

Manual: Administration**Original:** May 2004**Revised:** Jun 2022**SCOPE**

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| <input checked="" type="checkbox"/> Kensington Gardens | <input type="checkbox"/> Eye Bank of Canada Ontario Division |
| <input checked="" type="checkbox"/> Kensington Hospice | <input type="checkbox"/> Kensington Diagnostic Imaging Centre |
| <input checked="" type="checkbox"/> Second Mile Club | <input type="checkbox"/> Kensington Eye Institute |
| | <input type="checkbox"/> Kensington Screening Clinic |
| | <input type="checkbox"/> Kensington Vision and Research Centre |

PURPOSE

The Kensington Health Centre is committed to protecting the health and safety of its employees, residents, volunteers, visitors, and any other individual on, in or around the premises. Advance planning and preparation for emergency procedures will ensure that employees, residents, volunteers and visitors are as safe as possible, and that staff are aware of their roles and responsibilities in the event of an actual emergency. The intent of the Emergency Procedures is to ensure human safety; minimize damages to property; assure rapid and responsive communication to all parties involved and remain compliant with the applicable legislation.

POLICY

1. There is a written contingency plan for the operation of the facility during either internal or external disaster.
2. An emergency plan is developed in consultation with local emergency planning groups.
3. An internal telephone fan-out system for emergency call-in is available to staff who are assigned to call.
4. The Vice President or the most senior manager on site is designated as charge person in the event of an emergency.
5. There is a system to easily and quickly identify all residents.
6. Monthly fire drills are conducted on each shift.
7. All staff will be trained in fire and emergency procedures during orientation.
8. Annual training will be offered to staff on fire and emergency procedures
9. Volunteers, visitors and residents are given opportunities to receive training in fire and emergency procedures.
10. A mock disaster is held at least once every year and includes a whole or partial evacuation of the facility.
11. Upon request, this policy can be made available in a format that takes into consideration individual needs by contacting the Manager of Health and Safety or the Vice President
12. Alternative formats may be provided after discussion with the person making the request to assess their specific communication needs and can include but are not limited to:
 - Enlarged text;
 - Braille format;
 - Communication support either in person or over the phone;
 - Documents provided via email.
13. If requested, and upon approval by the individual, the individualized Emergency Response and Fire Evacuation Plan shall be shared with the person designated by the home/hospice to provide assistance to the individual.

PREPAREDNESS EDUCATION**1. All Staff Shall:**

- 1.1. Receive emergency procedure training in Corporate Orientation
- 1.2. Complete the annual refresher training on Surge Learning
- 1.3. Participate in Mock Codes as assigned
- 1.4. Be familiar with the department specific code response requirements
- 1.5. Maintain update to date personal information with Human Resources

2. In addition to above all Senior Leadership shall:

- 2.1. Orient themselves to their individual roles and responsibilities as it relates to the Emergency Preparedness
- 2.2. Participate in regularly scheduled Mock Drills

RESPONSE - ROLES AND RESPONSIBILITIES**1. Vice President:**

- 1.1. Establishment and implementation of emergency procedures.
- 1.2. Appointment and organization of designated staff to carry out emergency duties and specific responsibilities
- 1.3. Training of staff and other occupants so that they are aware of their general and specific responsibilities during an emergency
- 1.4. Holding of emergency drills in accordance with policy
- 1.5. Control of fire hazards in the building.
- 1.6. Provisions of alternate measures for safety of occupants during infrastructure loss or failure.

2. Reception/ 3 East Personal Care Attendant:

- 2.1. Reception (on days and evenings) or 3 East Personal Care Attendant (on night shift) will announce the Emergency Code and Location three times on the annunciator panel.

3. Manager of Health and Safety:

- 3.1. Ensure proper implementation of safety measures and infection control measures are taken to protect staff and residents as it relates to individual codes
- 3.2. Responsible for the monitoring and safety of staff at all points and for the duration of the emergency event
- 3.3. Responsible to ensure necessary equipment and supplies are available for infection control, decontamination and safety for staff
- 3.4. Ensure Emergency Bag is inspected and replenished as required.

4. Infection Prevention and Control (IPAC) Lead:

- 4.1. Ensure proper implementation of infection control measures are taken to protect staff and residents as it relates to individual codes
- 4.2. Responsible to ensure necessary equipment and supplies are available for infection control.

5. Maintenance Personnel:

- 5.1. Read and understand the emergency policies.
- 5.2. Ensure that CHECK, TEST, INSPECT and MAINTAIN all fire protection equipment as required by the Ontario Fire Code and as outlined in the Fire Safety Plan. Ensure that such work is completed on schedule and that records are retained.
- 5.3. Participate in the emergency drills and all safety training sessions.

6. Fire Captains:

- 6.1. Read and understand emergency policies
- 6.2. Be in charge of implementing the emergency procedures for your area.
- 6.3. Designate and train sufficient persons to act as Assistant Fire Captain during your absence.
- 6.4. Know where all fire protection equipment and appropriate exits for your area are located.
- 6.5. Participate in emergency codes drills.
- 6.6. Call (9-1-1) whenever you need emergency assistance.

7. All Staff:

- 7.1. Keep the doors to stairways closed at all times.
- 7.2. Keep stairways, landings; hallways, passageways and exits (both inside and outside) clear of any obstructions at all times.
- 7.3. Do not permit combustible materials to accumulate in any part of a stairway or other means of egress, or in elevator and ventilation shafts.
- 7.4. Participate in emergency drills.
- 7.5. Understand all the emergency codes.

RECOVERY

1. Closing of Emergency Event and Return to Normal Operations:

- 1.1. Closing the emergency event will be considered once the active situation or code has been cleared
- 1.2. Closing of the emergency event will be done under the direction of the Vice President with consultation of Emergency Services
- 1.3. Notify the Manager of Health and Safety where emergency bag supplies need to be replenished

2. Post Event Debrief and Documentation:

- 2.1. The Vice President will arrange a corporate debrief with the appropriate individuals within 5 days of the emergency event.
- 2.2. The meeting will be chaired by the Vice President.
- 2.3. The Vice President will engage Occupational Health and Safety and Human Resources to facilitate emotional and psychological support for all staff involved immediately after the event.
- 2.4. Consideration shall be given to relieving staff involved in the emergency event from shift as soon as practical, in addition staff wellness post event (long term) will be monitored by occupational health and safety department.

PROCEDURES

1. General Rules:

- 1.1. The facility has policies and procedures to manage the following emergency situations:
 - Code Red- Fire
 - Code Green- Evacuation
 - Code Yellow- Missing Resident
 - Code Black- Bomb Threat
 - Code White- Violent Person/Hostage Situation
 - Code Orange- External Disaster
 - Code Brown- Biohazardous Spill
 - Lock Down/ Hold and Secure

- 1.2. All staff will become familiar with the various codes through general and department specific orientation.
- 1.3. All Contractors will report to charge person and await instructions in the event of an emergency.

RISK

Failure to have a plan and policies to manage emergency situations puts resident, staff and visitors at risk for illness and harm and the organization at risk for economic loss and sanctions from the MOHLTC and MOL.

SUPPLEMENTAL INFORMATION

Cross Reference:

CORP-EMR-05.003a Fire Drill Schedule
CORP-EMR-05.004 Emergency Procedures - Code Black
CORP-EMR-05.005 Emergency Procedures - Code Brown
CORP-EMR-05.006 Emergency Procedures - Code Green
CORP-EMR-05.007 Emergency Procedures - Code Orange
CORP-EMR-05.008 Emergency Procedures - Code Red
CORP-EMR-05.009 Emergency Procedures - Code White
CORP-EMR-05.010 Emergency Procedures - Code Yellow
CORP-EMR-06.001 Fan-out Lists

Source

The Long-Term Care Homes Act, 2007
CARF Standards Manual
Occupational Health and Safety Act
Ontario Regulation 191/11
Accessibility for Ontarians with Disabilities Act, 2005