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	<b>SECTION: Section 4 - Education and Training</b>	
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<b>REVIEWER: Emergency Preparedness and Response Lead</b>	<b>APPROVER: CEO</b>	
<b>SUBJECT: 4.02 – Emergency Codes and Drills</b>		

## 1.0 POLICY

Hillel Lodge must practice response to all colour codes at least once per year. Colour codes must be included in orientation of new staff, volunteers and contract service providers. An established ERP must be available and understood by all staff, volunteers and contracted service providers, who must participate in emergency preparedness activities, training, drills and evacuation procedures.

## 2.0 SCOPE

Response to code exercise drills and/or actual situations requires the attention and participation of every employee, volunteer, contracted service providers and visitor to Hillel Lodge. Resident visitors and business visitors must be prepared to listen to announcements and follow the instructions of employees responding to the emergency.

## 3.0 ACCOUNTABILITY/APPROVAL/EVALUATION

This policy will be reviewed annually or as required, by the Emergency Preparedness and Response Lead and approved by the CEO. Any changes resulting from reviews and/or related legislative changes will be communicated.

## 4.0 COMMUNICATION/TRAINING

Training in the Emergency Preparedness and Response plan is required upon orientation of new hires, volunteers and contracted service providers and must be reviewed annually. Exercises can be developed to test essential elements, interrelated elements, or the entire plan(s). These can take the form of table-top exercises, drills, functional exercises, and field exercises.


## 5.0 PROCEDURE

### COLOUR CODES – OVERVIEW

The following overview of the colour codes is a condensed version of the code training provided to the employees:

#### 1. **Code Red: FIRE**

- alarm sounds to alert occupants that the homes fire safety system has detected the possibility of fire. This can be through the numerous sensors throughout the home or when a manual pull station has been activated.
- Elevators will immediately return to the main floor for firefighter access. **No one is to use the elevators and only staff should use the stairwells which are opposite the fire zone.**
- The incident manager immediately checks the fire panel closest to them (located on each

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floor and at reception) for the location of the fire;

- Once known, an announcement is made over the PA system;
- Staff immediately perform the following:
  - listen to the announcement for the location of the fire;
  - return to their assigned area;
  - If a fire is located in their area, ensure that Residents closest to the site of the fire are moved first, escorted beyond the fire separation doors into a designated safe zone; all remaining residents within the fire zone are then safely moved to the designated safe zone;
  - Visitors must follow staff instructions; and,
  - Other floors/areas follow their pre-planned procedures for responding to a Code Red.

## 2. **Code Blue: Medical Emergency**

Will be used to alert staff in the home of a medical emergency and provide a systematic approach for the response:

- Upon the discovery of a person in distress (ie. Cardiac/respiratory arrest; seizure; choking etc.) staff must pull the nearest call bell or call out “Code Blue”;
- Staff will use the fire panel to announce “Code Blue” with location;
- The DOC/ADOC/Charge RN/RPN will immediately go to the announced area and bring the necessary emergency equipment;
- 911 will be notified as directed (if appropriate); and,
- The DOC/ADOC/Charge RN are responsible for directing the Code Blue


## 3. **Code Orange: External Disaster**

The home will be prepared to receive and treat a sudden influx of people requiring emergency care due to an external or natural disaster such as a tornado, earthquake, hurricane or severe storm, while ensuring the safety and care of existing residents, staff, volunteers and visitors. The home will enact appropriate emergency responses to natural/external disasters as directed by IMS leaders. Emergency officials will declare when a Code Orange is over. <sup>1</sup>

## 4. **Code Green: Evacuation**

A Code Green Emergency is a critical incident that requires evacuation. The longer it takes to evacuate the area of hazard, the greater the risk to residents, staff and others in the home. During an emergency, such as a fire/explosion, bomb threat, community disaster (e.g. toxic spill, tornado), or structural failure (e.g. roof collapse), the evacuation of all or a portion of the building

<sup>1</sup> Extendicare: [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

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may be required to protect the health and safety of the residents, staff and visitors.

Evacuations may follow the staged approach or may begin in any one of the 3 stages:

**Stage 1-** Partial horizontal evacuation, moving from one area of the floor to another area of the same floor behind fire barrier doors. Note, it is permissible to cross in front of the room that contains the fire if the room has a fire rated door that is closed.

**Stage 2-** Partial evacuation of a larger area, such as an entire unit or multiple units. This could continue to be a horizontal evacuation or a vertical evacuation, moving from one floor towards the ground floor.

**Stage 3-** Full evacuation of the building to an external refuge location<sup>2</sup>

As an external evacuation can be a stressful time, it is important that the Incident Manager/Designate be able to utilize the Job Action checklists found in the ERP to ensure that all steps critical to implement the evacuation procedures are used to safely guide employees, Residents and visitors.

**5. Code Yellow: Missing Person**

Residents are considered missing when they are not in a location where staff can find them and are not signed out of the home. Residents are encouraged to move freely in the home except in areas considered to be hazardous. Some residents may be restricted to designated areas for their own health and safety, unless accompanied by a designated person. As soon as a resident is noted as missing, a Code Yellow procedure, which is an immediate and systematic search of the home and external surrounding area, will be followed.<sup>3</sup>

**6. Code Black: Bomb Threat**

Employees are to follow the procedures as outlined in the Emergency Preparedness and Response Manual: EP-11-01-01

**7. Code White: Violent Situations**


These situations include any violent or aggressive individual(s) in the home. In situations where assistance in de-escalation and/or control of the disruption/violence is necessary, responding staff must use non-violent, verbal interventions. The primary aim is to remove everyone from the situation to minimize risk of injury.<sup>4</sup>

Staff have been trained on de-escalation techniques to assist with minimizing further risk and threat of harm to others. They are to ensure that when a Code White is announced that their

<sup>2</sup> [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

<sup>3</sup> [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

<sup>4</sup> [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

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immediate reaction when attending is to ensure that surrounding residents are guided away from the area to safety. Having a point person delegated to reassure the individual who is exhibiting violent behaviour, assists with the de-escalation process. If unsuccessful, 911 must be notified.

#### 8. **Code Purple: Hostage Situation**

Code Purple is the designated emergency response code implemented to communicate and activate a standard organizational response to an incident in which any individual/ individuals are confined forcibly, seized or detained against their will with the involvement of a weapon or threat of violence. The main objectives of activating the Code Purple Emergency Response Plan are:

- To minimize risk and preserve the safety of residents, staff, physicians, visitors, volunteers, and any contractors that may be on-site at the time of the incident; and
- To trigger an immediate response from police services.

The Code Purple policy can be initiated by any member of staff who witnesses a hostage situation that requires an immediate police service notification and response by activating the actions outlined in this policy.<sup>5</sup>

#### 9. **Code Grey: Infrastructure Disruption/Failure**

Response plans for the following are available:


- Code Grey – Building Flood
- Code Grey – Internet Outage
- Code Grey – Water Supply
- Code Grey – Air Exclusion
- Code Grey – Carbon Monoxide
- Code Grey – Essential Services (power, life safety systems etc.)

The Incident Manager is responsible for the coordination of the response plans associated with the determined emergency by ensuring plans are initiated and applicable checklists are utilized.

#### 10. **Code Brown: Chemical Spill**

When hazardous materials are unexpectedly released and/or the size of the spill prevents staff from carrying out a safe cleanup, a Code Brown incident must be called. Staff must be trained in the safe handling, storage and disposal of hazardous chemicals such as WHMIS. A designated Spill Response Team must be trained to clean up hazardous material, untrained staff should not attempt a hazardous spill clean-up without direction from a trained staff member. If no trained staff member can be contacted and the spill is not severe, block off the area and ensure no one goes near it until a trained staff member arrives. If the spill is severe, contact the CEO/ESM who

<sup>5</sup> [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

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may call an outside company for clean up. As soon as a chemical spill is discovered, actions must be taken to assess the situation, protect the health and safety of everyone in the area, and initiate clean up in accordance with the Safety Data Sheets (SDS). Flammable spills or spills that caused injury or illness require the immediate assistance of emergency services.<sup>6</sup>

### 11. Code Silver: Active Assailant

Homes will provide a safe environment for residents, families, staff, volunteers and visitors. If an active assailant situation occurs, the primary aim is to remove all individuals from the situation or area, as quickly as possible, to minimize casualties and to have the police respond and manage the incident. Code Silver – Active Assailant is the designated emergency response code implemented to communicate and activate a standard organizational response to an incident in which a weapon is being used by an individual(s).<sup>7</sup>

In addition to the procedures associated with a Code Silver, Hillel Lodge has developed policies and procedures such as Reception Security, Shelter in Place and Lockdown.

#### **Fire Safety**

1. Hillel Lodge must have an approved Fire Safety Plan;
2. Fire Drills must be conducted three (3) times per month, once on each shift;
3. Fire extinguisher training is conducted at the home;


#### **Evacuation Exercise:**

LTCHs are required under ss. 268(10)(c) of O. Reg. 246/22 to complete a planned evacuation every three years, to ensure that staff are familiar with the planned evacuation procedures and can transfer residents to a point of safety or out of the building in an emergency. A full-scale exercise or drill can be conducted to test the staff performance against the planned procedure. As per ss. 268(10)(d) of O. Reg. 246/22, the LTCH must keep a written record of testing emergency plans and any changes made to improve the plans. If during an evacuation or drill, problems or difficulties were identified, the written record should include what recommendations were made for corrective measures, responsibility for taking corrective action, and time frames for corrective actions.<sup>8</sup>

<sup>6</sup> [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

<sup>7</sup> [emergency-preparedness-and-response-manual-2024 \(22\).pdf](#)

<sup>8</sup> [LTC Emergency Preparedness Manual.pdf \(ltchomes.net\)](#)

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**O. Reg. 246/22 S.268 (10)**

**(10) The licensee shall,**

**(a) on an annual basis test the emergency plans related to the loss of essential services, fires, situations involving a missing resident, medical emergencies, violent outbursts, gas leaks, natural disasters, extreme weather events, boil water advisories, outbreaks of a communicable disease, outbreaks of a disease of public health significance, epidemics, pandemics and floods, including the arrangements with the entities that may be involved in or provide emergency services in the area where the home is located including, without being limited to, community agencies, health service providers as defined in the Connecting Care Act, 2019, partner facilities and resources that will be involved in responding to the emergency;**

**(b) test all other emergency plans at least once every three years, including arrangements with the entities that may be involved in or provide emergency services in the area where the home is located including, without being limited to, community agencies, health service providers as defined in the Connecting Care Act, 2019, partner facilities and resources that will be involved in responding to the emergency;**

**(c) conduct a planned evacuation at least once every three years; and**

**(d) keep a written record of the testing of the emergency plans and planned evacuation and of the changes made to improve the plans**

### **Resources**

[Fixing Long-Term Care Act, 2021, S.O. 2021, c. 39, Sched. 1](#); O.Reg. 246/22 S. 268 Emergency Plans [LTC Emergency Preparedness Manual.pdf \(ltchomes.net\)](#)