

# **Services for Seniors Long-Term Care Homes' Emergency Response Plan**

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Annex 8: of the Halton Region Emergency  
Program and Plan

**Social and Community Services**

**5/25/2022**

This Plan is the framework for emergency response activities to be implemented should a Services for Seniors Long-Term Care home experience an emergency affecting residents, staff, and visitors.



## Amendment Procedure

This Plan will be evaluated and updated at least annually, within 30 days of an emergency being declared over and after each instance of this emergency plan being activated. The Commissioner of the Social and Community Services Department and the Services for Seniors management team must approve updates and revisions unless revisions are ordinary maintenance, such as updating contact and resource information and title changes.

Number	Date	Version	Amended by:	DMT Approval:	Sections Updated	Nature of the Update
1	4/23/2018	0.1	Corina Lowe	February 2018	Full Update	Procedural enhancements
2		0.2	Corina Lowe and Kelly English		Full Update	New legislative requirements

It is the responsibility of each party named within this Plan to notify the department's CQI and Risk Manager of any administrative changes or revisions that may result in a change to this Plan or its attachments.

## Testing the Procedure

Regular testing/exercising of emergency response procedures are to be conducted in order to test the overall effectiveness of this Plan. Revisions to this Plan will incorporate recommendations stemming from such exercises.

## Internal Procedures

Each organization, agency and Regional department involved with this Plan is expected to prepare functional emergency procedures or guidelines outlining how it will fulfill its responsibilities during an incident.

Each Regional department should ensure that it designates a member of its staff to maintain and revise its own emergency procedures or guidelines.

## Emergency Contact Information

Specific contact and resource information referred to in this document are contained in a series of confidential documents within the Services for Seniors Division and Regional contact lists that are not intended as plan attachments for distribution. These lists will be updated on a regular basis.

## Halton Region Social and Community Services Contact Information

Kelly English  
Continuous Quality Improvement and Risk  
Manager  
905-825-6000 ext.  
[Kelly.English@halton.ca](mailto:Kelly.English@halton.ca)



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## 1.0 Introduction

Halton Region, Services for Seniors Division of the Social and Community Services Department operates three Long-Term Care (LTC) homes: Allendale, Creek Way Village and Post Inn Village which provide 24/7/365 care and services to residents with a wide range of care needs. LTC home leadership and staff are responsible for implementing emergency response procedures as appropriate to protect the life, safety and well-being of staff, residents, and visitors.

### 1.1 Purpose

The purpose of the Services for Seniors Emergency Response Plan is to outline the framework for the safe and efficient response to LTC home emergencies to include the following:

- Providing guidelines for assessing the level of emergency response required based on the nature, scope and duration of an emergency
- Ensuring adequate care and services are provided to residents during and immediately after an emergency utilizing the personnel and resources of the Regional Municipality of Halton, First Responders (fire/police/paramedics), Local Municipalities and other LTC organizations
- Providing guidance in the event that a Regional LTC home becomes a receiving site due to an emergency affecting a LTC home(s) in or around the Regional Municipality of Halton
- Ensuring this Plan or parts thereof align with/is supported by other related Regional Plans

### 1.2 Planning Assumptions

- Most emergencies occur with little or no warning allowing for little time to prepare
- An emergency may impact one or more LTC home
- Standards and regulations regarding the evacuation, relocation and care of residents will be implemented with assistance from MOLTC (See *Attachment 1: MOLTC Guide on Policy, Process, and Procedures During Emergency Evacuations* for more details)
- Business Continuity Plans (BCPs) will be activated to the greatest extent possible to provide safe and adequate care during or immediately after an emergency
- Emergency response organizations from outside of Halton Region may send available resources in response to an emergency if requested
- First Responders (Fire, Police and Paramedic Services) that provide support to this Plan have their own emergency operating procedures
- Staff could themselves be victims of the same emergency that may reduce staff ability to attend the LTC home to assist
- Every reasonable effort will be made to adhere to collective agreements during an emergency
- The Emergency Social Services Sub Plan B Emergency Evacuation Centre Plan may be activated to support Regional LTC homes as necessary
- LTC home visitors (as defined in section 1.5 of this document) and other Regional personnel may be used to support resident care and services during and immediately after an emergency

- Where additional Regional staff from other departments are required, Halton Region Human Resources will coordinate deployments
- Parties to this Plan will be made aware of their responsibilities as stated and will execute said responsibilities when required to do so

### 1.3 Hazard Identification and Risk Analysis (HIRA)

A hazard is an event or physical condition that has the potential to cause fatalities, injuries, damage to critical infrastructure, property or the environment, agricultural loss, interruption of business, or other types of harm or loss.

The HIRA identifies the types of hazards to which each of the LTC homes are most vulnerable and from which the impact would be most severe. In many cases, a hazard may cause disruption to the acquisition and deployment of critical supplies and services such as food, medical supplies, human resources and fuel thus creating a loss of essential services required to ensure the health, safety and well-being of residents and staff. The top 15 hazards that have been identified as having the greatest possibility and greatest impact on the each LTC home include the following:

#### Allendale Specific

1. Tornado
2. External Flood
3. Cyber Attack
4. Infectious Disease
5. Oil or Natural Gas
6. Fire Explosion
7. Internal Flood
8. Violent Outburst
9. Extreme Cold
10. High Wind
11. Structural Failure
12. Missing Resident
13. Medical Emergency
14. Water or Wastewater Disruption
15. Water Quality

#### Creek Way and Post Inn Village Specific

1. Tornado
2. External Flood
3. Cyber Attack
4. Infectious Disease
5. Oil or Natural Gas
6. Fire Explosion
7. Internal Flood
8. Violent Outburst
9. Extreme Cold
10. High Wind
11. Structural Failure
12. Missing Resident
13. Medical Emergency
14. Water Quality
15. Active Threat

Policies and procedures will be created/implemented for additional hazards identified in the HIRA that have less of a possibility of occurrence and impact on the LTC homes to meeting legislative requirements. All hazards identified are supported by program-level policies and procedures, Business Continuity Plans and the Region's Emergency Response.

### 1.4 Legislative Authority

The legislation under which the LTC homes are required to respond in the event of an emergency is as follows:



#### **1.4.1 Emergency Management and Civil Protection Act (EMCPA), R.S.O. 1990**

The EMCPA mandates that local municipalities develop emergency plans and organize the deployment of all services that may be required in an emergency.

#### **1.4.2 The Fixing Long-Term Care Act (FLTCA), 2021 and Ontario Regulation 246/22**

This Act and Regulation mandates that each LTC home have emergency plans in place including procedures for evacuating and relocating residents, staff and others within a LTC home.

#### **1.4.3 Ontario Regulation 213/07 Fire Code and Ontario Regulation 150/13 made under the Fire Protection and Prevention Act, 1997**

Under the *Ontario Fire Protection and Prevention Act* the frequency of fire drills are mandated in order to confirm that the LTC home can meet the evacuation needs of residents in the event of an actual fire emergency.

#### **1.4.4 Health Protection and Promotion Act, R.S.O. 1990**

This Act provides the Medical Officer of Health with the authority to take appropriate action in the event of a health hazard to prevent, eliminate or decrease the effect of the hazard within the community.

#### **1.4.5 Personal Health Information Protection Act, 2004**

The PHIPA establishes the rules for the collection, use, disclosure and security of personal health information by health information custodians such as physicians, hospitals, long-term care facilities, Medical Officers of Health and the Ministry of Health.

#### **1.4.6 Occupational Health and Safety Act (OHSA), R.S.O. 1990**

The OHSA details the responsibilities of the employer, supervisors, workers and other persons in the protection of the safety of all workers in as per the Act and applicable regulations.

## **2.0 Plans and Procedures - General**

This section briefly describes related plans and supporting documents, which provide guidance in the event of an emergency at a Regional LTC home. Should an emergency occur that threatens the health, safety and/or welfare of staff, residents, and visitors, the appropriate plans and supporting documents will be activated.

### **2.1 Emergency Codes**

In the event of an emergency, LTC home staff will use an Emergency Code system to identify and communicate the nature of an emergency and the required response procedures.

Laminated Emergency Code procedures are found throughout all LTC homes. The Code System is used as a teaching, review and reference tool for staff in the event of an emergency. These procedures give details as to the specific emergency and the required response from staff and are tested annually. (See *Table 1: Emergency Response Codes* for more details)

**Table 1: Emergency Response Codes**

Code Colour	Code Meaning	Possible Activations	Possible Activations
Code Black	Bomb Threat	Code Green	
Code Blue	Cardiac Arrest		
Code Aqua	Internal Flooding	Business Continuity Plan(s)	Code Green
Code Brown	Dangerous Substance in the building	Business Continuity Plan(s)	Code Green
Code Green	Partial or Full Evacuation	Business Continuity Plan(s)	Code Green
Code Grey	Air Exclusion (External Air Contaminant)	Business Continuity Plan(s)	Code Green
Code Red	Fire Emergency	Business Continuity Plan(s)	Code Green
Code Orange	Natural Disaster / Severe Weather Events	Business Continuity Plan(s)	
Code White	Violent Situation	Code Green	
Code Yellow	Missing Resident		

## 2.2 Other Emergencies

Other emergencies that do not have an assigned colour code for activation include:

- **Community Emergencies** that require Regional LTC homes to accept evacuees from other LTC homes are responded to as per internal procedures and *Attachment 1: MOLTC Guide on Policy, Process, and Procedures during Emergency Evacuations*
- **Communicable Disease Emergencies** which are responded to using internal Outbreak Management policies and procedures as well as the Services for Seniors Pandemic Plan aligned with the Halton Region Public Health Emergency Plan
- **Boil Water Advisories** which are activated by Halton Public Health and responded to as per Public Health directions, Services for Seniors internal procedures and Business Continuity Plan for Loss of Water
- **Loss of Essential Services** (water, hydro, generator back-up) are responded using applicable emergency response procedures and applicable Services for Seniors business continuity plans

## 2.3 Emergency Communications

The Services for Seniors LTC home leadership and staff will communicate all relevant information as appropriate to notify/activate/inform/update the following:

- Appropriate emergency response services
- Designated Regional leadership
- LTC home staff
- Resident, substitute decision makers, caregivers and families
- Other agencies as appropriate

Resident's Council and Family Council will be engaged and consulted on an ongoing basis.

Communications will occur using TELUS, email, mail chimp, etc. to ensure the right level of information is provided to the right people at the right time.

- Information/updates should include but are not limited to:
  - Current service level status
  - Critical services being provided
  - Any recovery activities being implemented

In the event of a loss of power and/or internet provider, all LTC homes have alternate communication options which include the following:

- Generator back-up to ensure a power supply for communication devices
- Cell phones
- A hard wired red analogue phone
- Each RHA is provided with an analogue phone that can be plugged into hard wired fax machines

When a large-scale community emergency occurs in Halton Region, including one or more Services for Seniors LTC homes, the Regional Emergency Information Officer (EIO) may be activated to coordinate and execute all internal/external communications related to the emergency. The EIO will consult with LTC home leadership accordingly.

## **2.4 Emergency Transportation**

Services for Seniors identifies the different transportation providers, purpose of each provider and stakeholders responsible for activating a provider to transport staff, residents, goods and/or services in the event of an emergency.

Depending on the type and impact of the emergency, there are two types of resident transportation responses, which include the following:

Type 1: Urgent and immediate full evacuation of all residents and staff in the building

Type 2: Graduated partial evacuation of a number of residents and staff when three or more areas have been damaged and there is not enough internal capacity to safely relocate staff and residents

Decisions as to the type of transportation most suitable for the type of resident will be made based on resident acuity of medical, mobility and security needs. (See *Table 2: Evacuation Transportation Provider Details* for more information)

**Table 2: Evacuation Transportation Provider Details**

<b>Urgent and Immediate Evacuation Transportation Services for Residents</b>		
<b>Transportation Providers</b>	<b>Purpose</b>	<b>Responsible to Activate</b>
Halton Region Paramedic Services	<ul style="list-style-type: none"> <li>• Transport residents suffering a medical emergency to hospital</li> <li>• Transport residents with mobility issues to evacuation site that cannot be transferred by Public Transit buses</li> </ul>	LTC home staff / leadership – 911
City of Toronto and Regional Municipality of York	<ul style="list-style-type: none"> <li>• Transport physically fragile seniors to evacuation locations via ambulances and buses outfitted with stretchers</li> </ul>	Paramedic Services will activate mutual aid agreements through the Provincial Communications Centre
Municipal Public Transit	<ul style="list-style-type: none"> <li>• Transport residents with few mobility issues and accompanying staff to evacuation site</li> </ul>	On Scene Commander (Fire Department)
<b>Graduated Partial Evacuation Transportation Services</b>		
<b>Transportation Providers</b>	<b>Purpose</b>	<b>Responsible to Activate</b>
Halton Region Paramedic Services	<ul style="list-style-type: none"> <li>• Transport residents suffering a medical emergency to hospital</li> </ul>	LTC home staff / leadership – 911
Municipal Public Transit	<ul style="list-style-type: none"> <li>• Transport residents with few mobility issues and accompanying staff to relocation site</li> </ul>	On Scene Commander (Fire Department)
Private Patient Transfer Company	<ul style="list-style-type: none"> <li>• Transport residents to relocation site</li> </ul>	LTC home leadership
<b>Transportation of Goods and Services</b>		
<b>Transportation Providers</b>	<b>Purpose</b>	<b>Responsible to Activate</b>
Pharmacy Provider	<ul style="list-style-type: none"> <li>• Resident medication delivery systems to evacuation / relocation site</li> </ul>	LTC home leadership
Regional Fleet Services	<ul style="list-style-type: none"> <li>• Transport supplies to evacuation / relocation site</li> </ul>	LTC home leadership
Contracted Food Services	<ul style="list-style-type: none"> <li>• Transport food and fluid supplies to evacuation / relocation site</li> </ul>	Nutrition Services Supervisors
Refrigeration Truck Company	<ul style="list-style-type: none"> <li>• Transport perishable foods to evacuation / relocation site</li> </ul>	Nutrition Services Supervisors

Taxi Services	<ul style="list-style-type: none"> <li>To return staff to retrieve their personal vehicles as necessary</li> </ul>	LTC home leadership
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**2.5 Business Continuity Plans**

The LTC homes’ Business Continuity Plans are designed to identify measures to ensure the continued delivery of critical functions and services during a significant disruption due to an emergency. Business Continuity Plans identify the priority of service delivery and the minimum level of service that must be ensured to meet the needs of residents.

As soon as the emergency is under control and risks to staff and residents are reduced, specific business continuity plans may be activated.

**3.0 Concept of Operations**

The initial authority to activate an emergency response can be done by any staff member who discovers the emergency. However, activation of a larger internal/external response must be done by the Chief Warden in collaboration with the Communication Warden.

**3.1 Authority to Activate and Deactivate an Emergency Code**

The most senior person managing the emergency and/or on the direction of the First Responder Site Incident Commander (Fire, Police or Paramedic Services) will deactivate the emergency response once the emergency is over.

If the emergency happens after-hours, the Services for Seniors Manager-on-Call will direct the Chief Warden to deactivate a level one emergency when the emergency response did not include First Responder Site Incident Commander. Manager-on-Call responsibilities are shared amongst the LTC home leadership with position titles of Administrator or Manager.

**3.1.1 Level 1 Emergency**

A Level 1 Emergency is an emergency that can be responded to/rectified with minimal disruption to day-to-day business by using internal resources of the LTC home and/or First Responders.

In response to a Level 1 Emergency the most senior leadership on site at the time of the emergency is responsible for ensuring staff are following correct emergency procedures and ensuring that all staff, residents, and visitors health and safety is being maintained at all times. Specific on-site LTC home staff based on the shift the emergency occurs on will manage the emergency. When a Level 1 emergency occurs after-hours, the Manager-on-Call must be notified and will provide direction as required. (See *Table 3: Level 1 Emergency Response Management Leads* for more details)

**Table 3: Level 1 Emergency Response Management Leads**

Shift	LTC Home Leadership	First Responder
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Monday to Friday - 0700-1500hrs	<ul style="list-style-type: none"> <li>• Chief Warden (Nurse in Charge), Communication Warden and Area Wardens</li> <li>• Administrator (Site Commander)</li> <li>• Senior Nursing Managers</li> <li>• Managers of Resident Care</li> </ul>	On Scene Incident Commander (Fire/Police/Paramedic Services)
Monday to Friday Shift - 1500-2300hrs Night Shifts - 2300-0700hrs Weekends / Statutory Holidays	<ul style="list-style-type: none"> <li>• Chief Warden, Communication Warden and Area Wardens</li> <li>• Administrator (Site Commander)</li> <li>• Senior Nursing Managers</li> <li>• Managers of Resident Care Manager-on-Call</li> </ul>	On Scene Incident Commander

**3.1.2 Level 1 Emergency Activation**

The staff member that first becomes aware of an emergency will activate the appropriate emergency response procedures to alert other staff. Designated staff will communicate and manage the emergency as appropriate.

Upon hearing or being notified of an emergency via paging of an Emergency Code:

- All staff on shift will report to their assigned work area if safe to do so and follow the appropriate procedures to ensure staff, resident and visitor safety
  - Unscheduled staff in the building at the time of the emergency; must report to the Staff Pool Area and await instructions
- The Manager of Resident Care (if on shift) will assume responsibility for the overall care and safety of residents.
  - Liaise with Senior Nursing Manager regarding resident and staff related issues as they arise
  - Work with the pharmacy provider to ensure replacement and delivery of resident medications as required

If a Level 1, Emergency escalates disrupting day-to-day business and cannot be responded to without using external resources. The Chief Warden in consultation with the most senior LTC home leadership member and the First Responder on Scene Incident Commander (if present) will activate a Level 2 Emergency response.

- After hours, the Chief Warden will contact the Manager-on-Call to inform them of the need for an escalation to a Level 2 Emergency
  - The Manager-on-Call will contact and inform the LTC home Administrator of the need for an escalation to a Level 2 Emergency
  - The Administrator will contact and activate the home's/program's Emergency Response Team (ERT) including the Director of Services for Seniors to assemble in a designated area to assess and determine further emergency response activities

**Note:** The administrative boardroom is the designated area for the ERT to assemble first. Most senior ERT management staff on site will choose an alternate location.

### 3.1.3 Level 1 Emergency Deactivation

If an emergency can be managed/rectified and normal, day-to-day business can resume with minimal interruptions; once the emergency is over an “All Clear” will be announced and staff can resume their normal work routines prior to the emergency.

Once the emergency is over, the Administrator, Senior Nursing Manager or Chief Warden will lead a debrief and take notes to identify what worked well, what didn't work well, and recommendations for improvement will be noted. Notes are to be reviewed and, where necessary, applicable procedures or training is to be updated to reflect recommendations for improvement.

Notifications and reports are to be provided to appropriate authorities as applicable and will be completed by the ERT within legislated timelines.

### 3.1.4 Level 2 Emergency

A Level 2 Emergency applies when an emergency cannot be managed/rectified without significant disruption to day-to-day business and requires external resources to assist during and after the emergency is over. This includes receiving evacuees from another LTC home.

External resources may include, but is not limited to, other Regional divisions/departments, the Ministry of Long-Term Care, Local Municipality and First Responders (Police/Fire/Paramedics).

This level of emergency may require:

- **Sheltering-in-place** if safe to do so and activating BCPs as required
- **Relocating** to a safe area within the LTC home and activating BCPs as required
- **Partial or whole home evacuation** depending on the effects of the emergency
- **Receiving** evacuees from another facility (Code Orange) to safely provide care and services
- **Activation** of specific Business Continuity Plans (BCPs) to continue to provide critical care and services to LTC home residents

### 3.1.5 Level 2 Emergency Activation

If a Level 1 Emergency escalates to a Level 2 Emergency, the LTC homes' Emergency Response Team (ERT) will assemble to assess and determine next steps in the emergency response. Some of the ERT members may not be on site at the time of the emergency, but will either be called in or an alternate will be assigned by the next highest level of Services for Seniors leadership.

Until the Site Commander arrives, the Chief Warden, Communication Warden and Area Wardens will lead in emergency response procedures for the protection of all staff, residents and visitors.

### 3.1.6 Level 2 Emergency Deactivation

Once the emergency is over and day-to-day business can resume and/or Business Continuity Plans can be implemented during recovery activities, the Level 2 Emergency can be deactivated as per specific emergency deactivation procedures. The On-Scene Incident Commander if present or the LTC home leadership Administrator (Site Commander), Senior Nursing Manager, and Services for Seniors Director (Division Incident Commander) will authorize deactivation.

As part of the deactivation process, a closing Operations Cycle meeting to close out of the last Incident Action Plan will be conducted before full recovery efforts can commence. (For more details, see *section 6.0 Recovery Planning and Implementation*)

## 3.2 Emergency Notification

The Halton Region Emergency Management Team is responsible for 24/7/365 monitoring of news feeds and First Responder alerts to identify any potential, imminent or actual emergency event that could affect any of Halton Region's communities, services, and programs. Emergency Management staff will notify department Commissioners of an identified event and request information on how they will manage, mitigate, respond or recover operations. The information is summarized into a report for Regional Senior Management to include the following:

- The risks that the Division faces arising from the emergency event
- The steps the Division is taking in order to prepare for the event
- Any other relevant update or significant information

Once the report is completed, Divisional Directors will determine if there is a need to activate emergency procedures, Business Continuity Plans, recovery procedures, etc.

### 3.2.1 Levels of Emergency Notification

**Standby emergency notification** will occur to alert Services for Seniors ERTs/key staff of a developing event that may lead to activation of the ERT to support an emergency response.

**Partial emergency notification** will be initiated when select members of an ERT/key staff at one location or all who are required to support an emergency response.

**Full emergency notification** will be initiated when an emergency requires the full response of the ERTs/key staff in one or more than one of the LTC homes.

**Emergency Evacuation notification** will be initiated as per section 4.3. This will include notifying the Ministry of Long-Term Care (Director, Ministry Branches), the Placement Coordinator and the Service Area Office (SOA) to assist in taking actions within their authority. (See *Attachment 1: MOLTC Guide on Policy, Process, and Procedures during Emergency Evacuations*)

### 3.2.2 Emergency Contact Information

When an emergency occurs depending on the location, nature, scope and duration of the emergency, additional human resources and supplies may be required at the affected LTC home or at another location to continue to meet resident care/service requirements. Leadership will activate Fan-Out lists when it is necessary to call in additional staff to support an emergency response.

Confidential contact lists are maintained and updated at each LTC home and also included in the Manager-on-Call binder for after-hours.



### **3.3 Formal Declaration of an Emergency**

When an emergency exists, but has not been declared to exist under the *Emergency Management and Civil Protection Act*, Municipal or Regional management may take such action(s) under this emergency response plan as may be necessary to protect the lives of the residents and staff affected by the emergency.

A formal emergency declaration is not required to use Regional resources to manage and mitigate the effects of an emergency at any of the LTC homes. In the event of a community-wide emergency, the Mayor of a Local Municipality (Town of Milton, City of Burlington or Town of Oakville) can declare a Local Municipal emergency.

The Region is not bound to formally declare an emergency if a Halton Region Local Municipality makes such a declaration. If, however, the Regional Chair considers it necessary to declare an emergency, notifications will be provided to all Regional Departments/Divisions and where necessary appropriate resources will be mobilized where necessary.

### **3.5 Termination of a Declared Emergency**

A Regional emergency will be terminated as per By-law No. 39-18 Halton Region Emergency Program and Plan.

## **4.0 Level 2 Emergency Response Implementation**

### **4.1 Emergency Management System for a Level 2 Emergency**

The Director of Services for Senior's will act as the Divisional Incident Commander for Level 2 emergencies affecting the LTC homes. The Divisional Incident Commander will liaise with and take direction from the Commissioner of SCS, regardless of whether or not the Region/Local Municipality has activated an Emergency Operations Centre due to a community emergency.

Each long-term care home will assemble their Emergency Response Team (ERT) to coordinate emergency response activities using internally maintained Contact Lists as necessary. (See *Figure 1: Level 2 Emergency Command Structure*)

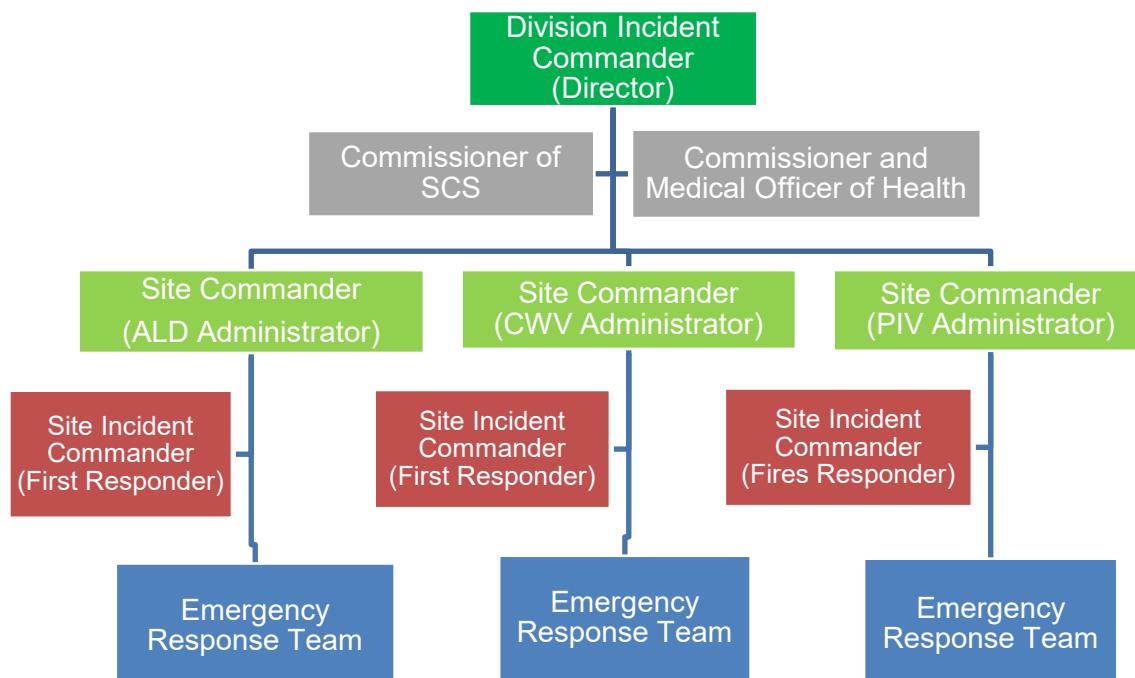
#### 4.1.1 LTC Homes' Emergency Response Team (ERT) Composition

The LTC home's ERT to include the following individuals:

- Commissioner of SCS (not on site)
- Division Incident Commander - Director, Services for Seniors / Alternate (not on site)
- Site Commander - Administrator / Alternate
- Senior Nursing Manager
- Manager(s) of Resident Care
- Nurse-in-Charge
- Building Operations Supervisor (may not be on site)
- Supervisors from Nutrition Services, Housekeeping, and Life Enrichment (if on site)
- Manager Community Support Services (Allendale Only)
- Manager Shared Services
- CQI & Risk Manager (may or may not be on site)
- IPAC Nurse as needed dependent on the type of emergency response required (may not be on site)
- Medical Director (not on site)

**Note:** At any time, additional stakeholders may be part of an ERT including the On Scene Incident Commander and Adult Day Program Manager (Allendale Only); a Level 2 Emergency may be coordinated through the Allendale ERT.

Each Administrator/alternate will act as the Site Commander for his or her LTC home as required.



#### **4.1.2 Staffing**

Services for Seniors Scheduling Services may be notified to contact and schedule additional staff to provide resident care/services at another LTC home or Discharge Centre beyond regular staffing assignments to ensure critical services can be effectively delivered. These individuals will be screened for suitability, trained and placed according to the needs of the home. Steps will be taken to ensure they are not functioning beyond their capabilities. Staff may be requested to reschedule vacation time and should be available to report for duty if it is safe and feasible to do so.

Staff who do not provide direct resident care/services and whose day-to-day functions can be halted until the emergency is over will be called in to assist in whatever capacity is feasible.

Additional staffing may be required to provide security at a Discharge Centre to ensure resident, staff and visitor safety until Regional Security Services can be implemented.

#### **4.2 Operations Cycle Meeting**

The LTC home's Site Commander will schedule and lead Operations Cycle meetings with the ERT to evaluate the status of the emergency, assess actions taken, identify emergency response issues that require resolution and set objectives for the next operational period. Depending on the nature and duration of the emergency, the frequency of meetings may vary from every four (4) hours initially to every eight (8) to twelve (12) hours as needed. Meetings will be kept as brief as possible to allow members to carry out their individual tasks.

A pre-appointed Scribe (Administrative Assistant, designate) will maintain and update an Incident Action Plan to set emergency response/mitigation objectives for the next operation period.

#### **4.3 Assessing Level 2 Emergency Response Requirements**

The mass movement of extremely frail, bed ridden, palliative, cognitively impaired and/or residents with high acuity medical needs comes with inherent risks that need to be considered before deciding to evacuate all or part of a LTC home.

The ERT should only consider a partial or full evacuation of the LTC home when staying within specific areas or the whole home poses a greater risk than leaving. Depending on the location, nature, scope and duration of an emergency the ERT in consultation with the First Responder on Scene Incident Commander, (if present) and/or the Division Incident Commander will determine next steps to ensure staff and resident safety and continuation of services.

Decisions on where to relocate residents outside of the LTC home are made based on resident acuity of medical and security needs and/or ease of evacuation and time allotted to evacuate the facility. (See *Table 4: External Relocation Options* for more information)

#### **4.3.1 Sheltering-in-Place**

Shelter-in-Place when leaving the home would put staff and residents at risk due to external issues in the community (e.g., trees and power lines down) and the activation of BCPs will allow for an acceptable level of resident care/services and access to sufficient resources.

#### **4.3.2 Relocation within the LTC Home**

Relocation within the LTC home will be considered if one or more areas have been damaged but there are other areas in the facility where staff and residents can safely relocate and Business Continuity Plans can provide an acceptable level of resident care/services. Each LTC home has communal spaces where residents can be relocated in an emergency, such as the Allendale Auditorium, Creek Way Village Activity Rooms and Post Inn Village Activity Rooms.

Resident family members/substitute decision makers may be requested to take home their resident home to relieve some of the possible congestion in relocation areas. If so, adequate supplies (medications, briefs, PPE, and so on) will be provided. Transportation will be arranged if the family member/substitute decision maker does not have appropriate transportation to take the resident home.

#### **4.3.3 Partial Evacuation and Relocation outside the LTC Home**

Partial evacuation and relocation outside of the LTC home will be considered if three or more areas have been damaged and there is not enough internal capacity to safely relocate staff and residents and even the activation of Business Continuity Plans would not provide an acceptable level of care/services to affected residents.

At the time of the evacuation, the first, second and third priorities and Relocation Options will be implemented. Should capacity diminish, the Ministry of Long-Term Care and any identified Recipient LTC homes will be notified. If the Recipient Home(s) is unable to receive evacuees due to outbreak, internal capacity issues, etc., leadership will consider the possible use of hotels if feasible and residents to be evacuated fit the fourth priority description. Staffing will accompany residents and provide care accordingly. (See *Table 4: External Relocation Options* for more details)

Resident family members/substitute decision makers will be requested to take home their resident home and if able to do so, adequate supplies (medications, briefs, PPE, and so on) will be provided. Transportation will be arranged if the family member/substitute decision maker does not have appropriate transportation to take the resident home

#### **4.3.4 Full Evacuation and Relocation outside the LTC Home**

Full evacuation and relocation outside of the LTC home will be considered if remaining in the home would put staff and residents at risk of illness or injury and activating Business Continuity Plans is not possible in the current circumstances to provide an acceptable level of care/services to affected residents.

Depending on the type and impact of the emergency, there are two types of full evacuation responses, which include the following:

Type 1: Urgent and immediate full evacuation of all residents and staff in the building and would go directly to 'Discharge Centre' whereby residents would be fully triaged and relocated as per the applicable relocation options in *Table 4: External Relocation Options*.

Type 2: Graduated partial evacuation of a number of residents when there is not enough internal capacity to safely relocate staff and residents. Residents would be triaged according to *Table 4: External Relocation Options*

At the time of the evacuation the first, second and third priorities and Relocation Options will be implemented. Once those priorities have been met and accompanying relocation options have been exhausted the fourth and fifth priorities will be considered and the Ministry of Long-Term Care and any identified Recipient LTC homes outside of Halton will be notified. If the Recipient Home(s) outside of Halton is unable to receive evacuees due to outbreak, internal capacity issues, etc., leadership will notify the Commissioner of SCS to determine if the sixth priority and Relocation Option of activating an Emergency Evacuation Centre is feasible. (See *section 4.3.51 Emergency Evacuation Centre (Discharge Centre)* for more details)

**Table 4: External Relocation Options**

Priority	Resident/Client needs profile	Relocation Option
First	High acuity medical needs / communicable infection	Hospital
Second	History of going to family/substitute decision maker's home for overnights	Family/substitute decision maker's home
Third	Mobility issues requiring mechanical lift, cognitive impairment (elopement risk, responsive behaviours assigned to secure units) palliative, and / or extremely frail	Other Halton Region LTC Home
Fourth	Require minimal care/mobility assistance, with minimal to no cognitive impairment ***to be determined by the ERT with the assistance of HCCSS at the time of evacuation	Other LTC homes within the Regional Municipality of Halton
Fifth	Require minimal care/mobility assistance, with minimal to no cognitive impairment ***to be determined by the ERT with the assistance of HCCSS at the time of evacuation	Other LTC homes outside the Regional Municipality of Halton
Sixth	Require minimal care and mobility assistance, with minimal to no cognitive impairment and are free of communicable infectious agents	Halton Region Emergency Evacuation Centres or other Local Municipal facilities

#### 4.3.5.1 Emergency Evacuation Centre (Discharge Centre)

The decision to evacuate all LTC home residents to a Discharge Centre as an interim sheltering option until other more appropriate care facilities can be accessed would only be considered if:

- immediate evacuation of the home is required with little to no time to triage beyond hospital admissions;
- Or all other relocation options have been exhausted; or reached capacity before relocating all Halton LTC home residents from the affected home(s)

The Commissioner of SCS will obtain authority from the Regional CAO to activate a Discharge Centre as per Emergency Evacuation Centre Plan procedures and may arrange for the deployment of the SCS Emergency Social Services (ESS) Team to support where necessary.

The Services for Seniors Transportation Plan will be activated to safely transport all staff and residents to a Discharge Centre. If the emergency is not only affecting the LTC home(s) but the community as whole, LTC residents will be relocation to pre-identified Local Municipal facility(ies) to reduce risks associated with sheltering LTC residents with the general public.

Where family members/substitute decision makers have agreed to take home their resident, adequate supplies (meds, briefs, PPE, etc.) will be provided. Transportation will be arranged if the family member/substitute decision maker does not have appropriate transportation to take the resident home.

The Senior Nursing Manager in conjunction with Attending Physician/Medical Director assumes overall authority for discharging residents to families substitute decision makers, hospitals, other LTC facilities as determined by the HCC/LHIN, and/or Discharge Centre.

#### **4.3.5.2 Preparing Residents for Evacuation**

In preparing to evacuate residents:

- All residents must be wearing evacuation identification tags
- Each home area must be evacuated based on their proximity to the emergency location
- Residents are to be arranged in predetermined groups to facilitate loading vehicles as they arrive at pre-arranged intervals
- All residents will be registered
- Staff will be assigned to accompany residents to the evacuation location
- Registered staff is responsible for gathering and safeguarding medical records
- Office staff is responsible for gathering and safeguarding office records
- Notify Energy, Fleet and Facilities and Contract Pharmacy

#### **4.4 Receiving Evacuees from other LTC Homes**

On notification by the Placement Coordination Office of the need to receive LTC evacuees from another LTC home Leadership, will:

- Conduct an inventory of available space within one or more of the Region's LTC homes
- Identify the number of LTC evacuees that can safely be admitted from the affected LTC home
- Notify Maintenance, Housekeeping and applicable staff to prepare for temporary LTC evacuee admissions

- Request Life Enrichment postpone, reschedule, reorganize any planned activities that may be scheduled for space being utilized for receiving LTC evacuees
- Request Supervisors of Nutrition Services work with Source LTC home to ensure appropriate meals and fluids are provided to LTC evacuees on arrival and at meal times
- Inform the Source LTC home of the following:
  - Number of LTC evacuees that can be admitted to the Regional LTC home(s)
  - Timeline for receiving LTC evacuees
  - Request appropriate staffing to support LTC evacuees
- Begin tracking expenses related to receiving LTC evacuees
- Postpone any new admissions if vacant rooms are to be assigned to LTC evacuees
- Contact the Ministry of Long-Term Care, Director to report the number of LTC evacuees that will be received

*See Attachment 1: MOLTC Guide on Policy, Process, and Procedures during Emergency Evacuations*

## **5.0 Overview of Emergency Response Team Responsibilities**

### **5.1 Collective Leadership Responsibilities**

- Implement / carry out appropriate emergency response procedures
- Determine priorities and actions that need to be taken immediately
- Actively participate in the affected LTC home's Emergency Response Team as assigned
- Determine the nature of the emergency and potential impact to the LTC home(s)
- Implement BCPS to meet the critical care needs of residents
- Ensure health and safety of all staff, residents, and visitors on site
- Direct staff to assist as needed and feasible to maintain resident and visitor safety
- Identify short and long term objectives for response and recovery activities
- Coordinate and direct resources and ensure all actions taken to support the response to, and recovery from, the emergency are conducted and documented
- Track staff time and expenditures in established cost centres
- Attend operations cycle meetings and set objectives for the next operational period
- Maintain a personal log of decisions made and actions taken for review and to assist in completing an After Action Report and Improvement Plan
- If for any reason any leadership staff are unable to fulfil their role an alternate will be assigned by the next level of leadership and will be granted full authority to act in the assigned role at any time this Plan is activated depending on the nature and scope of the emergency
- Perform other duties as required

### **5.2 Individual Responsibilities – Level 2 Emergency**

### 5.2.1 Commissioner of Social and Community Services

If the Commissioner is unable to fulfil his /her, duties a Director from the SCS Department will act as the Commissioner.

As the head of the Social and Community Services Department the Commissioner is responsible for ensuring all notifications, procedures, communications, and reporting processes are implemented to ensure the CAO and other key Regional stakeholders are aware and where required ready to deploy appropriate resources to assist the LTC home(s) in maintaining the health and safety of staff and residents.

### 5.2.2 Director, Division Incident Commander

If the Services for Seniors Director or an Administrator is unable to fulfil the duties of Division Incident Commander, the Commissioner, SCS will act as the Division's Incident Commander.

The Division Incident Commander is responsible for ensuring the implementation of all notifications, procedures, communications, and reporting processes to respond to the emergency and protect the health and safety of all staff, residents and visitors.

### 5.2.3 Administrator LTC Home Site Commander

If an Administrator is unable to fulfil the Site Commander, role an alternate will be assigned when necessary and subject to the requirements of the emergency, the Division Incident Commander will appoint a Senior Nursing Manager to perform the duties of a Site Commander as necessary. (See *Table 5: Alternate Site Commanders* for more information)

**Table 5: Alternate Site Commanders**

Administrator	1 <sup>st</sup> Alternate	2 <sup>nd</sup> Alternate	3 <sup>rd</sup> Alternate
Allendale	CWV Administrator	PIV Administrator	ALD Senior Nursing Manager
Creek Way Village	PIV Administrator	ALD Administrator	CWV Senior Nursing Manager
Post Inn Village	CWV Administrator	ALD Administrator	PIV Senior Nursing Manager

The affected LTC home Site Commander leads the ERT and is responsible for ensuring all appropriate emergency response, business continuity and recovery activities are implemented as per LTC home procedures and legislative requirements.

The Administrator at the affected LTC home will assign alternates for the following should there be absences at the time of the emergency:

- Nutrition Services Supervisor
- Housekeeping and Laundry Supervisor
- Nutrition Services Supervisor for Production Kitchen (Allendale only) in the absence of the Manager of Shared Services
- Work with contracted service leadership to choose appropriate supervisory alternate(s)

Administrators of unaffected homes may be required to act as the Division Incident Commander.



#### 5.2.4 Senior Nursing Manager

If a Senior Nursing Manager is unable to fulfil his/her role as an alternate Senior Nursing Manager will be assigned from an unaffected LTC home. If there is no Senior Nursing Manager available the affected LTC home the Manager of Resident Care from the affected LTC home will act as the Senior Nursing Manager until otherwise directed.

The affected LTC home Senior Nursing Manager:

- Assumes overall responsibility for the care and safety of all staff and residents throughout the emergency response
- Collaborates with the ERT
- Oversees staff deployment
- Acts as a resource to the ERT and staff during / after an emergency
- Maintains communications with operational staff, the applicable Ministry of Long-Term care representatives, service provision agencies, hospitals, and other Halton LTC homes regarding the status of an evacuation and relocation or receiving of residents. (See *Attachment 1: MOLTC Guide on Policy, Process, and Procedures during Emergency Evacuations*)
- Coordinates, monitors and ensures Business Continuity Plans are implemented as needed to support continued operations during an emergency
- Oversee any emergency investigations as required
- Notifies Managers of Resident Care of imminent reception of external LTC evacuees and oversees all intake and delivery of care/services of evacuees
- Provides the Site Commander with final summary of emergency impact on resident care and facilitating staff returning to normal operations once an emergency is over

**Note:** If called upon the Senior Nursing Manager may be assigned as the Site Commander.

#### 5.2.5 Manager of Resident Care (MRC)

- Notifies and mobilizes staff to the appropriate locations including supporting evacuees from other LTC homes
- Implements BCPs as necessary
- Tracks all resident relocations and assigns Registered staff, PSWs and other support staff to support relocated/cohorted residents including patrolling the building perimeter if the building security system is compromised or residents are relocated to a Discharge Centre until Regional Security can be contacted and deployed.
  - Where residents are relocated inside/outside the LTC home, the Senior Nursing Manager will prepare a final report tracking all residents and their relocation destinations for the ERT

**Note:** The Senior Nursing Manager will appoint an alternate to perform the duties of the Manager of Resident Care as required.

### 5.2.6 Nurse-in-Charge (Chief Warden)

The Chief Warden will oversee all emergency response procedures by frontline staff, in both Level 1 and Level 2 emergencies. Should a Level 2 Emergency be activated the Chief Warden will establish a Command Centre to gather and deploy staff in consultation with the Site Commander if present. Where necessary staff may be required to assist in whatever capacity is feasible from all services/programs until staff, resident and visitor safety is established.

### 5.2.7 Nutrition Services Supervisor

The Supervisor will mobilize dietary staff to implement the Food Services Business Continuity Plans to secure, procure, store, prepare and serve adequate food stocks during an emergency at designated locations to meet residents'/evacuee dietary and nutritional needs.

### 5.2.8 Life Enrichment Supervisor

The Supervisor will notify and mobilize staff to support residents'/evacuee's social/emotional/safety needs and aid in evacuation procedures as necessary.

### 5.2.9 Housekeeping and Laundry Supervisor

The Supervisor will implement business continuity plans to secure cleaning, laundry supplies, and coordinate in-house/relocation site services to maintain a sanitary environment as much as reasonably possible while implementing infection control procedures as directed by the LTC home is Site Commander and Clinical Resource Nurse.

### 5.2.10 Building Operations Supervisor

The Supervisor will notify and mobilize staff, directing them to the appropriate location within the LTC home to assist with building maintenance issues, monitoring Building Operating Systems, fire safety systems and contacting appropriate internal staff and/or contracted repair companies as needed. When required assist in the physical set up of the home's Command Centre.

Where system failures occur implement contingency planning to include:

- Fire watches throughout the period of a fire safety system malfunction
- Generator back-up repairs, refueling, etc.
- Authorizing verbal work order requests prioritizing all work orders relate to emergency response and recovery activities
- Maintain a log of all verbal work order requests and actions taken
  - Input all verbal work orders into the electronic work order system during recovery activities

**Note:** The Manager of Facilities Services will designate an alternate to perform the duties of the Building Operations Supervisor in the Supervisor's absence, if required.

### 5.2.11 Manager or Supervisor of Community Support Services – Allendale Only

The Manager or Supervisor will direct staff to follow emergency response procedures to ensure all clients in the Adult Day Program from Milton Place/Friends Landing are relocated within or outside the building to await for family member/substitute decision maker/transportation pick up.

Once immediate health and safety of staff and clients has been established implement Business Continuity Plans to continue programs if feasible.

#### **5.2.12 Continuous Quality Improvement & Risk Manager**

Attend affected LTC home to support emergency response, business continuity and recovery activities as requested by the Division Incident Commander and ensure all redeployed and external human resources are adequately trained to perform assigned functions.

- Identify and communicate any risk management issues requiring immediate attention and conduct on-going assessments of emergent risks and communicate said assessments to the LTC home Site Commander
  - e.g., if power is out and generator back-up is operational there still may be areas that are not fully illuminated, consider restricting residents to lit areas to congregate to prevent injuries to both staff and residents moving around the facility

**Note:** The Manager of Shared Services will act as the alternate for the Continuous Quality Improvement and Risk Manager unless otherwise assigned by the Director.

#### **5.2.13 Manager of Shared Services**

The Manager will support emergency response, business continuity and recovery activities as requested and oversee Production Kitchen emergency operations.

**Note:** The Continuous Quality Improvement and Risk Manager will act as the Alternate for the Manager of Shared Services unless otherwise assigned by the Division Incident Commander.

#### **5.2.14 Infection Prevention and Control and Compliance Manager**

The Manager will support emergency response, business continuity and recovery activities as requested to ensure that Infection Prevention and Control and Compliance standards are followed as much as reasonably possible during and immediately after an emergency response.

#### **5.2.15 Nutrition Services Supervisor for Production Kitchen (Allendale Only)**

The Supervisor will notify and mobilize staff to assist in whatever capacity is feasible to aid in emergency response procedures and implement Business Continuity Plans to ensure adequate food and fluid supplies are prepared and delivered to meet residents'/evacuees' dietary and nutrition needs.

**Note:** The Manager of Shared Services will designate an alternate to perform the duties of the Supervisor as necessary.

#### **5.2.16 Infection Prevention and Control (IPAC) Nurse / Alternate**

The IPAC Nurse / designate will work with Public Health to provide infection prevention and control advice at an evacuation location as well as direction and personal protective equipment (PPE) as necessary.

- Identify PPE requirements and monitor supplies
- Communicate to the Site Commander any PPE needs when stocks diminish

- Act as a resource to all Regional and facility staff at a Discharge Centre regarding infection prevention and control procedures

### **5.2.17 Medical Director / Attending Physician**

The Medical Director/Attending Physician assumes overall authority with the home's Senior Nursing Manager for discharging residents to families, hospitals, and other LTC facilities/evacuation location as determined by the Ministry of Long-Term Care and acts as a resource to ERT leads.

### **5.2.18 Pharmacy Services**

Implement contingency planning to ensure replacement and delivery of resident medications as needed, print, deliver printed Electronic Medication Administration Reports, Treatment Administration Reports and Physician Medication Reviews, and supply on-going refills to the relocation site for the duration of the emergency.

In the case of the receiving of evacuees from other Halton LTC homes, provide replacement medications, refills, and Reports/Reviews in printed or electronic form.

Further information on Pharmacy Services during an emergency can be found in the Medisystem Disaster Plan.

## **6.0 Recovery Planning and Implementation**

### **6.1 Regional Recovery Planning**

Where a community emergency has occurred that affected one or more Services for Seniors LTC homes the formal activation of the Halton Region Post-Emergency Recovery Plan will occur. The Regional Emergency Control Group (includes the Commissioner of Social and Community Services) will determine the need for activation based on but not limited to the following:

- The nature of the emergency
- Impact to the Region and Community(ies)
- Potential consequences of the emergency
- Impacts to Regional services
- Recovery needs such as physical, social, economic and environmental needs

Where recovery planning as a result of a pandemic, management will implement specific procedures as per the Services for Seniors Pandemic Response Plan and as per Public Health additional guidelines as provided. Incidents involving the spread of infectious diseases will also be addressed by following the procedures outlined in the division's Pandemic Response Plan.

Once all recovery activities have been implement to meet recovery objectives, all services have been fully restored then the Regional Emergency Control Group will terminate the Post-Emergency Recovery Plan.

### 6.1.1 LTC Home Initial Recovery Planning

In the first 72 hours of an emergency, there may be an overlap of emergency response and business continuity activities while some recovery activities could be implemented. Recovery activities could include:

- Ensuring required Business Continuity Plans are activated to maintain an acceptable level of service and care for the residents until full restoration of all services can take place
- Conducting debriefs with staff, residents, their decision makers, volunteers and students as soon as possible after the emergency is over
  - Notes from debriefs will be taken to identify what worked well and any recommendations for improvement
  - An After Action Report will be developed using information from Personal Logs, Incident Action Plans and debriefs to create an Improvement Plan to be implemented as soon as reasonably possible
- Removing debris and clean up around a LTC home as necessary
- Maintaining generator back up until lifeline utilities are restored
- Ensuring building safety inspections are conducted where structural / electrical / water damage may have occurred
- Bringing residents back to the LTC home if safe to do so
- Development of initial Recovery Action Plan to include:
  - Assessment of losses and identification of recovery needs
  - Assessment of social emotional support requirements necessary for staff, residents, their substitute decision makers, volunteers and students who experienced distress/injuries during the emergency
  - Establishment of recovery objectives
  - Identification of recovery actions
  - Establishment of timelines for recovery

### 6.1.2 LTC Home Recovery Period

The recovery period typically begins after the initial 72 hours of impact and up to four weeks with and increase in number of recovery activities utilizing both internal and external resources to restore all LTC home services to their original level of delivery. Recovery activities may include but are not limited to the following:

- Provision of alternate LTC home location
- Restoration of lifeline utilities and building operations
- Restoration of social and health services
- Restoration of all direct resident care and services
- Possible demolition of all or parts of a LTC home
- Crisis counselling for residents, substitute decision makers, staff, students and volunteers available as needed

### 6.1.3 LTC Home Long-Term Recovery Period

A Long-term Recovery Period may occur when large-scale recovery activities occur including construction and mitigation efforts. This period begins after a four-week recovery period and can extend up to multiple years. This period may include but is not limited to the following:

- Hazard mitigation
- Reconstruction of a LTC home

Any recovery timeline formalized in a recovery plan are subject to change and should be updated accordingly.

## 7.0 Training and Exercises

All LTC home staff are required to participate in general/role specific emergency response training and exercises. The purpose of training and exercising is to maintain up-to-date knowledge of emergency response procedures and assigned responsibilities within a LTC home. Training and exercise sessions will also serve as a forum for discussion of past incidents in order to facilitate the implementation of lessons learned.

Training includes, but is not limited to in-person orientation overviews, annual TRAKS training and role specific training either in-person or through TRAKS modules housed in Halton Region's Success Factors database.

Methods of exercising emergency procedures can include but is not limited to the following:

- Discussion-based exercises such as workshops and/or tabletop exercises; or
- Operational-based exercises such as drills, functional exercises or full-scale exercises

All exercises are evaluated and a written report with corrective actions is maintained including a signed attendance section for all participants.

(See *Table 6* for frequency of training and exercising as per the legislative requirements under O. Reg. 246/22 and O. Reg. 150/13)

**Table 6: Emergency Procedures Training and Exercise Type and Frequency**

Emergency Procedures	Training Frequency	Exercise Type and Frequency
Code Aqua – Internal flood	At Orientation and Annually	Drill or Tabletop
Code Black – Bomb threat	At Orientation and Annually	Drill
Code Blue – Medical Emergency	At Orientation and Annually	Drill or Tabletop
Code Brown – Release of a hazardous substance	At Orientation and Annually	Drill or Tabletop
Code Green – Partial or full evacuation	Annually Every Three Years	Mock Evacuation Drill

		Planned Full-Scale Evacuation Exercise
<b>Code Grey – Contaminated air</b>	At Orientation and Annually	Drill or Tabletop
<b>Code Red - Fire</b>	At Orientation and Annually	Monthly Drills on all shifts
<b>Code Orange – Extreme Weather events / Natural Disasters</b>	At Orientation and Annually	Drill or Tabletop
<b>Code White - Violence</b>	At Orientation and Annually	Drill or Tabletop
<b>Code Yellow – Missing Residents</b>	At Orientation and Annually	Drill or Tabletop
<b>BCPs - Loss of Essential Services</b>	At Orientation and Annually	Drill or Tabletop
<b>Community Emergency – Receiving of evacuees from a LTC home</b>	At Orientation and Every Three Years	Tabletop
<b>Boil Water Advisories</b>	At Orientation and Annually	Tabletop
<b>Communicable disease outbreaks, epidemics, and pandemics</b>	At Orientation and Annually	Tabletop

All LTC home volunteers and students will be provided an orientation and training on emergency procedures before they perform their responsibilities and at least annually or sooner if there are procedures that have a direct impact on their role.

## Appendix 1: Definitions

<b>Business Continuity Plan (BCP)</b>	Is a plan that explains how to continue operations if a place of business which is affected by adverse conditions such as severe weather, fire, infectious disease, accident or other event. This type of plan can be implemented on or off-site.
<b>Discharge Area</b>	The area outside the main lobby where residents would gather to load onto buses.
<b>Discharge Centre</b>	A designated facility used to safely shelter evacuated residents while they are processed for discharge to more appropriate settings.
<b>Division Incident Commander</b>	The Director of Services for Seniors or alternate who is responsible for overseeing the implementation of Level 2 and Code Orange emergency response activities and applicable BCPs as needed and/or supporting the activation of the Sub-Plan B Emergency Evacuation Centre Plan as needed.
<b>Emergency</b>	A situation or impending situation that constitutes a danger of major proportions that could result in serious harm to persons or substantial damage to property and that is caused by the forces of nature, a disease or other health risk, an accident or an act whether intentional or otherwise
<b>Emergency Code</b>	A predetermined colour that is assigned to a specific emergency and response procedures. When an emergency occurs, designated staff are to identify and communicate the emergency by its colour to alert staff to the required response.
<b>Emergency Evacuation Centre</b>	A facility located outside the impact zone used to safely gather people displaced from their home because of an emergency or disaster. For the purpose of this Plan, a designated Emergency Evacuation Centre will be used as a resident Discharge Centre.
<b>Emergency Information Officer (EIO)</b>	The Regional individual responsible for coordinating and executing all internal / external communications related to an emergency.
<b>Emergency Response Team (ERT)</b>	The departmental, divisional and home management personnel who have specific emergency response roles in directing a coordinated respond to an emergency and determining the need for activation of specific plans to meet the needs of the residents in an emergency.
<b>Evacuation</b>	For the purpose of this plan, an evacuation is described as the removal of a resident(s) from a LTC home due to an emergency (including any exceptional situations that arise presenting a direct or indirect threat to health and safety) that necessitates the relocation of LTC home resident(s) outside of the home.
<b>Halton Region Emergency Program and Plan</b>	The Halton Region Emergency Program and Plan is supported by annexes, sub-plans, and protocols and is designed to prepare and coordinate internal and external resources to respond to incidents that could negatively affect people in Halton Region.
<b>Hazard</b>	An event or physical condition that has the potential to cause fatalities, injuries, damage to critical infrastructure, property or the environment, agricultural loss, interruption of business, or other types of harm or loss. <ul style="list-style-type: none"> <li>Natural hazards are events related to naturally occurring elements and conditions including, but not limited to, floods,</li> </ul>

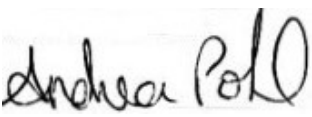


	<p>tornadoes, and ice and snowstorms that pose a threat to lives, property, and other assets.</p> <ul style="list-style-type: none"> <li>• Human-caused hazards are either technological or intentional.</li> <li>• Technological hazards are those caused by the tools, machines, and equipment that are commonly utilized to support the personal, financial, and economic well-being of a community.</li> <li>• Intentional hazards are those deliberately caused by people attacking or damaging what a community finds valuable.</li> </ul>										
<b>Incident Action Plan</b>	A verbal and/or written plan that defines the event objectives and reflects the necessary actions taken to manage the event during a time specific operational periods.										
<b>LTC Home Staff</b>	<p>Is anyone employed by the LTC home that provides direct / indirect resident care / services such as:</p> <table border="0"> <tr> <td>- Registered Staff</td> <td>- Laundry Workers</td> </tr> <tr> <td>- Personal Support Workers</td> <td>- Building Maintenance</td> </tr> <tr> <td>- Resident Care Aides</td> <td>- Housekeeping including contracted service staff</td> </tr> <tr> <td>- Social Workers</td> <td>- Contracted Hair Salon staff</td> </tr> <tr> <td>- Dietary Aides</td> <td></td> </tr> </table>	- Registered Staff	- Laundry Workers	- Personal Support Workers	- Building Maintenance	- Resident Care Aides	- Housekeeping including contracted service staff	- Social Workers	- Contracted Hair Salon staff	- Dietary Aides	
- Registered Staff	- Laundry Workers										
- Personal Support Workers	- Building Maintenance										
- Resident Care Aides	- Housekeeping including contracted service staff										
- Social Workers	- Contracted Hair Salon staff										
- Dietary Aides											
<b>LTC Home Visitor</b>	<p>Is anyone who is not employed by the LTC home(s) directly or via a full-time on-site contract to provide resident services such as:</p> <table border="0"> <tr> <td>- Volunteers</td> <td>- Resident family member, substitute decision maker</td> </tr> <tr> <td>- Students</td> <td>- Allied health care staff</td> </tr> <tr> <td>- Doctors</td> <td></td> </tr> </table>	- Volunteers	- Resident family member, substitute decision maker	- Students	- Allied health care staff	- Doctors					
- Volunteers	- Resident family member, substitute decision maker										
- Students	- Allied health care staff										
- Doctors											
<b>On Scene Incident Commander</b>	The first response department (police, fire, paramedics) responsible for managing the emergency.										
<b>Recipient Home</b>	Refers to either an existing licensed LTC home that is authorized by a temporary emergency licences to operate additional beds at the home on a temporary basis, or a Stand-Alone Temporary LTC Unit.										
<b>Recovery Plan</b>	A written plan that documents the Post-Emergency Recovery Objectives and actions taken to complete them during the recovery period.										
<b>Site Commander</b>	Is the Administrator or alternate that is in charge of all response and reporting activities at the LTC home experiencing an emergency and Discharge Centre where residents may be temporarily evacuated. The LTC home Site Commander oversees the LTC home ERT and reports directly to the Division’s Incident Commander, Director of Services for Seniors.										
<b>Staff Pool Area</b>	The location that unscheduled staff, and volunteers are to report to for deployment. This location will be unique to each LTC home and should be determined by the Administrator at initiation of Fan-Out procedure.										
<b>Stand-Alone Temporary LTC Unit</b>	Refers to premises that are authorized by a temporary emergency licence to be used as a long-term care home on a temporary basis, and may include a unit within a residential facility (or part thereof) that is normally not licensed to operate LTC beds (e.g. a hospital, a retirement home, or a community centre), that is licensed as an LTC home for the temporary operation of LTC home beds.										

## Attachment 1: Ministry of Long-Term Care Evacuation Guide



Emergency  
Evacuation Guide (EN)

Approved By:  Date: June 20, 2022

**Andrea Pohl, Director Services for Seniors**