



**Lambton
Public Health**

After-Action Review Appendix B: Partner Organization Survey

November 29, 2023

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Background

During the summer of 2022, Lambton Public Health (LPH) conducted an After-Action Review of the COVID-19 pandemic response with the goal of identifying key challenges and best practices through staff debrief sessions, interviews, and surveys. This report builds on the internal review, seeking to identify key pandemic response challenges and best practices from the perspective of representatives from congregate settings that worked with LPH during pandemic response. The goal of documenting these lessons learned is to inform future planning and emergency response preparedness.

Methods

LPH invited employees from local congregate settings to complete an online survey for the purpose of evaluating LPH's pandemic response. Sectors that were eligible to complete the survey included: **long-term care homes (LTCH), retirement homes (RH), schools and child care centres, shelters, the jail, the hospital, hospice, and other congregate living settings** such as group homes, community living, and temporary foreign worker housing. Potential participants were identified by LPH staff and invited by email and during regular meetings. Those invited were encouraged to invite their colleagues. Only those employees who directly engaged with LPH during the pandemic were eligible to participate. Respondents were asked to evaluate each type of support that they personally interacted with (Figure 1) through a series of quantitative rating scales. Respondents were also asked several qualitative questions at the end of the survey (Figure 2).

Evaluation Questions

Figure 1: Types of support evaluated

- Interpretation of provincial public health guidance
- Consultation on pandemic-related policies and procedures
- Outbreak detection and management
- On-site infection prevention and control (IPAC) audits
- On-site vaccine clinic support
- Tangible resources (e.g., test kits, PPE)

Evaluation Questions

Figure 2: Qualitative questions

1. Thinking of how LPH and your organization worked together during the pandemic - what worked well?
2. Thinking of how LPH and your organization worked together during the pandemic - what didn't work well? What changes would you recommend?
3. Is there anything else that your organization would like LPH to know?

Results

A total of **102** valid respondents completed the survey. As expected, the number of survey responses increased with the size of the sector. For example, just under half of respondents were from schools, including local school boards (Figure 3), while smaller sectors such as the hospice and jail accounted for 1% of respondents, respectively. Most respondents worked in a supervisory or managerial role (75%), and most worked with clients in-person during pandemic response (88%).

Figure 3: Distribution of respondents by organization type (n=102)

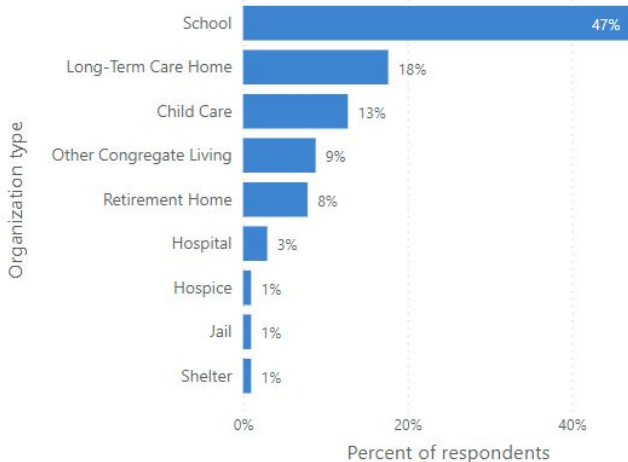
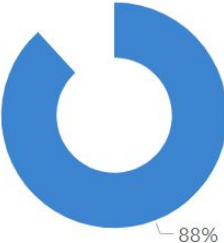


Figure 4: Percent of respondents who held a supervisory or managerial role during pandemic response



Figure 5: Percent of respondents who worked with clients in-person during pandemic response

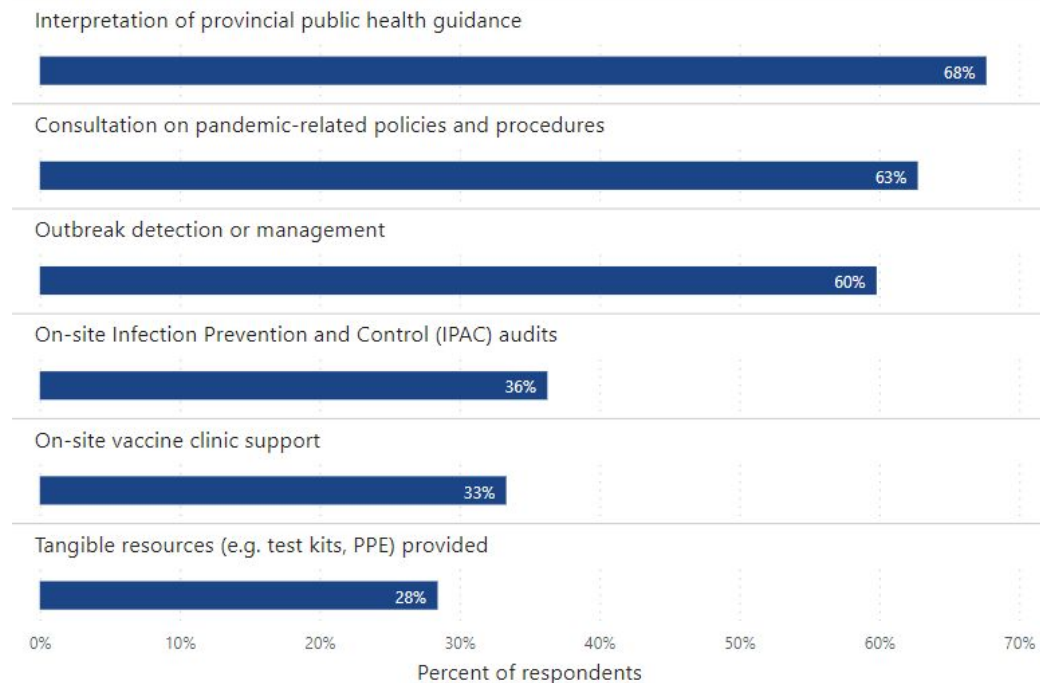


Support Provided by LPH

Interpreting provincial public health guidance was the primary form of support provided by LPH among respondents with **68%** of respondents selecting this option. This was closely followed by **consultation on pandemic-related policies and procedures (63%)** and **outbreak detection and management (60%)**.

Since organizations could receive more than one type of support from LPH, the percentages in Figure 6 do not sum to 100%.

Figure 6: Types of support provided to organizations by LPH

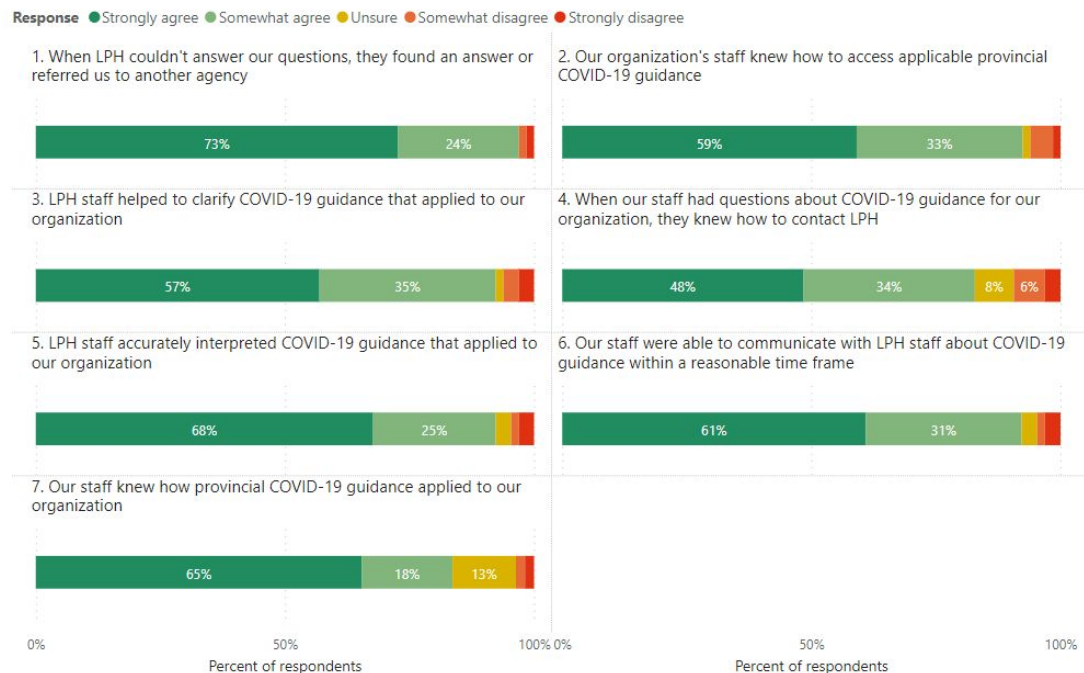


Interpretation of public health guidance

91% agreed that LPH staff accurately interpreted guidance that applied to their organization (Q5), and **97%** of respondents agreed that when staff from LPH couldn't answer their questions, they found the answer or made a referral (Q1).

While still strong, fewer respondents (**82%**) knew how to contact LPH for guidance (Q4), and **83%** agreed that *their own staff* knew how guidance applied to their organization (Q7).

Figure 7: Respondent perceptions of LPH support with interpreting public health guidance (n=66)



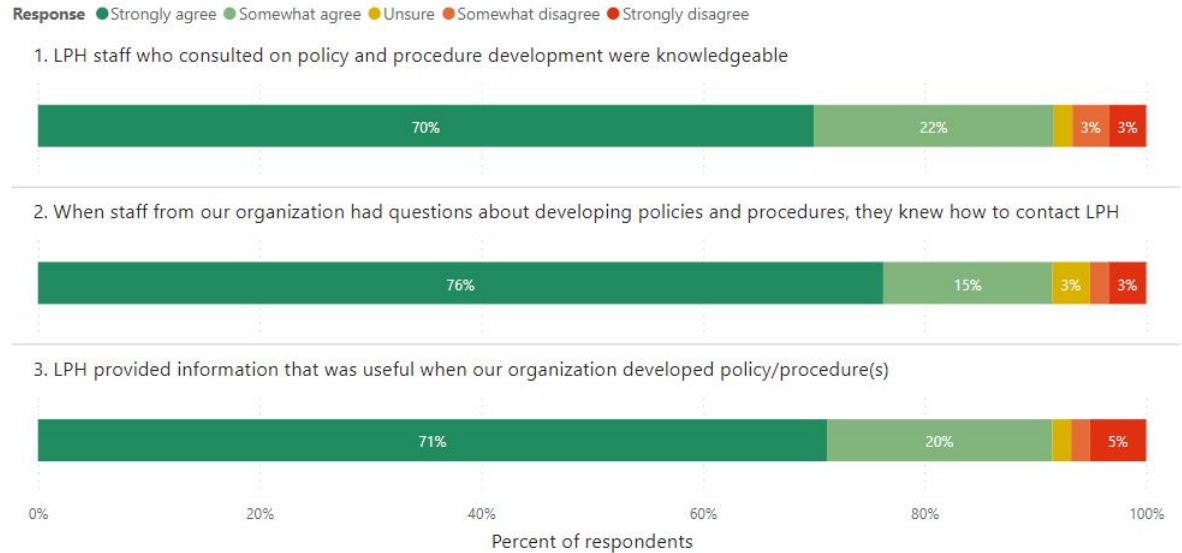
Excludes respondents who didn't receive this type of support, and those who selected N/A or no response

Consultation on pandemic-related policies & procedures

92% of respondents agreed that staff who consulted on policy and procedure development were knowledgeable (Q1) and **92%** agreed that useful information was provided (Q3).

Additionally, when organizations had questions related to developing policies and procedures, **91%** agreed they knew who to contact (Q2).

Figure 8: Respondent perceptions of policy & procedure consultation provided by LPH n=60



Excludes respondents who didn't receive this type of support, and those who selected N/A or no response

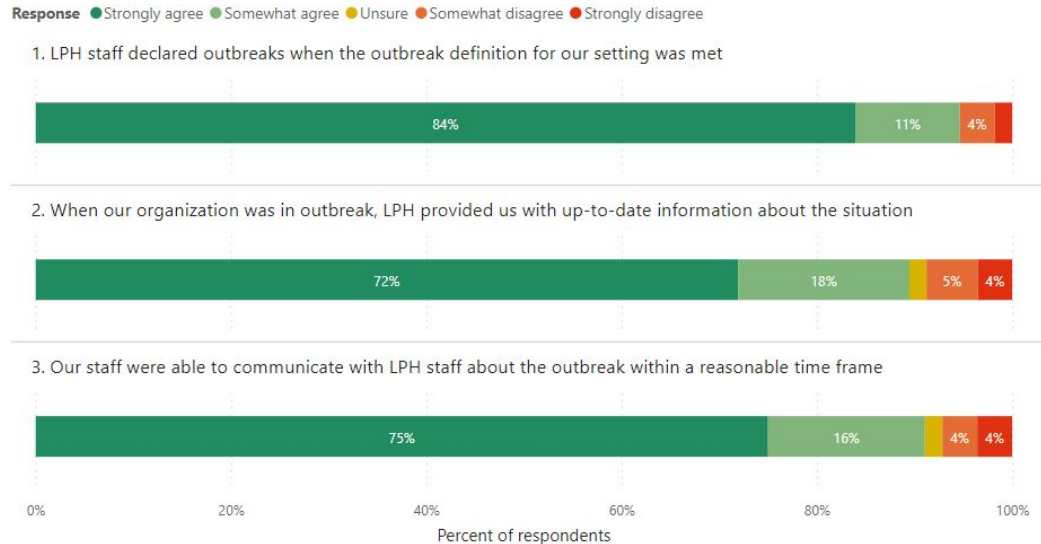
Outbreak detection and management

95% participants agreed that LPH staff declared outbreaks when the outbreak definition was met for the organization's setting (Q1).

90% of participants indicated that LPH provided their organization with up-to-date information (Q2), and

91% agreed that it was communicated in a reasonable time frame (Q3).

Figure 9: Respondent perceptions of LPH support with outbreak detection and management (n=57)



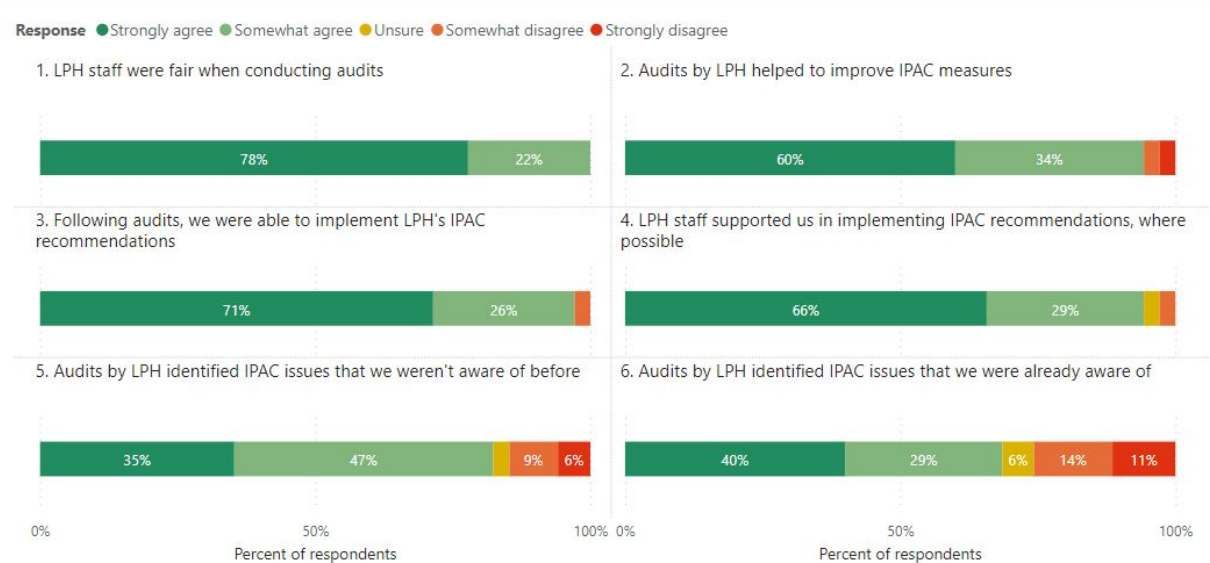
Excludes respondents who didn't receive this type of support, and those who selected N/A or no response

On-site IPAC audits

100% of respondents who received audits agreed that LPH staff were fair when conducting audits (Q1), and **94%** agreed that these audits helped to improve IPAC measures (Q2).

Audits identified IPAC issues that the facility was already aware of, and issues that were new to them (Q5, Q6).

Figure 10: Respondent perceptions of LPH IPAC audits (n=36)



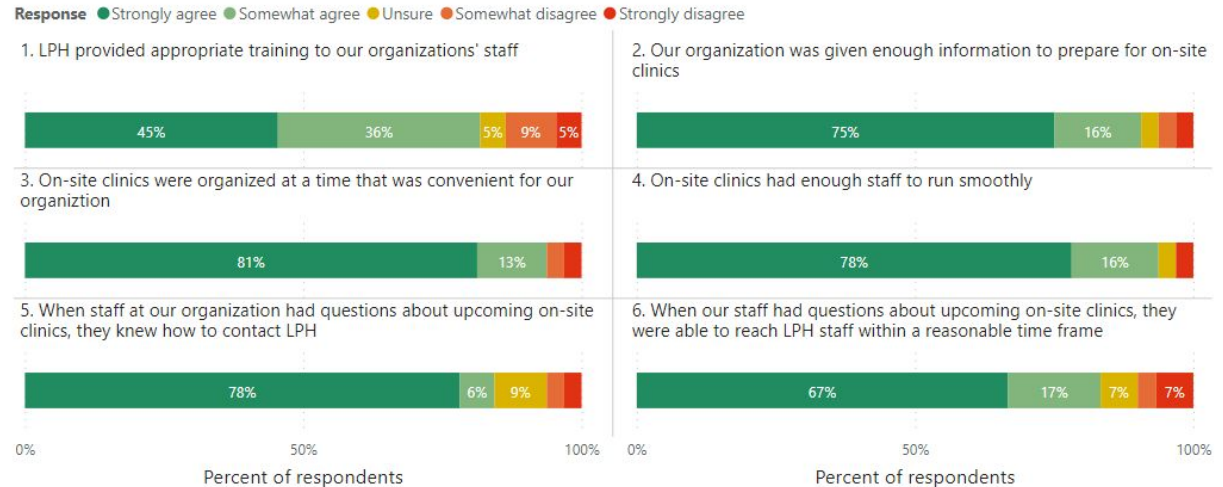
Excludes respondents who didn't receive this type of support, and those who selected N/A or no response

On-site vaccine clinic support

94% of respondents agreed that on-site clinics were organized at a time that was convenient for the organization (Q3) and that there were enough staff for the clinics to run smoothly (Q4).

While still mostly positive, **14%** of respondents disagreed that LPH provided appropriate vaccine clinic training to their organization's staff (Q1).

Figure 11: Respondent perceptions of LPH on-site vaccine clinic support (n=32)



Excludes respondents who didn't receive this type of support, and those who selected N/A or no response

Tangible resources

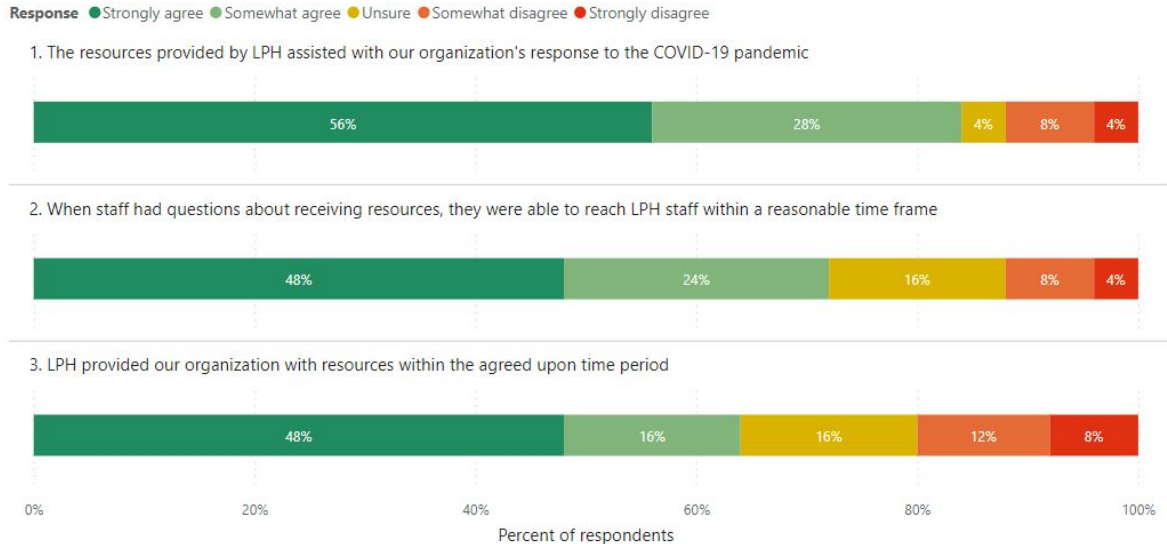
Of the 27 respondents who said their organization received tangible resources:

- **59%** received rapid test kits,
- **52%** received PCR testing support
- **44%** received personal protective equipment

Organizations could receive more than one type of tangible resource, so percentages do not sum to 100%.

While respondents mostly agreed that resources from LPH helped with their organization's pandemic response (**84%**), some noted that resources were not provided within the agreed upon time period (**20%**) or they were unable to reach LPH staff within a reasonable time frame (**12%**).

Figure 12: Respondent perceptions of tangible resources provided by LPH to organizations (n=27)



Excludes respondents who didn't receive this type of support, and those who selected N/A or no response

Open Response: What worked well while working with LPH?

Generally, survey respondents felt positively towards the support provided by LPH. The most commonly mentioned strengths included:

- **Communication** - positive information sharing or updates between partners and LPH staff (n=50)
- **Response time** - quick response time for questions, calls, or emails (n=35)
- **Staff** - positive experiences with LPH staff (n=30)

Examples of what worked well

“LPH nurses are very quick to respond to questions and very helpful in translating ministry guidance. We feel very comfortable reaching out to LPH when we have questions.” - Long-Term Care Home Respondent

“I called to set up mobile vaccination clinics for our 4 buildings in Sarnia and they were able to set up all of them quickly for 1 and 2 vaccines. Everything ran smoothly and were fully staffed. It made for a fast and easy clinic. We were able to add the parents of our congregate care clients. It was a great experience” - Congregate Care Respondent

“Having a couple of consistent LPH contacts made reaching out and finding answers much more accessible, as well as having the option to contact LPH after hours - LPH staff were on call - VERY much appreciated!” - Retirement Home Respondent

“The team I worked with at LPH were always available to promptly answer any questions. They never hesitated to provide support to our home whether it was assistance with resident vaccinations, OB supports, auditing, or reviewing the guidance documents to ensure accurate directions were taken at every step during the pandemic. During audits if any gaps were found they were actively involved in assisting to mitigate those gaps in a supportive rather than punitive way. I appreciate that I have such a wonderful team to work with and I'm grateful for all their support, guidance and encouragement during the pandemic.” - Long-Term Care Home Respondent

“Group zoom meetings for many daycares so that questions could be asked and answered. Also the guidance document that was supplied to centres was extremely helpful.” - Child Care Respondent

“Excellent communications existed between our agencies. Our organizations met each week, along with partners from Chatham-Kent Public Health. This provided us a safe and collaborative environment to problem solve.” - School Respondent

Open Response: What didn't work well while working with LPH?

22 respondents reported that they had no concerns/improvements to recommend. Among those who did, the most common concerns were:

- ❑ **Confusion** - respondents experienced confusion about guidance & other public health information (n=23)
- ❑ **Poor communication** - poor and/or delayed communication with LPH staff (n=19)
- ❑ **Inconsistency** - inconsistent messaging within LPH, or across LPH and other organizations (n=15)

Open Response: Other information

Most respondents who completed this question used the space to express gratitude, reiterate prior remarks, and/or provide examples:

“Overall, [our] team truly appreciates the support provided by the LPH team. Important relationships between us were developed long before the pandemic and that allowed us to immediately be comfortable leaning on each other to work through the many different challenges of a pandemic. I look forward to continuing to grow our relationships and working together as a solid team within the Sarnia/Lambton community.” - Hospital Respondent

“Appreciative of their efforts to help our organization - especially on site vaccinations!” - Congregate Living Respondent

“Thanks for being there when we needed you the most. We all know you must be so overwhelmed with so many things just being thrown your way like us, every few weeks, hats off to you.” - Retirement Home Respondent

“LPH has always been very professional, knowledgeable, friendly and a much appreciated ally.” - Retirement Home Respondent

“We want them to know that their assistance during the Pandemic was invaluable!” - Long-Term Care Home Respondent

“I appreciated the common sense approach and the approachableness. Too often there is a fear of approaching governmental organizations because of a fear of being penalized or jumping through endless hoops. I found LPH approachable and friendly and calming. They seem to come alongside and not in a condescending manner. I thank you for that and LPH seems to recognize that we are not only looking for conformity but looking for best practices” - Congregate Living Respondent

“Thank you for assistance during the pandemic. It was not easy for anyone but knowing LPH was there to help and answer any and all questions as they arose made running a daycare during a pandemic more manageable.” - Child Care Respondent

Conclusion

LPH and partner organizations worked collaboratively to respond to a public health emergency that changed continuously over the course of two years. The results of the LPH partner organization survey highlight several key strengths and areas for improvement in the local pandemic response. In particular, clear communication emerged as both a challenge, and a success. Respondents described experiences where LPH staff were knowledgeable and diligent in interpreting guidance, but also experiences where they received conflicting information, and times when they didn't know how to reach LPH staff. The importance of clear and consistent communication between partner organizations is consistent with findings from AAR engagement with LPH staff and the Board of Health.

Overall, participants had positive perceptions of all types of support evaluated. It is important to note that the survey was completed by a sample of those who received support from LPH, and the perceptions of those who chose to participate may differ from those who did not participate. Additionally, since participation was limited to specific sectors, results may not be generalizable to other sectors that LPH supported.

The results from this survey highlight the many positive interactions between LPH and partner organizations. These findings will be used to help strengthen existing partnerships and prepare for future emergencies. The results emphasize the strong local partnerships that contributed to a successful response to the COVID-19 pandemic in Lambton County.

Acknowledgments

The AAR Team includes: Chad Ikert, Siobhan Churchill, Bethany Gaudet, Nancy Wai, Anita Trusler, Lori Lucas, and Jennifer Graham. The team would like to thank Crystal Palleschi, Jessica Zehnal, Jennifer Beaubien, Rhonda Galler, Matthew Butler, Donna Schmidtmeyer, Kevin Churchill, and Michael Gorgey for consultation and support provided throughout this project. Thanks also to Arianna Satram for support with qualitative analysis.

The team would like to thank Andrew Taylor, General Manager, Public Health Services Division, Dr. Sudit Ranade, Medical Officer of Health (2012-2022), and Dr. Karalyn Dueck, Medical Officer of Health (2022-Present) for their guidance and support for the project. Finally, the team would like to thank the staff of Lambton Public Health and all partner organizations for their contributions to the local COVID-19 response, and for their reflections that were foundational to the After-Action Review.