

# Beyond the 4 Cs: Collaborative Emergency Planning and Response in Surrey-North Delta

## A Catalyst for Change

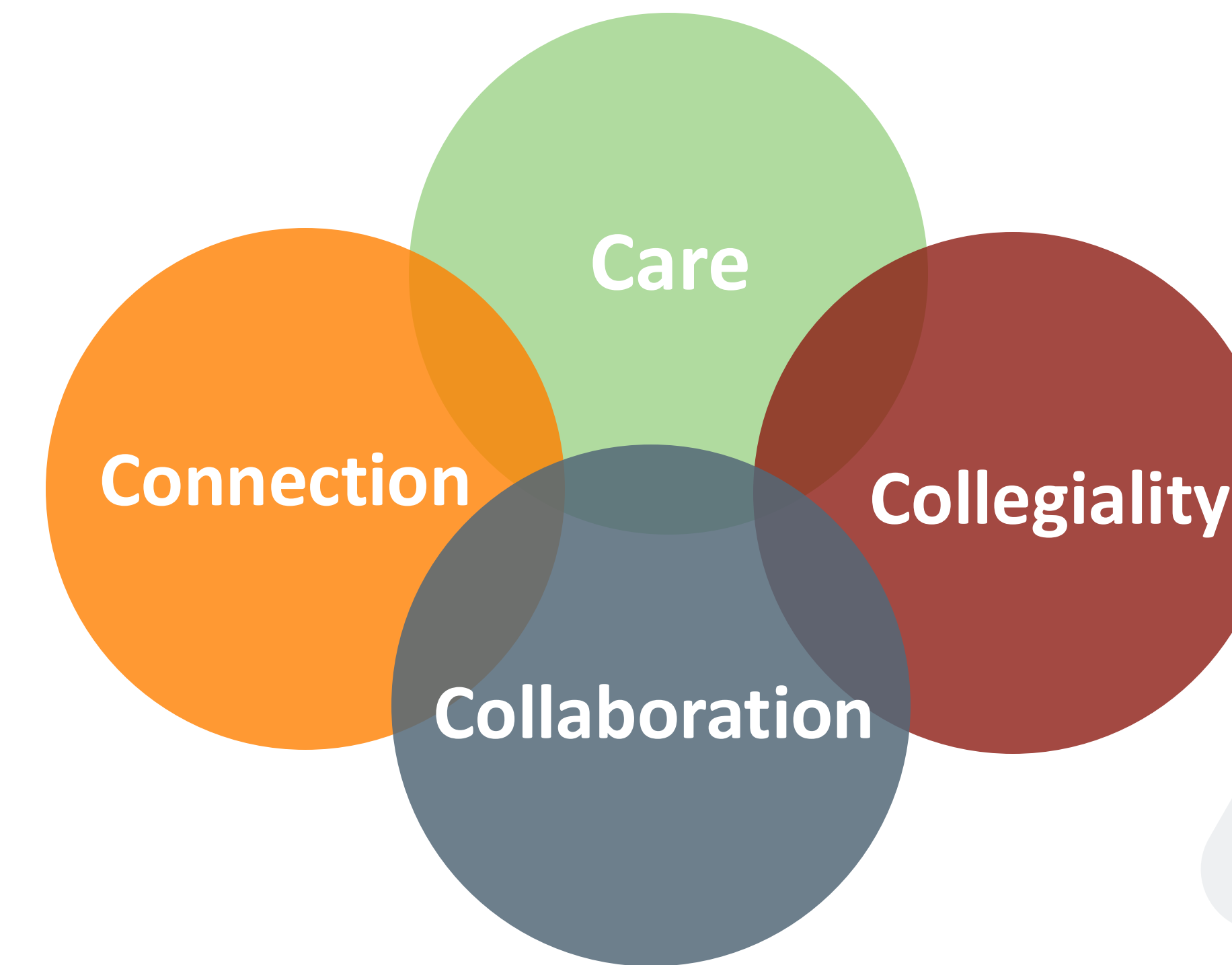
In November 2022, the Surrey-North Delta (SND) Division of Family Practice Admission and Discharge (ADC) Shared Care working group hosted a groundbreaking event that brought together Emergency Department Physicians and Family Physicians (FPs) under the banner of the 4 Cs: “**Collaboration, Connection, Collegiality and Care.**” The success of that event highlighted **the community’s want for greater collaboration** and underscored the need to break down siloes to **approach emergency management more effectively as a collective.**

Since December 2022, work has continued to align physicians and community partners. Emergency planning discussions have been held with **Fraser Health Authority, the City of Surrey, and the City of Delta**, along with many other non-profits supporting vulnerable populations.

**Extreme Heat Event:** The summer of 2022 had the highest number of heat-related deaths, especially among seniors. Different organizations in our community created their own responses for 2023. The SND Division wanted a **community-wide team-based approach** and to connect invested parties so that information would be disseminated quickly and could be easily accessed by everyone.

## Aim

To build **collegiality and understanding among emergency management stakeholders** in Surrey-North Delta to **develop a more effective, cohesive approach to emergency planning and response** in our community with a specific focus on the upcoming extreme heat event.



**We want to ensure that the right people are talking to each other at the right time and that the resources are available to support those conversations.**

## Proof of Concept: A Community Approach to Extreme Heat

Working together to prepare for extreme heat in summer 2023:



**Collaborated with stakeholders** involved in the original 4Cs project, building on those connections/collegiality to **develop a specific response to extreme heat.**



Supported community readiness with **informational one-pagers** shared with Family Physicians (FPs), patients, and community partners, and translated them **into three languages.**



**Shared information** via a variety of communication channels **between FPs and community partners** to increase awareness and unite efforts.



Held a **CME** to support FPs in preventing and proactively addressing heat-related illness. There were **58 physician attendees**, which is nearly **50% higher than our average CME turnout rate.**

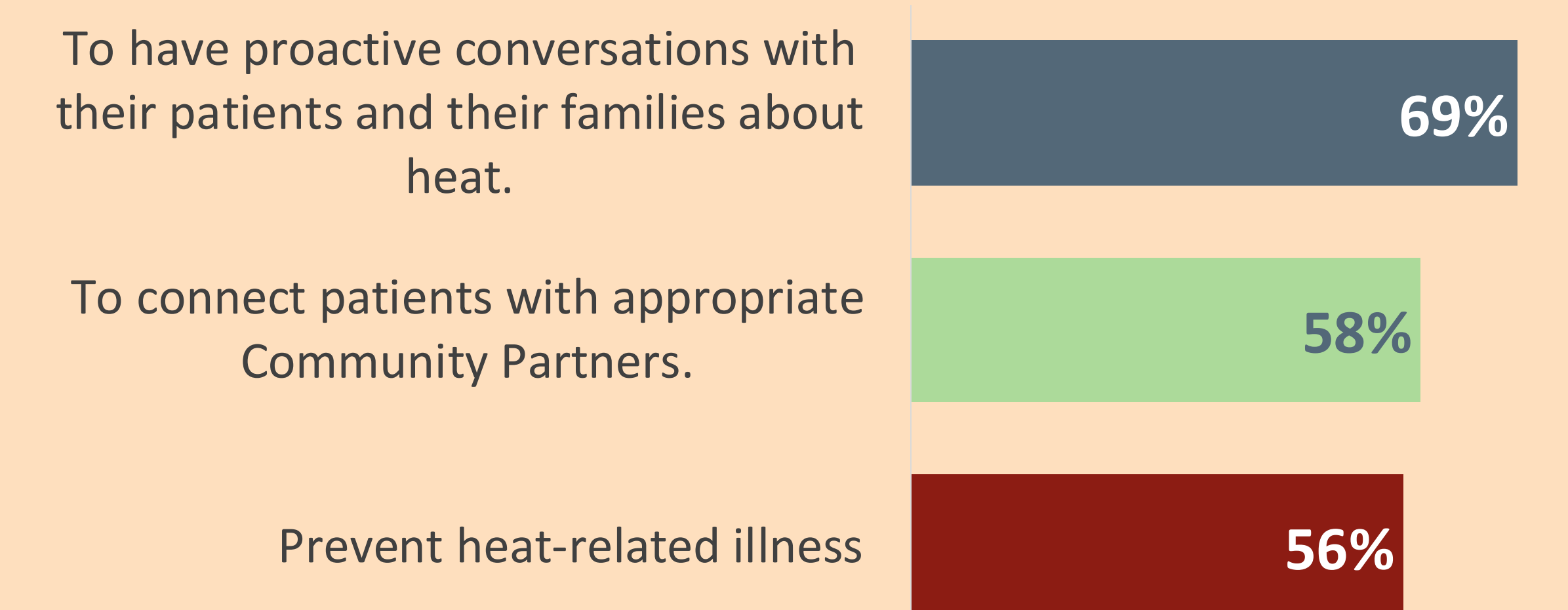


Had distinct **collaboration with the city** – a coordinated effort that included the cities of **Surrey and Delta, the Surrey Police Force + RCMP and Community Partners.**

**78%**

**of participants who completed a post-event survey reported that the education portion was the highlight of the event.**

**Figure 1: All participants left the session feeling much more confident or somewhat more confident in the following areas:**



## Successes



Multiple individual community partners that had previously been siloed came together to create a collective response.



Increased access to resources by translating them into different languages.



High attendance at CME event with 58 Family Physicians!



Physician champions continued to lead across The 4Cs project, emergency planning, and The 4Cs of Health Emergency.

## Lessons Learned

We learned how **siloed a community as large as ours can be** and the importance of staying connected with our community partners so physicians know **how best to connect their patients to resources quickly.**

We didn’t have those community connections before and didn’t know what other organizations were doing; finding out that all these resources existed was exciting, AND we **wish we’d known about them sooner.**

Typically, **people don’t use cooling stations** – lots of emphasis was placed on highlighting cooling stations, but people didn’t go to them, for a variety of reasons.

**Fans are not the best way to combat heat-related illnesses.**

- Were originally going to provide fans to vulnerable populations but pivoted away from that because we learned that it would have done more harm than good- **an example of why it’s crucial for groups to talk to each other.**
- The Fire Chief brought this to our attention – most homes of those with a severe heat-related illness that firefighters were called to in 2022 already had fans running, but these were **pushing around hot air.**

We are **learning from each impactful community event** how to respond more effectively and proactively.

## Looking Forward

- We learn from each event to have a **more united response** that effectively and efficiently provides patient care that **supports the community’s needs.**
- We believe this collaborative approach **will lead to greater confidence and trust in the system** for patients and a **greater sense of support** and inclusion for Physicians and community partners as each group’s **unique knowledge and skillset** are integrated into the framework.
- We believe this is **foundational and iterative work.**

