other alternatives that would work for these programs? For example, would the installation of a plexi-glass barrier allow you to maintain 'over the counter' services?

Training/Orientation

Start to prepare procedure manuals where deemed necessary. Detail any training that needs to be done to complement the manuals.

What orientation/education would you like to be arranged for your employees to raise awareness about a pandemic flu emergency?

Have employees been made aware of basic infection control guidelines to prevent the spread of the flu? (e.g., hand washing procedures; cough etiquette, social distancing, etc.)

Would your stakeholders need any special training/information if your plan involved changes to normal procedures? What would be required?

Is regular reporting to off-campus entities required? Would this be affected by a pandemic in any way? If so, figure out how you should adjust.

Communication

Identify what kind of notification of service reduction/cancellation you may need and ensure you have listed who needs to know about it. (Radio, newspaper, letter, phone to employees/students/public/business partners, etc.)

Should the notification of these stakeholders come from one of your own employees? If so, assign someone to handle this task...pick a backup as well.

Does your college/unit have contact lists for all your suppliers, alternate suppliers and equipment repair persons? Are the lists current?

Are there people in your organization who have sole access to incoming information, e.g., business information, incidence reports, complaints, etc., if so, can you arrange for alternates to receive this information?

Does your college/work unit maintain a central inventory of passwords to office equipment and electronic files? Is there an alternate for the person who has responsibility for this inventory?

If your information technology person is ill, who would you call if you experience computer problems?

Does your college/work unit require two-way radios/cell phones to communicate with each other during and/or after office hours? Is there an alternate form of communication if needed? (Either system could fail.)

If there is a problem with physical access to your work location, who should be called? Should there be a back-up?

If regular mail service is interrupted, how much would that impact your operations? What alternate arrangements could you make?

Does your organization send out time-sensitive letters or documents? Is there a back-up system for these?

How are courier packages generally received and sent out? Could this method continue during a pandemic? If not, are there alternatives?

Do you know how public service announcements and news releases are handled? Do you need to coordinate your college/unit news releases, etc. with anybody else? List those involved.

Do you have a website (aside from the main campus one) where employees and the public can seek information/updates on service delivery news?

Recovery

Who will have the authority to notify the various employees, students, etc. regarding the return of normal service?

Create a team who will be responsible for evaluating your unit response after each pandemic wave.

Determine which factors should be examined as part of the evaluation.

Capture any lessons learned.

Using the experience gained in the first pandemic wave, amend your pandemic contingency plans to improve your response for the next one.

Appendix B - Sample Worksheet #1 - Unit Program Priorities and HR Requirements

Unit/Division/College _____ Date _____

Prepared By _____ Phone _____ Page ____ of ____

Priority	Service/Program or Activity	Number Current Mgmt & Supervisor Staff	Number Mgmt & Supervisor Remaining with 35% Absent	Min Number Mgmt & Supervisor Staff Needed	Current Number Regular Staff	Number Regular Remaining with 35% Absent	Min Number Regular Needed	Current # Specialist Staff	Number Specialist Remaining with 35% Absent	Min Number Specialist Needed	Potential for Surge increase	Other Sector assistance	Work from home potential
High	Cashiers	1	.65	1.0	6	3.9	4.0	0	0	0	nil	nil	nil
High	Accounting	1	.65	1.0	11	7.15	6.0	0	0	0	nil	nil	nil
High	Customer Service	1	.65	1.0	12	7.8	8.0	0	0	0	nil	nil	nil
High	Communications – Public Information	2	1.3	1.0	16	10.4	12	3	1.95	2.0	yes	yes	yes
Med	Maintenance	1	.65	1.0	6	3.9	4.0	0	0	0	yes	yes	no
Low	Archives	1	.65	0	4	2.6	0	0	0	0	no	no	no

APPENDIX C - SAMPLE WORKSHEET #2 - PANDEMIC INFLUENZA RISK SSESSMENT

College / Department: _____ **Building / Room No:** _____

Name of Person Preparing Form: _____ **Phone:** _____ **Date:** _____

This form is designed to help units identify risks and assess the potential impact of Pandemic Influenza related items and events. Items shown under each column are for illustration purposes only, and are intended to provide users with an example of what is needed to complete the form. Users should add additional categories or factors as necessary.

Please provide a rough estimate of the consequences to your unit and/or the University as a result of a single 8 week pandemic event that creates a 35% staff shortage situation.

PROGRAM/ACTIVITY	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
<i>Name of Program/Activity</i>	high	1 day	i.e. other units need our finished products to continue operations	1. Determine criticality of entire work process to organization 2. Develop continuity plan if critical
a) Human Resource Issues Unit management (decision making, supervision...need 3 of 5)	high	2 days	loss of control & interruption of work flow	yes... succession plan needed, trg where necessary, ensure all 5 managers can cover where necessary
Unit administration (payroll/benefits/scheduling etc...need 4 of 6)	high	4 days	legalities / low employee morale	yes...cross training necessary to ensure pay/benefits continue uninterrupted... train 2 more staff as back-up due to criticality of function
Line staff (need 13 of 20)	high	1 day	All the above	35% absenteeism leaves 13 staff available; can operate with 13, no procedure manual necessary here.
b) Service Interruptions				
Computers	high	hours	Minimal productivity in programs 1 & 3	Consider loading a laptop or two with needed data.

PROGRAM/ACTIVITY	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
Copier(s)	moderate	1-2 days	Minimal	Obtain scanner; If necessary, scan docs and use computer printer; use other copier(s) in building
Fax Telephones	high	hours	Serious - unreachable by clients, cumbersome work-a-rounds	Maintain list of employee cell phones - devise compensation method for employees
Consumables (paper, fuel, animal feed, etc.)	high	hours	Work stoppages due to lack of resources	Arrange for stockpiling, alternate supply sources, guaranteed supply contracts, etc.
Utility Interruptions	High	minutes/hrs	Safety hazards, frozen pipes etc., equipment damage, animal deaths	Arrange for alternate housing for animals, develop procedures with FMD & WCVM (transportation, feed stocks, etc)
c) Health, Safety & Environmental Concerns	high	unknown	Spread of infection	
Personal contact with clients	high	minutes	Spread of infection, loss of client & employee confidence	Approx 100 clients/day are serviced... need plexi-glass barrier installed at front counter to eliminate need for N95 masks
d) Security Concerns	high	minutes		
Access to work spaces	high	minutes	Employee lock-out; delay in gaining entry; loss of productivity	Address alternate means of gaining access/egress in unit plan... consider issuing more keys
Security of university assets	high	minutes	Theft of/damage to critical equipment, data, etc.	Discuss and develop plan in cooperation with DCS, do security sweep prior to daily closing
Key employees	high	hours	Inability to access secure data due to only key employees holding passwords	Include 'emergency password' issue in contingency plan
e) Animal Care Issues	high	hours	animal health complications, breach of care violations	Must ensure animals are cared for or prepare to begin culling (develop criteria)
Daily feeding of herd animals	high	hours	As above	Ensure adequate staff available to meet animal needs on daily basis... see HR

PROGRAM/ACTIVITY	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
Animal health care issues	high	hours	As above plus possible need to cull stock	Determine trigger points for culling based on species, breed, daily needs, etc. Add more vets to call list
f) Network Computer Services	high	high	Major if longer than 1 day	
- email	high	hours	Serious communications delays	Maximize usage while available; ensure client contact lists are current, use fax & snail mail as back-up
- websites	high	hours	Loss of key communications capability	As above – serious issue; no alternative available if lost
- access to files	high	hours	Inability to access & process work residing on servers in utility failures	Determine feasibility of readily available backup data (i.e. data on discs) As above – serious issue
g) Unit Computer Systems and Applications	high	minutes	Drop in productivity	
Desktops/laptops				
a. maintenance	a. high	a. minutes/hrs	a. Drop in productivity	a. establish priority maintenance schedule with IT contacts; obtain UPS for data back up in power outage
b. availability	b. med	b. minutes/hrs	b. as above	b. based on 35% absence, there should always be a spare computer or two as back-up
Services (email, internet, etc.)	high	minutes/hrs	Delay in communications with clients; Lack of critical work tool & communications capability will create disruptions & delays in work processing	We intend to take full advantage of email & internet during a pandemic episode... max effort should be directed to ensure ongoing operability of these systems
Applications	high	minutes/hrs	AutoCad loss would hurt unit	Back up <u>all</u> unit data...ensure back up of Autocad is available to load if needed
h) Unit Specific Equipment				
fume hoods	high	hours	Drop in productivity, safety impact	UPS back-up, or contracting out of critical work

PROGRAM/ACTIVITY	Program Importance (high, med, low)	Without Consequence (sec, min, hrs, days)	Possible Consequence	Planning Needs
workshop power tools/equipment	high	minutes/hrs	inability to maintain/repair some campus equipment	Use UPS backup, consider purchase of several essential cordless tools
h) Other Items affected by a severe staff shortages or external events				
a. maintenance of unit equipment	a. high	a. minutes/hrs	a. lots of equipment - depends on what needs fixing	a. arrange for back-up for maint staff... consider use of contractors in urgent cases
b. purchasing	b. med	b. hours/days	b. depends on urgency of purchase	b. ensure availability of back-up purchase card, write job description for purchasing employee to ensure continuity
c. delivery of goods	c. med	c. depends on item ordered	c. depends on item ordered	c. arrange for off-site delivery point; coord with Purchasing

...etc.

Complete this form by repeating each of the categories (Human Resource Issues, etc.) listed for every program or activity you provide... feel free to add additional categories that may be important to your unit.

Appendix D - Sample Worksheet #3 - Pandemic Influenza Response by Stages

College/Unit	Stage 1 (Planning, Preparation, Training)	Stage 2 (Pandemic Conditions Confirmed)	Stage 3 (Pandemic Reaches Saskatchewan)	Stage 4 (Recovery After Pandemic Wave)
Colleges/Work Units/ Research Projects	<ol style="list-style-type: none"> 1. Attend any pandemic related training on preparation of unit contingency plans 2. Based on guidance provided by Pandemic Planning Workgroup, prepare own unit pandemic contingency plans 3. Identify programs/services that can be cut-back/cancelled; where & in what order unit cut backs should occur; identify areas where a surge in demand is expected & what is needed to meet that surge; identify any areas where activity MUST continue at current pace regardless of pandemic 4. Prepare procedure manuals & conduct cross training where deemed advantageous 5. Determine desirability/possibility of work from home, electronic delivery of classes, staggered shifts etc; begin preparatory work to facilitate 6. Acquire any additional equipment needed i.e. radios, ID vests, masks, rubber gloves, etc...stockpile pandemic related items where necessary 	<ol style="list-style-type: none"> 1. Move unit to pandemic response posture; sharp increase in preparedness focus 2. Verify accuracy of contact lists and ensure contingency plans are updated and ready 3. Acquire and distribute pandemic daily report forms; train staff on use 4. Conduct job cross training where identified; determine alternate shifting schedules 5. Conduct training on safety equipment; issue any pandemic related equipment. 6. Prepare to cut back/cancel identified programs/services; initiate any alternate program delivery methods 7. Test any 'work/teach from home' systems intended for use during pandemic wave 8. Notify all stakeholders of your pandemic posture implications & adjust where needed 	<ol style="list-style-type: none"> 1. Implement pandemic plans 2. Track employee absences & submit daily reports to UEOC 3. Cancel vacations where necessary/transfer staff to meet shortfalls 4. Enforce pandemic health guidelines in the workplace 5. Coordinate work unit response with UEOC 	<ol style="list-style-type: none"> 1. Assess state of work unit 2. Bring unit to normal status; replace staff where necessary 3. Attend/provide input at post-pandemic debriefings, prepare unit report for submission to UEOC. 4. Review lessons learned 5. Adjust unit pandemic plans where identified 6. Make adjustments in preparation for next pandemic wave

College/Unit	Stage 1 (Planning, Preparation, Training)	Stage 2 (Pandemic Conditions Confirmed)	Stage 3 (Pandemic Reaches Saskatchewan)	Stage 4 (Recovery After Pandemic Wave)
	7. Ensure all staff, supplier, etc. contact lists are current and accurate; conduct test calls to verify 8. Ensure staff has access to family emergency planning information; assist where necessary 9. Check with suppliers to determine potential problem areas, rectify where possible			

TEMPLATE - SAMPLE ONLY

Appendix E - Pandemic Influenza Planning Resources

The following resources are available to assist units to develop pandemic influenza plans:

- 1. User Guide and Workbook** has been developed as the primary reference for individuals that have responsibility for college/work unit pandemic planning efforts. It contains three sections: a Guide covering flu information, planning considerations and procedures; a Workbook with planning worksheets and instructions for completing them; and appendices with samples of completed worksheets. *The sample forms are NOT to be viewed as anything other than examples.*
- 2. General Pandemic Planning Information Presentations** - At least 4 presentations will be scheduled at different times and dates to assist individuals that have been selected by their units to coordinate or develop pandemic plans. The presentation will cover general information about pandemic influenza, potential impact, infection control, planning approaches and sample strategies.
- 3. Unit Presentations or Workshops** - Should a unit wish to arrange a separate, custom presentation for its personnel or planning group, please contact **Don Litz** at don.litz@usask.ca or pandemic@usask.ca. Where possible, we will be pleased to accommodate.
- 4. Consultation and Guidance for Units** - If units require clarification, additional information or have questions not addressed in the guide, please contact Don Litz at don.litz@usask.ca or pandemic@usask.ca or 966-1214. If necessary, we will obtain specific expertise to respond to your question.
- 5. Pandemic Influenza Website** at www.usask.ca/pandemic provides general information, a FAQ section, information about the Pandemic Planning Workgroup (PPW), links to other useful websites (including one that addresses family pandemic planning concerns), copies of the Guide and Workbook, and blank worksheets if needed.
- 6. Pandemic Planning Workgroup (PPW)** - If you need additional assistance or information, please e-mail pandemic@usask.ca or contact one of the following PPW committee members:

Don Litz (Chair)
Risk Management and Insurance Services
don.litz@usask.ca

Corinne Harris
Department of Health, Safety and Environment
corinne.harris@usask.ca

Dr. Hank Hees
Student Health Centre
hank.hees@usask.ca

Bob Ferguson
Department of Campus Safety
bob.ferguson@usask.ca

Tari Forrest
Human Resources Division
tari.forrest@usask.ca

Patty Martin
Office of Communications
patty.martin@usask.ca

Dr. Ernest Olfert
Animal Resources Centre
ernest.olfert@usask.ca

Nowell Seaman
Risk Management and Insurance Services
nowell.seaman@usask.ca