Emergency Operations Plan.

Index

	Section
Emergency Operations Plan • Introduction • Evaluations of Emergencies • Emergency Provisions • Implementation of Emergency Plan • Communication Plan • Lines of Authority • Declaring an Emergency over • Recovery	A
Call In List - Staff	B
Code Black – Bomb Threat	C
Code Blue – Medical Emergency (Medical Emergency, Outbreak, Pandemic)	M
Code Brown – Chemical Spill & Gas Leak	D
Code Green – Evacuation	E
Code Grey Loss of Service & Essential Service-Water, Power, Generator Failure, Communication, Internet/ eMAR, Heat	L
Code Orange- Natural Disaster_Extreme Weather Event	K
Code Purple- Community Disaster • Dam Failure • Nuclear Incident • Boil Water Advisory	J
Code Red – Fire	F
Code White – Violent Situation	G
Code Yellow – Missing Resident	H
Communication Crisis Manual - OLTCA	XYZ
Cook Absent	P
Dietary Emergency Operations Plan	P
Evacuation - Code Green - Introduction, Plan, Evacuation Transfer Tracking, Resident Belongings List	E
Fire Safety System Failure	Q

Infectious Disease Outbreak	M
Code Blue: Medical Emergencies - infection disease outbreak	M
Reception of Evacuees	O
Emergency Contact List	B
Appendices	W

Emergency Operations Plan: Appendices

Appendix 1: Building Specific Information
Appendix 2: EOP Organization Chart
Appendix 3: Shelter in Place Decision Tree
Appendix 4: Emergency Operations Checklist
Appendix 5: Emergency Operations Worksheet
Appendix 6: Water Tracking
Appendix 7: Resident_Communication_Update_Form
Appendix 8: Family Communication Update Form
Appendix 9: Generator Log
Appendix 10: Call In List - Staff
Appendix 11: Emergency Contact List

Emergency Operations Plan – Emergency Codes

Code Red:	Fire
Code Green:	Evacuation
Code Yellow:	Missing Resident
Code White:	Violent Incident
Code Black:	Threat (Bomb)
Code Brown:	Chemical spill, Gas Leak
Code Blue:	Medical Emergency, Outbreak, Pandemic
Code Grey	Loss of Services & Essential Services: Water, Power, Generator Failure, Communication, Internet/ eMAR, Heat
Code Purple	Community Disaster (Dam failure, Nuclear Incident, Boil water Advisory)
Code Orange	Natural Disaster or Extreme Weather Event

Emergency Operations Plan – Introduction

Forward

Pinecrest Nursing Home is home licensed for 65 individuals who could not function independently in the community (Currently 50 reside due to COVID-19 precautions). Our residents are dependent on us for their care and accommodation. It is essential therefore to ensure the continuous provision of support and services by proper planning for any disaster that may befall us.

An emergency/ critical incident is an event that affects the normal operation of the Home and which can jeopardize our ability to provide care to the residents. There are many types of events that may be classified as an emergency/ critical incident including:

- Fire emergency (Code Red)
- Loss of one or more services or essential services: power, water and heat (Code grey)
- Bomb Threat (Code Black)
- Infectious disease outbreak (see IPAC_Outbreak_investigation_&_management)
- Natural disaster (eg. tornado, hurricane, broken windows, roof blown off, etc.) (Code Orange)
- Community evacuation (eg. toxic gas leak, etc.) (Code Purple)
- Medical Emergency (Code Blue)
- Chemical Spill (Code Brown)
- Missing Resident (Code Yellow)
- Violent behaviour (Code White)

The degree of disruption caused by those events may be minimal as in the case of loss of water for a brief period of time, or major, as in the case of fire requiring total evacuation. Additionally, the disruption may be created by the reception of individuals from another facility that has undergone a disaster.

Although we live in the hope that a disaster will never strike at our door, the truth is that they can and do occur. The purpose of this manual is to outline the actions to be taken in an emergency so as to:

- minimize any inconveniences to the Residents and staff and damage to the building and its contents
- protect the health and safety of our residents and staff;
- ensure continued operation as a nursing home; and
- recognize responsibility to the community we serve.

The effectiveness of Pinecrest's Emergency Operations Plan (EOP) is dependent upon you. Your familiarity of your duties will determine how you would fare should an emergency situation arise at Pinecrest. In an emergency your co-operation is not only necessary, but essential.

The Emergency Plan has been developed to ensure that all staff employed at Pinecrest Nursing Home are prepared to act effectively and efficiently in the event of an emergency.

POLICY:
In the event of an Emergency which threatens the life, health, safety or security of the Residents, all staff must be prepared to act, either on instructions from the Administrator, Director of Care, or Registered Staff, or follow the specific procedures outlined in our Policies and Procedures.

ORGANIZATION:
An organizational plan for dealing with emergency situations at Pinecrest has been developed to ensure a co-ordinated effort with services both inside and outside the Home and to eliminate as much as possible the elements of surprise and panic in an emergency situation.

In the event of an emergency occurring, the Registered Staff on duty shall be designated as the Code Coordinator and shall be responsible for conducting appropriate responses to the situation until relieved by the Owner, Administrator, Director of Care or an OPP, EMS or Fire Department supervisor.

Pinecrest has EOPs developed to

- Deal with,
  - fires (Code Red)
  - Community disasters & Boil Water Advisory (Code Purple)
  - Natural Disasters, Extreme Weather Event & Floods (Code Orange)
  - violent outbursts (Code White)
  - bomb threats (Code Black)
  - medical emergencies Outbreak, epidemic, and pandemic (Code Blue)
  - chemical spills & Gas leak (Code Brown)
  - situations involving a missing resident, (Code Yellow)
  - loss of one or more services or essential services (Code Grey)

- Evacuation of the home, including a system in the home to account for the whereabouts of all residents in the event that it is necessary to evacuate and relocate residents and staff.
- Identifying the resources, supplies and equipment vital for the emergency response and ensuring they are readily available in the home
- Identifying community agencies, partner facilities and resources that will be involved in responding to the emergency.

Using The Office of the Fire Marshal and Emergency Management's, “Hazard Identification and Risk Assessment Program Methodology Guidelines 2019” the Hazards were considered and a risk score was calculated for each Emergency.

Evaluation of Emergency Operational Plans

All emergency plans shall be evaluated and updated at least annually, including the updating of emergency contact information. The emergency plan will also be evaluated and updated within 30 days of being declared over, after each instance that an emergency plan is activated. Entities involved in the emergency response will be provided a chance to review emergency plan, review changes

being made, and given a chance to offer feedback. Resident's Council will also be provided with an update of the evaluation, changes, and given an opportunity to provide feedback.

The emergency plans related to: outbreak, pandemic, the loss of essential services, natural disasters, fires, situations involving a missing resident, medical emergencies, boil water advisories, floods, and violent outbursts shall be tested on an annual basis, including the arrangements with the community agencies, partner facilities and resources that will be involved in responding to an emergency.

All other emergency plans shall be tested at least once every three years.

A planned evacuation shall be conducted at least once every three years

Written records shall be kept of the testing of emergency plans and planned evacuation and of the changes made to improve the plans. The “Emergency Response Form” will be used for recording testing of the emergency plan. Testing of operations may consist of table-top exercises, drills, functional exercises and field exercises.

Emergency Provision

Pinecrest Nursing Home will keep a 1 month supply of personal protective equipment and 1 month of chemicals. For food and fluids Pinecrest Nursing home has a three day supply of food and fluids. Incase of an emergency situation where supplies could not be delivered for an extended period of time, Food Service Supervisor or designate would source supplies from alternative retailers (Foodland, Independent, or Compass meals) or alternative delivery services. Staff may be assigned to collect more non-perishable supplies if safe to do so.

Medications

For provision of medications in emergencies, see CareRx policy 2-3 “After Hours Emergency Pharmacy Services” and 2-5 “Disaster/Pandemic/Contingency Plans”.

Emergency Lighting

Pinecrest Nursing Home has emergency lighting at Nurses Station, in the North, South and Service Wing hallways. Staff should also use flashlights from emergency totes. ***In the emergency tote, store in the treatment room, staff will find:

- Flashlights (8)
- Walkie talkies (4)
- Batteries
- Paper/pens
- Duct tape
- Roll of plastic
- Food grade water hose
- Signage
- Battery operated radio

Implementation Of The Emergency Operational Plan:

In the event of an emergency, it would be expected that initially the Registered Staff would assume the role of Code Coordinator until the Director of Care or Administrator arrive. Procedures for Code Red, Code

White, Code Black, Code Yellow and Code Green have been developed for the Code Coordinator to follow. All staff are expected to be familiar with these codes and understand what their responsibilities would be in responding to these emergencies. There are also procedures for responding to loss of essential services, community disasters, medical emergencies and chemical spills.

Activation Plan

The plan can be activated by Director of Care, Administrator, or Registered Staff- who will assume the role of Coordinator. Notifications of an Emergency and associated hazards that impact Pinecrest Nursing Home or community indicates staff need to activate appropriate Emergency Operations Plan. If emergency arises within the home, Code Coordinator will announce the code and follow the appropriate plan.

If situation requires immediate assistance of more staff, staff to follow Emergency Call in List in "Section B".

Daily an Emergency Operations Team meeting will take place at 10 to monitor ongoing Hazards and associated Risk. This meeting will be multidisciplinary (Nursing, Activation, and Dietary) and used to determine the ability for residents and staff to shelter in place.

Communication Plan

Code Coordinator will announce the code over the PA system. Once plan is activated, Administrator or designate will send email notification to resident substitute decision makers, staff, volunteers, students, and caregivers to notify of Emergency Operation Activation. Administrator or designate will notify residents by using "Resident Communication Update Form". The Administrator or designate will update at the beginning of an emergency, when there is a significant change throughout the emergency and when the emergency is over. Communication may also be in writing, postings, and Town Halls set up. Registered staff can send email communication to substitute decision makers, staff, volunteers, students, and caregivers by using the general delivery email and the email list in PNH55>EOP.

Lines of Authority

See Appendix 2: Emergency Operation Plan Organization Chart for lines of authority and general staff roles and responsibilities. See identified Emergency Operation Plan for specific staff roles and responsibilities.

Declaring an Emergency Over

Depending on the Emergency experienced, an external support may play a large role in declaring the emergency over. Once the officials for the emergency (PEOC Commander/Operations Chief, municipal officials, Office of the Fire Marshal and Emergency Management, Public Health, etc.) have declared that there is no longer a threat; Administrator and Director of Care will perform a final hazard and risk assessment. This assessment will take place with a multidisciplinary team to determine if any secondary hazards still remain a risk (i.e. human resource issues, distribution issues, etc). If not, Administrator or Director of Care can declare Emergency over, and move to Recovery Phase.

Recovery

Administrator and/or Director of Care will lead the recovery after an emergency has ended.

Debriefing: After the emergency is declared over, all involved parties will assemble for a debriefing, that is, a complete review of the situation (what went wrong, what was done well, changes to be implemented in the policy and procedure). Code Coordinator, DOC or Administrator will complete Emergency Recovery Form.

During the recovery, Administrator and Director of Care will determine how to return to normal operations. Residents, substitute decision makers, staff, volunteers, students, and caregivers will be informed of any changes to day to day operations.

As part of recovery, Pinecrest staff will identify who experienced distress during the emergency from the debrief. A multidisciplinary team will review how to determine who experienced distress and how to support those individuals. Supports will be offered to all incase any individuals wish to access anonymously. The Emergency Recovery Form will be used to document the debriefing, the return to normal operation process and how it was determined the individual who were distressed and how they were supported (this form will not include the individuals that were identified as distressed).

Emergency Operations Plan Quick Action: Code Red Fire

Responsible Staff	Action
Registered Staff (as code coordinator)	Announce "CODE RED *zone"* (as identified on Annunciator panel)
	Assign staff to: • search fire zone (on nights RN assists with search) • assist tub room staff • staff members to monitor doors (unlocked) and check pull stations • second registered staff to report to code coordinator situation (PSW if no second Registered staff), and if fire instruct staff to begin evacuating room of origin and surrounding/adjacent rooms and moving to next fire zone
Code Coordinator (Registered Staff)	If fire located, Call 911 and advise of: • fire zone • presence of oxygen concentrators in immediate area and in the building
	Instruct staff to: • Evacuate residents in red zone to next fire zone • assist residents coming from the red zone to safe location • turn off oxygen concentrators
	Give Fire department U key and fire plan
	Call administrator or DOC to initiate emergency call in list
	Follow instructions of emergency personnel
	Collect necessary items if Code Green evacuation required
	*If unable to identify source, call 911 and advise
	Do not reset the alarm
	May need to declare Code Green Evacuation
	Once emergency personnel declare safe to do so, "Announce Code Red All Clear"
	Call Ministry of Health if after hours or DOC/Administrator initiate CI

Emergency Operations Plan Quick Action: Code Green Evacuation

Responsible Staff	Action
Registered Staff	Announce “CODE Green”
	Review Code Green Worksheet
	Notify Administrator/ DOC
	Designate safe area
	Identify main door to be used, all other will be restricted by personnel only
	Retrieve Code Green box & Emergency Tote
	Delegate tasks as per Code Green Worksheet
Maintenance	Once evacuated, building needs to be secured
Nurse Clerk	Staff assignments at evacuation locations
	Call Ministry of Health if after hours or DOC/Administrator initiate CI

Emergency Operations Plan Quick Action: Code Yellow Missing Resident

Responsible Staff	Action	
Staff that notes missing resident	Notify Registered Staff	
Code Coordinator (Registered Staff)	Announce “Code Yellow: Missing Resident”	
	Initiate EOP Checklist and CODE YELLOW missing resident worksheet	
	Follow Missing resident worksheet	
	If missing greater than three hours **or** resident returns with injury or change in condition notify Ministry	1-888-999-6973
Code Coordinator	Once resident found, announce “All clear”	
Administrator or DOC	Complete Recovery	

** Notify Director by no later than one business day for a resident who is missing for less than three hours and who returns to the home with no injury or adverse change in condition**

Policy: Pinecrest Nursing Home will have a predetermined plan for an emergency search if it is identified that a Resident of Pinecrest is missing.

Identifying an at risk Resident:

At admission every Resident will be assessed for wandering/ elopement behaviours. It will be recommended to POA to be registered with MedicAlert Safely Home, a wandering registry or purchase a bracelet that states the residents name, Pinecrest Nursing Home's contact information and memory loss/ wanderer.

If the POA decides to register or purchase a bracelet the information will be added to the resident plan of care under wandering/ elopement, upload a picture of the bracelet to the Misc tab.

Hazards and Risk Assessment Hazard Identification and Risk Assessment
Using The Office of the Fire Marshal and Emergency Management's, "Hazard Identification and Risk Assessment Program Methodology Guidelines 2019" the risk was calculated. The Risk of Missing Resident was 20. This score using the Hazard Identification Risk Assessment Program methodology Guidelines indicate a "Very Low Risk".

All doors to exit Pinecrest Nursing Home are locked. The front door has a number code required to exit and the door to the Service Wing also has a number code. Every year and as required an Outside List is developed and posted at the Nurses' station and communicated to staff. This list is used for all staff to know who can safely go outside independently. This list may be revised if concerns of resident's safety arise. During the warmer months, all resident's have access to the courtyard for a protected outdoor space.

Note: Staff are required to check all residents q1H as per policy.

In the event of an emergency (fire, power/generator failure, etc.) the exit doors become unlocked. Code Coordinator should assign someone to monitor exit doors as per policy.

In the Event a Resident is missing

If a Resident is identified as missing from Pinecrest, the Registered Staff will act as Code Coordinator (if available, Director of Care and/ or Administrator may also coordinate the search plan)

The Code Coordinator will implement the search plan following the CODE YELLOW: MISSING Resident WORKSHEET

Worksheets are in the Emergency Operations Plan Manual under "Code Yellow" or on the Web Browser under Favourites PnP "Code Yellow_Missing_Resident_Worksheet" and on Surge Learning System.

The Code Coordinator will page staff that we have a Code Yellow with the Resident's name.

All staff are to search their work area including rooms, bathrooms, closets, under beds, etc. and report their findings to the Code Coordinator at the Nursing Station. (Mark rooms that have been searched by leaving a towel at the door). Assign the first two staff reporting to the Nursing Station to search the center core area and service wing.

The Code Coordinator will gather all available information for the Code Yellow Fact Sheet including the Resident's photo, a full description of the Resident including their clothing, the time and place the Resident was last seen, previous missing person incidents.

If the Resident is not found in the building within 10 minutes, three staff will be assigned to search the grounds outside. One staff is to go to the Highway, the other two staff are to walk around the building, in opposite directions and meet in the backfield behind the nursing home. All staff should then report their findings to the Code Coordinator. Staff should take their cell phones if available so they can call the nursing station

If the Resident has not been located the Code Coordinator will then call the Police as well as notify the Administrator, Director of Care and the Resident's Substitute Decision Maker.

Once the Resident has been missing for more than three hours, the Code Coordinator must report the Missing Resident to the MOHLTC immediately. (outside of business hours, the After Hours Pager would be used. During Business hours, the Director of Care or Administrator would initiate the on-line CIS form)

When Police arrive, they would take over the search and staff would assist as directed, while at the same time, ensuring the other Residents are safe.

When the missing Resident is found, the Code Coordinator would make an announcement that the Resident has been found and the Code Yellow has been canceled.

The OPP, Administrator, Director of Care and Resident's SDM would be contacted as needed.

The Registered Staff will then assess the Resident's condition.

The Registered Nurse will immediately report to the Ministry – Service Ontario After hours line 1-888-999-6973 or if during business hours, the Director of Care or Administrator by initiating the on-line CIS form
– a resident who is missing for three hours or more

-Any missing resident who returns home with an injury or any adverse change in condition regardless of the length of time the Resident was missing,
The Registered Staff must document the incident on PCC under Risk Management "Elopement"

Modify the Resident's care plan with appropriate strategies

Following the resolution of the Code Yellow:
The Director of Care or Administrator will complete the report to the Ministry of Health and Long-Term Care: using on-line CIS report if the Resident was missing for less than three hours and returned to the home with no injury or adverse change or condition.

Recovery

Debriefing: After the code yellow is over, all involved parties will assemble for a larger debriefing at a time determined by Director of Care or Administrator. This will be a discussion to plan recovery (how will those involved debriefed, how will normal operations resume, was anyone distressed, and how will distressed be supported). Code Coordinator, DOC or Administrator will complete Emergency Recovery Form.

Review of Emergency
This emergency plan will be reviewed and updated annually. The emergency plan will also be evaluated and updated within 30 days of being declared over, after each instance that an emergency plan is activated or tested.
A multidisciplinary team will be invited to complete a review using "EOP_response form" after every unplanned event or test performed for this emergency plan. The EOP response will be completed as part of a debrief to review what happened, what the risks/hazards were, planned response to hazards and risk, any concerns identified and changes required. This is an opportunity to ensure the required standards were reviewed and clear to all during the emergency.

Stakeholders (residents, staff, volunteers, families, etc) involved in the emergency response will be provided a chance to review emergency plan, review changes being made, and given a chance to offer feedback.

Refer to Disaster Plan:
Code_Yellow_ Worksheet

EOP Missing Resident Revisions

Previous page #	New page #	Comments
	2 & 3	Added clear recovery section
1	1	Removed screening station, added all resident’s have access to courtyard

Emergency Operations Plan Quick Action: Code White Violent Person

Responsible Staff	Action
Any staff (experiencing threat of danger to themselves or others)	Leave area if able and call for “Code White”
Code Coordinator (Registered Staff)	Assess the situation (who is it, what is the imminent threat, etc)
	Direct staff to deal with situation
	Have staff remove anyone in harms way
	Have staff remove stimulation that could be triggering
	Have staff shut doors the safety of other residents (while being mindful of staff safety)
	Assess person, what is triggers them, allow to vent listen carefully and respectfully
	If resident remains a risk, and listening/validating not working- consider other interventions
	May need to contact physician
	If individual escalates, may require to call 911 for assistance- Resident and/or staff safety is at risk.
	Initiate EOP Checklist and EOP Worksheet
	Once situation is managed and all are safe, call “CODE WHITE All Clear”
	Notify DOC or Administrator
	Complete Risk Management and required reporting form, decision tree
Administrator or DOC	Complete Recovery

Purpose:
The Code White procedure provides staff with a standard response to follow when dealing with episodes where individuals become violent and/ or display behaviour which threatens staff and/or Resident safety. A Code White will be activated when attempts to de-escalate threatening behaviour have been unsuccessful or when staff/Resident safety is compromised.

A Code White intervention is employed in any situation in which there is a real or perceived risk of physical harm to a Resident or staff member or to property. Assistance should be sought sooner rather than later. Staff calling for help should not be challenged about their call for assistance as the decision to call for assistance is a subjective one.

Hazards Identification and Risk Assessment
Using The Office of the Fire Marshal and Emergency Management's, “Hazard Identification and Risk Assessment Program Methodology Guidelines 2019” the risk was calculated. The Risk of Violent situation (requiring response which threatens staff/ resident safety) is 20. This scores using the Hazard Identification Risk Assessment Program methodology Guidelines indicate a “ Very Low Risk”.

Staff are trained to manage behaviours by having training on responsive behaviours, aggression, agitation, resistive to care, etc. Pinecrest Nursing Home will offer frontline staff GPA (Gentle Persuasive Approaches) training to complete when there is enough staff to provide a course and the availability of a course. These training methods provide staff with the abilities to manage behaviours and prevent them from escalating in residents.

Calling a Code White:

Assistance should be sought when:

- staff perceive themselves or others to be in danger of physical harm from an aggressive Resident or individual.
- a Resident is acting out in a manner that is dangerous to self, others or the environment
- there is an imminent risk of acting out
- the situation is rapidly escalating out of control

When caring for Residents identified with the potential to exhibit verbally or physically aggressive or abusive behaviours all staff shall follow the interventions outlined in the Resident's plan of care. (Refer to “BSO 2 – Verbal Physical Aggression for additional interventions.)

If these interventions are not effective and a staff member believes there is a risk of physical harm to a Resident or staff member or to property a Code White should be initiated.

Staff should ensure their own and their co-worker's safety when dealing with aggressive individuals.

If possible, leave the area and use the paging system to call “Code White” and the location where you need assistance.

If you are unable to leave the area, attempt to pull a Resident call bell, alerting staff to the need for assistance. When staff respond, ask them to call a Code White, giving the location where assistance

is required.

When staff hear the Code White announcement, all staff are to immediately report to the area and follow the instructions of the Registered Staff (who becomes the Code Coordinator).

Code Coordinator:

- assesses the situation
- acts as spokesperson for the team
- directs staff as to how to assist in dealing with the situation
- communicates with the Resident and tries to diffuse the situation.
- start by attempting to speak quietly and helpfully to the individual.
- give the Resident space, allow them to vent, listen carefully and with respect, try to validate their feelings. Do not be in a hurry to step in and touch the person. Listening and standing by is having a plan.

Interventions may include:

- giving medications
- allowing Resident quiet time to settle
- consulting with the Resident's Physician
- calling 911 if needed

Staff responding to the Code White should:

- follow the instructions of the Code Coordinator
- remember that the Code Coordinator is the only person speaking at the time of interaction with the Resident
- assist to remove vulnerable Residents from the area for their safety or if possible, help to remove the Resident/person to a safer environment.
- reduce stimulation in the area – removing other Residents, visitors, reducing noise levels by turning off radios/tvs, vacuum cleaners, etc.
- remove hazardous objects from the area that could cause injury
- shut doors to ensure the safety of other Residents

Guidelines during a Code White Team response:

- Remember to stay calm, take a deep breath, flex your knees and relax your face so you do not appear angry.
- For safety, remove items such as watches, glasses if not safety glasses, pens, pagers, scissors, name tags, etc.
- When dealing with physical aggression, physical interventions must be non-violent.
- Physical intervention is used as a last resort to safety control a physically acting out Resident until he regains control of his/her behaviour.
- The verbally aggressive Resident is managed through verbal defusing techniques.
- The Resident involved is always treated with utmost respect and professionalism. Interventions must respect the rights of staff and others to a safe environment.
- Safety priority occurs in the following order at all times: self and other staff safety, Resident, visitor safety and then environment.
- The team does not intervene in any situation that may pose a risk beyond their resources to

intervene safely.

A “CODE WHITE” call becomes a “9-1-1” call or an emergency call to police:

- whenever there is a real or perceived threat that lives are in danger
- when initial or responding staff determine the situation is beyond their abilities to manage safely.
- whenever an “edged” weapon or firearm is involved
- when the aggressive behaviour occurs off Pinecrest property
- when the aggressor is not a Resident and threatens staff and Resident safety and other means of intervention are not available

Calling 9-1-1

- Call 911 and ask for POLICE.
- Tell them you have an aggressive Resident/person and describe the situation. Make it clear that you feel that Resident and/or staff safety is at risk.

When the aggressor is not a Resident and threatens staff and Resident safety, call 911, ask for POLICE and give the details of the situation.

- It is suggested that if staff are not able to stay on the line to answer questions, leave the phone off the hook (ie if staff need to return to the situation to assist)

Be prepared to answer questions such as:

- What is the nature of the incident? (e.g. person out of control, person with a knife, etc.)
- Where exactly is the incident occurring?
- Does the person have a weapon? Describe what it is? What is the person doing with the weapon?
- Has anyone been injured?
- How many people besides the person are in the room?
- Can they safely leave?
- Describe the person (name if known, race, sex, age, height, weight, colour/style of hair)
- If the person leaves, what is the direction of travel? how long ago did the person leave?
- Who is the witness/contact person and where is he/she (police will want to talk to someone as soon as possible when they arrive.)

When the police arrive on the scene, they assume control of the situation directing staff and others as necessary.

The police should remove the Resident/ person, taking them to the Ross Memorial Hospital for assessment or to the Police station if indicated. A Transfer package will be sent with the Resident if time allows or faxed, if staff have not had time to prepare.

Contact the physician to complete a form 1 if required

After the situation is resolved:

Informal team debriefing:

This is a debriefing with all staff involved in the incident immediately following the incident. It provides the opportunity to collect information, and allows each team member to voice their comments, concerns and issues. Discuss what went right, what didn't and make recommendations on how to improve the Code White response.

Staff should report any injuries sustained during the procedure, receive medical assistance if required and complete an Employee Incident report

Code Coordinator:

- Initiate the Incident investigation following the Resident Incident Investigation Form
- Document all details of the incident using the Risk Management Incident form on Point Click Care (complete a Risk Management Report for each resident involved)
- If staff are injured, also complete an Employee Incident Form.
- If the incident involves someone other than Resident and/or staff, document the incident on an Employee Incident Form. Provide as much detail as possible.

Following the Resident Incident Investigation form:

- Refer to the MOHLTC Decision Trees to determine if the event must be reported to the Ministry through the Critical Incident System.
- Initiate the Ministry of Health Critical Incident System (CIS) Report if required.
- Notify the Administrator and/ or Director of Care of the incident.
- Notify the family/SDM of the incident for all Residents involved.
- If necessary and appropriate, ensure that the Resident's physician is consulted to determine whether any changes in medication, medical treatment and/or other precautionary measures are necessary to eliminate or minimize the risk.
- Ensure oncoming staff are aware of the incident/ behaviour, especially if the Resident remains in the home.
- Update the Resident's Plan of Care to ensure that the triggers that may precipitate the aggressive behaviours, and appropriate interventions for staff to follow are identified.

Follow-Up

Follow-up is required if a staff member suffers an injury in a Code White Intervention or if any staff member becomes distressed over the incident. Provide staff support, contact family, etc.

If a Critical Incident System report was initiated to the MOHLTC, the Administrator or Director of Care will complete the report.

An operational review will be conducted by the organization into the incident to determine causes; proper follow-up measures have been taken and to identify risk control measures to prevent future occurrences. This follow-up review can be completed by any of the following: Behavioral Supports Team, Continuous Quality Improvement Committee or the Joint Health and Safety Committee.

Annually this Code White response will be reviewed.

Recovery

Debriefing: After the code white is over, all involved parties will assemble for a larger debriefing at a time determined by Director of Care or Administrator. This will be a discuss to plan recovery (how will those involved debriefed, how will normal operations resume, was anyone distressed, and how will distressed be supported). Code Coordinator, DOC or Administrator will complete Emergency Recovery Form.

Review of Emergency
This emergency plan will be reviewed and updated annually. The emergency plan will also be evaluated and updated within 30 days of being declared over, after each instance that an emergency plan is activated or tested.
A multidisciplinary team will be invited to complete a review using “EOP_response form” after every unplanned event or test performed for this emergency plan. The EOP response will be completed as part of a debrief to review what happened, what the risks/hazards were, planned response to hazards and risk, any concerns identified and changes required. This is an opportunity to ensure the required standards were reviewed and clear to all during the emergency.

Stakeholders (residents, staff, volunteers, families, etc) involved in the emergency response will be provided a chance to review emergency plan, review changes being made, and given a chance to offer feedback.

References: Guidelines: Code White Response (A Component of Prevention and Management of Aggressive Behaviour in Health Care) produced in partnership with OHSAH, Workers' Compensation Board of BC and the Health Association of BC.

EOP Code White Violent Behaviour Procedure Revisions

Previous page #	New page #	Comments
4 & 5		Added clear recovery section

Emergency Operations Plan: CODE_GREY: Loss of Service & Essential Service

In the event of power failure the generator will start automatically. The Generator can carry the load required for Pinecrest to operate normally.

Emergency Operations Plan Quick Action: Loss of Power

Responsible Staff	Action
Code Coordinator	Announce Code Grey- Loss of Power
Registered Staff	Start tracking generator activity in Generator Log
Registered Staff or designate	British Empire fuel (generator fuel) 705-738-2121 (call to refill generator, every 24 hours diesel fuel #1)
Registered Staff	**Check Locks** If there is a delay in switching to generator, locks may need reset, always check in housekeeping storage room 29 in centre zone.

Emergency Operations Plan Quick Action: Generator Failure

Staff Responsible	Action	
Code Coordinator	Announce Code Grey- Loss of Power & Generator Failure	
Code Coordinator or designate as assigned	Call Maintenance to come and evaluate situation.	Maintenance Owner (if neither available) contact Administrator
Code Coordinator	Initiate EOP Checklist & EOP Worksheet	
Code Coordinator or designate as assigned	If problem is lack of fuel for generator contact:	British Empire Fuel- 738-2121 (diesel fuel #1)
	If sufficient fuel and generator isn't functioning, contact for service	Somers Motor Generator Sales Ltd., 1-519-655-2396
	Contact Ontario Hydro to report outage and determine if there is an estimated time of return of power.	Ontario Hydro 1-800-434-1235
	If power (through Hydro or Generator) will not be restored within two hours, contact Administrator to report situation.	Administrator (if unavailable) contact Director of Care
	Suspend operations in Laundry and Dish Washing and Tub Room.	
	Implement “EOP_Dietary” procedure.	
	Assign staff to monitor exits	
	Obtain supplies from “Emergency Tote” in Treatment Room	

	Post signage
	Ensure staff remain vigilant for hazards (i.e. fire) as monitoring system will be off

Emergency Operation Plan Quick Action: Loss of Heat (in Cold Weather)

Responsible Staff	Action
Code Coordinator	Announce Code Grey- Loss of Heat
Code Coordinator	Initiate EOP Checklist & EOP Worksheet
Code Coordinator or maintenance/owner if on site	Evaluate cause of loss of heat: total power loss, issue with power to baseboard units, individual baseboard issues
	For total loss of power, follow “EOP Quick Action: Generator Failure”
	For issue with power to baseboard unit or issue with individual baseboard:
Code Coordinator (or designate as assigned)	Call Maintenance or Owner (Administrator if unable to reach) See appendix 11
Assign staff	Ensure that all windows and exterior doors are closed Turn off all air supply and exhaust fans (mechanical room 43).
Assign other staff (housekeeping, laundry, screening)	Obtain additional blankets from storage (Room 68 & 75, 44) and use as necessary to keep residents warm
	Keep vacant room doors closed, to minimize loss of heat.
Code Coordinator	If temperatures drop to unacceptable levels and/or power supply will not be restored for an extended period of time, contact Administrator and/or DOC and prepare for evacuation (see Section E: Evacuation).

******If Loss of Essential Service that affects the provision of care or the safety, security or well-being of one or more residents **is greater than six hours,** it must be reported to the Director no later than one business day. (Loss of Power, Generator, major breakdown of equipment or a system in the home, etc).**

Emergency Operations Plan Quick Action: LOSS OF COMMUNICATION SERVICES

Telephone – loss of land lines

Responsible	Action	
Code Coordinator	Announce Code Grey- Loss of Communication Service	
Code Coordinator	Initiate EOP Checklist & EOP Worksheet	
Code Coordinator	Utilize staffs' personal cell phones and contact Bell Telephone Repair Service	On land line call 611 On cell phone call #611
	Notify them of the disruption in service and request immediate emergency repairs.	
Code Coordinator	Notify Administrator or Director of Care	See Appendix 11
Code Coordinator (or designate as assigned)	use email to communicate to families & staff that phone line is not working and to email gendelivery@pinecrestnh.ca if they need to contact Pinecrest. - Pinecrest "Gendelivery" email	(information posted at Nurses Station)
Code Coordinator	To find contacts, go to: PNH55>EOP> Staff email list & family email list	
Code Coordinator	If staff require to phone out, the phone under the desk should work. If not, the phone on the fax machine is another option. If none of these phones are working, Registered staff may use cell phones to call out for work related needs.	
	If Bell can not fix the issue, as it is not a service provider issue, contact Central Ontario Telecom. They installed the system. Contact is Paul Marrot	705-760-4077
Code Coordinator	Email family & staff when phone issue has been resolved	

Loss of Internet Service

Pinecrest has two Internet Providers: The primary service is from CableCable and backup is provided by Bell. In the event CableCable service is lost, service from Bell should kick in automatically.

In the event Internet service is disrupted:

Responsible Staff	Action	
Code Coordinator	Initiate EOP Checklist & EOP Worksheet	
Code Coordinator	Contact owner	See Appendix 11
Code Coordinator (or designate as assigned)	Call CableCable and report that service has been lost	(705) 887-6433 technical support: 1-888-697-6638

	If Bell service is disrupted	301BELL
	Use remote access to point click care and staff personal data plans- create “hotspots” on device, connect to hotspots (to be reimbursed)	

Loss of eMARs+-

Responsible Staff	Action	
If Pinecrest has Internet service, but emars is not working:		
Code Coordinator	contact owner	See Appendix 11
Code Coordinator (or designate as assigned)	call eMARs support to report (or leave a message)	1-866-429-7335
Code Coordinator (or designate as assigned)	before the start of the next med pass, print the MARs sheets from the computer (emar - back up)	If internet service is available: sign into PCC in the clinical tab : > Reports > Administration Record> Select “Unit” run MAR then TAR
	print medication administration and treatment record for current month for North Wing and then for South Wing	

Responsible Staff	Action
If internet service is not available	
Code Coordinator (or designate as assigned)	on the Medical Pharmacy computer: on desk top click on eMar Backup click on the top file which is the most recent click “I agree” click on: emar_North Mar 1 emar_South Mar 1
	print 2 sided

Emergency Operations Plan Quick Action: LOSS OF WATER

In the event of a complete loss of water, the following procedure will be carried out.

Responsible Party	Action	
Code Coordinator	Announce Code Grey: Loss of Water	
Code Coordinator	Initiate EOP Checklist & EOP Worksheet	
Code Coordinator	Notify Maintenance and Owner if in the building Notify Administrator/ Director of Care if in the building Notify staff who are working	
Code Coordinator (or designate as assigned)	Contact the City of Kawartha Lakes – Bobcaygeon Service Center – to report loss of water to the building and determine if there is a problem occurring or work is taking place on the system.	Mon - Fri 8:30-4:30 705-324-9411 After hours/ week-end 1-877-885-7337
	In the event that water services will be returned to normal quickly, no further action need be taken.	
Code Coordinator (or designate as assigned)	If problem is not being dealt with by the City: Contact Maintenance Staff or owner to assess and determine expected duration of shut-down. (if neither available) contact Administrator	See Appendix 11
	In the event that water supplies will not be available for several hours, the following procedure is to be followed:	
Code Coordinator instructs staff	Milk and fruit juices are to be used to supply the fluid needs of the Residents. Paper products will be used for food and beverage service.	
	Laundry, dish washing operations, resident bathing shall be discontinued for the duration of the shortage.	
	Utilize disposable 'wet wipes' for personal care (purchase more from local drug stores if required ie Shoppers or Village Gate	
Maintenance	Turn off water in all residents room	
Code Coordinator	Place “Appendix 6: Water Tracking” sheets in kitchen and medication room	
	Total water used end of each day (2300) report to Administrator daily	
	Minimize the use of toilets during the period of shortage. Remember, a tank toilet can be flushed once after supply to building is cut off.	
Staff member assigned	Obtain Drinking water through local retail outlets	

by Code Coordinator (laundry staff, housekeeper, etc)	Valu-Mart 705-738-6651 Foodland 705-738-2282 Sobeys 705-887-3611
Code Coordinator	Notify Ministry of Long Term Care if loss of water for greater than 6 hours- Administrator or Director of Care to complete the online Critical Incident System or call the Service Ontario after hours reporting line 1-888-999-6973
	In the event that water supplies will not be returned to normal indefinitely, the decision may be made to initiate Total Evacuation (see Code Green)

EMERGENCY OPERATIONS PLAN Quick Action: Water Loss-Contamination

Responsible Party	Action	
Code Coordinator	Announce Code Grey: Loss of Water- Contamination	
Maintenance/owner (if unavailable- Code Coordinator)	Shut off water at Main immediately (see Appendix 1: Building Specific Information)	
Code Coordinator	Initiate EOP Checklist & EOP Worksheet	
Code Coordinator (or designate as assigned)	Notify Owner Notify Maintenance Notify Administrator Director of Care	See Appendix 11
Dietary	Implement "EOP_Dietary", provide juices and milk for fluids	
Staff member as assigned by Code Coordinator (laundry staff, housekeeper, etc)	Obtain Drinking water through local retail outlets Valu-Mart 705-738-6651 Foodland 705-738-2282 Sobeys 705-887-3611	
Code Coordinator	Notify Ministry of Long Term Care if loss of water contamination immediately Administrator or Director of Care to complete the online Critical Incident System or call the Service Ontario after hours reporting line 1-888-999-6973	
	In the event that water supplies will not be returned to normal indefinitely, the decision may be made to initiate Total Evacuation (see Code Green)	

Policy:
Emergency preparedness allows Pinecrest Nursing Home's staff to be prepared in cases of Emergency. In Emergency Planning, residents, staff and visitors health and wellness is the first consideration. In Emergency Operation Plans, Pinecrest Nursing Home will plan to shelter in place, if feasible. At commencement of an emergency, the Code Coordinator will assess if Sheltering in Place is safe, or if evacuation needs to be considered. Code Coordinator will use Appendix 3: “Shelter in Place Decision Tree”.

Services
Essential Services- including dietary services equipment required to store food at safe temperatures and prepare and deliver meals and snacks, the resident-staff communication and response system, elevators and life support, safety and emergency equipment.

Services- Internet and Telephone

Hazard Identification and Risk Assessment
Using The Office of the Fire Marshal and Emergency Management's, “Hazard Identification and Risk Assessment Program Methodology Guidelines 2019” the risk was calculated. The Risk score of loss of essential services are very low. Loss of essential services is typically a secondary risk related to other hazards such as: community or natural disasters, extreme weather, etc.,

Initiating Emergency Operation Plan
At any point Pinecrest Nursing Home's services or essential services are compromised (loss of water, power, heat, internet, communications) Registered Staff will initiate Emergency Operations loss of services or Essential Services.

Loss of Water
Loss of water can be a result of a complication of town water (contamination, supply) or loss of power. Each situation will require a different approach. Code coordinator will follow EOP Emergency “Section L: **EMERGENCY OPERATIONS PLAN Quick Action: Water Loss”** for next steps.

Loss of water due to supply
Pinecrest will have to monitor water supply and measure use of water. There is enough water in the water heater (120 G) to support Pinecrest Nursing Home for 2 days. This has been calculated by considering both staff and residents (110 individuals) requiring 2L/ day, consuming approximately 60 gallons per day. Pinecrest will begin using EOP_Dietary immediately. Daily usage will be totaled by all departments to monitor supply levels. Code Coordinator will place “Appendix 6: Water Tracking” will be placed in the medication room and kitchen to track daily water usage. Code Coordinator will total amount used at end of each day (2300). If the supply falls below 60 Gallons (24 hours worth of water) and it can not be replenished or restored (more purchased from stores), Pinecrest Nursing Home will be considered at risk of critical levels and consider evacuation.

Loss of water due to contamination
Pinecrest Nursing Home will immediately discontinue use of water as required by the alert. Code Coordinator will follow the steps in “Section L **EMERGENCY OPERATIONS PLAN Quick Action: Water Loss-Contamination**” for next steps. Maintenance will turn off water supply at main supply in pump house. Code Coordinator will arrange for staff to obtain water from Foodland, Independent, or Costco.

Loss of water due to loss of power
Follow loss of power Emergency Operation. There is enough water in the water heater tank to support Pinecrest Nursing Home for 2 days. Pinecrest will begin using EOP_Dietary immediately for no power. Daily usage will be totaled by all departments to monitor supply levels. Water can be sourced

attaching designated water hose from Emergency Tote and filling 1.89L jugs for daily usage. If the supply falls below 60 Gallons (24 hours worth of water) and it can not be replenished or power will not be restored, Pinecrest Nursing Home will be considered at risk of critical levels and consider evacuation.

Loss of Power
In case of power outages, Pinecrest Nursing Home has a generator wired in. When the power fails, the Generator will start automatically. Pinecrest Nursing Home's generator can support the electrical load for Pinecrest to operate at full capacity. For next steps, Registered Staff should view Section I "Emergency Operations Plan Quick Action: Power Failure".

Loss of Generator Service
If the generator fails to start automatically, Registered Staff should refer to Section I "Emergency Operations Plan Quick Action: Generator Failure" for next steps. If generator can not be restored within two hours from shut off, contact Administrator (or Director of Care if unavailable). Complete "Appendix 3: Shelter in Place Decision Tree". If deciding to shelter in place, Registered Staff remain Code Coordinator until replaced by Director of Care or Administrator.

Emergency Tote contains supplies needed for loss of power: flashlights, batteries, walkie talkies, etc.

In Loss of Power/Generator service, Pinecrest systems will be down. Code Coordinator may also need to enact loss of internet/ loss of eMAR plan. Pinecrest Nursing Home's control panel will also not function. Call bells will not function and staff will have to manually round on residents frequently to ensure safety and well-being. Doors will become unlocked and staff will need to monitor residents. If possible, residents should be brought to center zone (Nurse's station, front foyer, dining rooms) for safety and easier monitoring.

Loss of Heat (in cold weather)
In the Loss of Heat, Code Coordinator will follow Section I "Emergency Operations Plan Quick Action Loss of Heat (in cold weather) for next steps. Staff should ensure windows and doors are closed, turn off air exchange, provide residents extra blankets and monitor internal temperatures.

Loss of communications
In the loss of communications, Registered staff will follow steps in Section "J". Staff will utilize Walkie Talkies from emergency tote as need. Registered staff may also assign one staff to manually deliver message as required (to notify emergency personnel if their presence is required). When phone is the loss of communication, Registered staff can use the gendelivery email to send updates to families/staff using the email contact list in PNH>EOP.

Report to the Director
If Loss of Essential Service that affects the provision of care or the safety, security or well-being of one or more residents is greater than six hours, it must be reported to the Director no later than one business day. (Loss of Power, Generator, major breakdown of equipment or a system in the home, etc).

Roles and Responsibilities
Administrator
Code Coordinator
Monitor for ongoing updates regarding the essential services impacted by speaking with provider responsible (City of Kawartha Lakes, Hydro One, Bell, Cable Cable, etc).
Ensure emergency operation plan is followed and implement new strategies based on emergency experienced
Communicate updates as they pertain to Pinecrest Nursing Home to residents, substitute decision

makers, staff, caregivers, students, volunteers
Monitor the hazards and identify risks (staffing, supply issues, etc) on a daily basis
Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Director of Care, Registered Staff, Physicians (if able), Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency
Decide ability to shelter in place or need to evacuate using Shelter in Place Decision Tree
Liaise with external authorities as required

Director of Care

- Code Coordinator
- Ensure Registered staff implementing directions received and overseeing all departments implementing changes
- Monitoring and ensuring adequate medical supplies. Working with distributors to secure supplies and overcome distribution issues related to hazards (i.e. widespread power outages)
- Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Administrator, Registered Staff, Physicians (if able), Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency.
- Decide ability to shelter in place or need to evacuate based on Shelter in Place Decision Tree
- Assess need to implement Contingency plan from Pinecrest's Staffing Plan

Registered Staff

- Code Coordinator until replaced by Director of Care, Administrator, or external agency (for example, Fire)
- Monitor for communication alerts via general email
- Overseeing direction provided is implemented in all departments
- Ensure resident health and well being
- Contribute to frequent hazard and risk assessment

PSW

- Follow direction provided
- May be assigned to monitor doors
- Ensure resident health and well being of residents
- Report concerns to Registered Staff

Food Service Supervisor

- Ensure dietary staff are briefed and following any direction affecting dietary department
- Monitoring and ensuring adequate food/fluid supply
- Working with distributors on an ongoing basis to ensure supply and distribution will not be an issue
- Have EOP Dietary supplies in stock at all times in the situation that there is distribution issues
- Participate in daily Emergency Operations Team Meeting

Dietary Staff

- Follow direction provided by code coordinator and food service supervisor
- Adjust menu appropriately in cases of distribution issues
- Implement EOP Dietary in emergencies
- Report any concerns to food service supervisor or code coordinator (or Registered Staff in their absence)

Program Coordinator

- Ensure activity staff are briefed and following any direction provided

- Monitoring residents health and well being
- Assist with coordinating communication and updates as directed by code coordinator
- Participate in daily Emergency Operations Team Meeting

Activity Staff

2. Follow direction provided by code coordinator
3. May assist in monitoring residents health and well-being
4. Report any concerns to Program Coordinator, Code Coordinator or Registered Staff (in Code/ Program Coordinators absence)

Nurse Clerk

- Monitoring and updating code coordinator on human resources
- Enact agreements with agency partners at discretion of DOC or Administrator
- Assist with family communications
- Assist with technical issues
- Assist departments with sourcing supplies

Housekeeping/ Laundry

- Adapt practices as required (I.e use premixed bottled products)
- Could be assigned to:
  - monitor doors
  - assist in picking up supplies from local retailers
  - assist in delivering communications
  - assist in other departments as able

EOP Revisions

Previous page #	New page #	Comments
1	1	Valumart changed to Independent and added Costco

2026

Previous page #	New page #	Comments
2	2	Added note to bring residents to central zone for safety and monitoring if possible

Emergency Operations Plan Quick Action Code Blue: Medical Emergency

Code Blue- life threatening medical emergency usually this means cardiac arrest (when the heart stops) or Respiratory arrest (when breathing stops)

Responsible Staff	Action
Registered staff	Registered staff are notified that someone is experiencing a life threatening medical condition
	Announce Code Blue and location to alert staff to go to the area
	Assess person, level of care and the need for CPR or rescue breathing, (Mouth to Mouth CPR mask is in the medication room beside the fridge)
	Call 911
	Perform CPR if required (ie Resident's Health Care Directive is Level #4, staff member, caregiver/ visitor) until Paramedics arrive and directed to stop
	During CPR assign staff to complete Emergency Operations Worksheet
	Prepare transfer package to send to hospital
	Complete Risk Management/ Progress notes if a resident is involved
	After emergency Notify Administrator, Director of Care
	Document incident on “Emergency Response Form”
	Notify Ministry immediately if an unexpected or sudden death, including a death resulting from an accident or suicide . If after hours call after hours number, if not Administrator/DOC to complete CI.

Infectious disease outbreak
Registered Staff Refer to:

- IPAC Outbreak Investigation & Management
- IPAC Outbreak Team Members Role

Policy:

Code Blue will be called to tell staff that someone is experiencing **a life-threatening medical emergency**. Usually, this means cardiac arrest (when the heart stops) or respiratory arrest (when breathing stops)

Procedure:

Registered staff are notified that someone is experiencing a life-threatening medical condition
Announce Code Blue and location to alert staff to go to the area
Assess person, level of care and the need for CPR or rescue breathing
Perform point of care risk assessment to determine if personal protective equipment (PPE) is required
CPR is an aerosol generating medical procedure (AGMP), staff should wear full PPE (medical mask, eye protection, gown and gloves)
If your risk assessment indicates, staff may want to wear fit-tested N95, eye protection, gown and gloves

- Begin chest compression if required (ie Resident's Health Care Directive is Level #4, staff member, caregiver/ visitor)
- Assign a staff member to call 911 and retrieve Mouth to Mouth CPR mask is in the medication room beside the fridge

Prepare transfer package to send to hospital
Continue CPR until Paramedics arrive and direct to stop
Staff can switch out with another staff member if fatigued
Attempt to have a staff member record
When compressions started
How many rounds have taken place

After emergency
- Notify Administrator, Director of Care
-Complete Risk Management/ Progress notes if a resident is involved
Document incident on paper if staff, caregiver/ visitor involved.

Emergency Operations Plan Quick Action: Community disaster

Emergency Operations Plan Quick Action: Code Purple Community Disaster- Dam Failure

Responsible Party	Action
Code Coordinator	Announce Code Purple: Community Disaster-Dam Failure (within the City of Kawartha Lakes that does not directly affect Pinecrest)
Code Coordinator	Initiate EOP Checklist & EOP Worksheet
Code Coordinator	Notify Administrator (or Director of Care if unavailable)
Code Coordinator or designated as assigned	Post signage “Code Purple- Community Disaster”
	Communication update to all required
All departments	continue to function as usual
Code Coordinator or designate assigned	cancel appointments outside the building if needed
Nurse Clerk	arrange for additional staffing if necessary
	Monitor for ongoing updates of situation
Code Coordinator	prepare to receive residents from an outside facility if required (see Reception Guidelines)
	If situation escalates, may need to consider evacuation EOP_Code_Green

Emergency Operations Plan Quick Action: Code Purple Community Disaster-Nuclear Incident

Responsible Party	Action
Code Coordinator	Announce Code Purple: Community Disaster-Nuclear Incident
Code Coordinator	Initiate EOP Checklist & EOP Worksheet
Code Coordinator	Notify Administrator (or Director of Care if unavailable)
Code Coordinator or designate assigned	Post signage “Code Purple- Community Disaster”
	Communication to all required
All departments	continue to function as usual
Code Coordinator	Monitor for ongoing updates of situation
Code Coordinator	If ingestion control measures implemented, may implement Code Grey-loss of water (contamination)
Food Service Supervisor	Monitor food/fluid supply closely
Code Coordinator	prepare to receive residents from an outside facility if required (see Reception Guidelines)

Emergency Operations Plan Quick Action: Code Purple- Boil Water

Responsible Party	Action	
Code Coordinator	Announce Code Purple: Boil Water & Code Grey- Water Contamination	
Maintenance/owner (if unavailable- Code Coordinator)	Shut off water at Main immediately (see Appendix 1: Building Specific Information)	
Code Coordinator	Initiate EOP Checklist & EOP Worksheet	
Code Coordinator (or designate as assigned)	Notify Owner Notify Maintenance Notify Administrator Director of Care	See Appendix 11
Dietary	Implement “EOP_Dietary”, provide juices and milk for fluids	
Staff member as assigned by Code Coordinator (laundry staff, housekeeper, etc)	Obtain Drinking water through local retail outlets Valu-Mart 705-738-6651 Foodland 705-738-2282 Sobeys 705-887-3611	
	Post signage “Code Purple: Boil Water”	
	Turn off water to all Resident rooms, medication room, diningrooms and washrooms	
	Suspend Tubs if required by City of Kawartha Lakes	
	Turn main water on	
Dietary Staff	Begin follow Boil Advisory instructions	
	Call “Code Grey- All clear”	
Environmental Services	Place ABHR in all resident room and common washrooms	
Code Coordinator	Notify Ministry of Long Term Care of water contamination immediately Administrator or Director of Care to complete the online Critical Incident System or call the Service Ontario after hours reporting line 1-888-999-6973	
	In the event that water supplies will not be returned to normal indefinitely, the decision may be made to initiate Total Evacuation (see Code Green)	

Policy:
Emergency preparedness allows Pinecrest Nursing Home's staff to be prepared in cases of Emergency. In Emergency Planning, residents, staff and visitors health and wellness is the first consideration. In Emergency Operation Plans, Pinecrest Nursing Home will plan to shelter in place, if feasible. At commencement of an emergency, the Code Coordinator will assess if Sheltering in Place is safe, or if evacuation needs to be considered. Code Coordinator will use Appendix 3 “Shelter in Place Decision Tree”.

Pinecrest Nursing Home Staff will follow this plan for a Community Disaster. Community Disasters could include: Dam Failures, Nuclear incident, and Boil Water Advisories.

Hazard Identification and Risk Assessment
Using The Office of the Fire Marshal and Emergency Management's, “Hazard Identification and Risk Assessment Program Methodology Guidelines 2019” the risk was calculated. The Risk of Dam was rated as 20, Nuclear Incident was “44”, and Water Quality issues “32“. These scores using the Hazard Identification Risk Assessment Program methodology Guidelines indicate a “Low Risk”.

Dam Failures are very unlikely to impact Pinecrest Nursing Home and the community. The hazards involved in these community disasters would include: loss of essential services, safety of Pinecrest Nursing Home's structure, flooding, and resource/supply issues. Loss of essential services and flooding each have their own Emergency Operation Plan see “EOP_Flooding” and “EOP_Loss of Essential Service”. Any Dam failures that result in impacts such as flooding will be announced through the City of Kawartha Lakes alerts. Pinecrest Nursing Home's Registered staff, Director of Care and Administrator receive City of Kawartha Lakes alerts through work email.

Unsafe Structure
In the event of a community disaster that resulted in Pinecrest Nursing Home's structure being questioned for safety, or the structure obviously being deemed unsafe (large foundation cracks, obvious structure damage, etc.) staff would follow Code Green: Evacuation.

Nuclear Incident
Darlington Nuclear Generating Station and Pickering Nuclear Generating Station, are the closest stations to Pinecrest Nursing Home. The Darlington nuclear facility consists of one power generating station with four Canada Deuterium Uranium (CANDU) nuclear reactors, each having an electric power generating capacity of 881 megawatts. The Pickering Nuclear facility consists of eight Canada Deuterium Uranium (CANDU) nuclear reactors, grouped as PNGS-A and PNGS-B, each with four reactors. Each of the reactor units was built with an electric power generation capacity of 540 megawatts.

Both facilities have a “Provincial Nuclear Emergency Response Plan (PNERP) Implementing Plan”. In this plan is designated zones that would require different interventions based on their possible exposure to radiation. The “Ingestion Planning Zone” is “A pre-designated area surrounding a reactor facility where plans or arrangements are made to:
a) protect the food chain;
b) protect drinking water supplies;
c) restrict consumption and distribution of potentially contaminated produce, wild grown products, milk from grazing animals, rainwater, animal feed; and Note: Wild-grown products can include mushrooms and game.
restrict distribution of non-food commodities until further assessments”.

For both the Darlington and Pickering stations, the City of Kawartha Lakes is within the “Ingestion Planning Zone”. The Provincial Emergency Operations Centre Commander will follow appropriate notifications based on their Provincial Nuclear Emergency Response Plan (PNERP) and the specific

situation. Pinecrest Nursing Home Administrator and Director of Care will follow and implement directions regarding Ingestion control measures released as per the Provincial Nuclear Emergency Response Plan.

Boil Water Advisory
If a “Boil Water Advisory” is issued by the City of Kawartha Lakes Code Coordinator will initiate a Code Purple. Depending on the instructions issued, Code Coordinator will likely also issue a Code Grey-loss of water as well to provide time to follow the instructions. Code Coordinator will follow “Emergency Operations Plan Quick Action Code Purple Boil Water”.

Typically, when a water boil advisory is announced, instructions will be provided. For most situations, water must be boiled for atleast one minute (that is timed for one minute once it has reached a full rolling boil). The boiled water can be cooled and stored in sterile containers with lids for safe use.

For washing hands, tap water could be used, followed by ABHR- preferably potable water will be used. For brushing teeth, pre-boiled or potable water brought in must be used. It is usually recommended sponge baths (bed baths) to avoid accidental consumption. Any altered skin integrity should be covered with water proof bandages. It is preferred potable water be used if possible. Pinecrest will follow these measures as issued, as well as bringing in water from safe sources.

Housekeeping staff will switch to using premixed bottled chemicals. Laundry services can continue as normal unless otherwise advised.

Once the water advisory has ended, the system will be flushed by running all faucets for atleast 5 minutes (Administrator or designate will consult with City of Kawartha Lakes for recommendations). Code Coordinator announces Code Purple- water boil all clear once all required precautions to return to normal operations are completed.

Resources and Supplies
Pinecrest Nursing Home will keep a 1 month supply of personal protective equipment and 1 month of chemicals. For food and fluids Pinecrest Nursing home has a three daysupply of food and fluid. Incase of an emergency situation where supplies could not be delivered for an extended period of time, Food Service Supervisor or designate would source supplies from alternative retailers (Foodland, Independent, Costco, or Compass meals) or alternative delivery services.

Plan Activation
The plan can be activated by Director of Care, Administrator, or Registered Staff. Notifications of Dam Failures or Nuclear incident and associated hazards that impact Pinecrest Nursing Home or community indicates staff need to activate Community Disaster Plan. If situation requires immediate assistance of more staff, staff to follow Emergency Call in List. If Registered Staff are activating Community Disaster Plan, they should follow Emergency Operations Plan “Section N” for next steps. Once plan is activated, Administrator or designate will send email notification to resident substitute decision makers, staff, volunteers, students, and caregivers to notify of Emergency Operation Activation. Administrator or designate will notify residents by using “Resident Communication Update Form”. The Administrator or designate will update at the beginning, when there is a significant change throughout the emergency and when the emergency is over.

Roles and Responsibilities
See Appendix 1 for Emergency Operation Plan Organization Chart

Role specific to Community Disasters
Administrator

- Code Commander

- Monitor for ongoing updates and directions from PEOC Commander (or may be delegated to PEOC Operations Chief), municipal officials or Office of the Fire Marshal and Emergency Management
- Ensure directions received are implemented
- Communicate updates as they pertain to Pinecrest Nursing Home to residents, substitute decision makers, staff, caregivers, students, volunteers
- Monitor the hazards and identify risks (flooding, supply issues, ingestion measures may affect food supply, etc) on a daily basis
- Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Director of Care, Registered Staff, Physicians, Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency
- Decide ability to shelter in place or need to evacuate using Shelter in Place Decision Tree
- Liaise with municipal officials and Office of the Fire Marshal and Emergency Management as required

Director of Care

- Code Commander
- Ensure Registered staff implementing directions received and overseeing all departments implementing changes
- Monitoring and ensuring adequate medical supplies. Working with distributors to secure supplies and overcome distribution issues related to hazards (i.e. flooding)
- Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Administrator, Registered Staff, Physicians, Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency.
- Decide ability to shelter in place or need to evacuate based on Shelter in Place Decision Tree
- Assess need to implement Contingency plan from Pinecrest's Staffing Plan

Registered Staff

- Code Commander until replaced by Director of Care, Administrator, or external agency (Fire)
- Monitor for communication alerts via general email
- Overseeing direction provided is implemented in all departments
- Ensure resident health and well being
- Contribute to frequent hazard and risk assessment

PSW

- Follow direction provided
- Ensure resident health and well being of residents
- Report concerns to Registered Staff

Food Service Supervisor

- Ensure dietary staff are briefed and following any direction affecting dietary department
- Monitoring and ensuring adequate food/fluid supply
- Working with distributors on an ongoing basis to ensure supply and distribution will not be an issue
- Have EOP Dietary supplies in stock at all times in the situation that there is distribution issues
- Participate in daily Emergency Operations Team Meeting

Dietary Staff

- Follow direction provided by code coordinator and food service supervisor
- Adjust menu appropriately in cases of distribution issues
- Report any concerns to food service supervisor or code coordinator (or Registered Staff in their

absence)

Program Coordinator

- Ensure activity staff are briefed and following any direction provided
- Monitoring residents health and well being
- Assist with coordinating communication and updates as directed by code coordinator
- Participate in daily Emergency Operations Team Meeting

Activity Staff

- Follow direction provided by code coordinator
- Report any concerns to Program Coordinator, Code Coordinator or Registered Staff (in Code/ Program Coordinators absence)

Environmental Services

- Transition to bottled products (discontinue using products from dispenser) as required
- Assist to post signage
- Laundry services continue normal operation if able

Declaring an Emergency Over

In relations to a community Disaster an external support may play a large role in declaring the emergency over. Once the officials for the emergency (PEOC Commander/Operations Chief, municipal officials or Office of the Fire Marshal and Emergency Management or City of Kawartha Lakes) have declared that there is no longer a threat, Administrator and Director of Care will perform a final hazard and risk assessment with a multidisciplinary team to determine if any secondary hazards still remain a risk (i.e. human resource issues, distribution issues, etc). If not, Administrator or Director of Care can declare Community Disaster Emergency over, and move to Recovery Phase.

EOP Community Disaster Revisions

Previous page #	New page #	Comments
2	2	Resources and Supplies- 3 month supply of PPE changed to 1 month, Valumart changed to Independent, Costco added

Emergency Operations Plan Quick Action: Code Orange Natural Disaster

Responsible Party	Action
Code Coordinator	Announce Code Orange: Natural Disaster/Extreme Weather
	Instruct staff to move residents away from windows and close curtains (preventing broken windows/debris from entering)
Code Coordinator	Initiate EOP Checklist & EOP Worksheet
	Turn Battery operated radio to 162.400 (MHz)
Code Coordinator	Notify Administrator (or Director of Care if unavailable)
Code Coordinator or designated as assigned	Post signage “Code Orange Natural Disaster/Extreme Weather”
Maintenance or owner	Check fuel in generator
Administrator	Update required individuals

Policy:
Emergency preparedness allows Pinecrest Nursing Home's staff to be prepared in cases of Emergency. In Emergency Planning, residents, staff and visitors health and wellness is the first consideration. In Emergency Operation Plans, Pinecrest Nursing Home will plan to shelter in place, if feasible. At commencement of an emergency, the Code Coordinator will assess if Sheltering in Place is safe, or if evacuation needs to be considered. Code Coordinator will use Appendix 3 “Shelter in Place Decision Tree”.

Pinecrest Nursing Home Staff will follow this plan for a Natural Disaster and Extreme Weather Events. Natural Disasters and Extreme Weather could include: tornado, hurricane, thunderstorm, high winds, winter storm, ice storm, etc).

Hazard Identification and Risk Assessment
Using The Office of the Fire Marshal and Emergency Management's, “Hazard Identification and Risk Assessment Program Methodology Guidelines 2019” the risk was calculated. The risk of Natural disaster or extreme weather averaged score calculated to be 70. These scores using the Hazard Identification Risk Assessment Program methodology Guidelines indicate a “Moderate Risk”.

Mitigating Hazards
Natural Disasters or extreme weather events are likely to impact Pinecrest Nursing Home and the community. The hazards involved in these disasters would include: loss of essential services, safety of Pinecrest Nursing Home's structure, flooding, staffing issues, and resource/supply issues. Loss of essential services and flooding each have their own Emergency Operation Plan see “EOP_Flooding” and “EOP_Loss of Essential Service”. Pinecrest Nursing Home's Registered staff, Director of Care and Administrator receive City of Kawartha Lakes alerts through work email. If a natural disaster impacted the Community or Pinecrest Nursing Home, Code Coordinator would initiate the EOP_Code Orange Natural Disaster plan. Code Coordinator to follow “Emergency_Operations_Quick_Action_Code_Orange_Natural_Disaster_Extreme_Weather” for next steps. Continue to monitor evolving situation for increased hazards.

Code coordinator will need to monitor, assess and mitigate hazards during an emergency. Code Coordinator should review emergency operations plans for emergencies that may accompany the Code Orange (for example, review Code Grey incase of loss of an essential service). For staffing issues, they may need to make a pre-emptive staffing plan for if staff are unable to make it in (i.e. plan for both Registered Staff to stay and can take turns sleeping if required). If weather is an issue, may need to plan a safe location to huddle/gather residents for safety (i.e. near the nurse’s station where there is no windows, and is most central).

Unsafe Structure
In the event of a Natural disaster that resulted in Pinecrest Nursing Home's structure being questioned for safety, or the structure obviously being deemed unsafe (large foundation cracks, obvious structure damage, etc.) staff would follow Code Green: Evacuation.

Resources and Supplies
Pinecrest Nursing Home will keep a 1 month supply of personal protective equipment and 1 month of chemicals. For food and fluids Pinecrest Nursing home has a three-day supply of food and fluid (see “EOP_Dietary”). Incase of an emergency situation where supplies could not be delivered for an extended period of time, Food Service Supervisor or designate would source supplies from alternative retailers (Foodland, Independent, Costco or Compass meals) or alternative delivery services. CareRx has provisions for drug supply in an Emergency (see “ON LTC Policy 2.5 Disaster-Pandemic-Contingency Plans”).

The Emergency tote is in the treatment room in this tote include a roll of plastic in case needed to

cover broken windows, leak concerns, etc. Other supplies that may be needed for related emergencies include: batteries, walkie talkies, battery operated radio, and flashlights (for a full list of supplies see “EOP_Emergency”).

Plan Activation

Designated code coordinator is most senior supervisor/manager in building at time of incident. Registered Staff will be code coordinator, until replaced by Administrator, Director of Care or external party in specific instances. Once plan is activated, Administrator or designate will send email notification to resident substitute decision makers, staff, volunteers, students, and caregivers to notify of Emergency Operation Activation. Administrator or designate will notify residents by using “Resident Communication Update Form”. The Administrator or designate will update at the beginning, when there is a significant change throughout the emergency and when the emergency is over.

Roles and Responsibilities

See Appendix 1 for Emergency Operation Plan Organization Chart

Role specific to Community Disasters

Administrator

Code Coordinator

Monitor for ongoing updates and directions from municipal officials, local weather advisors, or Office of the Fire Marshal and Emergency Management

Ensure directions received are implemented

Communicate updates as they pertain to Pinecrest Nursing Home to residents, substitute decision makers, staff, caregivers, students, volunteers

Monitor the hazards and identify risks (flooding, supply issues, ingestion measures may affect food supply, etc) on a daily basis

Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Director of Care, Registered Staff, Physicians (as available), Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency

Decide ability to shelter in place or need to evacuate using Shelter in Place Decision Tree

Liaise with municipal officials and Office of the Fire Marshal and Emergency Management as required

Director of Care

- Code Coordinator
- Ensure Registered staff implementing directions received and overseeing all departments implementing changes
- Monitoring and ensuring adequate medical supplies. Working with distributors to secure supplies and overcome distribution issues related to hazards (i.e. flooding)
- Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Administrator, Registered Staff, Physicians, Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency.
- Decide ability to shelter in place or need to evacuate based on Shelter in Place Decision Tree
- Assess need to implement Contingency plan from Pinecrest's Staffing Plan

Registered Staff

- Code Coordinator until replaced by Director of Care, Administrator, or external agency (Fire)
- Monitor for communication alerts via general email
- Overseeing direction provided is implemented in all departments
- Ensure resident health and well being
- Contribute to frequent hazard and risk assessment

PSW

- Follow direction provided
- Ensure health and well being of residents
- Report concerns to Registered Staff

Food Service Supervisor

- Ensure dietary staff are briefed and following any direction affecting dietary department
- Monitoring and ensuring adequate food/fluid supply
- Working with distributors on an ongoing basis to ensure supply and distribution will not be an issue
- Have EOP Dietary supplies in stock at all times in the situation that there is distribution issues
- Participate in daily Emergency Operations Team Meeting

Dietary Staff

- Follow direction provided by code coordinator and food service supervisor
- Adjust menu appropriately in cases of distribution issues
- Report any concerns to food service supervisor or code coordinator (or Registered Staff in their absence)

Program Coordinator

- Ensure activity staff are briefed and following any direction provided
- Monitoring residents health and well being
- Assist with coordinating communication and updates as directed by code coordinator
- Participate in daily Emergency Operations Team Meeting

Activity Staff

5. Follow direction provided by code coordinator
6. Report any concerns to Program Coordinator, Code Coordinator or Registered Staff (in Code/ Program Coordinators absence)

Environmental Services

- Transition to bottled products (discontinue using products from dispenser) as required
- Assist to post signage
- Laundry services continue normal operation if able

Declaring an Emergency Over

In relations to a Natural Disaster an external support may play a large role in declaring the emergency over. Once the officials for the emergency (PEOC Commander/Operations Chief, municipal officials or Office of the Fire Marshal and Emergency Management or City of Kawartha Lakes) have declared that there is no longer a threat, Administrator and Director of Care will perform a final hazard and risk assessment with a multidisciplinary team to determine if any secondary hazards still remain a risk (i.e. human resource issues, distribution issues, etc). If not, Administrator or Director of Care can declare Community Disaster Emergency over, and move to Recovery Phase.

EOP Natural Disaster Revisions

Previous page #	New page #	Comments
1	1	Resources changed valumart to independent, 3 month supply of PPE to 1 month supply

1	1	Resources- The Emergency tote is in the treatment room added “in this tote include a roll of plastic in case needed to cover broken windows, leak concerns, etc. “
2	2	Code Commander to Coordinator

2026

Previous page #	New page #	Comments
1	1	Added paragraph title “mitigating hazards”, included staffing issues as hazard
1	1	Recalculated risk score- 70, remains “Moderate” category
2	2	Added Code Coordinator needs to assess and mitigate hazards, included staff, structure, loss of service examples
2	2	Added more information on emergency tote, added CareRx policy name for emergencies

Emergency Operations Code Brown Quick Action: Chemical Spill & Gas Leak

Responsible	Action	
Code Coordinator	Announce Code Brown- Chemical Spill inside Pinecrest	
	Remove Residents, visitors, staff away form immediate area	
	Block off area surrounding spill	
	Refer to MSDS or SDS for direction on spill	
Maintenance or Code Coordinator	If flammable, remove heat & turn electrical power to affected room	
	Staff in area to wear PPE as directed by SDS	
	Housekeeping staff to clean as per MSDS or SDS requirement If easy to clean, no further action	
	If hazardous substance, continue to investigate and contact Poison Control or Emergency services as necessary	1-800-268-9017 911
	Initiate EOP Checklist & EOP Worksheet	
	Notify Administrator and maintenance	
	Take Direction from emergency personnel	

Administrator/ Code Coordinator	When situation is under control and safe to do so, announce All Clear

Responsible	Action
Individual Suspecting Gas Leak	Notify Registered staff and call 911
Code Coordinator	Announce Code Brown- Gas Leak inside Pinecrest
	Remove Residents, visitors, staff away from immediate area
	Block off area to gas leak
	Shut off propane at Propane tanks (See site map)
	Initiate EOP Checklist & EOP Worksheet
	Notify Administrator, Maintenance and owner
	Take Direction from emergency personnel
	Assign staff to monitor individuals exposed
Administrator/ Code Coordinator	When situation is under control and safe to do so, announce All Clear

Responsible	Action
Code Coordinator	Announce Code Brown- Chemical Spill & Gas leak outside Pinecrest
	Initiate EOP Checklist & EOP Worksheet
	Restrict access to/from outside if required
	Close windows
	Shut off air intake (Mechanical room-43)
	Contact Administrator and Director of Care
	Follow instructions of City Of Kawartha Lakes or Emergency personnel
	If indicated by City or Emergency responders, prepare to evacuate “Code Green”
Administrator/ Code Coordinator	When situation is under control and safe to do so (as directed by officials), announce All Clear

Environmental Spill Reporting – 1-800-267-7270
Poison control: 1-800-268-9017

Policy:
Emergency preparedness allows Pinecrest Nursing Home's staff to be prepared in cases of Emergency. In Emergency Planning, residents, staff and visitors health and wellness is the first consideration. In Emergency Operation Plans, Pinecrest Nursing Home will plan to shelter in place, if feasible. At commencement of an emergency, the Code Coordinator will assess if Sheltering in Place is safe, or if evacuation needs to be considered. Code Coordinator will use Appendix 3: “Shelter in Place Decision Tree”.

Hazard Identification and Risk Assessment
Using The Office of the Fire Marshal and Emergency Management's, “Hazard Identification and Risk Assessment Program Methodology Guidelines 2019” the risk was calculated. The Risk of Chemical Spill was 33 and Gas Leak was 56. Both of these scores average using the Hazard Identification Risk Assessment Program methodology Guidelines indicate a “Low Risk”.
Most chemicals within Pinecrest Nursing Home can be carefully cleaned up by staff with low risk and minimal incident. Gas leaks in Pinecrest Nursing Home or the surrounding community could occur. Pinecrest has prevention measures in place to monitor for gas leaks in the home. Both the rooms that house appliances using propane have Dyson monitored carbon monoxide detectors.

Chemical Spill
All chemicals within Pinecrest Nursing Home have MSDS or SDS sheets. They can be found in each department for department specific chemicals, as well as a main copy at the Nurses' station, and under booked marked on Pinecrest desktops, “PNH>WHMIS” and search specific product. Most products can be cleaned up by staff, with proper equipment without incident. Staff should exercise caution when cleaning spill for the safety of themselves and others.

Gas leak
Internal
Carbon Monoxide
Pinecrest Nursing Home has propane for the water heater and dryers. Both the mechanical room and laundry room that house these appliances are equipped with carbon monoxide monitors that Dyson Alarm monitor.
Note: In a power/generator failure these will no longer be functioning. Staff will need to self-monitor for symptoms of carbon monoxide exposure. Symptoms include:

- Headaches
- nausea
- dizziness
- burning eyes
- loss of coordination, and
- confusion.

Plan Activation
The plan can be activated by Director of Care, Administrator, or Registered Staff. If there is a chemical spill inside Pinecrest that can not be easily or safely managed by staff, designated Code Coordinator will initiate Code. If there is a Chemical spill or gas leak outside of Pinecrest advised by city officials or emergency personnel, Code Coordinator will announce Code and follow “Emergency Operations Plan Quick Action: EOP Code Brown for required actions. If there is a gas leak inside Pinecrest, the individual that discovered the gas leak is to call 911 and notify Registered Staff. Code Coordinator will then follow “Emergency Operations Plan Quick Action: EOP Code Brown” for required actions. Once situation is under control and able to do so, Code Coordinator to announce “Code Brown all clear”.

Administrator or Director of Care to move to recovery phase.

Role specific to Community Disasters
Administrator

- Code Coordinator
- Monitor for ongoing updates and directions from municipal officials or Emergency Personnel (external Chemical Spill or Gas Leak)
- Ensure directions received are implemented
- Communicate updates as they pertain to Pinecrest Nursing Home to residents, substitute decision makers, staff, caregivers, students, volunteers
- Monitor the hazards and identify risks (supply issues, staffing issues) on a daily basis
- Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Director of Care, Registered Staff, Physicians, Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency
- Decide ability to shelter in place or need to evacuate using Shelter in Place Decision Tree with consultation of officials if an external incident
- Liaise with municipal officials and Emergency Personnel

Director of Care

- Code Coordinator
- Ensure Registered staff implementing directions received and overseeing all departments implementing changes
- Monitoring and ensuring adequate medical supplies. Working with distributors to secure supplies and overcome distribution issues related to hazards (i.e. blocked roads)
- Reassess hazards and associated risks to Pinecrest (considering residents and staff safety) with Administrator, Registered Staff, Physicians, Food Service Supervisor, daily during 10 am Emergency Operations Team Meeting or with any change in ongoing emergency.
- Decide ability to shelter in place or need to evacuate based on Shelter in Place Decision Tree

Registered Staff

- Code Coordinator until replaced by Director of Care, Administrator, or external agency (Emergency Personnel)
- Overseeing direction provided is implemented in all departments
- Ensure resident & staff health and well being
- Assign staff to monitor individuals with potential exposure to gas leak
- Contribute to frequent hazard and risk assessment

PSW

- Follow direction provided
- Ensure health and well-being of residents
- Report concerns to Registered Staff

Food Service Supervisor

- Ensure dietary staff are briefed and following any direction affecting dietary department
- Monitoring and ensuring adequate food/fluid supply
- Working with distributors on an ongoing basis to ensure supply and distribution will not be an issue
- Have EOP Dietary supplies in stock at all times in the situation that there is distribution issues
- Participate in daily Emergency Operations Team Meeting

Dietary Staff

- Follow direction provided by code coordinator and food service supervisor

- Adjust menu appropriately in cases of distribution issues
- Report any concerns to food service supervisor or code coordinator (or Registered Staff in their absence)

Program Coordinator

7. Ensure activity staff are briefed and following any direction provided
8. Monitoring residents health and well being
9. Assist with coordinating communication and updates as directed by code coordinator
10. Participate in daily Emergency Operations Team Meeting

Activity Staff

- Follow direction provided by code coordinator
- Report any concerns to Program Coordinator, Code Coordinator or Registered Staff (in Code/ Program Coordinators absence)

Environmental Services

- Transition to bottled products (discontinue using products from dispenser) as required
- Assist to post signage
- Review MSDS or SDS for spill product
- Clean spill according to MSDS (if safe to do so)
- Laundry services continue normal operation if able

Maintenance

- Shut off propane (for internal leak)
- Shut off air intake for external chemical spill/ gas leak
- Assist emergency personnel as needed

If required, code coordinator will contact poison control or environmental Spill reporting.

EOP Code Brown Revisions

2023

Previous page #	New page #	Comments
2	2	Code Commander to Coordinator

Emergency Operations Code Black Quick Action: Bomb Threat

Responsible	Action	
Individual receiving call	Grab any paper and obtain as much information as possible including what they say, what you notice about the caller, the call itself (i.e. background noise), ask specific questions if able (bomb location, when it will detonate, type of bomb, etc)	
	If not Registered staff, calmly notify Registered Staff	
	Registered Staff assume “Code Coordinator” role until replaced by authorities	
Code Coordinator or designate	Call police	
	Announce Code Black and ask all staff to the Nurses station	
	Pull Bomb Threat Worksheet	
Individual that received the call	Go to quiet, uninterrupted area to complete “Bomb Threat Call Report”	
	If suspicious package identified, Code coordinator determines if evacuation necessary, and which type of evacuation necessary	
	If evacuation required, see EOP_Code Green	
	Administrator DOC Owner	See Appendix 11
	Initiate EOP Checklist & EOP Worksheet	
	Take Direction from emergency personnel	
Administrator/ Code Coordinator	When situation is under control and safe to do so, announce All Clear	

Description

Bomb threats usually fall into two categories; those which threaten the entire building and those which threaten one particular area. The procedure for dealing with both is basically the same; however, the number of people involved will vary depending on the area affected.

Bomb threats are normally transmitted by telephone and the person receiving the call should obtain as much information as possible. Try to stay calm - if you appear upset, frightened or nervous to the caller, he/she is less likely to stay on the line. By staying calm and in control of your voice level, you are more likely to keep the caller calm.

To allow yourself time to react, ask the caller to repeat what they have said.
Try to collect as much information as possible including:

1. The time the call was received and on what telephone number.
2. The exact words of the person making the call including location of bomb, description and time factor involved.
3. Whether the caller is a male or female and approximate age.
4. Does the caller have an accent? Possible origin?
5. Does the caller sound intoxicated or unbalanced?
6. Background noises such as traffic, music, other voices, etc.
7. Is the voice familiar? if so, who does it sound like?

If you are able, try to ask questions such as:

- When is it set to explode?
- Where Located? Floor _____ Area _____
- Kind of bomb? _____
- Description?_____
- Why kill or injure innocent people? _____

If you are not a Registered Staff or Manager, immediately notify the Registered Staff of the call.

The Registered Staff will become the Code Coordinator.
Pull Bomb Threat Worksheet from disaster manual and follow the steps outlined there.
The worksheet will lead the Code Coordinator through the event in a predetermined format.

Call police 911

The individual receiving the call should complete the Bomb Threat Report as soon as possible after the call has ended and include as much detail as can be recalled. The Bomb Threat Report is included with the Bomb Threat Worksheet located in the Emergency Operation Manual at the nursing station.

The Code Coordinator will announce over the P.A. System,
*"ATTENTION All Staff, We Have A **Code Black**. Please Report To The Nursing Station Immediately"*
and repeat the announcement. All staff report immediately to the Nursing Station

The Code Coordinator will inform staff of the bomb threat, direct staff to return to their work area, (assign 1 or 2 staff to center core) get a count of residents in each of the nursing home areas and ensure all residents are safe while waiting for the police to arrive.

Staff are to report any unusual findings to the Code Coordinator immediately.

It is up to the Code Coordinator to decide if a particular area of the nursing home or the entire nursing home will be evacuated based on the call that is received and any unusual findings reported by staff.

The Code Coordinator should notify the Administrator, Owner and Director of Care of the threat if they are not in the building

SET UP COMMAND CENTRE AT NURSING STATION. The Code Coordinator is not to leave the command post. All direction is to be issued from the command center by the Code Coordinator until the Police or Fire Department arrives. They will work with the Official, acting as Pinecrest liaison.

Staff will **FOLLOW ALL DIRECTIONS BY THE OFFICIAL ON SITE.**

Administrator/DOC or designate will communicate with all residents, substitute decision makers, staff, volunteers, students, caregivers, Resident's Council, and the Family Council on the emergency in the home. This communication will take place at the beginning of the emergency, when there is a significant change throughout the course of the emergency and when the emergency is over. How this communication takes place and what is communicated will be at the discretion of the Administrator/DOC in conjunction with the official on site.

INITIATE SEARCH PROCEDURE

The police will ask staff who are familiar with the nursing home to assist in the search of the building (Police or other persons responding would not be familiar with the normal contents of the resident's rooms, storage areas, etc.)

The search is directed and documented by the Code Coordinator. The Code Coordinator will divide staff into four teams, each team assigned to search one of the four fire zones in the building. The Code Coordinator will record the areas searched, who was on each team, and all information reported by the team on the Bomb Threat Worksheet – (if 2 registered staff on duty, one to check Room 68, med room, treatment room, Office 33 or give fire keys to a staff member)

When searching the building:

KNOW WHAT TO LOOK FOR:

- any unusual package, box or container which is not readily recognized.
- any rearrangement of items which would not be expected, eg. Bookshelves, caddies, linens, etc. which may hide an object.
- complaints or comments from residents about an unusual visitor, etc.

Staff should check each room in their assigned area including:

closets and wardrobes
bathrooms
dressers
under beds
trunks or cupboards belonging to residents
utility areas
storage areas, mechanical rooms and offices

Place a towel outside each door to indicate room has been searched

Report back to the Command Center to give report and for reassignment by Code Coordinator

Report any unusual findings to Command Center <u>immediately</u>

When completed, wait instructions re: action and/or evacuation.

At all times Remain calm. A panic stricken staff member is a liability to the ability of the code coordinator to maintain order and prevent resident panic.

It has been recommended that a person who panics and leaves the site should be let go, in the interest of panic control and the need to address the immediate safety concerns of the residents and staff. Don't waste your time chasing the staff member.

Role specific to Bomb Threat
Administrator

- Code Coordinator
- Monitor for ongoing updates and directions from official onsite
- Ensure directions received are implemented
- Communicate updates as they pertain to Pinecrest Nursing Home to residents, substitute decision makers, staff, caregivers, students, volunteers
- Monitor the hazards and identify risks (safety and well-being of staff and residents)
- Decide ability to shelter in place or need to evacuate using Shelter in Place Decision Tree with consultation of officials
- Liaise with officials and Emergency Personnel

Director of Care

- Code Coordinator
- Ensure Registered staff implementing directions received and overseeing all departments implementing changes
- Monitoring and ensuring adequate medical supplies.
- Reassess hazards and associated risks to Pinecrest (considering residents and staff health and well-being)
- Decide ability to shelter in place or need to evacuate based on Shelter in Place Decision Tree

Registered Staff

- Code Coordinator until replaced by Director of Care, Administrator, or external agency (Emergency Personnel)
- Overseeing direction provided is implemented in all departments
- Ensure resident & staff health and well being
- Assign staff to monitor home areas
- Contribute to frequent hazard and risk assessment
- Assign staff involved in search as directed by Emergency Personnel

PSW

11. Follow direction provided
12. Ensure health and well being of residents
13. Report concerns to Registered Staff immediately

Food Service Supervisor

- Ensure dietary staff are briefed and following any direction affecting dietary department
- Monitoring and ensuring adequate food/fluid supply
- Report any concerns immediately to Code Coordinator and/or Emergency Personnel
- Participate in daily Emergency Operations Team Meeting

Dietary Staff

- Follow direction provided by code coordinator and food service supervisor
- Adjust menu appropriately if required
- Assist in search as able
- Report any concerns to code coordinator

Program Coordinator

- Ensure activity staff are briefed and following any direction provided
- Monitoring residents health and well being
- Assist with coordinating communication and updates as directed by code coordinator

Activity Staff

- Follow direction provided by code coordinator
- Report any concerns to Code Coordinator or Emergency Personnel

Environmental Services

- Assist in coordinated search if able
- Follow directions from code coordinator or emergency personnel

Maintenance

- Assist emergency personnel as needed

Risks and Hazards:
If a bomb is located, the official on site will determine the next steps (i.e. evacuate immediate area, evacuate building, etc.)

Evacuation: if evacuation procedures are initiated, follow the direction of the Code Coordinator to ensure an orderly and safe evacuation refer to Code Green evacuation procedure in the Emergency Operations Manual

Debriefing: After the bomb threat episode is over, all involved parties will assemble for a debriefing, that is, a complete review of the situation (what went wrong, what was done well, changes to be implemented in the policy and procedure.) Code Coordinator, DOC or Administrator will complete Emergency Recovery Form.

Review of Emergency
This emergency plan will be reviewed and updated annually. The emergency plan will also be evaluated and updated within 30 days of being declared over, after each instance that an emergency plan is activated. Entities involved in the emergency response will be provided a chance to review emergency plan, review changes being made, and given a chance to offer feedback. The emergency plan will be tested every three years.

Refer to:
Code Black Worksheet
Bomb Threat Call Report

Reception of Evacuees

Upon receiving notification that we have been requested to receive evacuees from another facility, the following procedure will be followed:

	Who	What
Authorization For Reception	Registered Staff	Contact Administrator or Director of Care for Authorization for the reception of residents from an outside facility in an emergency situation
Preparing For Reception During Business Hours	Administrator & Director of Care	– immediately call a meeting of the Registered Staff, Nurse Clerk, and representatives from Dietary, Activities, Housekeeping and Maintenance to advise them of the situation and delegate duties. – Contact the Advisory Physician to advise of impending reception – Initiate & submit a Critical Incident Report form identifying this as a "Critical Incident" – should also contact HCCSS to notify that receiving residents from elsewhere – Direct Nurse Clerk to contact staff if it is determined that additional staff are required.
Outside normal working hours	Charge Nurse	– Phone the MOHLTC After Hours Pager to report intake of evacuees from another facility – contact HCCSS – notify the Administrator and/or Director of Care of the request to receive evacuees. – contact Nurse Clerk, to come to assist with reception – Notify Maintenance, Dietary Supervisor, Housekeeping/ Laundry and request they come to Pinecrest
	Receiving evacuees	
Reception Area		Upon arrival, all evacuees are to be directed to the Nursing Station
Registration and Admission	Director of Care, Registered Staff,	– Document the following information from each evacuee: name, address, age, sex, next of kin – Receive any paperwork, medications accompanying the evacuee – Apply an identification bands if they do not already have one.
		- If the evacuees are coming from Case Manor, it would be hoped that a staff member from there would be able to come here at some point and using their remote access, provide the Resident's plan of care, and medication records from Point Click Care.
Nursing and Personal Care	PSWs	Nursing Staff will provide the care required to the incoming evacuees.

		Any staff from the evacuated facility are to perform their regular functions in the Home under the direction of the supervisory staff at the facility.
Medical Care	Medical Director	– will examine and assess the evacuees as required and attend to any emergencies. – MD/NP/Paramedics to assist as required
Inquiries	Nurse Clerk	The Nurse Clerk will receive and respond to inquiries regarding evacuees.
Medical Supplies:		– Medical supplies which are normally stocked in the Home should be adequate to enable staff to cope with the intake of evacuees. – Provision of emergency medication supplies are not necessary, as evacuees would have to have their medication re-ordered by the Medical Director

Duties

Nurse Clerk

- arrange extra nursing staff to assist with evacuees
- arrange additional dietary staff to assist in the kitchen
- arrange an additional registered staff (RPN) to assist with medication administration of evacuees

Food Service Supervisor:

- review current day menu and revise to accommodate additional individuals
- develop of supplies required from local sources (for example: additional food, paper, disposable dishes, cutlery)
- assist Dietary staff with preparation and food service

Housekeeping:

- Collect required supplies – sheets, pillows, blankets, towels, facecloths.

- Maintenance:
  - Pick up needed supplies as directed by Administrator, Director of Care and Dietary Supervisor.
  - Retrieve any extra mattresses from storage as well as bed frames, lounge chairs and set up in designated areas.

- Activation
  - Assist with welcoming evacuees, helping to register, showing to common area
  - Assist with meal and nourishment service
  - Other duties as delegated by Administrator, DOC and Registered Staff