



Crown Ridge Health
Care Services Inc.

EMERGENCY PREPAREDNESS PLAN

2025-2026

Crown Ridge Health Care Emergency Preparedness and Plan Index

1. Administrative Statement
2. Building Structure and Safety Systems
3. Emergency Plan Policy
4. Emergency Codes
5. Code Red
6. Code Green
7. Code Blue
8. Code White
9. Code Yellow
10. Code Grey
11. Code Brown
12. Code Silver
13. Code Black
14. Code Purple
15. Code Orange

 Crown Ridge Health Care Services Inc.	Health and Safety Manual		Policy No.	HS: 1.1
	Commitment to Emergency Planning and Safety		Effective:	January 2005
			Reviewed:	January 2025
	Divisions:	10,20, 30, 40	Approved By:	Leslie Morrow

The management of Crown Ridge Health Care Services is committed to ensuring the health and safety of its residents, visitor, employees, volunteers, community and the environment. It is our mandate to ensure that policies are in place to identify, prevent and/or eliminate unsafe acts and conditions, to ensure a hazard free workplace and respond appropriately to emergency situations. An emergency preparedness plan and fire safety plan has been developed in conjunction with senior members of the management team, health and safety team members, quality improvement team members and community partners to meet requirements of all legislation. The plans are part of mandatory education to all employees of Crown Ridge Health Care, initially reviewed at the time of initial employment and annually thereafter.

Plans are tested as per legislative requirements and we are committed to responding to any recommendations, identifying and rectifying potential problems areas, promoting safety and co-operation between all parties. Records of the review are maintained and any changes to policies and procedures are communicated to all staff, residents, visitors and community agencies.

Objectives

All supervisors and Workers are dedicated to the continuing objectives of reducing risk and promoting safety. Supervisors are responsible for the health and safety of residents, volunteers, visitors and workers under their supervision, ensuring a safe environment and adequate training.

Supervisors and staff will focus on initial response to the emergency situation with an aim to initiate controls to stabilize the emergency, maintain safety, provide reassurances and assist emergency response personnel upon their arrival on scene.

Responsibilities

Supervisors and employees are responsible for:

- Maintain resident safety
- Prevent injury
- Assist in restoration of services
- Support community

All employees are responsible for review and understanding of the home's emergency response plans to ensure the safety of all.

Administrator

Date

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

Building Structure and Safety System

Westgate Lodge is a 35,000 square foot long term care home located at 37 Wilkie Street in Belleville Ontario. It has one entrance for residents, located off Wilkie Street, a service entrance located off of Dundas Street for deliveries and a staff coded entrance located at the north end of the visitor parking lot off of Wilkie Street.

The building is constructed with fire retardant materials. It consists of 3 resident home areas for a total of 88 beds. Residents require varying levels of care and cognitive support needs. The home is currently under redevelopment and is operating at 69 beds. The home employs approximately 125 staff.

Crown Ridge Place is a 110,000 square foot long term care home and retirement home located at 106 Crown Street in Trenton, Ontario. It has three entrances (Door 1,2,3) for residents and visitors, located off of Crown Street and George Street, a service entrance (Door 4) in the rear of the building for deliveries and a staff coded entrance located at the side of the building (Door 6). A corporate office entrance is also located at the rear of the building (Door 5).

The building is constructed with fire retardant materials. It consists of 4 resident home areas for a total of 122 LTC beds and 63 Retirement home beds. Residents require varying levels of care and cognitive support needs. The home employs approximately 250 staff.

THE FIRE ALARM SYSTEM:

The Fire Alarm System will detect a fire by one of the following methods:

HEAT-	Automatic
SMOKE:	Automatic
PULL STATION:	Manually operated by activation of Pull Station
SPRINKLER HEAD	Automatic

When the fire alarm is activated by one of the above, a bell ringing signal will sound the alarm.

SOURCES OF POWER

Each Fire Alarm System has two sources of power:

1. Normal Power: A/C
2. Emergency Battery Power: D/C
3. Generator Power

When the Normal Power source fails, the Emergency Power source takes over automatically.

TWO STAGE SYSTEM

The Fire Alarm System is a 2 Stage System.

- Stage 1:** Indicates the detection of smoke or fire. This alarm rings directly to the monitoring agency
And rings approximately every five (5) seconds.
- Stage 2:** Indicates that a full or partial evacuation of the building is necessary and will automatically activate after 10 minutes of a stage 1 alarm. The Stage 2 Alarm will ring approximately every three (3) seconds. The Fire Marshall may “ACKNOWLEDGE” the fire panel if he/she is confident that a Stage 2 alarm is not required. This will prevent the alarm from entering Stage 2 after 10 minutes.

In the event that the Fire Marshall “ACKNOWLEDGES” the fire system, However then determines that Stage 2 alarm is required, the following procedure is to be followed to initiate Stage 2 alarm:

1. The key is located on each of the Fire Marshall set of keys
2. The Fire Marshall will obtain the key and proceed to a Manual Alarm Station.
3. Insert key into 2nd stage key hole. Turn key to activate.
- .

After the Fire Emergency is over and on the instruction of the Fire Captain or his Designate, the Fire Alarm System is to be re-set.

TROUBLE IN THE SYSTEM

Trouble in the system will be indicated when a condition which is not normal occurs, e.g. power failure, short circuit, blown fuse, broken wire, etc. The “trouble light” on the fire panel will illuminate and sound.

An **hourly** walk through of the entire building must be conducted and documented to ensure ongoing monitoring for fire/heat and smoke.

WHEN ACTIVATED:

Special devices connected to the fire system will function.

- Devices on the fire doors will release and doors will automatically close.
- A signal is transmitted automatically to the monitoring station.
- All magnetic door locks will be de-activated allowing all exit doors to open without code.

FIRE AND EMERGENCY EXITS

Westgate Lodge has six (6) exits indicated by “EXIT” lights.

Exits are located at the end of all corridors, off of the dining rooms, off of the main lounge and at the main entrance.

ZONE SEPARATION:

Westgate Lodge is divided into Zones by a fire separation doors that has a fire resistance rating of at least $\frac{3}{4}$ of an hour. Our doors separating each zone are at least 1 $\frac{1}{2}$ hour fire resistance rating. This separation allows staff to move residents to a safe area before evacuation is required.

<u>ZONE 1</u>	WILKIE WING – INCLUDING BAYVIEW EAST & BAYVIEW WEST DINING AREA AND LOUNGE AREA
<u>ZONE 2</u>	MAIN LOUNGE, ACTIVITY ROOM, HAIRDRESSING SALON & DUNDAS EAST AND WEST
<u>ZONE 3</u>	BAYVIEW WEST WING FROM FIRE DOORS INSIDE THE UNIT WEST TO EXIT

CROWN RIDGE PLACE FIRE AND EMERGENCY EXITS

The building has twenty three (23) exits indicated by “EXIT” lights.

Crown Ridge Place- Crown Street -11, George Street -13

The Ridgeway Wing- 4

The Crown Ridge- Crown Street – 10, George Street -10

Ground Floor George St Building-10

TYPES OF FIRE

Fires are divided into three (3) major types, listed according to the material that is involved in flames. (See below)

The main purpose of this classification system is to ensure that the proper extinguisher is used in fighting actual fires. Since the Home is equipped with hand extinguishers suitable for use on all classes of fire, this classification becomes important only when using the fire hoses.

CLASS A:	Burning paper, wood, clothing, etc.
CLASS B:	Flammable liquids- oil, gasoline, cleaning solvents, etc.
CLASS C:	Electrical

Examples:

Small: Garbage pail

This type of fire can usually be extinguished quickly. Upon entering a room where a fire is in progress, several of the following steps should be taken.

1. Remove any Resident near the fire to a place of safety
2. Sound the alarm by activating the pull station
3. Remove any combustible objects (bed, chair, curtains, etc) away from the fire if possible
4. Close all windows and doors to prevent drafts
5. Using the proper extinguisher- extinguish the fire.

Steps 3 & 4 can be interchangeable or omitted, this would depend entirely on the situation. The basic principal is- sound the alarm- get everyone out- if small, attempt to extinguish it.

Bed or Larger Fire:

1. Remove Resident to safety when possible
2. Sound the alarm

3. Close doors and windows to prevent drafts

Clothing Fire:

1. Smother the clothing. This may be accomplished by putting the person on the ground or floor and wrapping them in a blanket tightly to try and smother the fire. If no covering is available, then roll them over on the ground.
2. Sound the alarm.

Smoke: Remember- If the door to the room is closed:

1. Feel the door to see if it is hot
2. If hot, **DO NOT OPEN**
3. If not hot, open it slowly until you find the extent of the fire
4. Enter the room for rescue

IF YOU DETECT ODOUR OR SMOKE- DON'T TRY TO LOCATE THE SOURCE-PULL THE ALARM

- Devices on the fire doors will release and doors will automatically close.
- A signal is transmitted automatically to the monitoring station.
- All magnetic door locks will be de-activated allowing all exit doors to open without code.

FIRE EXTINGUISHERS:

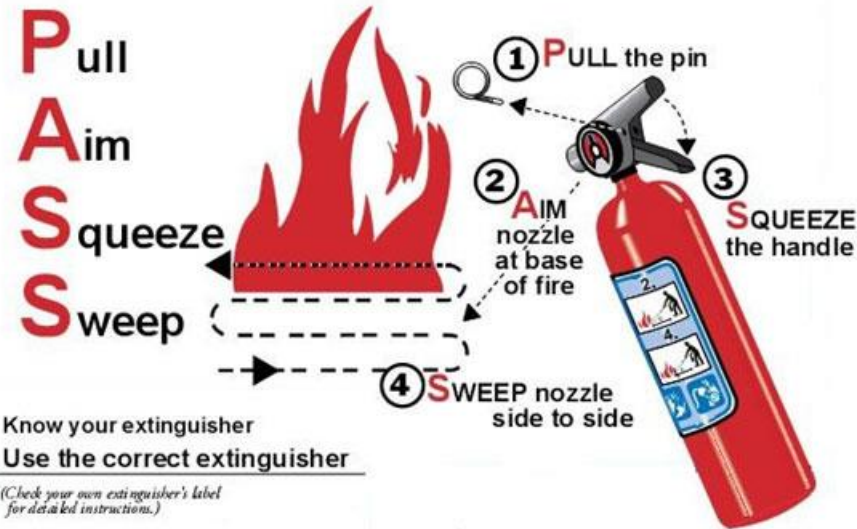
The facility is equipped with hand extinguishers suitable for use on all classes of fire.

You will find fire extinguishers located throughout the building.

Extinguishment must not be attempted unless it is safe to do so and you have been trained, and Residents' safety is not in jeopardy.

An extinguisher may be utilized using the following operation sequence.

To operate an extinguisher:



KITCHEN

Grease Fire

1. If in a pot put a lid on it.
2. If not in pot – try baking soda
3. If fire continues pull fire suppression system and evacuate kitchen.

FIXED EXTINGUISHING SYSTEM –

This automatic system is installed over the cooking appliances. If a fire is noticed by a staff member the pull pin located on the wall to activate the system. When the system activates a fire extinguishing agent will be discharged onto the cooking surface, the fire alarm will be triggered, gas and electricity will be cut off to the unit and make up air will be shut down. If required, the K class handheld fire extinguisher should only be used after the fixed extinguishing system has been discharged and the electricity has been cut-off. The K class extinguisher is water based and if applied before power is cut-off could cause electrocution. All staff working in the kitchen should be fully aware of how this system works.

SPRINKLER SYSTEM:

This system will operate automatically under fire conditions, once the temperature rises to a predetermined point. The sprinklers are designed to control a fire. The fire alarm will activate automatically when the water in the sprinkler system starts to flow. The area around these sprinklers must be kept clear at all times to allow the water to be dispersed properly should a fire occur. No storage to be closer than 19” below sprinklers.

FIRE HOSES:

Fire Hoses are located throughout the facility, in various strategic locations. Only fire personnel are permitted to use fire hoses.

DOORS:

This is one of the most important fire safety features in the facility. It is important that each staff member understand the special construction and fire resistance rating of these doors which are 1 $\frac{3}{4}$ solid core. Keep in mind that each time a door is closed; it restricts the spread of not only the fire, but also the spread of smoke and toxic gases. The length of fire resistance time is located on the tag on the edge of the door.

EMERGENCY LIGHTING:

The facility is provided with a second source of lighting which will activate automatically when the regular source of power fails.

FIRE ALARM PROTECTIVE COVER

A protective cover has been installed over all pull stations in the secure dementia unit (Ridgeway/Bayview West Wing) that emits an alarm if lifted. This protective cover has been installed to alert staff that a resident is accessing a pull station and allow time for the staff to intervene prior to the pull station being activated by a resident in error.

The protective cover will lift at any time and does not require any type of power.

The “Pull Station” alarm is covered with a clear cover approved by the local Fire department.

FIRE DEPARTMENT RESPONSE

Upon arrival the fire department will enter the facility via the Crown St. Retirement Home Main Entrance. (Door #1) if fire located at Crown Ridge Retirement or Crown Ridge Place and the Main Entrance (off Wilkie Street) if fire located at Westgate Lodge.

The designated staff member will meet the fire department there and direct them to the fire area.

The Fire Department’s Fire Captain is identified by his/her red helmet.

CROWN RIDGE PLACE - LOCATION OF EMERGENCY & FIRE PROCEDURE MANUAL FOR EMERGENCY PERSONNEL ACCESS

A copy of the facility’s Emergency & Fire Safety Plan and master set of building keys will be located in the White Emergency Plan boxes located at the Retirement Home (Crown St Building) main entrance for emergency personnel to access (Plan is kept in a Red Binder) and at the George St main entrance in the white Emergency plan box located beside the fire panel and Georgian Wing (George St. Building) Main Entrance foyer.

WESTGATE LODGE - LOCATION OF EMERGENCY & FIRE PROCEDURE MANUAL FOR EMERGENCY PERSONNEL ACCESS

A copy of the facility's Emergency & Fire Safety Plan and master set of building keys will be located in the White Emergency Plan boxes located between the doors of the main entrance (Wilkie St) for emergency personnel to access (Plan is kept in a Red Binder) at the Dundas Wing.

Emergency Code Policy

Policy

All staff will be familiar with the Emergency Codes and their roles and responsibilities. A listing of all codes is located at each phone in the building.

Procedure:

1. In consultation with community agencies, partner facilities, resource agencies and the homes Residents Council and Family Council, if any, the Home will develop and update written Emergency Response Plan for each of the following emergency situations:
 - a. Fires
 - b. Evacuation
 - c. Bomb Threat
 - d. Missing Resident situations
 - e. Violent Situations/Outbursts
 - f. Intruder with a weapon
 - g. Loss of Essential Services – Electricity, Water, Heat
 - h. Gas Leaks
 - i. Natural Disasters and extreme weather events
 - j. Boil Water Advisories
 - k. Floods
 - l. Community Disasters
 - m. Lock Down
 - n. Chemical Spills
 - o. Pandemic
 - p. Medical Emergencies
 - q. Outbreaks of a communicable disease, outbreaks of a disease of public health significance, epidemics and pandemics (See Infection Prevention and Control Manual)

The Plans will ensure that hazards and risk that may give rise to an emergency impacting the home are identified and assessed, whether the hazards and risks arise within the home or in the surrounding vicinity or community.

2. The Home will conduct annual tests of the emergency plans related to:
 - Loss of essential services
 - Fires
 - Missing Resident Situations
 - Medical Emergencies
 - Violent Outbursts
 - Gas Leaks
 - Natural Disasters
 - Extreme Weather Events
 - Boil Water Advisories

- Outbreaks of a communicable disease and outbreaks of a disease of public health significance, epidemics, pandemics
 - Floods
3. The Home will conduct a test at least every three (3) years for each of the following emergency plans:
 - Evacuation
 - Bomb Threat
 - Community Disasters
 4. A written record of each test will be completed and any recommendations or changes to improve the plan will be documented and implemented following the test.
 5. An evacuation plan for the home will be created and include 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 evacuated staff and others in case of an emergency, an identification of a safe evacuation location for which the home has obtained agreement in advance that residents staff, students, volunteers and other can be evacuated to, a transportation plan to move residents, staff, students, volunteers and others to the evacuation location and a plan to transport critical medications, supplies and equipment during an evacuation to the evacuation location to ensure resident safety.
 6. Each emergency plan will identify resources, supplies and personal protective equipment and equipment necessary for the emergency response and will ensure that supplies are readily available and have not expired.
 7. All plans will identify specific staff roles and responsibilities, contact information for each entity who may be involved in the response, identify lines of authority including who or which entity declares there is an emergency and who or which entity declares that the emergency is over at the time agreed to by the entities the home consulted with, ensure a communication plan, identify plan activation, a plan for food and fluid provision in an emergency and a plan to ensure that in an emergency all residents have timely access to all drugs that have been prescribed to them.
 8. The Emergency Response plans will include a communication plan that outlines the process for the home to ensure frequent and ongoing communication to residents, substitute decision makers if any, staff, volunteers, students, caregivers, the Residents Council and Family Council if any on the emergency in the home including at the beginning of the emergency, when there is a significant status change throughout the course of the emergency and the emergency is over.
 9. The emergency plans will address recovery from an emergency, including requiring that residents, their substitute decision makers, if any, staff, volunteers and students be

debriefed after the emergency, establishing how to resume normal operations in the home and establishing how to support those in the home who experience distress during the emergency.

10. Emergency plans and all arrangements with community agencies and facility partners will be kept current and available on the home's website and a physical copy of it is made available on request.
11. Emergency plans will be evaluated and updated at least annually, and entities involved in the emergency response are provided with an opportunity to offer feedback.
12. Staff, volunteers students will be trained on the emergency plans before they perform their responsibilities and annually thereafter.

EMERGENCY CODES

POLICY:

To establish a system to alert staff to an emergency situation in the home that allows for immediate implementation of procedures to ensure the health and safety of residents, visitors and staff.

PROCEDURE:

All staff will be aware the Emergency Codes established in the home are as follows:

CODE RED – FIRE

CODE BLUE – MEDICAL EMERGENCY – CARDIAC ARREST, CHOKING, ETC.

CODE GREEN – EVACUATION

CODE BLACK – BOMB THREAT

CODE YELLOW – MISSING RESIDENT

CODE ORANGE – EXTERNAL DISASTER

CODE BROWN – ENVIRONMENTAL HAZARD

CODE WHITE – VIOLENT SITUATION/INTRUDER

CODE GREY- LOSS OF ESSENTIAL SERVICES-POWER OUTAGE

CODE PURPLE - HOSTAGE SITUATION/LOCK DOWN

CODE SILVER - INTRUDER/RESIDENT WITH A WEAPON

1. Emergency Codes will be posted above all phones located within the building.
2. All employees are responsible to report any unsafe or emergency situations immediately to a supervisor. In the event of an extreme emergency where immediate assistance is required, an employee may use the internal paging system to call an Emergency Code.
3. The employee calling the Emergency Code will
 - lift the phone receiver
 - push the “Page” button
 - Announce in a loud, clear voice - “CODE and state the colour and location of the emergency”. For example:
CODE WHITE CROWN STREET, NORTH WING ROOM 30 X 3. Announce all codes times 3.
or
CODE YELLOW GEORGE STREET, EAST WING, ROOM 54 X 3
 - The page should be repeated three times.
4. Upon hearing a page for an emergency code all staff should ensure the safety of residents, equipment, etc in their immediate area and report to the area of the emergency, following the procedures outlined in each of the Emergency Code situations.
5. The Charge RN will assume the lead role in coordinating the procedures for each Emergency Code.
6. A copy of each of the Emergency Code policies and procedures is located in the Emergency Preparedness Manual and in the applicable Emergency/Evacuation Totes.
7. All employees will review the Emergency Preparedness Plan Manual at their time of hire and at least annually.

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.2a
	Emergency Code Green: Response Record		Effective:	February, 2012
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Date of Code Green Response: _____

Time: _____

Location: _____

Details of Incident (record who, what, when, how)

What immediate actions/intervention/assessments were taken to address the incident and by whom (explain).

What external agencies/individuals were contacted/involved?

☐ Police

☐ RHRA

☐ Other: _____

☐ Ambulance

☐ Ministry of Labour

☐ Ministry of LTC

☐ Fire Department

What is the outcome of the incident/individuals involved? (Use back or separate sheet as needed)

Was “Code Green” announced x3 to all area of the Home?

☐ Yes ☐ No

Did staff respond appropriately and stay calm?

☐ Yes ☐ No

Was “ALL CLEAR” announced x3 in all areas of the Home?

☐ Yes ☐ No

Suggestions for Improvements/Observations

	Emergency Preparedness Plan		
	Emergency Code Green Response Record Continued...	Policy No.	EPP: 3.2a

Name of charge person(s) responding to Code Green:

What long term actions have/will be taken to prevent/reduce likelihood of reoccurrence?

Management Signature: _____ Date: _____



CRHCS

3.2b

Observer Questionnaire for Evacuation Code Green

As an observer please indicate:

Name: _____ Department: _____ Date: _____

JHSC member: ☐ Yes ☐ No

Observation Area:

☐ Fire Area ☐ Hallway _____ ☐ Exit door _____ ☐ Lounge ☐ Kitchen
☐ Dining Room

Time alarm sounded: _____

Could you hear the page? ☐ Yes ☐ No State what you heard? _____

How much time elapsed from the time you heard the alarm:

Before staff arrived in your area? _____

First resident was evacuated from your area? _____ Last resident was evacuated? _____

First resident was evacuated to your area? _____ Last resident arrived in your area? _____

How many of the following were involved at the area you observed?

Residents _____

Staff _____

If you observed at the site of the fire:

Did the Fire Marshall direct the evacuation? ☐ Yes ☐ No

Did two staff enter the room together? ☐ Yes ☐ No

Was staff working in appropriate pairs (nursing with non-nursing)? ☐ Yes ☐ No

Did staff close the door? ☐ Yes ☐ No

Did staff use appropriate lifts/transfers? ☐ Yes ☐ No

Did staff use door markers to indicate room had been evacuated appropriately? ☐ Yes ☐ No

Did staff evacuate resident room areas appropriately? ☐ Yes ☐ No

Was staff using a calm, unhurried approach? ☐ Yes ☐ No

A division of Crown Ridge Healthcare Services Inc.

			
	Observer questionnaire	Policy No.	HR –

If you observed at the evacuation site:

Were residents evacuated through at least one set of fire doors? ☐ Yes ☐ No.

Did total evacuation occur? ☐ Yes ☐ No.

Did any staff stay with evacuated residents? ☐ Yes ☐ No

Did staff provide reassurance to evacuated residents? ☐ Yes ☐ No

Did residents evacuate to appropriate external meeting site. ☐ Yes ☐ No.

If you observed an area outside of the fire or evacuation area:

Did staff respond immediately to fire bell? ☐ Yes ☐ No

Did staff shut off all equipment? ☐ Yes ☐ No

Did all staff report to fire area? ☐ Yes ☐ No

Did anyone stay behind to monitor safety of area or residents? ☐ Yes ☐ No

Were you updated on the status of the fire? ☐ Yes ☐ No

Fire Marshall:

Did Fire Marshall page appropriately? ☐ Yes ☐ No

Did Fire Marshall wear vest and take clip board? ☐ Yes ☐ No

Was medication cart secured? ☐ Yes ☐ No

Was resident list up to date? ☐ Yes ☐ No

Was evacuation tote up to date? ☐ Yes ☐ No

Time of all clear announcement _____

Comments:

			
	Observer questionnaire	Policy No.	HR –

Observer Signature

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.2
	Emergency Code Green: Evacuation		Effective:	December, 1995
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Purpose: To remove residents from the Nursing Home and transport them to a shelter of safety.
The following four phases must be followed to maintain order and safe evacuation:

- Phase I-Notification
- Phase II- Preparation
- Phase III- Mobilization
- Phase IV- Evacuation

Phase I- Notification- *Decision Making Process*

Fire Marshall or Designate to telephone:	Fire Department	613-962-2010 or 911
	Ambulance Service	613-962-3443 or 911

Key Personnel: (See Policy EFSP 1.1 for Additional Phone Numbers)

Facilities Operations Officer: See phone list

Administrator (LTC): Ext 129 - After Hours – see phone list

Director of Nursing (LTC): Ext 135 - After Hours – see phone list

Wellness Manager (Retirement Home): Ext: 156 – After Hours – see phone list

General Manager (Retirement Home) Ext: 122 - After Hours – see phone list

Environmental Services Manager Ext: 126 – After Hours- see phone list

The Charge RN will call Code Green or designate a staff member to call Code Green using designate manner
ie.- Code Green Horizontal Evacuation of Main Floor -LTC
or
ie.- Code Green Total Evacuation

Repeat Code 3 times. Speak slowly and clearly. Repeat Code Green in 30 seconds

Orange Evacuation tags will be placed on the door knob ALL rooms indicating the room has been searched and evacuated. Orange tags for each floor are located at the fire pull stations in each wing.

The Charge Nurse or designate will initiate Fan Out process by contacting Administrator, General Manager and department managers as per Fan Out Responsibilities and requesting the Fan Out procedure be initiated.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Green- Evacuation Continued...	Policy No.	EPP: 3.2

Phase II- Preparation:

The Director of Nursing or Fire Marshall (with assistance of all RN and RPN staff) would begin to prepare the Residents for evacuation according to their categorized colour code.

Resident Categorization by Colour Coded Border on Evacuation Kit Resident Photo:

- **RED-** Residents requiring stretcher transport and needs of acute care facility.
- **YELLOW-** Residents who require use of a wheelchair and staff assistance for ambulation.
- **GREEN-** Residents who are ambulatory or require assistance of staff &/or walker.

Colour Coded Borders are designated on:

- Resident Picture Identification Card
- Master List in Evacuation Box

Administrator/GM or designate will contact: (see phone list for numbers)

ABC Taxi

Quinte Access Bus

Ambulance Service

Legion 110

Westgate Lodge

The Riverine

Medical Directors

Phase III- Mobilization

When the decision to evacuate is given, all staff with assigned evacuation duties would begin mobilization of Residents to the pre-designated areas of EXIT. It should be remembered that speed and efficiency are of prime concern and an ambulatory Resident may be well under his/her own steam but could be moving at such a slow pace that he/she would clog the corridors and may require assistance.

Immediately the evacuation procedures are in effect, the appointed staff will take their places at the pre-designated exits to begin the assimilation of Residents and their documentation. An accurate record and count of Residents will be maintained prior to evacuations and after evacuation using the Evacuation checklist and will also ensure picture identification cards are placed on each Resident leaving the Premises.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Green- Evacuation Continued...	Policy No.	EPP: 3.2

Phase IV- Evacuation:

Short Term- Legion 110, Trenton ON –

- Arrangements have been made with the following Long Term Care and Retirement Homes in the area for short term accommodation: Homes within Crown Ridge Health Care Services
- Residents will be discharged to appropriate waiting vehicle according to their categorized colour code tags. At all times the Evacuation Coordinator can account for the total number of residents dispatched from the long term care home and retirement home to each destination.

Resident Photo with

Red Border:

Ambulances for residents who require stretcher transport and require needs of acute care will be taken to Trenton or Belleville Hospital.

Resident Photo with

Yellow Border:

Access Bus will be used to transport residents to emergency shelters. Crown Ridge Health Care van and buses will transport residents/staff to designated emergency shelters.

Resident Photo with

Green Border:

Taxi cabs can be used for residents with staff accompaniment and to pick up staff to bring them to the home and/or take them to the shelters.

Crown Ridge Health Care van and buses will be used transport residents/staff to designated emergency shelters.

Taxi Cab and Crown Ridge Health Care Services Buses and van will also be used to pick up staff to bring them to the Long Term Care Home/Retirement Home and then to the Emergency Shelter.

A designated staff member must be in contact with shelters to account for all residents being transferred from the home to their destination.

During this process, residents may be transferred to the home of their responsible party/family member on a short term basis. The Director of Nursing and designates will be assigned to telephone Residents' POAs at home to arrange transportation from the home or Emergency Shelter.

The administrator would contact the Ministry of Long-Term Division and Ontario AtHome. Medical Directors to be contacted and available as needed. The General Manager of the Retirement Home will contact the RHRA and Ontario At Home.

Supplies and Equipment

Our organization maintains an emergency supply of resident care items including PPE, continence products.

Emergency Service providers will be contacted to assist with supplies and equipment.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Green- Evacuation Continued...	Policy No.	EPP: 3.2

Medication and Treatment Carts will be moved from the home. Silver Fox Pharmacy will provide back medications as needed.

Portable Lifts, slings.

Maintenance Staff will evacuate beds and other needed equipment if able.

Electronic resident files in file and back up files are in place. The organization IT service provider will be contacted to assist with electronic communication and IT services should they be affected.

Nutritional and Environmental services will be utilized via the organization's other homes.

Census and location of residents will be updated in PCC at least daily.

Back Up linens are available through our organization's emergency supply and with our homes within the organization

Ontario At Home will be contacted to assist with support including relocation of residents.

The Quinte West Emergency Preparedness Plan will be used in collaboration with the local emergency management team.

If the Long-Term Care Home and/or Retirement Home cannot be immediately reused, arrangements will be made for supplies, beds, linen, blankets to accommodate the remaining Residents.

Critical Incident System Report to be completed and forwarded to Ministry of Long-Term Care immediately and a report to the RHRA immediately.

Communication with Family and Caregivers

Families and caregivers will be contacted via the homes Automated Care Messaging system with regular and appropriate updates as needed and as quickly as possible during and following the emergency.

The homes CEO or Director of Corporate Operations will handle all interactions and messaging with the media.

 Crown Ridge Health Care Services Inc.	Emergency and Fire Procedures Manual		Policy No.	EFPM: 3.2
	Emergency Code Green Evacuation		Effective:	April 2012
			Revised:	December 2024
	Divisions:	10, 20, 30, 40	Approved By:	Leslie Morrow

Purpose: To remove residents from the Nursing Home and transport them to a shelter of safety. The following four phases must be followed to maintain order and safe evacuation:

- Phase I- Notification
- Phase II- Preparation
- Phase III- Mobilization
- Phase IV- Evacuation

Phase I- Notification- *Decision Making Process*

Supervisor in Charge of Shift to telephone: Fire Department 613-962-4545 or 911
 Ambulance Service 613-962-3443 or 911

Key Personnel:

1. Administrator
2. Director of Nursing
3. Facilities Operations Officer

The Nurse in Charge will call Code Green or designate a staff member to call Code Green using designate manner

- ie. - Code Green Horizontal Evacuation of Main Floor or Individual Units
 or
 ie. - Code Green Total Evacuation

Repeat Code 3 times. Speak slowly and clearly. Repeat Code Green in 30 seconds.

The Charge Nurse or designate will initiate the Emergency Phone Fan Out Procedure by contacting one of the identified key personnel and requesting the Fan Out Procedure be initiated.

Director of Nursing or designate to notify hospital and emergency shelters of pending arrivals.

Orange Evacuation tags will be placed on the door knob of the Residents rooms indicating the room has been searched and evacuated. Orange tags for each floor are located at the fire exits in each wing.

Staff will assist residents to exit the building and assemble at the designated Evacuation Area identified as “Evacuation Meeting Area”.

Phase II- Preparation:

The Director of Nursing or Registered Nurse in Charge would begin to prepare the Residents for evacuation according to their categorized colour code.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

			
	Emergency Manual Code Green Evacuation	Policy No.	

Resident Categorization by Flasher Colour Tag:

- **RED-** **Stretcher patients**
- **YELLOW-** **Ambulatory with assistance and wheelchairs.**
- **GREEN-** **Ambulatory Residents**

Colour tag flashers are designated on:

- Individual Name Tags
- Master List in Evacuation Box

If possible, medication cart and records would be transported with the residents, if not, contact: the **Pharmacy** who will have computerized medication records for each Resident.

Administrator or designate will contact:

Central Taxi		613-962-5353
Crown Ridge Place		613-392-1289
The Riverine		613-354-8188
Bayview Retirement Home		613-966-6268
Sir James Whitney School		613-967-2823
Medical Advisor	Dr. Maraghi	613-885-0614 (cell)
Parkhurst Transportation		613-968-5109
		613-962-1615 (Brenda) after Hours
		613-920-3179 (Sherry cell phone)
Ambulance Service		613-962-3443 or 911
Belleville Mobility Bus		613-968-5888

Phase III- Mobilization

When decision to evacuate is given, all staff with assigned evacuation duties would begin mobilization of Residents to the pre-designated areas of EXIT. It should be remembered that speed and efficiency are of prime concern and an ambulatory Resident may be well under his/her own steam but could be moving at such a slow pace that he/she would clog the corridors and may require assistance.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

			
	Emergency Manual Code Green Evacuation	Policy No.	

Immediately after the evacuation procedures are in effect, the appointed Evacuation Coordinator should take their places at the pre-designated Exits to begin the assimilation of Residents and their documentation.

An accurate record and count of Residents will be maintained and will ensure colour code tags are attached to each resident leaving the premises.

Phase IV- Evacuation:

- Short Term: Sir James Whitney School – 88 residents
Bayview Retirement Home – 60 Residents
- Arrangements have been made with the following Nursing Homes in the area for short term accommodation:
Trent Valley Lodge- 30 Residents
Crown Ridge Place- 30 Residents
The Riverine- 10 Residents
The Crown Ridge – 20 Residents
- Residents will be discharged to the appropriate waiting vehicle according to their categorized colour code tags. At all times the Evacuation Coordinator can account for the total number of residents dispatched from the nursing home to each destination.

Red Tag: Ambulances for stretcher patients who will be taken to Trenton or Belleville Hospital.

Yellow Tag: Taxi Cabs will be used for residents Coded Yellow. If available the Crown Ridge Health Care van may be utilized to assist transportation of these residents.

Green Tag: Parkhurst Transportation- one 66 (or more) passenger school bus will be used to transport Residents.

Taxi Cab will also be used to pick up staff to bring them to the Nursing Home and then to the Emergency Shelter.

During this process, residents may be transferred to the home of their responsible party/family member on a short term basis. The Director of Nursing would be assigned to telephone Residents' relatives at home to arrange transportation from the home or Emergency Shelter.

Administrator would contact the Ministry of Health, Long Term Division and Home and Community Care Support Services.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

			
	Emergency Manual Code Green Evacuation	Policy No.	

Medical Advisor to be contacted and available as needed.

If the Nursing Home cannot be immediately reused, arrangements will be made for supplies, beds, linen, blankets to accommodate the remaining Residents.

CIS Report to be completed and forwarded to Ministry of Health and Long Term Care.

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.1 a
	Emergency Code Green: Response Record		Effective:	February, 2012
			Reviewed:	December 2024
	Divisions:	10, 20, 30, 40	Approved By:	Leslie Morrow

Date of Code Green Response: _____

Time: _____

Location: _____

Details of Incident (record who, what, when, how)

What immediate actions/intervention/assessments were taken to address the incident and by whom (explain).

What external agencies/individuals were contacted/involved?

☐ Police	☐ Ambulance	☐ Ministry of Health & LTC or RHRA
☐ Ministry of Labour	☐ Fire Department	☐ Other: _____

What is the outcome of the incident/individuals involved? (Use back or separate sheet as needed)

Was “Code Green” announced x3 to all area of the Home?	☐ Yes ☐ No
Did staff respond appropriately and stay calm?	☐ Yes ☐ No
Was “ALL CLEAR” announced x3 in all areas of the Home?	☐ Yes ☐ No

Suggestions for Improvements/Observations

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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	Emergency & Fire Safety Plan		
	Emergency Code Orange- Response Record Continued...	Policy No.	EFSP: 3.1 a

Name of charge person(s) responding to Code Green:

What long term actions have/will be taken to prevent/reduce likelihood of reoccurrence?

Management Signature: _____

Date: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.4
	Emergency Phone Fan Out		Effective:	January 2011
			Reviewed:	December 2024
	Divisions:	10, 20, 30, 40	Approved By:	Leslie Morrow

Policy: To provide a system that would allow fast and efficient communication with all employees of the home in the event of an emergency.

Procedure:

1. All Managers and Designated Staff have been given a copy of their contacts for the Emergency Phone Fan Out in the event of an emergency. Updated lists will be provided quarterly.
2. In the event of an emergency at the home that requires the partial or full evacuation of residents, the Fire Marshall will delegate a member of the staff to initiate the Emergency Phone Fan Out.
3. The Fire Marshall or delegate will obtain the Emergency Phone Fan Out List from the Emergency/Evacuation Tote and will begin at the top of the Phone List, attempting to contact a manager.
4. Once the first manager has been contacted, that manager will continue with the phone fan out, contacting other managers and ensuring that contact will be made with all staff.
5. The Fire Marshall and staff on duty will follow the Emergency Procedures as outlined in the Fire and Emergency Manual.
6. When contacting off duty staff, managers will indicate the type of emergency at the home and request staff report to assist.
7. All off duty staff should report to a holding area or to a designated contact. If they are to report to a location other than to the nursing home, it will be communicated with them at the time of the call.
8. The Emergency Phone Fan Out list will be updated quarterly and distributed to applicable management staff.
9. A test of the Emergency Phone Fan Out will occur at least once every three years.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.7a
	Emergency Code Blue: Response Record		Effective:	February, 2012
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Date of Code Blue Response: _____

Time: _____

Location: _____

Description: ☐ Respiratory ☐ Cardiac ☐ Other: Specify: _____

 ☐ Choking

Details of Incident (record who, what, when, how)

Name of Resident(s) involved: _____

Name of Staff involved: _____

Name of Visitors involved: _____

Other involved: _____

	Emergency & Fire Safety Plan		
	Emergency Code Blue- Response Record Continued....	Policy No.	EFSP: 3.7a

What immediate actions/intervention/assessments were taken to address the incident and by whom (explain).

What external agencies/individuals were contacted/involved?

- ☐ Police ☐ Ambulance ☐ Ministry of Health & LTC
☐ Ministry of Labour ☐ Fire Department ☐ Other: _____

What is the outcome of the incident/individuals involved? (Use back or separate sheet as needed)

If Resident(s) were involved, POA's must be notified. List details of who was notified and any pertinent conversation details. (Use back or separate sheet as needed)

- Was "Code Blue" announced x3 to all area of the Home? ☐ Yes ☐ No
 Did staff respond appropriately and stay calm? ☐ Yes ☐ No
 Was "ALL CLEAR" announced x3 in all areas of the Home? ☐ Yes ☐ No

Suggestions for Improvements/Observations

Name of person(s) responding to Code Blue:

What long term actions have/will be taken to prevent/reduce likelihood of reoccurrence?

RN/RPN Signature: _____

Date: _____

Management Signature: _____

Date: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.7
	Emergency Code Blue: Medical Emergency/Cardiac Arrest		Effective:	November, 2007
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Purpose: To alert individuals within the home of a Medical Emergency including

- Cardiac or Respiratory Arrest.
- Choking
- Any other medical emergency

Procedure for Resident Requiring CPR

Any staff member trained to administer CPR should initiate CPR immediately if the resident's directive indicates CPR is requested. If wishes are not known, initiate CPR.

When discovering a resident who has a written directive for CPR, with an absence of vital signs:

- Pull nearest call bell or seek immediate assistance from Registered or CPR trained staff.
- If no response to call bell, call out for help; if no response go to Nursing Station, page **"Code Blue"** (announce **"Code Blue"**, Wing ____, room # ____) **three (3) times**.
- Return to the Resident.
- Upon arrival, the registered nursing staff or staff member trained in CPR will take charge of the situation by:
 - Directing a staff member to call 911
 - Initiate Cardio Pulmonary Resuscitation (CPR) until ambulance personnel arrive and assume CPR.

Registered staff will ensure of notification of responsible party/family of resident's transfer to hospital and will ensure all appropriate forms accompany resident to the hospital.

Procedure for Resident who is Choking

Any staff member trained on assisting a choking victim may attempt abdominal thrusts.

- Call out for help;
- Send nearest staff member to closest nursing station and page **"Code Blue"** (announce **"Code Blue"**, Wing ____, room # ____) **three (3) times**.
- Designate a staff member to call 911. (Even if airway is cleared, resident should be assessed by medical personnel following a choking episode in which abdominal thrusts were administered to clear an airway)
- Registered staff or trained staff should initiate abdominal thrusts to induce clearing of airway.
- Continue with abdominal thrusts until airway is cleared or resident loses consciousness and/or vital signs.
- Initiate CPR as required unless DNR.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency and Fire Safety Plan		Policy No.	EFSP: 3.10
	Emergency Code White Violent Situation		Effective:	January 2000
			Revised:	August 2024
	Divisions:	10, 20 30, 40	Approved By:	Sandra Honey

Purpose: To initiate an appropriate effective response to the presence of a violent person (visitor or resident), hostage or intruder in the Home

To minimize the risk to the personal safety to Residents and staff and the damage to personal property through effective access control.

Policy: To direct employees regarding the initiation of a Code White upon discovering a violent or aggressive person (resident or visitor), or intruder in the Home.

A Code White may also be used to indicate a hostage situation.

Procedure Re: Intruder

1. All visitors to the home should sign in to the home at the front entrance.
2. Visitors whose purpose is unknown will be approached by a staff member in a non-confrontational and professional manner to offer assistance.
2. Ascertain whom they are visiting and whether they require any assistance re. the nature of their visit.
3. If they have no legitimate purpose for being in the Home, escort them to the main exit and notify the Charge Nurse.
4. Document a note of the person's general description and clothing for future reference on an incident report and submit to the Administrator
6. If a non-authorized individual:
 - a. is not recognized **and**
 - b. refuses to follow your direction, **or**
 - c. becomes argumentative, aggressive, violent **or**
 - d. has no purpose for being in the nursing home, **or**
 - e. looks suspicious

Despite all attempts to provide assistance and reassurance to diffuse the situation have failed, the following procedure will be initiated:

If Aggressive or Violent Resident:

1. Ensure the safety of other residents and staff is maintained at all times. This may require partial or full evacuation of residents from the affected area.
2. Alert staff to the need for assistance using the internal paging system.

Announce in a clear calm tone of voice "Code White" and name the affected area.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency and Fire Safety Plan		
	Emergency Code White: Violent Situation	Policy No.	EFSP:3.10

For example: Code White Room 2. Repeat this page three (3) times

3. The Charge Nurse will provide direction to staff arriving at the scene. Staff will be directed to assist with securing the area and removing any residents in the area from any potential danger.
4. If despite attempts to diffuse the situation have failed or the situation escalates, the nurse in charge or delegate will notify the ambulance and police by dialling 911.
5. An ambulance will be called by the Charge Nurse or delegate if the incident involves a resident and transfer to hospital is necessary.
6. The Nurse in Charge shall delegate a staff member meet the police/ambulance upon their arrival and provide assistance as required.
7. The Charge Nurse or delegate will notify the resident's Next of Kin and the resident's physician of the incident, outcome and discuss additional measures to decrease re-occurrence.
8. The Charge Nurse will complete documentation in the resident's record as per homes policy.
9. A Code White Incident Report will be completed.

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.10a
	Emergency Code White: Response Record		Effective:	February, 2012
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Date of Code White Response: _____
Time: _____
Location: _____

Description: ☐ Violent Person ☐ Intruder ☐ Resident

Details of Incident (record who, what, when, how)

Name of Resident(s) involved: _____

Name of Staff involved: _____

Name of Visitors involved: _____

Other involved: _____

	Emergency & Fire Safety Plan		
	Emergency Code White: Response Record Continued...	Policy No.	EFSP: 3.10a

What immediate actions/intervention/assessments were taken to address the incident and by whom (explain).

What external agencies/individuals were contacted/involved?

☐ Police ☐ Ambulance ☐ Ministry of LTC ☐ RHRA
☐ Ministry of Labour ☐ Fire Department ☐ Other: _____

What is the outcome of the incident/individuals involved? (Use back or separate sheet as needed)

If Resident(s) were involved, POA's must be notified. List details of who was notified and any pertinent conversation details. (Use back or separate sheet as needed)

Was "Code White" announced x3 to all area of the Home? ☐ Yes ☐ No
 Did staff respond appropriately and stay calm? ☐ Yes ☐ No
 Was "ALL CLEAR" announced x3 in all areas of the Home? ☐ Yes ☐ No

Suggestions for Improvements/Observations

Name of person(s) responding to Code White:

What long term actions have/will be taken to prevent/reduce likelihood of reoccurrence?

Management Signature: _____ Date: _____

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.8a
	Emergency Code Yellow: Missing Resident: Search Procedure Checklist		Effective:	May, 2011
			Revised:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Resident Name:
Wing:
Rm:

Resident is noticed missing:

1.
Time last seen:
Date:
Location last seen:

2.
Physical Description:
Age:
Height:
Weight:
Hair:
Eyes:
Glasses:
☐ Yes
☐ No

Special Identifying Features:

Clothing Last Worn:

3.
Photograph Available:
☐ Yes
☐ No
4.
SEARCH IMMEDIATE AREA
 - Check to determine if Resident is signed out
 - Search Residents’ floor including room, washroom, lounges, stairwell, tub/shower rooms, utility rooms, activity rooms etc
5.
CALL CODE YELLOW AND WING NAME X3. (Missing Person)
6.
IMPLEMENT FULL HOME SEARCH AND EXTERIOR SEARCH
7.
AREAS TO BE SEARCHED- UTILIZE ZONE MAP (Note who searched area)

	EAST WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure Checklist	Policy No.	EFSP: 3.8a

	NORTH WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

	GEORGIAN WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

	RIDGEWAY WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

	RETIREMENT HOME		
	Area Checked	Staff Assigned to Search Area CROWN STREET	Staff Assigned to Search Area GEORGE STREET
Bedroom Areas			
Lounges			
Closets			
Bathrooms			
Under Bed			

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure Checklist	Policy No.	EFSP: 3.8a

	INTERNAL SEARCH	
	Area Checked	Staff Assigned to Search Area
Kitchen		
Servery- E		
Kitchen		
Servery-NW		
Kitchen		
Servery- N		
Staff Rooms ↑ & ↓		
Physiotherapy Rms		
Hairdressing Room		
Visitor Washrooms		
Stairwells		
Main Kitchen-Basement		
Laundry Rms-Basement & Family		
Stairwells		
Hidden Areas		
Storage/Service Area		
Elevators		

	EXTERNAL SEARCH	
	Area Checked	Staff Assigned to Search Area
Zone #1		
Zone #2		
Zone #3		
Zone#4		
Zone#5		
Zone #6		
Other		
Other		

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure Checklist	Policy No.	EFSP: 3.8a

8. Remind Staff:
- To remain silent except for essential conversation and listen to person
 - Person may not respond to their name being called.
9. Search Completed-Resident confirmed missing: Time: _____
Obtain Residents' chart and other info to provide to police.

10. Notification:
- Police Notification: ☐ Yes Time: _____
Name of Officer: _____ Badge #: _____

Include information RE: Resident's name, specifics about physical appearance, clothing description, last time Resident was seen and where, whether Resident has potential to be aggressive/resistive. Conduct another full home and exterior search while waiting for police to arrive.

11. Administrator: Time: _____ Notified By: _____
Director of Nursing: Time: _____ Notified By: _____
Administrator (RH) Time: _____ Notified By: _____
POA/Next of Kin: _____ Time: _____
Notified By: _____
Name: _____ Relationship: _____ Phone #: _____

Conversation: _____

Notes: _____

Physician: _____ Time: _____ Notified By: _____

LTC HOME ONLY:

Ministry of Long Term Care: Eastern Regional Office: _____
Time: _____ Notified By: _____

WHEN RESIDENT IS FOUND:

12. Resident found at: Location: _____ Time: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure Checklist	Policy No.	EFSP: 3.8a

13. Assessment of Resident's condition when found:

14. Physician Order Received:

15. Notification when Resident Found:

Police: Time: _____	Notified By: _____
Administrator: Time: _____	Notified By: _____
Director of Nursing: Time: _____	Notified By: _____
Administrator RH: Time: _____	Notified By: _____
Wellness Manager RH: Time: _____	Notified By: _____
POA/Family: Time: _____	Notified By: _____
Physician: Time: _____	Notified By: _____
Ministry of Long Term Care (LTC Only): Time: _____	Notified By: _____

16. Safety precautions to prevent reoccurrence:

17. Thorough documentation in Residents' MDPN's: Yes: _____

18. Incident report and Critical Incident System completed (LTC Only)

Yes: _____

19. Incident documented on Resident's Care Plan- Reevaluate and revise management strategies as needed: Yes: _____

Date: _____ Search Coordinator: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.8
	Emergency Code Yellow: Missing Resident: Search Procedure		Effective:	December, 1995
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Purpose: To locate a Resident who is unaccounted for in the quickest most efficient and thorough manner.

Search Kit: A search kit will be kept in the East Wing Care Centre (LTC Home) and in the Retirement Home and will include:

- Flashlights and batteries.
- Notepad for writing notes.
- Pens and highlighter.
- Emergency Code Yellow - Missing Resident Search policy, procedure and checklist
- Floor Plans of the Home
- Maps of the geographic areas around the home.

Policy: The Emergency Code Yellow - Missing Resident Search Procedure will be immediately implemented when:

1. A Resident is thought to be missing but no exit alarm has sounded.
2. An exit alarm sounds and upon staff response and search of the immediate surroundings a resident is thought to be missing.
3. A head count is to be instituted if either 1 or 2 above occurs. Approved absences will be confirmed by checking with the sign-out books.

Procedure:

1. Once a Resident is presumed missing, the Wing RN/RPN is to be contacted immediately. A search of the wing must be commenced immediately to confirm if resident is missing or not.
2. If it is confirmed that resident is missing, the RN/RPN must then contact the Charge Nurse and proceed to the LTC Home east wing nursing station. If missing resident is in from the LTC home and to the Crown St. Nursing Station for the Retirement Home.
3. The Charge Nurse in the LTC home has overall responsibility for the implementation of the Missing Resident Search Procedure.

Search Command Post: The nurses' station in the East Wing of the LTC Home (if missing resident is from the Long Term Care Home) or to the Retirement Crown St. Nursing Station (if missing resident is from the Retirement Home) will be the Command Post.
Announce "CODE YELLOW" with wing that Resident resides in x3.

4. Registered Staff and all designated staff from each department and wing must attend the Search Command Post.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure	Policy No.	EFSP: 3.8

5. Upon implementation of the Emergency Code Yellow - Missing Resident Search Procedure, the Charge Nurse will assume role of Search Coordinator and will immediately move to the applicable Search Command Post and:

- a. Obtain Orange vest.
- b. Gather search kit and take out the Missing Resident Search Procedure and Check List Form.
- c. Gather/Designate a staff member to obtain all available information regarding the Missing Resident, including:
 - Resident Photo from chart
 - Full description including clothing worn.
 - The time and place where the Resident was last seen.
 - If Resident is registered with the wandering registry- obtain wandering profile
 - Any previous incidents and location found.
 - Complete top portion of search for with information and place photo from chart on search form. Photocopy x25 in colour.
- d. Designate a staff member to log events and search procedure details.
 - Search procedures and involvement- record as search progresses.
 - Notification time of pertinent individuals
 - Complete a incident report and document all actions taken in Multi-Disciplinary (MDPN) Progress Notes
- e. Designate staff (in pairs) to search for the Resident in the building and the outside the building. Instruct staff pairs to specifically search a particular wing of the building, area or exterior zone (as per maps). Provide them with a copy of the internal/external map and a picture of the missing resident. Searchers must mark off areas searched and note the time on their floor/exterior plans. Closely monitor exits to prevent the lost person from leaving the building during the search. Searchers must not omit any area because he/she thinks the lost person could not get there. Have staff utilize home cell phones or personal cell phones to assist with maintaining contact with the Search Coordinator.
- f. Specify areas/zones to be searched and instruct all staff to report back within 10 minutes.
- g. Search all the following areas:
 - Rooms, closets, bathrooms, and beneath beds.
 - Lounges, Common Areas.
 - Stairwells, Elevators
 - Storage and service areas.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure	Policy No.	EFSP: 3.8

- Locked Rooms
- Hidden Areas
- Behind Privacy Curtains
- All vehicles
- Bushes
- Sheds
- Stores
- Roads, Zones as per exterior/city map
- Neighbors

NOTE:

**Utilize the floor/outside zone maps which have been developed to ensure no missed areas.
Make certain that the search is progressively expanding**

While Searching:

- Remain silent except for essential conversation.
- Listen for the lost person who may be crying, signing or quietly talking;
- Be cognizant that the person may not respond to his/her name.

Ensure each pair of staff searching outside of the building has searched areas thoroughly and systematically.

NOTE: If the Resident is very agile, start the search a good distance away from the building and search back towards the building to avoid the Resident getting far way.

If a car is used in the search, always send two staff per car (if possible), one to drive and one to search.

6. Notify the police by calling 911

7. Provide the following information to the police upon their arrival:

- A description of the Resident
- A photograph of the Resident
- The time the Resident was last seen
- The clothing worn by the Resident
- The Resident's general medical problems
- The Resident's mobility status
- The Resident's care needs
- The places the resident is likely to go to based on past/present
- Likes/dislikes/interests.
- Resident Care Plan- Information from chart as required
- Wandering Registry Information if applicable.
- Search and rescue kit and maps

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure	Policy No.	EFSP: 3.8

8. Notify: Administrator (LTC) & Director of Nursing (LTC):
Administrator and Wellness Manager (Retirement Home)
9. Notify the Resident's POA/SDM.
10. Notify the Resident's Attending Physician.
11. **Notify the Ministry of Long-Term Care- Eastern Regional Office immediately: (LTC HOME only)**
 - if resident is missing for three hours or more;
 - Any missing resident who returns to the home with an injury or any adverse change in condition regardless of the length of time the resident was missing;

The Ministry of Health and LTC must be informed no later than one business day after the occurrence of:

- A resident who is missing for less than three hours and who returns to the home with no injury or adverse change in condition

All of the above incidents and notifications of the Ministry of Health and LTC must be followed by a Critical Incident Report within 10 days.

Business Hours: 1-877-779-5559

After Hours: 1-800-999-6973

When Resident is Found:

When the Resident has been found notify the Search Coordinator immediately.

The Search Coordinator will then:

- a. Announce ALL CLEAR x3 that the Resident has been found and that the search is concluded.
- b. Notify all individuals listed on the check list, and
- c. Have the Resident's condition assessed by the Physician if able. If physician not able to attend the home to assess the resident, a RN must perform a full head to toe assessment and notify the physician of any abnormal findings
- d. Document the incident per protocol
- e. Modify the Resident Care Plan with strategies to manage wandering/exit seeking, outline incident. Utilize 1:1 staffing as required. A multi-disciplinary team meeting should be arranged as soon as possible to review strategies to discuss other options/interventions to prevent reoccurrence of a missing resident situation.
- f. If unable to manage Residents' wandering behavior despite interventions, have the Director of Nursing request the Physician to refer the Resident to an appropriate facility.

When Resident is not found within 24 Hours:

Appropriate course of action to be taken e.g. arrange a press conference with the press and Police Department, involve media and public assistance.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Yellow- Missing Resident- Search Procedure	Policy No.	EFSP: 3.8

Reporting of Critical Incidents to the Ministry of Long-Term Care as per the Fixing Long Term Care Act. (LTC)

A resident who is missing for three hours or more. **Report immediately.**

Any missing resident who returns to the home with an injury or any adverse change in condition regardless of the length of time the resident was missing. **Report immediately.**

A resident who is missing for less than three hours and who returns to the home with no injury or adverse change in condition. **No later than one business day after the occurrence of the incident.**

Post Incident Follow Up for Employees

In some instances, the outcome of the Code Yellow may not always be positive, and the resident involved may have an injury that may be serious or life threatening.

Employees may find themselves in situations that are not usually encountered in their job role. Immediate assistance will be offered to staff involved in a Code Yellow Emergency.

Staff will be offered support following the incident to seek community services as needed.

The home will conduct a post Code Yellow education opportunity to provide support and review any changes or suggestions to improve the process for Code Yellow.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP 3.6a
	Emergency Code Black: Procedure Checklist		Effective:	March 2012
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Threat: _____ Time Threat Received: _____

Description of Threat:

- ☐ **Verbal** (Prolong conversation as long as possible to attain as much information from the caller as possible (i.e. male, female voice, other sounds).
- ☐ **Letter or Note** (Preserve note and handle carefully as this must be given to the police as evidence)

Record description of threat (who, what, where, how, when and details as above):

CODE BLACK announced X3. (Bomb threat): time announced: _____

Notification:

Police Notification: ☐ Yes Time: _____

Time of Arrival: _____ Name of Officer: _____ Badge #: _____

Instructions from Police Officer:

Administrator:	Time: _____	Notified By: _____
Director of Nursing:	Time: _____	Notified By: _____
General Manager (RH)	Time: _____	Notified By: _____
Facility Operations Manager	Time: _____	Notified By: _____

Notes:

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 CRHCS	Emergency & Fire Safety Plan		
	Emergency Code Black- Procedure Checklist	Policy No.	EFSP: 3.6a

Ministry of Long Term Care: Date: _____ Time: _____ Notified By: _____

RHRA: Date: _____ Time: _____ Notified By: _____

INFORM ALL STAFF PRIOR TO COMMENCEMENT OF SEARCH TO:

Be Aware of the following during search:

- 1) Unusual objects- box or bag in unusual place.
- 2) Shelving, cupboards, toilet tank and areas not usual accessible.
- 3) Inspect ceiling tiles for unusual damage or signs of recent tampering or movement.
- 4) Remember to be alert and remain calm.

If Any Unusual Object Is Noted:

DO NOT TOUCH THE OBJECT:

Report directly to the Search Coordinator.

SEARCH IMMEDIATE AREA (Quietly and in an organized manner)

- Search Residents' floor including room, washroom, lounges, stairwell, tub/shower rooms, utility rooms, activity rooms etc

IMPLEMENT FULL HOME SEARCH UNTIL SEARCH IS TAKEN OVER BY THE POLICE.

AREAS TO BE SEARCHED- UTILIZE ZONE MAP (Note who searched area)

	EAST WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Black- Procedure Checklist	Policy No.	EFSP: 3.6a

	NORTH WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

	GEORGIAN WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

	RIDGEWAY WING	
	Area Checked	Staff Assigned to Search Area
Bedroom Areas		
Lounges		
Closets		
Bathrooms		
Under Bed		

	RETIREMENT HOME		
	Area Checked	Staff Assigned to Search Area CROWN STREET	Staff Assigned to Search Area GEORGE STREET
Bedroom Areas			
Lounges			
Closets			
Bathrooms			
Under Bed			

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Black- Procedure Checklist	Policy No.	EFSP: 3.6a

	INTERNAL SEARCH	
	Area Checked	Staff Assigned to Search Area
Kitchen Servery- E		
Kitchen Servery-RWW		
Kitchen Servery-NW/GW		
Staff Rooms ↑ & ↓		
Wellness Room		
Hairdressing Room		
Visitor Washrooms		
Stairwells		
Main Kitchen-Basement		
Laundry Rms-Basement		
Stairwells		
Hidden Areas		
Storage/Service Area/Rooms		
Elevators		

Search Completed/Discontinued: Time: _____ Decision made by: _____

Notes about Search/Findings:

Evacuation Required: ☐Yes ☐No

If Evacuation Required – see Code Green Response

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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	Emergency & Fire Safety Plan		
	Emergency Code Black- Procedure Checklist	Policy No.	EFSP: 3.6a

Notification when Code Black Response Completed:

Police: _____ Date/Time: _____ Notified By: _____
 Administrator: Date/Time: _____ Notified By: _____
 Director of Nursing: Date/Time: _____ Notified By: _____

 Administrator RH: Date/Time: _____ Notified By: _____
 POAs/Families: RECORD INDIVIDUALLY IN RESIDENT PROGRESS NOTES
 Physician: Date/Time: _____ Notified By: _____
 Ministry of Long Term Care (LTC Only): Date/Time: _____
 Notified By: _____ (complete CIS form per FLTC Act requirements)
 RHRA (ret Home) Date/Time: _____ Notified By: _____

What is the outcome of the incident/individuals involved?

What long term actions have/will be taken to prevent likelihood of reoccurrence or to respond in a subsequent occurrence?

Date: _____ Response Coordinator: _____

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.6
	Emergency Code Black: Bomb Threat		Effective:	December, 1995
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Purpose: To provide a procedure for maintaining the safety of the residents in the event of that a Bomb Threat is received in our home. The code to be used in the event of a threat will be **CODE BLACK** to alert all staff.

To ensure accurate documentation of details of threat.

Remain calm...Do not Panic

Procedure to Follow:

1. Receipt of Threat:

Call 911 - Police to be notified immediately on receipt of threat by R.N. in Charge of shift.

Threat:

Suspicious Package or Object – do not touch. Look for objects out of place.

Letter or note: Preserve note and handle carefully as this must be given to the police as evidence.

Verbal Threat: Prolong conversation as long as possible to attain as much information from the caller as possible such as:

- Age
- Sex
- Nationality
- Background noise
- Information about device – what it looks like, when it is scheduled to go off, etc.

- a) Record details of the call.
- b) Announce **CODE BLACK** over the P.A system. Repeat three (3) times to alert all staff
- c) Charge RN to obtain orange vest from the designated location.
- d) Notify Administrator, General Manager, Director of Nursing, Wellness Manager and Environmental Service Manager immediately.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Black- Bomb Threat Continued....	Policy No.	EPP: 3.6

2. Search:

The decision to search the premises will be made by the police department. If a search is requested prior to police arrival.

The Search Coordinator will be Charge R.N until the search procedure is taken over by the police upon their arrival.

Nursing: All nursing personnel to search as directed the area in which they are working in a quiet organized manner, i.e. hall, rooms, washrooms, utility room, and the resident's closets, reporting to the Search Coordinator.

Housekeeping & Laundry: Housekeeping and laundry staff will search all housekeeping closets, all Activity Rooms, the Laundry Room, Hair Salon and the Staff rooms, physio room and all areas of the lower level and report back to the Search Coordinator for further instruction.

Nutritional Care:

The Nutritional Care staff will search all areas of the main Kitchen, Serveries, the Storage rooms, the Dining rooms, Garbage room and the Furnace room, then report to the Search Coordinator for further instructions.

Be Aware of the following during your search:

- 1) Unusual objects- box or bag in unusual place.
- 2) Shelving, cupboards, toilet tank and areas not usual accessible.
- 3) Inspect ceiling tiles for unusual damage or signs of recent tampering or movement.
- 4) Remember to be alert and remain calm.
- 5) Report to the Charge Nurse if any rooms were not searched as they were inaccessible due to being locked or another reason. The Charge Nurse will need to coordinate a search of these rooms or advise police if unable to access.

If Any Unusual Object Is Noted:

DO NOT TOUCH THE OBJECT:

Report directly to the Search Coordinator.

Evacuation: Call Code Green and follow home's Code Green – Evacuation policy

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Black- Bomb Threat Continued....	Policy No.	EPP: 3.6

Publicity:

To decrease community unrest and to guard against the release of unnecessary information to the media and following procedure must be taken.

- 1) Information released to the media, only by Administrator/General Manager, or delegate.
- 2) Other employees are not permitted to release any information to the press or anyone who is not directly involved with Bomb Threat Plan.

A Incident Report is to be completed and forwarded to the Ministry of Long Term Care and RHRA immediately.

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.9a
	Emergency Code Brown: Response Record		Effective:	February, 2012
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Code Brown Response: _____

Time: _____

Location: _____

Description: ☐ Chemicals: Specify: _____
 ☐ Environmental Hazard: Specify: _____

Details of Incident (record who, what, when, how)

Name of Resident(s) involved: _____

Name of Staff involved: _____

Name of Visitors involved: _____

Other involved: _____

	Emergency & Fire Safety Plan		
	Emergency Code Brown- Response Record Continued...	Policy No.	EFSP: 3.9a

What immediate actions/intervention/assessments were taken to address the incident and by whom (explain).

What external agencies/individuals were contacted/involved?

☐ Police ☐ Ambulance ☐ Ministry of Health & LTC
☐ Ministry of Labour ☐ Fire Department ☐ Other: _____

What is the outcome of the incident/individuals involved? (Use back or separate sheet as needed)

If Resident(s) were involved, POA’s must be notified. List details of who was notified and any pertinent conversation details. (Use back or separate sheet as needed)

Was “Code Brown” announced x3 to all area of the Home? ☐ Yes ☐ No
 Did staff respond appropriately and stay calm? ☐ Yes ☐ No
 Was “ALL CLEAR” announced x3 in all areas of the Home? ☐ Yes ☐ No

Suggestions for Improvements/Observations

Name of person(s) responding to Code Brown:

What long term actions have/will be taken to prevent/reduce likelihood of reoccurrence?

Management Signature: _____ Date: _____

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.9
	Emergency Code Brown: Internal or External Incident Involving Hazardous Materials		Effective:	November, 2007
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Purpose: To initiate an appropriate procedure to deal with internal or external incidents involving hazardous materials.

Policy: To direct employees regarding the initiation of a Code Brown upon discovering or notification of an internal or external incident involving hazardous materials.

Procedure: The Charge Nurse in consultation with the Environmental Services Manager will coordinate Code Brown response.

Internal: In the event of an internal incident involving hazardous materials (chemical) staff will consult the SDS which is provided and available for all chemicals in use in the home. Under the spills/disposal section of the SDS for each product, a specific clean-up procedure is identified for staff to follow. If additional help is required contact the Environmental Services Manager and maintenance staff for additional assistance or the situation is unsafe. If an area is or is becoming unsafe, secure the area, close the door(s) and do not enter. Announce Code Brown x3 and location. Do not permit staff responding to the Code Brown to enter the area. The Charge Nurse/ ESM will coordinate appropriate response. Charge Nurse to Contact ESM immediately if not on site. If the area required evacuation initiate Code Green procedures (See Policy).

External: In the event of an external incident involving hazardous materials, external air exclusion may be used as an alternative to evacuation.

1. The Charge Nurse will notify the Environmental Services Manager who will coordinate the shutdown of all air circulating systems that draw external air into the building. Under the direction of the Environmental Services Manager/Administrator this may be done by activating the fire alarm which shuts down all external ventilation.
2. Ensure all doors and windows are closed. These may be locked if directed.
3. Further directions will be given under the Emergency Plan initiated by Quinte West.
4. In the event that an evacuation of residents is necessary, follow the procedure outlined in a Code Green.

The homes Spill Kit is located in The Basement Level of the George St. Building.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.12
	Code Grey: Loss of Essential Services: Loss of Heat or Air Conditioning		Effective:	November, 2007
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

LOSS OF HEAT

ROOFTOP UNITS

1. In the event that there is a malfunction of the rooftop units or heat supply is disrupted due to heating unit malfunction. Contact the Home's Environmental Services Manager immediately.
2. ESM/ Maintenance staff will determine if a service provider is required to repair the malfunction and contact the appropriate provider.
3. If it is determined that the malfunction may result in loss of service for an extended time the ESM/ Charge Nurse will notify the Administrator and the General Manager (Ret Home).
4. Code Grey will be announced x3 per emergency code procedure.
5. Charge Nurse will Don the emergency orange vest to designate as charge and go to location as applicable. If entire home affected, East Wing Nursing station is command post.
6. Obtain Code Grey Kit and obtain temperate monitoring records. Assign housekeeping staff on each wing or PSW on each wing to monitor and record temperatures every 15 minutes in at least 2 resident rooms in each home area (different rooms each time), end of corridors and lounge areas. Instruct staff to notify Charge RN if temperature falls below 22 degrees Celsius.
7. The RN/RPN in each wing will ensure the comfort of all residents is maintained.
8. The need to move residents to a common area, provide extra blankets and/or clothing and provide auxiliary heating will be assessed by the RN/RPN staff and implemented as needed.
9. If temperature of any resident room/ area is found to be below 22 degrees Celsius, residents to be moved to an area above 22 degrees Celsius.
10. If it is required and directed to do so the phone fan out list should be used to obtain additional staff to help to monitor residents and provide support and reassurance.
11. Complete Code Grey response record form.

LOSS OF AIR CONDITIONING/EXCHANGE SYSTEMS

ROOFTOP UNITS

1. In the event that there is a malfunction of the rooftop units contact the Home's Environmental Services Manager immediately.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Procedure Manual		
	Code Grey: Loss of Essential Services: Loss of Heat or Air Conditioning	Policy No.	EFPM: 3.12

2. ESM will determine if a service provider is required to repair the malfunction and contact the appropriate provider.
3. If it is determined that the malfunction may result in loss of service for an extended time the Charge Nurse will notify the Administrator and the General Manager (Ret Home) immediately.
4. Code Grey will be announced x3 per emergency code procedure.
5. Charge Nurse will don the emergency orange vest to designate as charge and go to location as applicable. If entire home affected, East Wing Nursing station is command post.
6. Obtain Code Grey Kit and obtain temperate monitoring records. Assign housekeeping staff on each wing or PSW on each wing to monitor and record temperatures every 15 minutes in at least 2 resident rooms in each home area (different rooms each time), end of corridors and lounge areas. Instruct staff to notify Charge RN if temperature is 26 degrees Celsius or higher.
7. The Guidelines for Hot Weather Protocol and Related Illness will be followed immediately if hot weather. Temperatures 26 degrees Celsius or higher can be dangerous for both residents and staff. Action to be taken per homes Hot Weather protocol to ensure safety.
8. Windows may be opened and fans utilized to promote a comfortable environment for all residents, visitors and staff. Relocation of residents and staff to areas with cooling system is recommended when temperature is 26 degrees Celsius or higher.
9. If it is required and directed to do so the phone fan out list should be used to obtain additional staff to help to monitor residents and provide support and reassurance.
10. Complete Code Grey response record form.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.12a
	Code Grey: Loss of Essential Services: Loss of Heat or Air Conditioning		Effective:	November, 2007
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

LOSS OF HEAT

ROOFTOP UNITS

1. In the event that there is a malfunction of the rooftop units or heat supply is disrupted due to heating unit malfunction. Contact the Home's Environmental Services Manager immediately.
2. ESM/ Maintenance staff will determine if a service provider is required to repair the malfunction and contact the appropriate provider.
3. If it is determined that the malfunction may result in loss of service for an extended time the ESM/ Charge Nurse will notify the Administrator and the General Manager (Ret Home).
4. Code Grey will be announced x3 per emergency code procedure.
5. Charge Nurse will Don the emergency orange vest to designate as charge and go to location as applicable. If entire home affected, East Wing Nursing station is command post.
6. Obtain Code Grey Kit and obtain temperate monitoring records. Assign housekeeping staff on each wing or PSW on each wing to monitor and record temperatures every 15 minutes in at least 2 resident rooms in each home area (different rooms each time), end of corridors and lounge areas. Instruct staff to notify Charge RN if temperature falls below 22 degrees Celsius.
7. The RN/RPN in each wing will ensure the comfort of all residents is maintained.
8. The need to move residents to a common area, provide extra blankets and/or clothing and provide auxiliary heating will be assessed by the RN/RPN staff and implemented as needed.
9. If temperature of any resident room/ area is found to be below 22 degrees Celsius, residents to be moved to an area above 22 degrees Celsius.
10. If it is required and directed to do so the phone fan out list should be used to obtain additional staff to help to monitor residents and provide support and reassurance.
11. Complete Code Grey response record form.

LOSS OF AIR CONDITIONING/EXCHANGE SYSTEMS

ROOFTOP UNITS

1. In the event that there is a malfunction of the rooftop units contact the Home's Environmental Services Manager immediately.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Procedure Manual		
	Code Grey: Loss of Essential Services: Loss of Heat or Air Conditioning	Policy No.	EFPM: 3.12a

2. ESM will determine if a service provider is required to repair the malfunction and contact the appropriate provider.
3. If it is determined that the malfunction may result in loss of service for an extended time the Charge Nurse will notify the Administrator and the General Manager (Ret Home) immediately.
4. Code Grey will be announced x3 per emergency code procedure.
5. Charge Nurse will don the emergency orange vest to designate as charge and go to location as applicable. If entire home affected, East Wing Nursing station is command post.
6. Obtain Code Grey Kit and obtain temperate monitoring records. Assign housekeeping staff on each wing or PSW on each wing to monitor and record temperatures every 15 minutes in at least 2 resident rooms in each home area (different rooms each time), end of corridors and lounge areas. Instruct staff to notify Charge RN if temperature is 26 degrees Celsius or higher.
7. The Guidelines for Hot Weather Protocol and Related Illness will be followed immediately if hot weather. Temperatures 26 degrees Celsius or higher can be dangerous for both residents and staff. Action to be taken per homes Hot Weather protocol to ensure safety.
8. Windows may be opened and fans utilized to promote a comfortable environment for all residents, visitors and staff. Relocation of residents and staff to areas with cooling system is recommended when temperature is 26 degrees Celsius or higher.
9. If it is required and directed to do so the phone fan out list should be used to obtain additional staff to help to monitor residents and provide support and reassurance.
10. Complete Code Grey response record form.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

3.12a– Emergency Procedure in the Event of Loss
of Heat or Air Conditioning

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.11e
	Emergency Code Grey Checklist for Housekeeping Department Staff		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Leslie Morrow

Date of Outage: _____
 Time of Outage: _____
 Housekeeping Aide Name: _____

Task	Time	Initial When Completed
Initiate Departmental Checklist		
Lock Housekeeping cart and return to housekeeping room		
Monitor doors and residents to ensure safety		

Evaluation: (Identify any concerns or suggestions)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11 d
	Emergency Code Grey Checklist for Laundry Department Staff		Effective:	November, 2011
			Revised:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Outage: _____
 Time of Outage: _____
 Laundry Aide Name: _____

Task	Time	Initial When Completed
Initiate Department Checklist		
Shut off all washers, dryers and equipment		
Resume with Laundry Duties		

Evaluation: (Identify any concerns or suggestions)

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.11a
	Emergency Code Grey: Checklist for Lead Charge Nurse		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Outage: _____
Time of Outage: _____
Lead Charge Nurse: _____

Task	Time	Initial When Completed
Announce Code Grey x 3		
Don Orange Vest		
Ensure no one is trapped in elevators		
Contact Environmental Services Manager		
Obtain Code Grey Kit and Access Code Grey Protocol		
Distribute departmental checklists to the member of each department/wing as applicable		
Ensure safety checks of doors and residents are implemented for each wing/level		
Assign staff member to check all oxygen concentrators convert to portable if able. Inform oxygen provider of situation.		
Assign a staff member to check all elevators and post a sign not to use until further notice.		
Distribute supplies as needed		
Contact or designate a staff member to contact the power provider to report outage and receive estimate on expected duration		
Contact Administrator and FOO to inform of outage and expected length		
Activate contingency plans as directed by Administrator, General Manager or Facility Operations Officer: HVAC, Water, Phone Fan out		
Keep one housekeeper or an extra HCA/PSW present in the building until power resumes to monitor air temperatures and to assist as needed Temperature is to be recorded every hour or more often as needed in resident rooms, lounges, at each nursing station and at ends of corridors. Lead Charge Nurse to be notified when any area records temperature less than 22°C or over 26C.		
Implement hot weather protocol as needed.		
Complete Code Grey Response Record Form-EPP: 4.3o		

Evaluation: (Identify any concerns or suggestions)

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 4.3f
	Emergency Code Grey: Checklist for Life Enrichment Department		Effective:	November, 2011
			Reviewed	August 2024
	Divisions:	10, 20	Approved By:	Leslie Morrow

Date of Outage: _____
 Time of Outage: _____
 Life Enrichment Aide Name: _____

Task	Time	Initial When Completed
Initiate Department Checklist		
Turn off all Equipment		
If conducting a program, stay with Residents and provide support and reassurance. Await direction from Lead Charge Nurse		

Evaluation: (Identify any concerns or suggestions)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11b
	Emergency Code Grey: Checklist for RN/RPN/UCP North Wing/ Georgian Wing/Ridgeway Wing/East Wing/Retirement Home		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Outage: _____
 Time of Outage: _____
 Charge Nurse: _____
 Wing: _____

Task	Time	Initial When Completed
Initiate Departmental Checklist		
Assign staff member to monitor all exit doors		
Ensure all residents on oxygen concentrators are converted to portables as applicable. Contact oxygen Provider as needed.		
Ensure flashlights, manual call bells, etc, distributed		
Ensure q15 minute safety checks are implemented		
RN and RPN staff in each wing to monitor temperature in medication room fridges. Contact Pharmacy if fridge temperature (2-8 degrees Celsius) is not able to be maintained.		
Monitor Vaccine fridge temperature and take action if falls below 2 or above 8 degrees Celsius, may need back up battery/generator.		
Provide each resident with extra blankets if outage occurs during cooler weather.		

Evaluation: (Identify any concerns or suggestions)

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11 g
	Emergency Code Grey: Checklist for Maintenance Department Staff		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Outage: _____
Time of Outage: _____
Maintenance Staff Member(s): _____

Task	Time	Initial When Completed
Initiate Departmental Checklist		
Internal walk around to assist with identifying needs		
External walk around to assist with identifying needs.		
Check gas appliances are off and ventilation appropriate		
Check Elevators		

Evaluation: (Identify any concerns or suggestions)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11 m
	Code Grey – Power Outage Evaluation Form (Generator Use)		Effective:	November, 2007
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

DATE OF POWER OUTAGE _____

TIME: _____

GENERATOR START UP TIME: _____

LENGTH OF TIME FROM POWER OUTAGE UNTIL START UP: _____

WAS “CODE GREY” ANNOUNCED? _____ YES _____ NO

DID MAGNETIC DOOR LOCKS FUNCTION PROPERLY? _____ YES ____ NO

DID ALL AIR MATTRESS FUNCTIONING PROPERLY DURING OUTAGE? _____ YES ____ NO

DID OXYGEN ADMINISTRATION FUNCTION PROPERLY DURING OUTAGE? _____ YES ____ NO

WERE EXITS SECURED? _____ YES ____ NO

DID HEATING AND AIR EXCHANGE SYSTEMS FUNCTION PROPERLY _____ YES ____ NO

DID ALL REFRIGERATION/FREEZER/COOKING EQUIPMENT FUNCTION _____ YES ____ NO

DID ALL EQUIPMENT/SYSTEM RESET PROPERLY AFTER THE OUTAGE? _____ YES ____ NO

HAS GENERATOR HAD ANNUAL SERVICE TEST? _____ DATE: _____

END TIME OF POWER OUTAGE: _____

ALSO COMPLETE REVERSE SIDE OF FORM AND RECORD ALL STAFF IN ATTENDANCE

RECOMMENDATIONS/NOTES FROM THE DEBRIEFING:

 CRHCS	Emergency & Fire Safety Plan		
	POWER OUTAGE Evaluation Form Continued....	Policy No.	EFSP: 3.11m

FOLLOW UP IF REQUIRED:

PERSON CONDUCTING TEST:	_____	_____
	Signature	Date
REVIEWED BY:	_____	_____
	Signature	Date

STAFF IN ATTENDANCE

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11
	Emergency Code Grey: Loss of Essential Services Power Outage		Effective:	November, 2007
			Reviewed:	August 2024
	Divisions:	10, 20, 30 40	Approved By:	Sandra Honey

Policy: To ensure provision of care and service in the event of generator failure in a power disruption.

Procedure: The home is equipped with a full service diesel generator that will provide full services should a power outage occur (HVAC, lighting, Dietary, Etc.). However in the event of a Generator Failure the following will occur.

Search Command Post: The Care Centre (nursing station) in the East Wing (LTC Floor) will be the command post.

In the Event of Generator Failure

Roles and Responsibilities

Implement Emergency Code Grey – Loss of Essential Services – Power Outage with loss of generator service.

Roles and Responsibilities: Upon implementation of the Emergency Code Grey- Loss of Essential Services- Power Outage with Generator failure.

Charge Nurse will assume the lead role.

1. Announce “Code Grey” x3.
2. Lead Charge Nurse will don the emergency orange vest to designate as Charge.
3. Contact Environmental Services Manager.
4. Obtain Code Grey tote from East Wing Care Centre. Access Code Grey protocol from tote and begin to complete Lead Role Checklist.
5. Distribute Departmental Checklists for completion to a member of each department/wing as designated at the top of the checklist.
6. Request that other RN/RPN staff immediately implement safety checks on all exit doors as magnetic locks will not function. Depending on staff availability some exits may need to be blocked temporarily with movable objects to deter exiting of cognitively impaired residents. Wet floor signs, light-weight chairs and loveseats may be placed in front of exits if necessary.
7. The Charge Nurse will direct staff to check on residents Q15 minutes for safety.
8. Assign staff member to check all residents currently on air mattresses to ensure they will remain inflated. If begin to deflate change to a standard mattress.
9. Assign staff member to convert all oxygen concentrators in use or to switch to portable units if not. Contact oxygen providers for back up units.
10. Distribute supplies from Code Grey tote as needed. All staff to assist as needed.
11. Assign housekeepers (or HCA/PSW in each wing) in each wing to monitor and record building temperatures every hour at each nursing station and end of corridors. Instruct staff to notify Lead Charge Nurse if temperature falls below 22°C or rises above 26 degrees Celsius.
12. Contact or delegate an employee to contact the provider to report the outage and determine if length of outage is known. Utilize portable phones to call provider if needed: **HYDRO ONE: 1-800-434-1235**

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Grey- Loss of Essential Services Power Outage Continued....	Policy No.	EFSP: 3.11

13. Contact the Administrator of the LTC Home and General Manager of the Retirement to notify of power outage after speaking with provider. Direction will be given as to the need to contact other Department Managers and/or auxiliary staff.
14. If it is required and directed to do so the phone fan out list should be used to obtain additional staff to help during evening and night hours.
15. If close supervision is required for a Resident, that Resident must be moved to an auxiliary lighted area. Residents who require Hydro be available will be transferred to hospital if necessary.
16. Complete Code Grey Response Record form

RNs/RPNs/HCA & PSW staff/Retirement Home Care Attendants/UCPs:

1. Designated runners from each LTC wing and Retirement Home will report to the Command Post- East Wing Nursing Station.
2. All other RN/RPN/UCPs/Care Attendants and HCA/PSW staff will remain in their assigned wing areas to account for all residents, perform safety checks of residents and wing every 15min and await further instruction. Ensure corridors are clear of obstacles.
3. Initiate assigned Departmental Checklist.
4. The RN/RPN/UCP on each wing will assign staff to any exit doors not functioning on auxiliary power. Depending on staff availability some exits may need to be blocked temporarily with movable objects to deter the exiting of cognitively impaired residents. Wet floor signs, light-weight chairs and loveseats may be placed in front of exits if necessary.
5. The RN/RPN/UCP on each wing will communicate with Lead Charge Nurse (East Wing) as needed.
6. All staff will assist with distributing equipment and supplies such as flashlights, manual call bells, whistles, etc.
7. The RN/RPN/UCP on each wing will assist with answering phones.
8. Retirement Home RPN/UCP will ensure the temperature of the vaccine fridge remains between 2-8 degrees Celsius during power outage. Do not open fridge in order to maintain temperature for as long as possible.
9. RN/RPN staff in each wing will monitor medication fridges to ensure remain within 2-8 degrees Celsius. Contact the Pharmacy if temperature cannot be maintained. Contact the Health Unit if the vaccine cannot be maintained between 2-8 degrees Celsius.
10. All staff will provide support and reassurance.
11. All staff will assist with identifying safety risks.
12. Provide residents with extra blankets as needed.

Nutritional Care Staff:

1. Shut off all Equipment (including gas stove as exhaust fans will not be functioning).
2. Secure work area.
3. All Nutritional Care Staff are to report to the command post- East Wing Nursing Station
4. Listen to the Lead Charge Nurse for instruction and obtain departmental checklist.
5. Initiate departmental checklist.
6. Begin recording temperatures of refrigerators and freezers in all serveries, activity department fridges and freezers and Retirement Home kitchenette. Limit access to refrigerator and freezer units to reduce temperature

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Grey- Loss of Essential Services Power Outage Continued....	Policy No.	EFSP: 3.11

loss. Retirement Home staff should inform residents with private refrigerators in their rooms not to consume perishable food/beverage items until further notice.

7. If duration of power outage will compromise proper food temperature maintenance. Plans will need to be made to transport food/ beverages to another emergency location.

Laundry Staff:

1. Secure Area.
2. Report to Command Post at East Wing Nursing Station and await direction from Lead Charge Nurse.
3. Complete departmental checklist.
4. Assigned Other duties may include assisting with transfers, reassuring residents, safety checks, assisting with snack or meal service, monitoring exits or answering phones. Staff should record and be assigned duties on their departmental checklist indicating start times and who was assigned to the task.

Housekeeping Staff:

1. Secure housekeeping carts in housekeeping rooms.
2. Report to command post- East Wing Nursing Station and await instructions.
3. Complete departmental checklist.
4. Monitor and record building temperatures each hour at each nursing station and end of corridors. Notify Lead Charge Nurse if temperature falls below 22°C or rises to 26 degrees Celsius or higher. Duties may include assisting with transfers, reassuring residents and safety checks, assisting with snack or meal service monitoring exits or answering phones. Staff should record any assigned duties on their departmental checklist indicating start times and who was assigned to the task.

Life Enrichment Department Staff:

1. Shut off all equipment in use.
2. If conducting a group activity, stay with residents and provide support and reassurance while awaiting direction.
3. If not conducting an activity, shut off all equipment and report to Command Post at the East Wing Nursing Station to assist with ensuring resident safety and comfort.
4. Assist with reassurance to residents planning activities and small group visits for anxious resident if outage is to be of an extended time. Complete departmental checklist. Duties may include assisting with transfers, reassuring residents and safety checks, assisting with snack or meal service, monitoring exits or answering phones. Staff should record any assigned duties on their departmental checklist indicating start times and who was assigned to the task.

Maintenance Staff:

1. Upon notification of a Code Grey, the Maintenance Staff will report to the East Wing Nursing Station and await notification from the Lead Charge Nurse as to the anticipated length of the power outage.
2. The Maintenance Staff will assist Nursing Staff in ensuring resident safety and comfort. Will provide support to ensure exits are supervised or secured.
3. Set up and implement use of the portable generators as needed.
3. Complete departmental checklist.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Grey- Loss of Essential Services Power Outage Continued....	Policy No.	EFSP: 3.11

It is the responsibility of the Maintenance Staff to ensure that following duties are completed monthly:

- Emergency Supply tote is checked and restocked.
- Ensure that the main building generator tests monthly.
- Ensure that two full propane tanks are available at the Home at all times
- Ensure back up portable generators are accessible for use if the the Main Generator fails
- Ensure that a minimum of 20 litres of gasoline to be used in the portable generators is available at all times.
- Conduct a test of all emergency lighting monthly.

Administration:

1. Upon notification of Code Grey at the Home, the Administrator, Director of Nursing or Environmental Services Manager will coordinate the implementation of the Emergency Phone Fan Out as necessary.
2. Depending on the anticipated length of the power outage, Administrative staff will report to the home as needed.
3. Administrator or designate will notify MOH<C immediately as per LTCH Act requirement.
4. Administration will seek out the Lead Charge Nurse and complete tasks as assigned. The Administrator or designate will assume the lead role for the power outage if requested by the Charge Nurse in the lead role.
5. The activation of the home's contingency plans will be coordinated by the department manager. Contingency plans, HVAC services, water supply, food storage, staffing and nursing services have been developed as part of the home's Pandemic Plan Process.
6. In the event that the Home's contingency plans can no longer be followed or become ineffective the Home will declare a Code Green and begin the evacuation procedures.
7. Review departmental checklist to ensure that all responsibilities have been initiated or completed by departmental staff.

Upon Return of Power:

1. Reset magnetic door locks and ensure all exits are secure.
2. Ensure residents on oxygen battery units are placed back on concentrators (as applicable).
3. Ensure air mattresses have been reinstituted on applicable resident beds.
4. Check that the phones, call bell system, pager system and computers are functioning.
5. Check with each department to verify that all equipment is functioning.
6. Notify Administrative staff of return of power as needed.

Training and Education:

1. All staff will receive training and education on the home's Code Grey during orientation and at least annually thereafter.
2. The Home's Environmental Services Manager will ensure that a test of the home's Code Grey policy is conducted on an annual basis.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency & Fire Safety Plan		
	Emergency Code Grey- Loss of Essential Services Power Outage Continued....	Policy No.	EFSP: 3.11

Equipment and Supplies:

- Appendix A- Emergency tote
- Appendix B- Electrical equipment serviced by generator
- Appendix C- Electrical equipment serviced by battery back up
- Appendix D- Departmental Checklists for Code Grey
- Appendix E- Fire System/Emergency Lighting Monthly Checklist

Community Partners:

Hydro One
Brighton Springs Water
Paquette Electric
Generator Rental- Tormont CAT

Refer to Service Provider & Emergency Contact List

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 4.5
	Code Grey Loss of Essential Services Loss of Water or Water Advisory		Effective:	February, 2009
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Policy:

To provide direction to residents and staff in the event of loss of water to the home or the issuing of a Water Advisory to the home.

Procedure:

In the Event of a Water Advisory the Charge Nurse Shall:

1. Notify Facilities Operation Officer & Environmental Services Manager immediately.
2. Code Grey will be announced by emergency code procedure- Code Grey- Water Advisory in Effect.
3. Charge Nurse will don orange emergency vest, obtain water advisory and set up a command post.
4. Notify all department managers if not on site.
5. Notify all staff, Administrator, General Manager, residents and visitors to not drink water or use to brush teeth.
6. Post notices at all entrances and in each Resident's bathroom (Notice in File)
7. Obtain bottled water/water cooler jugs from the Kitchen- Do Not Permit Residents, Staff and Visitors to drink the water or brush teeth with the water. Do not use ice from ice machines.
8. Use disposable utensils for all meals, snacks and medication administration until 8hrs after advisory is lifted or as directed by authorities.
9. May use water to bathe Residents and launder clothes unless advised otherwise by Health Unit. If unable to use water to provide care to residents- Obtain cleansing wipes from Emergency supply inventory for hygiene needs, suspend baths/ showers until advisory lifted.
10. Inform all Residents and announce in the Dining Room at first meal after advisory has been issued.
11. Complete Code Grey Response Form once Code Grey situation resolved.
12. Notify MLTC Director as required via Critical Incident Reporting System.

In the Event of Loss of Water to the Home, the Charge Nurse shall:

1. Notify the Facilities Operations Officer & Environmental Services Manager immediately.
2. Code Grey will be announced by emergency code procedure- Code Grey- Loss of Water.
3. Charge Nurse will don orange emergency vest and set up a command post.
4. Notify all department managers if not on site.
5. Notify all staff, residents and visitors of loss of water.
6. Obtain bottled water/water cooler jugs from the Kitchen
7. Use disposable dishes/ utensils for all meals, snacks and medication administration
8. Use disposable wipes to bathe residents and for personal care needs.
9. Laundry services will be coordinated as needed by the Department Manager with outside sources such as Laundromats, etc.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Grey- Loss of Essential Services Loss of Water or Water Advisory continued....	Policy No.	EPP: 4.3

10. Inform all Residents and announce in the Dining Room frequently as to the status of the water returning to the home
11. Complete Code Grey Response Form once Code Grey situation resolved.

Notify MLTC Director as required via Critical Incident Reporting System.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.12
	Code Grey Loss of Essential Services Loss of Water or Water Advisory		Effective:	February, 2009
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Policy:

To provide direction to residents and staff in the event of loss of water to the home or the issuing of a Water Advisory to the home.

Procedure:

In the Event of a Water Advisory the Charge Nurse Shall:

1. Notify Facilities Operation Officer & Environmental Services Manager immediately.
2. Code Grey will be announced by emergency code procedure- Code Grey- Water Advisory in Effect.
3. Charge Nurse will don orange emergency vest, obtain water advisory and set up a command post.
4. Notify all department managers if not on site.
5. Notify all staff, Administrator, General Manager, residents and visitors to not drink water or use to brush teeth.
6. Post notices at all entrances and in each Resident's bathroom (Notice in File)
7. Obtain bottled water/water cooler jugs from the Kitchen- Do Not Permit Residents, Staff and Visitors to drink the water or brush teeth with the water. Do not use ice from ice machines.
8. Use disposable utensils for all meals, snacks and medication administration until 8hrs after advisory is lifted or as directed by authorities.
9. May use water to bathe Residents and launder clothes unless advised otherwise by Health Unit. If unable to use water to provide care to residents- Obtain cleansing wipes from Emergency supply inventory for hygiene needs, suspend baths/showers until advisory lifted.
10. Inform all Residents and announce in the Dining Room at first meal after advisory has been issued.
11. Complete Code Grey Response Form once Code Grey situation resolved.
12. Notify MLTC Director as required via Critical Incident Reporting System.

In the Event of Loss of Water to the Home, the Charge Nurse shall:

1. Notify the Facilities Operations Officer & Environmental Services Manager immediately.
2. Code Grey will be announced by emergency code procedure- Code Grey- Loss of Water.
3. Charge Nurse will don orange emergency vest and set up a command post.
4. Notify all department managers if not on site.
5. Notify all staff, residents and visitors of loss of water.
6. Obtain bottled water/water cooler jugs from the Kitchen
7. Use disposable dishes/ utensils for all meals, snacks and medication administration
8. Use disposable wipes to bathe residents and for personal care needs.
9. Laundry services will be coordinated as needed by the Department Manager with outside sources such as Laundromats, etc.
10. Inform all Residents and announce in the Dining Room frequently as to the status of the water returning to the home
11. Complete Code Grey Response Form once Code Grey situation resolved.

Notify MLTC Director as required via Critical Incident Reporting System.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11 o
	Emergency Code Grey: Response Record		Effective:	February, 2012
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Date of Code Grey Response: _____

Time: _____

Location: _____

Description: ☐ Power Outage ☐ Water Advisory ☐ Loss of Heat ☐ Loss of Cooling System
 ☐ Loss of Water ☐ Loss of Electricity ☐ Other: Specify: _____

Details of Incident (record who, what, when, how)

Name of Resident(s) involved: _____

Name of Staff involved: _____

Name of Visitors involved: _____

Other involved: _____

	Emergency & Fire Safety Plan		
	Emergency Code Grey- Response Record Continued....	Policy No.	EFSP: 3.11o

What immediate actions/intervention/assessments were taken to address the incident and by whom (explain).

What external agencies/individuals were contacted/involved?

☐ Police ☐ Ambulance ☐ Ministry of Health & LTC
☐ Ministry of Labour ☐ Fire Department ☐ Other: _____

What is the outcome of the incident/individuals involved? (Use back or separate sheet as needed)

If Resident(s) were involved, POA's must be notified. List details of who was notified and any pertinent conversation details. (Use back or separate sheet as needed)

Was "Code Grey" announced x3 to all area of the Home? ☐ Yes ☐ No
 Did staff respond appropriately and stay calm? ☐ Yes ☐ No
 Was "ALL CLEAR" announced x3 in all areas of the Home? ☐ Yes ☐ No

Suggestions for Improvements/Observations

Name of person(s) responding to Code Grey:

What long term actions have/will be taken to prevent/reduce likelihood of reoccurrence?

Management Signature: _____

Date: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH)
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 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.111
	Equipment and Areas Serviced by Generator		Effective:	November, 2011
			Reviewed:	December 2024
	Divisions:	10, 20, 30, 40	Approved By:	Leslie Morrow

All homes are equipped with a generator which operates all essential services including

Westgate Lodge (size of generator)

Crown Ridge Place

- East Wing lounge lights
- Dining room wall lights
- East Wing nurse station lights and receptacles
- Nurse call system
- Receptacles
- Fire alarm and mag locks

Crown Ridge Retirement

Riverine

If needed portable generators and extension cords could be set up to run other areas/equipment of the Home.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11 h
	Refrigerator Temperature Emergency Checklist		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Date of Outage: _____
Time of Outage: _____

Location of Refrigerator Being Monitored: _____

Time	Temperature	Initial	Comments/Actions

Time Power Resumed: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11 i
	Freezer Temperature Emergency Checklist		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Date of Outage: _____
Time of Outage: _____

Location of Freezer Being Monitored: _____

Time	Temperature	Initial	Comments/Actions

Time Power Resumed: _____

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11k
	Power Outage Emergency Supplies		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

- 5-20 litres bottles of waters
- Battery back up units
- Access to Portable Generators
- 60 blankets/spreads
- 2 Propane Tanks

Date Checked	Signature	Items Replaced

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP 3.11n
	Checklist for After Return of Power		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Date of Outage: _____
Time of Outage: _____
Lead Charge Nurse: _____

Task	Time	Initial When Completed
Reset Magnetic door locks and elevators. Ensure call bell system, phone system and fire system properly functioning.		
Check all oxygen units to ensure proper functioning and residents using appropriate oxygen system. (concentrator/ portable).		
Check all air mattresses to ensure functioning properly. If changed to standard mattress, change back to air mattress.		
Ensure gas appliances are working properly and ventilation appropriate		
Ensure all refrigerators, freezers are functioning properly Retirement Home staff will need to ensure resident private refrigerators do not contain perished food/beverage items.		
Check Generator for properly functioning.		

Evaluation: (Identify any concerns or suggestions)

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)
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 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.11j
	Power Outage Emergency Tote (Long Term Care)		Effective:	November, 2011
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

- Code Grey Policy and Procedure
- Department/Role Checklists
- Flashlights (15)
- “D” Cell batteries (12)
- 6-volt battery (15)
- Lanterns (25)
- Disposable wipes (located in Emergency Supply Area).
- Whistles (15)
- Manual call bells

Date Checked	Signature	Items Replaced

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.13
	Code Purple Hostage Situation/Lock Down		Effective:	October 2014
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Policy

To provide direction to staff in the event of a hostage situation or in the event of a lock down

Hostage Situation involves the confinement of a resident, visitor or employee without their consent for the fulfillment of certain conditions or terms.

Lockdown

A lock down involves a series of measures that are intended to minimize risk to residents and staff in the event of a real or suspected threat to the home or in the area.

Partial Lock Down- no entry

- most common
- Preserves ability to respond and operate during major disasters.
- Allows residents and staff to leave or evacuate

Partial Lock Down – no exit

- To protect the residents and staff from an external hazard such as a civil disturbance or outside contamination
- Residents and staff may not leave without screening by home staff

Full Lock Down – no entry or exit

- No one is allowed to enter or exit
- Depending on event duration this may be adjusted provided entrance or exit is screened by appropriate staff/security.

Hostage Procedure:

1. Remain Calm
2. If able instruct staff to contact 911 and report.
3. If able Announce Code Purple x 3 and identify area under a hostage situation.
4. Await assistance/instruction from police services

Lock Down Procedure:

1. Remain calm
2. Announce Code Purple x 3 and identify if partial or full lockdown.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Manual: Emergency Preparedness Plan		
	Code Purple Hostage Situation/Lock Down	Policy No.	EPP 3.13

Example: Attention Staff, Residents and Visitors. We have been placed in a Partial Lockdown no entry through the community disaster plan. Please remain calm and await further instructions. Thank you.

3. Follow the direction of the Charge Nurse, Police or other authorities.
4. Secure entrances- lock doors and close windows as directed (partial or full lock down)
5. Close room doors, curtains and stay with residents
6. Stay away from windows and exit doors
7. If necessary, seek a hiding place behind furniture and doors.
8. Attempt to notify the Charge Nurse staff if you are leaving the building. Depending on the type of lock down and severity, notification may not be possible.
9. If the situation is due to a violent or aggressive person a Code White may be called.

A division of Crown Ridge Healthcare Services Inc.

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.15
	Emergency Code Silver: Intruder/Resident with a Weapon		Effective:	April 2017
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Purpose: To initiate an appropriate effective response to the presence of an intruder or resident in the home with a weapon
To minimize the risk to the personal safety to residents and staff

Policy: To direct employees regarding the initiation of a Code Silver upon discovering an intruder or a resident with a weapon.

Procedure:
Intruder with a weapon

1. Determine the intruder's intent and remain calm.
2. If able – any staff should call 911.
3. Attempt to comply with their wishes.
If seeking medication – give it to them.
If demand to see someone – attempt to alert other staff to the situation and escort the person to where they would like to go.
If demand money – give them any monies we have access to.
If demand to take a resident or employee – attempt to alert other staff to the situation and escort the person to where they would like to go. If necessary and hostage has been taken then implement Code Purple.
4. Do not argue with or attempt to disarm the intruder.

After the Incident:

1. Call 911 immediately
2. Determine any injury to staff or residents and provide assistance
3. Provide reassurance.
4. Document a note of the person's general description and clothing.

Resident with a Weapon (this could be anything – knife, walker, cane, etc)

1. Ensure the safety of the residents and staff is maintained at all times. This may require partial or full evacuation of residents from the affected area.
2. To alert other staff to the need for assistance you will use the internal paging system to announce in a clear calm tone of voice "Code Silver" and name the affected area. For example: Code Silver Room 2. Repeat this page three (3) times and again 30 seconds after to ensure all staff are alerted.
3. Immediately additional Registered Staff, Supervisor and additional staff will report to the affected area. After all attempts to diffuse the situation have failed or the situation escalates the nurse in charge or delegate will notify the police by dialling 911.
4. The Nurse in Charge or delegate shall meet the police upon their arrival and provide assistance as required.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency Preparedness Plan		Policy No.	EPP: 3.14
	Emergency Code Orange: Community Disaster		Effective:	December 2015
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Purpose: To initiate an appropriate procedure to deal with community disasters.

Policy: To provide employees with direction upon the discovery or notification of a community disaster.

Potential Community Disaster:

Type of Disaster	Supplies to Consider	Emergency Codes to Follow	Tips
Extreme Heat	• Water • Fans • Cold foods • Hats •	Hot Weather Protocol	• Limit outdoor activities • Monitor for signs of dehydration • Monitor for heat exhaustion.
Drought	• Bottled water • Disposable wipes	Code Grey -Loss of Essential Services – water Code Red	• Avoid flushing of toilets • Avoid baths • Avoid running of taps unnecessarily • Limit laundry • Shut off outside sprinkler system and avoid outdoor watering.
Hurricane or Tornado	• Flashlights • Disposable products – wipes, dishes, etc.	Code Grey – power outage, loss of essential services Code Green Code Red	
Earthquake		Code Green Code Grey	• Drop to your hands and knees • Cover your head and neck with your arms • Stay away from glass, windows, outside doors and walls. • If in a bed, stay there.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Orange Community Disaster	Policy No.	EPP: 3.14

Type of Disaster	Supplies to Consider	Emergency Codes to Follow	Tips
Flood	• Buckets • Flashlights	Code Green Code Grey	• Install check valves when able • Turn off utilities • Elevate items if able.
Wild Fires	• Fire Extinguishers	Code Red Code Green Code Grey	• Keep exterior of building clear and neat. • Keep trees trimmed and roof and gutters clear. • Use fire resistant materials when building.
Pandemic		See Home's Pandemic Plan	
Severe Weather (thunderstorms and lightning)	• 3 day supply of non-perishable food • Water	Code Grey Code Red Code Green	• Trim trees and dead limbs and branches • Postpone outdoor activities • Secure outdoor objects • Close windows, blinds, shades and curtains. • Unplug electrical equipment.
Military Emergency		Follow community direction Code Green Code Brown Lockdown	
Lockdown		See Home's Lock down Procedure	
Train Derailment		Code Brown Code Red Code Green Code Grey – loss of essential services	

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

	Emergency Preparedness Plan		
	Emergency Code Orange Community Disaster	Policy No.	EPP: 3.14

Procedure:

1. The Charge RN/RPN will notify the Administrator/General Manager upon the declaration of a community disaster.
2. Further directions will be given under the County's Emergency Response Plan and initiated by the local Emergency Planning Committee.
3. The FOO/ESM will remain available to attend any disaster planning meetings in the area to provide input and support to community planning

Additional information may be obtained from:

<http://www.ready.gov/natural-disasters>
 Red Cross Emergency Preparedness Guide
 Hastings County Emergency Response Plan
 Lennox and Addington/Greater Napanee Emergency Response Plan
 Quinte West Emergency Response Plan
 Emergency Telephone Numbers

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 4.0
	Monitoring Hot Water Temperatures		Effective:	September, 2006
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Purpose: To ensure adequate hot water temperatures are compliant with the Fixing Long Term Care Homes Act, 2021.

Policy: Hot water temperatures will be monitored on day, evening and night shifts each day.

Hot water temperatures will be maintained not below forty (40) degrees Celsius and not exceeding forty-nine (49) degrees Celsius.

Procedure:

The home has installed an extensive monitoring system throughout the home which provides temperature monitoring of the source temperatures 24 hours per day, 7 days per week.

The home measures and documents the temperature of the water at source continually.

The system alerts designated staff members to temperature variations that fall outside of the required 40-49 degrees Celsius by means of electronic communication.

The following positions will receive an email should the temperature be detected outside of these settings:

- Facility Operations Officer
- Home Administrator
- Director of Corporate Operations
- Director of Corporate Clinical Services

The system will be accessed to determine potential causes of the variation and appropriate support and maintenance immediately contacted. See policy EFSP: 4.1.

Records of water temperatures are available for 12 months to provide data collection to ensure the residents are protected.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 4.1
	Inadequate Water Temperatures		Effective:	October, 2006
			Reviewed:	August 2024
	Divisions:	10, 20	Approved By:	Sandra Honey

Purpose:

To ensure that a plan of action is available to supervisors in the event of the hot water temperature falling below 40° degrees Celsius or exceeding 49° degrees Celsius.

Policy:

To ensure that the hot water temperature is maintained within the range of 40 to 49 degrees Celsius according to the FLTCA, 2021.

Procedure:

Home staff will be alerted to temperature variation, ensure resident and staff are aware to use caution and to recheck the temperature in 30 minutes.

If temperatures remain outside of the acceptable range, leave the area out of service and contact Facility Operations Manager immediately. If unable to reach the Facility Operations Officer, contact maintenance staff or the Administrator/General Manager.

Readings outside of the acceptable range of **40-49 degrees after 30 minutes**, must be addressed immediately by placing the area out of service and notifying all staff and taking action to address by determining cause, taking action or contacting the plumbing service.

The Authorized personnel who contact outside services must insist that they visit due to the risk that exceeding hot water can pose to residents and staff.

Place caution signs at all areas where residents and staff have access to hot water.

Inform all cognitively aware residents of concerns with hot water temperature.

Ensure all staff are clear about the increase of hot water temperature and also the procedure for reporting and documenting temperatures.

Monitor hot water temperatures on each floor and resident care area every two hours after plumbing service visits until water temperature stabilizes to within required degree range of 40 to 49 degrees C for 2 consecutive readings. Ensure that plumbing service does not leave the building until hot water temperatures reach the required range.

If the problem continues or reoccurs, notify plumbing service. Notify the Facility Operations Officer and Administrator/General Manager if not on duty.

Bottled water, disposable wipes and use of water access in other areas of the home should be utilized while service is conducted to get water temperatures back within acceptable range.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)

 Crown Ridge Health Care Services Inc.	Environmental Services Manual		Policy No.	EFSP: 4.3
	Gas Leak		Effective:	October 23 2014
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Policy:

To provide direction on what to do if a gas leak is detected within the home.

Procedure:

Gas odour is detected by staff, resident or visitor:

1. Contact Environmental Services Manager (ESM)/Facility Operations Officer (FOO) immediately.
2. If unable to contact ESM or FOO, contact Maintenance staff or Call 911 and inform of situation.
3. Follow direction provided.

Gas is heard to be rushing out:

1. Leave the area immediately.
2. Pull fire alarm.
3. Announce Code Green per Emergency Code Procedure.
4. Follow Code Green emergency preparedness plan.

 Crown Ridge Health Care Services Inc.	Emergency and Fire Safety Plan		Policy No.	EFSP: 4.4
	Instructions for First Alert Explosive Gas and Carbon Monoxide Alarm		Effective:	October 2014
			Reviewed:	August 2024
	Divisions:	10, 20, 30, 40	Approved By:	Sandra Honey

Alarm Functioning Properly

The alarm is functioning properly when the green indicator light is lit.

If light is not lit, please check that the alarm is plugged in securely. If connections are tested and light is not lit then notify Maintenance immediately.

If the unit emits 3 short chirps, it is a malfunction. Consult the trouble shooting guide.

To Test the Alarm

Press and hold the Test button until the alarm sounds

You will hear the signal which will alert you to the presence of explosive gas (one beep per second) followed by alarm for the presence of carbon monoxide (repeating 4 beeps, pause)

What to Do if the Gas/Carbon Monoxide Alarm Sounds

Carbon Monoxide (4 short beeps and CO will display)

- Follow Code Green evacuation emergency preparedness plan
- Immediately move to fresh air - outside
- Check that all persons are accounted for
- Do not re-enter the room.
- Call 911
- Await emergency personnel

Explosive Gas (horn sound one beep per second and GAS will be displayed)

- Follow Code Green evacuation emergency preparedness plan
- Open windows and doors
- Do not turn anything on or off including switches, appliances or use telephones in the immediate area.
- Call 911 from a phone located away from the area.
- Evacuate everyone from the building

Only Maintenance or Emergency personnel may silence the alarm

Please see attached chart – Understanding the light, horn and display patterns for troubleshooting support.

 Crown Ridge Health Care Services Inc.	Emergency & Fire Safety Plan		Policy No.	EFSP: 3.16
	Assisting Homes in the event of an Evacuation		Effective:	April 2017
			Reviewed:	August 2024
	Divisions:	10, 20,30, 40	Approved By:	Sandra Honey

Purpose: To establish a procedure in the event that the home accepts residents from an evacuated home.

Procedure: The Administrator/General Manager will be informed of the pending admissions and she/he will notify all department heads and appropriate organizations/ persons.

Staffing requirements for nursing services will arranged by the Director of Nursing, Wellness Manager, ADONs and the Nursing Staff in Charge from the Evacuating facility.

Resident Profiles will be completed by admitting personnel, from information received in written form/or from accompanied persons.

All information relating to admission is to be maintained in a binder; specifically for this purpose, and will include Residents photo, care plan and medication and treatment Records.

Director of Nursing or designate will inform the Homes Medical Directors.

Medications will be distributed by the nursing staff from the evacuated facility.

Nutritional Care Department to be notified immediately and will coordinate with staff of evacuating facility appropriate meal service to these residents.

Environmental Service Manager and Facility Operations Officer will coordinate with evacuating facility to ensure availability of supplies to meet comfort measures of evacuated residents.

All costs incurred will be the responsibility of the evacuated facility.

Divisions: 10-Crown Ridge Place (NH), 20-Crown Ridge (RH), 30-Westgate (NH), 40-Riverine (RH)