

Alberta Health and Wellness

**Pandemic Response
Governance Framework**

September 2009

**Government
of Alberta ■**

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BACKGROUND

Acton Consulting was contracted by Alberta Health and Wellness to assist in the development of a governance model to enable timely cross-ministry decision-making during a pandemic response.

The World Health Organization (WHO) has declared the recent H1N1 virus as a global pandemic (Phase 6), meaning community-level outbreaks have occurred in multiple countries in different WHO regions. Given the potential for a more serious influenza wave in the fall, the Deputy Ministers' Committee on Pandemic Influenza needs to evaluate different options available to the Government of Alberta (GOA) to ensure that the necessary structure and support mechanisms are in place before an emergency response is needed.

It is important to note that a pandemic governance structure will only be established when the province deems there is a significant public health issue in Alberta and activates its emergency response structures for a pandemic influenza. The proposed structure will not apply to preparedness and recovery activities, as the province would return to normal decision making processes.

A number of key decisions will need to be made to ensure the GOA effectively responds to a pandemic emergency. Decision makers must provide direction on extraordinary issues related to a pandemic that may include:

- major reductions in GOA services;
- significant reallocation of employees between ministries to maintain GOA essential services;
- declarations of public health emergencies (under the Public Health Act) and general states of emergency (under the Emergency Management Act);
- major societal disruptions such as the closure of all schools in the province;
- use of emergency powers as defined in emergency acts (e.g. price fixing); and
- significant expenditures required to support the response.

Acton interviewed a number of stakeholders to gather input on the review of two models currently under consideration, the Pandemic Task Force (PTF) and Ministerial Working Group on Strong and Vibrant Communities. Insight was also provided regarding alternate approaches that could be considered to allow timely decision making in the event of a pandemic.

GUIDING PRINCIPLES

The principles shown below offer a number of factors which the Government of Alberta's pandemic response governance model should follow.

- 1. Role Clarity** – Pandemic governance stakeholders must understand their respective roles during a pandemic response to foster informed decisions and timely action.
- 2. Level of Authority** – The pandemic governance model must ensure the appropriate authorities exist to make key decisions during a public health emergency (e.g. authorization of emergency funding, performing emergency powers, etc).
- 3. Timeliness** – The pandemic governance model must have the flexibility and capacity to allow for timely decision making, dissemination of information, and action to ensure the Government of Alberta's essential services remain in operation.
- 4. Access to Subject Matter Experts** – The pandemic governance model must have the ability to engage subject matter experts as needed (e.g. medical expertise) to provide critical information to decision makers.
- 5. Coordinated Response** – The Government of Alberta should ensure the appropriate communication channels are in place during a pandemic emergency to allow for a timely and effective information flow and a coordinated effort across all stakeholder groups.
- 6. Succession Planning** – The Government of Alberta should ensure that a succession plan is developed and maintained for Executive.
- 7. Knowledge Workers** – All ministries and agencies must have an active cross-training program in support of critical functions that require specialty knowledge.
- 8. Alignment** – The framework should align and compliment existing planning mechanisms and processes.

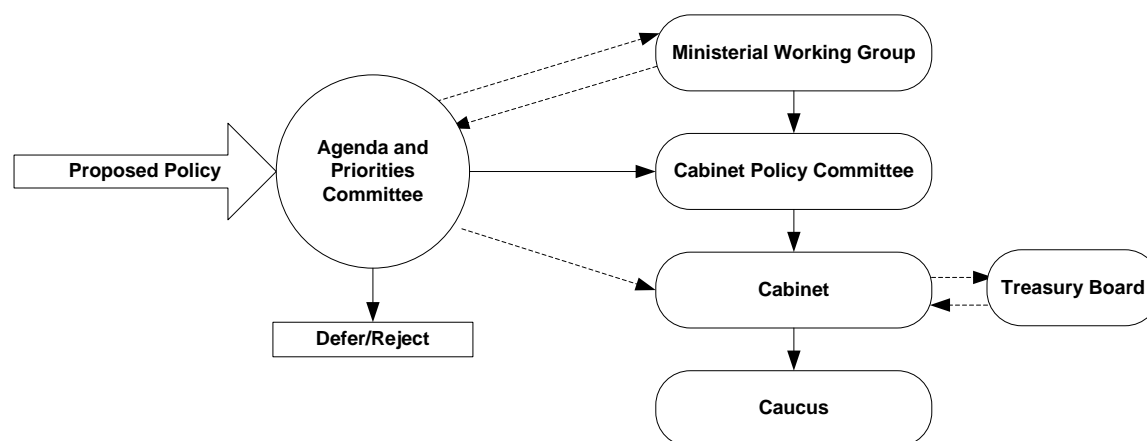
PREVIOUSLY CONSIDERED PANDEMIC GOVERNANCE MODELS

1. Ministerial Working Group on Strong and Vibrant Communities

Current Role

The Ministerial Working Group on Strong and Vibrant Communities (MWG) was established by Executive Council in an advisory support role. In its current role it does not make decisions or change the decision making role of Cabinet. Its function is to strengthen policies going forward to Cabinet Policy Committees through consideration of key issues and developing a shared understanding and ensuring consistency across government policies and ministries. The illustration below provides a visual representation of its role.

Figure 1: Decision Making Model for Ministerial Working Group



Group Members

The Ministerial Working Group on Strong and Vibrant Communities is composed of the Ministers of the following Ministries:

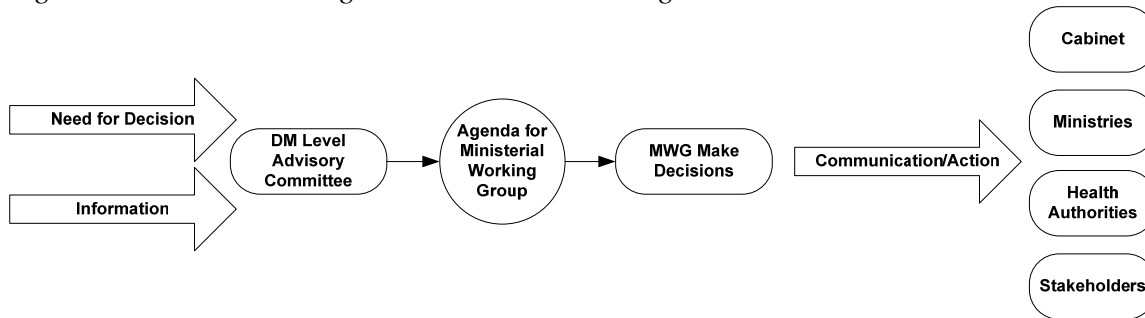
- Aboriginal Relations
- Children and Youth Services
- Culture and Community Spirit
- Education
- Employment and Immigration
- Health and Wellness
- Housing and Urban Affairs
- Justice and Attorney General
- Municipal Affairs
- Seniors and Community Supports
- Solicitor General and Public Security

Role During a Pandemic Response

Because the MWG is already established within the Government of Alberta, it has been proposed as one option for the decision making framework during a pandemic response. This group would switch from an advisory body to a Minister-level coordination and decision making body. The Minister of Health and Wellness is the proposed chair for the pandemic-related components and would be supported by the Minister of Municipal Affairs.

This group would be responsible for the GOA's key decisions during a pandemic. Request for decisions (refer to Appendix B for a list of strategic decisions that may arise during a pandemic) and the necessary information required to make decisions would flow to this group from a Deputy Minister level advisory committee.

Figure 2: Decision Making Process Utilized During a Pandemic



Advantages of Using this Model

- The basic framework for this model has already been established and Ministers have an understanding of this governance structure.
- Membership has already been determined, with broad representation from eleven Ministries.
- Members within the group have equal levels of authority, improving the group dynamic and working relationship.

Disadvantages of Using this Model

- The relatively large size of this group and broad Ministerial representation may impede its ability to react quickly and implement timely decisions.
- The Working Group is traditionally a policy advisory group, with no actual decision-making authority. Its transition to a decision-making body during a pandemic may be difficult.
- The Working Group has not been commissioned solely for the purpose of addressing issues related to a pandemic influenza response and deals with a multitude of other issues.
- Some key ministries are not represented on this group e.g. Finance and Enterprise, Treasury Board.
- Some members of the group may not be immediately impacted during a public health emergency, potentially making decision making more complex.
- Current lack of formal orientation and specific pandemic influenza knowledge.

2. Pandemic Task Force

Role

The Pandemic Task Force (PTF) is a proposed committee of the provincial cabinet that could be formed under specific legislative provisions, such as Section 4 of the *Emergency Management Act* or Section 7 of the *Government Organization Act*. The committee would form to advise Cabinet on matters pertaining to a pandemic and to coordinate the strategic response of individual ministries if a pandemic emerges in Alberta. The PTF might be formed by Order-in-Council once it has been determined that a pandemic situation requires a strategic-level coordinated response.

The proposed PTF would act as a policy development and coordination body for the provincial government. It would have access to the latest intelligence and recommendations, enabling a coordinated strategic approach to the response by all Ministries, as well as developing broader policy options for further Cabinet action. The Task Force would have the opportunity to review individual Ministry issues and to provide detailed situation updates and policy recommendations to Cabinet for final decision.

The PTF would make decisions on resource allocation and priorities to ensure response Ministries retain their essential services and to minimize gaps in response across the province. Strategic priorities for scarce resources may be established by this group and acted upon when it is within the mandate of their Minister or Deputy Minister; otherwise the issue will be forwarded to Cabinet.

Group Members

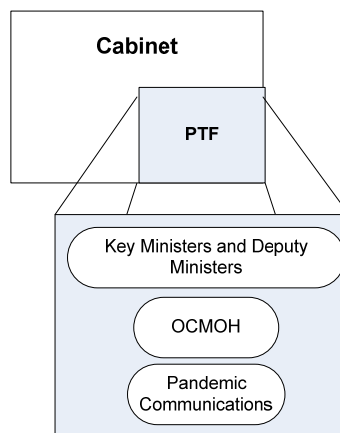
The proposed membership of the PTF is comprised of senior elected officials and their Deputy Ministers from a core group of Ministries that are responsible for health, public safety, and security in Alberta. The Task Force would have expert medical representation from the Office of the Chief Medical Officer of Health (OCMOH) to keep it up-to-date on the spread of the virus and the medical implications of any decisions that are made during the response. The PTF would also have access to other deputy level resources, including the Public Service Commissioner and the Managing Director of AEMA.

It should be noted that while the PTF has not been formally established, a DM Committee on Pandemic Influenza has been in operation in a planning role but not as a response body. This committee has made considerable progress to date and has been highly effective on the whole.

Key Ministries

- Health and Wellness
- Alberta Emergency Management Agency
- Municipal Affairs
- Agriculture and Rural Development
- Employment and Immigration
- Finance and Enterprise
- Justice and Attorney General
- Service Alberta
- Solicitor General and Public Security
- Treasury Board
- Corporate Human Resources

Figure 3: Composition of Pandemic Task Force



Advantages of Using this Model

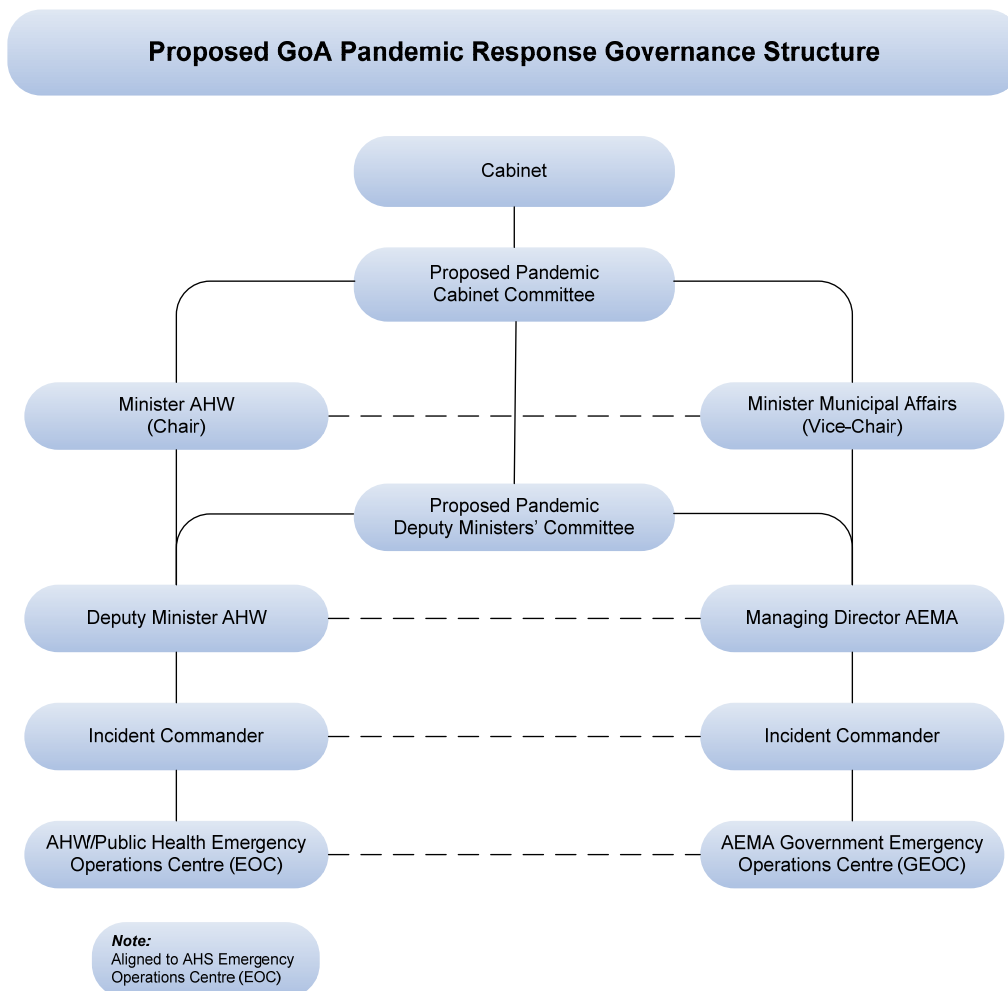
- Assembled specifically to address issues and decision-making pertaining to pandemic influenza (highly targeted mandate).
- Membership of Provincial Cabinet, enabling a high degree of decision-making authority.
- Representation from key Ministries, including some that have emergency powers or have relevant response requirements during an emergency.
- Expert medical representation from Chief Medical Officer of Health and staff.
- Co-chairs may invite other groups or Ministries as necessary to ensure an effective response.
- Minimal amount of change required to implement this model as components are currently in existence (DM Committee on Pandemic Influenza).

Disadvantages of Using this Model

- The PTF would not have legislative power to make decisions, but rather would be in a position to advise and coordinate information to allow for decision-making.
- The size of the decision making body (all Ministers and their Deputies) may be too large to allow for timely, effective decision-making.
- May pose a risk of exclusion of key Ministries in the decision-making process. Interviewees suggested that Ministries of Energy and Transportation may also be key participants in the Task Force.
- The Deputy Minister of Executive Council is not a proposed member of the PTF and thus there is no formal link to the Executive Council office.
- Current lack of formal orientation and specific pandemic influenza knowledge.

RECOMMENDED PANDEMIC RESPONSE GOVERNANCE MODEL

From interviews with key GOA stakeholders and a review of the two models currently under consideration, it has been determined that neither model is an ideal option for an effective pandemic governance structure. Therefore a new approach, adapted from the strengths of these models, is recommended to allow timely decision making during a pandemic emergency.



The recommended pandemic governance model consists of a subset of Cabinet members (Pandemic Cabinet Committee [PCC]), as well as a committee of their respective Deputy Ministers (Pandemic Deputy Ministers' Committee [PDMC]). AHW and the Alberta Emergency Management Agency are the lead organizations that will coordinate the need for decisions as they arise.

This model will employ a chain of command in which issues are escalated through the levels of authority, as required. For example, the AHW Incident Commander may require a decision beyond his/her authority and thus briefs the Deputy Minister of AHW. The Deputy Minister determines he/she cannot make a decision alone on the issue and brings the issue to the PDMC for resolution. If the issue exceeds the decision making authority of the PDMC, it would be brought to the Minister of AHW and to the PCC if needed for resolution or submission to Cabinet when needed.

Some examples of decisions that would be advanced through the chain of command to the Pandemic Cabinet Committee include:

- Special warrants for funding (that must go through Treasury Board to Cabinet).
- Declaration of a state of emergency under Section 18(1) of the *Emergency Management Act*.
- Declaration of a public health emergency/use of emergency powers under Sections 38(1), 52.1(1), and 52.21(1) of the *Public Health Act*.
- Quarantine/isolation provisions in Section 37(2) of the *Public Health Act*.

These decisions would be discussed at the Deputy Minister level and recommendations would be provided, but the final decision would rest with Cabinet and authorized by the Lieutenant Governor.

Advantages of Using this Model

- Assembled specifically to address issues and decision-making pertaining to pandemic influenza (highly targeted mandate).
- Members within each committee have equal levels of authority, maximizing the group dynamic and working relationship.
- PCC has membership of Provincial Cabinet, enabling a high degree of decision-making authority.
- Representation from key Ministries, including some that have emergency powers or have relevant response requirements during an emergency.
- Co-chairs may invite other groups or Ministries as necessary to ensure an effective response.
- Expert medical representation from Chief Medical Officer of Health and staff.

Disadvantages of Using this Model

- The size of the PDMC may be too large to allow for timely, effective decision-making.
- May pose a risk of exclusion of Ministries in the initial decision-making process.
- Potential for unclear decision making authority between Pandemic Deputy Ministers' Committee and Pandemic Cabinet Committee (this issue can be mitigated through a clearly defined Terms of Reference for each committee).
- Some members of the group may not be immediately impacted during a public health emergency, potentially making decision making more complex.

Considerations for Implementation

It should be noted that a key factor in the success of implementing this model will be ensuring stakeholders are aware of the structure and have been provided with adequate orientation and exercises to be ready when an emergency hits. This and other considerations are discussed further in Appendix A.

Key Factors for Membership of Pandemic Committees

The following factors were taken into consideration when developing the proposed membership list for the Pandemic Deputy Ministers' Committee:

1. Lead and coordinating ministries for the incident type.
2. Small group size to facilitate timely decision-making in an emergency situation.
3. Relevance of Ministry in relation to decisions and functions outlined above.

Proposed Committee Membership

Pandemic Cabinet Committee (Core)	
Ministry	Member ¹
Health And Wellness	Ron Liepert (Chair)
Municipal Affairs (responsible for AEMA)	Ray Danyluk (Vice-Chair)
Treasury Board	Lloyd Snelgove
Justice and Attorney General	Alison Redford

Pandemic Deputy Ministers' Committee²	
Ministry	Member
Health And Wellness	Linda Miller (Chair)
AEMA	David Hodgins (Vice-Chair)
Finance and Enterprise	Jay Ramotar
Solicitor General and Public Security	Brad Pickering
Justice and Attorney General	Ray Bodnarek
Executive Council	Brian Manning
Municipal Affairs	Ray Gilmour
Public Service Commissioner	Dale Silver
Advisory Members	
CMOH	Dr. André Corriveau
Public Affairs Bureau	Roxanna Benoit
Other DMs as Required ³	e.g. Paul Pellis Service Alberta

¹ Alternates for both the Minister and Deputy Minister to be determined by each Ministry

² Considerable deliberation focused on the appropriate number of core PDMC members. It was deemed that a group with more than eight core members would be too large to be an effective and nimble decision making body during a pandemic emergency.

³ Other DMs will be brought in as needed for specific issues (e.g. DM of Service Alberta for issues related to IT infrastructure)

Pandemic Cabinet Committee

Role

The Pandemic Cabinet Committee (PCC) will provide an executive decision-making and policy recommendation body for the Government of Alberta to ensure coordinated, effective and expedient government response in the event of an influenza pandemic. The Committee will make decisions that protect life and property, maintain the continuity of the Government of Alberta within the scope of applicable laws, and disseminate those decisions to all concerned ministries, agencies and individuals.

The Ministers of Alberta Health and Wellness and Municipal Affairs will provide leadership for this Committee given their lead roles in planning, response and recovery efforts. A core group of key Ministers will facilitate and coordinate cross-ministry and provincial decisions as well as recommendations to Cabinet. In addition, the Committee will invite other Ministers, as needed, when their expertise is required to make decisions.

Support to the PCC will be provided by the Pandemic Deputy Ministers' Committee. Briefing packages will be prepared so that the Ministers have sufficient information on the issue(s) to make decisions.

Each Minister is required to have an alternate named who must be able to assume their duties in the event that they are not available to function in their role. This group will meet regularly throughout the response efforts and may be required to meet even more frequently (as demanded by the stage of pandemic response) if the incident warrants expedient actions. The use of teleconferences or virtual meeting tools may be utilized as precautionary measures when deemed necessary to avoid potential spread of infection. Alberta Health and Wellness and Alberta Emergency Management Agency will be responsible for providing orientation to all members.

Examples of Key Executive Decisions and Approvals:

- Approval of extraordinary resources and funding related to pandemic planning, response and recovery.
- Provide recommendations to Cabinet for the declaration of emergency Acts (e.g. *Public Health Act*, *Emergency Management Act*) or termination of other Acts.
- Provide recommendations to Cabinet for the use of emergency powers as defined in the emergency acts outlining major risk implications and legal issues.
- Approval of extraordinary cross-ministry requests from the Government of Alberta including implementation of the essential staffing plan involving work stoppages and the transfer of staff.
- Approval of extraordinary requests for outside assistance that may or may not involve commitments outlined in existing Memorandums of Understanding (MOU's) and Letters of Understanding (LOU's) from:
 - Government of Canada
 - Other provinces
 - Cross-border

Pandemic Cabinet Committee Member Role

Role	Scope and Decisions	Responsibilities
<p>Chair/ Vice-Chair</p>	<ul style="list-style-type: none"> • Overall coordination of Committee • Lead and coordination of ministries for incident planning and response and providing overall direction • Responsible for completion of decisions and committee functions 	<ul style="list-style-type: none"> • Responsible for decision implementation and ensuring regular review of progress • Administer issues or escalates to Cabinet • Ensure ongoing risk identification and management • Identification and mitigation of risks for respective ministries • Manage communication and reports from the Committee • Ensure consultation of relevant ministries
<p>Expert Members</p>	<ul style="list-style-type: none"> • Provide expertise for decision-making and recommendations • Responsible for completion of assigned decisions and committee functions 	<ul style="list-style-type: none"> • Determine resources and timeframes to support decisions • Develop decision Action Plans • Identify and mitigate risks • Provide content for communications and reports • Identify other ministries needed to finalize decisions and recommendations
<p>Deputy Minister Support</p>	<ul style="list-style-type: none"> • Support decision-making ability of Committee members through briefing packages 	<ul style="list-style-type: none"> • Develop plans, identifies issues and risks

Pandemic Deputy Ministers' Committee

Role

The Pandemic Deputy Ministers' Committee will provide managerial decision-making and recommendations to the Pandemic Cabinet Committee to ensure coordinated, effective and expedient Government of Alberta response in the event of an influenza pandemic. This Committee will also provide vital support to ensure the continuity of the operation of the Government of Alberta.⁴

The Deputy Ministers of Alberta Health and Wellness and Municipal Affairs will provide leadership for this Committee given their lead roles in planning, response and recovery efforts. A core group of key members will facilitate and coordinate cross-ministry and provincial decisions as well as recommendations to the Pandemic Cabinet Committee. The Committee will invite other Deputy Ministers relevant to decision-making when required.

Each Deputy Minister is required to have an alternate named and able to assume their duties in the event they are not available to function in their role. This group will meet on a weekly basis or more frequently (as demanded by the stage of pandemic response) if the incident warrants expedient actions. Meetings will be organized through teleconferences or virtual meeting tools for timeliness as well as a precautionary measure to avoid potential spread of infection. Alberta Health and Wellness and Alberta Municipal Affairs will be responsible for providing orientation to all members.

Examples of Key Executive Decisions and Functions

- Key decisions that fall within their current scope of designated authority. If determined to exceed this level of authority, decisions will be advanced to the PCC.
- Analyze information in briefing materials to allow the Pandemic Cabinet Committee to make decisions, including but not limited to:
 - Recommend extraordinary resources and funding related to pandemic planning and response to the Pandemic Cabinet Committee.
 - Provide recommendations to the Pandemic Cabinet Committee for the declaration and termination of emergency acts (*Public Health Act, Emergency Management Act*).
 - Provide recommendations to the Pandemic Cabinet Committee for outside assistance from the Government of Canada, other provinces and/or cross-border.
 - Provide recommendations for cross-ministry requests for the Government of Alberta including implementation of the essential staffing plan involving work stoppages and the transfer of staff.
 - Provide recommendations for strategic Government of Alberta and public communications that will be utilized in pandemic response and recovery.
- Provide leadership for the activation of response, continuity and recovery plans.

⁴ It should be noted that while the existing Deputy Ministers' Committee on Pandemic Influenza is needed during pandemic planning and preparedness, the PDMC will be the structure used when responding to a pandemic emergency.

- Provide direction to management teams on any issues related to response efforts for the Government of Alberta.
- Liaise with other provinces and federal Deputy Minister counterparts.
- Approval of strategic public pandemic communications that will be utilized in pandemic response and recovery.
- Disseminate decisions and other relevant communications to all concerned ministries, agencies and outside governments.

Pandemic Deputy Minister Committee Member Role

Role	Scope and Decisions	Responsibilities
Chair/Vice-Chair	<ul style="list-style-type: none"> • Overall coordination of Committee • Lead and coordination of ministries for incident planning and response and providing overall direction • Responsible for completion of decisions and committee functions 	<ul style="list-style-type: none"> • Responsible for decision implementation and ensuring regular review of progress • Administer issues or escalates to Pandemic Cabinet Committee • Ensure ongoing risk identification and management • Identification and mitigation of risks for respective ministries • Manage communication and reports from the Committee • Ensure consultation of relevant ministries
Expert Members	<ul style="list-style-type: none"> • Provide expertise for decision-making and recommendations • Responsible for completion of assigned decisions and committee functions 	<ul style="list-style-type: none"> • Determine resources and timeframes to support decisions • Develop decision Action Plans • Identify and mitigate risks • Provide content for communications and reports • Identify other ministries needed to finalize decisions and recommendations
Advisory Members	<ul style="list-style-type: none"> • Provide knowledge and insight from their area of expertise for the specific issue(s) at hand 	<ul style="list-style-type: none"> • Determine resources and timeframes to support decisions • Provide content for communications and reports • Coordinate communications for the Committee (PAB)
Deputy Minister Support	<ul style="list-style-type: none"> • Support decision-making ability of Committee members 	<ul style="list-style-type: none"> • Develop plans, identifies issues and risks

METHODOLOGY

Acton Consulting first met with the project sponsor, Alberta Health and Wellness, to clarify the scope and terms of reference for this engagement. At this time Acton discussed and gathered the appropriate background material as well as identified the key stakeholders to interview.

Next, Acton began an environmental scan and literature review to aid in the development of the pandemic governance model. The original intent was to interview stakeholders from Manitoba and British Columbia but due to tight timeframes and the unavailability of participants, the interview process was restricted to one contact in British Columbia. However, background research was conducted on other governance models and these aspects were considered in the development of the models.

Acton interviewed a number of stakeholders to gather input on the review of two potential pandemic governance models, the Pandemic Task Force (PTF) and Ministerial Working Group on Strong and Vibrant Communities. Insight was also provided into other models that could be implemented that would allow timely decision making in the event of a pandemic. These participants were then invited to attend a session to discuss the models and shape the recommendations. A report was then prepared to highlight the findings and recommendations.

APPENDICES

Appendix A: Additional Considerations

1.0 Role Clarity

Once the Terms of Reference for both the Pandemic Cabinet Committee and Pandemic Deputy Ministers' Committee are finalized, these new structures need to be communicated throughout the Government of Alberta. Ministries that are not represented as 'core members' need to be aware that they will be asked to support the groups for relevant decisions as well as receive timely and comprehensive communications coming from the groups. The authority and roles of the committees need to be relayed and testing of these structures will help to facilitate learning and practice.

Furthermore, the relationship and roles of Alberta Health and Wellness' EOC and the Government of Alberta's GEOC in relation to these committees will need to be clarified. The Incident Commanders for Alberta Health and Wellness' EOC and the Government of Alberta's GEOC will feed intelligence and reports to the Pandemic Deputy Ministers' Committee and will act as a support to this Committee once they are activated.

2.0 Orientation

2.1. Pandemic Cabinet Committee

Orientation for committee members to include:

- Role definition
- Administrative information
- Legislative framework within which to operate and work
- Overview of Federal NERS structure
- Overview of emergency acts and powers

2.2. Pandemic Deputy Ministers' Committee

Orientation for committee members to include:

- Role definition
- Role of Pandemic Cabinet Committee
- Role of EOCs
- Overview of Federal NERS structure
- Overview of emergency acts and powers

2.3. Cross-Ministry Training

- Orientation for ministries/agencies/bureaus regarding roles and responsibilities of the two pandemic committees in leading planning and response efforts of the Government of Alberta
- Review of legislative framework for committee work

3.0 Pandemic Exercises and De-briefing

At least one pandemic exercise should be conducted prior to October 2009 to test and refine the new structure and communication systems. The exercise de-briefing and findings should be communicated broadly to facilitate further education and role orientation.

It would be beneficial to run the same scenarios with pre-determined alternates listed for the cabinet committee and the deputy ministers committee for pandemic influenza.

4.0 Communications

A detailed communication plan must be established to guide communication within and between the Committees, and to communicate with EOCs, other ministries, the Federal Government, other Provincial Governments, the public, and any other stakeholders.

Recommended communication models:

- Federal Communication Plan
- Government of Alberta Communication Plan

Communication plans should be pre-planned and discussed with key stakeholders for items such as:

- Trigger actions listed below
- Daily status reports on response efforts
- Communications to and from federal/provincial EOCs and committees
- Education regarding pandemic committees roles and responsibilities

The pandemic governance model should also proactively establish relationships and communication channels with the leaders and/or planners of other pandemic governance bodies, at the appropriate level of authority. This will allow for a more proactive and integrated approach to decision-making in Alberta in the event of a pandemic influenza response. These other pandemic governance bodies referred to may exist within organizations such as Edmonton Catholic Schools, Edmonton Public Schools, City of Edmonton, City of Calgary, Alberta Health Services, and so forth.

Communication with these separate pandemic governance bodies and awareness of their decisions will be critical in determining the impact they may have on the decisions of the Pandemic Cabinet Committee. Clear lines of communication will ensure a more proactive and integrated approach and will ensure that all parties are aware of decisions being made in relation to a pandemic influenza response.

5.0 Response and Recovery Trigger Development

In order to facilitate response and recovery efforts as well as training and exercising over the next several months, it is recommended that focused work to pre-determine response and recovery triggers is completed. Alberta Health and Wellness will be the lead Ministry to coordinate the development of triggers, engaging other Ministries where required. This may include triggers for the implementation of:

- Emergency Acts
- Specific emergency powers
- Partial/full activation of EOCs
- Pandemic Cabinet Committee model for decision-making
- Essential staffing plans
- Deactivations or scaling down of responses
- Actions by other stakeholders, including:
 - World Health Organization (WHO)
 - Alberta Health Services
 - Municipalities (i.e.: City of Edmonton, City of Calgary, etc.)
 - School Boards
 - Media

Both internal and external communications outlining these government responses can be pre-drafted and available for use prior to the incident occurring to facilitate timely response efforts and ensure comprehensive stakeholder notifications.

6.0 Technological Considerations

In the event of a recommendation of social distancing in order to curb the spread of the virus as well as the implementation of policies to prevent Government of Alberta staff and ministers exhibiting influenza-like symptoms from assembling to work/meet, it is recommended that remote communication mechanisms for meetings and decision-making are in place and tested prior to a significant event occurring.

7.0 Succession Planning

Each committee member is required to name an alternate who can assume the full responsibilities of their respective areas. Alternates training and education is the responsibility of the lead and coordinating ministries who will plan orientation and training once the alternates are finalized.

Succession planning for new ministerial leadership is also required in the event that this leadership changes or is in transition during an emerging or imminent incident. The lead and coordinating ministries will be responsible to develop templates and instructions for the development of succession plans as well as be responsible to ensure they are in place for each ministry as part of the Government of Alberta business continuity planning.

Appendix B: Pandemic Strategic Decisions Table

The following table provides a list of potential strategic decisions that may have to be made during a pandemic emergency. Please note that the list is not exhaustive and is intended to stimulate discussion. The decisions to be made, timelines, and appropriate decision maker(s) and governing legislation may be situation specific and it is assumed that the Pandemic Cabinet Committee (PCC) will review and revise these decisions as needed.

Decision	Further Consideration	Recommended Decision Maker	Department with Expertise	Governing Legislation
Access to Government of Alberta Funding	<ul style="list-style-type: none"> Who decides and for what purpose? Should Alberta consider a Pandemic Disaster Recovery Program? Establishment of a Disaster Recovery Program may affect abilities to access GOA funding. 	Pandemic Cabinet Committee (PCC)	AFE, AHW, AMA, Treasury Board	To be ascertained.
Pandemic Communications Message (Extreme Measures)	<ul style="list-style-type: none"> Who is going to decide what is going to be communicated? The vast majority of daily communications will be of a health nature therefore, the majority of this activity can be done through AHW. 	AHW Pandemic Cabinet Committee (PCC)	PAB, AHW,	Emergency Management Act, Section 18.3 ⁵
Priority of Essential Services	<ul style="list-style-type: none"> In the event of a manpower shortage that affects multiple services, decisions will need to be made on how to prioritize the services. This includes defining the priority of service necessary. 	Pandemic DM Committee (PDMC) Escalated to Cabinet when required	Executive Council, AMA, Affected Ministry	Emergency Management Act, Section 19(1)(f) Public Health Act, Section 52.6(1)(e)
Reallocation of Government Staff/Resources	<ul style="list-style-type: none"> As departments deal with staff absences/equipment shortages etc, should these resources be reallocated from one Dept or Ministry to another? Who will make the decision on seconding Government Employees to other ministries or outside government to fulfill critical services and functions? (Outside government could include Municipal employees, federal employee's, and agencies like school boards). 	Pandemic Cabinet Committee (PCC)	CHR, Exec Council	Government Organization Act, Section 3(2)(a) Emergency Management Act, Section 19(1)(k)
Acquisition and Use of Real Estate - Private Property and Public Facilities	<ul style="list-style-type: none"> Decision on whether to appropriate private property as part of the response. Currently this can be accomplished by either Min. of AHW or Min of Municipal Affairs after the declaration of emergency. 	Pandemic Cabinet Committee (PCC) AHW (implementation)	AHW, AMA, Justice, Education (as a facility provider)	Emergency Management Act, Sections 19(1)(c), 19(2), 19(3) Public Health Act, Sections 52.6(1)(a), 52.7(1), 52.7 (2)

⁵ Any references to Sections 18 and 19 of the Emergency Management Act provided in this table are contingent upon the declaration of a state of emergency.

Decision	Further Consideration	Recommended Decision Maker	Department with Expertise	Governing Legislation
Closure of Public Facilities or Restrictions on Public Gatherings	<ul style="list-style-type: none"> • What conditions would apply prior to imposing restrictions? • Who decides? 	Pandemic Cabinet Committee (PCC)	AHW, SolGen	Public Health Act, Sections 62(1), 62(4) Emergency Management Act, Section 19(h)
Compensation - Individuals	<ul style="list-style-type: none"> • Should the GOA have a compensation plan for people who are put in isolation or are unable to work as a result of cancelled activities/closure of public facilities? • What groups should be covered? What circumstances? • Will people conscripted to work be paid by the GOA? At what rate? 	Pandemic Cabinet Committee (PCC)	CHR, EI, AFE	To be ascertained.
Compensation - Businesses	<ul style="list-style-type: none"> • Should there be income support programs for lost income? Is there income support for the proprietors but not the business? (Over and above current social assistance programs). • Eligibility criteria for any compensation programs would need to be defined. • What about compensation to those businesses that have to bring in supplies at a higher price and then sell at the fixed rate? 	Legislature	AFE	To be ascertained.
Requests from Federal Government (Public Health) – e.g. assistance to First Nations, Corrections Canada	<ul style="list-style-type: none"> • Who will make the decisions on requests from the GoC? What would be the criteria under which these decisions are made? • Who will resolve issues relating to roles, responsibilities, and jurisdictions with the Federal Government? 	AHW	AHW, AMA, Justice, SolGen, IIR	Alberta Emergency Plan, Section 2.5.7
Requests from other Provinces/Territories/State of Montana (Public Health) – e.g. inter-provincial transfer of patients etc.	<ul style="list-style-type: none"> • Who will make the decisions on requests from the other provinces/territories/Montana? What would be the criteria under which these decisions are made? • How would this be coordinated? 	Minister of AHW	AHW, IIR	Alberta Emergency Plan, Section 2.5.8
Requests from Other Provinces/Territories/State of Montana (Other Emergency Management)	<ul style="list-style-type: none"> • Will the GOA action mutual aid requests (where agreements are already in place), e.g. additional personnel to assist with maintenance of public order, fight forest fires and other essential services. • Who will decide and what are the criteria for a decision, if another province /territory requested support from Alberta? 	Minister of Responsible Dept	AMA, SolGen, IIR, ASRD	Alberta Emergency Plan, Section 2.5.8
Rationing	<ul style="list-style-type: none"> • If the situation warrants it, should rationing of critical supplies be introduced? • Who will have the authority? • What are the criteria for implementing rationing? 	Pandemic Cabinet Committee (PCC) (Legislature for longer term rationing)	AMA, Sol Gen, Justice	Emergency Management Act, Section 19(1)(f)

Decision	Further Consideration	Recommended Decision Maker	Department with Expertise	Governing Legislation
	<ul style="list-style-type: none"> How will it be enforced? Power to ration is currently held by Minister of Municipal Affairs after the declaration of a State of Emergency. 			
Conscription	<ul style="list-style-type: none"> Decision whether or not to conscript members of the general public to work on tasks assigned by the GOA or Municipality or Alberta Health Services. What would be the enforcement/consequences of non-compliance. Criteria need to establish triggers for when conscription may be considered. Currently authorized under the Emergency Management Act and the Public Health Act. 	Pandemic Cabinet Committee (PCC)	AMA, AHW, EI, Justice	Emergency Management Act, Sections 19(1)(d), 19(1)(k) Public Health Act, Section 52.6(1)(b), 52.6(1)(c)
Legislative Overrides/Amendments	<ul style="list-style-type: none"> Decisions are required regarding the need for legislative overrides? What criteria (including risk assessment) would need to be in place prior to overriding any established legislation/regulation/standards? <u>Overrides on OH&S Regulations</u> –e.g. max 15 hr driving day for truck drivers. Where will these extra staff come from? <u>Override of required qualifications</u> for essential community services during times of extreme staffing shortages. 	Pandemic Cabinet Committee (PCC) Solicitor General – Policing AEMA – Fire, etc. Energy – Utilities	AHW, Justice, SolGen, Associations governing Essential Services	Public Health Act, Section 52.21(2) Emergency Management Act, Section 18(5)
Extraordinary measures to maintain public order e.g. curfew	<ul style="list-style-type: none"> Who makes the decision and under what circumstances? Does the government intervene if communities barricade themselves? 	Municipality for local issues Solicitor General	Sol Gen, Justice, AMA	To be ascertained.
Price Setting	<ul style="list-style-type: none"> Who makes the decision and under what circumstances? Should prices be fixed? On what commodities or services? Currently under Emergency Management Act, Min of Municipal Affairs can fix prices during an emergency. 	Pandemic Cabinet Committee (PCC)	AFE, AARD, Energy, AMA	Emergency Management Act, Section 19(1)(f) Emergency Management Act, Section 19(1)(j)
Requests for Federal Resources	<ul style="list-style-type: none"> At what point will requests for federal assistance be forwarded? e.g. to request military to support for police and corrections staff, medical staff, manpower and vehicles, field hospitals. Sol Gen for Assistance to Law Enforcement. AEMA for other requests for Military Assistance. 	SolGen Pandemic Cabinet Committee (PCC) RHA(Federal)	II&R, SolGen, AMA, AHW	Alberta Emergency Plan, Section 2.5.7

Appendix C: Current Pandemic Response Structures in Canada and Alberta

	Canada	Alberta
Pandemic Governance	<p><i>Cabinet Committee on Security, Public Health and Emergencies</i></p> <p>Membership changes are dependent upon the nature of an incident.</p>	None
Non-Health Sector Response Coordination	<p><i>Government Operations Centre (GOC):</i> a hub of a network of operations centres run by a variety of Federal departments and agencies including the RCMP, Health Canada, Foreign Affairs and International Trade Canada, CSIS and National Defence.</p>	<i>Government Emergency Operations Centre (GEOC)</i>
Health Sector Response Coordination	<p><i>CEPC's EOC:</i> acts as PHAC and HC's "single window" for all hazards preparedness and response operations.</p>	<i>Alberta Health and Wellness EOC</i>
Scientific Advisors*	To be determined	<i>Scientific Advisory Committee (reports to CMOH)</i>

***Note:** Scientific Advisors are part of the HICS model that may be used (example: ethics, public health, crisis communications). Scientific Advisors should be coordinated across the spectrum.

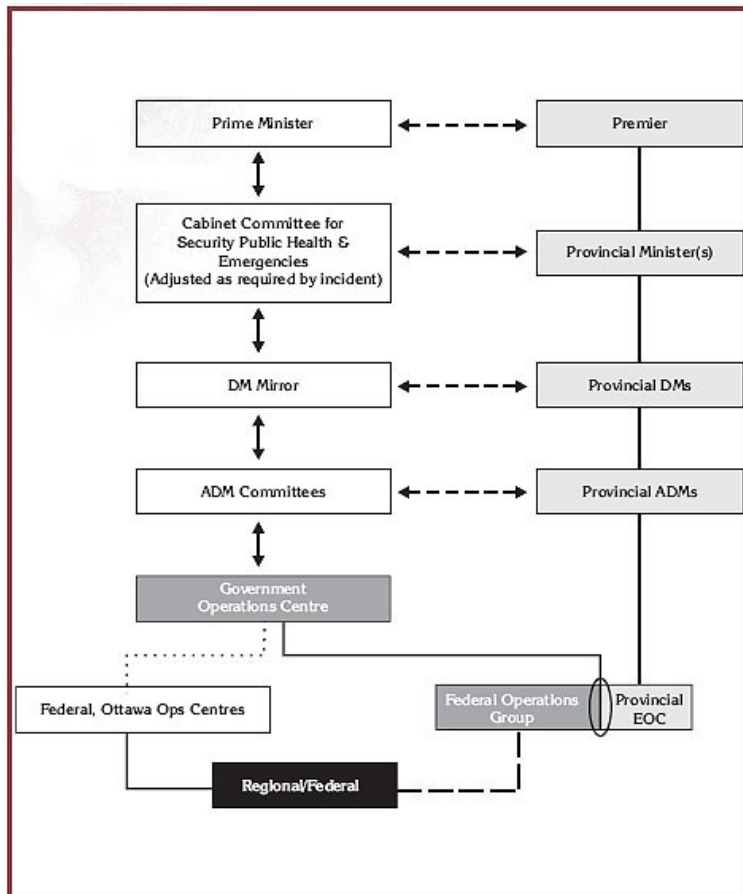
Appendix D: NERS Federal Response Structure

Excerpts from the Canadian Pandemic Influenza Plan *for the Health Sector* - Annex L: Federal Emergency Preparedness and Response System

Public Safety and Emergency Preparedness Canada is developing the NERS so that Canada is prepared and able to respond to all emerging, imminent or occurring national emergencies and threats in order to ensure the protection and safety of Canadians. As different threats and emergencies arise, either as the result of natural or deliberately caused events or disasters, the NERS is designed to coordinate federal actions and provide an integrated and complementary national response.

At the federal level, the health response to a pandemic will be mainly the responsibility of PHAC as the lead. The NERS will coordinate the broader federal response. The aim of the NERS is to ensure the strategic coordination of federal mandates in a Government of Canada emergency response, concurrent to P/T activities. The NERS is based on the Incident Command System and in an emergency the coordination of federal mandates will be achieved through the Government Operations Centre (GOC).

These new agencies and systems will help ensure that federal leadership is exercised by making quick decisions, coordinating activities and resources at a strategic level, and communicating effectively with other federal entities, P/Ts, international organizations, NGOs, the private sector and the general public.



All this must be accomplished while respecting P/T jurisdictions. From a national perspective, ensuring that authorities at all levels have a complementary framework for dealing with emergencies is a key preparedness objective. This is pivotal to public confidence and international credibility.

Appendix E: PHAC Governance Structure

The following chart shows the interface and parallels between the federal government structure and the provincial structures.

