



**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Control Pages	<b>NUMBER:</b> EMP-01-01-01
<b>SUBJECT:</b> Title Page	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> May 2024

Department: Corporate

Facility: Niagara Ina Grafton Gage Village

Title: Emergency Management Plan Manual

Chief Executive Officer: Jerry Boichuk

Date of Origin: May 2001

Date of Revision: May 2024

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**1.0 FINDING INFORMATION**

- .1 Turn to the Table of Contents.
- .2 Look up the desired subject.
- .3 Turn to the page indicated.

**2.0 TABS**

- .1 Tabs are major divisions of this manual.
- .2 This manual has five (5) tabs.

**3.0 SECTIONS**

Sections are divisions within each tab.

**4.0 SUBJECTS**

Subjects are divisions within each Section.

**5.0 NUMBERING SYSTEM**

- .1 This Manual uses a four-part numbering system combining Title, Tab, Section and Subject Number. Numbers appear in the top right hand corner.
- .2 EMP – indicates alpha prefix or Title of the Manual.
- .3 01 – indicates the Tab Number.
- .4 02 – indicates the Section number within the Tab.
- .5 01 – indicates the Subject number within the Section.

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<b>SUBJECT:</b> Distribution List	<b>PAGE 1 OF 1</b>
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**1.0 DISTRIBUTION LIST**

- ▶ Front Desk
- ▶ Chief Executive Officer
- ▶ Human Resources Manager
- ▶ Long Term Care Nurses' Station
- ▶ Kitchen, "B" Building
- ▶ Assisted Living Office, "B" Building
- ▶ Library, "B" Building
- ▶ Craft Room, "D" Building
- ▶ Staff/Tub Room, "E" Building, Lower Level
- ▶ Maintenance Office

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<b>SUBJECT:</b> Emergency Management Plan Summary	<b>PAGE 1 OF 3</b>
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**1.0 POLICY**

To provide effective handling of a disaster or emergency situation (e.g. bomb threat, loss of water/heat, fire, evacuation of residents, etc.).

**2.0 DEFINITION**

The Emergency Management Plan outlines the efficient deployment of staff and outside agencies/organizations in the event of a disaster/emergency.

Emergency is defined as an urgent or pressing situation or condition presenting an imminent threat to the health or well being of residents and others attending the home that requires immediate action to ensure the safety of the persons in the home.

**3.0 COORDINATION**

The Emergency Management Team shall be responsible for coordinating and reviewing the Emergency Management Plan on a regular basis. They will also be responsible to ensure the home resumes normal operations after an emergency.

**4.0 PERSON IN CHARGE**

A Registered staff person shall be designated as the Incident Commander for Niagara Ina Grafton Gage Village until relieved by the Chief Executive Officer or the Manager on Call.

**5.0 IMPLEMENTATION**

The decision to implement any part of the Emergency Management Plan shall be made by the Chief Executive Officer/designate.

**6.0 EVACUATION CENTRES**

- .1 During an evacuation, residents shall be transported to pre-determined Evacuation Centres (see EMP-02-05-01). Evacuation Centres shall be utilized as required by the number of residents evacuated.
- .2 Food Services staff shall proceed to the Evacuation Centre(s) and arrange for emergency food service.
- .3 Housekeeping Services staff shall arrange to have additional bedding and linens delivered to the Evacuation Centre(s).

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- .4 The pharmacy shall arrange to have medications delivered to the Evacuation Centre(s) as soon as possible.

## 7.0 HOSPITALS

If residents require hospitalization, the Registered staff person in charge shall alert hospitals and provide an estimate of the number of residents being sent.

## 8.0 RECORDS

- .1 Nursing staff shall remove residents' clinical records to provide continuing care.
- .2 Administration Office staff shall remove records required to provide administrative services.
- .3 Management Team shall remove staff time sheets to provide information on staff and to contact staff as necessary.

## 9.0 PUBLIC INFORMATION

During an evacuation and/or emergency situation, the Chief Executive Officer/designate shall provide the following:

- .1 Information to officials involved in the evacuation and/or emergency situation.
- .2 News releases to the media.
- .3 Information regarding residents to concerned individuals.

## 10.0 STAFF EDUCATION AND QUALITY IMPROVEMENT

- .1 These procedures form part of the general orientation and are reinforced through departmental orientation.
- .2 Staff shall be orientated on an annual basis.

## 11.0 COMMUNICATION

Niagara Ina Grafton Gage Village shall ensure Long Term Care substitute decision makers, Resident and Family Councils, are informed at the beginning of the emergency, when there is a significant status change throughout the course of the emergency and when the emergency is over.

Staff and volunteers/students onsite during the emergency shall be informed and will be debriefed after the emergency.

Emergency Plan will be posted on website

<b>SECTION:</b> Evacuation	<b>NUMBER:</b> EMP-02-01-01
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## 12.0 PLAN EVALUATION

Niagara Ina Grafton Gage Village shall;

- a) ensure this Emergency Management Plan is evaluated and updated annually and within 30 days after an emergency has been declared over. All entities involved in the emergency response are provided an opportunity to offer feedback during the evaluation period.
- b) The annual evaluation of the Emergency Plan includes loss of essential services, fires, situations involving a missing resident, medical emergency, violent outburst, gas leaks, natural disasters, extreme weather events, boiled water advisory, outbreaks of pandemics and floods.
- c) ensure the Emergency Plan is tested at least once every three years including arrangements with the external entities that could be involved with providing emergency services in the area i.e. fire department, health service providers, partner facilities etc.
- d) maintain a written record of the testing of the emergency plan and evacuation
- e) invite the local Medical Officer of Health or designate to participate in developing, updating, testing, evaluating and reviewing the emergency plan to a matter of public health significance.





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**1.0 RESPONSIBILITIES OF CHIEF EXECUTIVE OFFICER**

- .1 The Chief Executive Officer shall maintain overall coordination of the Emergency Management Plan. This shall include an annual review of the plan and ensuring that there is ongoing staff training and drills.
- .2 The Chief Executive Officer shall establish Evacuation Centres for residents in the event of an evacuation.
- .3 The Chief Executive Officer shall establish external sources for the provision of emergency supplies and equipment required for an evacuation and to supply Evacuation Centres.
- .4 The Chief Executive Officer shall be prepared to activate the Emergency Management Plan, if necessary.

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<b>SECTION:</b> Evacuation	<b>NUMBER:</b> EMP-02-03-01
<b>SUBJECT:</b> Emergency Management Team	<b>PAGE 1 OF 2</b>
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**1.0 COMPOSITION**

The Emergency Management Team shall include the following:

- a) Chief Executive Officer
- b) Director of Resident Care
- c) Manager, Finance
- d) Manager, Environmental Services
- e) Manager, Food and Laundry Services
- f) Manager, Assisted Living Services
- g) Manager, Human Resources
- h) Executive Assistant to the Chief Executive Officer
- i) Volunteer Coordinator Office, “B” Building
- j) Occupational Health and Safety Representative(s) (Union)

Other staff or persons from specialized agencies or organizations may be added as the need arises.

**2.0 RESPONSIBILITIES OF THE INCIDENT COMMANDER**

- .1 When the Emergency Management Plan is activated, the Chief Executive Officer/designate shall assume the position of Incident Commander.
- .2 During the emergency, the Emergency Management Team, under the direction of the Incident Commander, shall be responsible for the following:
  - a) Coordination and control of emergency operations.
  - b) Assessment of required outside assistance.
  - c) Evacuation, in whole or in part, of the facility.

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- d) Dispersal of people not directly connected with the emergency operations, whose presence may hinder responding to the emergency.
- e) Discontinuation of utility services, including electrical, water, and gas as necessary.
- f) Collection of information on the emergency situation and the establishment of an Emergency Operations Centre (EOC).
- g) Authorization of expenditures required to deal with the emergency.
- h) Appointing of a Duty Officer to maintain an Emergency Log.
- i) Notification of the appropriate personnel of the termination of the emergency.
- j) Appointing of a Public Information Officer.
- k) Participation in a debriefing following the emergency.
- l) Each member of the Emergency Management Team is responsible for co-coordinating, directing, and maintaining their services, as required.
- m) Providing of support staff where needed.

### **3.0 COMMITTEE RESPONSIBILITIES**

- .1 In the event of a disaster, each member of the Emergency Management Team shall report to Niagara Ina Grafton Gage Village and assist the Incident Commander as directed.
- .2 The Emergency Management Team shall develop and review the Emergency Management Plan annually.
- .3 The Emergency Management Team shall maintain education and training programs for all personnel.
- .4 The Emergency Management Team shall conduct a drill each year.



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<b>SECTION:</b> Evacuation	<b>NUMBER:</b> EMP-02-03-02
<b>SUBJECT:</b> Emergency Operations Centre (EOC)	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> November 2009	<b>REVISED:</b> June 2022

**1.0 EMERGENCY OPERATIONS CENTRE (EOC)**

- .1 The primary location of the EOC shall be in the Administrative Office, 1<sup>st</sup> Floor, “B” Building.
- .2 The secondary location of the EOC shall be in the Security Office, 1<sup>st</sup> Floor, “D” Building.

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<b>SUBJECT:</b> Activating the Emergency Management Plan	<b>PAGE 1 OF 1</b>
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**1.0 EMERGENCY NOTIFICATION (REGULAR HOURS)**

In the event of an emergency during regular business hours, obtain particulars, notify the Chief Executive Officer/designate, and prepare for the implementation of the Emergency Management Plan.

**2.0 EMERGENCY NOTIFICATION (AFTER HOURS)**

If the emergency occurs after hours, the Manager on Call shall be contacted. The Manager on Call shall then activate the Emergency Management Plan.

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<b>SECTION:</b>	Evacuation	<b>NUMBER:</b>	EMP-02-05-01
<b>SUBJECT:</b>	Emergency Telephone Numbers/Evacuation Centres/ Collaborative Shelter Agreements	<b>PAGE 1 OF 2</b>	
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**1.0 CONTACT**

	<u>DAY</u>	<u>NIGHT</u>
.1 <u>Police-Fire-Ambulance</u>	911	911
.2 <u>Hospital</u>		
Niagara Health System	(905) 378-4647	(905) 378-4647
.3 <u>Evacuation Centres</u>		
a) Heidehof Home for the Aged 600 Lake Street	(905) 935-3344	
b) Linhaven Home for the Aged 403 Ontario Street	(905) 934-3364	
c) Holy Cross Catholic Secondary School 460 Linwell Road, St. Catharines, L2M 2P9	(905) 937-6446	
d) Governor Simcoe Secondary School 15 Glenview Avenue	(905) 934-4006	
e) First Grantham United Church 415 Linwell Road	(905) 935-5369	
	<u>DAY</u>	<u>NIGHT</u>
.4 <u>District School Board of Niagara</u>	(905) 641-1550, Ext. 54310	
After-hours contact for DSBN is Password	(905) 688-5155	
.5 <u>Transportation</u>		
a) St. Catharines Transit Commission	(905) 685-4228	
b) Central Taxi Dispatch Call-Centre	(905) 346-4000 (905) 685-7343	

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.6 Utilities

- a) Enbridge Gas (905) 685-5441 (24-hour emergency)
- b) Bell Canada 611 (24-hour emergency)
- c) Alectra Utilities 1-800-253-2872

.7 Other Organizations

- a) Goodwill Industries Niagara (905) 685-8777 (Administration)
- b) Salvation Army (905) 684-7813 (Emergency Calls)
- c) St. Catharines City Hall (905) 688-5600
- d) Canadian Red Cross (905) 680-4099
- e) St. Catharines 24-hour Emergency Line (905) 935-3813



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<b>SECTION:</b> Evacuation	<b>NUMBER:</b> EMP-02-06-01
<b>SUBJECT:</b> Fan Out List – Management Team	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> June 2022

**1.0 PURPOSE**

To ensure that the staff Fan-Out Call List remains current.

**2.0 PROCEDURE**

- .1 The Human Resource Department shall ensure that the staff Fan-Out List be updated and distributed to Management Team and the distribution list of this manual (EMP-01-01-04) every four (4) months starting in January (January, May, and September).
- .2 In the event that a Management/Non-Union staff member is unavailable to make his/her list of calls, the Manager on Call shall make the calls or delegate the calls to another staff member.
- .3 When making phone calls, location and type of emergency must be indicated. If a person is unable to be reached, a voicemail must be left and the individual next in line will be called.

**3.0 FAN-OUT LIST LOCATION**

- .1 The Fan-Out List shall be placed in Appendix A (EMP-05-01-01), at the end of this Emergency Management Plan Manual.
- .2 The Fan-Out List shall be included in all manuals of the distribution list (EMP-01-01-04)

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<b>SECTION:</b> Evacuation	<b>NUMBER:</b> EMP-02-07-01
<b>SUBJECT:</b> Evacuation Procedure – Roll Call/All Clear	<b>PAGE 1 OF 1</b>
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**1.0 ROLL CALL**

- .1 When evacuation has been considered complete, the Registered staff person in charge shall immediately take the roll call utilizing the resident list.
- .2 The Registered staff person in charge shall then give the results of the roll call to the Fire Department Supervisor.
- .3 The Registered staff person in charge shall stand by for instructions.
- .4 The Director of Care shall ensure that the resident list of long term care be updated every four (4) months starting in January (January, May and September).
- .5 The Assisted Living Manager shall ensure that the resident list of all residents who receive services be updated every four (4) months starting in January (January, May and September).
- .6 Resident Lists must include residents requiring assistance / evacuation type (EMP-03-01-02).
- .7 Resident lists shall be placed in Appendix B1 (EMP-05-02-01) and B2 (EMP-05-02-02).

**2.0 ALL CLEAR**

- .1 The all clear page may only be authorized by the Incident Commander, at the discretion of St. Catharines Fire and Emergency Management Services. Only St. Catharines Fire and Emergency Management Services may give permission to terminate the fire alarm bells or reset the fire alarm system.
- .2 The all clear signal shall be sent by a runner to all areas.

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<b>SECTION:</b> Evacuation	<b>NUMBER:</b> EMP-02-08-01
<b>SUBJECT:</b> Long-Term Care Residents Requiring Assistance - Evacuation Type List	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> June 2011	<b>REVISED:</b> June 2022

**1.0 EVACUATION TYPES**

- .1 Type A – Ambulatory requiring guidance but no assistance
- .2 Type B – Ambulatory requiring assistance.
- .3 Type C – Non-Ambulatory able to assist with transport (i.e. swing carry)
- .4 Type D – Non-Ambulatory unable to assist with transport (i.e. dead weight)

**2.0 STAFF AVAILABLE TO ASSIST - TOTAL PER BUILDING**

Building	Days	Evenings	Nights
A/B/LTC	32-weekday 16-weekend	13-weekday 13-weekend	5-weekday 5-weekend
D	2-weekday 2-weekend	1-weekday 1-weekend	
E	2-weekday 2-weekend	1-weekday 1-weekend	

**3.0 EVACUATION LIST**

The evacuation list is located in the Fire Box at the Long-Term Care Nurses’ Station.

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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-01-01
<b>SUBJECT:</b> Emergency Code System	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> January 2015	<b>REVISED:</b> June 2022

**1.0 POLICY**

Niagara Ina Grafton Gage Village (NIGGV) employs a universal code system as an integral element of the Emergency Management Plan. This system is designed to promote ease of communication and identification of the appropriate emergency plan to be executed.

**2.0 PROCEDURE**

.1 The following are the standard codes utilized at NIGGV:

Code Blue	Medical Emergency
Code Black	Bomb Threat
Code Grey	Loss of Essential Services
Code Orange	Disaster Contingency Plans
Code Yellow	Missing Resident
Code White	Violent/Aggressive Behaviour/Hostage Taking
Code Brown	Chemical Spill
Code Green	Evacuation
Code Red	Fire or Smoke Emergency
	Pandemic/Outbreak Management

.2 Education on emergency codes shall be provided upon orientation and annually thereafter.

.3 Staff shall have an opportunity to apply learned knowledge through testing of components of the emergency plan on an annual basis.

.4 Residents shall be orientated to the emergency codes on admission and periodically thereafter.

**3.0 EXAMPLES OF EMERGENCIES**

The following events may require an Emergency Response and are listed to aid in a proactive approach to an emergency:

- Air-borne Hazards
- Bomb Threat
- Communicable/Infectious Disease (See Infection Control)
- Flooding
- Fire
- Violent Staff/Visitor
- Hostage Taking
- Snow Storm
- Car/Bus/Road Accidents
- Chemical Hazards
- Explosions
- Expanded Service Demand
- Plumbing Disruption
- Phone Disruption
- Water-Borne Hazards
- Bomb Threat
- Food-Borne Hazards (See Infection Control)
- Electrical Disruption
- Missing Resident
- Heat/Gas Disruption
- Tornado
- Staffing Disruptions

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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-02-01
<b>SUBJECT:</b> Medical Emergency – Code Blue	<b>PAGE 1 OF 3</b>
<b>DATE OF ORIGIN:</b> November 2009	<b>REVISED:</b> June 2022

**1.0 MEDICAL EMERGENCY CODE**

Code Blue

**2.0 POLICY**

- .1 Niagara Ina Grafton Gage Village (NIGGV) shall ensure a system is implemented to alert individuals in the home of a medical emergency and to provide a systematic approach for responding to it.
- .2 Code Blue is used to alert all employees within the home that a medical emergency has occurred.
- .3 In the event of a medical emergency, the Registered Nurse will be immediately notified to report to the area to provide the appropriate assessment and response to the situation.

**3.0 DEFINITIONS**

- .1 A medical emergency is defined as the sudden onset of an illness or injury serious enough to require immediate medical or skilled nursing intervention. May include, but not limited to: cardiac arrest, respiratory arrest, burn, fracture, loss of consciousness, chest pain, allergic response, choking, asthma attack, cerebral vascular attack (CVA), and seizure.
- .2 A sudden illness or injury can happen to anyone – resident, staff member, volunteer or visitor.
- .3 Cardiopulmonary Resuscitation (CPR) – An emergency lifesaving procedure that is done when someone’s breathing or heartbeat has stopped. CPR is designed to sustain breathing and heartbeat and combines rescue breathing and chest compressions to restore blood flow to someone suffering from cardiac arrest.
- .4 Cardiac Arrest – The unexpected loss of heart function in a person (heart stops beating) related to a variety of causes, such as heart disease, suffocation, drug overdose, stroke, electrocution, or injury.

**4.0 PROCEDURE (RESIDENT MEDICAL EMERGENCY)**

- .1 In the event of a medical emergency, the Registered Nurse will be immediately notified to report to the area to provide the appropriate assessment and response to the situation
- .2 Upon discovering the emergency:
  - a) Pull the nearest call bell and alert nearby staff by shouting **CODE BLUE**;

**REVIEWED: May 2024**

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-02-01
<b>SUBJECT:</b>	Medical Emergency – Code Blue	<b>PAGE 2 OF 3</b>	
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- b) Stay with the injured person;
  - c) The nearest staff member shall alert a registered staff member and use the overhead paging system announcing **CODE BLUE**, floor number, and location of the emergency – three (3) times.
- .2 Upon receiving the page for “**CODE BLUE**”:
- a) The Charge Nurse/DOC shall go immediately to the area of **CODE BLUE** and direct the emergency scene until EMS personnel arrive
  - b) The professional nursing staff will respond immediately to the location and bring a blood pressure cuff and stethoscope
- .3 The Charge Nurse/DOC on duty shall direct the code and ensure appropriate emergency procedures are administered.
- a) The Charge Nurse/DOC directs the Emergency Medical System to be activated by calling 9-1-1 where appropriate. A staff member shall be delegated to make the call, indicating the emergency giving the injured person’s name, birth date, address of the facility, location of the emergency and follow the instructions of the dispatcher. The staff member is to request the name of the dispatcher before concluding the call.
  - b) A staff member shall be assigned to put the elevator on service and wait for EMS personnel on the main floor.
- .4 The Charge Nurse/DOC shall:
- a) Complete the transfer and referral record and ambulance Do Not Resuscitate (DNR) validity form (for residents only) if time permits, obtain the injured person’s Ontario Health Card and give complete report to EMS personnel prior to transfer to hospital.
  - b) Contact the Chief Executive Officer, if not on the premises and inform him/her of the situation.
  - c) Page Code Blue – ALL CLEAR three (3) times when safe to do so.
  - d) Notify the resident’s family or representative.
  - e) Inform the attending Physician/NP if unable to contact prior to transfer.
  - f) Complete all required documentation.
    - i) If a resident incident, all events leading up to, during and following an emergency are recorded in detail in the resident’s Progress Notes. Follow-up documentation relevant to the emergency is provided in the Progress Notes on each shift for the next seventy two (72) hours. The emergency is reported at change of shift to ensure that ongoing documentation occurs.
    - ii) An internal Incident Report is completed for any events that meet the definition of incident. The completed form is reviewed by the Director of Care and then the Chief

<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-02-01
<b>SUBJECT:</b>	Medical Emergency – Code Blue	<b>PAGE 3 OF 3</b>	
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Executive Officer by the end of the shift. An MOHLTC Critical Incident Form shall be completed as required.

- g) Ensure that all emergency equipment is replenished/cleaned following the emergency and returned to its storage location.

## 5.0 PROCEDURE (STAFF/VOLUNTEER/VISITOR MEDICAL EMERGENCY)

- .1 The staff member who discovers the injured person or responds to calls for assistance shall advise the registered staff of Long-Term Care and a member of the management team, or designate, to determine an appropriate course of action. If outside office hours, the Registered Nurse, or designate shall call manager on call.
- .2 Based upon the assessment of the situation, the Registered Nurse may direct that 911 is to be contacted and initiate immediate assistance, if safe to do so.
- .3 If the person is reported to be in respiratory or cardiac arrest, the designated Charge Nurse shall inform the emergency response team (EMS) that it is a Code Blue situation.
- .4 Provide as much privacy to the individual as possible.
- .5 **Ensure that all emergency equipment is replenished/cleaned following the emergency and returned to its storage location.**
- .6 As a follow-up to each incident, initiate required reports which may include critical incident report, Ministry of Labour, MLTC.



**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-03-01
<b>SUBJECT:</b> Bomb Threat – Code Black	<b>PAGE 1 OF 3</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> June 2022

**1.0 BOMB THREAT CODE**

Code Black

**2.0 POLICY**

To ensure bomb threats are handled in a safe and efficient manner.

**3.0 PERSON IN CHARGE**

The Registered staff person in charge shall be designated as the Incident Commander for the facility until relieved by the Chief Executive Officer or the Manager on Call.

**4.0 TELEPHONE PROCEDURE**

The person who receives the bomb threat shall:

- .1 complete a Bomb Threat Report answering questions fully, and record as much detail as possible; and
- .2 contact the Registered staff person in charge immediately after receiving the bomb threat.

**5.0 RESPONSE PROCEDURE**

- .1 The Incident Commander shall initiate and coordinate the Bomb Threat Response Procedures and put on the fire vest.
- .2 Steps
  - a) Dial 911. Inform police of bomb threat call and your location.
  - b) Assign staff persons to lock out elevators as per fire procedures.
  - c) Review the Bomb Threat Report in Appendix C1 (EMP-05-03-01).
  - d) Interview the person who received the telephone call.
  - e) Assign staff person who received the bomb threat to proceed to the front entrance with the Bomb Threat Report to meet the responding police officer.
  - f) Determine appropriate action based on the report and available staff.

**REVIEWED: May 2024**

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-03-01
<b>SUBJECT:</b>	Bomb Threat	<b>PAGE 2 OF 3</b>	
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- g) Consider evacuating high-risk areas, or deployment of staff.
- h) Assign staff to monitor and control entrance and exit of people.
- i) Cordon off suspected area until checked by police.
- j) Notify the Chief Executive Officer or the Manager on Call.
- k) In conjunction with police, coordinate search.
- l) Upon approval from attending police, the Registered staff person in charge (Incident Commander) shall announce the termination of the threat by utilizing runners.
- m) When the threat is terminated, the search teams and others engaged in the search shall report to the Chief Executive Officer or the Manager on Call for debriefing.
- n) An evaluation report shall be completed by the Incident Commander.

## 6.0 SEARCH PROCEDURE

.1 The Incident Commander shall initiate and coordinate the Bomb Threat Search Procedures.

### .2 Steps

- a) Assign staff to search teams (two persons per team preferred).
- b) Assign each search team a designated search area. The team should be familiar with the area.
- c) Provide each search team a copy of the Long Term Care Checklist (see EDP-03-08-01), and Staff Search Guidelines (see Appendix C2 / EMP-05-03-02).
- d) Request staff volunteers if a staff person refuses to participate.
- e) Maintain a list of areas searched.
- f) Evacuate residents from the immediate area of any suspicious objects. (i.e. at least three (3) or more adjoining rooms; as well as the same area on the floor above, or the floor below).

## 7.0 STAFF SEARCH GUIDELINES

.1 Upon direction of the Incident Commander or the Police, search assigned area systematically and thoroughly.

- a) Do not turn lights on or off; use a flashlight.
- b) Stop at doorway.
- c) Look for suspicious objects.
- d) Listen for unusual sounds.



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- e) Observe any unusual odours.
- f) Enter cautiously.
- g) Look and listen.
- .2 Do not open or close cupboards, drawers, or windows.
- .3 Do not move things about. Look behind doors and curtains, into waste receptacles, and under furniture.
- .4 Do not touch suspicious objects. Report concerns immediately to the Incident Commander, then continue searching the assigned area.
- .5 After searching a room, leave the door open.
- .6 When searching designated areas identified on the floor plan, initial all rooms, closets, stairwells, etc. that you or a team member have checked and submit the information to the Incident Commander.

## **8.0 POLICE INVOLVEMENT**

- .1 The police officers will not conduct any search of the building.
- .2 When a bomb or suspected bomb is found, it becomes the responsibility of the Police Department to deactivate it or remove it to a place where it can be safely detonated.
- .3 If an evacuation order is given by a Police Officer, the Incident Commander shall initiate an evacuation of part or all of the facility as directed.

## **9.0 PUBLIC RELATIONS**

- .1 All outside calls from the news media shall be directed to the Chief Executive Officer/designate.
- .2 The Chief Executive Officer/designate shall assess the situation to decide whether contact with the media is appropriate.

## **10.0 EDUCATION**

Bomb threat exercises shall be conducted on an ongoing basis.



**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-04-01
<b>SUBJECT:</b> Loss of Essential Services/Loss of Water Supply - Code Grey	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> June 2022

**1.0 LOSS OF WATER SUPPLY CODE**

Code Grey

**2.0 SCOPE**

- .1 Niagara Ina Grafton Gage Village has no inbuilt source of water other than the main water supply.
- .2 In the event of a short-term loss of water (four hours or less), an agreement has been made with a local water haulage company to bring a supply of 25,000 gallons to Niagara Ina Grafton Gage Village.
  - a) Toth's Water Service – Phone # (905) 646-2514
- .3 The water truck would be located near the Kitchen, “B” Building, and the water transported manually to essential areas. Particular attention shall be paid to infection control concerns.
- .4 If the water supply has not returned within a reasonable length of time, the evacuation procedure shall be initiated.
- .5 The Manager, Environmental Services/designate shall be responsible for contacting the water haulage company during an emergency.
- .6 The Manager, Environmental Services/designate shall coordinate the water distribution to the required areas, and shall report and update the Chief Executive Officer/designate on the status of the emergency.
- .7 In-house staff and volunteers shall be used to distribute the water.

**REVIEWED: May 2024**

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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-04-02
<b>SUBJECT:</b> Loss of Essential Services/Boil Water Advisory – Code Grey	<b>PAGE 1 OF 3</b>
<b>DATE OF ORIGIN:</b> July 2022	<b>REVISED:</b>

**1.0 BOIL WATER ADVISORY**

Code Grey

**2.0 POLICY**

- .1 Niagara Ina Grafton Gage Village will follow the guidance of the local Public Health Unit with the Infection and Prevention Control Officer of the community during a boil water emergency.
- .2 Residents and families will be kept up to date by email and the Niagara Ina Grafton Gage Village website during a period of boil water advisory.

**3.0 SCOPE/PROCEDURE**

- .1 Use bottled or boiled water for drinking, and to prepare and cook food. If bottled water is not available, bring water to a full rolling boil for 1 minute (at elevations about 6,500 feet, boil for 3 minutes). After boiling, allow the water to cool before use. Boil tap water even it is filtered.
- .2 Niagara Ina Grafton Gage Village will post signs or copies of the water system’s health advisory throughout the facility.
- .3 Niagara Ina Grafton Gage Village shall develop and implement a plan to notify and educate employees about emergency procedures.
- .4 All employees with diarrheal illness will be excluded from work.
- .5 Water should not be delivered to residents through medical equipment with water line connections to the public water system
- .6 Water supply will be turned off to equipment used for the food and drug administration. This restriction does not apply if the water source is isolated from the municipal water system.
- .7 Taps in resident rooms will be turned off with notification that the water should not be ingested.
- .8 There is a risk from exposure to contaminated water when showering, bathing, or using soaking tubs. Resident’s baths will be temporarily on hold until a timeframe of return to normal is projected.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-04-02
<b>SUBJECT:</b>	Loss of Essential Services/Boil Water Advisory – Code Grey	<b>PAGE 2 OF 3</b>	
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- .9 Long Term Care residents will be supplied disposable wet clothes/wipes for bathing and washing. Pre-boiled water may also be used for bathing.
- .10 Nursing staff will be required to use only bottled water or boiled water that has cooled to treat skin wounds, and for daily care, brushing teeth and soaking dentures.

#### **4.0 WATER USE FOR FOOD AND DRINK**

- .1 Residents, families, staff and visitors should only drink bottled water.
- .2 Discontinue service of food and beverage equipment with water line connections (e.g., post mix beverage machines, spray machines, auto-fill coffee/tea makers, instant hot water heaters, ice machines, etc.).
- .3 Discard ice made prior to the boil water advisory issuance and discontinue making ice.
- .4 Use commercially-manufactured ice.
- .5 Discard drinks made using water prior to the boil water advisory issuance.
- .6 Prepare drinks using bottled water.
- .7 Discard any foods made with water or rinsed with water prior to the boil water advisory issuance.
- .8 Prepare/cook food using bottled water and/or restrict the menu to items that do not require water.

#### **5.0 COOKING AND FOOD PREPARATION EQUIPMENT/UTENSIS/TABLEWARE**

- .1 Use disposable plates, cups, and utensils if possible. If not, sanitize equipment, utensils and tableware using the dishwashing machines that have a dry cycle or a final rinse that exceeds 113°F for 20 minutes or 122°F for 5 minutes or 162°F for 1 minute.
- .2 Discontinue operations when inventories of clean equipment, utensils and tableware are exhausted.
- .3 Shut off appliances that use tap water, such as ice machines, drinking fountains, produce misters, bottled water refill machines, soft drink fountains connected to the water supply, and water dipper wells.
- .4 Use an alcohol-based hand-sanitizer and let hands air dry.

#### **6.0 HOUSEKEEPING**

- .1 Contact surfaces such as door knobs, handles, railings, vanities, etc. and non-contact surfaces such as walls, floors, and ceilings can be cleaned and disinfected using normal routine practices
- .2 When cleaning floors and water is to be used, use of boiled water is advised. Water from taps is not to be used due to the potential contamination.

#### **7.0 LAUNDRY**

<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-04-02
<b>SUBJECT:</b>	Loss of Essential Services/Boil Water Advisory – Code Grey	<b>PAGE 3 OF 3</b>	
<b>DATE OF ORIGIN:</b>	July 2022	<b>REVISED:</b>	

- .1 Niagara Ina Grafton Gage Village will contact local Public Health for instructions in laundry care during a boil water advisory. Generally, it is safe to do laundry.

## **8.0 AFTER A WATER BOIL ADVISORY**

- .1 Equipment with water line connections must be flushed, cleaned and sanitized according to the manufacturer’s instructions.
- .2 Flush pipes and faucets. Run cold water faucets continuously for at least 5 minutes.
- .3 Flush drinking fountains. Run water continuously for at least 15 minutes.
- .4 Run water softeners through a regeneration cycle.
- .5 Drain and refill hot water heaters set below 113°F.
- .6 Change all point-of-entry and point-of-use water filters, including those associated with equipment that uses water
- .7 Resume usual bathing practices and care for patients with breaks in the skin.



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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-04-03
<b>SUBJECT:</b> Loss of Essential Services/Loss of Heat – Code Grey	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> May 2024

**1.0 LOSS OF HEAT CODE**

Code Grey

**2.0 POLICY**

- .1 Niagara Ina Grafton Gage Village is not equipped with an alternate source of heat.
- .2 When a loss of heat occurs, the Manager, Environmental Services shall be called.
- .3 When the facility heating system has failed, the Manager, Environmental Services/designate shall ascertain the source of the problem. If the failure is found to be within the heating system, the Manager, Environmental Services/designate shall obtain the services of a heating systems' service contractor.
- .4 The Manager, Environmental Services/designate shall inform the Emergency Management Team of the expected duration of the interruption.
- .5 If the situation deems necessary, the Chief Executive Officer/designate shall issue an evacuation order of all residents.
- .6 Staff shall ensure that all windows and doors are kept closed.
- .7 Housekeeping shall have additional blankets for residents available, if required. Blankets located in the Laundry Room.

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NIAGARA INA GRAFTON GAGE VILLAGE
EMERGENCY MANAGEMENT PLAN MANUAL

Table with 2 columns: Field (SECTION, SUBJECT, DATE OF ORIGIN) and Value (Emergency Situations, Power Failure - Code Orange, May 2001, NUMBER: EMP-03-05-01, PAGE 1 OF 5, REVISED: May 2024)

1.0 POWER FAILURE CODE

Code Orange

2.0 INTERRUPTION WITH GENERATOR BACK-UP

.1 Policy

In the event of a power failure, Niagara Ina Grafton Gage Village is equipped with an alternate source of emergency power. When a power failure occurs, the Manager on Call, Manager, Environmental Services, or a maintenance staff person shall be called.

.2 Lighting

- a) An emergency generator provides power to emergency lighting fixtures in the hallways and stairwells. All exit signs of "A", "B", and "E" Buildings will remain illuminated.
b) Flashlights shall be stored at the First Aid Room and in each department. There is a plug-in flashlight located in the Med Room.

.3 Fire Alarm System

- a) The fire alarm system has a generator back-up power supply, which will automatically provide power to the fire alarm panels and fire detection system.
b) During a power interruption, the fire alarm system will emit an audible trouble signal at each annunciator panel in "B", "D" and "E" Buildings. The annunciator panel shall continue to signal until power is restored. Maintenance staff shall reset the panels once power is restored.

.4 Fire Doors

- a) All fire doors will close during the power interruption. The fire doors may be magnetically held open when the power is restored.
b) Fire doors that have magnetic door locks will be de-energized during the power interruption, except in "A", "B", and "E" Buildings where the panel is connected to the generator.

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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-01
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.5 Telephones

During a power failure, the Niagara Ina Grafton Village telephone system in “A” and “B” Buildings will remain in service.

.6 Elevators

During a power failure, the service area elevator in “B” Building will be temporarily out of order for ten (10) to fifteen (15) seconds. Maintenance staff shall be responsible for checking that the elevator resumes normal operation when the power is restored.

**Note:**

The service area elevator is the only elevator that can be operated during a power failure and should only be used in an emergency.

.7 Resident Call Systems/Wandering Alert System

All resident emergency call systems will continue to operate during the power failure.

.8 Registered Staff

- .1 Ensure that the refrigerator containing vaccine is plugged into a red outlet.
- .2 Ensure that any electric air mattresses, being used by residents, are plugged into a red outlet, or the mattresses should be replaced.
- .3 Extension cords for electric beds shall be located in the Emergency Kit in the Med Room.

**3.0 PROCEDURE FOR CHARGE NURSE DURING INTERRUPTION WITH GENERATOR BACK-UP**

- .1 Staff and volunteers in all departments shall report to the Nursing Station and obtain direction from the Charge Nurse.
- .2 Staff shall remain in LTC to provide assistance. If assistance is not required, staff shall follow the protocols outlined for their respective department (Dietary, Assisted Living, etc.).
- .3 The following devices shall continue to function during a power outage:
  - a) walkie talkies utilized by Assisted Living and Maintenance staff;
  - b) telephone at the Nursing Station and the computer facing Room 1107;
  - c) Call Bell system;
  - d) mechanical lifts; and
  - e) EMAR tablet. There is also a backup computer.
- .4 Ensure that all residents on oxygen have a portable that is filled with oxygen.



<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-01
<b>SUBJECT:</b> Power Failure	<b>PAGE 3 OF 5</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> May 2024

- .5 The Charge Nurse shall delegate a staff member to ensure that nobody is trapped in the elevator behind the Administration Office, “B” Building. The elevator in “A” Building and the service elevator in “B” Building shall continue to function during the power outage.
- .6 If a person is trapped, the Charge Nurse or Maintenance staff shall place an emergency call to the elevator service department.
- .7 An extension cord shall be utilized to plug in the vaccine refrigerator. This is not a priority if there is no vaccine in the fridge.
- .8 The Charge Nurse shall delegate staff to check on residents and ensure that residents remain in their room.
- .9 Staff are directed to utilize the battery-operated lamps, flashlights, and extra batteries in the Med Room Emergency Kit.
- .10 Extension cords in the Med Room Emergency Kit are to be utilized to raise/lower electric beds one at a time to provide resident care. There is one designated generator outlet at the Nursing Station and three designated generator outlets beneath the tablets throughout the LTC corridor.
- .11 The Charge Nurse shall notify the Manager On Call if the generator back-up runs for more than thirty (30) minutes. The Manager On Call shall report to NIGGV and assist/direct/delegate staff.
- .12 If the Manager On Call cannot report to NIGGV within a reasonable amount of time, he/she shall contact another Manager to report to NIGGV.
- .13 The Smart Tub shall not function during the power outage. If the power goes out while a resident is in the tub, follow the instructions in the Tub Room and utilize the emergency release located at the back of the tub. The tub chair shall continue to function during the power outage.
- .14 The POC tablets shall not function during the power outage. Staff are to record necessary information on paper.
- .15 Special air mattresses shall retain air for a lengthy time. Mattresses shall be checked periodically and replaced with regular mattresses from the Stores Room if they deflate.
- .16 When power is regained, complete the following:
  - a) Reset the doors beside the fire panel in the Lower Level. It is the while box to the left of the fire panel. This must be done to reset the doors (including the main Atrium door).
  - b) Turn the computer located in the brief room on. This computer logs the call bell calls.

**4.0 PROCEDURE FOR ASSISTED LIVING STAFF DURING INTERRUPTION WITH GENERATOR BACK-UP**

- .1 Staff shall report to the Nursing Station and obtain direction from the Charge Nurse.
- .2 All staff shall carry a flashlight during a power outage.

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-01
<b>SUBJECT:</b> Power Failure	<b>PAGE 4 OF 5</b>
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- .3 Staff shall remain in LTC to provide assistance. If assistance is not required, staff shall return to regular duties.
- .4 Should the power outage be estimated to be more than 2 hours, a staff member should be assigned to check on each client who has a SARA emergency button. The list of residents on the emergency button system is located at the front of the scheduling binders.

## 5.0 INTERRUPTION WITHOUT GENERATOR BACK-UP

### .1 Responsibilities of Environmental Services Department

- a) When a total loss of power occurs, the Manager, Environmental Services/Manager On Call shall obtain the expected duration of the power interruption from St. Catharines Hydro.
- b) The Manager, Environmental Services/Manager On Call shall obtain the services of a generator repair company.

### .2 All Areas

- a) All staff shall report to LTC and be directed to perform only essential activities during the power interruption.
- b) Staff shall request that residents remain in their rooms for safety.

### .3 Emergency Phones

If the generator fails during the power interruption, the Niagara Ina Grafton Gage Village phone system will be inoperable. Any resident phone or staff cellphone may be used for emergency communication.

### .4 Elevators

- a) During the power interruption, the Environmental Services Department and nursing staff shall ensure that nobody is trapped in an elevator.
- b) If a person is trapped, the Environmental Services Department/Manager On Call shall place an emergency call to the elevator service department.

## 5.0 PROCEDURE FOR ASSISTED LIVING STAFF DURING INTERRUPTION WITHOUT GENERATOR BACK-UP

- .1 Staff shall report to the Nursing Station and obtain direction from the Charge Nurse.
- .2 All staff shall carry a flashlight during a power outage.
- .3 Staff shall remain in LTC to provide assistance. If assistance is not required, staff shall return to regular duties.

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-01
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- .4 Should the power outage be estimated to be more than 2 hours, a staff member should be assigned to check on each client who has a SARA emergency button. The list of residents on the emergency button system is located at the front of the scheduling binders.

## **6.0 PROCEDURE FOR DIETARY STAFF DURING INTERRUPTION WITHOUT GENERATOR BACK-UP**

- .1 Staff shall order a freezer truck from Kool Zone (1-866-943-3675) if the power outage is estimated to be more than eight (8) hours.



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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-02
<b>SUBJECT:</b> External Air Exclusion – Code Orange	<b>PAGE 1 OF 2</b>
<b>DATE OF ORIGIN:</b> October 2001	<b>REVISED:</b> May 2024

**1.0 EXTERNAL AIR EXCLUSION CODE**

Code Orange

**2.0 POLICY**

To ensure that no external air enter the building in the event of an external emergency (during fire situations, air handlers are shut down automatically).

**3.0 PROCEDURE**

The Incident Commander shall turn off the air handlers at the following locations, and follow the procedures listed below:

**.1 “A” Building**

- a) Third (3<sup>rd</sup>) floor Janitor Room (adjacent to the laundry room) – open the timer box beside the door, and move the switch to the “off” position, using the chrome lever.

**.2 “B” Building**

- a) Main Electrical Room inside the Mechanical Room (underneath the “B” Dining Room and Kitchen) – switch off the “make up air kitchen” breaker, located on the kitchen panel.
- b) Mechanical Room (on the far wall) – switch off the “Cooling Tower” on the Cooling Tower feed (pull lever down to the “off” position).
- c) Swimming Pool Equipment Room (near exit door stairwell #4) – there is a box above the pool filter on the wall. Turn the fan switch to the “off” position.

**.3 “D” Building**

- a) Fourth (4<sup>th</sup>) floor Janitor Room (by the roof access ladder) – turn the two (2) on/off switches to the “off” position.

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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-02
<b>SUBJECT:</b> External Air Exclusion	<b>PAGE 2 OF 2</b>
<b>DATE OF ORIGIN:</b> October 2001	<b>REVISED:</b> May 2024

.4 “E” Building

a) Electrical Room (Lower Level) – there is a large main electrical lever across from the door. At the top of the panel, immediately to the left of the main lever, are the air make up breakers. They are marked “North Make Up Air” and “West Make Up Air”. Turn both of them to the “off” position.

.5 Once this has been completed, the Manager, Environmental Services or the maintenance staff shall be notified.

.6 Once the “all clear” has been given, either the maintenance staff or the company that does the mechanical maintenance shall turn all the systems back to the “on” position.



**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-03
<b>SUBJECT:</b> Windstorm/High Wind Warning – Code Orange	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> May 2011	<b>REVISED:</b> May 2024

**1.0 WINDSTORM/HIGH WIND WARNING CODE**

Code Orange

**2.0 PROCEDURE**

In the event of a windstorm or high wind warning, the following procedures shall be adhered to:

- .1 Residents and staff shall stay indoors, except in the case of emergency or necessity.
- .2 Residents and staff shall ensure all doors and windows are closed and securely fastened where possible.
- .3 Residents and staff shall stay away from windows where possible.
- .4 Staff shall not be permitted to go on the roof of any building during a windstorm or high wind warning.

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**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-05-04
<b>SUBJECT:</b>	Contingency Plans Re Labour Dispute and Walkout of Staff – Code Orange	<b>PAGE 1 OF 2</b>	
<b>DATE OF ORIGIN:</b>	May 2001	<b>REVISED:</b>	May 2024

**1.0 PURPOSE**

- .1 The following is a set of guidelines and protocol which shall be followed in the event that staff walk out during a labour dispute/strike. It is highly unlikely that all staff would leave at one point; however, it is important that a contingency plan is ready to go into effect.
- .2 In the event of a walkout, mass resignations, or slowdown of the labour force, the Chief Executive Officer/designate shall take overall responsibility. The responsibility for the delivery of services in each of the departments shall remain with the department manager.

**2.0 ADMINISTRATION**

- .1 The Manager, Finance shall assume the responsibilities for all financial matters pertaining to Niagara Ina Grafton Gage Village.
- .2 The Manager, Human Resources shall assume the responsibilities for ensuring a staffing plan is implemented

**3.0 NURSING SERVICES**

- .1 The Director of Resident Care shall assume front-line supervisory responsibilities. In the event that Registered Nurses take part in a walkout, direct supervision shall be delivered by the Director of Resident Care. Assistance from private agencies that supply nursing services shall be requested as necessary.
- .2 In the event that the CUPE local walked off the job or was on strike, the majority of front-line nursing staff would be unavailable for work. Management/non-union staff shall then fulfill front-line responsibilities, along with agency staff.
- .3 It should be noted that, depending on the availability of additional nursing staff, care may or may not be able to be provided for the residents. Arrangements shall be made with other agencies to care for some of the heavier care residents, and attempts to relocate residents to other long term care facilities or health care facilities will be made. Families shall be encouraged to provide care in their own home, if practical. The present practices and procedures related to the discharge of residents or transfer of residents to other facilities shall be the responsibility of the Director of Resident Care.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-05-04
<b>SUBJECT:</b>	Contingency Plans Re Labour Dispute and Walkout of Staff – Code Orange	<b>PAGE 2 OF 2</b>	
<b>DATE OF ORIGIN:</b>	May 2001	<b>REVISED:</b>	May 2024

#### **4.0 ASSISTED LIVING SERVICES**

Community Care Access Centre (CCAC) shall be contacted to provide essential services to clients in Assisted Living.

#### **5.0 FOOD SERVICES**

Arrangements shall be made with other agencies and/or one of the local hospitals to provide meals for the duration of the strike or walkout. The resident menu shall be modified in order to maximize the use of ready-made products. The delivery and serving of meals shall be coordinated by the Manager, Environmental Services. Where possible, family members, volunteers, and students shall be requested to assist in serving meals.

#### **6.0 HOUSEKEEPING**

The Manager, Environmental Services shall supervise, as well as deliver direct service. Minimum standards of cleanliness and sanitation shall be maintained throughout the duration of the strike, and only necessary activities shall take place. Volunteers shall be asked to assist.

#### **7.0 LAUNDRY**

Internal personal laundry services shall only be offered if there is available staff. Family members shall be requested to do the personal laundry of their resident. The Manager, Environmental Services shall supervise, as well as make arrangements for contracted laundry services if necessary.

#### **8.0 MAINTENANCE**

In the event that the maintenance staff walked off the job or was on strike, the Manager, Environmental Services shall assume direct responsibility for maintaining environmental control. Assistance shall be requested from other facilities. Job requirements would be contracted out where applicable.

#### **9.0 SUMMARY**

- .1 It should be noted that these are general guidelines to assist in the event of a walkout, mass resignation, or slowdown of the labour force. In the event of difficulties with picket lines or harassment of existing staff within the building, assistance will be requested from the Niagara Regional Police Department and Niagara Ina Grafton Gage Village's Solicitor in terms of securing an injunction.
- .2 Life lease/rental apartments would receive no services during this period.





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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-05-05
<b>SUBJECT:</b> Building Flooding – Code Orange	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> November 2009	<b>REVISED:</b> May 2024

**1.0 BUILDING FLOODING CODE**

Code Orange

**2.0 POLICY – LOCAL SHUT-OFF LOCATIONS**

.1 Bathrooms

- a) Turn the handles under the sink to the right. (Note: In “A” Building, you must use a socket wrench, located in the Environmental Services Offices, to shut off the water. Shut-offs are located under the sink in copper pipe opening.)
- b) Toilet shut-offs are located beneath the tank before the pipe enters the wall. Turn the handle to the right to shut off.

.2 Kitchens

- a) The shut-offs are located under the sink. Turn handles to the right to shut off.

.3 Main Shut-Off Locations

- a) The mains are located in the Mechanical Rooms in the basement of each building. Refer to floor plans for the applicable building. This would apply in an extreme emergency situation only.

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**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-06-01
<b>SUBJECT:</b> Search for Missing Resident – Long Term Care – Code Yellow	<b>PAGE 1 OF 2</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> May 2024

**1.0 SEARCH FOR MISSING RESIDENT (LTC) CODE**

Code Yellow

**2.0 POLICY**

A search procedure shall take place when a resident fails to return within one (1) hour of the appointed time following a leave of absence, or when he/she cannot be accounted for during any shift, specifically at meal times or during night rounds.

**3.0 DEFINITION**

If a resident is not fully competent all of the time, he/she is to be deemed incompetent for the purpose of this procedure.

**4.0 PROCEDURE**

**.1 Competent Resident**

- a) A competent resident is not considered missing, unless his/her whereabouts is not known for one (1) hour or more.
- b) The Registered staff person in charge (Incident Commander) shall then initiate a search of the immediate grounds utilizing the checklist, see Appendix D1 (EMP-05-04-01).
- c) If the resident is not found, the Incident Commander shall notify the family.
- d) The Incident Commander shall then initiate a complete search utilizing the checklist.
- e) The Incident Commander shall then notify the Manager On Call.
- f) The Incident Commander shall follow the directions of the Manager On Call.
- g) The Manager on Call shall notify the Chief Executive Officer.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-06-01
<b>SUBJECT:</b>	Search for Missing Resident – Long Term Care	<b>PAGE 2 OF 2</b>	
<b>DATE OF ORIGIN:</b>	May 2001	<b>REVISED:</b>	May 2024

.2 Incompetent Resident

- a) An incompetent resident is considered missing, if his/her whereabouts is not known.
- b) The Incident Commander shall then initiate a search of the immediate grounds utilizing the checklist, see Appendix D1 (EMP-05-04-01).
- c) If the resident is not found, the Incident Commander shall notify the family.
- d) The Incident Commander shall then initiate a complete search utilizing the checklist.
- e) The Incident Commander shall then notify the Niagara Regional Police and give a description of the missing resident. A picture of the missing resident should be available to give to the police.
- f) The Incident Commander shall then notify the Manager on Call.
- g) The Manager on Call shall notify the Chief Executive Officer.

.3 If any resident is missing for more than three (3) hours, the Manager On Call shall notify the Compliance Advisor.



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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-06-02
<b>SUBJECT:</b> Search for Missing Client – Assisted Living Services	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> May 2001	<b>REVISED:</b> May 2024

**1.0 POLICY**

A search procedure shall take place when client who can be considered medically incompetent fails to be present at the time of the next scheduled service.

**2.0 DEFINITION**

Medically Competent is defined as: A patient who has the mental capacity to consent to medical treatment. The Mental Capacity Act 2005 defines a competent patient as one who is able to take a decision for himself, i.e., who can understand and retain the information relevant to the decision, weigh that information as part of the process of making the decision, and communicate that decision (s 3(1). – Oxford Dictionary.

If a client is not fully competent all of the time, he/she is to be deemed incompetent for the purpose of this procedure.

Incident Commander: Shall be assigned to the individual on medication pass for the appropriate building to which the client resides in.

**3.0 PROCEDURE**

- a) An incompetent client is considered missing, if his/her whereabouts is not known.
- b) The PSW shall check the hospital and leave of absence board to ensure the client hasn't reported their absence. Should nothing be noted, then the PSW will connect with the team to see if any other worker is aware of the client's absence. If no one is aware then the PSW will report to the Incident Commander.
- c) The Incident Commander shall then initiate a search of the full grounds utilizing the checklist, see Appendix D1 (EMP-05-04-01).
- d) If the client is not found, the Incident Commander shall notify the family.
- e) The Incident Commander shall then notify the Manager on Call.
- f) The Incident Commander shall then notify the Niagara Regional Police and give a description of the missing client. A picture of the missing client should be available to give to the police. Pictures are located on the Shared Drive under the individual clients care plan profile.
- g) The Manager on Call shall notify the Chief Executive Officer.

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**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-07-01
<b>SUBJECT:</b> Workplace Violence – Code White	<b>PAGE 1 OF 4</b>
<b>DATE OF ORIGIN:</b> April 2011	<b>REVISED:</b> May 2024

**1.0 WORKPLACE VIOLENCE CODE**

Code White

**2.0 BACKGROUND**

- .1 Niagara Ina Grafton Gage Village (NIGGV) is committed to providing a safe and healthy environment, free from actual, attempted or threatened violence to protect its workers, residents and visitors.
- .2 For the purposes of this Emergency Management Plan, Workplace Violence shall encompass all incidents of violence involving staff, residents, visitors, contractors, and any other person on NIGGV property. Responding persons to the incident of workplace violence shall be encouraged to call the authorities immediately.

**3.0 POLICY**

- .1 Code White is used to signal that assistance is required due to another person behaving in a potentially dangerous manner towards themselves or others. There can be a potential that this behaviour may escalate causing further risk and harm to others.
- .2 The staff responding to a Code White shall do so in a non-violent manner; least restraint approaches shall only be implemented after all other options have been tried. Should staff feel that the situation is beyond their ability to intervene effectively or the behaviour involves a person other than a resident, 9-1-1 shall be called.
- .3 Annually, all staff shall be trained in responding to a Code White.

**4.0 PROCEDURE**

- .1 Call out **“CODE WHITE”**. All staff to respond immediately to area of concern.
- .2 The person confronted with the situation should:
  - a) Stay calm.
  - b) Call for help from co-workers – Code White. The staff member receiving the information shall immediately notify the registered staff of the situation. The registered staff shall immediately alert other staff members using the overhead paging system, paging **“CODE WHITE”**, Care Area and location – three (3) times.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-07-01
<b>SUBJECT:</b>	Workplace Violence – Code White	<b>PAGE 2 OF 4</b>	
<b>DATE OF ORIGIN:</b>	April 2011	<b>REVISED:</b>	June 2022

- c) Once the code has been activated the registered staff shall immediately go to the situation to attempt to de-escalate the resident’s behaviour.
- d) The Charge Nurse shall assign tasks to staff who respond. Tasks include:
  - i) Removing other residents in the area;
  - ii) Removing objects that could be used as weapons from the area;
  - iii) Removing visitors from the area;
  - iv) Establishing a safe perimeter;
  - v) Reviewing the resident chart for orders or family/representative to contact;
  - vi) Contacting the physician/NP, and/or contacting the family/representative;
  - vii) Contacting the police (call 9-1-1) if non-resident involved.
- e) Take measures to protect own safety and the safety of those around (i.e. have residents leave room, position yourself close to the door).
- f) Registered staff can use the following to de-escalate the situation:
  - i) Establish and maintain eye contact;
  - ii) Talk in a slow gently reassuring voice; try to keep the resident talking;
  - iii) Offer the resident tea or coffee or offer a snack;
  - iv) Do not patronize the resident or talk in a degrading manner;
  - v) Ask simple questions of the resident;
  - vi) Offer them a seat or the option of going back to bed;
  - vii) Offer to call a relative or friend and let them talk with them.
- g) **IF AGGRESSIVE RESIDENT** – Return to resident, ensure environment is safe.
- h) Do not promise anything in response to demands. Acknowledge requests but check with supervisor (claim lack of authority).
- i) Do not obstruct perpetrator’s passage in any way.

<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-07-01
<b>SUBJECT:</b>	Workplace Violence – Code White	<b>PAGE 3 OF 4</b>	
<b>DATE OF ORIGIN:</b>	April 2011	<b>REVISED:</b>	June 2022

.3 Second staff member on scene:

- a) Isolate dangerous individual if safe to do so.
- b) Monitor traffic and direct people away from area in incident.
- c) Call police if non-resident.

.4 If situation is resident specific:

- a) If able to diffuse violent behaviours, stay with resident, provide reassurance and assess contributing factors. Document on the Resident Care Plan interventions and outcomes and complete an Internal Incident Report. Hold an interdisciplinary care conference.
- b) If unable to diffuse violent behaviours, call 9-1-1 for emergency response. Notify attending physician/NP, family/representative, DOC/Chief Executive Officer. Complete an Internal Incident Report and a MOHLTC CI Form. Document strategies on the Resident Care Plan and Progress Notes.
- c) Charge Nurse shall assign a staff member to meet police and direct them to affected area.
- d) Registered staff responding to the situation should review physician/NP orders for physical and chemical restraint orders. If orders present, prepare the appropriate restraint following NIGGV's restraint policies. If no orders, contact physician/NP for orders.
- e) If the resident does not settle and continues to pose a risk contact the physician/NP regarding a Form 1 under the Mental Health Act. If the resident is placed on a Form 1, call 9-1-1 for transport to the hospital for assessment.
- f) Once the situation is de-escalated, consider assigning one to one staffing to the resident for up to seventy two (72) hours with the required approvals.

.5 If situation is staff specific:

- a) If able to diffuse violent behaviours, employee shall be sent home immediately pending outcome of investigation.
- b) If unable to diffuse violent behaviours, call 9-1-1 for emergency response and follow the direction of police. Notify Human Resource Manager/Chief Executive Officer. Employee shall not return to work pending the outcome of investigation.
- c) Complete an employee incident report.

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-07-01
<b>SUBJECT:</b> Workplace Violence – Code White	<b>PAGE 4 OF 4</b>
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- .6 If situation is family/visitor specific:
- a) Attempt to diffuse the situation by responding in calm voice.
  - b) Request assistance from supervisor/manager.
  - c) If able to diffuse violent behaviours, report all proceedings to the supervisor/manager and if warranted the supervisor/manager shall report incident to police. Management and staff shall cooperate with the police and continue with the procedures that are appropriate to the situation.
  - d) If unable to diffuse violent behaviours, call 9-1-1 for emergency response and follow direction of the police. Notify Manager On Call/Chief Executive Officer.
  - e) When safe to do so, page Code White – ALL CLEAR three (3) times.
  - f) The Chief Executive Officer shall be notified of all instances of Code White that result in injury of anyone or in the transfer of a resident to hospital under a Form 1.
  - g) Complete reporting requirements as per all emergency response situations.

***Refer to the following Corporate Policies for more information:***

- ***C-10-03-01 – Workplace Violence Prevention Policy***
- ***C-10-03-02 – Workplace Harassment Prevention Policy***
- ***C-10-03-03 – Abuse-Free Environment Policy***





**NIAGARA INA GRAFTON GAGE VILLAGE**  
**EMERGENCY MANAGEMENT PLAN MANUAL**

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-07-02
<b>SUBJECT:</b> Hostage Taking – Code White	<b>PAGE 1 OF 3</b>
<b>DATE OF ORIGIN:</b> April 2011	<b>REVISED:</b> May 2024

**1.0 WORKPLACE VIOLENCE CODE**

Code White

**2.0 POLICY**

.1 The Hostage Taking Reaction Plan is developed to ensure the safety of all residents, staff and other involved parties and to return Niagara Ina Grafton Gage Village (NIGGV) to normal as quickly as possible.

**3.0 PROCEDURE**

.1 Hostage

- a) Do whatever the captor tells you.
- b) Be especially careful during the first four or five minutes. This is a critical time.
- c) Speak only when spoken to. Never wisecrack.
- d) Try not to show open emotions. Hostage-takers like to play on emotional weakness.
- e) Sit down if you get a chance. It shows a lack of an aggressive stance.
- f) Act relaxed. This should have the same effect on the captor.
- g) If you see a chance to escape, weigh it carefully. Don't rush in without being certain of getting clear, and don't endanger anyone.
- h) Have faith in your fellow workers and negotiators.
- i) Don't make suggestions to hostage-takers. If your suggestions go wrong, he/she may think you planned it that way.
- j) Don't turn your back on your captor unless ordered to. Try to keep eye contact without staring. People are less likely to harm someone they are looking at.
- k) Be patient.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-07-02
<b>SUBJECT:</b>	Hostage Taking – Code White	<b>PAGE 2 OF 3</b>	
<b>DATE OF ORIGIN:</b>	April 2011	<b>REVISED:</b>	May 2024

.2 First Person to Identify the Situation

- a) Secure immediate area where possible, by removing all non-participating persons. Secure door, if appropriate, and isolate the incident. Call 9-1-1 immediately.
- b) Notify your immediate supervisor or person in authority by the quickest possible means. This person shall call a Code White – stating location – three (3) times.
- c) Observe, in order to fully report on:
  - i) Number of hostages taken and type of disturbance;
  - ii) Type and number of participating persons; and
  - iii) Type and number of weapons, if any, in possession of persons.
- d) Do not speak to the media unless authorized to do so.

.3 First Senior Person on the Scene

- a) Assess the situation, advise both the police and the Chief Executive Officer and take control until they arrive.
- b) Try to have the following information available when police and administrative staff arrive:
  - i) Threats and demands by the hostage-taker;
  - ii) Type and number of weapons thought to be in hostage-taker’s possession;
  - iii) Presence of any non-participating persons;
  - iv) Precise location of the area controlled by hostage-taker;
  - v) Floor plan of the area
  - vi) Identity and description of participants;
  - vii) Photographs of hostages and hostage-taker, if available;
  - viii) Location and numbers of available area telephones.
- c) Supplement and reinforce as the situation dictates, in order to prevent death or injury to hostages.
- d) If possible direct the evacuation of all residents from area, if not possible, residents should remain in their room with doors closed.
- e) Complete required notifications.

<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-07-02
<b>SUBJECT:</b> Hostage Taking – Code White	<b>PAGE 3 OF 3</b>
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#### .4 General Guidelines

- a) Negotiations with hostage-takers are best handled by the police, who have trained personnel for this type of job. If the NIGGV staff must enter into negotiations with hostage-takers pending the arrival of police:
  - i) Have negotiations conducted by junior-rank personnel in order to allow delaying tactics, for example, “I’ll ask”, “I’ll seek clarification”.
  - ii) Meet demands with “I’ll do my best”. Never say “No.”
  - iii) Under no circumstances should drugs be given to any parties involved in the incident.
  - iv) Every effort should be made to regain control of the situation by peaceful means, i.e. discussion.
  - v) Staff on duty should not hesitate to contact those clinical staff who are familiar with and may have some influence over the persons involved in the hostage situation.
  - vi) Leave any decision-making process to police and Chief Executive Officer.
  - vii) Do not follow orders given by a hostage under conditions of duress, except to save lives.



**NIAGARA INA GRAFTON GAGE VILLAGE**  
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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-08-01
<b>SUBJECT:</b> Chemical Spill – Code Brown	<b>PAGE 1 OF 4</b>
<b>DATE OF ORIGIN:</b> April 2011	<b>REVISED:</b> May 2024

**1.0 CHEMICAL SPILL CODE**

Code Brown

**2.0 DEFINITION**

The definition of a “spill”, from *The Ministry of the Environment (MOE)’s Environmental Protection Act, 1990*:

“spill”, when used with reference to a pollutant, means a discharge:

- a) into the natural environment;
- b) from or out of a structure, vehicle, or other container; and
- c) that is abnormal in quality or quantity in light of all the circumstances of the discharge.

Therefore, a spill can be a discharge of anything from a container or building which enters the natural environment (water and land). The following are examples:

- a) Spill of gasoline in Generator Room.
- b) Broken container of chemicals.
- c) Freon leak from chiller.
- d) Leaking storage tank.

**Note:**

Some of these spills must be reported to the MOE Spill Action Center and some are not necessary to be reported, therefore, all spills must be reported to the 24/7 Spills Action Centre hotline at 1-866-663-8477 so that it may be documented and reported to the MOE if necessary.

**3.0 POLICY**

- .1 Code Brown is used to alert all employees within Niagara Ina Grafton Gage Village (NIGGV) that a chemical spill has occurred.
- .2 Response to a chemical spill may vary due to the type of chemical, the volume and the location of the spill.
- .3 Response to a chemical spill must be such that it protects the safety of the staff, residents, and property.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-08-01
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#### 4.0 PROCEDURE

- .1 A chemical spill requires determination of the following common considerations:
  - a) Type of chemical spill (WHMIS);
  - b) Volume of chemical;
  - c) Type of danger associated with the specific chemical from MSDS sheets;
  - d) Location of chemical spill;
  - e) Risk to staff, residents, and property – “major” or “minor”;
  - f) Notification requirements for safety and environmental purposes; for example, fire department, government and municipal agencies, NIGGV Occupational Health & Safety Committee co-chairs, etc.
  
- .2 When there is any doubt about the type, extent, or nature of the risk associated with a spill, the person discovering the spill shall:
  - a) Pull the Fire Alarm or call 9-1-1;
  - b) Page CODE BROWN – three (3) times and location of the spill;
  - c) Evacuate the immediate spill area.
  
- .3 In the event of such a disaster, immediate reaction would be directed by the Fire Department, as they would be the best equipped to determine the type of chemical, and
  - a) The rate at which it is spreading;
  - b) The method to control it;
  - c) The damage it poses to NIGGV
  - d) The appropriate action and where, if necessary, to re-locate if pre-planned areas of refuge are designated as unsafe.
  
- .4 If evacuation is required, follow established evacuation procedures. If it is the intent to remain in the building, certain preventative actions can be taken depending upon the properties of the chemical involved.
  
- .5 Some possible reactions might include:
  - a) If it is a gas that is airborne, seal all doors and windows;
  - b) Shut off all ventilation systems;

<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-08-01
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- c) Prohibit use of food and water until it has been tested.
- .6 If there is a potential for explosion:
  - a) NO SMOKING on the property;
  - b) Shut off all open flames in kitchen, laundry, boiler room, etc.
- .7 If it is at all feasible, locate oxygen and oxygen masks for those affected by a gas. Provide PPE.
- .8 Other steps may be required depending upon the chemical involved.
- .9 Once the area has been evacuated:
  - a) Assess the situation for such hazards as fire, explosion, or chemical fumes inhalation;
  - b) Shut off any ignition source;
  - c) Stop the source of flow if it can be done safely and quickly;
  - d) Notify appropriate government/expert agencies re: legislative requirements for handling and clean up.

## **5.0 MAJOR CHEMICAL SPILL PROCEDURES**

- .1 Evacuate immediate area.
- .2 Call the Manager on Call and/or the Environmental Services Department (Extension 235).
- .3 State your name, location, chemical(s) involved, and the amount spilled.
- .4 Attend to any person(s) who may have been contaminated.
- .5 Consult the Material Safety Data Sheet (MSDS) for first aid information. Refer to “Chemical Spills on Body” for further information.
- .6 Wait in a safe area for the response. Your knowledge of the area will assist the team.
- .7 Do not allow unauthorized personnel to enter the contaminated area.

## **6.0 MINOR CHEMICAL SPILL INDOORS**

- .1 Stop and think. Do not rush. Carefully plan cleanup.
- .2 Refer to the MSDS and determine appropriate cleanup procedures.

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<b>SUBJECT:</b>	Chemical Spill – Code Brown	<b>PAGE 4 OF 4</b>	
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**Note:**

The effects of a spill can be minimized with proper planning. The size, as well as the resultant hazard partially determines the extent of the required precautions. Planning for emergencies such as spills must be an integral part of preparation for all experimental work.

- .3 Decide if you can safely handle the spill; if unsure, call the Environmental Services Department.
- .4 Eliminate all ignition sources if flammable material is involved.
- .5 Turn on fumehoods to capture or direct the flow of vapours.
- .6 Confine the spill to a small area. Do not allow the material to spread. Dike, block, or contain the size of a spreading liquid spill by using appropriate absorbing material (vermiculite, commercial absorbent, etc.).
- .7 Carefully remove other materials, containers, and equipment from the path of the spill.
- .8 Sweep solids of low toxicity into a dust pan and place into a container for disposal.
- .9 After removal of spilled material, if the chemical is soluble in water, the area should be washed with warm water to remove any remaining residue.
- .10 Report the incident to the Manager, Environmental Services.

**7.0 CHEMICAL SPILL OUTDOORS**

- .1 Contain spill rapidly by diking with suitable material (i.e. kitty litter, vermiculite, etc.). Attempt to prevent chemicals from contaminating ground water and sewer system. Cover opening to sewer if able.
- .2 Environmental Services Department shall be called immediately.
- .3 Do not leave a spill site unattended

**8.0 CLEAN UP**

- .1 In many cases the clean up may require the application of a neutralizing product that will absorb and neutralize the chemical to allow the product to be shovelled into bags for disposal at an appropriate hazardous material disposal site.
- .2 Follow the clean up instructions of the MSDS material. A hazardous waste company may be required to deal with larger spill clean up. The Chief Executive Officer shall arrange this service.
- .3 When safe to do so, page Code Brown “ALL CLEAR” three (3) times.

**9.0 AFTER THE EMERGENCY IS OVER**

- .1 Consideration should be given to calling a special meeting of the Occupational Health & Safety Committee to review the circumstances and response to the hazardous situation and to prepare a report and recommendations for consideration.
- .2 Complete remaining reporting requirements as per all emergency response situations.



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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-09-01
<b>SUBJECT:</b> Natural Gas Leak – Code Green	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> April 2011	<b>REVISED:</b> May 2024

**1.0 NATURAL GAS LEAK CODE**

Code Green

**2.0 NATURAL GAS EMERGENCY DEFINED**

***Note:** A strong odourant (such as ethyl mercaptan) is deliberately added to the otherwise colourless and odourless natural gas so that leaks can be easily detected by smell before an explosion occurs.*

A natural gas emergency shall be defined as a situation where all of the following conditions are present:

- .1 The natural gas odour is persistent (i.e. continues to be detected via sense of smell as you walk from the area).
- .2 The odour continues to be substantial (i.e. does not decrease as you continue to walk).
- .3 The source of the odour cannot be readily identified.

**3.0 PROCEDURE IF GAS IS SMELLED AND LEAK SUSPECTED**

- .1 Cease all operations immediately and DO NOT operate any electrical devices (i.e. phones, electrical switches, electrical machines, etc.).
- .2 If smell is strong, remove self from the area and call 9-1-1. If smell is minor, remove self from the area and call Environmental Services Department.
- .3 Do not call from the affected area, or turn electric switches on or off (i.e. lights, phones, or any other electrical equipment) as this can create a source of ignition with enough energy to ignite fumes.
- .4 If gas smell is on the inside and windows can be easily opened, open the windows to ventilate the area.
- .5 Evacuate the building by the nearest exit. Notify other building occupants in the affected area to do so as well. If any person cannot safely evacuate the building, they should be assisted to an area of refuge, such as a stairwell, away from the emergency area. Emergency response personnel shall be alerted of their location.
- .6 Do not use elevators.
- .7 Once outside, move away from the building at least two hundred (200) feet. Keep driveways and sidewalks clear for emergency crews.
- .8 Do not return to an evacuated building unless authorized to do so.
- .9 Refer to Section 04 – Building Lot Plans for locations of main gas shut-offs.

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<b>SECTION:</b>	Emergency Situations	<b>NUMBER:</b>	EMP-03-10-01
<b>SUBJECT:</b>	Fire – Code Red	<b>PAGE 1 OF 3</b>	
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**1.0 FIRE CODE**

Code Red

**2.0 FIRE EMERGENCY PROCEDURE**

The Registered Staff person shall be in charge, on all shifts, and shall assign duties until relieved by St. Catharines Fire & Emergency Management Services. The person in charge shall wear the bright coloured vest located at the LTC Nurses’ Station. When the fire alarm sounds, the Registered staff person in charge shall follow the procedure below:

- .1 Call the Fire Department (9-1-1) and give your name, address of building, (413 Linwell Rd.), and location of fire (check the fire panel for the location of the fire).
- .2 The Registered staff person in charge shall delegate duties as necessary. When time allows, he/she shall call other staff at other areas and the Manager on Call.
  - a) Staff/volunteers that are aware of the location of the fire shall begin evacuating immediately.
  - b) Staff/volunteers (not in fire area) shall report to the Atrium (Fire Panel) area of building from which the alarm originated. (Do not go through fire zone.) They shall then proceed immediately to the fire area to help evacuate.
  - c) “B” Building elevators shall be brought to the main floor and put on service. “A” Building elevators shall be brought to the main floor and put on fire recall. Elevator and alarm keys shall be with the “vest”.
  - d) “B” Building front doors shall open automatically on alarm.
  - e) When St. Catharines Fire & Emergency Management Services arrives, the delegated staff person shall give firefighters the master keys, if necessary, as well as a list of residents who cannot evacuate without assistance.
  - f) The Registered Staff person in Charge/designate shall designate a staff to stay in the Atrium and wait for St. Catharines Fire and Emergency Management Services to arrive. The Registered Staff shall remain at the location of the fire.

If the fire is on the 2<sup>nd</sup> or 3<sup>rd</sup> floor of the “B” Building:

- Environmental Services staff shall report to the zone of fire origin and assist in evacuation.
- All other staff shall report to Long Term Care to begin evacuating the LTC residents from the

**REVIEWED:** \_\_\_\_\_  
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zone beneath the zone of fire origin.

If the fire is in Long Term Care, or the 1<sup>st</sup> floor of “B” Building, or “B” Building Basement:

-All staff shall begin evacuating Long Term Care.

.3 Staff reporting to the zone of fire origin shall:

- a) Remove any resident in immediate danger.
- b) Attempt to fight and control a fire ONLY if you can situate yourself between the fire and an exit. All other situations should be left to St. Catharines Fire & Emergency Management Services.
- c) Fight a fire ONLY if you are confident that it may be controlled with the fire fighting equipment available.
- d) Before any attempt is made to control a fire, be sure all residents have been evacuated from the fire area.

.6 The residents should concern themselves ONLY with EXITING procedures.

.7 All staff MUST be familiar with the location of fire extinguishers, fire hoses, fire alarm pull stations and EXITS.

**Note:**

The Manager on Call shall be notified by a staff member in the event of an actual fire emergency and a fire Report Form must be completed.

**3.0 UPON HEARING THE FIRE ALARM**

All staff must react immediately upon hearing the fire alarm signal. Staff must check their work area for fire or smoke. The fire alarm system could have been automatically activated by a smoke or heat detection device located in their area. While checking their area for fire, staff should close all the doors and windows to limit smoke movement.

**4.0 SEQUENCE OF EVACUATION**

The Registered staff person in Charge shall coordinate the activities of responding staff. The goal should be to confine the fire and evacuate all of the people from the fire zone as quickly as possible. Sequence of evacuation is as follows:

- .1 Evacuate the room of fire origin first, if possible.
- .2 All doors in the fire zone must be closed. Residents who cannot be evacuated immediately should be instructed to remain in their room with their door closed until someone can provide them with assistance.
- .3 For Long-Term Care, evacuate the rooms next to the room of fire origin and the room directly across the hall. The occupants of these rooms are at greatest risk. As each room is evacuated, the doors are flagged to indicate that the room has been evacuated.

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- .4 Continue to evacuate the fire zone by moving the easiest people first. Evacuate ambulatory persons. They should be moved in a group whenever possible. If they are not moved, they may open their room doors and be exposed to fire and smoke. Visitors and occupants who are able to evacuate should be instructed to leave the fire area. Visitors could provide assistance if given suitable instructions.
- .5 Evacuate residents in wheelchairs next.
- .6 Other non-ambulatory residents should then be evacuated because of the time and resources necessary to move them.
- .7 Finally, resistant residents shall be evacuated. If they are not in immediate danger, they should be left in their room with the door closed. St. Catharines Fire & Emergency Management Services must be informed of their location.
- .8 Evacuate the entire zone of fire origin first.

**\*REFER TO FIRE SAFETY PLAN**



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<b>SECTION:</b> Emergency Situations	<b>NUMBER:</b> EMP-03-11-01
<b>SUBJECT:</b> Pandemic/Outbreak Management	<b>PAGE 1 OF 1</b>
<b>DATE OF ORIGIN:</b> June 2022	<b>REVISED:</b> May 2024

**1.0 PURPOSE**

- .1 All instances of outbreaks of communicable diseases or public health significance, pandemics and epidemics will be responded according to the Niagara Ina Grafton Gage Village Infection Control Manual and Ontario Public Health's Outbreak Management Guide
- .2 Refer to Infection Control Policies either electronically or in binders located at the front desk, staff room (basement), Assisted Living Office (3<sup>rd</sup> Floor, B Building), and/or Long Term Care Nursing Station.

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