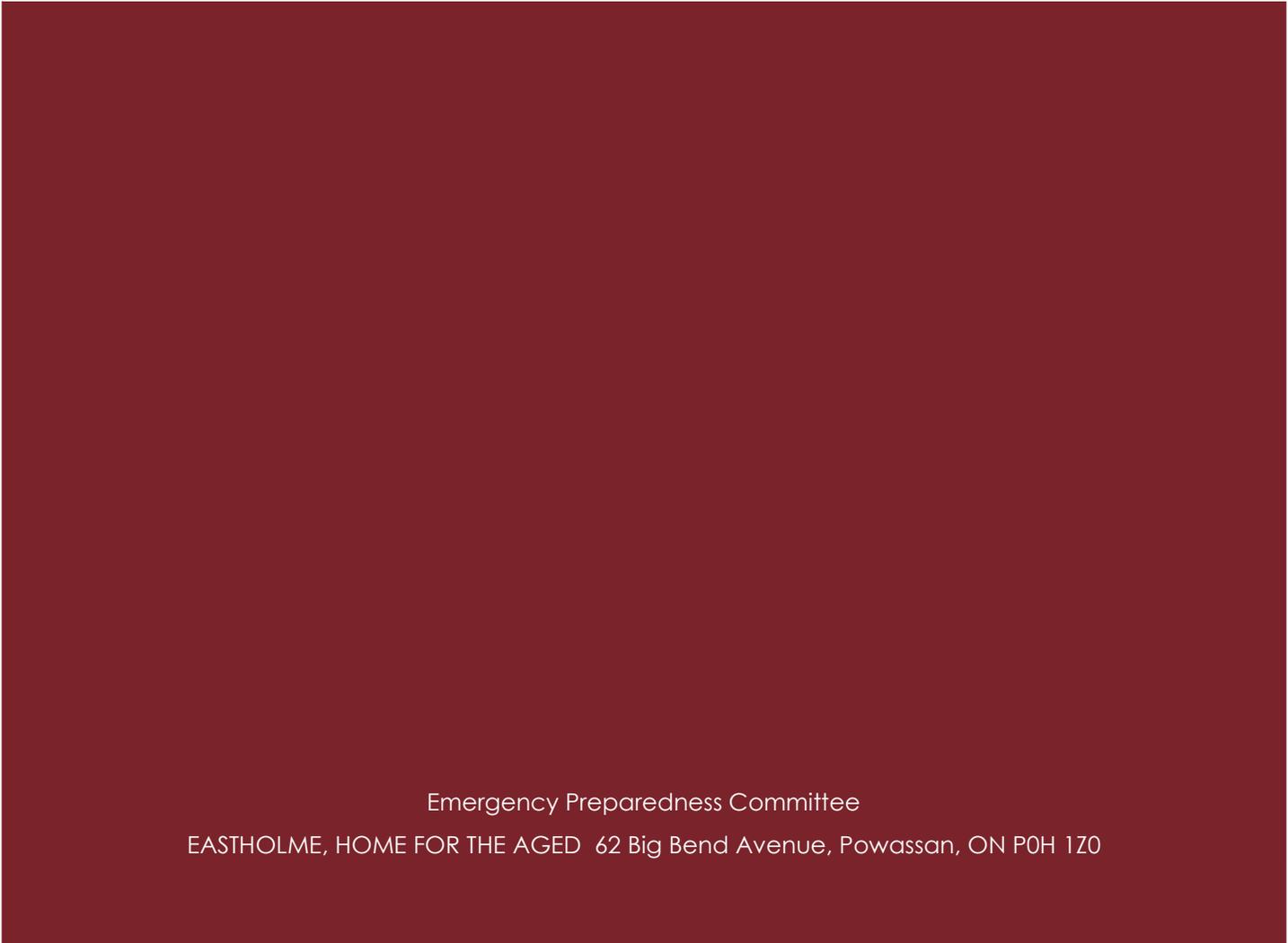




EASTHOLME EMERGENCY PREPAREDNESS PLAN

Emergency Preparedness Committee

EASTHOLME, HOME FOR THE AGED 62 Big Bend Avenue, Powassan, ON P0H 1Z0



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EMERGENCY PREPAREDNESS OVERVIEW

In accordance with the Fixing Long Term Care Act 2021 there is a requirement for all long-term care homes to ensure there are plans in place to deal with emergencies, which include measures for dealing with, responding to and preparing for emergencies, as well as specific actions to be taken, evacuation sites, training and routine testing of the plans.

Eastholme has formed an Emergency Preparedness Committee, and will also participate in the Municipality of Powassan's Municipal Emergency Control Group to assist in developing and testing emergency response to emergencies.

The development of the Emergency Preparedness Plan includes hazard identification and risk assessment which divides the risks into two types; internal risks and external risks and assists with prioritization and response and mitigation development. Regardless of the source of the risk, the plan identifies the relevant component which will be activated and Eastholme's response to the risk.

Appendices contained in this Plan contain specific steps and confidential information and are not to be copied or redistributed. Doing so can jeopardize the integrity of the Plan.

EMERGENCY PREPAREDNESS PLAN

INTRODUCTION

Plan has been prepared in order to provide Eastholme's staff, service providers, supporting agencies, resident families and any other stakeholders an overview of initial response expectations, as well as outline roles and responsibilities during an emergency. The effectiveness of the plan depends on developing a strong awareness for each party's involvement including key responsibilities and roles to ensure they are prepared to carry out their responsibilities. This is achieved through regular training and communication as well as periodic testing of discrete components of the plan.

A hazard identification and risk assessment (HIRA) was conducted by the emergency preparedness committee to identify areas of risk or potential hazards and develop mitigation strategies, contingency plans and training priorities. The HIRA contemplates internal and external hazards or risks and identifies the relevant component of the plan that will be activated in response. Each component will identify the related policy or set of instructions to be followed by role (not individual).

Eastholme has also consulted with community partners and obtained a memorandum of understanding for key requirements as listed under the individual components of the plan. Additionally, Eastholme has joined the Municipality of Powassan's emergency control group, to assist in developing and testing emergency plans.

PURPOSE

The purpose of the plan is to protect and preserve life of the residents, staff and any visitors of Eastholme during an emergency. The plan also contemplates evacuation procedures and access to supplies and services and necessities of life (food, water, medicine) as required for residents who rely on Eastholme for their care. The efficient and clear assignment of responsibilities, lines of authority for decision making, routine training and testing will ensure good response times and the best possible outcomes during an emergency situation.

DEFINITIONS

Community Emergency Management Coordinator (CEMC) - An individual officially designated by the Municipality of Powassan who is responsible and accountable for the emergency management program for the municipality. The CEMC must be, by definition, a municipal employee as per the Emergency Management and Civil Protection Act. This includes all Alternate CEMCs.

Emergency – means 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 persons in the home.

Emergency Control Group (ECG) - The ECG can be assembled at any time during a pending, imminent or real emergency situation and is responsible for continuity of services outside and management of the emergency. Eastholme will work with the Municipality of Powassan to plan and test response to plans as they pertain to Eastholme.

Emergency Plan - a plan which is formulated pursuant to the Emergency Preparedness Committee (the committee) to govern the provision of necessary services during an emergency. Procedures outlined within provide direction and guidelines for employees and other persons during an emergency.

Emergency Shelter/Evacuation Site - site that provides lodging for evacuees and/or emergency responders during and after an emergency. Facilities may include municipal buildings such as arenas or community centres, or other locations such as partner facility activity rooms. Depending on the emergency situation, it may include the provision of food, medicine, nursing and personal support.

Evacuation Plan – Plan for orderly evacuation of all building occupants that includes system of determining whether there are individuals who have not been accounted for.

Hazard identification and risk assessment (HIRA) – planning tool used to identify risks and hazards and the probability of occurrence in order to mitigate and plan responses. The HIRA is divided into internal and external hazards or risks and identifies actions to mitigate or respond.

Key Equipment Plan – Lists critical equipment required to provide services to the residents of Eastholme. The plan includes the identification and provision for process for ensuring key equipment is powered or otherwise made available to staff and residents of the home. The plan considers all equipment necessary to provide services essential to the health, safety well-being of

residents. The plan contains an inventory of assets, alternate supply of such assets and processes to replace or work around their disruption in service.

Key Supply Plan – Supplies identified as being necessary to provide the essentials of daily living and provision of care. These include levels of supplies necessary for the delivery of meals, medicine, maintenance of basic personal hygiene, personal protective equipment. These also include supplies necessary to maintain other aspects of the plan (such as to run key equipment).

Key Staffing Plan – identifies provisions for staffing when in an emergency situation. Plan identifies alternatives for staffing essential services during certain emergencies.

Standard Colour Codes - are used to identify emergency response for pre-determined situations. Each code identified here has a corresponding policy with prescriptive action steps. This plan includes the policy for the specific colour code, along with required response in each situation. The following are the colour codes currently in use:

Code White – Violent/Behavioural Situation

Code Red - Fire

Code Blue – Medical Emergency

Code Yellow – Missing Person

Code Black – Bomb Threat

Code Brown – Hazardous/Chemical Spill

EMERGENCY PREPAREDNESS COMMITTEE

The emergency preparedness committee will meet regularly to review a select component of the plan, or on an ad-hoc basis as required to consider changes and updates to further mitigate risks, or improve response times. The committee is comprised of representation from every department and the health and safety committee, the infection prevention and control lead (IPAC) and is led by the Administrator. Meetings may include partial representation when a change/update is being considered for a component of the plan. Each committee member has a designated alternate that can attend in their absence.

Responsibilities of this committee include:

Meet regularly or as directed to provide review experience, consider response time, and mitigation of risks, and propose updates to emergency preparedness plan and related training. This committee will also be responsible for engaging vendors and other contacts to ensure the

necessary revisions including specific activities or action steps are taken and adopted in the relevant component of the emergency preparedness plan. Memorandum of Understanding (MOU, Reciprocal Arrangements (RA), Mutual Assistance Agreements (MAA), vendor contracts and other agreements with other long term care facilities, health care providers, vendors etc., will fall outside of the scope of this committee. The committee will research opportunities for procurement of necessary supplies, provisions for service or equipment, staffing alternatives and provide recommendations for consideration. The finalization of agreements rests with the Administrator and/or the Board of Management of Eastholme.

Two representatives from this committee will participate in the Municipality of Powassan's Emergency Control Group. The designated representatives are the Administrator, and the Assistant Administrator & Environmental Services. Recommendations and modifications to Eastholme's the emergency preparedness plan will come to the emergency preparedness committee for consideration and if appropriate revision of the emergency preparedness plan.

During a community emergency, Eastholme will receive direction from the CEMC or alternate at the Municipality of Powassan or the appropriate authorities (Police, Fire Department, etc).

The emergency preparedness committee will convene monthly or as needed (ad-hoc) as well as within 30 days of an emergency being declared over. When the committee convenes to debrief an emergency, it shall invite all parties involved in emergency response to contribute feedback for consideration in updating the emergency preparedness plan.

ADMINISTRATION OF THE PLAN AND ITS COMPONENTS

While every situation is different, the primary focus is the safety and well being of the residents, staff and anyone who may be at Eastholme. The first consideration is how keep residents safe and/or move them to a safe and secure location. The circumstances of the situation will determine the component of the plan that is activated.

This plan is reviewed annually, or as updates are required by the Emergency Preparedness Committee. The Emergency Preparedness Committee (the committee) which contains representation from all departments and infection prevention and control (IPAC) will meet regularly to discuss changes. This document is a living document, and as events take place or the committee identifies new hazards/risks or deficiencies, a revision to the planned responses and mitigation strategies will be developed along with associated updates to the specific component of the plan and the staff training.

Where deficiencies are identified in any of the components of the plan, it is up to this committee to identify, research, and bring forward the appropriate response to mitigate the identified risks, and plan appropriate actions.

Each component of the plan will be tested and reviewed regularly in accordance with the requirements of the Fixing long Term Care Act 2021 and its regulations. The emergency preparedness plan incorporates a high-level summary of key elements from our Fire Plan (required under Fire Protection and Prevention Act, 1997).

EMERGENCY PLAN ACTIVATION, DEACTIVATION AND RECOVERY PROVISIONS

The circumstances of the emergency will dictate the necessary response to be taken. Often, the first individual to identify an emergency will report to the RN in charge who will be responsible for activating the relevant component of the emergency preparedness plan.

The response to the emergency is based on the events and circumstances which vary, therefore there are discrete components within the plan with specific steps that need to be taken, including contact information. Some of the components of the plan have been assigned a standard colour code (consistent with those used by the Ontario Hospital Association) to describe a situation or event. Staff are trained to understand that the colour refers to a situation (for example Code White is a Violent situation).

Additionally, the situation may require the execution or overlap of multiple components in order to maintain the safety of everyone involved. For example, clearing the fire zone via horizontal evacuation (Fire Plan), or if necessary, vertical evacuation (Fire Plan), and if necessary a complete evacuation to a designated evacuation centre (Evacuation Plan, Key Supplies Plan, Key Staffing Plan).

Deactivation will be situation dependent, and will involve receiving communication from the Administrator, Assistant Administrator & Environmental Services or the RN in Charge of the 'all clear', and that staff can return to their normal responsibilities. During emergencies requiring outside emergency responders, the 'all clear' will be received from the appropriate authorities (police, fire chief, etc).

Where evacuation plan is effected, there will be a staff member acting as the designated lead at the evacuation site. Where safe to do so, the Administrator (or designate) will communicate with the evacuation site to initiate the orderly return to Eastholme property.

Structural damage and loss of sections of the building or key equipment may require accommodations at an alternate temporary Long-Term Care (LTC) facility. The administrator will communicate with the temporary LTC facilities to advise of the intent to move residents from the evacuation site to their facilities.

The recovery plan is circumstance dependent and will involve planning next steps with the Ministry of Long-Term Care in conjunction with the Board of Management for Eastholme, with support from the local community health care partners. Eastholme will ensure that there are supports in place to for residents and staff who experienced distress during an emergency.

COMMUNICATION

Specific communication protocols are dependent on the events or emergency. Communication protocols are listed the appropriate sections of the emergency preparedness plan and in the communications plan.

Typical communication begins at the source of the incident/emergency with the RN in Charge, or the first staff member to identify the issue initiating the response plan, followed by communication to remaining staff and action by all staff to ensure safety of residents. During a fire, the alarm monitoring station will contact the Administrator, the Assistant Administrator & Environmental services, Director of Nursing and Personal Care and other key personnel. Fan out list is activated to ensure that local staff are called to the building to assist (including circumstances that require evacuation).

Communication to families of residents and other staff will only occur after all risk of immediate danger residents and staff has subsided. If the all clear is provided, and residents are able to immediately re-enter the building, families will be notified by telephone as soon as practicable. When evacuation is required to an evacuation site, families will be notified once residents have been safely transported to the site, accounted for, and necessary immediate support has been provided. Staff will be notified via text message or email about expectations and where to report for work.

During a community emergency, the Administrator or the Assistant Administrator & Environmental Services (designate in the Administrator's absence) will act as the main contact to receive communication from the CEMC or the local authorities/emergency responders.

Administrator will be responsible for communication with the Board of Management of Eastholme, and designating an individual to initiate the communications plan (to families and staff).

TESTING FREQUENCY AND TRAINING

The emergency preparedness plan will be tested annually for loss of essential services, fires (code red), missing residents (code yellow), medical emergency (code blue), violent outbursts (code white), gas leaks, natural disasters, extreme weather events, boil water advisories, outbreaks of communicable disease of public health significance and floods. The testing will include arrangements with entities involved in responding to emergencies at Eastholme and health care partners and organizations who will be assisting during an emergency.

Other components of the emergency plan will be tested every three years, and includes emergency responders, health care partners and organizations who will be assisting during an emergency.

Evacuation plans and response times are tested annually (under fire plan).

All staff will be trained annually on the emergency preparedness plan and its components, and will be provided with a refresher when there are significant changes to the plan.