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Commentary on the Feature Article by John King

John King, BA, MHA, CHE is the Executive Vice President and Chief Administrative Officer at St. Michael's Hospital. John oversees finance, planning, information systems, human resources, legal services, corporate performance, medical imaging, labs, pharmacy, and supply chain and support services functions.

"Will we be judged ready for the influenza pandemic?" raises the highly important issue of leadership during a crisis. More specifically, this article calls on all of us in the health care sector to respond accordingly to the recent pandemic crisis.

The recent outbreak of Swine Flu-H1N1 was and is a good test of the preparations that have taken place over the past years. I hope that organizations that have not prepared, or those that did not believe in the value of planning, will be alerted to the irresponsibility of their decision. We have a duty to prevent harm to our employees.

In May 2006, the Toronto Academic Health Services Network (TAHSN) began planning for the possibility of a pandemic. The lessons learned from the Severe Acute Respiratory Syndrome (SARS) experience was the driving force for this early planning. It was quickly evident that in order to survive during a pandemic event, we must focus on how to maintain our regular business operations. Unlike many other businesses that can cease normal operations without an overly negative impact on individuals' lives, hospitals must continue to serve the general population – pandemic or not. If normal business is not maintained, lives will potentially be lost for other reasons. Lives threatened because of a pandemic virus and those being threatened for other reasons must all be considered. Therefore, what became of primary importance to members of the committee was the protection of our workers (staff, physicians, students and volunteers). This does not only mean frontline clinical workers, but also the many others who contribute to the functioning of a hospital.

Justice Campbell's SARS Commission report raised the expectations of all health care workers. The precautionary principle called upon everyone to reduce the risk by planning and preparing, rather than simply awaiting the scientific certainty of another pandemic episode.

In the fall of 2006, as a result of our deliberations at the TAHSN table, the decision was made to purchase antiviral medication for all health care workers of the Toronto teaching hospitals. This major purchase, and decision to protect our workers, was criticized by hospitals outside Toronto, as well as the provincial and federal governments. We were criticized for setting precedent and accused of making an emotional decision in the wake of the SARS experience.

Ray J. Racette's article clearly points to the fact that in order to prepare for a pandemic, it is important for hospitals to look at their plans for business continuity. In our view, the only way to even begin to consider the continuation of business as usual (or as usual as possible) is to protect the individuals who will be responsible to continue the delivery of hospital services.

Planning and preparation is about continuous learning and adjustments to guidelines. This most recent experience with H1N1 has caused us all to revisit our plans in a real-life situation. In Toronto, we believe we have done everything possible to prepare for a pandemic event.

Will we be judged ready for the influenza pandemic? Yes. As health care leaders, we have been given the responsibility to protect our staff and continue our business in order to be there for our patients.