



Fall Readiness at HealthLink BC

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1. INTRODUCTION

Since June 2009, HealthLink BC (HLBC) has been hard at work planning and preparing for wave 2 of H1N1 expected this fall. Using the valuable experience gained in the spring, HLBC is determined and confident that it will not only make it through wave 2, but will excel in its service to the B.C. public and its stakeholders.

The planning assumptions (from the Provincial Health Officer) include:

- Wave 2 of H1N1 will likely begin as early as October and will be spread out over a 15-week period with the peak of the wave occurring during weeks 7 through 9.
- This outbreak will be more severe than wave 1 in terms of numbers of people affected, but it is difficult to say how severe

the flu will be in terms of illness/health, as that is dependent upon how the flu virus mutates.

As a result, HealthLink BC's operational plan for H1N1 Fall Readiness includes a number of new priorities that the organization has been working on. These include measures to manage capacity during wave 2 of H1N1 through a combination of:

1. Additional emphasis on self-care options for the public;
2. Business process improvements; and
3. An overall improvement in HLBC's technical infrastructure to improve both stability and capacity.

1.1 Emphasis on Self-Care Options for the Public

Emphasis on Self-Care Options for the Public includes the website re-vamp project, which includes a new H1N1-symptom checker and improved search capability of the H1N1 knowledge database, along with an Interactive Voice Response (IVR) project.

The HLBC website will become an even more useful tool in providing the public with general information, news updates and specific health information so that they will not necessarily need to speak directly with a tele-nurse. The

new H1N1-symptom checker will enable B.C. residents to find out if they have H1N1 symptoms and what to do.

In addition to maximizing the use of the website, HLBC is exploring the use of an IVR system in its tele-centre operation so that callers may self-serve when seeking general information and advice. This capability is available to be put in place in the event it becomes necessary to help manage call volumes.

1.2 Business Process Improvements

Business Process Improvements includes elimination of non-essential call steps in nursing services, which will shorten call time; health service representative (HSR) scope-of-service enhancement project, which will enable HSRs

to better support way-finding for the public along with providing health information and reducing unnecessary calls put through to tele-nurses; and ER nursing services disposition review and recommendations, which will ensure

that HLBC does not send more callers than necessary to higher levels of care, such as emergency rooms and general practitioners' offices. Surge capacity planning is also

underway to ensure that HLBC can meet demand in the event of extreme impact.

1.3 Improvements in Technical Infrastructure

Improvements in Technical Infrastructure includes several initiatives to increase the capacity of HLBC's existing technical infrastructure, including additional phone lines,

telecommunications equipment, storage capacity and servers, as well as application enhancements.

2. CONCLUSION

All of these efforts are critical to HLBC being able to effectively manage its operations and serve the public during the anticipated health outbreak during the fall and winter in 2009 and into early 2010.

HLBC is also working to complete the new Communications Plan for Fall Readiness, which will include new messaging to encourage the public to visit the HealthLinkBC.ca website as the first point of contact, along with a

comprehensive pandemic preparedness and response plan for HLBC.

In addition, HLBC has reallocated portions of funding from the administration and management budget to support staffing of tele-nurses.

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