

Middlesex County Emergency Control Group (CECG) COVID-19 Debrief Summary

Background

As a member of the County Emergency Control Group (CECG), the Emergency Management Specialist (EMS) from the Middlesex-London Health Unit (MLHU), working collaboratively with the County of Middlesex, conducted debriefing sessions following the COVID-19 pandemic response. These sessions aimed to assess members' experiences and identify lessons learned to be better prepared for future emergency situations.

Meetings included representatives from Middlesex County, and the following lower-tier municipalities: Adelaide Metcalfe, Middlesex Centre, Thames Centre, Southwest Middlesex, Newbury, and North Middlesex. A debriefing with Lucan Biddulph was not possible due to scheduling conflicts. Discussions were facilitated between October 16 and November 1, 2023.

The debriefing discussions were guided by a facilitator who asked the following questions regarding the event:

1. *What challenges or barriers were experienced in working with MLHU on the COVID-19 response?*
 - *What did MLHU do that was **helpful** or beneficial for you as a partner in responding to COVID-19?*
 - *What could MLHU have **done better** to support you through the COVID-19 response?*
2. *How can MLHU and Middlesex County **improve our partnership** for future emergency responses?*

Findings

After collating and reviewing the feedback, four themes were identified (See Table 1). For more detailed feedback, see Appendix A: Summary of Themes.

Table 1:

STRENGTHS	AREAS FOR IMPROVEMENT
COMMUNICATION	
<p>The variety of communication modes, frequency of information delivered, and presence of MLHU staff was beneficial and led to opportunities for ongoing support and interpretation of often changing provincial guidelines.</p>	<p>Acknowledging the County's unique needs when developing communication strategies for the older age population and those with limited technological skills and access. Improved sharing of information across all lower-tier municipalities.</p>
RESOURCES	
<p>The MLHU's website and signage/posters were expressed as trusted, reliable, and important resources to use during the COVID-19 pandemic.</p>	<p>Incorporating all municipal logos onto the various signages and posters created by the MLHU would demonstrate a unified response.</p>
VACCINE ACCESS AND CLINIC OPERATIONS	
<p>Value in the use of volunteer staff and the Middlesex London Paramedic Services (MLPS) for vaccination administration and the clinic operations.</p>	<p>The importance of continued collaboration with the County to identify the needs of rural communities to decrease health inequities.</p>
COMMUNITY COLLABORATION AND PARTNERSHIPS	
<p>Collaboration with the MLHU and inclusion of other community partners and volunteer supports was noted as a positive experience.</p>	<p>Maintaining volunteer services, working with the MLHU Emergency Management lead, enhancing partnerships with NGOs, and increasing enforcement by inspectors, were requested for future emergency responses.</p>

MLHU's Key Takeaways

The MLHU is committed to exploring ways to incorporate the suggested areas of improvement between the MLHU, Middlesex County, and the lower-tier municipalities.

The following are more specific key actions for consideration:

- Advocate for expanded vaccine eligibility. This could include advocating for the expansion of 'high priority individuals' to include all personnel and essential service workers (i.e., dispatchers, snow removal operators, etc.), who are essential for responding to an emergency, acknowledging the importance of maintaining human resources and an infrastructure to access medical needs.
- Explore strategies to enhance guidance for municipalities to confidently develop and implement health policies during a pandemic response.
- Explore improving collaboration between Health Unit Medical Officer of Health (MOH) and Associate Medical Officer of Health (AMOH) and Middlesex County elected officials to facilitate better alignment of universal messages that cross jurisdictions.

Next Steps

1. MLHU's Strategic Advisor – Emergency Management will collaborate with Bettina Weber to coordinate a meeting with the CECG to review and seek validation that these themes accurately represent the feedback communicated at the debriefing meetings, ensuring no further key messages need to be captured.
2. Key takeaways will be shared with MLHU Senior Leadership, specifically the MOH and AMOH, to reflect on the lessons learned and implement actions as possible.
3. Lessons learned will be integrated into the MLHU's Emergency Response Plan and corresponding protocols.

Appendix A: Summary of Themes

STRENGTHS OR SUCCESSES OF MLHU AND MIDDLESEX COUNTY RESPONSE	AREAS FOR IMPROVEMENT FOR MLHU AND MIDDLESEX COUNTY
COMMUNICATION	
<ul style="list-style-type: none">• Variety of MLHU means of information dissemination was helpful (e.g., webinars, social media, website, etc.; especially weekly meetings were helpful).• There was clarity from MLHU, to the degree possible, about how to interpret provincial guidance.• Important to have an MLHU member present at the County ECG's to provide updates.	<ul style="list-style-type: none">• Information changed so frequently that it was challenging to manage.• MLHU to remain the primary source of communication in a pandemic, and the County could primarily amplify MLHU messages.• Enhance sharing of information and resources between lower-tier municipalities.• Better understand the audience (e.g., health literacy, providing good rationale for restrictions, etc.).
RESOURCES	
<ul style="list-style-type: none">• The MLHU 's website was a trusted source of updated information.• Access to signage/posters for posting information related to the pandemic.	<ul style="list-style-type: none">• Archive resources in preparation for a future pandemic, (i.e., posters and signs, but consider replication of resources including municipality logos with MLHU to demonstrate a unified approach to the Pandemic response).
VACCINE ACCESS AND CLINIC OPERATIONS	
<ul style="list-style-type: none">• Collaborative partnerships with CERV, and MLPS, strengthened the clinic operations.• Equitable service options removed barriers and increased vaccine uptake (i.e., mobile bus and EMS services).	<ul style="list-style-type: none">• Continue to collaborate with the different municipalities to identify the unique needs of rural communities and work to eliminate health inequities (i.e., accessing vaccination operating clinics and registering for vaccine appointments where calling and online registration was met with challenges).• Continue to include MLPS in future vaccination clinic operations and supporting the vaccine roll out.
COMMUNITY COLLABORATION AND PARTNERSHIPS	
<ul style="list-style-type: none">• Consistent leadership and presence of MLHU staff at courses, meetings, and through Health Unit services, (i.e. inspectors).• Partnerships were valued (i.e., volunteer services, Salvation Army, CERV, and the MLPS expanded model of care during the pandemic).	<ul style="list-style-type: none">• Improved volunteer services by maintaining contracts throughout the emergency response, (i.e., Salvation Army and CERV).• MLHU to maintain leadership in a future pandemic with more engagement from the Emergency Management representative.• Enhance community partnerships by leveraging NGO to communicate MLHU messaging, (i.e., faith-based organizations that are very influential).• Strengthening enforcement/inspectors for non-compliance of restrictions.