



MANUAL:	Emergency	Policy No.:	11-A-10
SECTION:	Staffing Contingency Plan		
SUBJECT:	Human Resources and Staff Deployment		

POLICY: In the event of a staffing shortage, specific human resources deployment measures will be implemented to mobilize the largest possible complement of human resources available to sustain service delivery including:

1. Adjusting levels of programs/services in operation.

As a provider of choice, the John Noble Home will provide as much essential healthcare services for as long as possible during a staffing shortage to those residents who depend upon the Home for care. The John Noble Home will:

- make optimal use of all available staff and volunteers to maintain availability of essential services.
- explore and incorporate atypical but appropriate external community human resources to supplement incumbent human resources available to it.

2. Redeploying available human resources to sustain service delivery.

- 2.1 The Control Team will assume responsibility for coordinating human resources and staff deployment once the John Noble Home Emergency Plan is activated.
- 2.2 The Master Schedule of all areas will be reviewed and adjusted as necessary to address staffing shortages across all departments to ensure essential service coverage.
- 2.3 All Staff and volunteers will be mobilized to assume flexible functions in providing essential care to residents during this time of crisis.
- 2.4 Health care workers' duty to provide care is interpreted as an inherent ethical expectation for all John Noble Home employees to continue providing services to dependent residents in the event of an emergency.
- 2.5 Specific guideline(s) to address issues of staff working at multiple sites, and/or for multiple employers will be put into place as necessary.

3. Protecting and supporting employees.

- 3.1 As an employer of choice, the John Noble Home:

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- Acknowledges a duty of care as the employer to protect employees exposed to risks in the course of performing their work role.
 - Is committed to providing employees with appropriate protection against infection while expecting them to continue working.
 - Acknowledges the commitment of employees to their duties when working in high risk situations.
 - Attends to staff well-being, by addressing the need to balance work and family demands when scheduling work shifts, and helping them address psychosocial concerns associated with working.
- 4. Pre-establishing minimum staffing thresholds for all departments to facilitate human resources deployment during the emergency.**
 - 5. Planning for knowledge/skills transfer to support redeployed personnel.**
 - 5.1** In managing human resources and staff deployment to respond to the challenges stemming from an emergency.
 - 6. The John Noble Home will reference and act in accordance with such legislations as might be applicable in Canada and Ontario.**
 - 6.1** Human Resources will research and advise the Control Team as to legal and legislative considerations associated with but not limited to provisions of the (Ontario) Emergency Management Statues, Occupational Health and Safety Act, the Employment Standards Act etc, as per their relevance to measures established to help the John Noble Home cope with anticipated human resource challenges in the context of an emergency.
 - 6.2** Refusal to work issues will be managed in accordance with provisions of applicable legislations and statues, the John Noble Home Human Resource Policy, and with due considerations given to the well-being of staff.
 - 7. To maintain ongoing readiness to respond to an emergency.**
 - 7.1** The human resource and staff deployment plan as described in these policies and procedures will be regularly reviewed to maintain currency in applicability.

PROCEDURES:

1. Adjusting levels of programs/services in operation

1.1 Optimizing availability of incumbent human resources

- The John Noble Home will maintain delivery of a full range of service programs for as long as possible during an emergency so long as human and material resources required to do so are available.

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- Where a specific service is determined to be essential for the survival and medical well-being of residents who have no alternative recourse, the home will strive to continue operating that service within the limits of resources available.
- All Day and Stay employees may be re-deployed to LTC to assist where needed.
- Services not deemed essential for the survival and medical stability of residents will be assigned a lower priority level, and be discontinued.
- When human or material resource required is unavailable in a sufficient amount, the plan outlined in the Business Continuation Policy 8-A-80 for curtailing or suspending lower priority level services/programs will be implemented by the Control Team.
- All human resources – i.e. staff and volunteers – made available by the curtailment of specific services/programs will be redeployed by the Control team to help sustain operation of essential services/programs.

1.2 Accessing additional/atypical human resources,

- Human Resources with applicable departments (Nursing, Nutrition, Housekeeping, Laundry) will explore with external service agencies about the practicality and cost of accessing additional human resources through them in the event of a staffing shortages. Prospective contractual agreements will be established where feasible.
- The Director of Resident Programs & Volunteers will establish and maintain a database of all volunteers including information about qualification, experience, and special skills possessed (where applicable) to facilitate identification of available resources when targeted deployment is required.
- As necessary, the Director of Resident Programs & Volunteers will conduct anticipatory discussions with local service clubs, church groups, schools, and other such potential sources of additional volunteers about their prospective availability.
- As necessary, Family members who express their willingness in assisting with delivery of some aspects of resident care will be contacted by the Director of Care or Resident Care Coordinator and in conjunction with the Director of Resident Programs will coordinate the duties appropriate for the family member to do.
- Where volunteers, including family members of residents are involved in sanctioned functions, staff will maintain vigilance to ensure that volunteers are not performing unauthorized controlled acts or such tasks as they have not been trained to do.

1.3 Risk management and legal liability

- Insurance availability, affordability and feasibility for utilizing volunteers, and family members of residents to deliver some aspects of care in the context of an emergency,



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- will need to be explored by the Director of Finance and any action as deemed necessary should be taken.

2. Redeploying staff and other personnel

2.1 Human Resources, DOC/RCC and Director of Programs and Volunteers will take the lead responsibility for coordinating redeployment and assignment of staff and volunteers during the emergency.

2.2 Review and adjustment of Master Schedule and staff vacations.

Once the John Noble Home Emergency Response Plan is activated,

- All employees are to continue reporting to their normal duties unless specifically directed to do otherwise.
- All previously approved vacations will be suspended until the staffing situation is stabilized, and the Control Team advises staff otherwise.
- All staff on leave will check in with their immediate supervisor regarding a return to work.
- Human Resources will review the master schedule on a daily basis and identify areas that are vulnerable due to staff shortages. Deployment of staff from other areas of the home may be necessary to fill areas that are short.
- Minimum staffing levels for each department will be established based on the nature of the emergency to accommodate reduced staff availability, and an augmented level of staffing defined with which to sustain essential program/service operations. Where lower priority programs/services are curtailed, staff resources made available will be redeployed to sustain essential services/programs. It is expected that staff will have to be redeployed across services/programs. Consideration will be given to compatibility of skills required in adapted work roles and competence of personnel to be redeployed. Where instruction or training to perform specific tasks is required, such will be provided.

2.3 Health care workers' ethical duty to provide care will be referenced.

- By virtue of John Noble Home being a health care provider organization, all employees engaged in delivering direct resident care or in support of organizational functioning, are considered health care workers, and are expected to honor the applicable ethical duty to continue providing care.
- Employees who are members of regulated health and social services professional colleges are expected to abide by their respective ethical codes of conduct to continue meeting the needs of clients in their care.

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2.4 Once the emergency is declared, the John Noble Home will constantly monitor the health and operational status of its workforce

2.5 Guidelines for John Noble Home staff working at multiple sites, or for multiple employers.

- Staff will follow Public Health’s direction or any other authority related to working at multiple sites.
- Depending on the severity of staff shortage, the Control Team will determine if staff might have to be shared between more than one unit.
- External expert advice by appropriate authorities such as but not limited to: Brant County Health Unit and the Ministry of Health – Emergency Management Branch, will be sought by the Control Team, as necessary, to inform such decisions.

3. Protecting and supporting employees

3.1 Protection of staff

The John Noble Home will take all possible steps to protect staff – and reduce risk including:

- Providing staff with appropriate personal protective equipment (PPE) – i.e., face shields, masks, gloves, gowns – as prescribed by authorized governmental authorities.
- The Director of Care, IPAC Lead and the Joint Health & Safety Committee will jointly oversee implementation of appropriate health and safety, infection prevention and control programs; and augmenting them with directives issued by the Brant County Health Unit or any authority.

3.2 Managers will arrange for relevant training to be provided to staff as needed to promote better practice such as surveillance, infection prevention and control while caring for residents.

- Acknowledging the commitment of employees working in high-risk situations

The John Noble Home will commit to accessing all available resources through government and such other corporate/community resources as might be available to acknowledge gratitude for the commitment and sacrifices made by staff in continuing to care for residents/clients in the context of risk during an emergency.

- Attending to staff well-being during the emergency

Managers and supervisors will:

- Give due consideration to the burden of stress by working at a setting and time of risk and having to juggle between family and work responsibilities;

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- Address staff need for rest and shift rotations when managing staff scheduling, and calling off-duty staff to cover shortages;
- Facilitate mobilization of peer support where appropriate, and facilitate access to more specific psychosocial support resources when necessary; and,
- Support employees in addressing family care needs and obligations, including but not limited to child and elder care provisions, and compassionate leaves for funerals etc.
- Pre-plan for:
 - Provisions for staff choosing not to return home between work-shifts to access rest facilities – e.g. on-site designated staff quarters
 - Meals for staff working extended shifts;
 - Transportation support;
 - Childcare and/or eldercare, and other family support assistance.
- Monitor and address issues of staff and resident morale during the emergency, and arrange for such intervention as available resources might allow during this period
- Human Resources will help staff who require access to counseling support, referral to community resources, and other Employee Assistance Program (EAP) provisions.

4. Pre-establishing minimum staffing thresholds for all functional areas

Where essential services/programs might have to be operated with reduced staff and modified functional objectives, it is essential that those who best understand the operation of each service/program be involved in pre-establishing what constitutes the absolute minimum level of essential services, and recommending human resources required to carry them out.

- a. Nursing will convene working group(s) comprised of management and frontline staff during the emergency to review service/program and operational support areas that normally report to them, and
 - Identify the “*minimum* resident care needs” profile of each area if level of service delivered is to be compromised by staffing shortage;
 - Identify and maintain a list of care tasks that can be delegated to personnel not normally involved in providing direct care in a long-term care home setting, with informational/instructional support;

(Note: “Controlled Acts” as described in the Registered Health Professions Act are not to be included unless they can be delegated to other Regulated Health Professionals authorized to carry out such “Controlled Acts”)

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- Identify the absolute minimum number and composition of regulated staff – i.e. number of RN, RPN and non-regulated personnel required to continue providing essential care over a period of time that might last for 12 hours or more.
- Based upon the above information, an “**Absolute Minimum Staffing Plan**” to sustain operation of each service/program will be compiled based on the nature of the emergency and the needs of the Home.
- Each Director will compile a Minimum Staffing Plan for his/her area of responsibility, and provide a copy to Human Resources during the emergency to facilitate coordination of implementation.
- Each Director will oversee similar processes to compile a Minimum Staffing Plans for the areas that normally report to them. The Director will take into consideration the nature of the emergency and adjust the plan to fit the needs of the Home at that time.
- Human Resources will refer to these Minimum Staffing Plans when coordinating redeployment of staff and other human resources during the emergency.
- The Director of Care will liaise with physicians affiliated with the John Noble Home to coordinate delivery of medical coverage for essential services/programs during the emergency.

5. Planning for knowledge/skill transfer to supporting personnel being redeployed

To optimize utilization of available human resources in a time of scarcity, staff will be redeployed, as well as volunteers will be assigned, to perform diverse tasks. To ensure competent performance and confidence by all concerned.

5.1 A “Skills Inventory” will be created in which

- Each Department defines core activities in their respective functional area essential to business continuation.;
- All resident care and business function departments are to document critical work processes that need to be maintained.
- Human Resources will help Managers identify staff categories that are already capable or can be made ready quickly to discharge those core activities;
- Human Resources, and Managers will address how cross-training and skills-development might be implemented in the most practicable way to ensure availability of human resource to discharge RHPA regulated acts.

5.2 When redeploying staff, and volunteers, care will be taken to:



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- Match skills, capability and personal suitability with required tasks, and
- Provide tasked individuals with the necessary information and instruction required to perform those functions.
- Ensure such orientation and instructional information to be provided through incumbent staff modeling behavior, or access to job action sheets before they are put in a position of delivering specific services.

6. Maintaining currency of the Human Resource and Staff Deployment Policy 11-A-10

This policy, for managing human resources and staff deployment at the John Noble Home under circumstances of constraint precipitated by an emergency, will be reviewed by the Emergency Planning Committee at least annually, and amended, as necessary.

DATE APPROVED:	July 2008
DATE REVIEWED:	December 2023
DATE REVISED:	December 2023

MANUAL:	Emergency	Policy No.:	11-A-20
SECTION:	Staffing Contingency Plans		
SUBJECT:	Contingency Plans: Labor Disruption/Staffing Shortage		

POLICY: The Home shall have contingency plans in place in the event of a labour disruption.

PURPOSE: The Home shall have in place contingency plans to maintain resident services and ensure resident safety in the event of a labour disruption.

PROCEDURE: The Home shall determine at the time of disruption or emergency the minimum staffing requirements necessary in order to ensure the safety and comfort of all residents and adequate response to the emergency.

- Staff may be asked to stay on-site until a replacement staff arrives to ensure appropriate resident care
- Food supplies will be available for staff during the emergency period

In the event that minimum staffing requirements cannot be maintained due to a labour disruption, the Administrator or designate shall determine if evacuation and provision for services at alternate sites by alternate service providers shall be implemented.

- The Administrator or designate shall be responsible for overall communication with outside Authorities as well as communication with residents, families and staff.
- The Home shall have in place an Emergency Shelter Plan detailing the assistance that other local facilities have agreed to provide in the event of an evacuation to alternative sites.

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