



# MENU OF SERVICES



## ESS, RESPONSE AND RELIEF SERVICES

### Relief Services (Emergency Support Services)

During and after emergency events, CRC may deliver any or all relevant emergency social services based on impact and need resulting from the event.

- a. **Registration** - Registration involves collecting event-affected individuals' information with the aim of facilitating family reunification, communicating information, and providing timely, accurate assistance. Registration also assists in enhancing situational awareness and supports reporting to stakeholders.
- b. **Reception and Information** - Reception refers to providing a space for people impacted by an event to go to receive information. Information refers to providing individuals with information about services and other assistance available in addition to information updates regarding the situation itself.
- c. **Family and Reunification** - Family Reunification assists in re-connecting families and loved ones by collecting information and answering inquiries regarding event-affected individuals.
- d. **Emergency Lodging** - Lodging aims to ensure that event-affected individuals are provided with safe and secure temporary lodging, with a view to preserving dignity and meeting basic physical, psychological, and information needs.
- e. **Emergency Feeding** - Feeding aims to provide food and water, or the means to acquire food and water, to those who cannot provide for themselves in this regard following an event. Efforts will be made to support traditional food needs.
- f. **Emergency Clothing** - Service delivery is designed to provide the means to acquire clothing to persons in need in following an event. CRC does not manage and distribute clothing.
- g. **Personal Services** - Personal services provide assistance to people dealing with challenges created by or aggravated by an event by providing supplies, diversions, hygiene items, or mobility supports to beneficiaries such as infants, children, dependent adults, and mobility-impaired adults.
- h. **Transportation** – Involves movement of people from an evacuated community to a safe location (e.g. host community) in circumstances where individuals do not have their own means of transportation. This may include air transportation for remote fly-in communities, transportation to reunite family members separated during an evacuation, and/or transportation within host community (e.g., for

medical appointments and activities).

- i. **Augmentation of Supply Chain and Logistics Capacity-** The CRC can augment the supply chain and logistical capacity in community, working to contribute to resolve the priority needs identified in assessment and planning. CRC can provide standby capacity and support to the community by supporting shipments of supplies into the community.

### **Site Management and Support to Sheltering (Evacuation, Isolation Sites)**

CRC provides set up and site management support at evacuation and/or isolation sites, ensuring care and comfort services to impacted populations. CRC provides coordination support for any combination of emergency social services and establishes a connection to psychosocial support for impacted populations. CRC also has the capacity to provide vendor management including securing of sites, and on-site vendor support such as security, cleaning, etc.

In the context of COVID-19 or another health event, Public Health Specialists also provide technical guidance and essential subject matter expertise to ensure public health standards including Infection, Prevention and Control (IPC). IPC is implemented in all evacuation and isolation sites for a safe and supportive environment. CRC may provide some services through a virtual operations team, including the activation of a call centre to mitigate the risks associated with COVID-19.

### **Mental Health and Psychosocial Support (Safety and Wellbeing)**

Scalable and adaptable to context, this relief service works with the community to assess and support the immediate and ongoing mental health, psychosocial and protection needs of people affected by disruptive events. Mental Health and Psychosocial Support (MHPSS) with integrated Protection, Gender, Inclusion and Engagement (PGIE) strengthens community capacities and resiliency across the continuum of response within **6 sectors of support**<sup>1</sup> depending on the needs of affected communities, the specific event, the role of the CRC, and external capacity within communities and service providers. This service aims to ensure equitable access to support for those directly and indirectly affected by enhancing resilience and coping, decreasing isolation, making connections and referrals, and providing direct enhanced or focused psychosocial support, which include considerations for protection, gender, diversity and inclusion and traditional approaches to mental wellness, including ceremonies. The CRC ensures effective referral pathways and the non-duplication of services, thereby enhancing efficiency. This service is prioritized given the impacts of COVID-19 and compounding effects of disruptive events on mental health and wellbeing.

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<sup>1</sup> The 6 sectors supported through MHPSS include: Capacity Strengthening (training/orientation); Assessments (community-led); Safe and Supportive Environments; Community Engagement and Mobilization; Direct service/focused Psychosocial Support; Personnel Wellness.

### **Planning and Readiness**

This service supports partners in proactively identifying and planning for anticipated readiness needs on an ongoing basis through risk monitoring systems which analyze climate, disaster cycles, political, social and economic trends to better inform emergency response capacity against all-hazard risk trends. This is supported through scenario-based preparedness exercises as well as response activations and planning assumptions are regularly tested, adjusted, re-tested for validation.

### **Emergency Response Unit**

CRC maintains Health Emergency Response Units (ERUs), which can be deployed on a variety of scales from a full field hospital composition to mobile health units. Applications within the Ontario context could include basic primary care and triage at evacuation sites to alleviate the burden on local health care providers. CRC has also been an active partner in Ontario's vaccination strategy. This capacity could extend to future health emergencies and/or ongoing surge to immunization efforts. CRC can deploy human health resources such as ICU / Acute Care clinical personnel to overwhelmed health facilities to augment clinical workforce providing critical care to those impacted by COVID-19. These personnel are deployed under the management of the health system, ensuring adherence to local health parameters.

### **Mass Assistance**

Leveraging its proprietary technology and methodology, CRC provides mass and targeted financial assistance to populations impacted by disaster or crisis to partially alleviate the burden of additional expenses, to address immediate needs as necessitated by the emergency, or to contribute to other unexpected costs as a result of the impact. Financial assistance can be offered in mass to reach an affected population or can be tailored for targeted audience, reflecting the identified needs of a specific population.



## **HUMANITARIAN WORKFORCE / SURGE SUPPORT**

The Humanitarian Workforce, funded by Public Safety Canada and launched in partnership with Health Canada, is a stand-by workforce capacity to assure a ready, deployable surge workforce. This workforce can provide continued support to the most vulnerable and those impacted by disasters during the entire emergency management cycle, from immediate relief and assistance through to sustainable long-term recovery. Complementing this, the CRC has systems to recruit, train, and deploy surge emergency response personnel for all its core services across the country, enabling the organization to integrate all Canadians who want to contribute their skills and time. The services set out in this Menu of Services are provided by or supplemented through the Humanitarian Workforce and other core capacities at the CRC.



## PUBLIC HEALTH AND CLINICAL SERVICES

### Public Health Support

Approximately 200 Public Health Specialists are available through the Public Health in Emergencies Technical Surge capacity and can provide technical health guidance to support crises and disaster response. This covers a wide range of communicable diseases (e.g. vaccine preventable, vector and water borne diseases) and public health interventions including but not limited to: Risk Communication and Community Engagement (RCCE); Epidemic Prevention and Control (EPC); COVID-19 testing and rapid screening; Contact Tracing and Community Based Surveillance; Vaccination; Epidemiology; Social and Behavioral Change Communication, Nutrition, and Sexual Reproductive Health and Rights.

### Epidemic Prevention and Control

EPC measures occur in numerous CRC operations to support prevention, mitigation and containment efforts in public settings such as in Long Term Care (LTC) facilities, correctional facilities, seasonal agricultural and other worker settings, isolation and quarantine sites and in Indigenous communities. Learning pathways have been developed, in partnership with Indigenous communities, to ensure CRC's approach is culturally safe and will do no harm. EPC rapid assessments, training, and enhancement services have been developed to evaluate IPC measures and determine the needs for further support.

### Clinical Services

CRC has developed a roster of 300 clinical health providers to provide support to new or existing testing operations by providing licensed clinical personnel to perform clinical tasks as required. CRC also provides non-clinical personnel for reception, information, queue management and other site support. The human resources in the readiness Capacity Statement, such as Site Managers, Public Health Specialists, Clinical Health Specialists, Occupational Health & Safety experts, are the personnel that contribute to testing and rapid screening teams.

### Support to Vaccination

In close coordination with focal points within each Province/Territory and applicable Federal and Indigenous leadership, CRC will assist in providing the following vaccination services (for COVID-19 and/or other vaccines).

### Testing and Rapid Screening

COVID-19 Testing and Rapid Screening contributes to outbreak prevention and/or containment through diagnostics and early detection and can be a life-saving service.

In close coordination with local health authorities, CRC deploys its workforce to help support new or existing Testing and Rapid Screening operations perform testing tasks by providing licensed and/or non-licensed clinical personnel, including nurses, paramedics, public health specialists and international medical graduates (IMGs). The combination of personnel deployed is based on legislative and jurisdictional requirements of the testing tasks being performed.

CRC also provides non-health personnel for reception, information, queue management and other testing and rapid screening site support. Testing teams improve access to underserved and populations at risk, such as Indigenous Communities, remote communities, people experiencing homelessness, migrant workers and other high-risk populations.

### **Rapid Screening Capacity Building of Local Actors**

CRC teams support and complement provincial, territorial and local public health authorities in strengthening the capacity of local communities and organizations, including, for example, community groups, Indigenous communities, Nations, educational facilities and, to set-up and implement a local screening program. The type of activities and support, include but are not limited to - coordination and stakeholder engagement, support to local organizations to develop simple and scalable programs for targeted screening, provision of training videos, standard tools, FAQs, and virtual support including a call center.

### **Contact tracing**

In close coordination with local health authorities, CRC services can be activated as a surge and supplementary capacity to increase contact tracing capacity and support outbreak measures.



## **SUPPORT TO REMOTE AND ISOLATED COMMUNITIES**

The CRC's definition of remote and isolated communities align with Indigenous Services Canada and the Assembly of First Nations with primary consideration given to geographic remoteness, flight and road access, communications, and essential health and service centre access (including a review on distance and travel time). Communities are prioritized based on these indicators, which also help recommend service delivery and approaches through response and risk reduction inclusive of the services defined below.

### **Support to Mass Vaccination Campaign**

For example, in partnership with the Ministère de la Santé et des Services sociaux (MSSS) in Québec and Hydro-Québec, the CRC has supported the COVID-19 vaccination campaign coordinated by the Nunavik Regional Board of Health and Social Services and the Tulattavik and Multivac health centres; this includes providing on-site logistics support and planning and implementation of community mobilization strategies.

### **Community Engagement / Health Promotion**

CRC can help increase the number of vaccines administered by engaging communities and their leadership, determining specific needs, and promoting COVID-19 vaccination efforts accordingly. This engagement is done at the request of the given community.

To date CRC has supported 25 COVID-19 Vaccination engagements across the country, tailored to meet the unique needs of the local authorities and communities.

### **Disaster Risk Reduction & Climate Change Adaptation**

The goal of the CRC's DRR-CCA Program is: ***Increased individual, household and community resilience to disaster risks resulting from natural hazards in Canada, with particular focus on those exacerbated by climate change.***

Within the context of DRR-CCA, resiliency relates to the ability of systems (and people) to effectively respond and adapt to changing circumstances and to develop skills, capacities, behaviours, and actions to deal with adversity. The IFRC defines resilience as, “the ability of individuals, communities, organizations or countries exposed to disasters, crises and underlying vulnerabilities to anticipate, prepare for, reduce the impact, cope with and recover from the effects of shocks and stresses without compromising their long-term prospects.” CRC contributions towards resilience building is achieved by utilizing inclusive approaches that recognize the dynamic nature of communities and the interplay of critical factors that influence risks, while considering the unique circumstances of individuals, households, and communities.

DRR-CCA within Indigenous communities is approached through a decolonial lens. Due to the imposition of social, economic, political, and geographic barriers, Indigenous communities are disproportionately impacted by disaster. Recognizing this, a key outcome of the DRR-CCA Framework is to assist and support Indigenous communities to take action to reduce risk and increase local capacity for emergency preparedness while building a culturally safe DRR-CCA infrastructure within the CRC to support Indigenous communities

The DRR-CCA service line offers practical and evidence-based actions to strengthen individual and collective capacities to prevent, mitigate, and prepare for natural hazards and the effect of climate change. The DRR-CCA approach focuses on addressing the root causes of vulnerability to natural hazards and climate change, through working in 5 key thematic areas:

- Preparedness
- Risk Mitigation and Climate Change Adaptation
- Decision Making and Governance
- Public Awareness and Education
- Resilience in Recovery

## Creating Safe Environments (CSE)

Ongoing service promoting risk reduction related to disasters, violence and health in support of Indigenous communities. CSE is focused on addressing these risks through strengthening prevention, adaptation, and existing capacities to enable actions that promote resilience. The strategy promotes an engagement model built upon community ownership, capabilities, knowledge, and leadership. CSE contributes to the achievement of results by reinforcing a community-led, strengths-based, people-centered approach that recognizes Indigenous Knowledge systems to promote individual and community wellness, reduce risks, and prepare for and manage adverse events.

This work is done through 5 thematic areas:

- 1. Disaster Risk Management (DRM)** Disaster Risk Management (DRM) enables the Red Cross to contribute towards community-identified priorities that address DRR and CCA while recognizing the role of critical support in response operations. DRM offers practical and evidence-based actions to strengthen individual and collective capacities to prevent, mitigate, and prepare for natural hazards; and when disasters do occur, the capacities to absorb, adapt, and recover. Such efforts prioritize actions that address the needs of those most at risk in ways that respond to their specific challenges, address vulnerabilities, and build on existing capacities.
- 2. Community Wellness & Protection and Health Promotion:** The Red Cross strives to understand and promote (by invitation) strengths-based Indigenous community perspectives of wellbeing and protection. Communities want change and have fostered adaptive capacities, building from their places of strength. This momentum to build safer communities has also led communities to reach out to the Red Cross to support community efforts to break the cycle of intergenerational violence and to contribute towards actions promoting wellness. This includes mental health and psychosocial support and individual and collective safety; including prevention, mitigation, and preparedness activities for protection risks as well as response and recovery from social crises and emergencies at children and youth, individual and community levels.<sup>2</sup>
- 3. Injury Prevention:** The Red Cross Injury Prevention program strives to improve the health of Indigenous communities by reducing the rate and severity of unintentional injuries. Injury Prevention programming aims to reduce injuries and death by increasing access (or linkages) to education that respectfully adds to community knowledge and builds self-sufficiency, skills, and attitudes to reduce harm and improve health outcomes. Evidence-based practices enhance individual or community knowledge, skills, and resources to identify risk factors and establish

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<sup>2</sup> Support to safety and protection, including violence risk reduction, follows an engagement pathway framed as Walking the Prevention Circle and Walking the Prevention Pathway which address intergenerational violence/harms and employs steps towards healing and wellness. These engagement pathways build on community capacity to take actions, inclusive of community safety, wellness, and further healing from intergenerational violence/harms. Actions may consist of implementing prevention education programming such as bullying prevention, healthy relationships, Be Safe: preventing child sexual abuse, safety planning and psychological first aid. The CRC engages in safety planning with service providers, including natural mental health providers in community, and educators working with children and youth. Safety Plans help the community and especially youth recognize potential warning signs and map harm reduction actions, help encourage feelings of safety in environments where they may be experiencing impacts of intergenerational trauma. In collaboration with the community, and when an event(s)/incident exceeds capacities, the CRC strategically augments community resources, through a tiered service system of care model and networks with community agencies, identifies strengths, and needs, and provides support and coordination in a way that is congruent with community gaps.

measures to prevent injuries. To be effective, the approach considers personal, equipment, and environmental factors for the pre-event, event, and post-event phases of incidents.

4. **Health Promotion:** strategies that are rooted in the Indigenous Social Determinants of Health and reflect a Two-Eyed Seeing approach in program design, implementation, and evaluation. Through a strengths-based, holistic approach, the Red Cross integrates key existing Indigenous-led health strategies to address the deep health disparities facing Indigenous populations. Areas of focus will include, but not be limited to working alongside communities to address top morbidities impacting Indigenous Peoples; ensuring evidence-based program design; and developing/deepening relationships/partnerships with Indigenous health actors in acknowledgement of the need to have a self-determined, distinctions-based approach to health and wellness work.
5. **Help Desk for Indigenous Leadership:** The Red Cross, with ISC funding, maintains a Help Desk for Indigenous communities and organizations. The Help Desk assists leaders, support structures, and community members through resource sharing and development, guided planning activities, and support to community-identified services promoting preparedness and mitigation for health, disaster, and social risks. Help Desk support also builds on community capacities as surge support to Red Cross emergency response operations and recovery work. The Help Desk also contributes to increasing organizational readiness to work alongside Indigenous leadership and communities in a culturally appropriate and safe way.



## RECOVERY SERVICES

### Case Management

Case Management provides wrap-around assistance to individuals and families who have been impacted by a disaster and/or disruptive event with the objective of supporting effective recovery. This service can be leveraged in a variety of ways that aims to meet the specific needs of those impacted and frequently requires close coordination with other actors, both government and non-government inclusive of community organizations, to effectively provide personalized support to each family. Elements of this service may include:

- Accompaniment and planning support to help individuals lead in their own recovery process.
- Referrals to other Red Cross programming and external service agencies.
- Training and educational opportunities for impacted populations to support knowledge-sharing and capacity building at the individual household level.
- Assistance with navigating complex processes, including government programming and insurance claims.
- Funding towards such expenses as debris removal, damage assessments, repairs, and reconstruction.



## **Community Recovery**

CRC offers a service to communities to help local leadership plan for, understand, and navigate complex recovery systems and challenges faced in a post-disaster and/or disruptive event environment. Community Recovery provides wide variety of strategic support and subject matter expertise aimed at ensuring that communities have the best information, knowledge, and resources available to manage/lead their own recovery, including:

- Support towards the completion of recovery impact assessments, planning, and the development of event-specific plans.
- Provision of technical guidance, information, resources, and tools related to recovery.
- Training and educational opportunities for impacted communities to support knowledge-sharing and capacity building at the community level.
- Referrals to other Red Cross programs and to external service agencies.

## **Mental Health & Psychosocial Support** *\*As noted in Emergency Social Services*

### **Granting and Capacity Building**

Recognizing the importance of strengthening existing structures and capacity at the community level throughout response and recovery, Granting and Capacity Building supports this need through the distribution of funding, equipment, education, training, or informational supports to community organizations, voluntary sector organizations, First Nations, Inuit, and Métis governments, and Indigenous Community groups.

Beginning in the relief phase, supports can be administered to such agencies as food banks and animal protection agencies to meet immediate needs of the community. Continuing throughout the recovery process, the goal is to provide community organizations (on and off reserve) the opportunity to contribute effectively to coordination and recovery efforts. In many cases, these organizations also form the referral network within the affected region and in host communities.

### **Support to Small Business, Not-for-Profits and Cultural Livelihoods**

Given the importance of small businesses and not-for-profit organizations to the recovery of local economy following a disaster and/or disruptive event, this service (also entitled Support to Cultural Livelihoods in the Indigenous context) provides funding, capacity building, education, training, and informational supports to small businesses and not-for-profit organizations.

The CRC provides support to small businesses and not-for-profit organizations through financial and information assistance to contribute to the costs associated with uninsured losses, therefore enabling beneficiaries to continue to provide services to the affected communities. The service also includes direct assistance to these entities, as well as providing grants to business and community stakeholders to provide educational opportunities and information related to building resilience and capacity to prepare for and respond to future events.

## **Disaster Risk Reduction & Climate Change Adaptation – Resilience in Recovery**

### ***Resilience in Recovery***

Considering that an important dimension of disaster resilience is the ability of individuals, households, and communities to cope with and recover from disasters, it is indispensable that recovery operations promote strengthened resource management capacities, including human, social, and environmental, to reduce risk to future hazards. This is especially important knowing that disasters are usually compounded by additional stressors. In addition, there is a risk of new disaster events overlapping with ongoing recovery efforts. These compounding/overlapping disasters exacerbate one another and expose additional vulnerabilities, requiring households and communities to continually reassess their coping strategies. As such, the CRC promotes DRR–CCA in recovery operations that reflect informed decision making and actions, starting during emergency preparedness planning (e.g., instituting build-back-better policies), and then throughout the recovery period (reassessing at key points in the process to ensure resilience strengthening strategies remain relevant and effective). While outside the service offerings of DRR–CCA, also critical to DRR Recovery Programs are ensuring accessibility to risk transfer, social protection initiatives and insurance. Such supports are addressed through Recovery Services and act as an example on the complements between programs contributing to common outcomes.

### **Creating Safe Environments in Recovery**

The CRC can provide tailored programming for Indigenous specific communities impacted by the disaster events and also delivers support through community-led projects, supported through granting and partnerships, that move communities from a place of impact to a community defined state of recovery and enhanced resilience. This is across the phases of recovery, and is reflective of community context, which allows for a nuanced approach that creates a bridge between Indigenous worldview, including intergenerational experiences and lived history, communities of practice, and research.

Efforts aim to strengthen and build on community resources that can be maintained, increased, and drawn upon to support recovery and collective resilience. This approach addresses the multilevel and dimensions of recovery and the intersects between them. Contextual factors such as event, scale, and characteristics of community, influence decision making on appropriate services and modality of service delivery. This involves community driven assessment of impact on key assets and systems and in turn, informs prioritization and opportunities to build upon assets addressing areas of impact on human, natural, social, and cultural recovery environments.

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<sup>i</sup> Please note that services listed within this document are not exhaustive and additional services may be offered by the Canadian Red Cross to support emergency management on a case-by-case basis provided all parties agree they are appropriate and will be funded.