



MANUAL: <i>ADMINISTRATION</i>	HOME SPECIFIC NAME: <input type="radio"/> Fairfield Park <input type="radio"/> Brouillette Manor <input type="radio"/> LaPointe-Fisher Nursing Home <input checked="" type="radio"/> Corporate
TITLE: <i>PLANNING</i>	SECTION: EMERGENCY PREPAREDNESS PAGES: 3

EFFECTIVE DATE: JUNE 1992

REVISED: JUNE 2022

POLICY

Written plans shall be developed and standardized codes identified for emergencies the home may be at risk of having to manage, that include but are not exclusive to:

- Fires
- Community disasters
- Violent outbursts
- Bomb threats
- Medical emergencies
- Chemical spills
- Situations involving a missing person
- Loss of one or more essential services
- Gas leaks
- Natural disasters and extreme weather events
- Boil water advisories
- Floods
- Evacuation

PROCEDURES

TRAINING / EDUCATION

Staff shall be trained on the emergency plans upon hire and provided with refresher education annually thereafter.

Residents and/or their legal representative will be advised, on admission, that the current version of the emergency plans are available on the home's website and a copy of such plans can be made available upon request.

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TESTING

Emergency plans shall be tested as per the frequency required in the legislation.

ACTIVATION

Specific procedures shall be followed depending on the emergency plan that has been activated, outlining the steps to follow, along with responsibilities. These procedures shall be included in the Emergency section of the H&S Manual.

ROLES/RESPONSIBILITIES

Emergencies shall be declared by the Administrator or Director of Care/Nursing. In their absence the RN in charge of the building may declare an emergency as per direction from the applicable entity (i.e. Public Health, Fire Department, Police Department).

Emergencies shall be declared over by the Administrator or Director or Care/Nursing and in their absence, the RN in charge of the building, after consultation with the entity involved (i.e. Fire Department, Police Department, Public Health).

Specific staff roles and responsibilities will be outlined in each emergency plan.

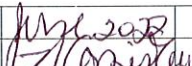
EVACUATION

If it is necessary to activate the evacuation plan, procedures shall include but not be exclusive to ensure:

1. Residents, staff and others are relocated to a pre-arranged location.
2. Transportation services are pre-arranged to assist with moving residents, staff and others to the evacuation location.
3. Critical medication, supplies and equipment can be transported, if possible, to the evacuation location.
4. Resources, supplies, personal protective equipment have been set aside, if possible, that are vital for the emergency response to be transported to the evacuation location.
5. Entities involved in or that may provide emergency services in the area are contacted to assist with the evacuation.
6. Food and fluid provision has been arranged.
7. Resident have timely access to all drugs that have been prescribed for them.

RECOVERY

After the emergency has been declared over, the home shall ensure the following:

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1. A debrief is provided for residents, substitute decision-makers, staff, volunteers and students involved.
2. The Administrator or delegate will ensure resumption of regular operations of the home takes place (i.e. coordinate with managers, service providers and support workers to ensure all essential services are in place)
3. Coordination with Social Services to meet with residents, families and staff who may have experienced distress during the emergency, to offer support and resources.

COMMUNICATION PLAN

The Home shall communicate to residents, substitute decision-makers, if any, staff, volunteers, students, caregivers, the Residents' Council and the Family Council, if any, on the emergency in the home

- ✓ at the beginning of the emergency,
- ✓ when there is a significant change throughout the course of the emergency
- ✓ when the emergency is declared over

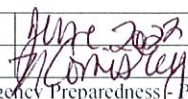
A copy of this emergency plan, excluding appendices which may have confidential information included, shall be available on the Home's website, and physical copies available upon request.

This emergency plan shall be evaluated and updated at least annually, as well as within 30 days of an emergency being declared over, after each instance that an emergency plan has been activated, in collaboration with entities that were involved in the emergency response.

RECOVERY FROM AN EMERGENCY

After the emergency has been declared over, the home shall ensure the following:

- ✓ A debrief is provided for residents, substitute decision-makers, staff, volunteers and students involved.
- ✓ The Administrator or delegate will ensure resumption of regular operations of the home takes place (i.e. coordinate with managers, service providers and support workers to ensure all essential services are in place)

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- ✓ Coordination with Social Services to meet with residents, families and staff who may have experienced distress during the emergency, to offer support and resources.

TESTING OF EMERGENCY PLANS

The home shall test the following emergencies annually: Loss of essential services, fires, situations involving a missing resident, medical emergencies, violent outbursts, gas leaks, natural disasters, extreme weather events, boil water advisories, outbreaks of a communicable disease, outbreaks of a disease of public health significance, epidemics, pandemics and floods.

All other emergencies identified in the plan shall be tested at least once every three years.

A planned evacuation shall be conducted at least once every three years

Records will be kept of these tests, as well as of any changes to improve the plan.

TRAINING & EDUCATION

Staff, volunteers and students shall be trained on the emergency plans before they perform their responsibilities and at least annually thereafter.

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