

# Orientation on Pandemic Management in Ontario's Health Sector

Briefing with the Long-Term Care Commission  
September 8, 2020

# Purpose

- Provide a high level overview of the response to the pandemic, including initial planning, Command Table structure, and supporting workstreams.

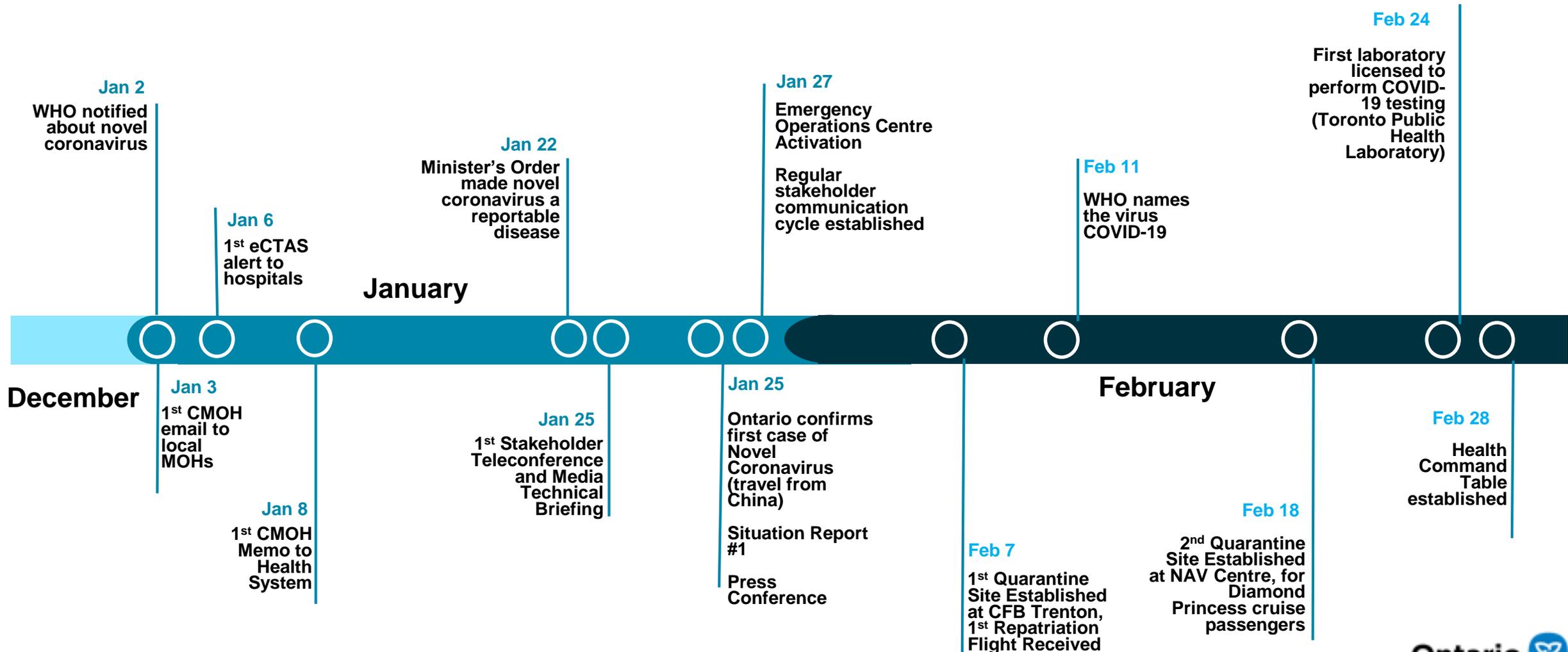
# Pandemic Planning and Preparedness

- In 2013, the Ministry of Health and Long-Term Care updated the **Ontario Health Plan for an Influenza Pandemic (OHPIP)** to reflect the lessons learned and best practices from the 2009 H1N1 influenza pandemic, as well as the latest scientific and technical evidence on influenza and emergency management.
- Earlier versions of the OHPIP were preparedness guides, describing the steps that provincial health system partners should take to prepare for an influenza pandemic.
- The updated 2013 version is a scalable response plan, describing the roles and responsibilities of provincial health system partners in an influenza pandemic, as well as outlining anticipated response activities based on the severity of the pandemic and other factors.
  - The plan includes foundational chapters on health sector communications, surveillance, occupational health & safety and infection prevention & control, public health measures, outpatient care and treatment, and immunization.
- Leveraging its existing emergency planning and preparedness activities, Ontario's COVID-19 health system response was guided by the OHPIP.
- The OHPIP provided the foundation for the COVID-19 response and informed the development of the COVID-19 Health Command Table and its workstreams.

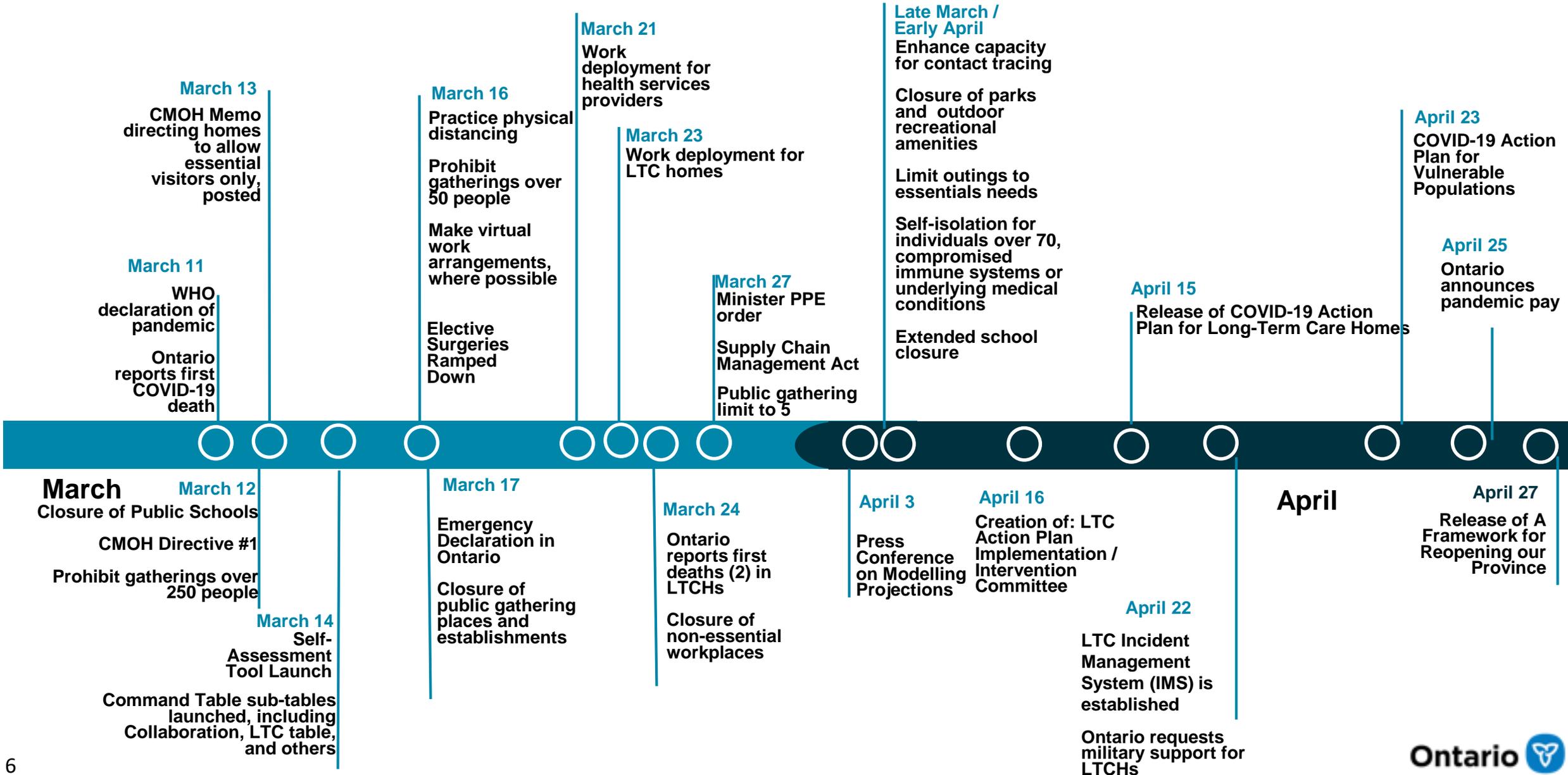
# COVID-19 Response: Timeline Overview

- The Ministry of Health, in collaboration with partners in the health care system, took decisive actions to:
  - flatten the infection curve of the novel coronavirus and mitigate against the overloading of the health system through the implementation of extensive public health measures; and
  - increase the capacity of the health system to respond to increased demands across the full continuum of care.
- The next four slides provide examples of some of the types of activities that formed Ontario's health system COVID-19 response from December 2019 to August 2020.
  - Please note that the following slides provide an overview of the key activities led by the Ministries of Health and Long-Term Care to enable the health system COVID-19 response and is not an exhaustive list of all activities. A more detailed timeline of activities was provided in a separate chronology document.

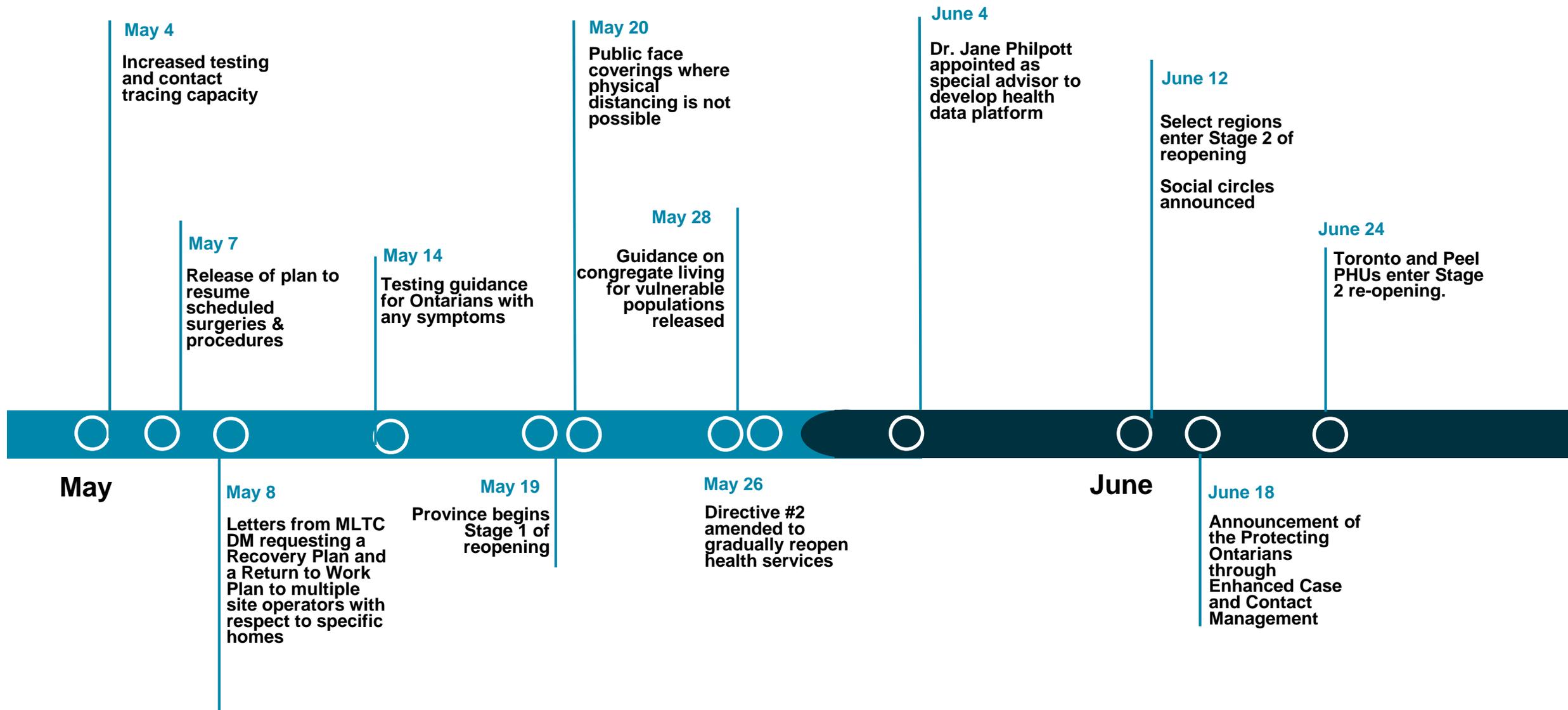
# COVID-19 Response Timeline: December 2019 to February 2020



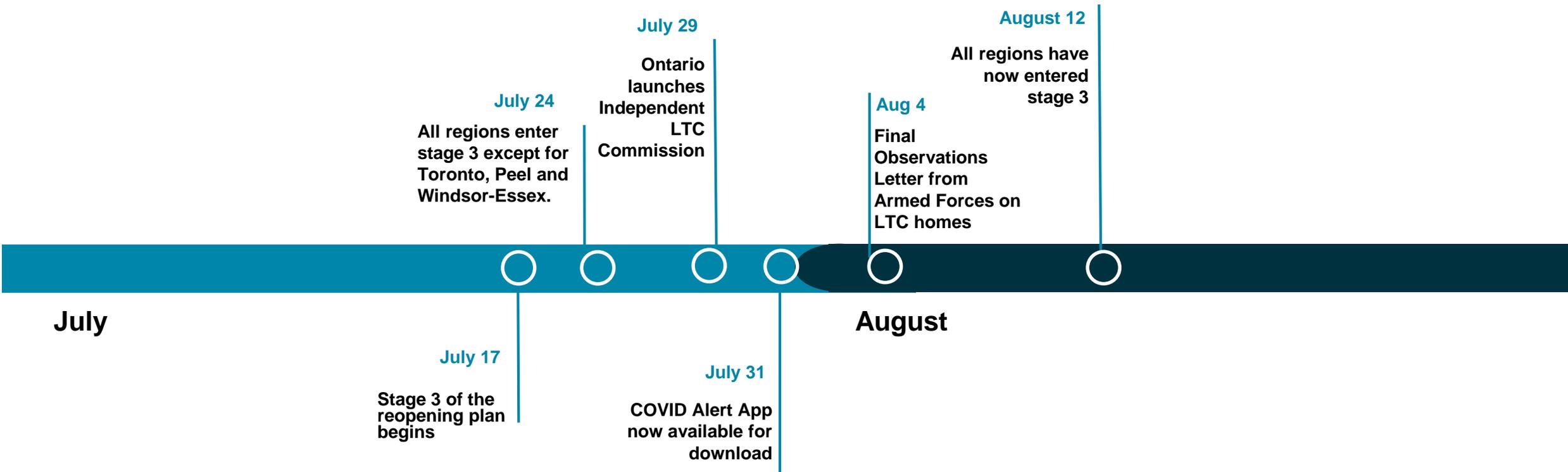
# COVID-19 Response Timeline: March to April 2020



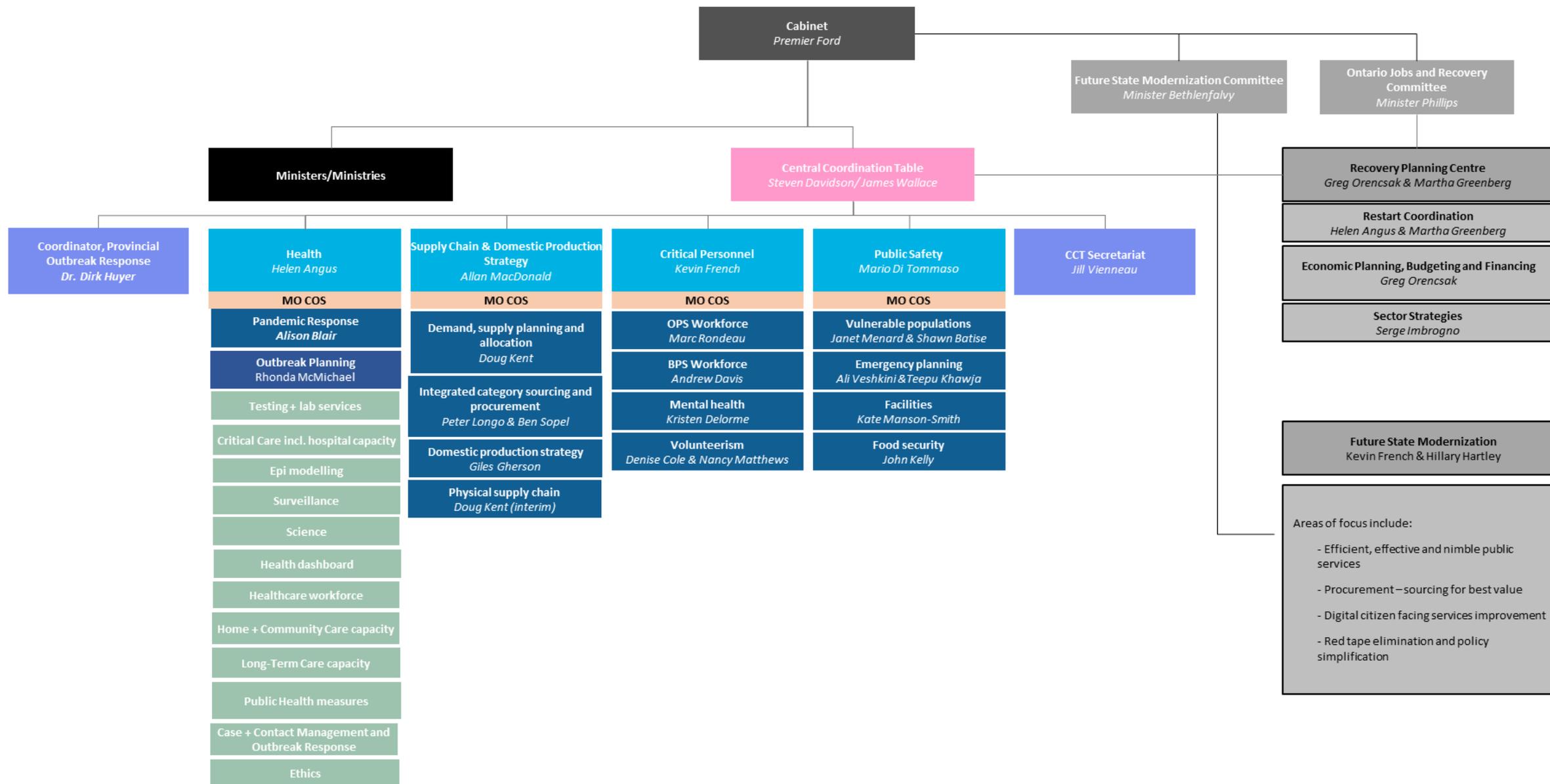
# COVID-19 Response Timeline: May to June 2020



# COVID-19 Response Timeline: July to August 2020



# COVID-19 Response Structure – Government-wide



# COVID-19 Response Structure: Central Coordination Table

## Mandate

**Mandate:** The Central Coordination Table (CCT) drives the overall Government response to COVID-19, under the direction of Cabinet, related to the immediate health and humanitarian response

## Responsibilities

- **Support the COVID-19-related action across Government related to the immediate health and humanitarian response**
  - Define mandates for Command Tables within CCT and appoint leaders
  - Support policy decisions made by Cabinet (through Command Tables, Cross-Functional Teams and the Secretariat)
  - Engage Ministries as appropriate to deliver specific initiatives (at Provincial and Regional levels)
  - Provide direction on reprioritizing resource allocation as needed (including across Regions)
- **Remove barriers**
  - Unblock issues within Government to accelerate pace and effectiveness of delivery
  - Work with ministries to recommend policy options to Cabinet where needed
  - Empower teams to act within clear parameters
- **Lead communication**
  - Support internal communication
  - Coordinate messaging from within CCT with Communications
- **Track progress and establish accountability**
  - Review progress by Command Tables and cross-functional teams
  - Hold individuals to account for delivery

## Membership

### Co-Chairs

- Secretary of Cabinet
- Premier's Chief of Staff

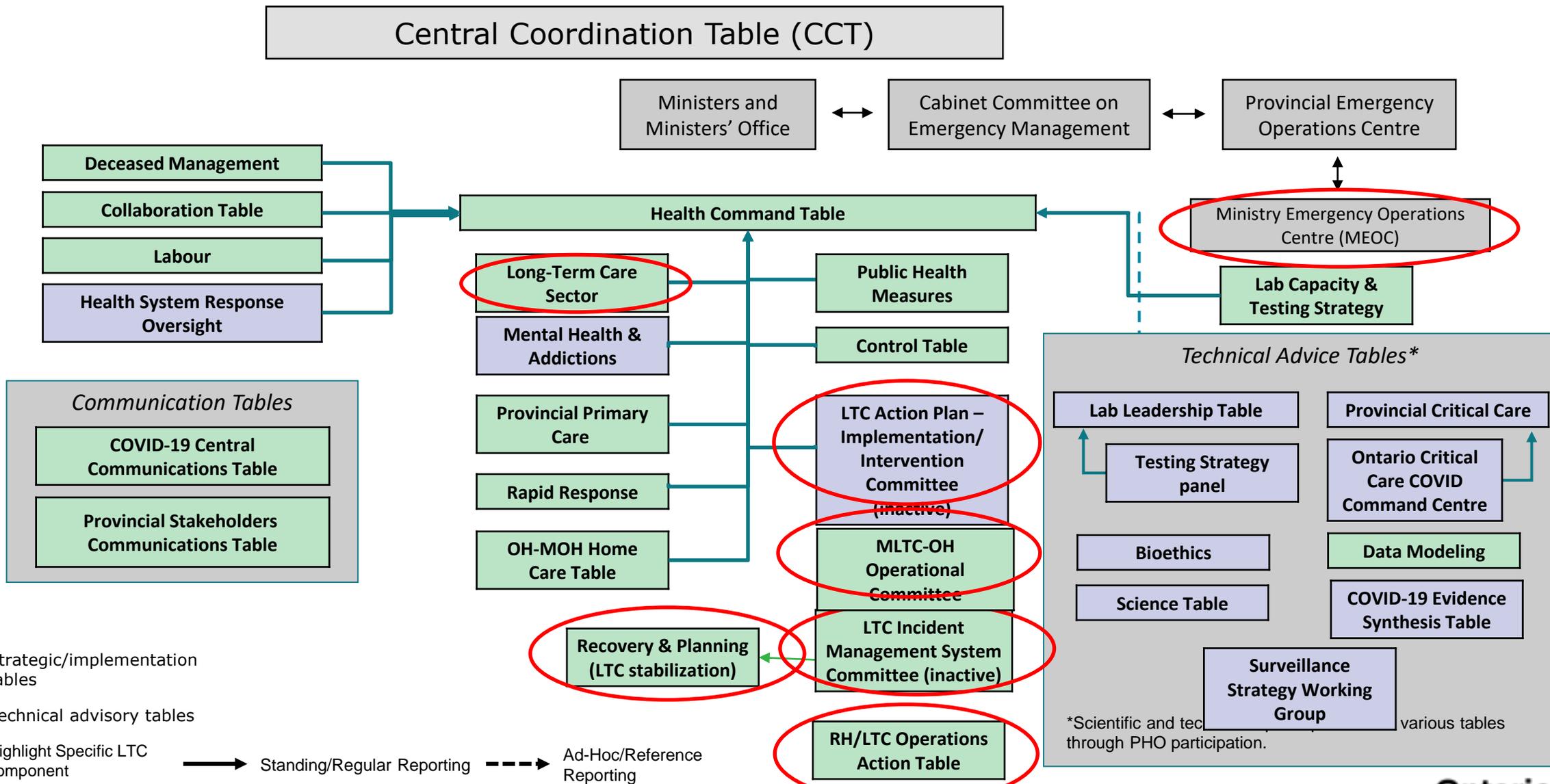
### Members

- Command Table Leads
  - Health
  - Supply Chain & Industrial Strategy
  - Critical Personnel
  - Public Safety
- DMs for:
  - CO Communications
  - CO Policy
  - Digital & Data
  - Finance
  - Treasury Board
  - Intergovernmental Affairs
  - SolGen
  - MGCS

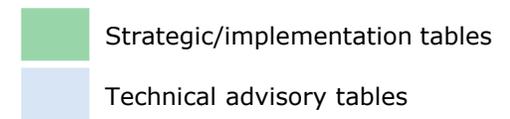
# COVID-19 Response Structure: Health Command Table

- The Health Command Table was established in Feb 2020 by the Ministry of Health to serve as a single point of oversight, executive leadership and strategic direction to guide Ontario's response to COVID-19.
  - Reporting to the Minister of Health, it is led by Dr. David Williams, Chief Medical Officer of Health, Helen Angus, Deputy Minister of Health, and Matthew Anderson, President and CEO of Ontario Health.
  - It includes cross-ministry representation, including from Long-Term Care and Seniors and Accessibility, as well as external experts and stakeholders who each serve voluntarily.
- Discussions and recommendations from the Health Command Table have been informed by the provincial response structure sub-tables (e.g., the Incident Management Structure Table for Long-Term Care) and work across multiple workstreams focused on key priorities.
- These workstreams have evolved over time to be responsive to the pandemic's trajectory, shifting from a focus on emergency response and outbreak management to stabilization, recovery and preparedness for future waves of the pandemic. Current workstreams are organized to achieve the major deliverables and milestones of the Fall Preparedness Plan (see Slide #19).
- It is important to note that neither the Command Table nor its sub-tables have decision-making authority and that their role is to serve as a forum for discussions which influence and inform eventual decision making.

# COVID-19 Response Structure: Health Command Table

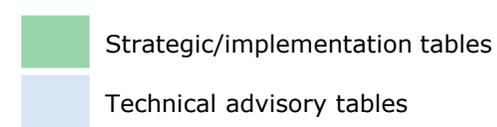


# COVID-19 Response: Sub-Table Overview



<p><b>Command Table (Est. February 2020)</b> Single point of oversight executive leadership and strategic direction to guide Ontario’s response to COVID-19.</p>	<p><b>Collaboration Table (Est. March 2020)</b> Provide strategic advice to the Command Table based on engagement with key health sector organizations.</p>
<p><b>Labour Table (Est. March 2020)</b> Provide strategic advice to the command table on issues related to labour unions and agreements.</p>	<p><b>OH-MOH Home Care Table (Est. March 2020)</b> Provides a forum for home and community care providers to raise issues and work with Ontario Health and the ministry to address issues.</p>
<p><b>Control Table (Est. April 2020)</b> Coordinate oversight, access and distribution of PPE to health and non-health organizations, maintain a line of sight into the availability of PPE, and optimize the distribution of PPE to health service providers and the broader public service.</p>	<p><b>LTC Incident Management System Committee (Est. April 2020, Inactive as of Aug 2020 – replaced by Recovery and Planning Table)</b> Creating and implementing an Incident Management System approach to long-term care homes in critical need to ensure they have the health human resources, IPAC supports and personal protective equipment (PPE) they need to stabilize.</p>
<p><b>Provincial Stakeholders Communications Table (Est. April 2020)</b> To provide a forum for stakeholders to identify and address stakeholder and public communications needs based on their work on COVID-19. To use the table as a mechanism by which to share resources so that duplication is avoided and efforts are streamlined.</p>	<p><b>Long-Term Care Sector Table (Est. March 2020)</b> To provide advice and support in addressing issues related to Long-Term Care, including effective testing and outbreak containment.</p>
<p><b>Data Modelling Table (Est. March 26, 2020)</b> Provide technical advice and updates on the development and use of epidemiological modelling to respond to the pandemic.</p>	<p><b>Provincial Primary Care Advisory Table (Est. April 16, 2020)</b> To provide advice to the ministry on key issues affecting primary care providers (PCPs). The Table provides a link between frontline PCPs and decision-makers at the regional and provincial level to streamline the critical information, guidance and supports specific to primary care providers and to complement the mandate, activities and direction of current ministry or public health (CMOH) COVID-19 structures.</p>
<p><b>Public Health Measures Table (Est. April 2020)</b> Provide advice to the Chief Medical Officer of Health (CMOH) on public health measures (i.e., implementation, assessing effectiveness, scaling back) to prevent or slow the transmission of COVID-19.</p>	<p><b>Rapid Response Table (Est. May 2020)</b> The Rapid Response Table ensures all parts of Ontario’s public health response is leveraging available data to rapidly identify and respond to emerging provincial and local issues and trends relating to COVID-19 spread.</p>
<p><b>Deceased Management Cross Functional Table (Est. April 2020)</b> Leads the planning and implementation of the end-to-end deceased management.</p>	<p><b>Lab Capacity &amp; Testing Strategy (Est. April 2020 and now in transition)</b> Coordinate the lab capacity and testing strategy elements with a focus on key priorities and population groups across sectors, while ensuring timely and sufficient lab capacity.</p>
<p><b>COVID-19 Central Communications Table (Est. March 13, 2020)</b> To ensure aligned, effective and consistent public and stakeholder communications on COVID-19</p>	<p><b>MLTC – OH Operational Committee (Est. July 24, 2020)</b> Forum to coordinate OH’s provincial and regional responses to local/LTC home. A key priority is to drive</p>

# COVID-19 Response: Sub-Table Overview



## Recovery and Planning Table Long-Term Care Sector Stabilization (Est. August 2020)

It follows from the Long-Term Care (LTC) Incident Management Structure that was put in place to support the response to the COVID-19 public health emergency in the long-term care sector. Maintain gains achieved in protecting residents and staff and managing the COVID-19 public health emergency.

## RH/LTC Operations COVID Action Table (Spring 2020)

Discuss issues and seek advice and direct delivery/operational perspectives and input. Membership includes LTC and RH sector operators and associations.

## Health System Response Oversight Table (Est. March 2020)

Leads the operational management and co-ordination response to COVID-19 pandemic. Reports to COVID-19 Command Table. Discusses and identifies actions to address issues or challenges encountered by the Regional Steering Committees and/or the provincial tables.

## LTC Action Plan – Implementation/Intervention Coordination (Est. April 2020, Inactive as of April 30, 2020)

Time limited table aimed at identifying and organizing work streams to implement

## Provincial Critical Care Table (Est. March 2020)

Support local and regional critical care planning by producing provincial guidance, processes, and solutions for in-scope issues; connect and collaborate with other provincial tables/activities on connected issues; disseminate communications for in-scope and connected issues

## Lab Leadership Table (Est. March 25, 2020)

Support capacity development and resource management in the lab sector, and connect in with lab testing facilities to identify and address operational issues pertaining to COVID-19.

## Ontario Critical Care COVID Command Centre (Est. March 2020)

Reports into the provincial critical care table (see above) and is an operational group that manages critical care capacity and equipment, responding to surges in real time.

## Testing Strategy Panel (Est. April 5, 2020)

Reports to the lab testing table (see above) and is responsible for developing an evidence-based province-wide testing strategy for COVID-19. Updates testing guidance and documents over the course of the pandemic. Identifies and provides guidance around testing prioritized populations. Considers alternative testing approaches and develops demand estimates.

## Mental Health & Addictions Table (Est. Late March 2020)

Responsible for addressing issues related to supporting service continuity in mental health and addictions services, targeted guidance for the mental health and addictions sector, and mental health and addictions supports for health care workers.

## Bioethics Table (Est. March 2020)

Provide ethical guidance and representation at both provincial and regional tables to support decision-making throughout the response.

## Science Advisory Table (Est. July 2020)

Thee Science Advisory Table will work with leading scientific experts in key COVID-19 fields to provide a weekly summary of important scientific evidence for the command Table and to review and critique the underlying evidence and to share where relevant.

## COVID-19 Evidence Synthesis Table (Est. April 2020)

Several groups with evidence synthesis / knowledge translation expertise are currently working to provide high-quality, relevant, and timely synthesized research evidence about COVID-19 to inform policy makers, health care practitioners, administrators, and citizens as the pandemic continues.

## Surveillance Strategy Working Group (Est. July 2020)

Advising the Chief Medical Officer of Health (CMOH), the Epidemiologic Surveillance Strategy Working Group will develop and oversee a COVID-19 epidemiologic surveillance strategy and related implementation plan, to improve Ontario's understanding of the presence, distribution and impact of the disease in Ontario throughout the pandemic phases.

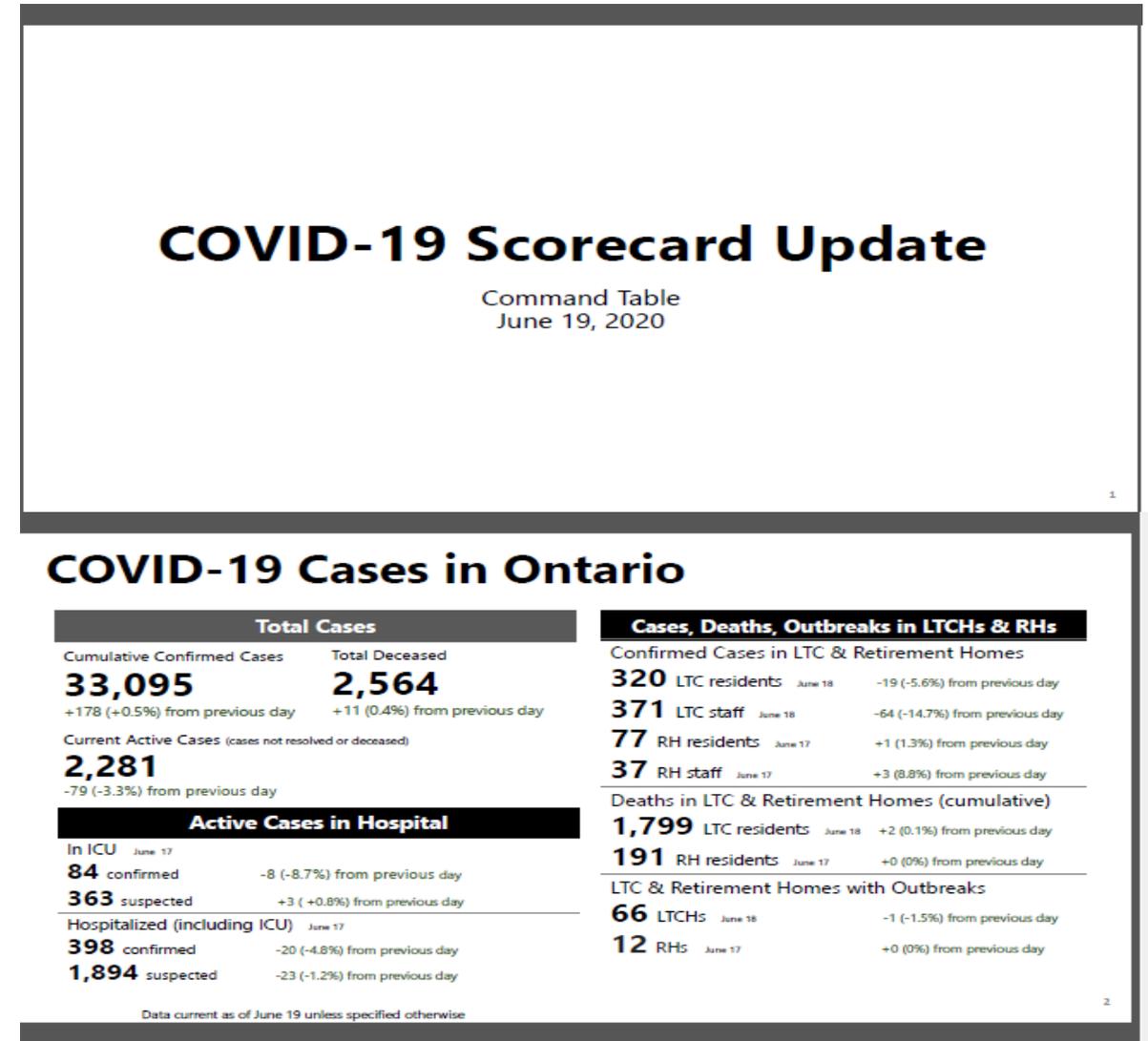
# COVID-19 Response: Guidance Documents, Directives and Memos

- MOH and MLTC have issued a number of documents to the health system that have informed and enabled the COVID-19 response. Many of these documents have had input from experts, including Public Health Ontario, Ministry of Labour, Training & Skills Development, Office of the Chief Medical Officer of Health and stakeholders where appropriate.
- A full list of all documents that been provided to the system, including Minister's Orders, CMOH Directives, ministry memos, and summaries of each of the Health Command Table meetings, can be found at:  
[http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/dir\\_mem\\_res.aspx](http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/dir_mem_res.aspx)

# COVID-19 Response: Monitoring Progress

The **COVID-19 Command Table Scorecard** was created in March 2020 to provide regular and timely reporting of key COVID-19 metrics, including outcome measures for the COVID-19 health system response and measures for system capacity.

- The Scorecard is used to monitor both the infection curve of the virus and the effectiveness and ongoing progress of system activities to address the pandemic, and to inform government decision making on next steps. The included metrics have changed over time to reflect the evolution of the pandemic and the shifting priorities for the system response.
- The Scorecard is updated for every Health Command Table meeting.



# COVID-19 Response: Key System Partners

Over 200 individuals from external partners and stakeholders have supported shared planning and action across the different elements of the province’s COVID-19 response.

- While dozens of external organizations have been involved in the COVID-19 response, Ontario Health (OH) and Public Health Ontario (PHO) have been the most closely involved.
  - In addition to their active participation at the Health Command Table, and various advisory and technical tables, both agencies have been critical in the implementation and operationalization of the provincial COVID-19 response.

## Examples of Implementation/Operational Responsibilities

OH	<ul style="list-style-type: none"> <li>• Regional distribution of supplies (e.g., PPE) that have been allocated provincially</li> <li>• Regional system capacity planning (through five regional tables), including health human resources planning and restarting elective surgeries</li> <li>• Development of guidance documents (e.g., <i>A Measured Approach to Planning for Surgeries and Procedures During the COVID-19 Pandemic</i>)</li> <li>• Coordination and reporting of laboratory network</li> </ul>
PHO	<ul style="list-style-type: none"> <li>• COVID-19 laboratory testing (PHO Lab) and scientific support (test development and validation, input into testing strategy)</li> <li>• COVID-19 data collection, monitoring, analysis and reporting</li> <li>• COVID-19 case and contact management (i.e., resource support to public health units)</li> <li>• Development of evidence products to inform government policy</li> <li>• Provide scientific and technical advice and guidance to the public health units and other parts of the health care system as well as other sectors (e.g. congregate living)</li> </ul>

# COVID-19 Response: Stakeholder Engagement

In addition to the involvement of stakeholders in the Health Command Table structure, key methods were developed to keep stakeholders apprised of pertinent information about the pandemic:

- Daily **Situation Report** emails from the MOH Emergency Operations Centre (MEOC) have been provided since January 25, 2020 to 1,543 subscribers.
- The MOH MEOC has held **daily weekday teleconference updates** with 504 individual subscribers since January 25, 2020. Subscribers include a wide range of health and broader sectors and providers and include Indigenous partners, hospitals, regulatory colleges and others. These calls became weekly as of the end of July 2020
- The **Collaboration Table meets weekly**, and includes 31 health system stakeholder organizations. Updates are provided from the MOH, MLTC, OH, and PHO, followed by a question and answer period.
- The MOH and Ontario Health convened **46 reflection and planning ahead focus group sessions** between July 6 and 22, 2020 with approximately 300 experts and thought leaders from across the health care system and related sectors. They provided feedback on what worked well during the COVID-19 response and identified areas for improvement.
  - Moving forward to the Fall, the MOH and MLTC have an opportunity to leverage and build on the successes and lessons learned from wave one to prevent, to plan and to bolster the system where supports are needed most.

# COVID-19 Response: MOH Fall Preparedness Plan (confidential)

The fall preparedness plan takes an integrated and comprehensive approach that leverages multiple sectors, to support a robust response to COVID-19 and the delivery of services across the entire patient journey.

## Six key readiness objectives to focus and track Ontario's preparations

### Prevention and Protection



1. Maintain public health measures



2. Immunize against influenza



3. Quickly identify manage & prevent outbreaks

### Integrated Health System Capacity Plan



4. Safely reduce health service backlogs



5. Prepare for surges in cases and support delivery of routine health service needs



6. Recruit/retain, train, and support health care workers, families and caregivers

### Key Areas of Focus:

- Protecting our vulnerable populations, particularly in long-term care, with improved Infection Prevention and Control (IPAC) supports
- Creating capacity outside the hospital setting to accommodate decreased capacity in long-term care homes
- Reducing the backlog of surgeries and procedures
- Sufficient testing capacity to support re-opening and to inform outbreak management
- Sufficient supply of health human resources