

RELATED TERMS

- Severe Acute Respiratory Syndrome
- Logistics
- Quarantine
- Red Cross



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Providing Logistical Support to Quarantined Citizens During a Public Health Emergency

SUMMARY

Government and local/regional public health departments should develop plans for providing logistical support to individuals quarantined as a result of a public health emergency. A clear, yet flexible, response plan for delivering food, medicine, and supplies to affected individuals should be developed and widely communicated once a quarantine is announced. Public health officials should coordinate with major volunteer and relief organizations to boost manpower and avoid duplication of effort, and should be receptive to smaller groups willing to offer assistance during a crisis.

DESCRIPTION

Prior to the outbreak of Severe Acute Respiratory Syndrome (SARS) in Toronto in 2003, public health officials had no specific plan in place for providing supplies and logistical support to those in quarantine. This shortcoming was quickly recognized, and Toronto Public Health (TPH), the agency most responsible for handling SARS on-the-ground, sought volunteers from the Canadian Red Cross and other organizations to help provide basic food requirements and medical supplies to quarantined families.

Citing questions about safety protocols, uncertainty about the nature of the disease, and a lack of funding, the Red Cross replied that it preferred to wait to commit personnel until it knew exactly what to tell its volunteers. Within two days, however, these issues were resolved, and the Red Cross began delivering SARS kits, including masks and thermometers, to those affected. Other volunteer service organizations, including the Salvation Army (which, it should be noted, worked separately from TPH and the Red Cross), provided logistical support. Public health offices outside metropolitan Toronto also worked with the Red Cross, Salvation Army, social, religious, and volunteer groups, paramedics, and even health inspectors to provide SARS kits, supplies, and groceries to affected individuals and families.

Despite the organizations' best attempts at collaboration, logistics proved a challenge. Volunteer organizations and the healthcare community complained that logistical support from the government and public health departments was *ad hoc*, uncoordinated, and inconsistent. The criticism appears to stem partially from poor organization and communication on the part of public health officials.

About a month into the crisis, Red Cross officials were excluded from assisting the Ontario government in its planning for "worst case scenarios," because there were no structures for including them, even though they would be relied upon heavily in the case of wider quarantines. A Red Cross official observed that while his organization was prepared to do

more, TPH did not ask for their assistance and did not use the assets and resources of the Red Cross to the fullest advantage.

Most individuals noted that they were not informed by government or public health officials that they would be supplied with food and/or medicines during the quarantine. Many gave up on the system and relied on family, friends, or community support for assistance. One doctor who worked at a SARS-affected hospital related that, with no help coming from TPH, she provided logistical support to her staff and patients herself. Many people ordered supplies and groceries online, as the food boxes provided by the government were described as "not very palatable."

Similarly, many community-based organizations did not receive information on logistics from public health officials, and worked independently to provide support to those affected. Ethnic community and neighborhood groups, local businesses (such as grocery stores), and major corporations were singled out for praise by those quarantined.

CITATION

Interview with Canadian Red Cross official, 7 October 2003.

Interview with Toronto Public Health official, 25 September 2003.

Interview with York Region and Durham Region Public Health Officials, 26 September 2003.

Interview with Toronto physician, 25 September 2003.

Interview with SARS focus groups, December 2003.

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