PROCEDURE						
MANUAL:	Emergency Management Plan	INDEX:	EMP2-020.08			
SECTION:	Emergency Response	EFFECTIVE DATE:	March 31, 2017			
DESCRIPTION:	Code Green	REVIEWED DATE:	July 20, 2023			
APPROVED BY:	SVP Long Term Care, SVP Retirement	MODIFIED DATE:	July 20, 2023			

POLICY

Emergency Response Codes

PROCEDURE

Code Green will be used to evacuate Residents from immediate danger in the event of an impending emergency disaster. The Executive Director/Designate will determine when it is appropriate to shelter in place. All employees are responsible for understanding the use of Code Green in the event of a disaster or emergency situation.

- Precautionary and crisis evacuation will follow predetermined <u>Evacuation Routes</u> within the building.
- Emergency information in the <u>Evacuation Information Binder</u> will be easily accessible, complete and accurate to ensure that Resident care and safety is maintained in the event of an evacuation.
- Effective documentation utilizing the <u>Evacuation Log</u> will ensure accurate tracking of the relocation sites of Residents in an evacuation situation. An entry on the evacuation log is completed as each Resident leaves the property.
- Accounting of all persons involved will be maintained by Executive Director/Designate

Types of Evacuations

Code Red - Evacuation

- □ This evacuation is initiated by the person discovering the fire. (R.E.A.C.T.)
- □ The evacuation is announced over the communication system as 'Code Red' followed by the exact location of the fire as indicated on the fire panel.
- Evacuate the room in which the fire originated and the rooms on either side and directly across from the fire location.

Code Green (Horizontal Evacuation)

- □ Code Green is initiated by the person in charge of the emergency upon escalation in the status of the emergency/disaster.
- □ This includes evacuating Residents from disaster area to a designated safe area on the same floor. This is a horizontal evacuation to a safe area beyond the fire barrier doors.
- □ Code Green is practiced during fire drills by evacuating Residents who wish to participate.
- □ The Charge Nurse on each unit will ensure the safety of the Residents and their records.

Code Green (Vertical Evacuation) STAT

- □ Code Green Stat is initiated at the discretion of the Fire Department and/or the Executive Director/designate.
- □ Code Green Stat is used to evacuate Residents from the disaster area in a vertically downward direction and may involve one Home area or the entire building.

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- □ Where time permits, all exits which promote safe evacuation will be utilized.
- □ Where Code Green Stat involves more than one Home area, evacuation routes to be used by individual Home areas will be announced over the communication system to prevent blocking of the stairwells.

Code Green - Total Evacuation

- □ Total evacuation of the entire building is initiated at the discretion of the Fire Control Officer and/or the Executive Director/designate in a crisis or impending danger situation
- □ Total evacuation will be conducted in an orderly and timely fashion as announced over the communication system by the Executive Director/designate.
- □ The order of total evacuation will be determined by location, severity and the extent of disaster/emergency situation and various options/methods of evacuation may be utilized as safe and appropriate.
- □ In order to evacuate the greatest number of people in the least amount of time, evacuate Residents in the following order:
 - 1. Ambulatory
 - 2. Wheelchair
 - 3. Bedridden
 - 4. Resistive
- □ The Home's emergency kit will be removed by the person delegated by the Fire Control Officer.
- □ Non-essential items are left behind.
- □ Once the area is evacuated, no one may re-enter without the permission from the Fire Control Officer.
- □ The Total Evacuation fire bell is a rapid succession of tones.

Ontario Retirement Only

As soon as possible after any of the following events occurs, the residence shall give the Registrar a written notice setting out the details of the event:

- A temporary closure of the retirement home.
- A temporary closure of part of the retirement home if the closure materially affects a resident's accommodation or the care services or other services provided to a resident.
- An unplanned evacuation of residents from the retirement home for a period of greater than six hours.
- A temporary relocation of the retirement home or part of the retirement home to one or more other premises.

As soon as possible after the event and when it is safe and/or practical to do so, the retirement home operator should notify the RHRA. Notification must be made in writing (e.g., electronic mail).

Procedure Following Evacuation

Follow-up procedures will be in place following a total evacuation that will ensure the security of the building, the well-being of relocated Residents and that necessary communication with families/responsible parties is maintained.

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Designated person in charge of disaster (e.g. fire dept./police) will conduct the following inspection of physical premises:

- Ensure all electrical equipment is turned off;
- □ Ensure heat/air conditioning is turned off;
- Ensure that all evacuated areas are sealed off, secured and barricaded as required;
- Ensure that all windows are closed, and all doors are locked.

The Executive Director/designate will:

- □ Ensure that families/responsible parties are contacted and made aware of evacuation proceedings.
- Ensure that a notice is posted at the home's entrance listing necessary information and contact phone numbers.
- □ Ensure that appropriate arrangements are made to maintain the ongoing security of evacuated premises.
- □ Ensure continued provision of care at the level provided before evacuation (help with staffing at relocation sites and visit relocation sites regularly).

The Director of Care/DHW/designate will:

- □ Ensure the suspension of all regular work schedules in a disaster situation;
- Rework the schedule to reflect the changed needs/location of Residents.
- □ Ensure locations & personnel have access to divisional reporting system via internet connection or hot spot from phone if there is an issue with wifi

Conducting a Mock Evacuation – at a min of every 3 years for LTC, and 2 years for Retirement.

- □ The Executive Director/designate plans and prepares staff for mock evacuations.
- □ The type of emergency is determined by Environmental Services Team.
- □ All external Emergency Services Personal are notified.
- □ The mock evacuation is planned using the mock evacuation preparation checklist to ensure all areas are covered.
- □ During the mock evacuation, observers are given various responsibilities and required to document observations during the mock evacuation.
- □ A debriefing takes place after completion of the mock evacuation to evaluate strengths and weaknesses of the evacuation.
- □ Recommendations from the mock evacuation are forwarded to the Environmental Services Team for review.
- □ A report of the mock evacuation is completed by the Environmental Services Team. The report is to include at least the following:
 - Date of mock disaster;
 - Type of disaster;
 - Planning phase;
 - Evaluation (strengths, weaknesses);
 - Recommendations made at time of debriefing; and
 - Action place to address recommendations.
 - The report is submitted to the Management Team for approval.

PROCEDURE					
SECTION:	Emergency Codes	DESCRIPTION:	Code Green	INDEX:	EMP2- 020.08

EDUCATION

1. Techniques for Evacuation Lifts and Carries

TOOLS

- 1.
- Evacuation Routes (home specific) Evacuation Information Binder Checklist 2.
- Resident Evacuation Log 3.
- RET EMP YARDI Resident evacuation log job aid 4.
- Mock Evacuation Preparation Checklist 5.
- Code Green Facilitator Drill Checklist 6.

PROCEDURE						
MANUAL:	Emergency Management Plan	INDEX:	EMP2-020.010			
SECTION:	Emergency Response	EFFECTIVE DATE:	March 31, 2017			
DESCRIPTION:	Code Red	REVIEWED DATE:	March 31, 2022			
APPROVED BY:	SVP Long Term Care, SVP Retirement	MODIFIED DATE:	July 26, 2023			

POLICY

Emergency Response Codes

PROCEDURE

Emergency Code Red will be used:

- a) To alert all occupants when a fire is discovered
- b) When conducting FIRE DRILLS
- c) When there is a suspicious event that may lead to fire (e.g. smoke, smelling something burning)

If you discover a fire/smoke:

Call out "CODE RED" and fire location; R.E.A.C.T:

- R Remove Residents from immediate area;
- E Ensure doors are closed
- **A** Activate Alarm;
- C Call the Fire Department;

T - Try to extinguish fire (Only use fire extinguishers if trained by a professional, otherwise continue evacuating Residents)

If you hear the alarm:

- □ The alarm system has two tones, these are:
 - Unique to each system 1^{st} stage general alarm
 - \circ Continuous rapid sound 2nd stage alarm which means prepare to evacuate
- Check pull station locations to see if activation is on your Resident home area.
- □ Clear corridors.
- □ Staff who are not in their area are to immediately assume duties as per their designated roles and responsibilities unless otherwise instructed by the person in charge.
- DO NOT USE elevators. DO NOT ENTER the fire zone directly from a stairwell.
- □ Initiate room-to-room search. Assign a staff member to each hall. All rooms are to be checked as follows:
 - Close windows
 - o Check closets
 - Check bathrooms
 - o Close doors
 - Note the location of Residents
- Proceed with pre-planned fire procedures for your area.
- □ Instruct all Residents and visitors to remain where they are until directed by staff.

PROCEDURE						
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- □ Prepare to assist with a horizontal evacuation if so directed.
- □ If you hear the alarm and are not in your area:
 - Listen for the fire location over the voice annunciator system
 - Return to your area, using the stairs (opposite stairwell from fire zone)
 - Follow the directions of the person in charge
- □ All areas in the home will resume normal duties ONLY after the 'all clear' is announced.
- □ The person in charge will complete a Fire Drill report noting areas that require follow-up.

Fire Safety Plan

Refer to Section 3 of the Emergency Management Plan for additional policy (EMP-

P30) and procedures on the implementation of the Home's Fire Safety Plan.

- 1. Implementation of the Fire Safety Plan
- 2. Fire Retardant Supplies
- 3. Enhanced Fire Watch
- 4. Fire Drill Procedure
- 5. Fire Door Exits
- 6. Fire Systems Checks, Inspections and Tests (Home specific)
- 7. Fire Safety Roles and Responsibilities
- 8. Fire Safety Training for Employees
- 9. Fire Safety Training for Residents, Volunteers and Visitors

<u>TOOLS</u>

1. REACT Poster