

# ALGOMA MANOR

Code Green

2022

#### **PURPOSE:**

To provide a written plan for actions to be taken and proper procedures to be followed in an emergency necessitating evacuation of the building and addresses the following variables:

- the location (partial/ entire home, town wide, province wide)
- duration (hours, days weeks)
- Severity (number & type of service affected) of the disaster.

These factors will determine how quickly the home must be evacuated and to what location residents must be relocated to.

The objective of the plan is to ensure the safety and welfare of residents, staff, and visitors. Where evacuation is required, the objective is to remove all or part of the resident population as quickly and safely as possible from an area in the home or completely away from the building. Saving lives is our main goal the building and records are secondary.

**Code Green Stat** (crisis evacuation) – announcement indicates an immediate evacuation is necessary e.g., internal explosion, major gas leak, rapidly spreading fire.

# ANNOUNCE- Code Green, followed by the priority area/areas affected x3

**Code Green**: announcement indicates less urgent evacuation. A little more time can be taken to evacuate resident's e.g., extreme weather, loss of essential service such as water, hydro. There is lead-time before the threat becomes imminent.

# ANNOUNCE – Code Green Stat, followed by the priority area/areas affected x3

### TYPES OF EVACUATION:

- 1. <u>Partial</u>: necessary where smoke or fire damage can be contained, or weather conditions have cause partial damage to the building.
- 2. <u>Total</u>: necessary where smoke, fire damage cannot be contained, or an explosion or external disaster requires that residents be moved to another location.

At the discretion of Incident Manager or at the request of the Fire Department at the time of the disaster, it will be decided whether a partial or total evacuation is necessary. If in doubt, the home is to be totally evacuated.

### **EVACUATION PROGRESSION:**

- Site: evacuation from the room of origin of an emergency (e.g., during a fire)
- Horizontal: evacuation beyond corridor fire doors and / or to an adjacent service wing
- Vertical: evacuation to a lower floor
- Premises: evacuation of the entire home

#### DOOR TAG PROCEDURE FOR EVACUATION

If a resident remains in the room, leave the tag on the door with the red showing

If there is no one in the room, cover the red tag with the white tag, so no red is showing

#### LINE OF AUTHORITY DURING EVACUATION PROCEDURES

# **Internal Authority**

- 1. Incident Manager (Charge Nurse) has complete authority: may be relieved by Administrator /designate upon their arrival to the home.
- 2. RPN on the unit.

# **External Support Services Authority**

Fire Department (911) responsible for:

- fire fighting
- search and rescue
- complete authority with the building and fire grounds

Paramedic Services (911) responsible for:

- triage (once on site)
- primary medical aid
- communications with health agencies & other ambulance services
- transportation

Police Department (911) responsible for:

- traffic control (once on site)
- building and property security
- communication between incident and police station

The Charge Nurse works closely with all support services staff to know the circumstances of the total situation.

## NOTE:

- 1. All instructions of the Fire Department must be followed upon their arrival.
- 2. Once outside, the Ambulance Officer will assess each resident who requires medical assistance.

#### STAGES OF EVACUATION IN THE EVENT OF FIRE

Stage # 1.

- remove residents from immediate area of fire (close door and use tag procedure)
- take resident to holding area beyond fire doors

Stage # 2.

- remove residents from rooms beside and across the hall from origin of fire.
- take resident to holding area beyond fire doors

Stage # 3.

- remove residents from the immediate fire area search and evacuate all rooms following the fire plan procedure e.g., close door and tag procedure, (refer to Door Tag Procedures pg. 1)
- take residents to holding area beyond fire door

Stage #4.

- A team member (assigned IM) will place an identification bracelet on the resident before
  he/she is evacuated. Residents ID bracelets and resident unit lists/forms are kept in the RN
  CODE BINDER in the Charge Nurse Office, Evacuation Kit is in the receiving area.
- ensure each resident is adequately clothed

# Stage # 5.

• External evacuation ordered: move residents from the building to the parking lot Stage # 6

 transport residents not requiring medical care (as determined by Paramedic Services) to predesignated relocation site, documenting on the Evacuation Resident Log (refer to relocation sites pg. 12)

## **ORDER OF EVACUATION**

- 1) Ambulatory Residents: many residents can be removed with assistance by one or two staff Cautions:
  - confused & ambulatory may get in the way or wander back into the danger area.
  - slow ambulatory may hinder others, may need to remove in a wheelchair.
- 2) Wheelchair Residents: easier to remove than bedridden, may require one staff member to assist.
- 3) Bedridden Residents: may require two staff members. Use demonstrated lifts.
- 4) Uncooperative Residents: remain until last, otherwise valuable time lost and may sacrifice others. Ensure that their door is closed and identify the resident name & location to IM and Fire Department. Remember to leave the Evacuation tag showing red to indicate someone is in the room.

## **CONTINUITY OF RESIDENT CARE**

To ensure that the care needs of residents are met throughout an emergency evacuation and relocation, the following procedures will be in place.

- 1) Resident Identification: an identification bracelet will be placed on each resident. The following information will be available on the stickers included in the Code Green Code Binder (RN office): name, level of transfer/mobility, allergies, and DNR/MOST designation.
  Residents ID bracelets and resident lists/forms are kept in the RN CODE BINDER in the Charge Nurse Office. For those residents who were not assigned a bracelet, there are extra blank bracelets in the RN CODE BINDER.
- 2) **Evacuation Log**: should be maintained for all residents transferred out, including relocation site, injury/treatment, time of transfer, how they were transferred, and the SDM notified. Included in the RN Code Binder.
- 3) **Resident Chart**: Hard copy charts records should be removed, if able, by the Unit RPN. E-MAR and SSLI charts can be computer accessed off site.
- 4) **Medications**: Pharmacy is to be contacted to provide service to replace all medication. The pharmacy will provide all medications at the relocation site as needed. (Contact number pg. 12)
- 5) **NP on call**: will decide:
  - whether a site physician should be called
  - whether a coroner should be on site

# TRIAGE: DESIGNATED TREATMENT ZONES – Map with Zones attached

## First Priority (RED)

- Immediate medical attention required
- Individual is critical and their condition is deteriorating
- Transportation to hospital via ambulance may be required if unable to take over by staff.
- Supervised by Nurse wearing a Red Cap (found in Evacuation Kit)

- Identifying colored sticker placed on individual's evacuation wrist band and individual taken to the hospital. (LOCATION front entrance)
- Evacuation log completed

# **Second Priority (YELLOW)**

- Prompt medical attention required
- Individual in serious but stable condition
- Individual can sustain a wait of approximately 30 min to 2 hours without hospital intervention provided stabilization occurs onsite.
- Supervised by Nurse wearing a Yellow Cap (found in Evacuation Kit)
- Identifying colored sticker placed on individual's evacuation wrist band and individual taken to designated are (LOCATION- Lawn by hospital entrance)
- Evacuation log completed

# **Third Priority (GREEN)**

- Individual transportation to hospital can be delayed
- Individual is ambulatory (walking wounded)
- Supervised by Nurse wearing Green Cap (found in Evacuation Kit)
- Identifying colored sticker placed on individual's evacuation label and individual taken to that designated area (LOCATION- Roundabout in front of entrance)
- Evacuation log completed

## **Fourth Priority (WHITE)**

- Individual not injured, only require transportation to designated safe area
- Supervised by Activity staff wearing White Cap
- Identifying colored sticker placed on individual's evacuation label and individual taken to that designated area (LOCATION- beside Smoking area by Spruce)
- Evacuation log completed

## Fifth Priority (BLACK)

- Individual with no vital signs and has been pronounced deceased
- No staff required to supervise; individual covered with blanket (LOCATION- beside main entrance to parking lot)
- Evacuation log completed

## Triage Procedures (duties assigned by Charge Nurse or designate)

- 1. The assessment for triage tagging is performed by the RPN/RN assigned as Triage Nurse. IM will identify.
- 2. The Triage Nurse will wear a Black Cap (found in the Evacuation Kit) to clearly identify him/her.
- 3. The Triage Nurse will direct Maintenance to set up the 5 designated areas using the evacuation Kit contents.
- 4. Each resident is assessed and assigned to a colored zone accordingly to their injuries. A colored sticker is placed on the individual's wristband or on their person and taken to assigned area. (Color Coded Stickers found in Evacuation Kit)
- 5. The Triage Nurse does NOT provide treatment except in the following circumstances:
  - The individual is bleeding profusely and will surely die unless immediate treatment is given.
  - The individual's airway is severely compromised.

## **DUTIES OF THE INCIDENT MANAGER**

In a fire or other emergency, the Charge Nurse will assume authority. The IM has the authority to put the evacuation plan into effect.

- Assess the magnitude and type of threat. Once determined, this will provide staff with objectives
  and directions for achieving them. The size and scope of the emergency will determine how many
  team members are required for overseeing the incident. It is always modular and scalable in terms
  of structure and processes
- 2. Don appropriate vest so you are easily identified (found in Fire Box, front lobby).
- 3. Ensure notification of Administrator regarding decision to put evacuation plan into effect.
- 4. Assign a Nurse (from registered on staff) for Triage Nurse (TN). See duties of TN. Triage Nurse will work with Maintenance to retrieve the Evacuation Kit from receiving (refer to duties of Triage Nurse above)
- 5. Assign a Nurse (from registered on staff) for each triage zone (3 red, yellow, green).
- 6. Assign a team member (Activities) to triage the white zone for uninjured residents.
- 7. Assign team members to accompany residents to the relocation areas. Minimum 2 members from each unit to go with residents.
- 8. **Administrative Assistant and Scheduler** or designate will be Logistics lead who will be responsible for staffing assignments: ensuring team members are at relocation sites; initiating call-in procedure, etc. (see duties of Logistics lead). **Contact if not onsite**.
- 9. Assign a team member as Runner to be a communication link for updates. In the event of a total communication shutdown, the pre-designated external communication center (ABSAB, Board Room) will be activated, and the runner will provide ongoing relaying of messages. Runner can be any staff member.
- Administrator or Environmental Supervisor or designate to be Liaison lead (coordinate activities and communication with external emergency personnel (fire, ambulance, hospital, etc.). (See duties of Liaison lead). Contact if not onsite.
- 11. Assign a team member in each unit (from the staff working) to account for all residents in their unit.
- 12. **DOC/ADOC** will be Communications lead (see duty of Communication lead contact/ update family members, respond to media inquiries. **Contact if not onsite.**
- 13. Assign team members (housekeepers, dietary, PSW) to monitor exit doors to prevent re-entry of residents or unauthorized personnel and to ensure the doors do not close and lock authorized personnel out
- 14. Assign Maintenance to monitor external traffic flow to ensure unimpeded access for emergency vehicles and access to building for emergency personnel (fire, ambulance, etc.)
- 15. Ensure all areas are secure and all duties are complete.
- 16. Proceed to triage area to assist with treatment of injured residents as directed
- 17. In conjunction with the DOC/RPN, and if able, ensure MAR books are removed and transported to the receiving site(s).
- 18. Complete Incident Manager Evacuation Checklist.

### **DUTIES OF THE RPN/LPN**

- 1. Upon receiving verification of evacuation, begin to instruct staff in the procedure. If immediate need is NOT in your community area, assign team members to go to the affected area as directed by the Incident Manager. Choose from PSW/Housekeeping/activities.
- 2. Remove residents from immediate danger (room of origin) to a safe zone.
- 3. Remove all other residents from the affected fire zone to a safe zone as directed according to the incident.
- 4. Ensure staff use the red evacuation tags on doors to indicate if empty. Red showing if resident is in room, white showing if room empty.

- Complete a head count of residents to ensure no residents have been missed. If there are residents missing from the unit, contact other areas of the home to confirm the location of the resident.
- 6. If evacuation is required in your home area, obtain resident emergency bracelets and resident checklist (found in the RN Code Binder, RN office) and assign 1 staff member to identify and check residents on the list and 1 staff member to place identifying bracelets on the resident.
- 7. Assist staff in your home area with safe evacuation of residents (transfers) as directed by the IM or designate. Ensure you understand where the emergency is, so proper direction is used to evacuate to the appropriate assigned area.
- 8. If your home area is NOT being evacuated, assign staff to monitor residents, secure your home area and be ready to assign staff to go to the affected area to assist as directed by the IM.

# **DUTIES OF THE PERSONAL SUPPORT WORKER (PSW)**

- 1. Move all carts to one side of the hallway while reporting to the nursing station.
- 2. Confirm announcement to evacuate. Ensure you understand where the emergency is so proper direction is used to proceed to your unit to help evacuate.
- 3. If immediate need is NOT in your home unit, secure and monitor your residents, and if directed from your RPN proceed to affected area to assist the evacuation.
- 4. If evacuation is in your home unit (as directed by IM or designate or RPN) remove residents to a safe zone, using evacuation tags on doors to identify searched areas. One staff will be assigned to identify and check residents on the list and 1 staff will place identifying bracelets on the resident. Ensure ID bracelets are placed on residents as they are removed from the unit. (Bracelets and lists are in the RN Code Binder, RN office)
- 5. Check and mark evacuated rooms with evacuation tags. Ensure ALL rooms (locked and unlocked) are checked. After regular hours (6:30 pm) 1 Spruce PSW will be responsible for checking service area.
- 6. Complete a head count of residents, with the unit RPN, to ensure no residents have been missed, confirm using current resident list. Report any resistive resident or resident needing assistance to your home area RPN.
- 7. If evacuating the building the Triage nurse will assign residents to the outside holding areas. Refer to page 4 for areas.
- 8. Once all residents have been moved to a safe area, take direction from IM, or designate, it may include monitoring residents, assisting to load residents on buses etc. monitoring exits and doorways.

## **DUTIES OF THE MAINTENANCE STAFF**

- 1. Assist the Incident Manager
- 2. Ensure all entrances are clear of vehicles to allow for emergency services personnel/vehicles.
- 3. Assist TN to get Emergency Kit, set up triage areas, set out cones, identifying each colored zone: RED, closest to entrance for ambulances to attend, YELLOW and GREEN, in parking lot, WHITE, at front of the building to wait for buses, cars to arrive, BLACK furthest away.
- 4. Be available to assist fire and all emergency services providers.
- 5. Ensure information on equipment, systems, (HVAC, fire sprinklers etc.), security doors, access to locked areas, supplies are available.
- Assist with the evacuation of residents and with loading wheelchairs etc. into transport
  vehicles/evac trailer as required. Transport vehicles could be Algoma Manor Vans, AJ Buses or
  family who can pick up residents.
- 7. Communicate all pertinent information to the IM during the evacuation process.
- 8. Assist Administrator/ IM with final check of the building if applicable:

- ensure all electrical equipment is turned off and unplugged.
- lower heat if applicable.
- lower domestic hot water if applicable.
- maintain and monitor generator if in use.
- check building regularly when vacant.
- 9. Travel to relocation site and assist where needed
- 10. Keep a record of supplies and equipment, if any, were removed from building. This does not include the items in the evacuation trailer

#### **DUTIES OF THE DIETARY STAFF**

- 1. If you are in the servery, ensure all appliances are off, unplugged, and secure the area. Upon receiving notification of the emergency and the location, report to the RPN. Assist as directed by the RPN. This may include monitoring residents/exit doors or going to assist other areas.
- 2. If you are in the main kitchen, turn off all equipment, secure the area.
- 3. If emergency is NOT in your area report to the RPN on Spruce. Assist as directed by the RPN. This may include monitoring residents, (keeping them calm)/exit doors. First Cook: check rooms in service area/close doors and use evacuation tags to identify searched areas.
- 4. Monitor residents as assigned or assist with evacuation from the affected area to relocation site if required.

# **DUTIES OF THE HOUSEKEEPING/LAUNDRY STAFF**

- 1. Secure your area by shutting down all equipment and close doors. Laundry staff will report to Spruce for direction from RPN.
- 2. Housekeeping stations are to be checked and locked.
- 3. If emergency is in your area, use emergency tags on doors to identify searched areas.
- 4. Housekeeping staff will report to their home area nursing station, follow direction from RPN.
- 5. As assigned by Incident Manager or RPN in your unit, monitor residents, keep them calm or assist with evacuation from the affected area or other duties that may be required.
- 6. Travel to relocation site(s) and assist as needed.

## **DUTIES OF THE ACTIVITES DEPARTMENT/RESTORATIVE/ PHYSIO STAFF**

- 1. If you are with a group of residents in the danger zone, begin moving residents to the closest safe zone as directed by the IM or the RPN.
- 2. If you need assistance to move residents, ask Incident Manager to assign team members to assist you.
- 7. If more than one Recreation team member is involved in resident activity, one person will remain with residents while other team members report to Nursing station on their unit and takes direction from the RPN.
- 3. If volunteers are in the building assisting with program activities, they will assist Recreation team as directed by the Incident Manager.
- 4. The Incident Manager will ensure Recreation team and volunteers are made aware of the evacuation procedure being followed and assist with moving residents.
- As assigned by Incident Manager or RPN in your unit, monitor residents, keep them calm or assist with evacuation from the affected area or other duties which may include monitoring exits.
- 6. If evacuation of the building has been declared, once residents have been triaged, program team go to WHITE zone (beside Spruce Smoking area) and assist loading residents into transport vehicles

7. Travel to relocation site(s) and assist as needed.

# DUTIES OF THE COMMUNICATIONS LEAD/LIASON LEAD - DOC/ADOC

- 1) Confirm that Fire Department received alarm via monitoring company as per fire plan. (This is done automatically when the alarm has been activated.)
  - Notify the following external contacts that the Evacuation Plan is in effect:
    - o All necessary emergency services (fire, police, ambulance, local hospital)
    - Medical Advisor
    - MLTC/HCCSS/Health Authority (as required)
    - Support Services Office
    - Pharmacy
    - o Evacuation sites
    - Residents' families
- Assign reception team to screen incoming phone calls, transfer media and resident's family member calls directly to themselves.

# DUTIES OF THE LOGISTICS LEAD – ADMINISTRATIVE ASSISTANT/SCHEDULER/PSW MANAGER

- 1) Complete or assign team members to initiate team member fan out call-in list. Each manager has specific list for call out.
- 2) As required, assign team members to oversee supplies: kept in transfer trailer in parking lot.
  - for first aid
  - blankets, pillows, etc. to assist in transport of residents and at relocation site
  - food and water
- 3) As directed by Incident Manager or Emergency Services, initiate call to transportation service providers for buses, etc.

OFFSITE EVACUATION LOCATION:	
Residents will be evacuated to:	
IN TOWN	
ADSAB site, 135 Dawson St.	Contact- Kyle Stuckey: 705-
Thessalon	849-8549 or 705-842-3370
	Ext. 244
	Alternate Contact- Debra
	Nelson: 705-542-2135 or 705-
	842-3370 Ext. 238
	642-3370 EXt. 238
WEST	
	Carlant Barra Barria 705
Bruce Mines Community Hall, 9180	Contact –Donna Brunke: 705-
Hwy 17 East	785-3493 or 705-542-4163
EAST	Contact- Deborah Tonelli: 705-
Sowerby Community Hall, 1410	843-2033 or 705-542-5528
Basswood Lake Road	(until July 2022)
	, ,
	Contact- Natasha Roberts:

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	705-843-2033 or) after July	
RANSPORTATION	2022) or 705-849-8451	
-	AJ Bus Lines- 6am to 5 pm 705-248-2157 After hours and weekends 705-206-2653	
	Algoma Manor Vans x2	