

Emergency Management Plan



Grandview Lodge

Comfort. Compassion. Care.

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Location of Emergency Management Plans

All Supervisors at Grandview Lodge have a copy of the Emergency Management Plan

1. Administrator (located in the Business Office)
2. Facility Operations Supervisor
3. Director of Nursing
4. Programs Supervisor
5. Dietary Supervisor
6. Housekeeping & Launder Supervisor

There is a copy of this plan in each of the four Nurses' Stations

1. Bridge View
2. Creek View
3. Hill View
4. Marsh View

Disclaimer

Please note that throughout the document names and contact information are not included online as they contain confidential and sensitive security information. The full Emergency Management Plan are available for review by the Ministry of Long-Term Care and the Fire Department at the Long-Term Care Home

Fan out List and Important Contacts

Department:	Emergency Management	Subject:	Fan Out List and Important Contacts
Effective Date:	April 2022	Policy #:	EMP-01
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

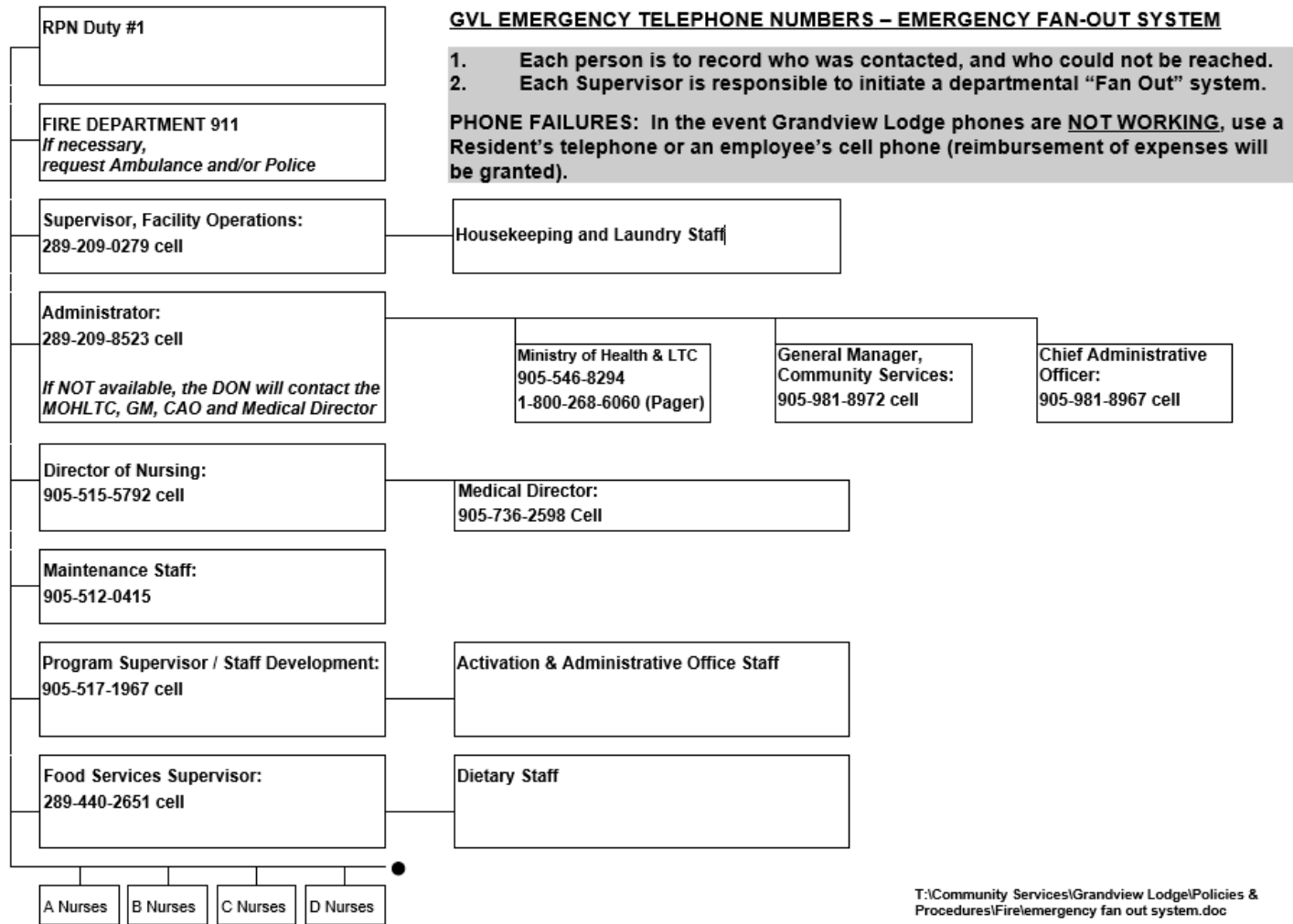
Policy:

In the event of an emergency affecting Grandview Lodge, registered staff, or their designate, must utilize the contacts provided in this policy. It is the responsibility of staff to contact the appropriate individuals/organizations, depending on the nature or scope of emergency.

Purpose:

Establish the emergency contact numbers that must be utilized in the event of various emergency situations within Grandview Lodge. These contact numbers are referenced later in the emergency management plan, when relevant.

Emergency Fan Out List



T:\Community Services\Grandview Lodge\Policies & Procedures\Fire\emergency fan out system.doc

Fan Out Check List Calls Completed

1. 911

If necessary, request:

Fire

Ambulance

Police

2. Facility Operations Supervisor

3. Administrator

4. Director of Nursing

5. Maintenance Staff

6. Program Supervisor

7. Dietary Supervisor

8. "A" Nurse

9. "B" Nurse

10. "C" Nurse

11. "D" Nurse

A.P.I. Alarms Inc:

Telephone: 1-877-224-9882

When receiving or placing a call to A.P.I. Alarms Inc., ALWAYS identify yourself with the below password and system number.

Password: GVL

System #: 3500

RN Signature: _____

Date: _____

Fan Out Contacts

Example Fan Out Call

1. This is _____ from Grandview Lodge.
2. There is an emergency at GVL, we are implementing the fan out system.
3. Report to: _____(evacuation site, GVL, etc.)
4. Go to the location after you contact the next available person on the list.

Important Contacts

POSITION	NAME	NUMBER
Administrator	Amy Moore	289-209-8523
Facility Operations Supervisor	Steve Durk	905-512-6261
Director of Nursing	Debbie Marks	289-776-5185
Medical Director	Dr. Kamouna	905-774-7541
Maintenance Staff	Jim Fleming Job Manning Steve Ellis	On call number: 905-512-0415
Program Supervisor	Melissa Baisley	289-308-6075
Dietary Supervisor	Kristen VanKuren	905-512-6204
C.A.O.	Cathy Case	905-318-5932, 6308 905-981-8972
General Manager, CSS	Megan Jamison	905-318-5932, 6116

POSITION	NAME	NUMBER
Grandview Lodge Van		905-774-1654

Important External Contacts

External Contacts

NAME	PHONE NUMBER
Fire Department / Police / Ambulance	911
Hospital (Haldimand War Memorial)	905-774-7431
API ALARMS INC. (alarm monitoring) <i>provide password & system #</i>	1-877-224-9882 Password: GVL System #: 3500
Grandview Lodge Van	905-774-1654
Poison Control Centre	1-800-268-9017
Ministry of Health Long-Term Care Pager Number (after hours)	905-546-8294 1-800-268-6060
Ministry of Environment Night shift	905-521-7460 905-577-6221
Ministry of Environment & Employment Standards	905-577-6221
Dr. Ahmed Kamouna	647-830-2767

Haldimand County Emergency Response Plan

POSITION	NAME	PHONE NUMBER
Mayor	Shelly Ann Bentley	905-318-5932, ext. 6101
Executive Assistant to Mayor & Council	Kendle Columbus	905-318-5932, ext. 6361
Manager, Emergency Services	Jason Gallagher	905-318-0159, ext. 6228
St. Catharines Fire		1-905-684-4311
Hydro One		1-800-434-1235
O.P.P.		1-888-310-1122 905-772-3322
Union Gas	General Use	1-877-969-0999

NOTE: Notification to the C.A.O. and General Manager of Community Services is the responsibility of the Grandview Lodge Administrator / Designate.

Introduction and Disaster Types

Department:	Emergency Management	Subject:	Introduction and Disaster Types
Effective Date:	April 2022	Policy #:	EMP-02
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge employees have a very serious responsibility. Employees are entrusted to protect the Residents, and have the responsibility to ensure the Home remains uninterrupted in its service. Grandview Lodge and its employees are committed to the prevention of emergencies; when that is not possible, an effective response is critical. Each employee is responsible for making themselves familiar with their duties/responsibilities, as established in this emergency management plan. To facilitate this process, all employees will be trained on their duties under this plan. Any updates pertinent to staff procedures will be communicated as soon as possible to those affected by the change.

Purpose

Emergency situations by their very nature and magnitude require an appropriate well co-ordinated response by many people, including the Home staff, Residents, Visitors, other organizations and the private sector. Therefore, the aim of the plan is to lay down a comprehensive plan for the efficient utilization of Home personnel and outside assistance during any of the crises referred to in the Manual.

Objectives of the Emergency Measures Plan

1. To identify the various types of disasters, both internal and external, which may affect our Home.
2. To provide an effective, co-ordinated and appropriate emergency plan of action for all levels of our staff, Residents, and visitors.
3. To outline the proper channels of authority during any disaster.
4. To develop a plan for reassessment and/or re-entry to restore full services.

Definition of a Disaster

For the purpose of the plan, an emergency or disaster is defined as any situation, or the threat of any situation, requiring any of the following:

1. Complete or partial evacuation
2. Relocation of Residents
3. Acceptance of additional Residents and/or other persons into the Home,

or expansion of services relating to a situation outside the Home.

Disasters Affecting Grandview Lodge

Those disasters that may occur within the Lodge such as: fire, explosion, flood, loss of essential services, bomb threats, or any other hazardous emergency which may endanger the lives of Residents and/or Lodge personnel.

Authority

Formal declaration of a disaster in G.V.L. will be made by the Administrator. In his/her absence, the alternate will be as follows:

1. Fire Chief / designate
2. Director of Nursing
3. Supervisor, Facility Operations
4. Charge Nurse (RegN Shift Supervisor)

Disasters Affecting the Municipality (Community Disasters)

Various types of emergencies which are the result of environmental disasters, tornadoes, chemical disasters, riots, any disaster which might cause the evacuation and relocation of the Residents of a specific geographic area, according to the Haldimand County Emergency Response Plan (H.C.E.R.P.).

The Home is responsible for providing all possible assistance to the municipality affected by the emergency, and for assuming direction from the Haldimand County Emergency Response Plan (H.C.E.R.P.) and the Emergency Operations Centre (EOC), once activated. In the event of an emergency, the conference room shall be deemed the head quarters for key personnel of Grandview Lodge.

Authority: Formal declaration of a disaster in the community will be made by the Mayor. In his/her absence the “designate” may declare that an emergency does exist.

Reporting Information to the Media:

The Administrator/designate will develop and release information to the public and media. He/she will be responsible for contacting and advising the community through the news media about the status of the emergency and its affects on the facility and the

community as a whole.

All other personnel if questioned, are directed to indicate that they are not authorized to make any statements. It is appropriate to make a statement of “no comment” and have the questions directed to the Administrator. In all cases of injury or death, names of the victims will be withheld from the media until the next of kin have been notified.

Community Involvement – Interacting with the E.O.C

The General Manager of Community Services is a member of the Haldimand County Emergency Response Plan (H.C.E.R.P.), having an active role during emergency response coordination through their participation in the Emergency Control Group (E.O.C). The General Manager of Community services will represent the interests of Grandview Lodge. This will enable Grandview Lodge to have vital input regarding changes within the Community Emergency Plan.

If a community disaster warrants a response involving Grandview Lodge, the Administrator will liaise with the Emergency Operations Centre (E.O.C.) to coordinate the appropriate response within the facility.

In the event of an emergency affecting Grandview Lodge, it is the responsibility of the Administrator, or designate, to notify the Corporation of Haldimand County.

Debriefing

A Committee will be struck to review the actions taken during the emergency. An evaluation form will be completed by appropriate representatives involved in the emergency. This should occur within 24-48 hours after the emergency is over.

Items for discussion would include:

1. Declaration of return to safe environment
2. Process to be implemented for return of Residents
3. Resumption of normal operations
4. Financial impact of emergency

Members of the debriefing committee should include but is not limited to:

1. Charge Nurse
2. All Supervisors
3. Representatives from Fire, Police, Hospital Staff, C.A.O., General Manager of Community Services
4. All other appropriate staff, volunteers as required.

Codes

Department:	Emergency Management	Subject:	Codes
Effective Date:	April 2022	Policy #:	EMP-03
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge is committed to rapid and effective responses to emergency situations. Staff are responsible for being familiar with these codes and the appropriate response.

Purpose

Inform staff about the important emergency codes used at Grandview Lodge. These codes, including the required staff response, are explained in greater detail in the relevant section.

Codes

Code Red	Fire
Code Black	Bomb/Extortion Threat
Code Green	Partial or Total Evacuation
Code Yellow	Missing Person
Code White	Violent Person
Code Brown	Internal Chemical Spill/Gas Leak
Code Blue	Cardiac Arrest

Grandview Lodge Emergency Codes Poster

Code	Incident
Red	Fire
Black	Bomb/Extortion Threat
Green	Evacuation
Yellow	Missing Person
White	Violent Person
Brown	Internal Chemical Spill
Blue	Cardiac Arrest

Fire Prevention and Equipment

Department:	Emergency Management	Subject:	Fire Prevention and Equipment
Effective Date:	April 2022	Policy #:	EMP-04
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to take every reasonable precaution to avoid fire hazards in the home. Management will ensure that staff, contractors, visitors and contractors are aware of important fire prevention principles and the locations of critical fire equipment.

Purpose

Facilitate staff knowledge about basic fire prevention guidelines and the location of critical fire emergency supplies. Grandview Lodge employees must be familiar with all fire prevention rules and supplies, so they have the pre-requisite knowledge required to report issues with ongoing practices.

Definitions

Fire Alarm – A facility wide loud overhead noise that gives warning to all staff, visitors, residents, volunteers and tenants of a fire or smoke danger.

Fire Alarm Panel - The controlling component of a fire alarm system. The panel receives information from devices designed to detect and report fires, monitors their operational integrity and provides for automatic control of equipment, and transmission of information necessary to prepare the facility for fire based on a predetermined sequence.

Fire Extinguisher – Is a portable or movable apparatus used to put out a small fire by directing onto it a substance that cools the burning material, deprives the flame of oxygen, or interferes with the chemical reactions occurring in the flame.

General Fire Prevention Rules

1. Allow no smoking in the resident's bedrooms or near O2 concentrators/tanks.
2. Smoking allowed in designated areas only.
3. Note and report all fire hazards.
4. Keep corridors clear - keep exit doors clear and unlocked.
5. Practice good housekeeping - do not store oily rags or waste material.
6. Use all substances according to WHMIS regulations.

Fire Prevention Rules within the Lodge

1. The Lodge is inspected at least once a year by an officer authorized to inspect buildings under the Fire Protection and Prevention Act and the recommendations of the officer are carried out.
2. Ensure adequate protection from radiators, heating equipment and other fire hazards.
3. Ensure the water supplies are adequate, including those for fire protection.
4. Inspection of all fire protection equipment monthly and serviced annually by qualified personnel.
5. The fire detection and alarm system is tested monthly by the Maintenance Department and annually by qualified fire alarm maintenance personnel.
6. The heating equipment is serviced annually and the chimneys are inspected and cleaned.
7. A written record is kept of inspections, tests of fire equipment, fire drills, the fire detection and alarm system, the heating system, chimneys and smoke detectors.
8. The staff are instructed in the method of sounding the fire detection and alarm system.
9. The staff are instructed in the steps that must be taken when a fire alarm rings.
10. Supervision is provided at all times for the security of the Residents and the Lodge.
11. All exits are clear and unobstructed at all times.
12. Fire retardant draperies, mattresses, carpeting and curtains are purchased.
13. Lint traps in the laundry are cleaned out once daily and more frequently if necessary.
14. Flammable liquids and paint supplies are stored in suitable containers in non-combustible cabinets.
15. No heat or smoke detector heads are painted or otherwise covered with any material or substances that are likely to prevent them from functioning normally.
16. When heat or smoke detectors are defective they are changed by qualified personnel.

Fire Equipment Inspections

1. **Portable Fire Extinguishers**
Maintenance inspects monthly to confirm that:
 - a. each extinguisher is in its designated place
 - b. the tamper seal is unbroken
 - c. the gauge reading is satisfactory
 - d. the extinguisher has no obvious physical damage
2. **Annual Servicing** is completed including a thorough examination and any necessary repair or replacement.
3. **Fire Alarm System** is:
 - a. tested monthly
 - b. serviced annually
 - c. monitored by A.P.I. Alarms Inc.

4. Fire Doors

- a. All fire separation doors across corridors and all stairway doors should be checked monthly

5. Dietary

- a. Dietary stoves are equipped with an automatic smothering extinguisher and it may be manually activated if necessary. There is a second activation system on the wall above the stationary extinguisher.

Resident/Family Information

1. Fire drills are run monthly.
2. Take direction from trained staff.
3. If no staff member is present or available, there are two options:
 - a. If fire or smoke is not evident, move to the nearest exit.
 - b. If fire or smoke is evident, remain in your room, shut the doors tightly, and stop any seepage of smoke from under the door with bedding or clothing and wait for staff instructions
4. Remain calm. You are close to the ground and can be reached at any window.

Resident and Visitor Rules

1. No smoking in bedrooms. Smoking is permitted in the designated area in the Home for Residents. Family/visitors are requested to NOT SMOKE in the Home.
2. Yearly, we review fire procedures and fire prevention with all Residents. Please, for your own safety, attend these sessions.
3. Fire doors close automatically when the Alarm is sounded. Please stay out of the doorways.

Fire Detection Equipment

1. Fire Alarm Pulls

When the alarm is pulled:

- a. the fire horns will sound throughout the building
- b. most electrical equipment will shut down
- c. all fire doors will close
- d. All doors will unlock

** The RN must ensure that the reset is completed **

2. Automatic

- **Smoke Detectors** - Smoke detectors are located throughout the building. The activated solid red light on the side of the smoke detector will determine the location of the actuation.

3. Heat Detectors

- Heat detectors are located throughout the building. Pre-set temperatures will activate these detectors. The activated solid red light on the side of the heat detector will determine the activation.

4. **Smoke Ducts**

- Smoke ducts are a part of the air exchange system. Excess smoke will activate the fire alarm system.

5. **Sprinkler System**

- Sprinklers are located throughout the building.

Annunciator Fire Alarm Panel

1. **Location of Annunciators & Graphics**

- a. Communication Room
- b. Hill View Nurses Station
- c. Bridge View Nurses Station
- d. Creek View Nurses Station
- e. Marsh View Nurses Station
- f. Main Entrance

2. **Purpose of Annunciator**

To alert staff to:

- a. Location of alarm - area.
- b. Reason for alarm - smoke detectors, fire, or trouble light.

3. **Purpose of Graphics**

To alert staff to the specific zone location denoted on the annunciator.

- “Smoke Detectors” denotes an excessive amount of smoke in a zone.
- “Fire” registers a fire situation in a zone.
- “Trouble Light” denotes a malfunction of the electronic equipment and maintenance must be called to correct the problem. (Light will remain on until problem corrected.)

4. **Silencing the Buzzer**

- The trouble buzzer may be silenced by following the instructions on the Fire Panel in the Com Room.
- It is imperative that the staff be alert and watchful for fire during this equipment failure period. If the trouble buzzer was silenced, it must be returned to a normal position when the equipment is restored to proper operation.

Fire Fighting Equipment

1. **Extinguishers – Location**

- Portable fire extinguishers are located in all corridors and other areas of the building. Make yourself familiar with their locations.

- ABC fire extinguishers are located in each corridor, kitchenettes, galley kitchen, Resident smoke room (CSA room), mechanical areas, nurse stations and storage areas.
- All but two extinguishers within the Lodge are ABC extinguishers, which are multi-purpose and used for any type of fire.
- The other two extinguishers are in the dietary area. Both are hanging on the wall in the kitchen and are Type K extinguishers (chemical and water).

2. Use of Extinguishers

- Remove extinguisher from the wall.
- Remove the pin that goes through handle. Aim nozzle at base of fire and squeeze handle.
- Short sweeping motion at base of fire is most effective.
- Report the used extinguisher to maintenance for recharge.

3. Fire Blanket - Location

- Resident Smoke Room (CSA Room)

4. Use of Fire Blankets

- To prevent smoke from seeping under doors.
- To assist with evacuation.
- To smother fires by using blanket.

NOTE: It is important that a blanket is taken with each Resident being evacuated for warmth and comfort.

Static Fire Equipment Locations

- All areas of the building are covered by water sprinklers
- All areas of the NEW building are covered by either a smoke or heat detector
- Each exit has a fire pull station
- Fire panels are located at each Nurses Station, Main Entrance and Communications Room

Attachment A: Alarm System Information

A.P.I. Alarms INC

A.P.I. Alarms Inc. supplies a complete remote station monitoring system for Grandview Lodge alarm to alert a 24-hour monitoring system by a trained answering service for fire(s) and trouble within our alarm system.

The system activates immediately within Grandview Lodge and at the location of the A.P.I. Alarms Inc. monitoring system.

Once activated, the A.P.I. Alarms Inc. answering service will notify the Haldimand County Fire Service and will also notify Grandview Lodge of the system being activated.

A.P.I. Alarms Inc.: 1-877-224-9882

When receiving OR placing a call to A.P.I. Alarms Inc., always identify yourself with Grandview Lodge's:

Password: GVL

System #: 3500

A.P.I. Alarms Inc. is also responsible for notifying key staff of Grandview Lodge listed in their records.

When the "ALL CLEAR" is given by the Fire Service, the person in charge notifies A.P.I. Alarms Inc. (1-877-224-9882) of the situation at Grandview Lodge to ensure that both their panels and Grandview Lodge's panels reads "ALL CLEAR". State your first and last name and that it's for Grandview Lodge.

This is a contract service between Grandview Lodge and A.P.I. Alarms Inc.

Attachment B: Fire Alarm Report



FIRE ALARM REPORT GRANDVIEW LODGE

Date		
Time		
Area		
Scheduled Silent Drill	YES	<input type="checkbox"/>
	NO	<input type="checkbox"/>
Unscheduled Silent Drill	YES	<input type="checkbox"/>
	NO	<input type="checkbox"/>
Calls Made:	<input type="checkbox"/>	911
	<input type="checkbox"/>	API Alarms Inc
	<input type="checkbox"/>	Maintenance
	<input type="checkbox"/>	Other
Debrief:	YES	<input type="checkbox"/>
	NO	<input type="checkbox"/>

FIRE DRILL PROCESS REPORT:

RPN Called RN > RN paged overhead "fire [Resident Home Area]" X3 > RPN delegated to direct crew to fire > PSW's + RPN tend to Residents > RN marks them safe.

DIRECT STAFF ON DUTY:

MARSHVIEW:			
CREEKVIEW:			
BRIDGEVIEW:			
HILLVIEW:			

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Attachment C: Monthly Fire Report

Monthly Fire Report:

Completed By: _____ Date: _____ Time: _____

Location of Fire: _____ Reason for Alarm: _____

911 Called A.P.I. Alarms Inc. Called Follow-up Meeting

Departments Attended:

Activation	<input type="checkbox"/>	Office	<input type="checkbox"/>
Dietary	<input type="checkbox"/>	Nursing	<input type="checkbox"/>
Housekeeping	<input type="checkbox"/>	Leadership	<input type="checkbox"/>
Laundry	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>

Areas Reported:

Bridge View	<input type="checkbox"/>	Creek View	<input type="checkbox"/>
Hill View	<input type="checkbox"/>	Marsh View	<input type="checkbox"/>

Identified Concerns: _____

Fire Area Report/ Concerns: _____

Corrective Action:

Follow-up Discussion / Teaching	<input type="checkbox"/>	Follow-up at Fire / Disaster Meeting	<input type="checkbox"/>
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Signature: _____ Date: _____

Fire Education

Department:	Emergency Management	Subject:	Fire Education
Effective Date:	April 2022	Policy #:	EMP-05
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge will ensure staff, volunteers, students and visitors obtain proper instruction on how to respond to a fire-related emergency. Training will be organized by the Supervisor, Facility Operations, or designate.

Purpose

To outline how Grandview Lodge staff will be trained on fire response and evacuation protocols.

Required Employee Knowledge

1. The location of fire extinguishing equipment throughout the entire building.
2. How to effectively use this equipment.
3. How to turn in an alarm.
4. The proper use of exit doors/fire doors.
5. Evacuation procedures.
6. How to prevent panic.
7. How to be alert for signs of fire.
8. How to shut off their Departmental equipment.

Scheduled Fire Drills:

1. Schedule

- Conducted monthly.
- Scheduled on three shifts throughout the year and staff involved will be documented.

2. Fire Identification

Emergency fire simulator/flashing red light. When staff identifies the fire location, they:

- a. Leave light ON.
- b. Place flashing light outside the closed door.

- c. See “plan of action” for duties

3. Evacuation of Residents During Drill

Scope of evacuation:

- a. Remove Residents from their rooms.
 - b. Shut doors.
 - c. Move Residents beyond nearest set of fire doors, not crossing the fire area.
- Simulation of whole wing evacuation will be completed annually.
 - Total facility evacuation will be completed every three years (Mock Disaster)
 - Responsibility during drills:
 - a. Communicate vital information to Charge Nurse and other staff members in the fire area.
 - b. Always work in pairs in fire area.

4. Post Drill Debriefing

After the “All Clear” is announced, all staff in the area will:

- a. Assist Residents back to their rooms.
- b. Re-open all doors and windows as appropriate.
- c. Attend post drill meetings as announced.

5. Fire Debrief Team

- All Supervisors/Designate
- All Registered Staff
- One staff member from each department
- Nursing staff fire assignments #1-4

6. Role of Management During Drills

- a. Observe during fire drills (Supervisors will be assigned observation areas).
- b. Complete questionnaire.
- c. Attend post drill meeting.

Silent Fire/Disaster Drills-Procedure

1. Purpose

To ensure staff are well versed in responding:

- a. To the evacuation procedure, in the event of disaster
- b. How to contain the fire
- c. To their specific duties as listed in the manual

2. R.N./R.P.N. Duties

Once notified that a drill is scheduled:

- a. Pre-determine the time of the drill.
- b. Announce a Report for all staff to be at their Nurses Stations at the chosen time.
- c. At the chosen time:
 - Utilizing the pager, RN Duty #2 will call the other Register staff member and identify where the fire is (code red and area) x 3
 - Registered staff will meet with the PSW's to ensure that staff are aware of their fire number and associated duties, and give appropriate training as required
 - Each Registered staff member is required to complete a Fire Drill Report and submit to the Facility Operations Supervisor

Staff Education

1. Orientation - New Staff

All new employees receive:

- a. Full tour of the Home during their orientation to the Home for purposes of identifying all fire fighting equipment, exit doors and layout of the building.
- b. Full teaching of what to do in case of fire/duties and responsibilities.
- c. Fire introduction/prevention information in their orientation material handout.
- d. Review of their specific responsibilities; they must learn and know as staff members of GVL.

2. Continuing Education

- a. Participation in monthly fire drills.
- b. Participation in the annual fire training sessions of handling extinguishers
- c. Participation in the annual tours of the Home to identify the location of all firefighting equipment.
- d. Participate in the annual training of evacuation techniques and the review of the fire manual annually or as updated.
- e. Participation in the scheduled community disaster plan.
- f. All staff must attend annual training.

3. Resident Education

- Fire lectures are conducted yearly.

4. New Residents/Families

- Receive written information and instructions on the day of admission.

5. Volunteer Education

- During the orientation to the Home, the Volunteer Coordinator reviews the role/responsibility of all volunteers.

Employees are expected to participate in the full tour of the building and read the entire fire manual and address any concerns or questions you may have.

Attachment A: Fire Drill Questionnaire

Fire Drill Questionnaire

Name: _____

Date: _____

Area Observed: _____

Time: _____

Fire Area Questions:

	Yes	No
1. Phone Available?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was the paging heard?	<input type="checkbox"/>	<input type="checkbox"/>
3. Was the annunciator/ graphics used?	<input type="checkbox"/>	<input type="checkbox"/>
4. How many extinguishers were brought?		
5. Were Residents in fire area evacuated first?	<input type="checkbox"/>	<input type="checkbox"/>
6. Were Residents evacuated beyond nearest set of fire door?	<input type="checkbox"/>	<input type="checkbox"/>
7. Was full wing evacuation simulation carried out?	<input type="checkbox"/>	<input type="checkbox"/>
8. Did all Staff carry out assigned duties?	<input type="checkbox"/>	<input type="checkbox"/>
9. Did Staff wait for "ALL Clear" before resuming regular duties?	<input type="checkbox"/>	<input type="checkbox"/>

Specific Concerns: _____

Non-Fire Area Questions:

	Yes	No
1. Was the paging heard?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was Nursing Staff at nursing stations??	<input type="checkbox"/>	<input type="checkbox"/>
3. Were windows/ doors shut tight?	<input type="checkbox"/>	<input type="checkbox"/>
4. Were Residents reassured?		
5. Did Staff wait for "ALL Clear"?	<input type="checkbox"/>	<input type="checkbox"/>

Specific Concerns: _____

Signature: _____

Date: _____

Evacuation Carrying Methods

Department:	Emergency Management	Subject:	Evacuation Carrying Methods
Effective Date:	April 2022	Policy #:	EMP-06
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership and staff to facilitate a safe transfer of residents during emergency situations. Management will work to ensure all staff are aware of the approved carrying and transfer methods. Staff has the responsibility to read and understand the resident carrying techniques.

Purpose

Describe the procedure for facilitating resident carrying methods depending on the demands of the environment. This guide should be used to facilitate safe resident transfers out of emergency areas.

Carrying Methods

- | | |
|---|---|
| a. Universal Carry – One Man | Designed for lowering to the floor/ great strength not needed |
| b. Double Cradle Drop – Two Man | For stairways and unconscious residents only. |
| c. Vertical Evacuation – Two Man | For stairways and unconscious residents only. |
| d. The Swing Carry – Two Man | Good all-around carry. |
| e. The Extremity Carry – Two Man | For fresh fractures. |
| f. Side Assist Hold – One Man | For slow moving Residents. |
| g. Bear Hug Hold – One Man | For resistant Residents and for narrow passageways. (watching for head butting) |

Evacuation Equipment

- | | |
|------------------------|--------------------|
| a. Wheel Chairs | Utilize to maximum |
|------------------------|--------------------|

b. **Stretchers**

Resistive Residents

c. **Beds**

If needed, the Resident could be transferred in their own bed.

Carrying Methods Defined

The Universal Carry

- a. Slide the Resident to the edge of the bed.
- b. Spread the blanket, sheet or spread on the floor. Place one third of the blanket under the bed and leave about eight inches above the Residents head.
- c. Grasp the Residents ankles and move the legs until they drop over the bed at the bend in the knees.
- d. Place your hands on each shoulder of the Resident. Slowly pull your hands toward you until the Resident is in a sitting position.
- e. Encircle the Resident with your arms from behind. Place your arms under the Residents armpits and hold wrists. Cross together in front of him.
- f. Lower the Resident to the floor and protect their head.
- g. Wrap the blanket around the Resident.
- h. At the Residents head, grip the blanket with your hands above each shoulder of the Resident. Do not let the head snap back.
- i. Place the Resident in a half sitting position and pull the blanket toward you. The blanket will slide easily on the floor allowing you to move the Resident to safety.

Double Cradle Drop

- a. Slide the Resident to the edge of the bed.
- b. Place the blanket on the floor, with one-third of it under the bed and leave about eight inches above the Residents head.
- c. The person who will handle the top half of the Resident will be referred to as "A", and the person who will handle the lower half of the Resident will be "B".
- d. "A", slide your arm under the Residents head and grasp the opposite shoulder. Your other arm goes completely under the body at the waistline.
- e. "B", slide your arms under the legs on both sides of the Residents knees and extend through. Support this half firmly and gently.
- f. Together, gently pull the Resident toward you by bending knees into a squatting position and lowering to the blanket.
- g. Always protect the Residents head by lowering this part to the blanket last and wrap the blanket around the Resident.
- h. Together, move to the Residents head, grasp the blanket above the shoulders and pull the blanket toward you.

Vertical Evacuation

- a. With the victim wrapped tightly in a blanket, leaving the arms free, take him first

- to the top of the stairs.
- b. You take a position on the stairs, one, two or three steps lower than the victim. This position will vary on the height of the victim and yourself.
 - c. Place your arms under his armpits and join wrists in front of him.
 - d. Back slowly down the stairs and maintain a close contact at all times with one of your legs against the victims back.
 - e. The victim's lower body will be on an incline with the stairs. In this position, it is easy to move the victim.

The Swing Carry

Lower position is Person "B", upper position is Person "A".

- a. "B", you grasp the ankles and move legs off the bed.
- b. "A", face the Resident and place your hands on each shoulder, pull your hands towards you until the Resident is in a sitting position.
- c. Now together, sit on the bed, take the Residents arm and place it over your shoulder.
- d. Place your shoulder under the Residents armpits; join arms in back of the Resident. Do not hold onto the Resident, just each other.
- e. Join your hands together under the Residents knees.
- f. Together, lift the Resident and walk forward in a normal manner, protecting the Residents head.

The Extremity Carry

The upper body is Person "A", the lower body is Person "B".

- a. "A", place your hands on each shoulder of the Resident, pull the Resident slowly into a sitting position.
- b. "B", take the Residents ankles and move the legs until one of the legs is clear of the bed. If moved further, it will be difficult for your partner to get hold of the Resident.
- c. "B", you simply back in between the Residents legs, far enough to grasp the ankles. Place your hands to the outside of the legs, allowing your thumbs to stay on top and keeping your arms straight down.
- d. "A", you move to the rear of the Resident, encircle him with your arms. Place your arms under his armpits and lock wrists together in front.
- e. Slide the Resident to the edge of the bed. "A", maintain close contact with the Resident, and when in position, give the signal to move out.
- f. Carry the Resident to safety, walking forward in a normal manner and keeping the affected leg straight

Side Assist Hold

- a. In the side assist hold, you approach the standing Resident from the side. Take the Residents arm and place it in back of you tightly and securely.
- b. Encircle the Residents body with your other arm and take his forearm (adjust as necessary). The Resident will feel secure in your grasp and may be controlled easily. The Resident cannot fall forward or backward.

Bear Hug Hold

- a. Approach the standing Resident from the rear.
- b. Place your hands between the Residents body and arms. Take hold of his wrists, keep your hands on top, your thumbs to the inside.
- c. Fold your arms to encircle the Resident around the chest.
- d. **The most important thing** is that you keep your head to one side of the Residents head so that the Resident cannot butt you.

Code Red

Department:	Emergency Management	Subject:	Code Red
Effective Date:	April 2022	Policy #:	EMP-07
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to adhere to the approved Fire Safety Plan. Management has the responsibility to provide the leadership and training for the staff to carry out the approved Fire Safety Plan as it applies to Grandview Lodge. Staff have the responsibility to read and understand the Fire Safety Plan as assigned to them by the Leadership team of Grandview Lodge. Tenants, contractors, volunteers and visitors have the responsibility to respond to all alarms and directions given by staff and how to raise an alarm.

Purpose

To outline actions to be taken when there is discovery of fire or smoke at Grandview Lodge. The policy is to outline the responsibilities of Code Red responders and all staff, tenants, contractors, volunteers and visitors actions during a Code Red Emergency. All staff, tenants, contractors, volunteers and visitors must be aware of the steps to take if they discover fire or smoke.

***Note:** If you are in the old building and hear the fire alarms, you must proceed back to the new building with caution because you will not know the location of the fire.*

Definitions

Code Red - A broadcasted message or warning indicating imminent fire or smoke danger requiring the immediate evacuation of a specific fire zone.

Code Red All Clear - An announcement which indicates to all staff, tenants, contractors, volunteers and visitors that the danger of the fire or the fire drill has ended.

Fire Point of Origin – Location in which the fire started or originated.

Gathering Room – See appendix.

Confinement of the Fire

Navigating around fire doors

1. Fire doors will close automatically.
2. For exit purposes, doors will close automatically

3. Close all other doors and all windows in the area in an attempt to isolate the fire.
4. Check all FIRE DOORS to ensure they are tightly closed after removal of all Residents and staff. Pack with wet towels or sheets to further prevent the spread of smoke.
5. Traffic through these doors must be kept to an absolute minimum.

Opening of a fire door

1. Always feel the fire door for temperature both top and bottom before opening. Look through glass for signs of smoke or fire.
2. If the door is not warm, open the door slowly, placing your foot against it to prevent the door from being blown open.
3. Open the door only wide enough to allow one to pass through.
4. If the door is warm or hot to touch, under no circumstances should the door be opened.

Staff

1. Staff Off-Duty

Employees called in to assist during a disaster, should:

- a. Enter the Lodge through the Main Entrance doors
- b. Report to the Personnel Assignment Centre, Gathering Room, to person in charge for instructions. If this area is in danger, directions for alternate location will be given to arrivals by police or other emergency response personnel.

2. Staff On Duty

If a disaster occurs towards the end of a shift, the shift on duty will remain.

Flexibility of the System

- The following instructions are given as guidelines and not necessarily in the sequence that would be applicable in cases of all disasters.
- Judgement and common sense are necessary in deciding which action is appropriate in a given situation. The selection made should always be the one which achieves the greatest protection for the Resident.

-

Staff Responsibilities

R.P.N. DUTY #1

1. Go directly to the nearest Nurse's Station, read annunciator and check the graphics.
2. **Call 911. Ask for Fire first.**
3. Announce "**CODE RED AND FIRE LOCATION**" three times in succession over

- the P.A. System.
4. When receiving or placing a call to A.P.I. Alarms Inc., 1-877-224-9882, always identify yourself with:
 - a. Password: GVL
 - b. System #:3500
 5. On Night shift:
 - a. Go to the fire area and take charge.
 - b. Ensure staff are working in pairs.
 - c. Keep communication with the Registered Staff.
 6. Page Maintenance **after hours**.
 7. When instructed by the fire fighter, announce an all clear three times as follows – **“CODE RED ALL CLEAR.”**
 8. If fire is at Maple Grove Place, the fire area should be overhead paged and all staff should remain in their areas.

R.P.N. DUTY #1

Important Information:

If there is only one registered staff in the building, this staff member calls 911 and assumes Duty #2. If one R.N. and one R.P.N. are in the building, the R.N. is always Duty #2.

R.N. DUTY #2

1. **When the alarm sounds:**
 - a. Pick up the clipboard with daily Resident census information and ensure you have a pen.
 - b. Ensure you are wearing “Charge Nurse” vest (one at each nurse’s station).
 - c. Read annunciator for location.
 - d. Go close to fire area and remain outside.
 - e. Maintain communication with RPN inside the fire area.
 - f. Keep track of staff entering the fire area.
 - g. Ensure Residents are being evacuated behind nearest fire doors.
 - h. Check off each Resident on daily census sheet as they are evacuated.
 - i. Ensure that a final check on all rooms is completed during a fire drill only. As soon as the fire fighters arrive, they assume the charge role.
 - j. Reset fire panel when fire fighters give the ‘all clear.’
 - Reset all mag locks.
 - Call A.P.I. Alarms Inc. monitoring system to ensure ‘all clear.’
 - Telephone: 1-877-224-9882
 - Identify yourself using: Password: GVL
 - System #: 3500
2. **If evacuation is necessary:**
 - a. The unaffected wing will be the relocation site.
 - b. If possible, Residents should be evacuated through the building to the

- unaffected wing.
- c. If it is necessary to exit the building, to prevent crossing the fire area, staff should re-enter at the nearest entrance that is beyond the affected area.
 - d. When you get to the unaffected wing, a head count of Residents must be taken.

All Duties: Only the RN and a staff of their choice should investigate a fire outside the Resident Home Areas or Main Street. If the fire is in the Main Street area, evacuation should start as close to the fire as possible and evacuated behind fire doors in each Resident Home Area (by Med Room). If the fire is at Maple Grove Place, stay in your area.

R.N. DUTY #2

Important Information:

1. The R.N. is responsible for all of the above duties; some however, can be delegated to appropriate staff (i.e. Resent panel to maintenance staff in the building).
2. If fire is outside Resident Home Area or Main Street on Nights, meet the fire fighters at the door – do NOT investigate fire.
3. If fire is outside Resident Home Areas or Main Street on Days or Afternoons, the RN will take another staff with her to ensure all staff and residents are out, and to ensure the Day Away Program staff is evacuating their residents.
4. If the fire alarms go off on Nights, all staff should report to the fire area. If there is no sign of fire, the RN should direct the appropriate staff to watch the other two areas and meet the fire department at the front door.
5. If the fire location is in the Main Street office area, all staff shall find the fire and evacuate to the Resident Home Area (past Med Rooms).

R.N./R.P.N. ADDITIONAL DUTIES (OTHER THAN DUTY #1 or #2)

1. **If the fire is in your wing:**
 - a. Go directly to the fire area.
 - b. Take an extinguisher with you if you pass one.
 - c. Take charge of the fire area.
 - d. Ensure staff are working in pairs.
 - e. Keep ongoing communication with the RegN outside the fire area.
 - f. Evacuate Residents in immediate danger zone.
 - g. Pull the fire alarm.
 - h. Use extinguisher on the fire (if possible).
2. **If the fire is in your wing:**
 - a. Go to the **staff-holding area** and keep in contact with the Charge Nurse.
 - b. If the Charge Nurse requests more staff to help with an evacuation, send the appropriate number.

Other R.N./R.P.N. Duties

Important Information:

When choosing staff to send and help with evacuation, PSWs and Maintenance staff, if available, should go first.

PSW #1 – MARSHVIEW

1. **Never leave the area.**
2. **If the fire is in your wing (North or South):**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. Use extinguisher on fire (if possible).
3. **If fire is not in your wing:**
 - a. Stay in a central area so you can monitor both Resident Home Areas.
 - b. Pick up pager from table between two Resident Home Areas.
 - c. Reassure and remain with Residents.
 - d. On Night shift, report to the “fire area” first – if there is no obvious sign of fire, return to unaffected wing to monitor Residents.

PSW #2 – CREEKVIEW

1. **If the fire is in your wing (North or South):**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. If fire persists, close the door and disconnect O² concentrators.
 - f. Use extinguisher on fire (if possible).
2. **If the fire is not in your wing (North or South):**
 - a. Put the pager on the table between the two Resident Home Areas.
 - b. Go to front door and wait for fire fighters.
 - c. Direct fire fighters to fire area.
 - d. If fire is in Main Street area, unlock door for fire fighters only if safe to do so.
 - e. Ensure service hallway door is closed.

PSW #3 – BRIDGEVIEW

1. **Never leave the area.**

2. **If the fire is in your wing (North or South):**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. Use extinguisher on fire (if possible).

3. **If fire is not in your wing (North or South):**
 - a. Stay in a central area so you can monitor both Resident Home Areas.
 - b. Pick up pager from table between two Resident Home Areas.
 - c. Reassure and remain with Residents.
 - d. On Night shift, report to the “fire area” first – if there is no obvious sign of fire, return to unaffected wing to monitor Residents.

PSW #4 – HILLVIEW

1. **If the fire is in your wing (North or South):**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. If fire persists, close the door and disconnect O² concentrators.
 - f. Use extinguisher on fire, if possible.

2. **If fire is not in your wing (North or South):**
 - a. Put the pager on the table between the two Resident Home Areas.
 - b. Take your key and unlock the back door.
 - c. Go to front door and wait for fire fighters.
 - d. Direct the fire fighters to fire area.
 - e. If fire is in Main Street area, unlock door for fire fighters only if safe to do so.
 - f. Ensure service hallway door is closed.

HCAS/PSWS NOT ASSIGNED A FIRE NUMBER AND ALL MODIFIED WORKERS

1. **If the fire is in your wing (North or South):**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. Use extinguisher on fire (if possible).

2. **If the fire is not in your wing (North or South):**
 - a. Go to the Gathering Room.
 - b. Take direction from R.P.N. in charge of this area.

3. **If the fire is in the Main Street area of the building, stay in your area.**

MAINTENANCE STAFF

1. **If you are in the fire area:**
 - a. Assist anyone in immediate danger, and close doors as required.
 - b. Isolate/fight fire if possible.
 - c. Pull fire alarm, if not already done.
 - d. Assist with evacuation as necessary/driving of GVL vehicles.

2. **If you are not in the fire area:**
 - a. Go directly to the fire area.
 - b. Two Maintenance staff may be asked to investigate fire.

CHARGE COOK - DIETARY STAFF

1. **When the fire alarm sounds the Charge Cook will:**
 - a. Close doors.
 - b. Shut equipment off.
 - c. Go to the Gathering Room.

2. **If fire is in the kitchen the Charge Cook will:**
 - a. Fight fire if possible (never put yourself or anyone else at risk)
 - b. If unable to fight fire, ensure all staff exit the kitchen and go to the Gathering Room.

OTHER DIETARY STAFF

1. Go to the Gathering Room
2. Take direction from the R.P.N. in charge.
3. If fire is in Main Street area, go to a wing without having to cross the fire area.

HOUSEKEEPING STAFF

1. **If fire is in your wing:**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you, if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. Use extinguisher on fire, if possible.
2. **If fire is not in your wing:**
 - a. Go to the Gathering Room.
 - b. Take direction from R.P.N. in charge.
 - c. If the fire is in the Gathering Room, go to the wing that you can get to safely.

LAUNDRY STAFF

1. **If the fire is not in your area:**
 - a. Collect armful of linen and go to the Gathering Room.
 - b. Take direction from R.P.N. in charge.
 - c. If the fire is in the Gathering Room, go to the area you can get to safely.

2. **If the fire is in the Laundry Department:**
 - a. Fight the fire if safe to do so.
 - b. If needed, remove everyone from the area and go to the Gathering Room.

RECREATION STAFF

1. **If fire is in your area:**
 - a. Go directly to the fire area.
 - b. Take extinguisher with you if you pass one.
 - c. Evacuate Residents in immediate danger.
 - d. Pull the fire alarm.
 - e. Use extinguisher on fire, if possible.
2. **If you are in an unaffected Resident Home Area:**
 - a. Remain in the area.
 - b. Assist as required.
3. **If you are not in a Resident Home Area**
 - a. Go to the Gathering Room.
4. **If involved with a Resident program (outside the R.H.A. or Main Street areas):**
 - a. This will be considered an outing and you must give Registered Staff a list of Residents when they leave and when they return.
 - b. Must have the ability to communicate with the Charge Nurse at all times.

Facility Operations Supervisor

1. Go directly to the fire area if in Resident Home Area.
2. If fire is outside the Resident Home Areas, take Maintenance staff to investigate.

Resident Services Clerk

1. **If fire is in your area:**
 - a. Assist anyone in immediate danger.
 - b. Pull the alarm.
 - c. Close all doors and windows.
 - d. Use extinguisher on fire, if possible.
2. **If fire is not in your area:**
 - a. Man the phone in the reception area.

All other administration staff

1. Go to the Gathering Room
2. Take direction from the R.P.N. in charge
3. If the fire is in the Main Street area, go to the wing you can get to safely.

Hairdresser

1. **If the fire is in your area:**
 - a. Assist anyone in immediate danger.
 - b. Pull the alarm.
 - c. Close all doors and windows.
 - d. Use extinguisher on fire if possible.
2. **If the fire is not in your area:**
 - a. If able to leave the Residents in the hairdresser/barber rooms, clear and patrol corridor.

Niagara College or Senior Support Classroom

1. **If fire is in your area:**
 - a. Assist anyone in immediate danger, closing doors.
 - b. Isolate/fight fire, if possible.
 - c. Pull fire alarm, if not already done.
 - d. Close doors to day care area.
 - e. Assist with evacuation.
2. **If fire is not in your area:**
 - a. Remain in the area.
 - b. Close all doors and windows. Ensure that the day care entrance area is unlocked.
 - c. Re-assure Residents.
 - d. Remain alert for fire location and the “all clear” signal.

Visitors/Auxiliary/Volunteer

1. Remain with Resident(s) you are visiting.
2. If fire is in your immediate area, remove Residents to beyond nearest set of fire doors.
3. Close doors and windows in your area.
4. Cooperate and assist with any instructions staff may request of you.

Placement Students/Nursing

When assigned to work with a staff member, always follow through with their assigned fire duties, **unless** otherwise directed by the Registered Staff.

Note: If you are in the old building and hear the fire alarms, you must proceed back to the new building with caution because you will not know the location of the fire.

Code Green

Department:	Emergency Management	Subject:	Code Green
Effective Date:	April 2022	Policy #:	EMP-08
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to adhere to this policy when an evacuation is initiated. Management has the responsibility to provide leadership and training in regard to this policy. Staff must read and understand their roles as established in the Code Green policy. Tenants, contractors, volunteers and visitors have the responsibility to respond to all alarms and directions given by staff and how to raise an alarm.

Purpose

To outline the process of evacuating areas of Grandview Lodge when an emergency situation necessitates removal of residents, staff, and others present within the facility. This policy outlines the responsibilities of staff, tenants, visitors, volunteers and residents during a Code Green evacuation. Staff must be aware of the correct procedure in the event of an external bomb or extortion threat.

Management team to refer to “MOHLTC Evacuation Policy” in the Fire Section of the Policy and Procedure file, for the Ministry Evacuation Placement Process.

Definitions

Code Green - A broadcasted message of an imminent need for evacuation.

Control Centre – The gathering room becomes the control centre during emergency situations or evacuations. The registered staff and management team will control the situation from this location.

Gathering Room – See appendix.

Evacuation Type

Partial

- When a disaster is contained to one Resident Home Area, not endangering the adjoining Resident Home Area

- All Residents in contained disaster area must be evacuated beyond next set of fire doors
- Evacuees are relocated to a safe designated area within the wing
- Holding stations (i.e. kitchenettes, dining rooms, lounges) will be determined at the time of the disaster.

Total

- When the entire wing must be evacuated, all Residents, staff and visitors must leave the wing
- Relocation of one full wing to the unaffected wing
- Evacuation carry methods will be utilized as needed.

Any emergency situation could result in -- partial/total evacuation.

Communication of Evacuation

Order for evacuation may be made by:

- R.N. in charge
- Manager, Emergency Services / designate
- Facility Operations Supervisor
- DON
- Program Supervisor/Staff Development Coordinator
- Administrator

Order for an evacuation:

- WHEN full evacuation is necessary R.N./R.P.N. #1 will announce:
“ **CODE GREEN**” X 3
- THIS will begin the fan out system, PAGE #1

** See Grandview Lodge Layout for evacuation route **

Evacuation Warning System

1. Decision for Evacuation Made
2. Overhead Page
Person in Charge will press the overhead page button then “00” and speak into the telephone receiver.
3. CODE GREEN x3
 - a. North Wing
 - b. South Wing
 - c. Hill View Resident Home Area (RHA)
 - d. Bridge View RHA
 - e. Marsh View RHA
 - f. Creekview RHA
 - g. Full Facility

Contacting Key Staff and Outside Resources

Fan out system will begin when decision for evacuation begins – “fan out” information is kept at each nurse’s station on a clipboard.

R.N./R.P.N./Designate must ensure completion of the fan out system.
Check list attached to clip board should be utilized.

Evacuation Methods and Priorities

- According to physical condition of the Resident (i.e. ambulatory first).
- All carrying methods will be utilized as needed.
- Begin in the fire/disaster area ⇒ beyond the next set of fire doors⇒ to adjoining Resident Home Area ⇒ to unaffected wing
- When evacuation code is given, Gathering Room becomes “central control area”
- Instructions will be given by the R.P.N.
- Exit location for loading of evacuees will be determined by the R.N. in charge at the time

Evacuation Relocation Sites

- 1st Site:** Unaffected Wing
- 2nd Site:** Grandview Lodge Auditorium
- 3rd Site:** Lifespan Centre

275 Ramsey Drive
Dunnville, ON N1A 2A8

4th Site: Lowbanks Community Centre
2633 North Shore Drive,
Lowbanks ON N0A1K0

5th Site: Canbro Community Centre
7 Darling Street
Canboro, ON N0A 1C0

6th Site: Norview Lodge, Simcoe
44 Rob Blake Way
Simcoe, ON N3Y 4L8

Note: Residents should be taken outside only if this is necessary to prevent crossing the fire area.

Transportation Methods

- Grandview Lodge Van
- Use Spectrum Patient Services, 1-866-527-9191
- First Student, 905-957-2927
- Use staff vehicle if necessary.
- Contracted transportation methods – Organized by the Haldimand County E.O.C. during emergencies

Evacuation to Offsite Location – Staff Responsibilities

R.N./R.P.N. DUTY #1

- Prepare vital records and medication for transportation-mars, Resident drugs, allergy and diabetic lists, medication cards.
- Ensure Resident is wearing I.D. bracelet or it is attached to their clinical record.

R.N./R.P.N. DUTY #2

- Ensure all Residents are removed from area.
- Ensure transportation of all Residents to relocation site.
- Ensure all Residents have been accounted for.
- Ensure safety needs of Residents at relocation site.

HCAS / PSWs

- Begin complete evacuation of Residents upon notification.
- Team up with non-nursing personnel so that direction/assistance will be faster

- and safer.
- Assist all Residents to unaffected wing or relocation site (as determined by the Charge Nurse)
- Remain with Residents for comfort, security and safety needs after complete evacuation.

Dietary Staff

- Prepare all food that can be used and ready for transportation to evacuation site.
- Prepare disposable dishes/cutlery for transportation.
- All dietary staff not engaged in supply/transportation will assist nursing staff with the evacuation of Residents.

Housekeeping/Laundry Staff

- Prepare all necessary supplies for evacuation site.
- Prepare for transportation of supplies.
- Staff not engaged in supply/transportation will assist nursing staff with the evacuation of Residents.

Office Staff

- Staff not engaged in preparation of vital records will begin contacting families.

Maintenance

- All maintenance staff will report to the disaster area and assist with the situation.
- Driving of Grandview Lodge van, if required.

Additional Staff/Volunteer

- Staff arriving on site from outside will receive their assignments in the Gathering Room (if available).
- All other extra personnel / volunteers will assist with Resident evacuation under the direction of the Charge Nurse.
- Activation staff to assist with evacuation and remain with Residents at staging site, as required. Activation staff can be called upon to accompany Residents during transporting, and will support Residents at the relocation site.

Prepare for Impending Evacuation

1. RN calls management team
2. RN page registered staff to attend at gathering room
3. RN will inform the leadership team of potential for evacuation and will refer to the emergency manual and assign tasks as identified in the manual
4. Determine potential staging sites for evacuation.

Initiating the Evacuation

1. Page management and registered staff back to gathering room.
2. Inform staff to implement plan for evacuation to staging site.
3. Initiate fan out list – assigned to RPN #1(see emergency clipboard)

4. Give order to evacuate the affected areas to the staging site.

Critical Supply List – Evacuation to Offsite Location

R.N./R.P.N. Supply List

1. **Medications/Supplies:**

- a. Drug cart drawers/medication.
- b. Medication cups, drinking cups.
- c. Emergency drugs, narcotics, antibiotics, remain with R.N./R.P.N. until suitable storage available.

2. **Distribution of Prescription Meds:**

- a. Given out as long as they last.
- b. Medication sharing may be necessary.
- c. Documentation of drugs used.
- d. Ensure contracted pharmacy service are notified - replacement available in 24 hours.
- e. Local pharmacies will be used if needed.

3. **Essential Supplies for Transfer:**

- a. First aid boxes.
- b. Residents clothing, personal items, medical aides, etc. where possible.

4. **Essential Material at Relocation Area:**

- a. All available mattresses
- b. Bedding
- c. Towels/facecloths
- d. Briefs
- e. Brief pads
- f. Urinals/bedpan
- g. Stethoscope and B.P. apparatus
- h. Soap
- i. Kleenex
- j. Toilet paper

NOTE: *The Municipal Emergency Control Group will provide supplies as they obtain them.*

Post Evacuation Processes

Temporary Discharge

- Residents will be discharged to care of families/friends, if possible.
- Coordination of this activity will be done by D.O.N. under the direction of the Medical Director. Documentation of relocation is kept by the office/D.O.N.

Feeding

- Feeding of Residents will be coordinated by the dietary supervisor/D.O.N./designate.
- Ongoing food, water sources arranged through M.E.C.G.
- Menus will be adopted as needed, if possible.
- Local restaurants may be used as a resource.
- All available staff and volunteers will assist in preparation, feeding and clean-up operation as requested.

Attachment A: Critical Supplies List

Critical Supplies List

Nursing

- Laptop/Computer kept in the front office closet (after hours)
- Wrist Bands - Kept in Bridgeview
- Chart Cart
- Med Carts
- Treatment Carts
- Stethoscopes
- Portable oxygen tanks

Housekeeping

- Briefs
- Paper products-toilet paper, paper towels
- Disinfectant/Cleaner
- Hand sanitizer
- Mops, brooms, buckets

Laundry

- Towels
- Blankets
- Pillows
- Sheets

Dietary

- Emergency Menu and list of food posted in main kitchen

Front Office

- Laptop/Computer

NOTE: *This list of supplies that are important for each department to take during an evacuation, if safe to do so*

Code Black

Department:	Emergency Management	Subject:	Code Black
Effective Date:	April 2022	Policy #:	EMP-09
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to adhere to this policy when a bomb threat is communicated to them. Management has the responsibility to provide leadership and training in regard to this policy. Staff must read and understand their roles as established in the Code Black policy. Tenants, contractors, volunteers and visitors have the responsibility to respond to all alarms and directions given by staff and how to raise an alarm.

Purpose

To outline actions to be taken when an internal hazardous chemical spill occurs. This policy and procedure outlines responsibilities for staff, tenants, visitors, volunteers and residents during a Code Brown emergency. Staff must be aware of the correct procedure in the event of an external bomb or extortion threat.

Definitions

Code Black – A broadcasted message or warning indicating that a bomb threat has been made, or a suspicious package has been identified.

Code Black All Clear – An announcement which indicates to all staff, tenants, contractors, volunteers and visitors that the emergency situation has ended; normal services can resume as planned.

Extortion – The practice of obtaining something through force or threats.

Gathering Room – See appendix.

Phone Threat - Staff Responsibilities

Individual Receiving Threat

1. Push telephone speaker button - to alert other staff for assistance.
2. Using the *Attachment A: Telephone Bomb Threats Information Sheet*, attempt to record all relevant details about the threat – this should be located on the disaster clipboard.
3. Do not disconnect phone line.
4. Notify a registered staff (preferably R.N.) on duty about the bomb threat.

Charge Nurse Or Designate

1. If the R.N./R.P.N is the one that received the phone call:
 - a. Perform the duties established under the *individual receiving threat* section.
 - b. Complete section 2 responsibilities.
2. If the R.N./R.P.N. receives notice of the threat from another staff member:
 - a. Immediately make an announcement over page:
“Code Black” (3 times). Staff report to Gathering Room. Due to conditions beyond our control, we request that all visitors leave the building immediately.”
 - b. Dial 911 - notify police of the “bomb threat.”
 - c. Assign two staff (if available) to act as a team - to complete the ‘*Search Procedure Form*’ for possible multiple sites, including full external search.
 - d. Staff will conduct a **visual search only** of their area of responsibility (‘Missing Resident Checklist form’).
 - e. All staff should be observing for strangers in the Home or suspicious behaviour.

NOTE: *Communication with the media will be handled by the Administrator in consultation with the police.*

Search Procedure – Bomb Threat

Key Concepts during a Search

- Staff will conduct the **visual search**, as they are familiar with the building and the usual objects kept in the building. If bomb/suspected bomb is found, police will be responsible. **DO NOT TOUCH IT.**
- Look for unusual object in unusual place, i.e. kit bag/duffle bag-behind storage areas, stairwell.
- Maintenance Staff will be responsible for inspection of maintenance shop, boiler room; search should be concentrated on power units, boilers, etc.
- Outside of building; parking lot should be searched.

Conducting the Search

1. Begin at perimeter of room, walk clockwise around the room until the entire area has been covered.
2. If caller hinted where bomb might be, that area should be searched first and thoroughly.
3. The Charge Nurse or designate will issue out the search procedure form from Gathering Room.
4. Each sheet, when completed will be given to RN / Supervisor of each area who will:
 - a. ensure all areas have been searched
 - b. sign their names where appropriate
 - c. send the signed forms to control centre (area RPNs will remain at their stations)
5. The RN at the control centre (Gathering Room) will ensure that all rooms have been searched and all units accounted for.
6. Staff will be notified by the page if a second search is necessary.

Discovering a Suspicious Package

1. **DO NOT TOUCH THE PACKAGE**
2. The finder will contact the main control to where the object is → the control centre will notify proper police authorities.

While awaiting the Emergency Task Force, the control centre will:

1. Ensure no person goes near or attempts to move the object.
2. Try to establish ownership (legitimate package may have been left at the spot).
3. Establish the most direct route to the object.
4. Determine a staff member to meet Emergency Task Force.
5. Continue visual search procedure until all areas have reported to control centre (may be more than one).

Evacuating the Building

Police will provide information to RN in charge/designate if full evacuation necessary.

- R.N. will announce “**Code Black; the area**” x 3 for location information.
- The Residents should be evacuated away from immediate vicinity of bomb⇒to a minimum of 300 feet from bomb route.
- Which route to use for removal of bomb.

NOTE: “ALL CLEAR” will be given by Administrator/designate after consultation with police over the intercom/page.

Attachment A: Telephone Bomb Threat Information Sheet

Code Black Bomb Threat Information Sheet

Time call received: _____ Date: _____

Message in exact words _____

Caller's Name: _____

Time Bomb is to Explode: _____

Where Bomb is located: _____

What does it look like: _____

Type of Bomb: _____

Why it was placed at the Lodge: _____

Sex of Caller: _____

Accent of Caller: _____

Background Noises: _____

Was Voice Familiar: _____

Time Caller Hung-up: _____

Time Police were Notified: _____

Other Information: _____

Signature of Receiver: _____ Date: _____

Attachment B: Emergency Contacts During a Bomb Threat.

Who to notify - External

Name	Number
Police	911
Facility Operations Supervisor	289-209-0279
Administrator	905-774-7547, 2224 289-209-8523
Director of Nursing	905-318-5932, 2234
Program Supervisor/Staff Development	905-517-1967
Food Services Supervisor	905-774-7547, 2228

Who to notify - Internal

Name	Assignment	Location
All Staff On Duty	R.N./R.P.N. Duty # 1	Page "Code Black" x 3

Attachment C: Search Procedure Form

Search Procedure Form
Internal/External

PURPOSE: _____

DATE: _____

PERSON IN CHARGE: _____

BOMB THREAT **[CODE BLACK 3 TIMES]**

STAFF TO REPORT TO
GATHERING ROOM

MISSING PERSON **[CODE YELLOW 3 TIMES]**

STAFF TO REPORT TO
GATHERING ROOM

EVACUATION **[CODE GREEN 3 TIMES]**

Attachment D: External Search Procedure Form

External Ground Search Bomb Search/Missing Resident Checklist

N.B. Check in all corners around building. Check under all bushes, etc. Please refer to Grounds layout.

TIME COMMENCED: _____

TIME FINISHED: _____

- | | |
|----------------|---------------------------------|
| 1. SW (Pink) | South West Quadrant of property |
| 2. NW (Yellow) | North West Quadrant of property |
| 3. NE (Blue) | North East Quadrant of property |
| 4. SE (Green) | South East Quadrant of property |

NOTE: Grandview Lodge vehicles should be viewed if conducting a “Bomb Threat” search, i.e. underside of vehicles.
Refer to diagram on following page.

Staff Signature: _____

RN/ Supervisor Signature:

Attachment E: External Search Graphic: See Appendix

Code Yellow

Department:	Emergency Management	Subject:	Code Yellow
Effective Date:	November 2007	Policy #:	EMP-10
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to ensure residents are safe and secure within the home. In the event that a resident cannot be accounted for at Grandview Lodge, a staged search of the home and the property must be implemented to locate the missing resident as quickly as possible and ensure the safe return of the resident to their Home area. Any resident who cannot be accounted for on a Home area, for any reason and not found where expected to be, should be considered missing and Code Yellow be initiated.

Purpose

This policy and procedure outline the process for initiating and conducting a search when a resident is deemed as missing. It is the responsibility of staff, visitors and volunteers to respond appropriately in the event of a Code Yellow emergency.

Definitions

Code Yellow – The emergency code used to communicate that a resident is missing and a to initiate a comprehensive search of the home by designated staff members.

Gathering Room – See appendix.

Search Coordinator – A role appointed to an individual (Charge Nurse) to coordinate the Code Yellow search response.

Suspected Missing Resident

When a resident cannot be located, the registered staff member working the resident's home area must:

1. Check resident list, sign out sheets, Interdisciplinary Notes and 24-hour work sheet for all residents on permissible leave.
2. Check the panel in the Nursing Station for unauthorized exits.
3. Contact the previous registered staff in the event the resident's leave was not noted.
4. Contact the resident's family to ensure they did not take the resident without informing staff.

If the resident's location remains in doubt, the Charge Nurse must be informed.

Initiation of Search

When a resident is suspected as missing and an immediate search of the area has been performed, the charge nurse will initiate a home-wide search by calling *Code Yellow*, followed by the resident name, three times over the paging system.

Conducting a Facility Search

1. The Charge Nurse takes on the role of the Search Coordinator once a Code Yellow has been initiated.
2. The Search Coordinator must report to the gathering room to organize a search of the building.
3. All available staff must report to the gathering room for instruction by the Search Coordinator.
4. The Search Coordinator will locate and distribute a picture of the resident to staff involved in the search.
5. The Search Coordinator will initial next to each area on the *Missing Resident Checklist* once it has been checked.
6. If the resident remains unlocated following the internal search, the Search Coordinator will send staff to search the external grounds using the *External Ground Search Checklist*.

Post Search Notice – Resident Not Located

If the resident cannot be located, the Charge Nurse must notify:

1. The family
2. The Provincial Police (Provide a description of the resident, including name, age, clothing and last known location)
3. The Director of Nursing and the Administrator
4. Ministry of Health and Long-Term Care

NOTE: "ALL CLEAR" will be given by Administrator/designate after consultation with police over the intercom/page.

Attachment A: Missing Resident Checklist

Missing Resident Checklist

Facility Divided: 12 Areas

South Blocks

- 1 Block A
- 2 Block B
- 3 Block C
- 4 Block D
- 5 Block E

Centre Core

- 6 Block X
- 7 Block F

North Blocks

- 8 Block H
- 9 Block J
- 10 Block G
- 11 Block K
- 12 Block L

NOTE: Check list forms are located in the filing cabinet of each nursing station.

External Search of Grounds
Refer to map for division of areas.

Attachment B: Search Procedure Form

Search Procedure Form
Internal/External

PURPOSE: _____

DATE: _____

PERSON IN CHARGE: _____

- | | | |
|-----------------------|--|--------------------------|
| BOMB THREAT | [CODE BLACK 3 TIMES]
STAFF TO REPORT TO
GATHERING ROOM | <input type="checkbox"/> |
| MISSING PERSON | [CODE YELLOW 3 TIMES]
STAFF TO REPORT TO
GATHERING ROOM | <input type="checkbox"/> |
| EVACUATION | [CODE GREEN 3 TIMES] | <input type="checkbox"/> |

Attachment C: External Search Procedure Form

External Ground Search Bomb Search/Missing Resident Checklist

N.B. Check in all corners around building. Check under all bushes, etc. Please refer to Grounds layout.

TIME COMMENCED: _____

TIME FINISHED: _____

- | | |
|----------------|---------------------------------|
| 1. SW (Pink) | South West Quadrant of property |
| 2. NW (Yellow) | North West Quadrant of property |
| 3. NE (Blue) | North East Quadrant of property |
| 4. SE (Green) | South East Quadrant of property |

NOTE: Grandview Lodge vehicles should be viewed if conducting a “Bomb Threat” search, i.e. underside of vehicles.
Refer to diagram on following page.

Staff Signature: _____

RN/ Supervisor Signature:

Attachment D: External Search Graphic SEE APPENDIX

Code Brown

Department:	Emergency Management	Subject:	Code Brown
Effective Date:	April 2022	Policy #:	EMP-11
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to adhere to this policy when a chemical spill is communicated to them. Management has the responsibility to provide leadership and training in regard to this policy. Staff must read and understand their roles as established in the Code Black policy. Tenants, contractors, volunteers and visitors have the responsibility to respond to all alarms and directions given by staff and how to raise an alarm.

Purpose

To outline actions to be taken when an internal hazardous chemical spill occurs. This policy and procedure outlines responsibilities for staff, tenants, visitors, volunteers and residents during a Code Brown emergency. Staff must be aware of the correct procedure in the event of an external bomb or extortion threat.

Definitions

Code Brown - A broadcasted message or warning indicating there has been a chemical spill somewhere in or around the Grandview Lodge facility.

Code Brown All Clear - An announcement which indicates to all staff, tenants, contractors, volunteers and visitors that the emergency situation has ended; normal services can resume as planned.

Gathering Room – See appendix.

Dealing with Spills, Toxic Fumes and Nuclear Accidents

In the event of such a disaster, immediate reaction would be directed by the Fire Department as they would be the best equipped to determine the type of chemical.

- FIRE DEPT – 911
- CANFLOW ENVIRONMENTAL SERVICES – 519 882-0231
- POISON CONTROL – 1 800 268-9017

Recognizing Natural Gas Leaks

Signs of a Natural Gas Leak:

1. Sight – Damaged connections to natural gas appliances
2. Sound – Hissing or whistling
3. Smell – A distinctive **rotten egg** or sulphur-like odour

Staff Responsibilities - Internal Natural Gas Leak

If Gas Leak or Fumes are Detected:

1. DO NOT:
 - a. Pull alarm
 - b. Touch light switches
 - c. Smoke
2. Immediate response:
 - a. Open all doors and windows in the area
 - b. Notify the Charge Nurse to assess the area

Charge Nurse or Designate

1. Assess the area – determine the source of the leak, if possible
2. Initiate “**CODE BROWN**” response [Evacuate the area] if appropriate
3. Implement fan-out system
4. **Call Fire Department 911**
5. Call Union Gas 1 800 265-6160
6. Call Maintenance

NOTE: *Contacting other emergency services, maintenance or union gas can be assigned to another staff member.*

Maintenance Staff

1. Isolate all required equipment or potential leak if safe to do so.
2. Advise emergency responders of leak and area.
3. Contact appropriate service provider for immediate repair.

Staff Responsibilities - External Natural Gas Leak

If Gas Leak or Fumes are Detected

1. DO NOT:
 - a. Pull alarm
 - b. Touch light switches
 - c. Smoke
2. Immediate response:
 - a. Open all doors and windows in the area
 - b. Notify the Charge Nurse to assess the area

Charge Nurse or Designate

1. Assess the area - determine the source of the leak, if possible
2. Initiate "**CODE BROWN**" response [Evacuate the area] if appropriate
3. Implement fan-out system
4. **Call Fire Department 911**
5. Call Union Gas 1 800 265-6160
6. Call Maintenance

NOTE: *Contacting other emergency services, maintenance or union gas can be assigned to another staff member.*

Maintenance Staff

1. Isolate all required equipment or potential leak if safe to do so.
2. If the leak is determined to be outside manually shut off all HVAC equipment
3. Advise emergency responders of leak and area.
4. Contact appropriate service provider for immediate repair.

R.P.N. Directed to Gathering Room

1. Go to Communication Room and manually shut off Mag Lock System

Evacuating the Home

1. The Charge Nurse should work with the Administrator or designate to determine if an evacuation is required.
2. If evacuation is required, follow evacuation procedures- "**CODE GREEN**" **3 times.**
3. If evacuation is not possible, certain precautions should be taken, i.e.
 - a. seal all doors and windows if spill or fumes are external
 - b. prohibit the use of food and water until it has been tested
 - c. no smoking
 - d. shutdown air intake system.

Loss of Essential Service

Department:	Emergency Management	Subject:	Loss of Essential Service
Effective Date:	April 2022	Policy #:	EMP-12
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to adhere to this policy when there is a loss of essential services communicated to them. Management has the responsibility to provide leadership and training in regard to this policy. Staff must read and understand their roles as established during any loss of essential service or weather related warnings as identified in this policy. This policy is to ensure that infrastructure failures are addressed promptly and effectively to minimize impact to resident care.

Purpose

To outline actions to be taken when there is a loss of “essential services” to Grandview Lodge. This policy outlines the responsibilities of staff, tenants, visitors, volunteers and residents during a loss of essential service related emergency.

Definitions

Essential Services - In a broad sense, essential services are those “daily services essential to preserving life, health, safety and basic day to day functioning.

Disruptions of Natural Gas

Implications of Disrupted Service

1. The gas fired boilers will not operate.
2. There will be a loss of hot water for space heating and domestic hot water.

Maintenance Responsibilities

1. Contact the service provider to determine the length of the expected disruption.
2. Communicate disruption length to the Administrator, or their designate.

If gas company officials advise that the interruption of service will be in excess of eight hours, refer to the Grandview Lodge contingency plan for loss of natural gas only. The Administrator or designate will determine if a Code Green evacuation is necessary depending on the length and significance of the disruption.

Disruptions of Sewage Disposal

In the event of a severe disruption of sewage disposal at the Home, temporary emergency facilities will be provided by the Haldimand County Public Works Department.

Business Hours Phone #: 905 318-5962 x 6503

Disruptions of Hydro

In the event of a serious disruption in Hydro power to the Home, our Auxiliary power (stand-by generator) will supply necessary power to the Home until normal source of Hydro is restored. Grandview Lodge is equipped with a stand-by generator that will provide electrical power to critical points within the home during a power failure or outage.

Designated points of power are identified by colour **coded receptacles**. These will provide back-up power to any equipment deemed essential.

Generator tests will be run monthly and serviced by a qualified contractor to perform 6 month and Yearly preventative inspections and testing.

Candles are **NOT** permitted in the Home during a power failure or loss of service.

When electrical power is interrupted, emergency lighting will immediately turn on in the hallways, corridors, stairwell areas and in other key locations.

Possible Power Failures

- Municipal or infrastructure problem
- Weather related events
- Internal failure (could only affect certain home areas)

Loss of Power with Generator Back-Up

Communication Equipment

- a. When on back-up generator, electrical power will power identified essential equipment including IT equipment and phones.
- b. Phones are VOIP and run off of the internet.
- c. Grandview Lodge has a designated landline in case of internet and phone disruption.
- d. When phones and computers go down this will send a critical alarm to IT, and they will be dispatched immediately. Computers throughout the home are plugged into battery backup devices to sustain short term needs. Offices and office computers are not deemed essential.

R.N. or Designate Responsibilities

- a. Call on-call Maintenance technician if not on duty to ensure generator is fully functional and fuel levels are appropriate for the potential hydro outage duration.
- b. Generator contains enough fuel for approx. 72 hour outage. If the duration looks to be extended longer than 48 hours maintenance tech will use fuel agreement emergency contact for re-fuelling purposes. This agreement is maintained by Haldimand County.
- c. Ensure all essential medical equipment is plugged into red receptacles.
- d. Assign staff to perform resident check ins.
- e. Place sign at main entrance to notify visitors and families of the temporary outage.
- f. Page all clear upon restoration of power.
- g. Review with maintenance staff that all equipment is back online and fully functional.

Loss of Power without Generator Back-Up (Generator Failure)

R.N. or Designate Responsibilities:

- a. Call on-call Maintenance technician if not on duty to troubleshoot generator issue.

- b. Notify facilities supervisor of the generator failure.
- c. Contact the administrator with details of the emergency.
- d. If the power is expected to be out for a significant duration call in additional staff, notify the dietary supervisor to allow for menu changes.
- e. Assign staff to review all essential equipment and provide assessment criteria for emergent residents i.e.: air surfaces (remove any residents on collapsed air surfaces).
- f. Assign staff to ensure any resident on oxygen is now on portable oxygen machines and notify service provider that more portable oxygen machines are required.
- g. Assign staff to perform additional/more frequent check-ins.
- h. Initiate hot weather contingency depending on time of year.
- i. Commence emergency fan out list if required.
- j. Report outage to the ministry of health and long term care if the outage is over 3 hours.
- k. Upon restoration of power ensure all equipment is fully functional and staff check in with residents.

Maintenance Staff Responsibilities

- a. If the generator failed to initiate, call service provider for immediate generator repair.
- b. If required, call service provider to provide portable generator to provide back-up power to the Home.
- c. Upon restoration of power, survey all equipment and ensure full functionality including HVAC equipment

Loss of Cooling/Air Conditioning

In the event the Home loses individual air conditioning units, use common spaces that are air conditioned for temporary heat relief. If there is a power failure that results in loss of all air handling units refer to the heat related alert and illness nursing policy for procedure.

Disruption of Water Service

In the event of disruption of water service to the home:

1. Maintenance staff to be called immediately, if not on duty.
2. Public Works Department, 905 318-5962 x 6503 to be called to assess the situation.
3. Ensure agreement with company (Neptune Water Services) that supplies drinking water to provide minimum of 1 litre/person/day for 3 days (all Residents and staff, 300 litres/day). Agreement contact 905-765-4797

4. Phone the water supplier as prearranged by the Home with Doug Shirton Service, 24 hour service (3000 gallon tank) (General Use). Phone Number: 774-7762.

NOTE: *There will be no water pressure to the home which will result in faucets and toilets becoming unusable.*

The fire department will be contacted to provide emergency water from the fire hydrants if the above service is not available.

Code White

Department:	Emergency Management	Subject:	Code White
Effective Date:	April 2022	Policy #:	EMP-13
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge is responsible for the safety of all residents, staff and visitors, and will ensure a safe and secure environment. Early recognition and intervention in potentially violent situations is best practice in crisis prevention; this includes making safe attempts to de-escalate the situation and regain control to minimize risk of injury to residents, staff, volunteers, and visitors in the event of rapidly escalating violence. The Home will activate a person centred response from staff as outlined in this policy.

Purpose

In the event that a person is demonstrating aggressive/responsive behaviour and becomes unmanageable to the point where the safety of the resident and/or others is at risk, this procedure will outline the appropriate staff responses.

Definition

Code White: the term used to alert staff when a violent or potentially violent patient who is unmanageable by any other means presents a danger to self or to others.

Code White Response Team: the group of individuals that respond to a Code White in the Home. Includes: Director of Nursing, ALL Registered Staff and Maintenance/Security Staff.

Violent Behaviour: Acts of violence such as but not limited to choking, punching, hitting, pushing, biting, spitting, pinching, groping, kicking, shouting, swearing, verbal threats, using objects as a weapon, sexual assault, shaking fists, and threatening to assault.

Initiation of Code White

1. First responder will page "**Code White**" using the overhead paging system as well as the phone page system, with location three times (3x).
2. If the Code White is initiated by the use of a panic button which is located in all offices and nurses stations, the charge RN will be notified by a call from the

monitoring company. They will then overhead page and follow the procedures.

NOTE: *Panic buttons are located in all offices and nurses stations under desks in the same locations and will be activated at the first sign aggressive behaviours. When the panic button has been activated, a call goes directly to the monitoring company who then calls police as well as the charge nurse at GVL, at ext. 2272. To activate the system, the button will need to be pushed and held for 3 seconds.*

Staff Responsibilities – Code White

Charge Nurse (Nurse duty #2)

1. Immediate Actions:

- a. Respond to the area identified
- b. Assess the situation
- c. Attempt to de-escalate the situation
- d. At any time that the Charge Nurse feels the situation poses a risk to anyone involved, 911 is to be called. Ask for police.
- e. Assign a staff member to meet Police at the front door
- f. Control crowd - dismiss staff that are not required.
- g. Maintain a safe distance and monitor the situation until the Police arrive.
- h. Remove residents in the area, if appropriate

2. Post Incident:

- a. If an employee is injured, an Employee Incident Form must be completed.
- b. If a resident is involved and has experienced negative outcomes, a critical incident must be filed with the Ministry of Health & LTC
- c. If a resident is involved, chart all information in the clinical record including incident details, any injuries/follow up required, preventative measures, outcomes, etc.
- d. If a staff or visitor is critically injured, a report to the Ministry of Labour must be completed, in conjunction with Management staff.

NOTE: *Charge Nurse can delegate the above duties, as required.*

DON, Registered Staff and Maintenance Staff

1. Respond to the area.
2. Assist by taking direction for duties from the Charge Nurse.
3. Participate in the debriefing session.

Individual Receiving Aggression

1. This employee will then stand by to help until assistance arrives.
2. The individual receiving the aggression is to remain, if possible, and answer any questions that the Charge Nurse may have regarding the incident, unless the individual's presence is a cause of more agitation.

3. Participates in debriefing.

All Other Staff

1. Continue with regular duties unless otherwise requested.

Administration/Occupational Health & Safety Committee

1. Review incidents and make recommendations

Code Blue

Department:	Emergency Management	Subject:	Code Blue
Effective Date:	April 2022	Policy #:	EMP-14
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge will be responsive to any medical emergency that occurs within the facility. Leadership, staff, contractors and volunteers are responsible for responding to medical emergencies in an appropriate manner based on the situation and resident wishes.

Purpose

To outline actions to be taken when a situation requiring immediate medical or first aid treatment occurs due to cardiac or respiratory arrest. The policy is to outline the responsibilities of Code Blue responders.

Definitions

Code Blue - Used to alert the Code Blue responder(s) to an area where a person has had a cardiac/respiratory arrest and is found not breathing, is unresponsive and/or has no pulse

Advanced Directives - The wishes and decisions outlined in a written statement in the event a serious injury or illness prevents an individual from making such future decisions

Advanced Directives

All Residents of Grandview Lodge will have their wishes identified through the advanced directive procedure upon admission to the lodge.

The following identifies the protocol for each Residents advanced directive:

1. The Resident clinical binder has:
 - a. Coloured blue dot on the sleeve side if CPR is to be performed
 - b. No CPR to be performed if no blue dot.
2. Advance directive form in front of chart – clearly indicates CPR or no CPR. If no direction for form present, start CPR
3. **Any other persons** within the facility who is discovered not breathing,

unresponsive, and/or has no pulse CPR is to be initiated immediately.

Micro shields: located in each nurses station clipped to the Emergency fan out clipboard.

NOTE: *During any emergency situation in which a Fire Fighter has been called to the Lodge, they will assist Registered Staff with CPR on any Resident who is unconscious, unresponsive and has no pulse unless otherwise directed by Registered Staff who have checked the Residents Advanced Directive. Complete Policy & Procedure is available in the Nurses Policy & Procedure manual.*

Staff Responsibilities

First Staff Member on Scene

1. Overhead page "Code Blue" followed by the location, three (3) times.
2. Return to the individual and await direction from registered staff.

NOTE: *The overhead page can be delegated to another staff member to allow for prompt return to the ill individual.*

First Registered Staff On-Scene

1. Take charge and assess.
2. Call or instruct a staff member to check advanced directive immediately.
3. If no DNR order present, start CPR.

Second Registered Staff On-Scene

1. If required check clinical binder for blue dot.
2. Return to scene and reconfirm Residents advanced directive.
3. If CPR is initiated (per Residents' directive) call 911 request ambulance.
4. Return to scene and assist with CPR.

Delegated PSW (only required when R.N./R.P.N staff below 3)

1. Report to the front door.
2. Remain at the doorway and wait for ambulance.
3. Take ambulance crew to the scene.

All Other Staff

1. Continue with regular duties unless otherwise directed.

NOTE: *Once ambulance staff have arrived they will take responsibility for carrying out CPR and transferring the individual to the hospital.*

Registered staff will complete necessary paperwork and give a copy of the Advanced Directive to the ambulance staff prior to them leaving the lodge.

Staff Availability - Dependant Responses

Four (4) Registered Staff Available

- Two (2) registered staff initiates CPR
- One (1) registered staff goes to check advanced directives
- One (1) registered staff go to front door to meet paramedics

Two (2) Registered Staff Available

- One (1) registered staff initiates CPR
- One (1) registered staff checks for advanced directives
- A PSW is delegated to the front door to meet paramedics

Post Incident Notice

The Charge Nurse or designate will notify the resident's family, as directed in the resident's file.

Hostage Taking

Department:	Emergency Management	Subject:	Hostage Taking
Effective Date:	April 2022	Policy #:	EMP-15
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge will be prepared for all types of emergency situations, even those that are considered as unlikely. In the event of a hostage situation, leadership, staff, students, volunteers and visitors should do everything possible to avoid aggravating the situation. Grandview Lodge personnel are not expected to take the role of police, during these situations.

Purpose

To provide basic guidance on how staff should respond in a emergency hostage taking situation.

Staff Response

General Rules

1. Clear and contain area.
2. Notify police immediately 911. They will take control immediately upon arrival.
3. Talk calmly to the hostage taker.
4. Stall for time -- never say "NO". Comply with wishes, if available.
5. Do not give food or drink that have been altered to hostage taker.
6. If possible, evacuate all Residents from the area. If not possible, direct staff to contain Residents in rooms, closing their doors, and moving away from door.

USE COMMON SENSE/GOOD JUDGEMENT

Guidelines for the Hostage

1. Remain calm and relaxed.
2. Avoid aggressive behaviour and body language.
3. Remain alert for opportunities and/or escape.
4. Avoid food or drink provided by hostage taker or negotiators.
5. Stay clear of windows or doors.

NOTE: *Ensure all doors are locked on rounds.*

Weather Related Emergencies

Department:	Emergency Management	Subject:	Weather Related Emergencies
Effective Date:	April 2022	Policy #:	EMP-16
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

It is the responsibility of leadership, staff, tenants, contractors, volunteers and visitors to respond to expected and unexpected extreme weather events, in a prompt and appropriate manner.

Purpose

To provide basic guidance on the appropriate response to high winds or tornados that may affect the home.

Definitions

GRCA – Grand River Conservation Authority

Tornado Warning – Issued when one or more tornadoes are occurring in the area specified or rotation is detected on weather radar. These warnings are issued by Environment Canada.

Weather Advisory - Weather advisories can be used to cover a wide array of deteriorating weather conditions. These bulletins are sometimes used to describe weather events that can be cause for public concern.

Tornado/High Winds

Signs of an Possible Tornado

- Severe thunderstorms, with frequent thunder and lightning
- An extremely dark sky, sometimes highlighted by green or yellow clouds
- A rumbling sound or a whistling sound.
- A funnel cloud at the rear base of a thundercloud, often behind a curtain of heavy rain or hail.

NOTE: *Weather events are often short lived and impact individual communities differently and can result in potential flooding.*

Notice of a Severe Weather Event

- Environment Canada will issue an extreme weather event warning when the conditions that may produce a tornado, exist.

Procedure

1. Do not alarm Residents.
2. Review Haldimand County Weather related email links for weather advisory. Updates will be emailed and updates posted to the Haldimand County Website by the Haldimand County Emergency Preparedness Coordinator
3. In the absence of notification from Haldimand County, tune to local radio station for weather advisory. Staff can also reference Environment Canada's website for more information.
4. Call In Maintenance On Call Person and Notify Facilities Supervisor.
5. Survey outside perimeter area and secure outside objects (chairs, etc).
6. Close all windows.
7. If tornado is in vicinity - move all Residents to the nearest interior corridor away from windows, closing doors. Remain calm and reassuring.
8. Avoid gathering in the auditorium.
9. When danger has passed, R.N. duty # 2 advises "**ALL CLEAR**" via page.

Perimeter/External Flooding

Grandview Lodge Location

- Home is not considered a high risk area of flooding by geographical location in relation to the Grand River per the GRCA.
- The flooding threat level will be updated by the GRCA.
- Haldimand County will update the threat to residents and staff through email and community releases.
- Information on flooding can be found on the Grand River Conservation Authority website.

Registered Staff or Designate Responsibilities

1. Call Maintenance on Call and Facilities Supervisor
2. Contact Administrator to assist with determining if a Code Green is required
3. Begin Fan Out process if required
4. Ensure residents are calm and reassured

NOTE: *Grandview Lodge will initiate a partial or total evacuation, Code Green, based on the warnings and threat levels provided directly to Grandview Lodge by Haldimand County through the GRCA.*

Reference the Code green requirements for evacuation.

In the event there is a code green initiated the registered nurse or person in charge will initiate the Fan Out list for assistance.

Boil Water Advisory

Department:	Emergency Management	Subject:	Boil Water Advisory
Effective Date:	April 2022	Policy #:	EMP-17
Revised:	January 2023	Author:	Facilities Supervisor
Reviewed:	January 2023	Authority:	Administrator

Policy

Grandview Lodge is committed to the continuous delivery of care during loss of essential services related emergencies. Leadership, staff, students, volunteers and visitors are expected to abide by this policy in the event of a boil water advisory.

Purpose

The loss, interruption and/or contamination of water services to Grandview Lodge can affect the safety and provision of care/services for the residents of our home. This plan outlined is to use water safely during a “boil water advisory”.

Reasons for Boil Water Advisory

1. A boil water advisory is based on information other than bacteriological examination indicating that the water is not safe to drink (e.g. the lack or absence of disinfection residual in the drinking water).
2. A boil water advisory may be based on bacteriological (microbial) examination, including the finding of bacteria or parasites.
3. A boil water advisory may follow the occurrence of an outbreak of illness in the community that has been linked to consumption of the water. The extent of restriction on water use depends on the situation and the reason for issuing a boil water advisory. Always follow the health unit’s recommendations on water use.

Declaring a Boil Water Advisory

1. The Public Health Department in partnership with Haldimand County alerts the Long Term Care Home/ public that the water in the Municipality is contaminated and a “Boil Water Advisory” is in force until further notice.
2. All Haldimand County departments including Grandview Lodge are notified via e-mail regarding the “Boil Water Advisory”.
3. A Boil Advisory Alert notice will be placed at the reentrance of the home to alert visitors as well as a notification of awareness on the LTC homes website.
4. The Haldimand County water quality procedure specific to the Dunnville Water

Treatment facility is monitored 24/7 online. Any variances of set parameters will warrant a report immediately to the MOH and MECP. Samples are taken and tested twice weekly for disinfectant residual and once weekly for bacti. These samples are tested by a regulated lab. Any failed samples will be re-tested for confirmation. Upon confirmation of negative samples, the MOH will be notified and corrective actions and potential boil water advisories will be issued.

Departmental Responsibilities

Facilities Services

1. Maintenance Staff to be called in for immediate support if not on duty.
2. Water will be isolated to all potential water users throughout the home. ex: resident rooms.
3. Obtain emergency supplies of drinking water from contracted resources. (ex: bottled water)

Dietary Services

1. Boil water used for cooking. Water used for soups, porridge, stew, etc. must come to a full rolling boil for approximately 3 minutes. The water should reach a temperature of 100 C or 212 F.
2. Juice crystals will be used in place of juice machines.
3. Ice machines will be shut down for use. "DO NOT USE" signs to be placed on machines. All ice made previously is discarded and the ice machine is disinfected.
4. Use milk in recipes, where appropriate to avoid using water.
5. Steam food as much as possible in STEAMER.
6. Bottled water/boiled water to be used to clean vegetables, to mix juice crystals and as drinking water for staff and Residents.
7. Dishes may be washed in the dishwasher as long as final rinse temperature reaches 180 degrees F or above.
8. Pots may be washed as normal. Ensure the sanitizer is used. Ensure water is changed frequently. Let pots air dry.
9. Coffee/tea machines will be shut down for use "DO NOT USE" signs to be placed on machines. Boiled water or bottled water will be used to prepare instant coffee and tea.
10. Counter tops/chopping boards should be washed with soap and bottled water first then disinfected and sanitized using supplied manufacturer solutions
11. All menus will be revisited and adjusted by Dietary Supervisor and Cook to help manage meal preparation during boil water advisory.

Laundry Department

1. Continue to wash as per operating practices.

Nursing Department

1. Follow guidelines specific to Public Health orders.
2. Obtain boiled water from dietary for washing/bathing purposes, if necessary. Adults can bath/shower in untreated water. Avoid face and/or swallowing water. Sponge bath as needed.
3. Obtain boiled/bottled water for drinking purposes.
4. Obtain boiled/bottled water for brushing Resident's teeth/oral care.
5. Contact all Residents and/or POAs to notify of activation of emergency plan and at the end of the emergency.

NOTE: *All water that has a chance of being ingested should be boiled and/or use bottled water.*

Hand Hygiene

- For hand hygiene, antimicrobial products that do not require water (e.g. alcohol-based hand rubs) can be used until the boil water notice is cancelled.
- If hands are visible contaminated, bottled water and soap should be used for handwashing; if bottle water is not immediately available, an antiseptic towelette should be used.

Boil Water All Clear

1. After "Boil Water Advisory" is lifted, an email will be sent out to notify all departments of the public health "safe to use" order that has been issued.
2. All notifications will be removed from entrances and any updates will be updated to Haldimand County websites.
3. A mass email to residents and families will be sent immediately upon the "Boil Water Advisory All Clear"
4. To ensure the home is prepared for start-up after a "Boil Water Advisory all clear" the Facilities department staff will:
 - a. Run cold water faucets for 2-3 minutes before using water.
 - b. Drain and refill hot water heaters set below 450 C.
 - c. Drain and flush all ice-making machines.
 - d. Flush all garden hoses by running cold water through them for 1 minute.
 - e. Run water softeners through a regeneration cycle.

Emergency Plan Debrief

Staff/Residents/Students/Volunteers will be debriefed following the end of the emergency.

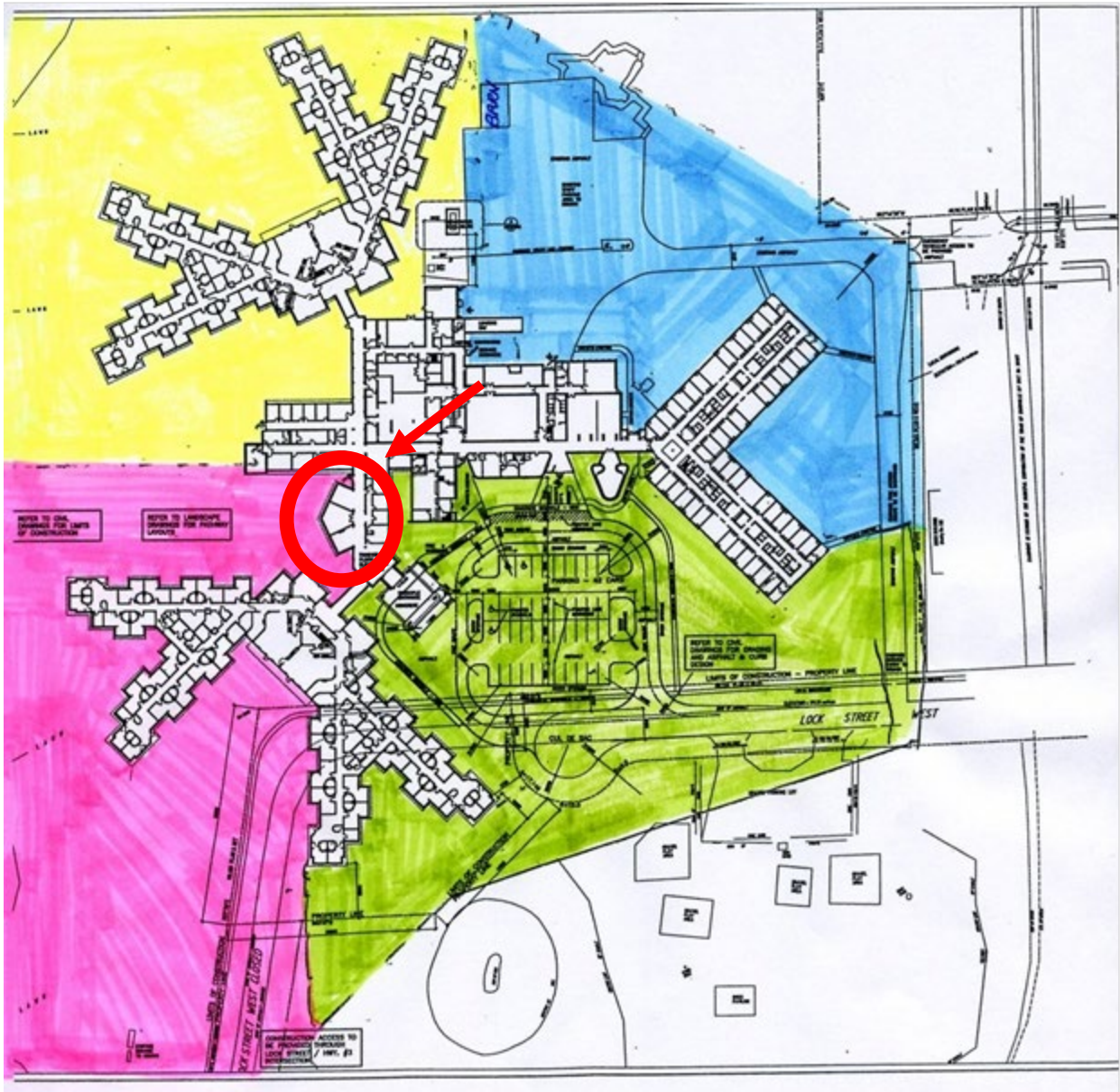
Haldimand County
Grandview Lodge
Emergency Manual Appendix

Appendix A: Incoming Evacuees

- Authority to accept evacuees will be the Administrators. Consultation with the Haldimand County Emergency Response Plan (H.C.E.R.P.) and other facilities will be ongoing [the Lodge has pre-arranged to receive evacuees from within the community on short-term basis].
- Auditorium/Main Lounge would be set up for incoming evacuees.
- If possible, some Residents may be temporarily discharged to family/friends. This would be coordinated by Administrator/Medical Director/D.O.N.
- Nursing staff would assess evacuees and provide immediate care - other staff would be called in if necessary (this is a decision of the Administrator). All departments would provide services as needed.
- All evacuees will be identified with their name and next of kin. A record will be kept in the main office.
- An assessment of supplies needed will be done by Facility Operations Supervisor. The Haldimand County Emergency Response Plan (H.C.E.R.P.) would assist with those provisions.
- Feeding of evacuees will be coordinated by Dietary Supervisor under the direction of the Administrator. Staff and volunteers will assist in preparation, serving and clean up of the emergency feeding program.

NOTE: If assisting another facility, they would supply manpower and necessary supplies (**see Haldimand County Emergency Response Plan H.C.E.R.P.**)

Appendix B: GATHERING ROOM & EXTERNAL SEARCH GRAPHIC



NOTE: This map can be used to assist with searches conducted on the external grounds of the facility. The map accompanies the “**External ground search - Bomb search/missing resident checklist,**” dividing each outdoor area into a quadrant.

NOTE: The red circle identifies the typical location of the **Gathering Room**, which is the meeting point during emergencies used throughout this booklet. The gathering room is also known as the **Theatre Room** when not used for emergencies.