

# **Grey Bruce Emergency Management of The COVID-19 Pandemic**

## **Owen Sound City Council**

**March 29 2021**

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**For the Grey Bruce Health Unit**

# Presenter Disclosure

- **Presenters: Dr. Ian Arra**

**Relationships with commercial interests: None**

**Grants/Research Support: None**

**Speakers Bureau/Honoraria: None**

**Consulting Fees: None**

**Other: None**

January 2021

# REPORT ON COVID-19 Vaccine Survey

Prepared for Grey Bruce Health Unit by PRA Inc.



# Key findings

About 4 in 10 respondents appear to have some hesitancy about a COVID-19 vaccine, with younger respondents being less likely to say that they will definitely get it. The primary reason for not getting it is a belief that the vaccine was rushed and there has not been enough testing.

About one third of respondents are not worried about themselves or a family member getting infected by COVID-19 in the next year. It is difficult to tell if this lack of worry is because they are taking precautions or because they do not believe COVID-19 is a threat to their or their family's health (if they were to be infected).

The vast majority say that they always follow guidelines, although younger and Indigenous respondents are most likely to have been within two metres of people outside their household. In addition, those aged 25 to 34 are most likely to have participated in social gatherings in the past month.

Respondents are very positive about Grey Bruce Health Unit's handling of COVID-19, although there is some indication that Indigenous respondents are less positive about some aspects.



# Demographic profile

# Methodology

- PRA conducted a random-digit telephone survey with 400 respondents in the Grey Bruce Health Unit (GBHU) from December 21, 2020 to January 18, 2021, yielding an error rate of  $\pm 4.9\%$  (based on a 95% confidence interval).
- The survey excluded those living in households with someone employed at the GBHU.
- To correct for discrepancies in the gender, age, and income of respondents relative to Census information, the data presented in this report were weighted to correct for differences between the demographics of the sample and the population. All results are weighted unless otherwise noted.
- Where applicable, statistically significant differences refer to a p-value of less than .001 between groups.

# Perceived risk of COVID-19

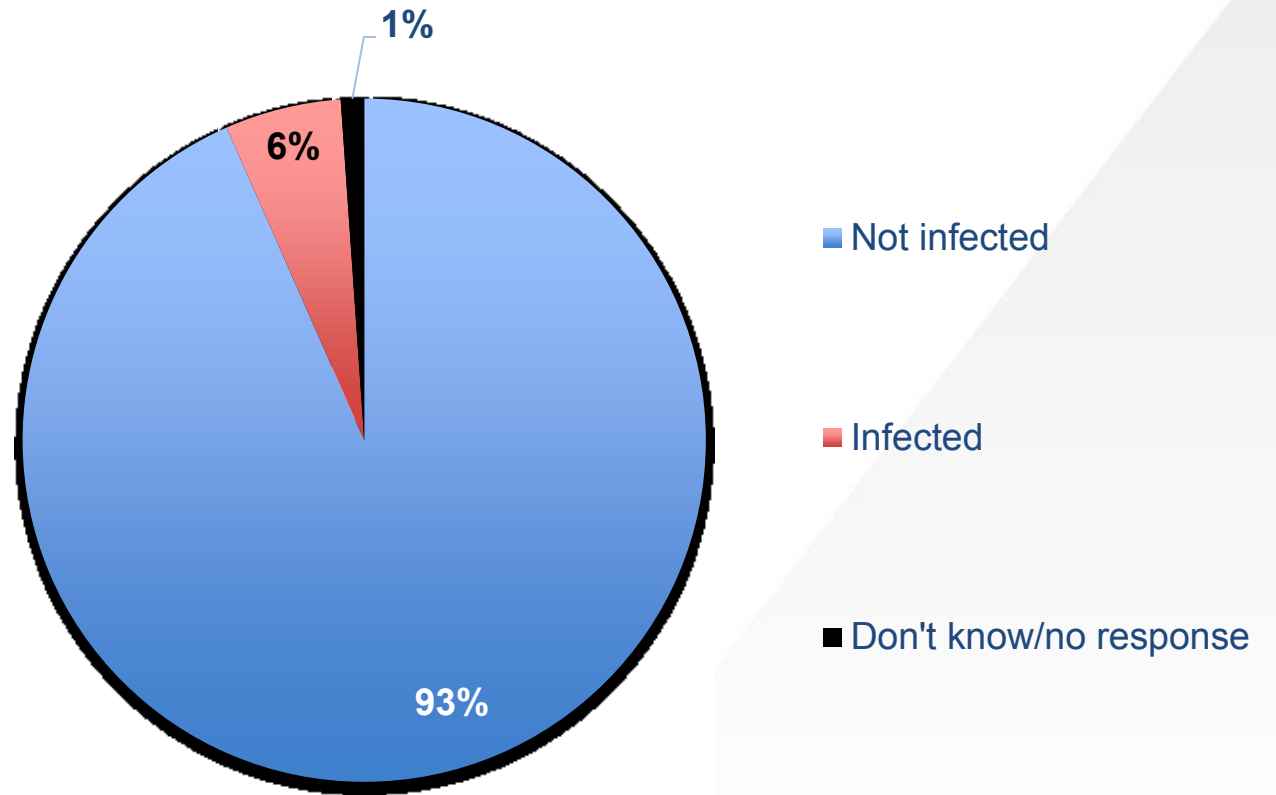
# Infected by COVID-19

Q2. Have you, or a member of your immediate family, already been infected with COVID-19?

- One in 20 respondents have been infected with COVID-19 or have had an immediate family member infected with COVID-19.

## KEY DIFFERENCES

- Those who are unemployed (10%) are more likely than those employed (5%) or not in the labour force (5%) to know someone who has been infected.





# High-risk groups

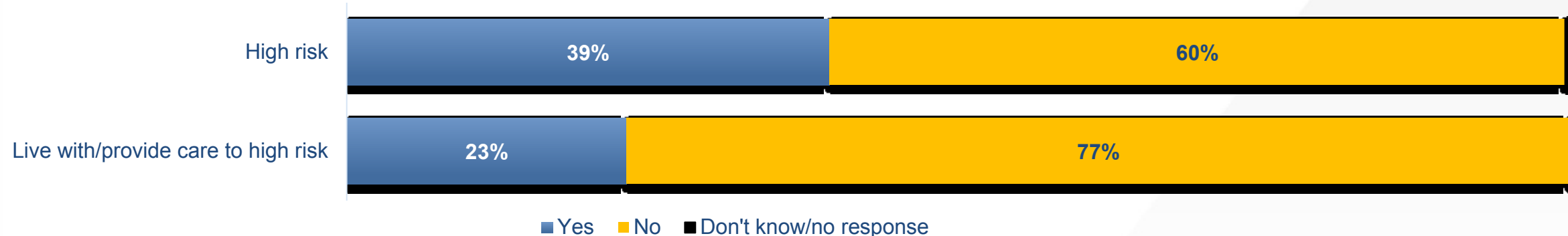
Q3. Are you a person who is at high risk for complications from infection with COVID-19? High risk is defined as older adults, people with chronic conditions or those who are immune-compromised.

Q4. Do you live with, or provide unpaid care to someone who is at high risk for complications from infection with COVID-19?

- 39% say they are at high risk for complications from COVID-19, and 23% say they live with or provide care to someone who is at high risk.

## KEY DIFFERENCES

- Older respondents, those in households with fewer people, those in lower income households, and those with people over 65 in their household are most likely to say they are at high risk.



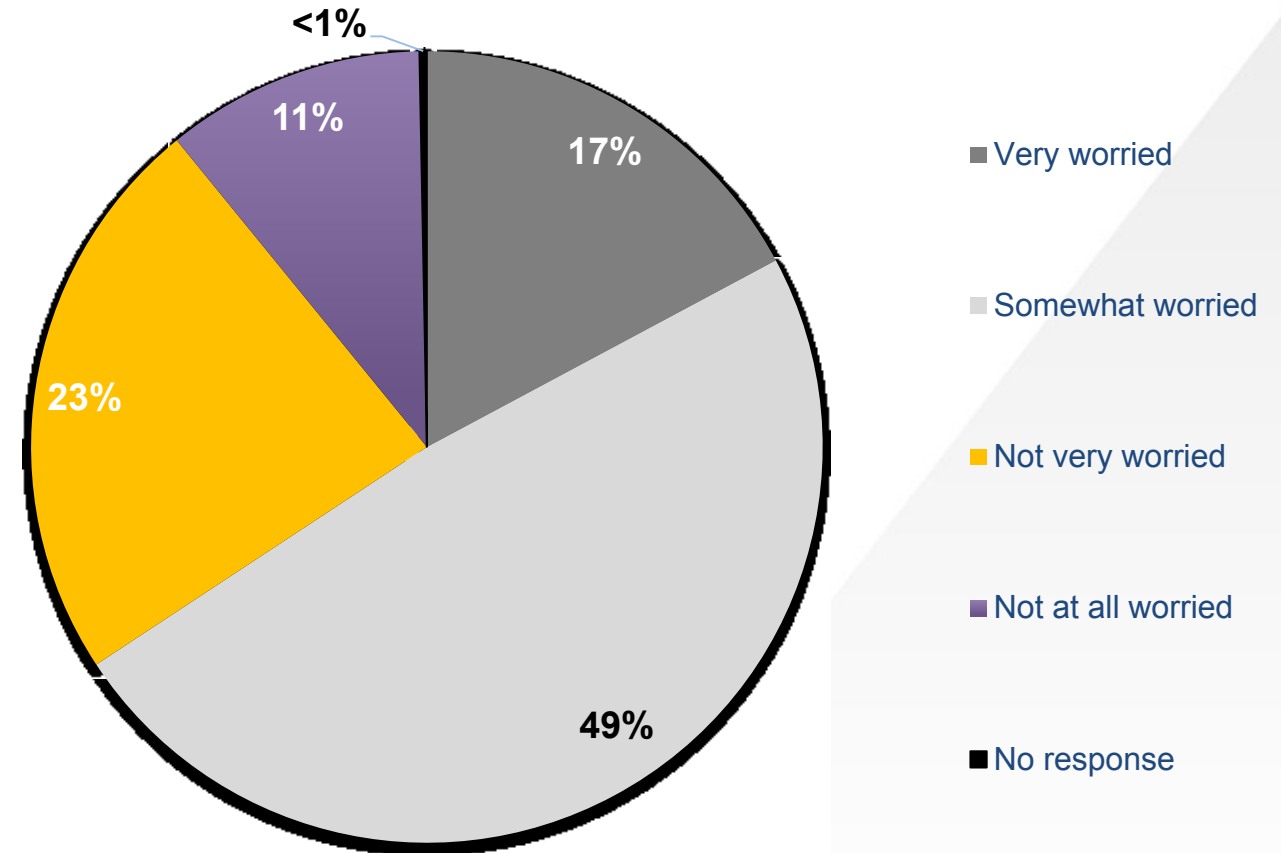
# Concern about COVID-19

Q1. How worried are you that you or a family member will get infected by COVID-19 in the next 12 months? Would you say you are...

- Overall, about 7 in 10 respondents are worried about themselves or a family member getting COVID-19, including 17% who are very worried.

## KEY DIFFERENCES

- Those who say they are high risk or live with people who are high risk are more likely to be worried about getting COVID-19.



# Following COVID-19 guidelines

# Following guidelines

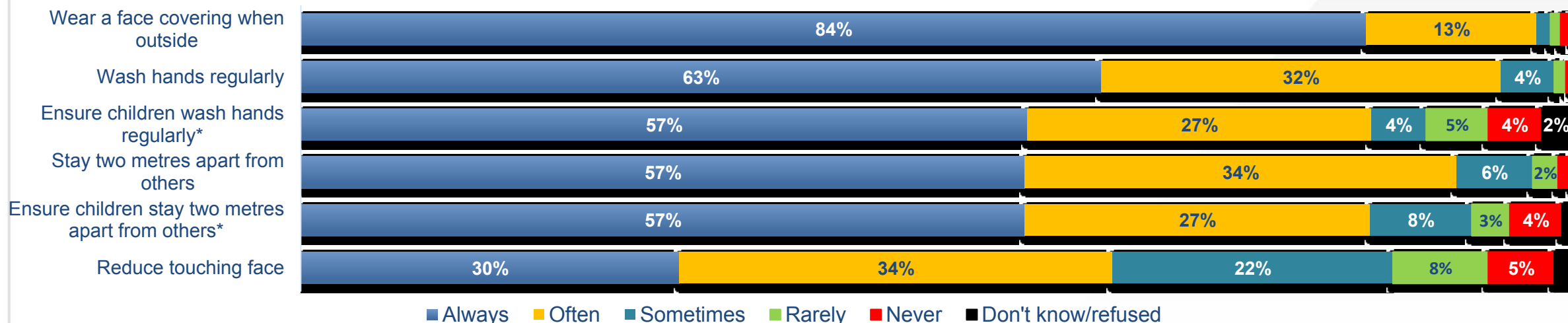
Q6A-F. How often would you say you...

Note: Answers of 'Not applicable' have been removed from calculations.

- Respondents are most likely to always *wear a face covering when outside their home* and least likely to *consciously reduce touching their face*.

## KEY DIFFERENCES

- The older someone is the more likely they are to always *stay two metres apart from others not in their household or social circle*.
- Indigenous respondents were less able to always *stay two metres apart from others* compared to other ethnic groups.



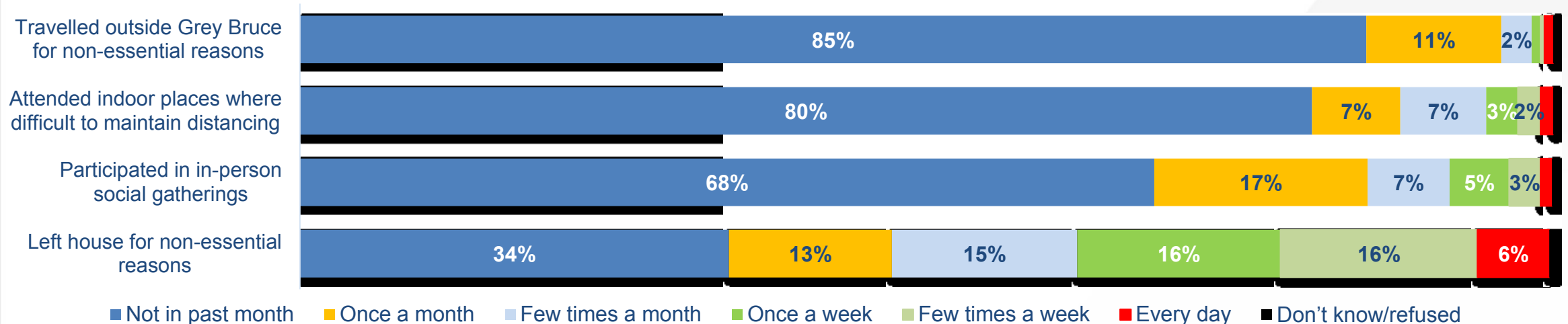
# Out-of-home behaviours

Q7A-D. How often in the past month have you...

- Respondents are most likely to have *left their house for non-essentials*, as almost 4 in 10 have done this at least once a week. This compares to about 1 in 10 who have *participated in social gatherings* about once a week or *attended indoor places where maintaining social distancing is difficult*. Very few have *travelled outside Grey Bruce for non-essential reasons* on a weekly basis.

## KEY DIFFERENCES

- Respondents who are high risk are less likely to have *left their house for non-essential reasons*.
- Respondents 25 to 34 years old are most likely to have *participated in in-person social gatherings* at least a few times in the past month.



# **GBHU's performance managing COVID-19**

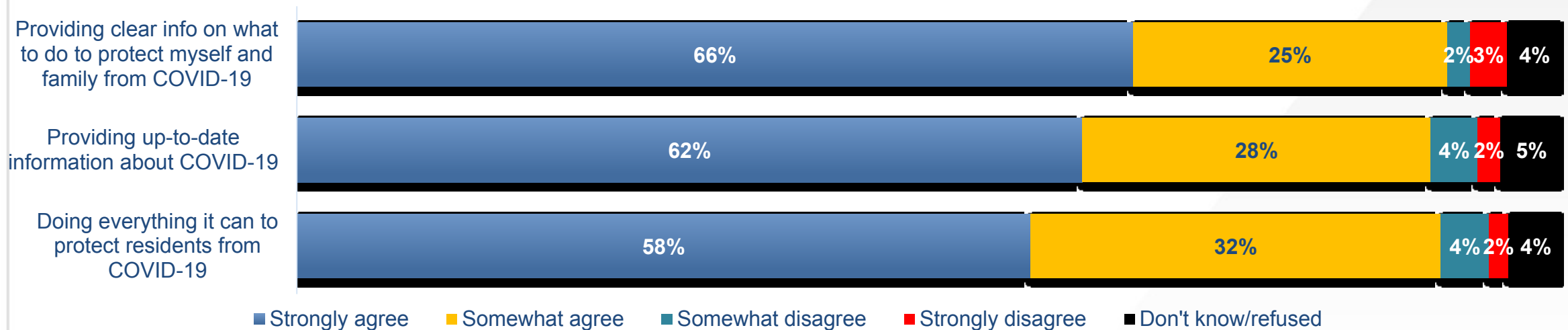
# Opinion on GBHU's management of COVID-19

COVID1-3. To what extent do you agree or disagree that Grey Bruce Health Unit is ...

- Respondents are generally positive about how GBHU has managed COVID-19, with the greatest number of respondents strongly agreeing that GBHU is *providing clear information on what I can do to protect myself and my family from getting COVID-19*.

## KEY DIFFERENCES

- Indigenous respondents are less likely to strongly agree that GBHU is *providing clear information and doing everything it can to protect respondents*.



# Vaccines and COVID-19 vaccine



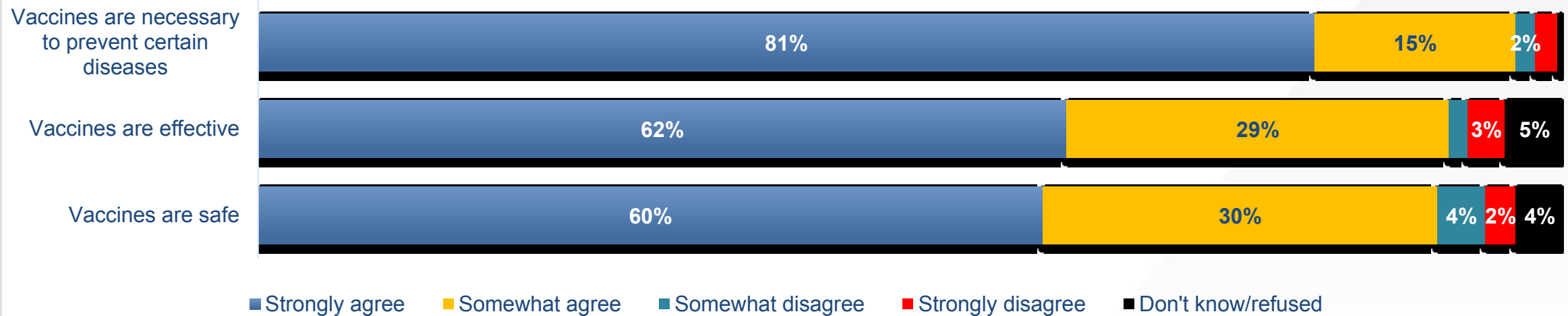
# Perception of vaccines in general

VBB1-3. To what extent do you agree or disagree that...

- Of interest, over 8 in 10 strongly agree that *vaccines are necessary to prevent certain diseases*, but only 6 in 10 strongly agree that *vaccines are effective or safe*.

## KEY DIFFERENCES

- The more education that respondents have, the more likely they are to strongly agree that *vaccines are safe*.
- Indigenous respondents are less likely than other ethnic groups to strongly agree that *vaccines are safe and are necessary to prevent certain diseases*.



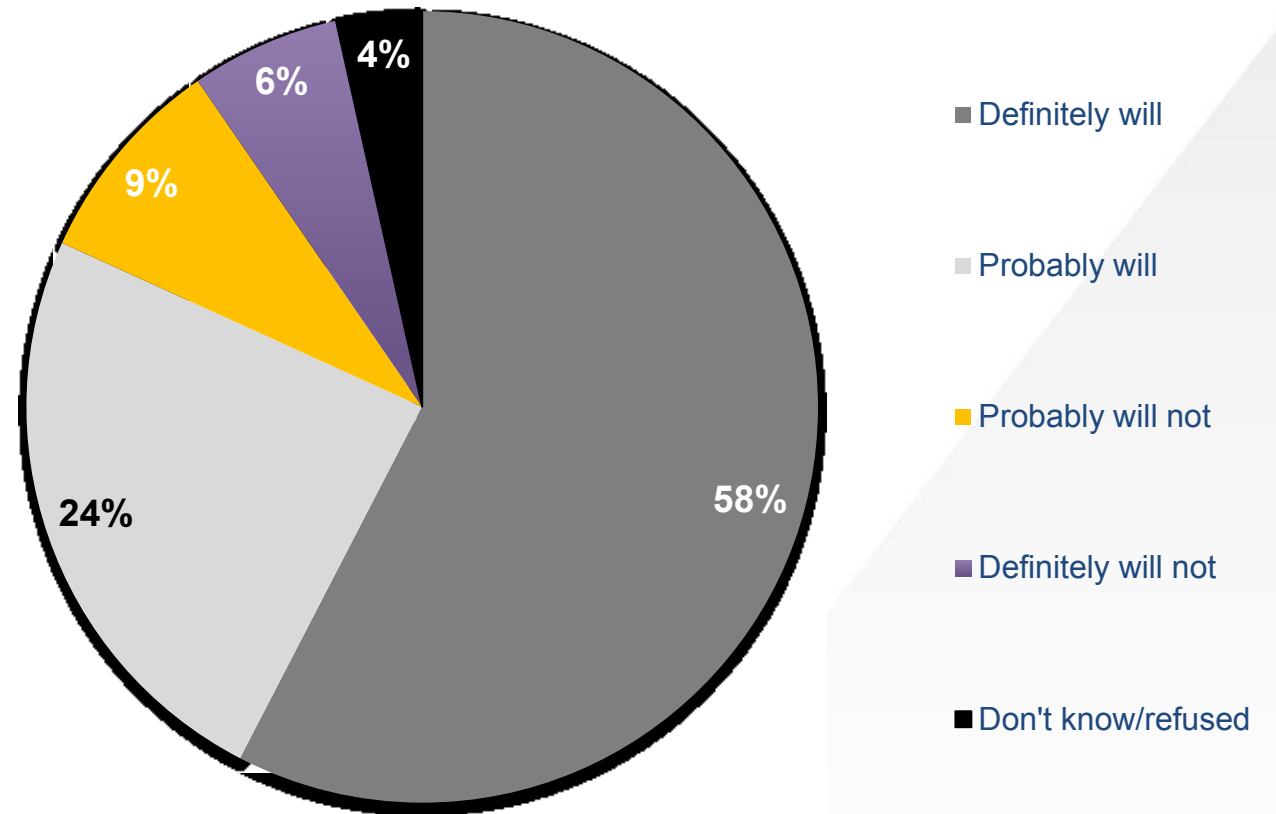
# Likelihood of getting COVID-19 vaccine

Q8. As you likely know, vaccines have been developed to protect against COVID-19. Once a COVID-19 vaccine is rolled out in Ontario, would you say you...

- Six in 10 respondents definitely will get the COVID-19 vaccine once it is rolled out, while others are at least somewhat hesitant.

## KEY DIFFERENCES

- The older respondents are and the more education they have, the more likely they are to say that they *definitely will* get the vaccine.

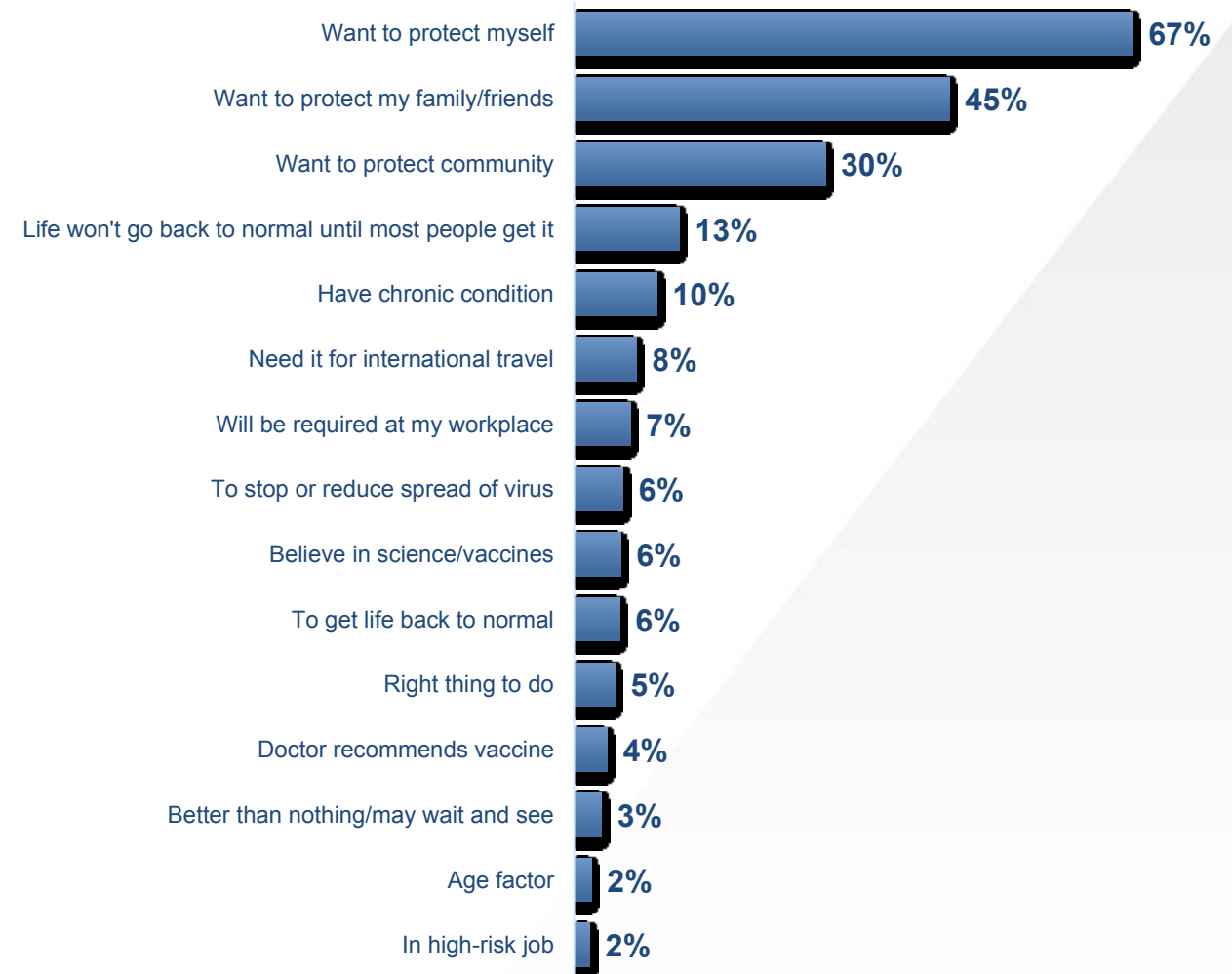


# Reasons for getting the COVID-19 vaccine

Q9. Why would you choose to get a COVID-19 vaccine?

BASE: Those who definitely or probably will get the vaccine; n = 327.

- The most common reasons for getting the vaccine are related to protection, foremost for the individual, followed by family/friends and then community.

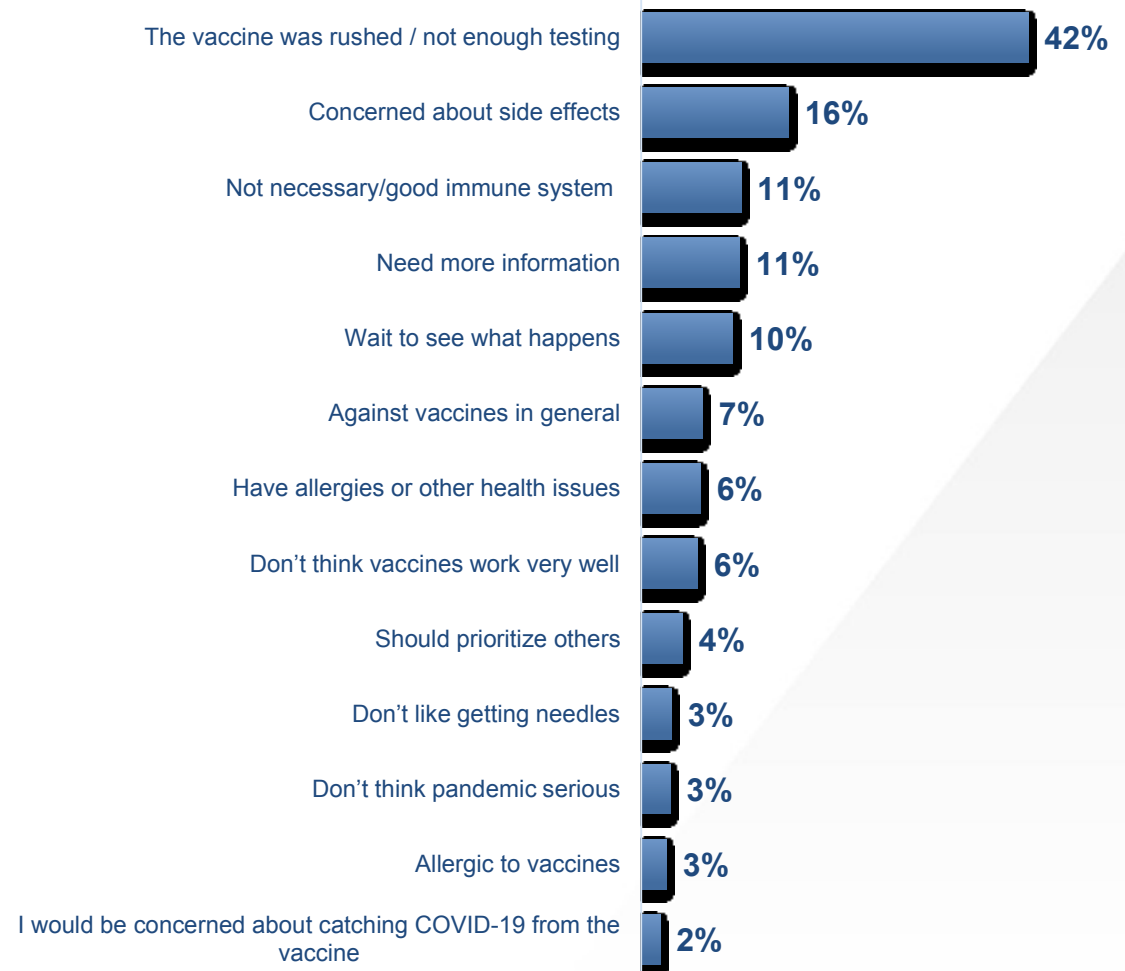


# Reasons for not getting the COVID-19 vaccine

Q10. Why would you choose not to get a COVID-19 vaccine?

BASE: Those who definitely or probably will not get the vaccine; n = 73.

- The most common reason for not getting the vaccine is that respondents feel the vaccine was *rushed and/or not tested enough*.
- Potentially related to that are *concerns about side effects* and *needing more information about the vaccine*.

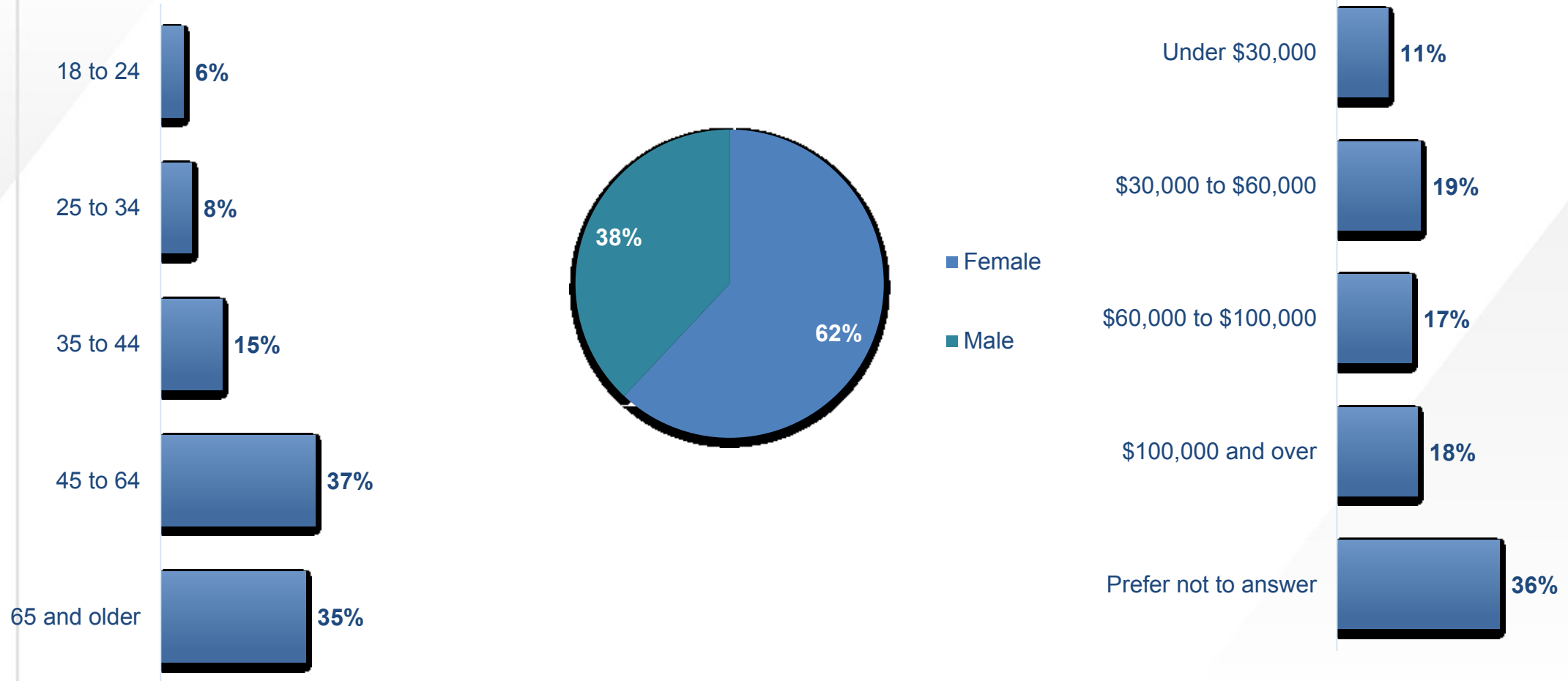


# Profile of respondents

# Demographics used for weighting (unweighted)

S2. In what year were you born?

D9. Can you estimate in which of the following groups your household income falls? Was the total household income during the year ending December 31, 2020...

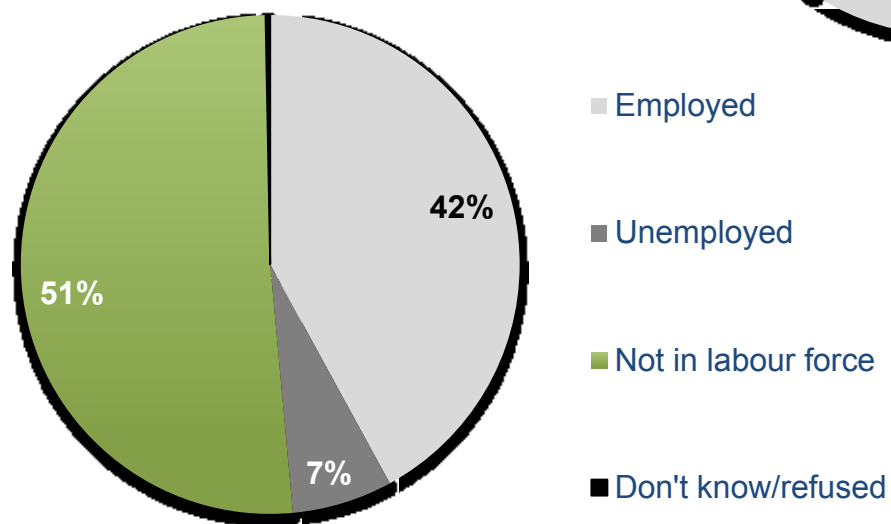
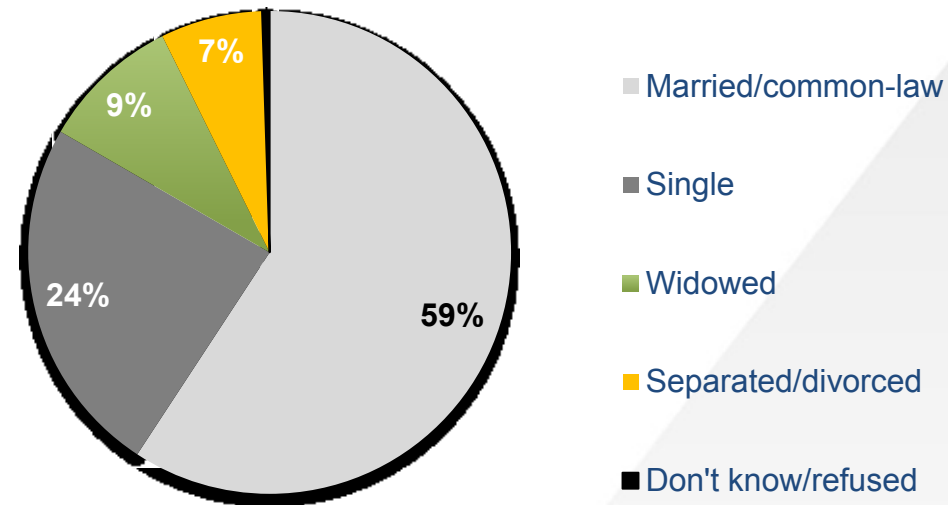
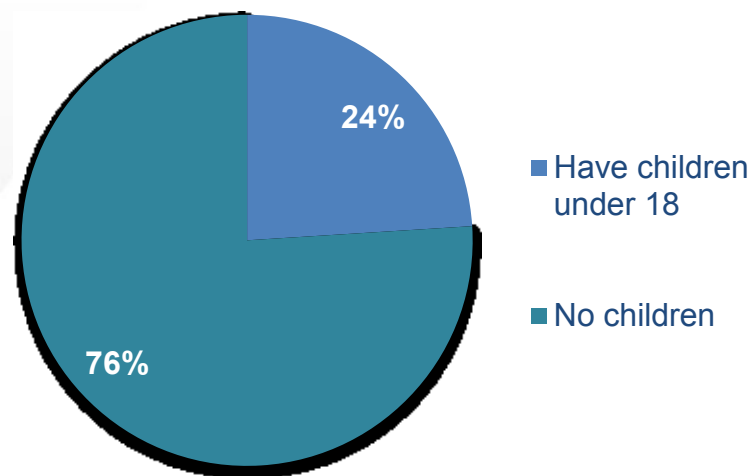


# Other demographics

Q5. Do you have children under 18 living in your household?

D1. What is your marital status?

D5. Which one of the following best describes your current employment situation?

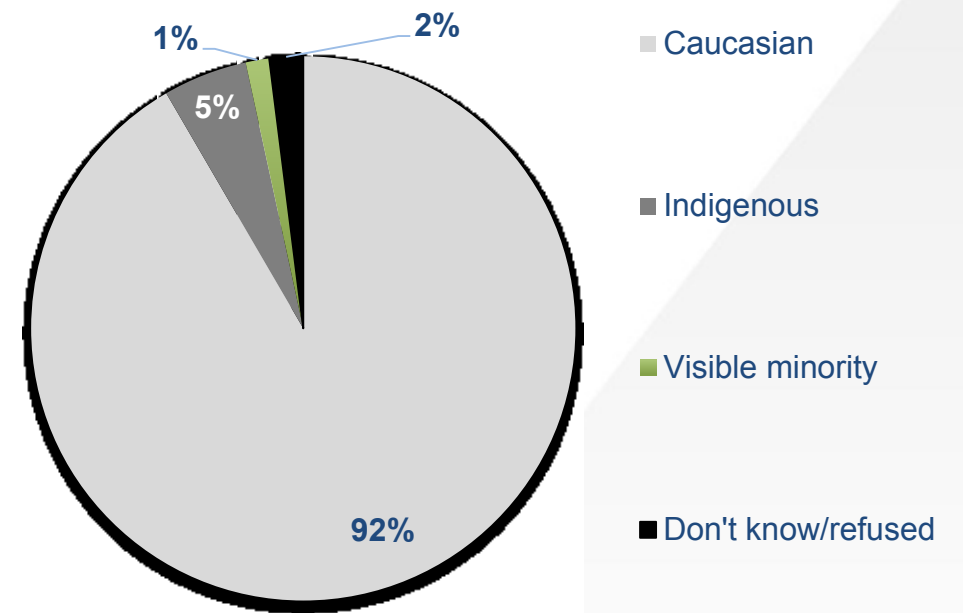
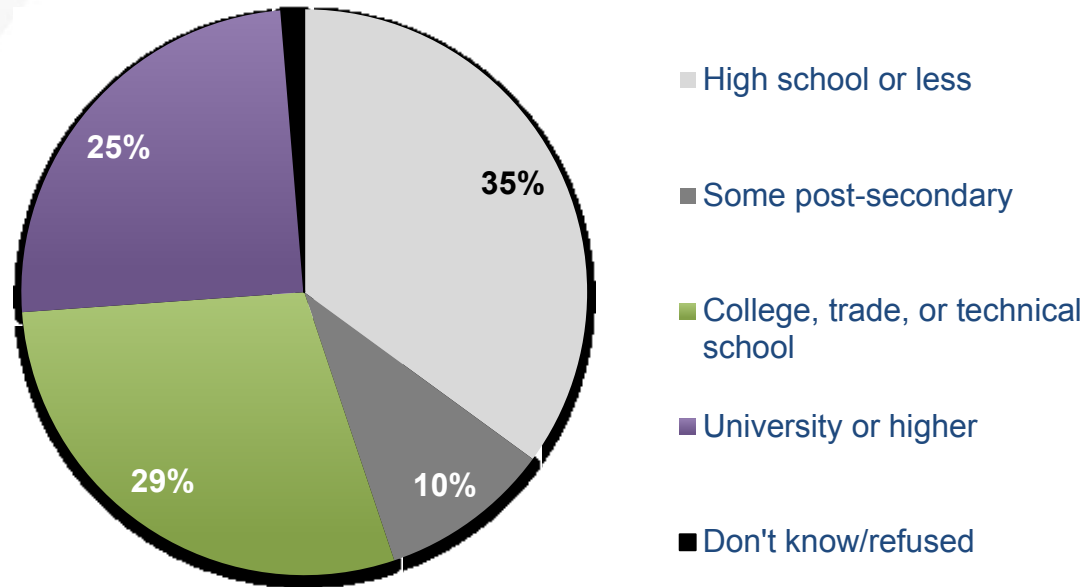


# Other demographics

D8. What is the highest level of education you have completed?

D10. Do you identify as First Nations, Métis, or as a part of another Indigenous group?

D11. Which race best describes you?

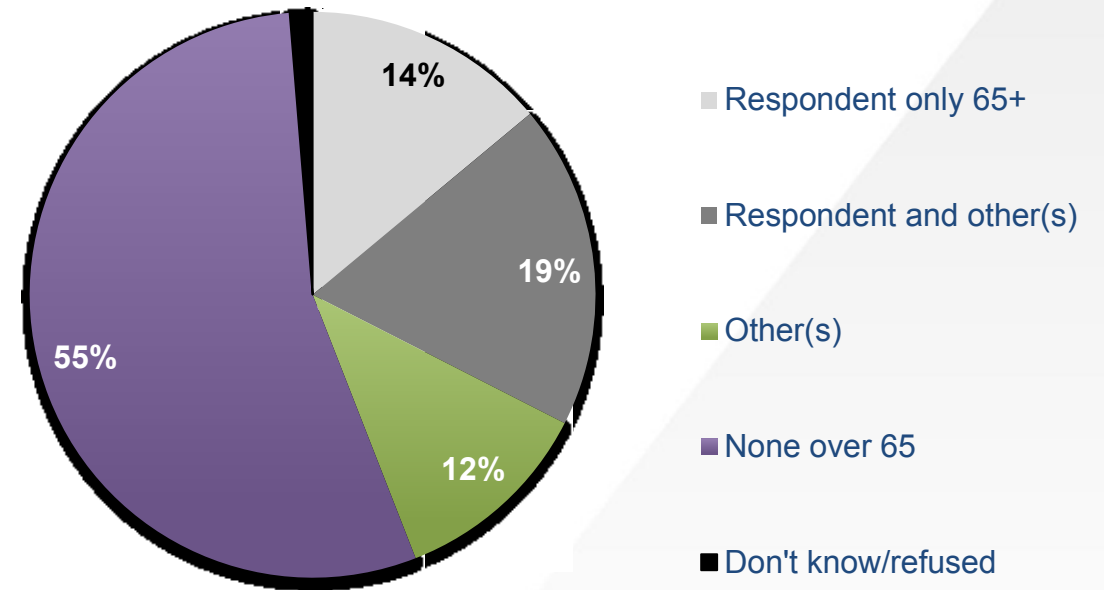
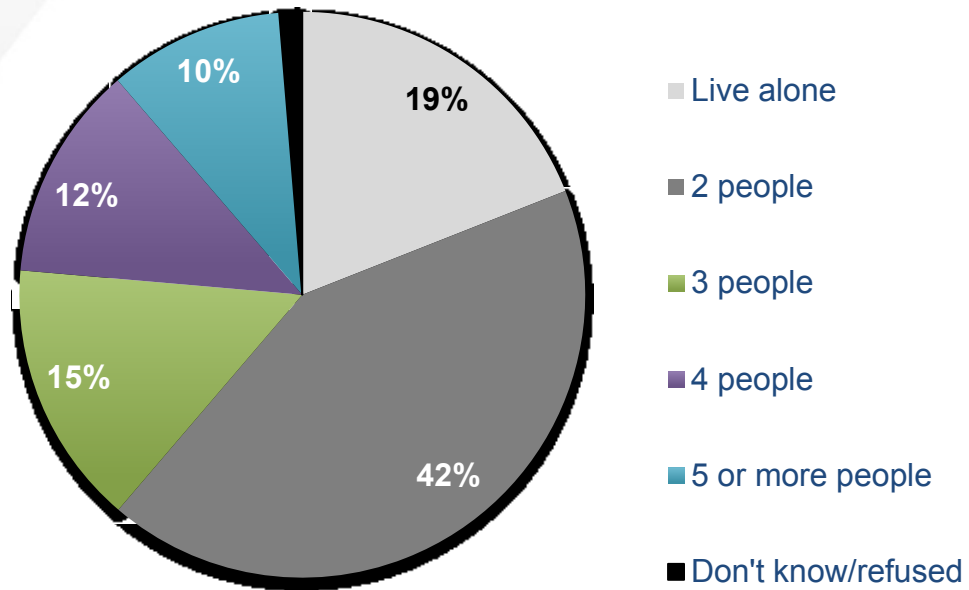




# Other demographics

D2. Including yourself, how many people are living in your home?

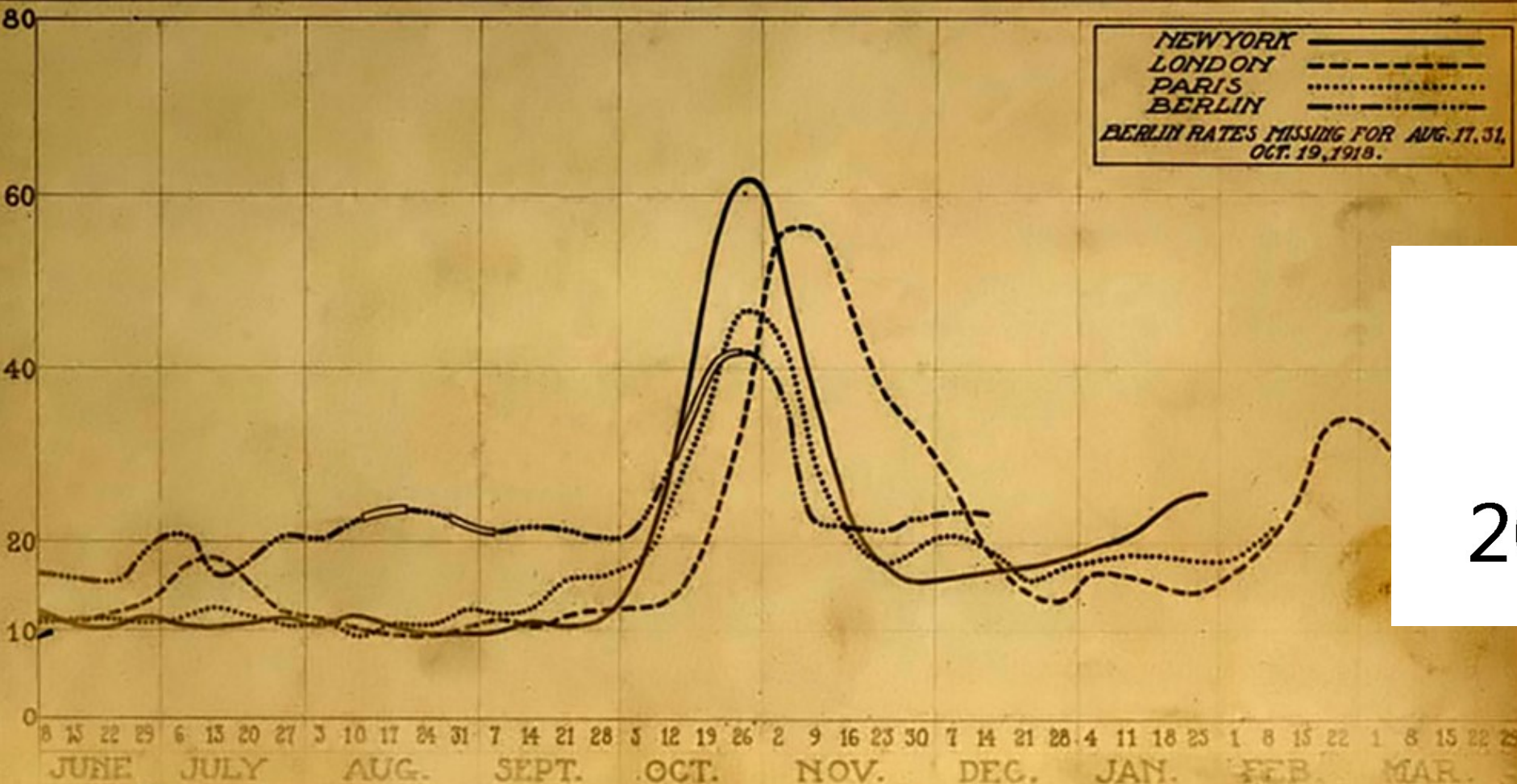
D4. (Besides yourself) Do you have a person who is 65 or older who is living in your household?



# INFLUENZA PANDEMIC

## MORTALITY IN AMERICA AND EUROPE DURING 1918 AND 1919

DEATHS FROM ALL CAUSES EACH WEEK  
EXPRESSED AS AN ANNUAL RATE PER 1000



2021-03-29.pdf

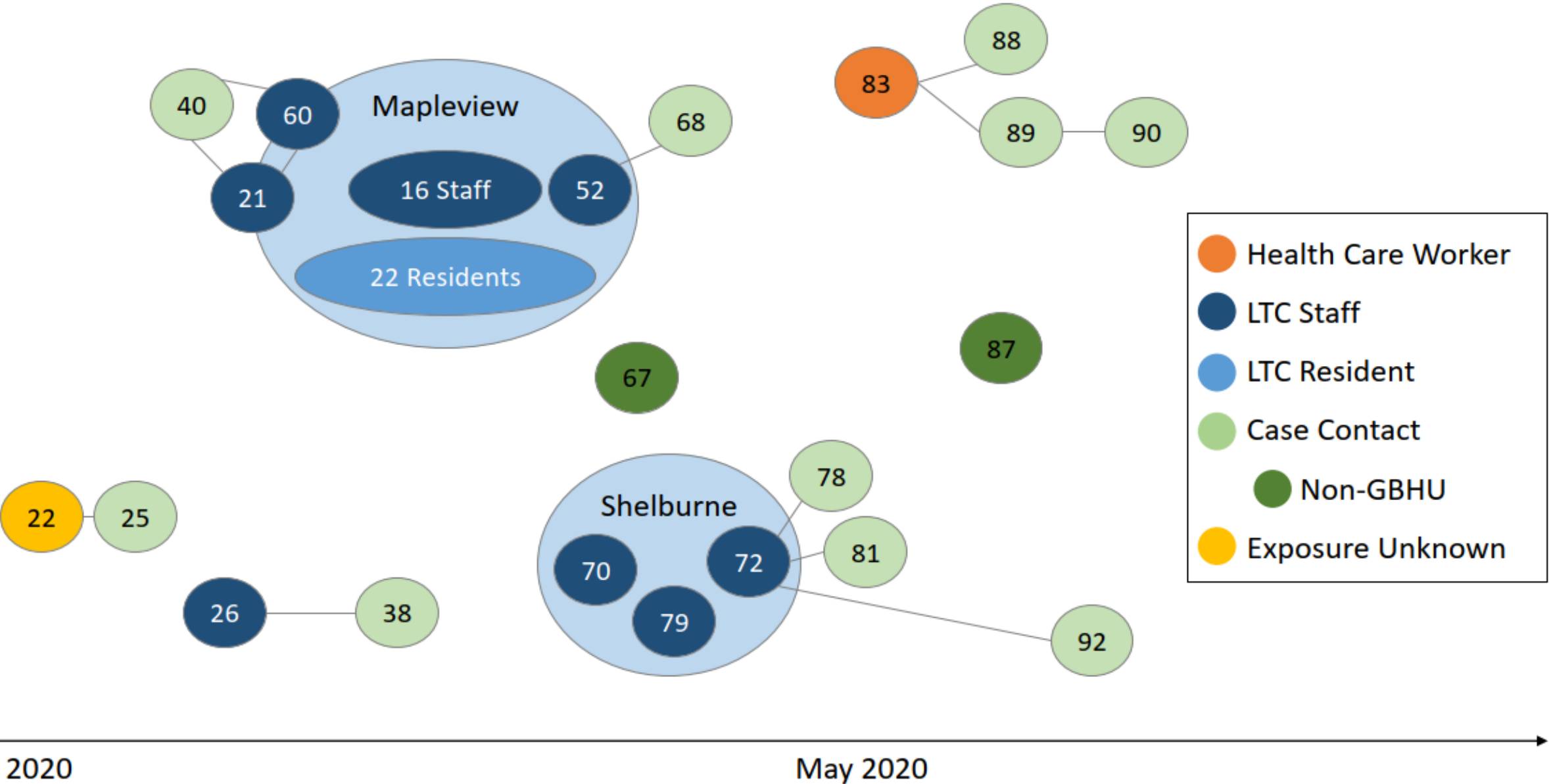
# Public Health & Preventive Medicine PHPM

- Masters of Public Health , Health Research, Epidemiology
- Environmental Health
- Health Promotion & Chronic Disease Prevention
- **Communicable Disease**
- Occupational and environmental health
- Economic evaluation, Health Planning & Policy
- **Senior Management & Administration**
- **Emergency Management**

# PH Event/Emergency, Complex Event

- **Complex events** tend to:
  - be prolonged in duration requiring major changes in personnel
  - be large in scale requiring large number of resources
  - involve multiple jurisdictions
  - require special knowledge to resolve**
  - pose a significant risk to responders or the jurisdiction as a whole
  - have the potential to cause widespread damage/loss to life
  - require a more complex structure and formalized plan

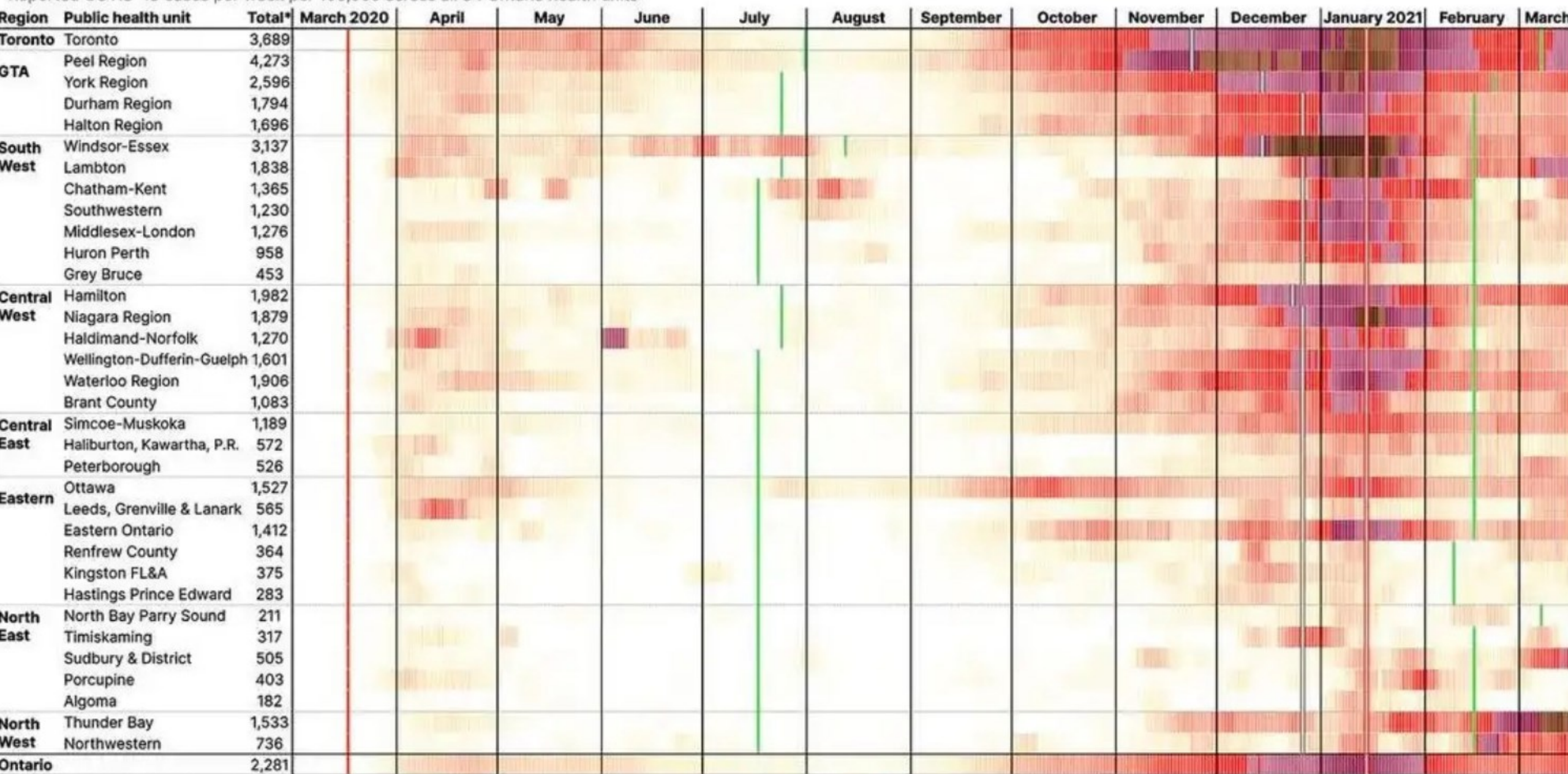
# Cluster Analysis





# Every day of the COVID-19 pandemic in every Ontario health unit, in one image

Reported COVID-19 cases per week per 100,000 across all 34 Ontario health units



\*Cumulative COVID-19 cases per 100,000

Emergency declared

Stage 3 reopening

Grey "lockdown"

Stay-at-home order

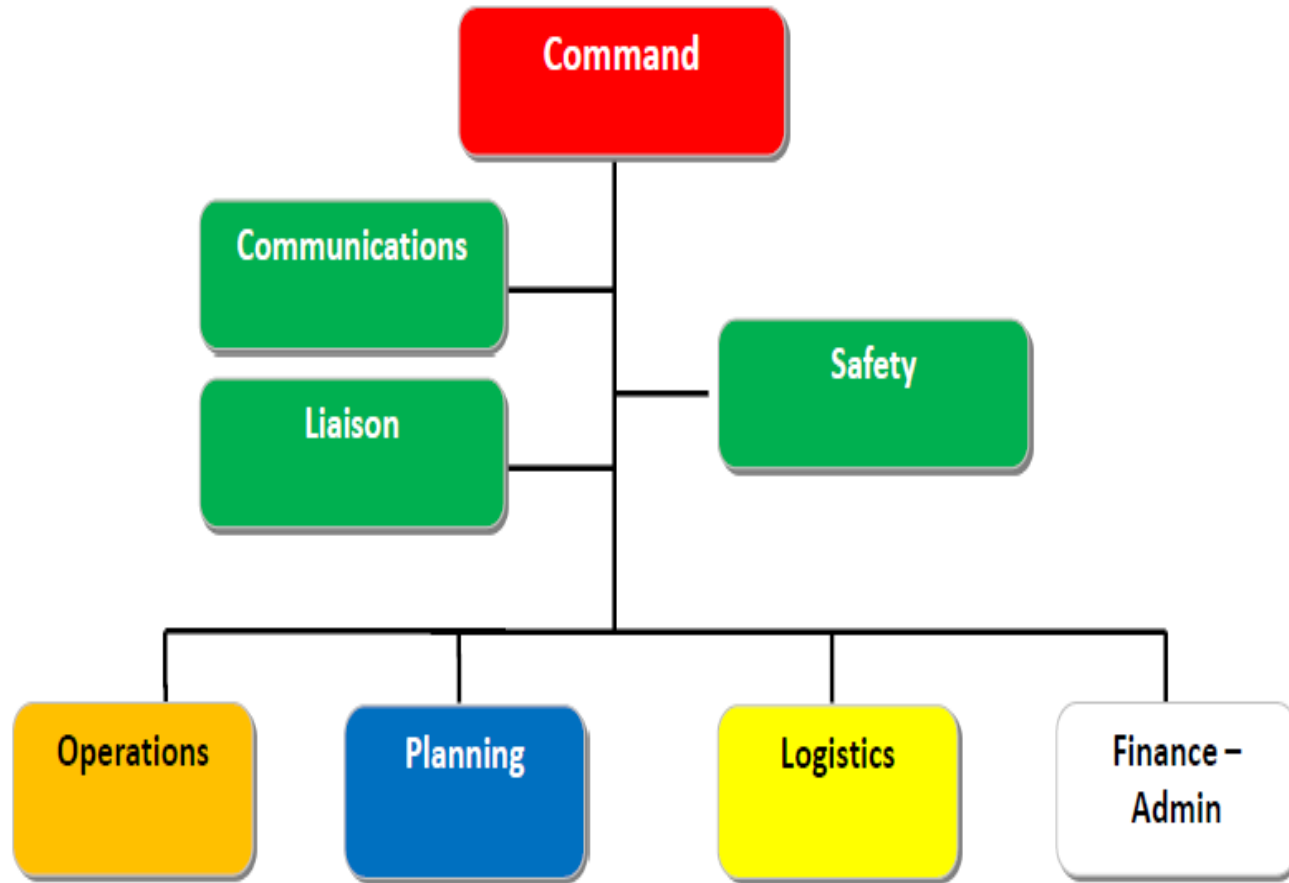
Order lifted

Legend: 0-100 cases/week per 100,000

100-200 cases/week per 100,000

200-300 cases/week per 100,000

# Emergency Management Tools

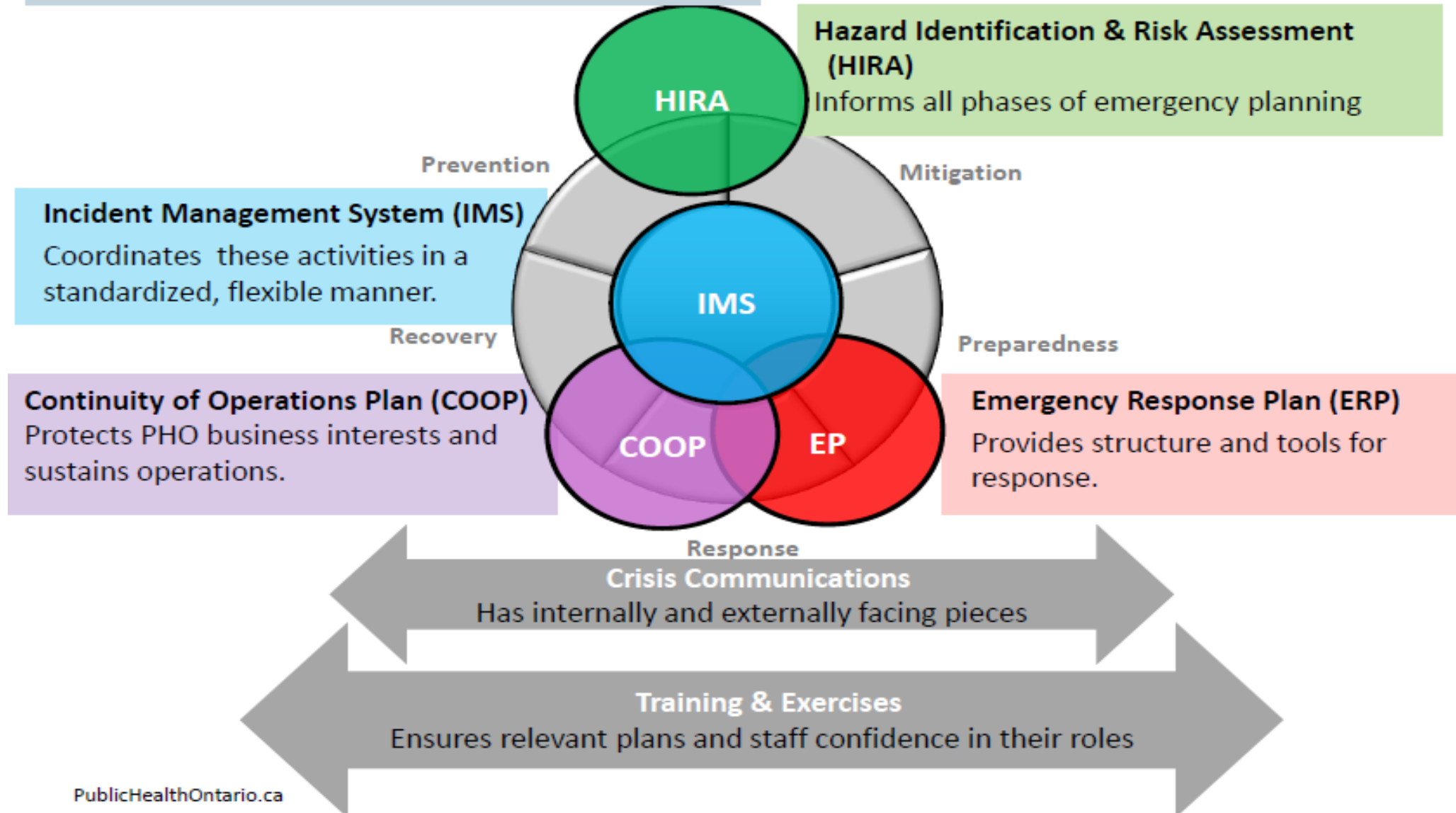


IMS Structure



Emergency Management Cycle  
Recovery

# Emergency Plans Mapped to the Emergency Management Cycle

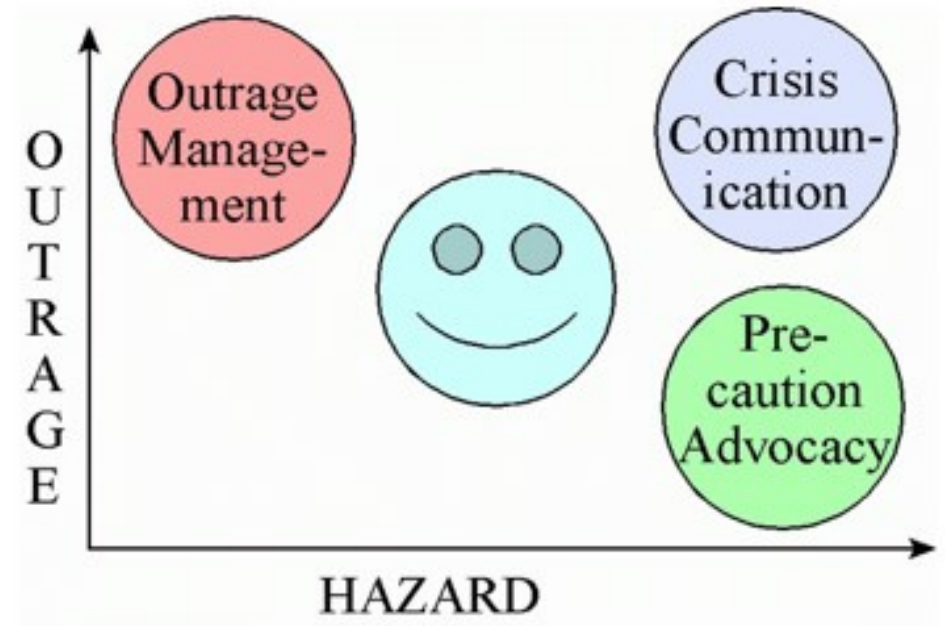





# Engaging Stakeholders, School Response Example

Keeping all posted on milestones:

- The Public
- Board of Health
- School officials
- Wardens, Mayors and CAOs
- MMPs
- Relevant hospital CEOs and Assessment Center managers.
- The Ministry of Health and the Ministry of Education
- Neighbouring Health Units
- Other stakeholders (faith leaders, local physicians, LTC, ...)





# Grey Bruce Mass Immunization Hub (Hockey Hub)

# Pillars of Response in GB

- The Public: informed, engaged concerned, but not afraid
- Public Health: Robust protocols, communication
- Local political Commitment to health: Municipal and MPPs
- Journalism: committed to provide timely and credible info to the public
- Community partners: NGOs, Private Sector
- Health care system: LTC, hospital...

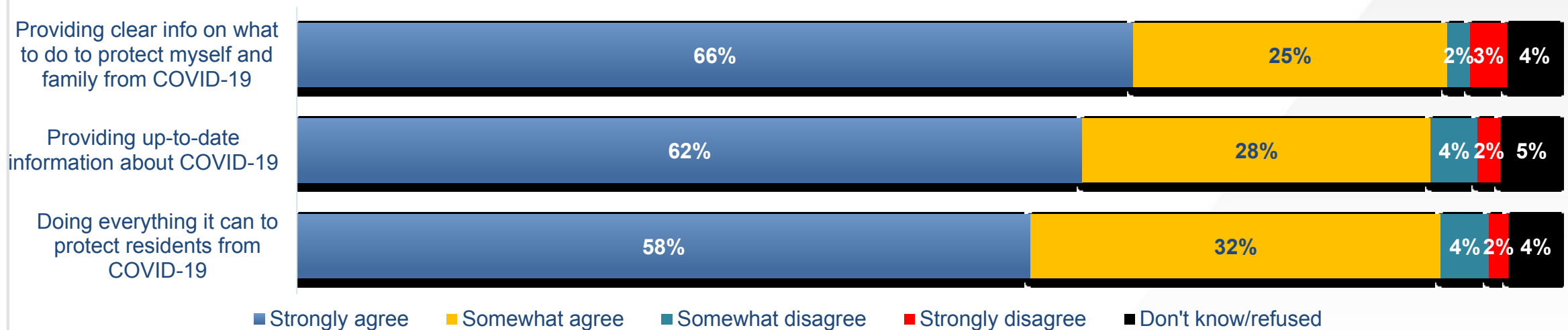
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## KEY DIFFERENCES

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# Grey Bruce Leading Innovation Provincially and Nationally

- **Sudbury:** [Coronavirus: Hockey hub-style COVID vaccination clinic opens in Sudbury | CTV News](#)
- **Lambton:** : [CAER, IEC, SLEA, Bruce Power and Enbridge Inc. Support Local Hockey Hub Immunization Model at Point Edward Arena - Lambton Public Health](#)
- Manitoba ran their first hub this past Tuesday, but planning to use in every large mass immunisation clinic provincially [Province of Manitoba | News Releases | New Process for Vaccine Delivery to be Piloted at Morden, Winnipeg Super Sites \(gov.mb.ca\)](#)
- Alberta are working on this too

# Response to Multiple Career Opportunities



Dear Dr. Arra,

Our client, **WestJet**, has retained **The Medfall Group** to assist in the recruitment and selection of its next **Chief Medical Officer** (ad attached).

I am emailing to follow up on a message I sent you last week regarding Guidepoint, a research services firm based in New York. Our clients are institutional investors, major consulting groups and corporations... I am currently working with a client looking to speak with someone who can discuss COVID testing, vaccinations, and what a post-COVID world might look like. Given your extensive experience and expertise, I am reaching out to you ... you would be compensated for your time by Guidepoint at an hourly rate of your choosing.

675 Avenue of the Americas. 2nd Floor | New York | NY | 10010

I wanted to advise you that we are recruiting five executive roles for the Ontario Health Agency, including the Vice President, Population Health and Value Based Healthcare. If you are interested in any of these roles, I recommend that you submit your application on the Odgers Berndtson website at your earliest convenience. To provide recommendations on potential candidates or to get more information on the roles, please send me a quick note. ,  
*Executive Search - Executive Interim - Leadership Assessment*

**“Unfortunately, due to professional and ethical obligations, I am unable to consider leaving my post while my team and myself are managing the COVID-19 emergency in the two counties (Grey and Bruce Counties) that I serve (about 180,000 residents)”. Dr. Arra’s Response**





# **Issues of Concern**



# Questions?



Public Health - Together We Build Healthy Communities