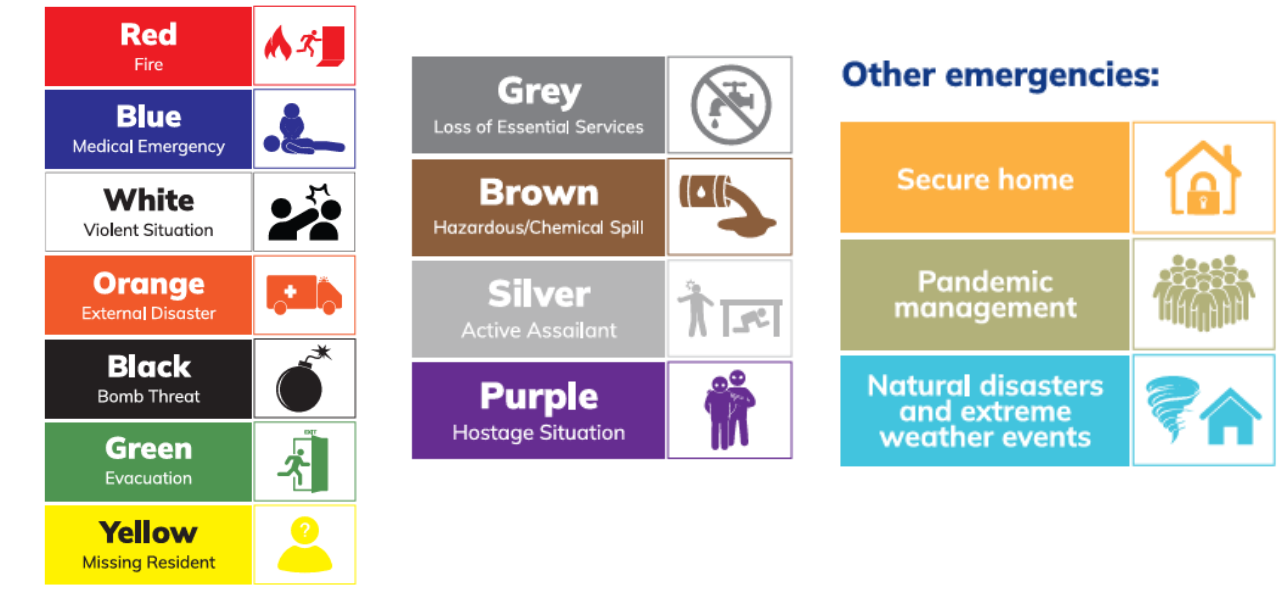
The Pines Long-Term Care Home

Emergency Preparedness and Response



Reviewed and Updated: April 2026

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

Emergency Planning and Management Manual
Table of Contents

SECTION 1- Emergency Planning and Management Program	
EPM1-P10	Emergency Planning and Management Program Policy
EPM1-O10-T1	The Incident Management System Tool
EPM1-O10-T2	Crisis Communications Process Tool
EPM1-O10-T3	Disaster Box Contents Tool
EPM1-O10.01	Hazard Identification and Risk Analysis (HIRA) Procedure
EPM1-O10.01-T1	Hazard Identification and Risk Analysis Guide and Process Tool
EPM1-O10.01-T2	Risk Assessment HIRA Tool
EPM1-O10.02	Emergency Operations Centre Procedure
EPM1-O10.02-T1	Emergency Operations Centre Equipment Checklist Tool
EPM1-O10.03	Post Emergency Response Procedure
EPM1-O10.03-T1	Post Emergency Checklist Tool
EPM1-O10.03-T2	Post Emergency Analysis and Debrief Tool
SECTION 2- Emergency Response Codes	
EPM2-P10	Emergency Response Codes Policy
EPM2-O10-T1	Emergency Codes Poster Tool
EPM2-O10.01	Code Red- Fire Procedure
EPM2-O10.01-T1	Code Red- Poster Tool
EPM2-O10.02	Code Green- Evacuation Procedure
EPM2-O10.02-T1	Code Green- Incident Manager Job Action Checklist Tool
EPM2-O10.02-T2	Code Green- Nurses/Managers/Supervisors Job Action Checklist Tool
EPM2-O10.02-T3	Code Green- All Staff Job Action Checklist Tool
EPM2-O10.02-T4	Code Green- Administrator Job Action Checklist Tool
EPM2-O10.02-T5	Code Green- Poster Tool
EPM2-O10.03	Code Yellow- Missing Resident Procedure
EPM2-O10.03-T1	Code Yellow- Incident Manager Job Action Checklist Tool
EPM2-O10.03-T2	Code Yellow- All Staff Job Action Checklist Tool
EPM2-O10.03-T3	Code Yellow- Resident Risk Assessment Tool
EPM2-O10.03-T4	Code Yellow- Administrator Job Action Checklist Tool
EPM2-O10.03-T5	Code Yellow- Poster Tool
EPM2-O10.04	Code Black- Bomb Threat Procedure
EPM2-O10.04-T1	Code Black- Staff Receiving the Threat Job Action Checklist Tool
EPM2-O10.04-T2	Code Black- Incident Manager Job Action Checklist Tool
EPM2-O10.04-T3	Code Black- All Staff Job Action Checklist Tool

Extendicare (Canada) Inc. © 2026

Extendicare

Emergency Planning and Management Manual
Table of Contents

EPM2-O10.04-T4	Code Black- Administrator/Designate Job Action Checklist Tool
EPM2-O10.04-T5	Code Black- Poster Tool
EPM2-O10.05	Code Orange- External Disaster Procedure
EPM2-O10.05-T1	Code Orange- Incident Manager Job Action Checklist Tool
EPM2-O10.05-T2	Code Orange- Administrator/Designate Job Action Checklist Tool
EPM2-O10.05-T3	Code Orange- Poster Tool
EPM2-O10.06	Natural Disaster and Extreme Weather Events Procedure
EPM2-O10.06-T1	Natural Disasters and Extreme Weather Events Incident Manager Job Action Checklist Tool
EPM2-O10.06-T2	Natural Disasters and Extreme Weather Events Administrator/ Designate Job Action Checklist Tool
EPM2-O10.06-T3	Natural Disasters and Extreme Weather Events Information Sheet Tool
EPM2-O10.06-T4	Natural Disasters and Extreme Weather Events Poster Tool
EPM2-O10.07	Code Grey- Air Exclusion Procedure
EPM2-O10.07-T1	Code Grey- Air Exclusion Incident Manager Job Action Checklist Tool
EPM2-O10.07-T2	Code Grey- Air Exclusion Maintenance Job Action Checklist Tool
EPM2-O10.07-T3	Code Grey- Air Exclusion All Staff Job Action Checklist Tool
EPM2-O10.07-T4	Code Grey- Administrator/Designate Job Action Checklist Tool
EPM2-O10.07-T5	Code Grey- Air Exclusion and Essential Services Poster Tool
EPM2-O10.08	Code Grey- Essential Services Procedure
EPM2-O10.08-T1	Code Grey- Essential Services Incident Manager Job Action Checklist Tool
EPM2-O10.08-T2	Code Grey- Essential Services Maintenance Job Action Checklist Tool
EPM2-O10.08-T3	Code Grey- Essential Services Dietary Job Action Checklist Tool
EPM2-O10.08-T4	Code Grey- Essential Services Nursing Staff Job Action Checklist Tool
EPM2-O10.08-T5	Code Grey- Administrator/Designate Job Action Checklist Tool
EPM2-O10.08-T6	24 Hour Resident Check Log Tool
EPM2-O10.09	Code Grey- Building Flood Procedure
EPM2-O10.09-T1	Code Grey- Building Flood Incident Manager Job Action Checklist Tool
EPM2-O10.09-T2	Code Grey- Administrator/Designate Job Action Checklist Tool
EPM2-O10.09-T3	Code Grey- Building Flood, Water Supply and Carbon Monoxide Poster Tool
EPM2-O10.10	Code Grey- Water Supply Procedure
EPM2-O10.10-T1	Code Grey- Water Supply Incident Manager Job Action Checklist Tool
EPM2-O10.10-T2	Code Grey- Water Supply Operations Manager Job Action Checklist Tool
EPM2-O10.10-T3	Code Grey- Administrator/Designate Job Action Checklist Tool
EPM2-O10.10-T4	Code Grey- Water Supply Boil Water Advisory Information Sheet Tool
EPM2-O10.11	Code Grey- Carbon Monoxide Procedure

Extendicare

Emergency Planning and Management Manual
Table of Contents

EPM2-O10.11-T1	Code Grey- Carbon Monoxide Incident Manager Job Action Checklist Tool
EPM2-O10.11-T2	Code Grey- Carbon Monoxide Staff Job Action Checklist Tool
EPM2-O10.11-T3	Code Grey- Administrator/Designate Job Action Checklist Tool
EPM2-O10.12	Code Brown- Hazardous/Chemical Spill Procedure
EPM2-O10.12-T1	Code Brown- Incident Manager Job Action Checklist Tool
EPM2-O10.12-T2	Code Brown- Individual Responsible for Cleaning the Spill Job Action Checklist Tool
EPM2-O10.12-T3	Code Brown- Administrator/Designate Job Action Checklist Tool
EPM2-O10.12-T4	Code Brown- Poster Tool
EPM2-O10.13	Code Silver- Active Assailant Procedure
EPM2-O10.13-T1	Code Silver- Active Assailant Emergency Response Action Plan Tool
EPM2-O10.13-T2	Code Silver- Resident Care Decisions Tool
EPM2-O10.13-T3	Code Silver- Incident Manager Job Action Checklist Tool
EPM2-O10.13-T4	Code Silver- All Staff Job Action Checklist Tool
EPM2-O10.13-T5	Code Silver- Administrator/Designate Job Action Checklist Tool
EPM2-O10.13-T6	Code Silver- Poster Tool
EPM2-O10.14	Code Purple- Hostage Situation Procedure
EPM2-O10.14-T1	Code Purple- Incident Manager Job Action Checklist Tool
EPM2-O10.14-T2	Code Purple- Administrator/ Designate Job Action Checklist Tool
EPM2-O10.14-T3	Code Purple- Taken Hostage Tip Sheet Tool
EPM2-O10.14-T4	Code Purple- Poster Tool
EPM2-O10.15	Code White- Violent Situation Procedure
EPM2-O10.15-T1	Code White- Incident Manager Job Action Checklist Tool
EPM2-O10.15-T2	De-escalation Techniques Tool
EPM2-O10.15-T3	Code White- All Staff Job Action Checklist Tool
EPM2-O10.15-T4	Code White- Administrator/Designate Job Action Checklist Tool
EPM2-O10.15-T5	Code White- Poster Tool
EPM2-O10.16	Code Blue- Medical Emergency Procedure
EPM2-O10.16-T1	Code Blue- Incident Manager Job Action Checklist Tool
EPM2-O10.16-T2	Code Blue- Administrator/ Designate Job Action Checklist Tool
EPM2-O10.16-T3	Code Blue- Poster Tool
EPM2-O10.17	Secure Home Procedure
EPM2-O10.17-T1	Secure Home Incident Manager Job Action Checklist Tool
EPM2-O10.17-T2	Secure Home Administrator/ Designate Job Action Checklist Tool
EPM2-O10.17-T3	Secure Home Poster Tool

Extendicare

Emergency Planning and Management
Manual Table of Contents

SECTION 3- Emergency Plans

EPM3-P10	Emergency Plans Policy
EPM3-O10.01	Fire Safety Planning Procedure
EPM3-O10.01-T1	Fire Safety Plan Tool
EPM3-O10.01-T2	Fire Safety Inspection Action Plan Tool
EPM3-O10.01-T3	Fire Drill, Alarm, Test or Equipment Repairs Tool
EPM3-O10.01-T4	Fire Drill Evaluation Form- Scene of Fire Alarm Tool
EPM3-O10.01-T5	Fire Drill Observation Evaluation Form- Other Areas Tool
EPM3-O10.01-T6	Fire Watch Log Tool
EPM3-O10.02	Home Specific Emergency Response Plan Procedure
EPM3-O10.02-T1	Emergency Response Plan Template Tool
EPM3-O10.02-T2	Staff Call Back Flow Chart Tool
EPM3-O10.02-T3	Planned Downtime Planning Template Tool
EPM3-O10.03	Pandemic Plan Procedure
EPM3-O10.03-T1	Corporate Pandemic Plan Tool

Extendicare (Canada) Inc. © 2026

SECTION 1- EMERGENCY PLANNING AND MANAGEMENT PROGRAM

POLICY			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM1-P10
SECTION:	Emergency Planning and Management Program	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Emergency Planning Program Requirements	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	January 12, 2026

POLICY

The home will have an Emergency Preparedness and Management Program in effect that reflects The Incident Management System (IMS) and includes home-specific planning, response, and business continuity.

STANDARD

- The Executive Director/Designate is responsible for the program.
- The Incident Manager is the most senior team member on location during the emergency unless otherwise designated by the Executive Director.
- The Incident Manager will assign the IMS roles that mimic everyday staff routines and responsibilities as closely as possible during an emergency. The Incident Manager may assign themselves all roles for a smaller emergency, multiple roles to one person, one role per person, or multiple people one role.
- During an emergency, the Executive Director/Designate will contact the Regional Director of Operations who will then enact the Issue Alert process.
- The Executive Director will designate an Emergency Operations Centre (EOC) at the home as a central place for meetings and to coordinate the emergency response. An alternate EOC must also be designated outside the home in the event of a total evacuation.
- The Executive Director/Designate will conduct a Hazard Identification and Risk Analysis (HIRA) annually with the home's interdisciplinary team to identify and assess the home specific risks.
- The Executive Director/Designate will prepare and update a minimum of 2 disaster boxes, one located in the EOC and one in a nursing station.
- The Executive Director/Designate will conduct a post-emergency debrief and evaluation of every incident and exercise, drill and table-top, acknowledge staff participation, and take inventory of the expenses incurred as a result of the emergency incident. Lessons learned will be sent to riskmanagement@extendicare.com to inform of possible policy and procedure change.
- All staff will be educated on the emergency plans, including fire plans and where to locate them upon hire and annually thereafter.
- Staff will participate in drills or table-top exercises of the Emergency response codes during the designated code of the month (all emergency response codes will be practiced every year) as well as the following annually:
  a. R.E.A.C.T. and

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. ©2026

b. Emergency lifts and carries.

- The home will conduct a live, planned Code Green on an annual basis.
- An annual live drill must be completed that includes at least two (2) areas of service. Examples include a Code Brown that leads to a Code Green (evacuation), or a severe weather event that leads to a Code Orange (intake of evacuees), etc. Participants of drills and exercises will include staff, residents, volunteers, families and community partners where possible.
- A record will be kept of the names of everyone who participates in actual emergency events, drills and table-top exercises.
- The Executive Director must determine a process/ system in the home to make sure every staff member takes part in at least one fire drill each year.

PROCEDURE

1. Hazard Identification and Risk Analysis (HIRA)
2. Emergency Operations Centre
3. Post Emergency Response

TOOLS

1. Incident Management System
2. Crisis Communications Process
3. Disaster Box Contents

REFERENCES

Alberta Emergency Management Agency http://www.aema.alberta.ca/

Emergency Management Ontario http://www.emergencymanagementontario.ca/english/home.html

Emergency Management Organizations https://www.getprepared.gc.ca/cnt/rsrcs/mrgnc-mgmt-rgnztns-en.aspx

Manitoba Emergency Plan https://www.manitoba.ca/asset_library/en/emo/mb-emergency-plan.pdf

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. ©2026

This page is intentionally left blank

The Incident Management System

IMS is an expandable system based on functions. Each function is assessed to see if it is required for the incident. A function may be fulfilled by one person or a team of people. For smaller events, one person may fulfill multiple functions. The Incident Manager determines the need to appoint a person(s) to be responsible for a function or multiple functions or can maintain responsibility for a function or functions themselves.

The Key Actions for the functions are as follows:

Incident Manager
Organizes and directs the emergency response and operations for the emergency/incident as well as authorizes evacuation if required. The Incident Manager must provide a comprehensive briefing to the new incoming Incident Manager before passing on the function. All other IMS Team members must be informed of any change in the Incident Manager or any other IMS functional responsibility.
In longer events (more than 2 hours), the Incident Manager will schedule regular meetings of the IMS Team to:
i) obtain a status update;
ii) gather information, assess challenges/needs;
iii) make decisions on the strategic direction of the response, assign tasks; and
iv) ensure effective communications.

Operations
Operations is the function of carrying out the emergency response, containment, damage mitigation, recovery and directives of the Incident Manager/designate. Where the incident directly impacts resident care, Operations will coordinate and ensure ongoing resident care during emergency operations.

Logistics
Logistics is the function of organizing and supplying additional staffing, maintaining the physical environment, food, water and supplies to support Operations. It is also responsible for maintaining environmental services of the physical building. Logistics will also conduct or collect information for damage assessments of the home.

Planning
The planning function develops scenario/resource projections for the IMS Team and undertakes long range planning (more than 2 hours).

Finance/ Administration
The Administration/Financial function monitors the utilization of financial assets, provides administrative support to the senior IMS Team members, and ensures documentation of all meetings.

Public Information
The Public Information function organizes communications with the families, stakeholders and the media (as appropriate), and provides information updates. The Public Information Officer must work closely with Corporate Communications, or the role may be filled directly by Corporate Communications.

Liaison
Liaison is the function of communications and acts as the contact for representatives from other agencies.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

The Incident Management System

Safety/ Health and Wellness
In every emergency or incident, the health and safety of staff and residents is paramount. The safety function monitors and has authority over the safety of Operations.

Information Technology
The IT function manages IT requirements or issues during an emergency situation at the home level and acts as a liaison between the corporate IT department and the home, as required.

Incident Management System Organizational Structure
Identified below is the sections of the Incident Management System and the roles that fall under each section. Individuals assigned to these roles can be designated by a specific colour when carrying out their roles to be easily identifiable during an emergency. These colours are identified on the top column of each section. The Organizational chart for these roles can be found on page 3.

Command Section Red	Operations Section Orange	Planning Section Blue	Logistics Section Yellow	Finance Section Grey
• Incident Manager • Green	• Operations Manager	• Planning Manager	• Logistics Manager	• Finance/ Administration Manager
• Safety/ Health and Wellness Officer	• Information Technology Lead			
• Public Information Officer				
• Liaison Officer				

IMS Assignment
The below fillable chart can be used to designate the IMS roles in the home during an emergency.

IMS Role	Individual Assigned
Incident Manager	
Safety/ Health and Wellness Officer	
Public Information Officer	
Liaison Officer	
Operations Manager	
Information Technology Lead	
Planning Manager	
Logistics Manager	
Finance/ Administration Manager	

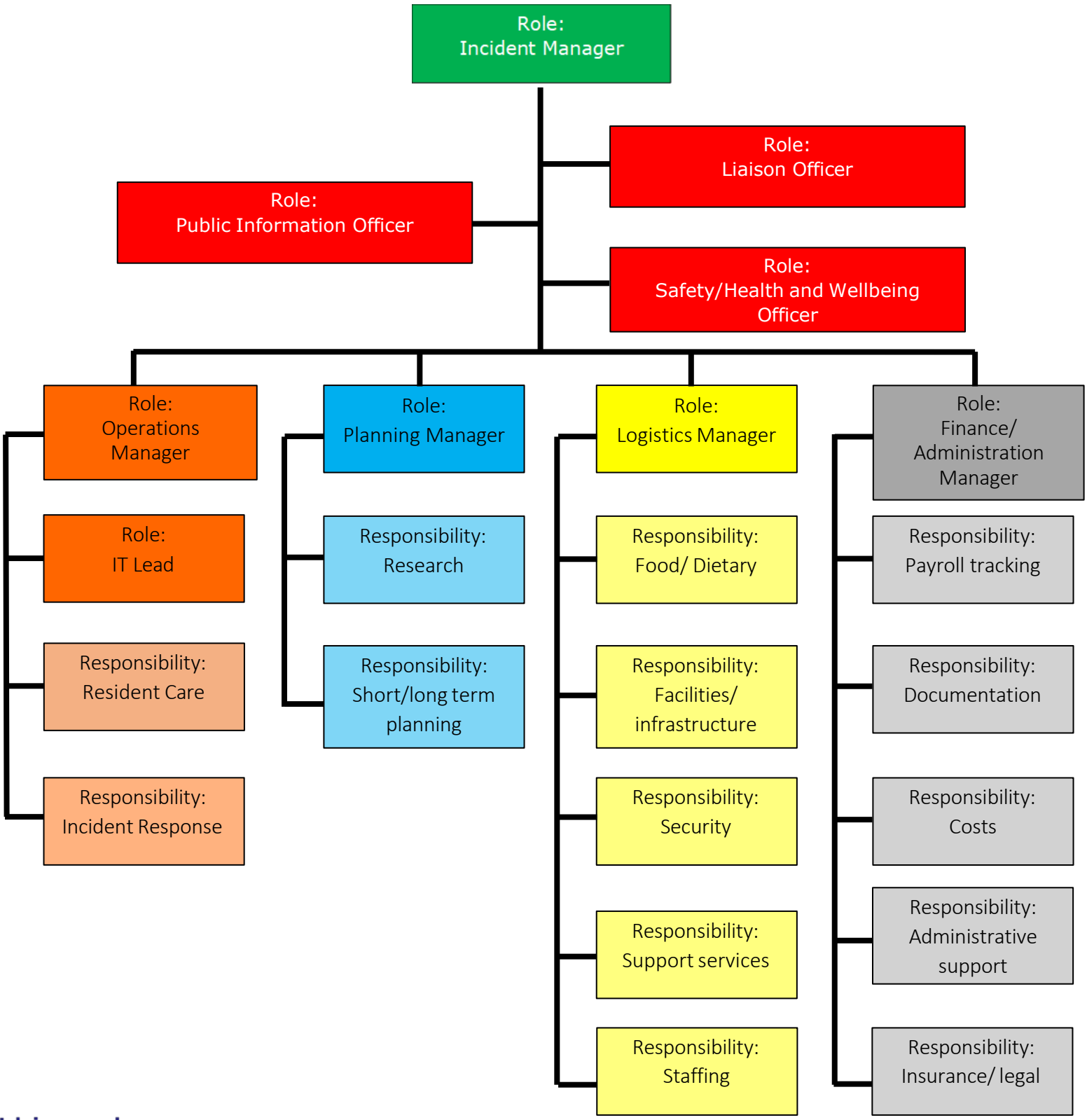
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

The Incident Management System

IMS Organization Chart and Responsibilities

The chart below outlines the reporting structure of the IMS roles and some responsibilities that fall within the roles.



This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Introduction

This process provides definitions of levels of risk and communication protocols to follow in crisis situations in order to minimize confusion and inform our stakeholders of necessary information.

Definition of a Risk

Risk for this purpose is defined as any incident which may actually or potentially threaten the health and safety of residents or staff as well as Extendicare's reputation, with potential for and significant loss of community, customer and investor or employee confidence.

Four Levels of a Risk

Stage 1: Low

- An event has occurred at a home that has not resulted in serious injury to residents or staff and poses minimal threat to Extendicare's reputation/operation.
- Only one home is affected and there is little to no potential for media coverage.
  Example: An elevator in a home breaks down.

Stage 2: Moderate

- A home-specific issue has occurred but poses no immediate risk of occurring at another home.
- The event or issue poses a potential threat to resident safety and Extendicare's reputation/operations.
- There is potential for broader media coverage.
  Example: A mechanical lift or sling, used in the majority of homes, malfunctions and causes a non-life threatening injury to a resident.

Stage 3: High

- An incident has occurred that may harm or has the potential to harm residents or staff, affect operations, ***and/or*** severely damage the company's reputation.
- The issue may pose a potential risk to numerous homes and media coverage is expected.
  Examples: Physical assault to resident/employee, resident elopement in bad weather, inclement weather is preventing food deliveries and power outages are being experienced.

Stage 4: Critical

- A major crisis which has already caused harm to residents and/or staff, affected operations, and/or severely damaged the company's reputation.
- Media has been contacting the home(s) and/or corporate office.
  Example: A resident dies as a result of asphyxiation from a restraint, resident is seriously injured, sexual assault of a resident, an explosion, gas leak or fire is forcing the immediate evacuation of the home.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Incident Management Communication Team Organization And Structure

The crisis communications process aligns with the Emergency Response Plan.

The Incident Manager will assume primary responsibility for determining the level of risk facing the organization. The Incident Manager will determine need to call the IMS Team/specific members.

An IMS Team will be organized by the Incident Manager at the onset of a Stage 3: High or Stage 4: Critical.

The roles on the team will be consistent with the IMS Model. The people that fill those roles may vary so that the team has the expertise to properly manage the crisis/issue at hand. The roles on the IMS Team include the following:

- Incident Manager
- Communication Officer
- Liaison Officer
- Safety /Health and Wellness Officer
- Information Technology Lead
- IPAC Lead
- Resident Care Lead
- Operations Chief
- Planning Chief
- Logistics Chief
- Finance Chief

*The role of Planning Chief will be assumed by an individual with a nursing background.

Note: *A Senior Operations designate will be assigned to the IMS Team at the Stage 3 level.*

Dealing With Ascending Levels of Risk

Stage 1: Low	**Definition:** An event has occurred at a home that has not resulted in serious injury to residents or staff and poses minimal threat to Extendicare's reputation/operation. Only one home is affected and there is little to no potential for media coverage.

Involvement:

- Incident Manager (Executive Director or designate at the home level)
- Manager, Corporate Communications
- The Regional Director of Operations responsible for the impacted home
- Regional Manager (Clinical) for the home
- SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)
- Asset Management (if necessary)

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note • Clarify the issue and Extendicare's position on the event including key messages	Communications Department	• Executive Director • Regional Director • Ops/VP QRI • Media

Stage 2: Moderate	**Definition:** A home-specific issue has occurred but poses no immediate risk of occurring at another home. The event or issue poses a potential threat to Extendicare's reputation/operations. There is potential for broader media coverage.

Involvement:

- Incident Manager (Executive Director or designate at the home level)
- Manager, Corporate Communications
- The Regional Director of Operations responsible for the impacted home
- Regional Manager (Clinical) for the home
- Dietitian Consultant (if necessary)
- Senior Director, Corporate Quality and Risk
- Operations Vice President
- SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)
- Asset Management (if necessary)

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note • Clarify the issue and Extendicare's position on the event including key messages	Communications Department	Executive Director Regional Director Ops/VP QRI Media
Media Q&As	Communications Department	Executive Director Regional Director
Bulletin • To post in the home if deemed necessary	Communications Department	Residents, Families, Staff

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Stage 3: High	**Definition:** A risk has emerged that may harm or has the potential to harm residents or staff, affect operations, and/or severely damage the company's reputation. The issue may pose a potential risk to numerous homes and media coverage is expected.

Involvement:

- Incident Management Team (National)
- CEO alerted
- Incident Manager (Executive Director or designate at the home level)
- The Regional Director of Operations responsible for the impacted home
- Regional Manager (Clinical) for the home
- Dietitian Consultant (if necessary)
- Operations Vice President
- Senior Director, Corporate Quality and Risk
- Manager, Corporate Communications
- SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)
- Asset Management (if necessary)

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note • Clarify the issue and Extendicare's position on the event including key messages	Communications Department	Impacted homes Media Executive Director Regional Director Ops/ VP QRI CEO
Media Q&As	Communications Department	Impacted homes
Bulletin • To post in the home if deemed necessary by the IMS Team	Communications Department	Impacted homes
RISK ALERT • Explanation of the issue and required actions • Regional Directors of Operations will be advised that a RISK ALERT is being distributed so they are able to field questions from Executive Director •	IMS Team (compiled by Communications Lead)	All homes at risk
Teleconference • If deemed necessary by IMS Team	IMS Team	All homes that received the RISK ALERT

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Product	Prepared By	Audience
• Held by members of the IMS Team to provide further explanation of the RISK ALERT and the required actions		
Updates • Sent out as deemed necessary by the IMS Team • To keep homes informed of the issues status and of any additional required actions	IMS Team (compiled by Communications Lead)	All homes that received the RISK ALERT
• Email to provincial or regional authorities/regulatory body (i.e. RHRA, MOHLTC, Regional Health Authority, AHS, Zone, LHIN)	Regional Director/Operations	Appropriate authorities

Stage 4: Critical	**Definition:** A major risk which has already caused direct harm to residents or staff, affected operations and/or severely damaged the company's reputation. Media has been contacting the homes and/or Corporate Office.

Involvement:

- Incident Management Team (National)
- CEO alerted, Board of Directors alerted as required
- Incident Manager (Executive Director or designate at the home level)
- The Regional Director of Operations responsible for the impacted home
- Regional Manager (Clinical) for the home
- Senior Director, Corporate Quality and Risk
- Dietitian Consultant (if necessary)
- Operations Vice President
- Manager, Corporate Communications
- SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)
- Asset Management (if necessary)

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note • Clarify the issue and Extendicare's position on the event including key messages	Communications Department	All homes

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Media Q&As	Communications Department	All homes
Bulletin • To post in the home if deemed necessary by the IMS Team	Communications Department	All homes
RISK ALERT • Explanation of the issue and required actions • Regional Directors will be advised that a RISK ALERT is being distributed so they are able to field questions from Executive Directors •	IMS Team (compiled by Communications Lead)	All homes at risk
Teleconference • If deemed necessary by the IMS Team Lead • To provide further explanation of the RISK ALERT and the required actions	IMS Team	All homes that received the RISK ALERT
Updates • To keep homes informed of the issues status and of any additional required actions	IMS Team (compiled by Communications Lead)	All homes that received the RISK ALERT
Letters • To distribute to residents and families and other key constituents	IMS Team (compiled by Communications Lead)	All homes

Risk Monitoring and Cessation

It is the responsibility of the Incident Manager and/or emergency services to determine when a risk issue has ended. Various actions are required dependent on the level of the risk issue.

Stage 1: Low **Communication Deliverables:**

Product	Prepared By	Audience
Communications Log • To catalogue the communication requested and released regarding the issue • The Briefing Note • Any media requests (print, television, radio)	Communications Department	IMS Team

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Stage 2: Moderate	Communication Deliverables:	
Product	**Prepared By**	**Audience**
Communications Log • To catalogue the communication released and request(s) regarding the issue such as: a. Briefing Note, Media Q&As, Bulletins b. Any media requests (print, television, radio)	Communications department	IMS Team

Stage 3: High	Communication Deliverables:	
Product	**Prepared By**	**Audience**
Communications Log • To catalogue the communication released and request(s) regarding the issue such as: a. Briefing Note, Media Q&As, Bulletins, Risk Alerts b. Updates, letters, any media requests (print, television, radio) • Applicable meeting minutes • Debrief results	Communications Department	IMS Team
Final Update • Sent to the homes to indicate the cessation of the crisis, outline any final actions, and thank everyone for their cooperation	IMS Team (to be compiled by Communications Lead)	All homes involved
Debrief • Held with the IMS Team to discuss lessons learned and to review potential changes that can improve the company's operations	IMS Team (organized by the Incident Manager Lead)	IMS Team, SLT

Stage 4: Critical	Communication Deliverables:	
Product	**Prepared By**	**Audience**
Communications Log • To catalogue the communication released and request(s) regarding the issue such as: a. Briefing Note, Media Q&As, Bulletins, Risk Alerts, Updates, letters	Communications Department	IMS Team

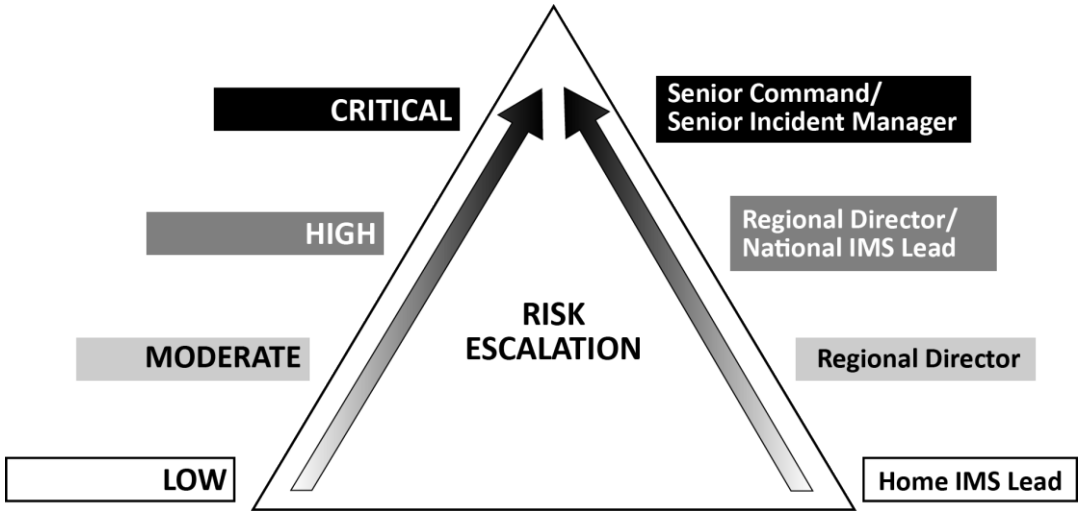
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

b. Any media requests (print, television, radio) c. Applicable meeting minutes d. Debrief results		
Final Update • Sent to the homes to indicate the cessation of the crisis, outline any final actions, and thank everyone for their cooperation	IMS Team (to be compiled by Communications Lead)	All homes involved
Debrief • Held with the IMS Team to discuss lessons learned and to review potential changes that can improve the company's operations	IMS Team (organized by the Incident Manager)	IMS Team, SLT

Primary Accountabilities

Decisions relating to the management of a risk, irrespective of level, will be vested in the Incident Manager. Escalation of risk and management of that risk may require a concurrent escalation to a more senior IMS Team Lead in the organization.

The following diagram is an example of and suggested management accountabilities in response to that risk.



Decisions: Authority for decisions is vested in the IMS lead. This lead position may escalate according to the severity of the presenting situation and may skip stages. Expeditious response and management of issues is the desired outcome of this assignment of Leadership.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Risk Management Communications Process for Regional Directors

1. RDO and Communications receive notification from home regarding potential issue.
2. RDO determines level of risk based on 4 stages outlined in Crisis Communications Process.
3. RDO sends Issue Alert as per Issue Alert process.
4. If stage 3 or 4, the Issue Alert should suggest members of the Corporate Incident Management System (IMS) Team (always including Corporate Communications).
5. If a Corporate IMS Team is to be enacted (stages 3 or 4), the Regional Director of Operations should facilitate a teleconference with the available suggested members of the IMS Team.

	Communications	Ops VP	Risk	Relevant Consultants	CEO	IMS Team Enacted
Stage 1: Low	X					
Stage 2: Moderate	X	X	X	X		
Stage 3: High	X	X	X	X	X	X
Stage 4: Critical	X	X	X	X	X	X

Potential Issues and The Members Of The IMS Team
(To enact the IMS Team, all of these must be Stage 3 OR Stage 4 Crises)

Issue	IMS team Members (titles)	IMS Team Members
Environmental issues • Low: Slips and falls, blocked emergency exit due to snow/ice • Moderate: Mold growth • High: Fire & Flood • Critical: Serious injury or death of resident or employee due to environmental factor	Incident Manager	
	Communication Officer	
	Liaison Officer	
	Safety/Health and Wellness Officer	
	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Chief	
	Finance Chief	
	Incident Manager	

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Issue	IMS team Members (titles)	IMS Team Members
Equipment issues (e.g. lift malfunction, toaster fires, etc.) • Low: Toaster • Moderate: malfunction lift with no injury • High: Fire • Critical: Asphyxiation due to side rails, lift failure, serious injury or loss of life of staff/resident	Communication Officer	
	Liaison Officer (representative from SGP)	
	Safety/Health and Wellness Officer	
	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Chief	
• **Infectious Disease** • • Low: Outbreak –Enteric/Respiratory • Moderate: Food poisoning • High: High incidence of antibiotic resistant cases • Critical: Pandemic	Incident Manager	
	Communication Officer	
	Liaison Officer	
	Safety/Health and Wellness Officer	
	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Chief (representative from SGP)	
Product Alert/Recall • Low: Product not used in homes but subject to general public alert • Moderate: Possible use of a product • High: Food product is a product used/sourced • Critical: Product is used in homes and has resulted in significant injury/death of staff/resident	Incident Manager	
	Communication Officer	
	Liaison Officer	
	Safety /Health and Wellness Officer	
	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Leader (representative from SGP)	
	Dietitian (to offer advice on what to replace the product with, if necessary)	
Abuse/Assault/Intruder • NO LOW OR MODERATE definition • Reports of same or reports of intruders, alleged theft	Incident Manager	
	Communication Officer	
	Liaison Officer	
	Safety/Health and Wellness Officer	

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Crisis Communications Process

Issue	IMS team Members (titles)	IMS Team Members
• Moderate – alleged only, investigation in play • High – actual	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Chief	
Strike/Potential Labour Unrest • Low: Excess sick calls • Moderate: Information picket lines • High: Work to rule • Critical: No report to work		
	HR Senior Lead	
	Human Resources Director	
	Executive Director(s) of impacted homes	
	RD(s) of impacted homes	
	Member of the Communications Department	
CRITICAL ONLY	Liaison Officer	
	Safety/Health and Wellness Officer	
	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Chief	
	Finance Chief	

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Disaster Box Contents

Disaster boxes must be reviewed and maintained annually and as used to ensure all required items are available and in proper working order. Any time an item from the disaster box is removed/used it must be replaced.

- Prepare disaster boxes in advance of an emergency situation.
- Label disaster boxes boldly, ensure they are easily transportable, store one in the designated location of the Emergency Operations Centre and at least one in a Nursing station.

Date of Review: _____

Include the items that apply to your home (not all items may be required):

Box 1 Location:	Box 2 Location:
☐ Foil blankets	☐
☐ ID bracelets, white tags or adhesive labels for name tags for employees, residents, volunteers and other agencies, along with markers	☐
☐ Pens, felt markers, and grease pencils	☐
☐ Flashlight(s)/separate batteries or wind-up flashlights (minimum of 2)	☐
☐ Adhesive-backed directional arrows	☐
☐ Clipboards	☐
☐ Notepads	☐
☐ 2 orange/neon safety vests	☐
☐ Roll of "Caution tape" to block off access (e.g., triage area)	☐
☐ 2 pairs of paramedic shears/scissors	☐
☐ 2 pairs of work gloves	☐
☐ 2 bottles hand sanitizer	☐
☐ Small first aid kit with pressure dressings	☐
☐ 1 box of surgical masks	☐
☐ 1 box of disposable medical gloves – large size	☐
☐ Battery Backups (marine battery for high-low beds, CPAP machines, etc.)	☐
☐ Labels, stickers, arm bands or vests in green, red, orange, blue, yellow and grey to identify IMS team members	☐
☐ Colored Stickers or Arm bands to identify home staff in the event of Code Orange	☐
☐ Resident photos and resident information (evacuation level, medications, contact info)	☐

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Hazard Identification and Risk Analysis (HIRA) Guide and Process

A Hazard Identification Risk Analysis (HIRA) is a systematic risk assessment tool that can be used to assess the risks of various hazards. This approach both satisfies accreditation requirements and allows for a systematic, targeted approach to emergency preparedness. The results of a risk assessment can be used to guide an annual or multi-year emergency management cycle.

In addition to identifying high-priority hazards, this proactive approach to emergency management can result in a more disaster-resilient environment.

Success in meeting this challenge can be found by answering the following questions:

· What hazards exist within or surrounding each site?

· How frequently do they occur?

· How severe can their impact be on the homes' staff, residents, infrastructure, finances, and reputation?

· Which hazards pose the overall greatest threat to the home/organization?

To address these questions, a comprehensive hazard identification and risk assessment (HIRA) is required.

RISK ASSESSMENT PROCEDURES

Step 1: Hazard Identification

The first step in this process is to identify all possible hazards – no matter how unlikely, provided a greater than zero chance – that might impact your home or its surrounding community.

The Risk Assessment Form will be used for this process, and the Executive Director will lead the process to determine the potential hazards. Once the team has identified the potential hazards at the home, select the threats or list them in the "Threat" column of the form. Use the list below the assessment form to help determine hazards for your home.

Step 2: Determine the Probability of the Risk

The second process is the Risk Assessment; determining the probability of a potential emergency occurring and the consequence of the emergency should it actually occur.

In the Probability column of the Risk Assessment Form, rate the likelihood of each emergency's occurrence. This is a subjective consideration. Use a simple scale of 1 to 5 with 1 as the lowest probability and 5 as the highest, more information about this scale is on the Risk Assessment Form. This number is then entered into the probability column.

Step 3: Determine the consequence of the risk

Once the probability is determined, the impact or consequence of the emergency is estimated, taking into consideration the potential human consequence (the probability of injuries or death), the potential property (damage, ability to quickly relocate) and the potential business impacts (business interruption, staff unable to report to work, etc.) The impact is based on a scale of 1 to 5 with 1 as the lowest impact/consequence and 5 as the highest; more information about this scale is on the Risk Assessment Form. This number is then entered into the consequence column.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

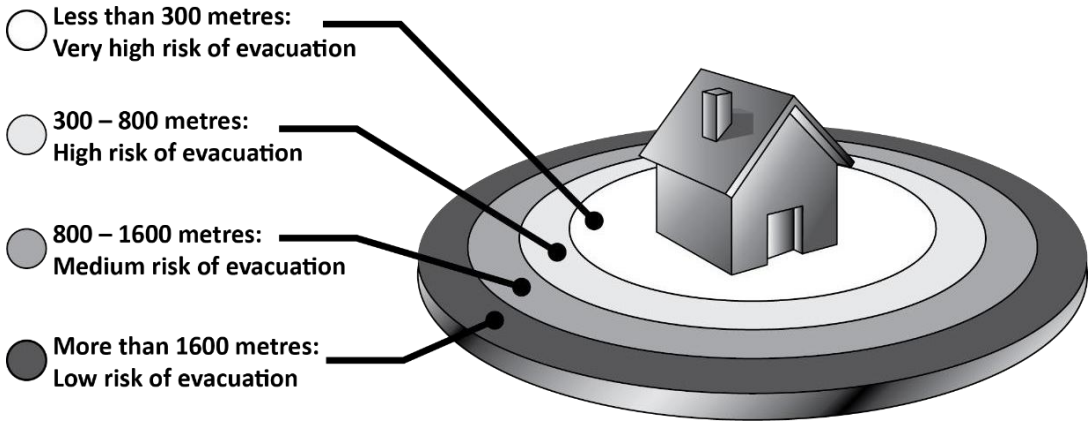
Hazard Identification and Risk Analysis (HIRA) Guide and Process

Distance can be used here to determine relative safety to identified hazards and therefore the impact they may have.

Note: *Type and volume of hazard, weather (e.g. wind, rain, temperature inversions), compounding factors (e.g. fire, synergistic chemicals) and protective barriers will all factor into determining a safe distance at the time of an emergency.*

Based on safe distances noted in the precautionary evacuation recommendations in Transport Canada's Emergency Response Guidebook
https://www.google.ca/#q=transport+canada+emergency+response+guidebook

To assess the potential emergency risk from high risk industry and transportation corridors, the following estimates would be reasonable:



For nuclear power plants, a 10 km distance is generally used as the "primary evacuation area". It should be noted, however, that there has never been an emergency at a nuclear generating station in Canada requiring the evacuation of a 10 km radius. An important part of the assessment is to work closely with operational staff on identifying what they perceive as their concerns at each location, along with an impartial evaluation by the Emergency Planning Team. Some key considerations:

1. Winter storm and freezing conditions in relation to loss of heat and a rapid cooling of the home.
2. Workplace violence has a far-reaching effect on staff if they do not feel safe within the workplace. The risks may be from residents, resident families, staff, staff family members (e.g. domestic violence), visitors or unassociated people who enter the home.
3. Fire is always a high priority as it presents life safety concerns if the fire is of a large enough nature.
4. Missing residents in homes is not uncommon. The longer a resident is missing the increased probability of serious injury, illness, or death.
5. Medical emergencies can occur at any time at any home.
6. Neighborhood risks, including violence, are a potential concern based on the location of home (e.g. proximity to a high school, college or university).
7. Epidemics/pandemics/group illness are potential concerns due to the impact such an incident would have on the work environment and the fact that Canada has encountered 3 significant events in the past 10 years.
8. Unlimited building access, non-existent or poor building security processes pose a potential risk.
9. A lack of communication can increase the level of other risks.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Reporting and accountability structure. Although this in itself is not a hazard, if both supervisory and care staff are not trained in the value and need for a strong and unbroken chain of command and accountability, people can be left at risk during an emergency.

LEVEL OF RISK MATRIX

Step 4: Determine the level of risk using the risk matrix and score the risks by priority

Once probability and consequence have been scored, you can use the risk matrix to assign a score which will help you prioritize the risks for mitigation. The risk matrix can be found on the Risk Assessment Form and the number and risk level are to be entered into the Priority column.

It should be noted that the level of risk is simply a planning tool, not a scientific determination of what will occur. The highest priority items are addressed first, followed by the medium risks and, where applicable, the low risk items. You will then develop home level plans to address the unique risks of your home.

MITIGATION PLANS

Step 5: Develop mitigation plans for your home's unique risks.

The purpose of this risk assessment is to identify mitigation and preparedness priorities based on the relative threat each hazard poses. This prioritized list should help to guide and support an annual cycle of emergency management activities. Prior to progressing, however, each hazard should be assessed for pre-existing risk management strategies already in place, such as Extendicare policies and procedures. In some cases, risk control measures may already be adequate. In others, residual risk may still require further efforts to be taken. Interviews with subject matter experts and review of existing emergency plans are an effective way to make this assessment.

Where it is deemed that new risk management strategies are required, it is recommended that actions be taken to reduce risk working from hazards of highest priority to lowest priority. Where possible, however, an all-hazards approach to mitigation and preparedness should be taken, where the relative risk of multiple hazards can be reduced by a single measure (for example, an extreme weather plan could cover tornados, hurricanes and severe storms).

There are two ways of decreasing risk: reducing the likelihood and reducing the consequences. Both likelihood and consequence reduction can be achieved through mitigation measures (such as redundancies in case of failure or built-in physical resistance to prevent damage). Consequences can further be reduced through preparedness measures that allow for a more efficient response (such as written plans to guide response, staff training to ensure response is executed effectively, and resource acquisition to support response).

There are three primary ways to limit risk from hazardous materials or situations – time, distance and protection.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Risk generally can be reduced with decreased exposure (time), increasing distance between the person and the hazard, and having a protective barrier between the hazard and people.

The protective barrier could be the type of construction of a building, personal protective equipment, etc. dependent on the hazard being addressed. An option used by emergency officials is called "sheltering in place" where the building envelope is used as a barrier to protect the occupants. For example, it may be safer to remain indoors than to venture outside into a potential hazardous environment.

In protecting the general population, the most common form of reducing risk is distance created by evacuating an area around the hazard. Under normal circumstances, the further you are from a hazard the safer you are.

Step 6: File your completed HIRA with your emergency plans.

The HIRA should be updated annually as part of a recurring cycle, with the results serving to assist in the identification of future priorities for emergency preparedness activities.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM1-P10.01
SECTION:	Emergency Planning and Management Program	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Hazard Identification and Risk Analysis (HIRA)	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	January 12, 2026

POLICY

Emergency Planning and Management Program

PROCEDURE

Executive Director/Designate will:

- ☐ Organize a meeting with an interdisciplinary team annually.
- ☐ Utilize the *Hazard Identification and Risk Analysis (HIRA) Guide and Process* tool and *Risk Assessment* tool to complete and document the steps below (if your regulatory body requires a specific HIRA document to be completed, you may complete the one provided instead).
- ☐ Identify the hazards to the home, based on common occurrences and risks within the community and within the home.
- ☐ Determine the probability of the risks occurring.
- ☐ Determine the consequence to the home if the risk were to occur.
- ☐ Determine the level of the risk using the risk matrix in the HIRA Guide and Process tool and score the risks by priority on the Risk Assessment tool.
- ☐ Develop mitigation plans for your home's risks in your home specific Emergency Response Plan.
- ☐ File your completed HIRA with your home specific Emergency Response Plan.

TOOLS

1. Hazard Identification and Risk Analysis (HIRA) Guide and Process
2. Risk Assessment

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Risk Assessment (HIRA)

Date: _____

Completed by: _____

_____

Complete this tool to identify your hazards, determine their probably, consequence and priority. Once you have completed this, create action plans and emergency plans to mitigate these hazards. Keep this Risk Assessment and the action plans and emergency plans in your home specific Emergency Response Plan.

See pages 4-10 for potential hazards/ definitions.

Probability

In the probability column, rate the likelihood of the identified threat occurring from 1-5.

1	2	3	4	5
Rare: Once every 10 years	**Unlikely:** Occurs every 6-10 years	**Moderate:** Occurs every 2-5 years	**Likely:** Occurs once per year	**Almost Certain:** Occurs more than once per year

Consequence

In the Consequence column, rate the consequence to the business if the threat were to occur from 1-5.

1	2	
Insignificant: No injuries, minor damage to corporate assets, no damage to corporate infrastructure, no disruption to delivery of services.	**Minor:** Minor injuries to staff or visitors that are non-life threatening (cuts and bruises) and that do not require acute medical care; minor damage to corporate assets and/or corporate infrastructure – home can still function and problem can be handled by maintenance staff; minor disruption to service delivery, such as short term power failure, critical operations can function fully, other operations can function with some accommodations.	
3	**4**	**5**
Moderate: Some serious injuries such as fractures or loss of consciousness that require acute medical care and removal from the workplace; higher number of minor injuries; more widespread damage to assets; longer disruption in service delivery.	**Major:** Some loss of life; higher number of serious injuries; more serious asset and infrastructure damage that compromises the integrity of a building and that requires an alternate work location for some staff which affects multiple departments.	**Catastrophic:** Widespread loss of life and serious injuries; serious and widespread damage to corporate property and destruction of infrastructure; financial devastation to the extent that the corporation may never recover – assets destroyed, unrecoverable loss of data, loss of key personnel.

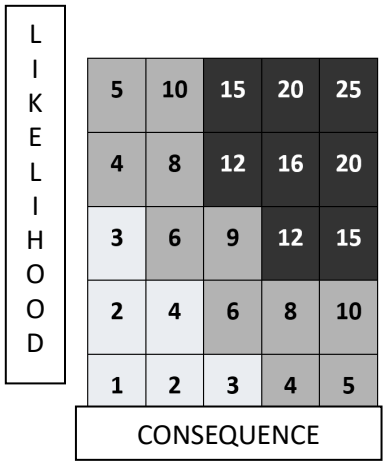
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

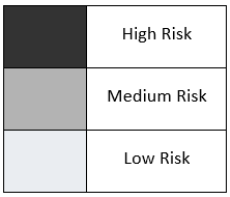
Extendicare

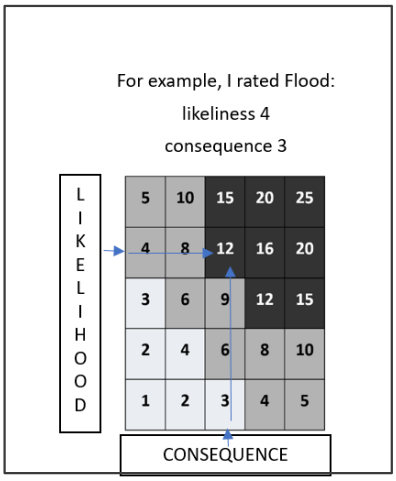
Risk Assessment (HIRA)

Priority

Once the probability and consequence have been determined, the priority is measured as a number as well as high, medium or low as per the chart below. On the vertical, "likelihood" side of the chart look at the number you selected for likelihood. On the horizontal, "consequence" side of the chart look at the number you selected for consequence and the space they meet at indicates the priority number.







The priority is 12, which is a high risk.

Threat	Probability	Consequence	Priority
☐Environmental			
☐ Tornado			
☐ Severe Electrical Storm			
☐ Flooding			
☐ Hail			
☐ Winter Storm			
☐ Freezing conditions (prolonged severe cold)			
☐ Site Contamination (infestation, chemicals)			
☐ Epidemic/Pandemic/Group illness			
☐ Tsunami			
☐ Earthquake			
☐ Landslide			
☐ Hurricane			
☐ Wildfires			
☐ Severe Heat (40°C+)			

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Risk Assessment (HIRA)

Threat	Probability	Consequence	Priority
Organized/Deliberate Disruption			
☐ Workplace violence (including threats)			
☐ Neighbourhood violence (shootings/stabbings etc.)			
☐ Sabotage (within the office)			
☐ Theft/Robbery			
☐ Arson			
☐ Community disruption (protests, riots etc.)			
Utilities and Services			
☐ External power failure			
☐ Loss of natural gas			
☐ Gas line rupture			
☐ Loss of water			
☐ Fuel shortage			
☐ Communications services breakdown			
☐ Sewage/drainage/waste removal			
☐ Air conditioning failure			
☐ Heating system failure			
Infrastructure			
☐ Building collapse/instability			
☐ Transportation incident involving staff/residents			
☐ On-site fire			
☐ Hazardous materials spill/release			
☐ Working alone			
Information Technology			
☐ Loss of life safety/security systems			
☐ Loss of nurse call system			
☐ Loss of telephone communication			
☐ Loss of internet communication			
Other Risks			
☐ Missing Resident			

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Risk Assessment (HIRA)

Threat	Probability	Consequence	Priority
☐ Tenant issues (in shared buildings)			
☐ Public transportation failure			
☐ Hazardous packages			
☐ Neighbourhood risk (hazardous industry etc.)			
☐ Transportation corridor (within 1.6 km)			
☐ Other:			
☐			
☐			
☐			
☐			
☐			

Potential Hazards/ Definitions

Environmental Threats	
Tornado	A tornado is defined as a rotating column of air ranging in width from a few yards to more than a mile and whirling at destructively high speeds, usually accompanied by a funnel-shaped downward extension of a cumulonimbus cloud. The consequences of a tornado may include fatalities, severe damage and loss of essential services. A number of critical infrastructures are at risk during a tornado including buildings, road, utilities and rail lines.
Severe Electrical Storm (Lightning And Thunderstorms)	Lightning is a large static discharge that develops most commonly within thunderstorms, where convection and gravitational forces combine with an ample supply of particles to generate differential electrostatic charges.
Flooding	An overflowing of water beyond its normal confines, especially over land. Flooding may occur as a result of heavy rainfall and, in spring, as a result of a sudden melting of ice and snow.
Hail/Freezing Rain	A form of precipitation that originates in convective clouds in the form of balls or irregular pieces of ice which come in different shapes and sizes. Hail is considered to have a diameter of 5 millimetres or more; smaller bits of ice are

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Environmental Threats	
	classified as ice pellets, snow pellets or graupel. Individual lumps are called hailstones.
Winter Storm	Violent snowstorms are typically called blizzards. Blizzards are generally defined by a period of six or more hours with winds above 40 km/h, with visibility reduced to below 1 km by blowing and drifting snow.
Freezing Conditions	Extreme cold is characterized by temperatures falling to -30°C or less. Severe freezing conditions may overwhelm the ability of a HVAC system to maintain a comfortable indoor environment.
Site Contamination (Infestation, Food, Water, Chemicals)	Contaminations of a site due to infestation of vermin and/or chemicals can pose a serious health risk. As such this type of hazard could create a home-wide shutdown of operations.
Epidemic/ Pandemic/ Group Illness	A widespread and/or severe epidemic, incident of contamination or other situation that presents a danger to, or otherwise negatively impacts, the general health and well-being of the human population. **Group Illness:** An illness that spreads through a group of people within a single home or group of people but does not cause a major impact on the greater community. **Epidemic:** Major incidents of human illness caused by the transmission of a specific disease. In a community or region, the occurrence of cases of an illness (or an outbreak) with a frequency clearly in excess of normal expectancy. **Pandemic:** An epidemic of major proportion involving multiple countries.
Tsunami	A very large oceanic wave or series of waves caused by earthquakes, underwater landslides, volcanic eruptions, or other major water disturbance. Tsunamis have impacted both the east and west coasts of Canada.
Earthquake	An earthquake is a sudden shaking or trembling of the surface of the earth. Earthquakes are caused by the release of built up stress in the earth's surface along fault lines or by the movement of magma in volcanic areas.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Risk Assessment (HIRA)

Environmental Threats	
Landslide	A landslide is a term that describes a wide range of ground movement including rock slides, deep failure of slopes and shallow debris flows. Landslides often occur due to gravitational pull on unstable slopes.
Hurricane	A violent cyclonic storm producing extremely powerful winds with speeds in excess of 120 KM/hour (32 m/sec) and torrential rains. Hurricanes are also capable of producing high waves and damaging storm surges that may spawn tornadoes. Hurricanes develop over warm water and lose their strength as they move inland. Coastal areas will receive significant damage from a hurricane while inland regions may only receive heavy rains, mass flooding and storm surges.
Avalanche	An avalanche is a rapid flow of snow down a slope that may be triggered by environmental or human activity. Typically occurs in mountainous terrain. Avalanches have the potential to carry large amounts of snow, ice, water, air, rocks and sediment over large distances. Avalanches occur because of stress of the snow pack. They are not random or spontaneous events.
Wild Fires	A wild fire is an uncontrolled fire that occurs in a countryside or wilderness area. A wild fire differs from other fires because of its size and the speed at which it can spread from its original source. Wild fires have the ability to change direction unexpectedly and to jump gaps such as roads, rivers, and fire breaks.
Severe Heat	Severe heat is a term describing days of excessive temperatures (40°C+) which may be accompanied by high humidity and may make it very difficult to work or perform daily functions. This level of heat may overwhelm the ability of HVAC systems to maintain a comfortable indoor environment.

Human Threats	
Workplace Violence (Including Bomb Threats)	Workplace violence can range from a basic disagreement that involves threats of violence or minor physical contact, up to and including an unprovoked attack that seriously injures or kills an employee or resident. At the extreme range, workplace violence can have a wide ranging effect on the operation of a home and the personal and mental health of the staff.
Neighbourhood Violence	Any type of violence can cause harm or abuse to an individual in the community. The primary concern is when the neighbourhood violence has a potential to affect

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Risk Assessment (HIRA)

Human Threats	
(Shootings/ Stabbings, Etc.)	persons at the home (e.g. person flees onto the home property). Higher risks may include close proximity to high schools, colleges, universities or night clubs.
Sabotage	Sabotage is an act of malicious damage that focuses on disabling, destroying or injuring the intended target. The consequences of such events are substantial and include widespread injuries/damages and the loss of basic services.
Theft/Robbery	Robbery is actually defined as theft with violence. Theft itself is defined as stealing; larceny.
Arson	Arson is defined as the fraudulent burning of property. It is a deliberate act of violence in which fire is the tool for assault. Arson is meant to destroy the intended target.
Community Disruptions (Protests, Riots, Etc.)	A public demonstration or gathering that results in a disruption of essential functions through rioting, looting, arson or other unlawful behaviour. Protests or parades may disrupt roadways blocking access to the home, and delaying Staff arrival or the delivery of supplies. Consequences of a civil disorder, including injuries and minor and localized damage, must be noted.
Labour Disruption	Labour disruptions are often the result of organized, legal job action and can affect internal staff as well as external contract staff or deliveries. Staff shortages may lead to reduced care for residents, reduced capacity to conduct regular operations, and loss to some areas or services may occur

Utilities And Services Threats	
Extreme Power Failure	Although an external power failure is a possibility, this type of event is more of a workplace disruption in relation to continuing with the daily operation of a home that does not have back-up power. An energy emergency occurring during the winter months can be more severe and could result in a number of consequences including fatalities, severe damage and the loss of essential services.
Loss Of Natural Gas	This is an event in which the natural gas supply is somehow disrupted and/or cut off to the home. Depending on the time of the year and the home's dependence on natural gas, this type of occurrence could create a disruption of

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Utilities And Services Threats	
	kitchen operations and create a health concern due to lack of heat to the home's occupants.
Gas Line Rupture	An event that poses a threat to public safety from the uncontrolled release of oil and/or natural gas from: • a pipeline • natural gas meter and • storage facilities and/or distribution systems.
Loss Of Water	The consequences that result from a water disruption are serious and include a loss of drinking water, impact on food preparation, inability to flush toilets or provide baths. A serious impact to health could be expected if the water emergency involves contamination.
Fuel Shortage	Fuel shortages can be short lived or long term. It is the length of the shortage that has a direct relation to the consequences to Extendicare. If an organization is dependent on fuel for its vehicular fleet then this type of shortage could create a total shutdown of operations.
Communications Service Breakdown	Communications breakdown can range from a loss of internet communications to the loss of telephones. If online resident care documentation is routinely used, the home should be prepared to utilize paper forms.
Sewage/ Drainage/ Waste Removal	A failure of this type can pose more of a health threat to the staff/residents than a concern for the home. However, sewage and waste backup can create widespread property damage thus creating a serious disruption in business activities.
Air Conditioning Failure	This type of failure within a home can create an untenable environment for the staff/residents, which could result in health concerns relating to high internal building temperatures.
Heating System Failure	This type of failure within a building can create an untenable environment for the staff and residents, which could result in health concerns relating to cold internal temperatures within the building.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Risk Assessment (HIRA)

Infrastructure Threats	
Building Collapse/ Instability	Building collapse can have a catastrophic effect on the staff, residents and the home structure itself. The level of damage and consequence is directly related to the level of collapse and/or instability of the structure. As such, the home and its staff could experience a minor delay in operations with no injuries to the staff, up to and including total failure of the structure with possible loss of life.
On-Site Fire	The consequences involved with this type of situation are high, resulting in the possibility of severe damage to the facility and the loss of essential services.
Hazardous Materials/ Spills/Releases	These types of events are quite difficult to control and impossible to contain since the chemicals tend to follow the direction of the wind. The consequences from such an emergency can be substantial and can include widespread injuries/damage and the loss of essential services. There is also a great risk for negative environmental impact as well as damage to critical infrastructures.

Information Technology Threats	
Loss Of Fire/ Security Systems	The loss of a home's fire and security systems is a major concern relating to the health and safety of a home and its occupants. Without an early warning system, the loss to life and property can be high and a shutdown of operations could occur.
Loss Of Communication	The loss of communication at a home is a major concern to the health and safety of the home and its occupants as well as the flow of operations.
Loss Of Computer Systems	Loss of computer systems due to a virus or cyber attach is becoming a major concern that can impact the homes ability to access care plans, medication administration records, and administrative information. Cyber attacks may include intentional hacking of the system network to obtain or modify sensitive information or may lead to loss of access of critical information, altered function of some systems and medical devices, and damaged reputation in the event of leaked health information.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Risk Assessment (HIRA)

Other Risks	
Tenant Issues (In Shared Buildings)	Tenant issues can be considered a high risk concern should the site be affected by any inherent dangerous conditions of another tenant in the same building. These concerns can go beyond simple annoyance.
Hazardous Packages	Packages that contain hazardous materials including explosive, flammable, combustible, toxic, or radioactive materials.
Neighbourhood Risk (Hazardous Industry, Etc.)	Neighbourhood risks can encompass a wide variety of situations which range from production of hazardous items to high risk operations at buildings within close proximity to the home.
Transportation Corridor	Being within 1.6 km of a high speed highway (80km/h or higher), rail line or seaway where dangerous goods may be transported.
External Incident	An external incident is any event in which resources such as personnel, equipment and space may be overwhelmed by an influx of residents or incoming individuals looking for refuge. This may be triggered by any number of external hazards, including, but not limited to: fires, damage to another LTC and extreme weather.
Other	This heading is generic in nature and allows for items not covered by the previously noted threats. The threat list on the Risk Assessment form is meant to be customized for each home based on their determination of the risks/threats facing their location.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM1-P10.02
SECTION:	Emergency Planning and Management Program	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Emergency Operations Centre	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	January 12, 2026

POLICY

Emergency Planning and Management Program

PROCEDURE

Executive Director/Designate, prior to an emergency will:

- ☐ Designate an Emergency Operations Centre (EOC) in a central location in the home for meetings and to coordinate a response during an emergency.
- ☐ Utilize the EOC Equipment Checklist to assist in selecting a location and setting up the room with the required equipment and supplies.
- ☐ Designate an alternate location outside of the home in the event of a total evacuation.
- ☐ Store one disaster box in the EOC.

Incident Manager, during an emergency will:

- ☐ Conduct meetings with the IMS Team in the EOC, daily if the emergency continues over multiple days.
- ☐ Set up required space for IMS leads in the EOC for jobs to be completed.
- ☐ Document all discussion, decisions and actions using the Situation Report and Incident Tracking Sheet located in the Home Specific Emergency Response Plan.

TOOLS

1. Emergency Operations Centre Equipment Checklist

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Emergency Operations Centre
Equipment Checklist

Date: _____ Name: _____

Mandatory Equipment

- ❑ Telephone communication
- ❑ Emergency power supply (battery backup)/where applicable
- ❑ Disaster box
- ❑ Home Specific Emergency Response Plan
- ❑ Notepads and pens

Optional Equipment

- ❑ Computer with email/internet access and/or smart phone
- ❑ Computerized resident charts (e.g. Point Click Care)
- ❑ Whiteboard/flip charts
- ❑ Computer printer/photocopier
- ❑ External communications will be centralized at the EOC. The intercom, nursing phones or home walkie-talkies (if available) will be used for internal communication. If telephone communications are inoperative, designate employee(s) as a runner.

Home Information:

- Primary EOC location:_____
- Telephone #/ext.:_____
- Alternate EOC location (outside of home):_____
- Telephone #/ext.:_____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc.
All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM1-P10.03
SECTION:	Emergency Planning and Management Program	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Post Emergency Response	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	January 12, 2026

POLICY

Emergency Planning and Management Program

PROCEDURE

Executive Director/Designate and Incident Manager will:

- ☐ Host an analysis and debrief of the emergency with everyone involved in the emergency using the Post-Emergency Analysis and Debrief report to guide discussion and ensure thorough documentation.
- ☐ Revise the emergency response plan as necessary based on findings, contact the corporate risk team if required.
- ☐ Complete the Post-Emergency Checklist and send it to the Regional Director of Operations.
- ☐ Save the completed debrief form.

TOOLS

1. Post-Emergency Checklist
2. Post-Emergency Analysis and Debrief

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc.
All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Post-Emergency Checklist

Date: Completed by:

Incident: _____

Thank You Checklist	Yes	No	Comments:
Residents that have been inconvenienced	❑	❑	
Staff that helped	❑	❑	
Volunteers	❑	❑	
Families	❑	❑	
Media	❑	❑	
Government agencies	❑	❑	
Receiving facilities/homes	❑	❑	
Ambulance	❑	❑	
Transportation	❑	❑	
other	❑	❑	
Inventory Checklist	**Yes**	**No**	
Take linen inventory to determine loss/costs	❑	❑	
Take dietary inventory to determine loss /costs	❑	❑	
Take equipment inventory to determine loss or repairs	❑	❑	
Take inventory of nursing supplies to determine loss/costs	❑	❑	
other	❑	❑	
Financial Checklist	**Yes**	**No**	
Establish additional Staffing costs	❑	❑	
Reimburse staff for expenses (traveling etc.)	❑	❑	
Establish total cost of emergency	❑	❑	
other	❑	❑	
	Yes	**No**	
Write formal report and submit to Regional Director/Operations	❑	❑	

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Post Emergency Analysis and Debrief

Include staff, residents, visitors, families, students, volunteers and community partners involved in the emergency.

Home:_____ **Date:**_____

Please save this report in the Emergency Debrief folder in the Quality and Operations Team. **Location of Emergency:** _____ **Time of Emergency:**_____ **Time of All Clear:**_____ **Time of Debrief:**_____	❑ Red ❑ Green ❑ Yellow ❑ White ❑ Black ❑ Brown ❑ Grey ❑ Orange ❑ Purple ❑ Blue ❑ Silver ❑ Extreme Weather Event ❑ No Code Called ❑ Other Emergency Event	**Nature of event:** ❑ Real ❑ Table Top Exercise ❑ Drill

Section A

Section A can be completed by the Executive Director or Incident Manager and then shared with all others involved.

Provide a description of the event (attach any related documents).

_____

_____

_____

_____

_____

Identify community partners that responded or participated:

_____

_____

If a real event only: Identify CIS number/ health authority report number if the incident required reporting to the health authority: -

_____

Were individuals assigned any specific tasks?	**Yes**	**No**	**N/A**
Incident Manager:			
•	❑	❑	❑
Executive Director/Designate:			
•	❑	❑	❑
Receptionist/Designate:			
•	❑	❑	❑
Registered Nurse			
•	❑	❑	❑

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Post Emergency Analysis and Debrief

Other Nursing Staff			
•	❑	❑	❑
Housekeeping Staff			
•	❑	❑	❑
Maintenance Staff			
•	❑	❑	❑
Dietary Staff			
•	❑	❑	❑
Activities			
•	❑	❑	❑
Other Service Providers (Beautician, PT, OT, Podiatrist)			
•	❑	❑	❑
Residents and Visitors			
•	❑	❑	❑

General Procedures	**Yes**	**No**	**N/A**
1. How quickly was the location of the emergency identified? _____minutes			
2. Were appropriate steps taken to respond? (If no, please explain in detail on next page)	❑	❑	❑
3. If a code was called, was code and location heard clearly on the P.A. system?	❑	❑	❑
For Code Red			
4. Did all fire/smoke doors close automatically?	❑	❑	❑
5. Did all fire bells ring?	❑	❑	❑
6. If a drill, was the Fire Department notified before and after the drill?	❑	❑	❑
7. Did the Fire Department monitoring service receive the signal?	❑	❑	❑
8. Was the evacuation done correctly as per the Emergency Response Plan?	❑	❑	❑

Were The Following Tasks Completed During The Emergency?	**YES**	**NO**	**N/A**
Command Centre was set up and IMS was implemented.	❑	❑	❑
Checklists for the corresponding emergencies were utilized and easily found.	❑	❑	❑
Activities were logged immediately and during the event in the corresponding checklists.	❑	❑	❑
Huddles/debriefs/meetings were conducted as needed.	❑	❑	❑

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Post Emergency Analysis and Debrief

The emergency was escalated to the next appropriate person in a timely manner.	❑	❑	❑
Complete Critical Incident Report if applicable	❑	❑	❑

Section B- Analysis

Must be completed with everyone involved in the incident, utilized to foster a discussion and make changes to emergency plans as needed.

If a real event only: What was the root cause of the event?

If a real event only: What steps can be taken to prevent it from happening again or lessen the chances of it happening again?

What went well with the emergency response?

What are some opportunities for improvement for staff/residents?

What are some opportunities for improvement for policy/procedures (review the procedures against the actions taken and their effectiveness)?

What did you learn from the experience?

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Post Emergency Analysis and Debrief

Did anything not go as planned?

Were issues identified pertaining to any other emergency plans?

Are updates required to other emergency plans based on this analysis?

Other notes:

Other	YES	N/A
Canvas staff, residents and visitors to determine if support may be needed (through EAP for staff)	❑	❑
Save the completed Debrief Report in the Home Status Report Emergency Debriefs folder.	❑	❑
Update home specific emergency plans with findings from this analysis.	❑	❑
Contact the corporate risk team (RiskManagement@extendicare.com) with recommended changes to policy and procedures from this analysis.	❑	❑

Signature of person completing this report

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Post Emergency Analysis and Debrief

Please print your name and department below
(include residents, visitors, families, students, volunteers and community partners)

Name	Department

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

SECTION 2- EMERGENCY RESPONSE CODES

Extendicare

POLICY			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Emergency Response Codes	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

The emergency response codes as set out in the procedures of this policy will be used to announce and respond to emergencies as they occur and to ensure business continuity.

STANDARD

- ☐ Leadership and staff will test the emergency codes using drills or table-top exercises annually in the identified Emergency Code month.
- ☐ Leadership and staff will conduct a debrief and analysis after every drill, table-top, and actual event to discuss learnings and share them with riskmanagement@extendicare.com to inform possible policy/procedure updates.
- ☐ All staff will be familiar with their responsibilities during an emergency.
- ☐ All staff, residents and families will have an orientation to the emergency response codes upon hire/ move in.
- ☐ All staff will be educated annually on the emergency codes and their response.
- ☐ Staff will use the appropriate Emergency Code Job Action Checklists as a guide for their assigned functions during the emergency situation.
- ☐ Emergency response code posters will be posted in the home.

PROCEDURE

1. Code Red - Fire
2. Code Green – Evacuation
3. Code Yellow – Missing Resident
4. Code Black – Bomb Threat
5. Code Orange – External Disaster
6. Natural Disasters and Extreme Weather Events
7. Code Grey – Air Exclusion
8. Code Grey – Essential Services
9. Code Grey – Building Flood
10. Code Grey – Water Supply
11. Code Grey – Carbon Monoxide
12. Code Brown - Hazardous/Chemical Spill
13. Code Silver – Active Assailant
14. Code Purple – Hostage Situation
15. Code White – Violent Situation
16. Code Blue – Medical Emergency
17. Secure Home

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability.
This document has been prepared by and remains at all times property of Extendicare (Canada) Inc.
All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

TOOLS

1. Emergency Color Codes Poster

REFERENCES

Government of Canada. (n.d.). Emergency Management Organizations. https://www.getprepared.gc.ca/cnt/rsrcs/mrgnc-mgmt-rgnztns-en.aspx

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability.
This document has been prepared by and remains at all times property of Extendicare (Canada) Inc.
All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Emergency preparedness colour codes

Other emergencies:

Secure home	
Pandemic management	
Natural disasters and extreme weather events	

Helping people live better

Red Fire	
Blue Medical Emergency	
White Violent Situation	
Orange External Disaster	
Black Bomb Threat	
Green Evacuation	
Yellow Missing Resident	
Grey Loss of Essential Services	
Brown Hazardous/Chemical Spill	
Silver Active Assailant	
Purple Hostage Situation	

This page is intentionally left blank

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.01
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Red- Fire	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Respond

- ☐ Code Red is announced when a fire emergency is occurring; this may be the smelling or sight of smoke, or identification of a fire.
- ☐ Upon discovery of fire or smoke, initiate the R.E.A.C.T. sequence:
  a) Remove people from immediate danger (evacuate);
  b) Ensure room doors and windows are closed;
  c) Activate fire alarm pull station closest to the site of the fire. Activate the second stage of the fire alarm system if evacuation is necessary.
  d) Call 9-1-1 and give home name and address, exact location of the fire, including floor, home area, and room number; and
  e) Try to confine (contain/extinguish) fire, if possible, without undue risk using the nearest fire extinguisher).
  Note: If smoke is coming under the door, place wet towels, sheets, blankets, pillows, or other confining materials at the bottom of the closed door to the room with the fire, to restrict rapid transfer of smoke to the rest of the area unless otherwise directed by your local fire department.
- ☐ Refer to your Home's Fire Safety Plan (FSP) for emergency procedures based on your role within the home.

Recover

Upon the "All Clear", the Executive Director/Designate will:

- ☐ Ensure all incident documentation is completed, including the Post Emergency Analysis and Debrief.
- ☐ Determine if the provincial health authority should be notified.
- ☐ Notify Occupational Health and Safety if any staff suffers a critical injury.
- ☐ Notify Regional Director of Operations.
- ☐ Arrange for staff support as needed (EAP, etc.).

TOOLS

1. Code Red Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE RED

Emergency response

What does it mean?

Code Red is the designated phrase used to alert staff to smoke and/or fire and to initiative an appropriate response in the case of a fire, fire alarm or smell of smoke.

What do I do?

Initiate the R.E.A.C.T sequence:

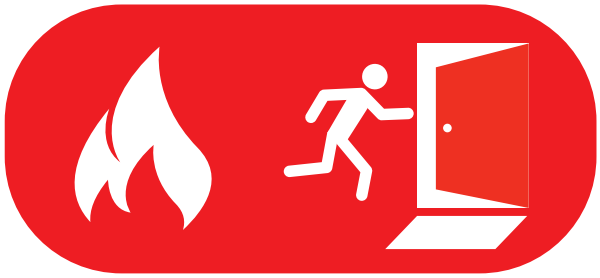
Remove persons from immediate danger if possible (evacuate)

Ensure doors and windows are closed to confine fire and smoke

Activate the fire alarm system/ use nearest pull station

Call the Fire Department - **Dial 9-1-1**

Try to contain (contain/extinguish) fire or concentrate on further evacuation



Announce 3 times, "**Code Red + Location of fire**"

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Code Red and Fire Safety Plan
- Review the Code Red policy and Fire Safety Plan for procedures that describes your role if a fire occurs

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.02
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Green- Evacuation	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

- ☐ Code Green is announced when an emergency occurs that requires the evacuation of part of the home or the entire home.
- ☐ The Incident Manager or the fire department determines if an evacuation is required. The Code Green is then initiated by announcing a Code Green and manually activating the second stage of the fire alarm at the pull station using the fire key.
- ☐ All Staff must follow the procedures for evacuation as per their designated Job Action checklists and follow direction from the Incident Manager.
- ☐ The Incident Manager will determine and announce the type of evacuation to occur:
    - Horizontal Evacuation
        - Move residents from one area of the floor to another area of the same floor behind fire barrier doors.
    - Vertical Evacuation
        - Move residents from one floor towards the ground floor.
        - In a partial evacuation, a horizontal evacuation is preferred to avoid moving residents through stairways. However, depending on the emergency, there may be no choice (e.g., when the fire is between the resident and the closest fire doors and the only exit is through the stairway).
    - Total Evacuation
        - Total evacuation outside the building and occurs only in an extreme emergency.
- ☐ The evacuation may begin as a partial evacuation (horizontal or vertical) and later become a total evacuation.

TOOLS

1. Code Green - Incident Manager Job Action Checklist
2. Code Green - Nurses and Managers/Supervisors Job Action Checklist
3. Code Green - All Staff Job Action Checklist
4. Code Green – Executive Director/Designate Job Action Checklist
5. Code Green – Colour Code Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home-specific.*

Respond

Record the time action was initiated *(note on the line below):*

_____ Determine the stage of the "Code Green", stage 1, 2 or 3:

In fire emergencies, the initial response is a partial evacuation of people from the area of the fire/smoke to an area beyond the fire doors/fire separation (Refer to Fire Safety Plan). In some homes, a two-stage bell alarm is in place. The first alarm means that a partial evacuation is required; if the second series of bells alarm, a full evacuation is required. Depending on the situation, you may begin was a partial evacuation and progress to a full evacuation as needed.

Stage 1, Fire Zone- Partial horizontal evacuation, moving from one area of the floor to another area of the same floor behind fire barrier doors.

Stage 2, Wing or Floor- Partial evacuation of a larger area, such as an entire unit or multiple units. This could continue to be a horizontal evacuation or a vertical evacuation, moving from one floor towards the ground floor (do not use elevators unless authorized by fire department).

Stage 3, Total- Full evacuation of the building to an external refuge location.

If the emergency evacuation starts in stage 2 or 3, skip to the area of the checklist that indicates that stage of evacuation.

_____ Contact the Executive Director / Designate.

STAGE 1, FIRE ZONE- Partial horizontal evacuation behind 1 set of fire doors

_____ If you have decided on a partial evacuation beyond one set of fire doors, and this is a fire situation, using the fire panel key, activate Stage 1 Fire Alarm. If the evacuation is not due to a fire emergency, continue with the below steps, but do not activate the fire alarm.

_____ Announce or delegate a staff member to announce,

"Code Green (*location*)"

"Code Green (*location*)"

"Code Green (*location*)"

The location is the area to evacuate out of, for example, floor 2 room 168.

_____ Send a staff member to the fire control panels to repeat the announcement over the fire alarm paging system, if applicable.

_____ Call or designate a staff member to call 9-1-1 stating the type and location of the emergency if required (e.g., a fire or bomb threat).

_____ Follow the Evacuation Procedures below.

_____ Assign staff/volunteers to care for evacuees and ensure they stay safely in the evacuation area.

_____ Track and maintain records of individuals requiring evacuation.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green Incident Manager Job Action Checklist

_____ Track and maintain records of where evacuated residents have been relocated to (another area of the home or outside evacuation site), keep a list of resident names with their evacuation location next to their name.

_____ Conduct a resident and staff count to ensure everyone is accounted for.

_____ Notify the Fire Department (9-1-1) or appropriate agency of persons not accounted for and their last known location.

_____ Notify the regulatory body/ Regional Health Authority and other government reporting authorities (e.g., Ministry of Labour) if required.

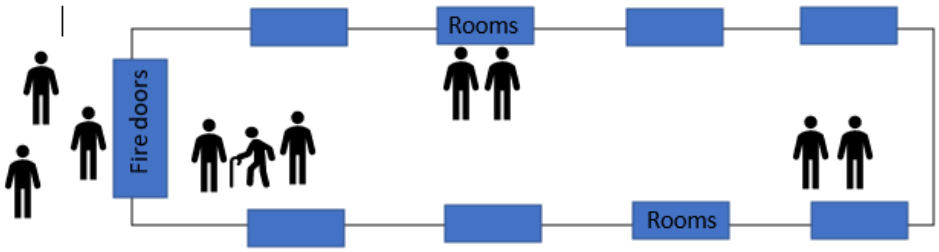
_____ Update the Executive Director/Designate.

_____ If evacuation is due to fire, assess the fire/smoke spread and determine if a larger area is required to be evacuated. Consideration will be given to evacuation areas immediately adjacent, immediately above and immediately below the fire. If the evacuation is due to a structural concern, refer to emergency services to determine the level of evacuation and areas required.

Note: *When there is no immediate danger and time to wait for emergency services to arrive, the decision to evacuate and the extent of the evacuation will be made along with emergency services officials.*

Evacuation Procedures:

1. Designate all staff to either be on the outer side of the fire doors taking received residents, or to go room to room evacuating residents. Where possible, try to have the same number of people receiving residents at the fire door as teams evacuating residents from rooms (for example, you have 9 staff members, 3 will receive residents at the fire doors and 6 will be broken into teams to evacuate rooms).
2. Organize all staff who are going room to room into teams of two.
3. Teams enter rooms and bring resident(s) to the closest fire doors.
4. Staff waiting on the other side of fire doors take the residents to safety.
5. After a team has confirmed there are no residents in a room, they close the door and flag the room as empty.
6. Steps 1-3 continue until all the residents in the affected area have been evacuated.



Order of Evacuation:

1. Ambulatory residents; residents who can walk with little assistance.
2. Residents who use wheelchairs.
3. Residents who are bedridden; 2 staff required to move, sometimes can bring the bed with them, other times may have to use demonstrated lifts and carries to place on a sheet or blanket and pulled across the floor.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green Incident Manager Job Action Checklist

4. Uncooperative residents; if a resident is refusing to leave or being difficult, move on to the next resident and come back for them at the end.

If the evacuation is due to an emergency/ risk in a specific room:

1. When evacuating, remove resident(s) from the room of the emergency. Close and tag the door to inform of empty room.
2. Next, remove resident(s) from the rooms beside and across the hall from the room of the emergency. Close and tag the door to inform of empty room.
3. Remove all remaining resident(s) from the area of the emergency up to the fire doors.
4. Ensure all rooms in the area have been searched and doors have been tagged to inform of the empty room.

STAGE 2, WING OR FLOOR- Partial horizontal or vertical evacuation of an entire unit or multiple areas of the home

_____ Announce or delegate a staff member to announce,
"Code Green (*location*)"
"Code Green (*location*)"
"Code Green (*location*)"
The location is the area to evacuate out of and may include a specific area, a wing or a floor.

_____ Send a staff member to the fire control panels to repeat the announcement over the fire alarm paging system, if applicable.

_____ Follow evacuation procedures above.

_____ If required, initiate the staff call-back list starting with the Executive Director/Designate.

_____ Set up the Emergency Operations Centre and initiate the Incident Management System, direct the activities of all personnel.

_____ Assign staff/volunteers to care for evacuees and ensure they stay safely in the evacuation area.

_____ Track and maintain records of individuals requiring evacuation.

_____ If in a pandemic or outbreak, consider altering assembly areas or designate multiple assembly places that have enough space to allow for physical/social distancing requirements where possible.

_____ If in a pandemic, cohort residents in evacuation area where possible.

_____ Track and maintain records of where evacuated residents have been relocated to (another area of the home or outside evacuation site), keep a list of resident names with their evacuation location next to their name.

_____ Conduct a resident and staff count to ensure everyone is accounted for.

_____ If residents are being evacuated to a different facility location, transport residents´ charts to their relocation sites, including paper and hardware/software applications.

_____ If residents are being evacuated to a different facility location, assign a staff member to place an identification lanyard on each resident.

_____ It is important to recognize that some residents may have experienced past trauma or displacement, and the process of leaving their home could trigger distressing memories or emotions. To support their well-being, ensure that compassionate communication and additional emotional or practical supports are available as needed.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green Incident Manager Job Action Checklist

_____ Attain staff schedules and volunteer logs to assist with safety accountability.

_____ Notify the Fire Department (9-1-1) or appropriate agency of persons not accounted for and their last known location.

_____ Notify/update the Regulatory body/Regional Health Authority and other government reporting authorities (e.g., Ministry of Labour) if some residents are being evacuated to a different facility location.

_____ Notify resident families of new location of applicable residents.

_____ Update the Executive Director/Designate.

STAGE 3, TOTAL- Full Evacuation

_____ Announce or delegate a staff member to announce,
"Code Green Entire Home"
"Code Green Entire Home"
"Code Green Entire Home"

_____ Send an employee to the fire control panels to repeat the announcement over the fire alarm paging system, if applicable.

_____ If a fire situation, using the fire panel key, activate Stage 2 Fire Alarm.

_____ Follow evacuation procedures above.

_____ Evacuate residents into the parking lot to await transportation.

_____ It is important to recognize that some residents may have experienced past trauma or displacement, and the process of leaving their home could trigger distressing memories or emotions. To support their well-being, ensure that compassionate communication and additional emotional or practical supports are available as needed.

_____ Assign a staff member to place an identification lanyard on each resident.

_____ Coordinate the transportation of residents to evacuation site as per home specific transportation plan (options include EMS, home vehicles, public and private transportation and resident families).

_____ Track and maintain records of where evacuated residents have been relocated to, keep a list of resident names with their evacuation location next to their name.

_____ Conduct a resident and staff count to ensure everyone is accounted for.

_____ Notify resident families of new location of residents.

_____ Transport residents´ charts to their relocation sites, including paper and hardware/software applications.

_____ Ensure the disaster box and Emergency Response Plan are brought to the area of refuge.

_____ Transfer staff schedules and visitor / volunteer logs to the emergency operations centre to assist with accountability of all staff.

_____ Notify the Fire Department (9-1-1) or appropriate agency of persons not accounted for and their last known location.

_____

_____ If in a pandemic or outbreak situation, consider altering assembly areas or designate multiple assembly places that have enough space to allow for physical/social distancing requirements where possible.

_____ If in a pandemic, cohort residents in evacuation area where possible.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green Incident Manager Job Action Checklist

_____ Provide for the continuing care of the residents.

_____ Establish a triage area in area of refuge to care for residents/persons in medical distress or suffering injuries.

_____ Establish a meeting of the senior IMS Team.

_____ Appoint a Liaison Leader to maintain communications with Emergency Services.

_____ Receive communication from the emergency services and participate in assessing the situation.

_____ Appoint a Safety Leader to monitor the safety of all personnel in the building other than emergency service personnel.

_____ Appoint a Public Information Leader who will contact Corporate Communications for media press release.

_____ Establish other IMS Team functions as necessary.

_____ Receive communications from and participate in assessing the situation with Emergency Services.

_____ Set up a Family Information Support Centre.

_____ Notify regulatory authorities, consider provincially specific Public Health services, regional authorities, etc.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

Resident Relocation Area

If residents are being relocated within the home or to another location, consider the following:

_____ Resident equipment such as beds, lifts, etc. must be safely set up.

_____ Resident privacy must be maintained, privacy curtains can be used.

_____ Resident proximity to washrooms.

_____ Resident call bell system must be set up or extra staff called in to complete Q15 minute resident checks.

_____ If evacuating to another facility such as a community center, IPAC practices and cleaning schedule must be determined.

_____ If evacuating to another facility such as a community centre, food safety procedures must be determined in consultation with the regional Public Health.

_____ Set up safe and locked location for medication storage and administration and notify pharmacy of location and medication needs.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Green Incident Manager Job Action Checklist

Recover

All Clear Procedures

Returning to the evacuated area

_____ Home must be inspected and approved for resident re-occupancy by appropriate individuals or authorities

- ❑ Air quality after gas leaks, smoke, fumes
- ❑ Safety of drinking water
- ❑ Physical building in good repair, no structural concerns

_____ If it was a partial evacuation and you are returning residents back to their home area, announce or delegate a staff member to announce:

"Code Green ALL CLEAR"

"Code Green ALL CLEAR"

"Code Green ALL CLEAR"

_____ Notify appropriate government and regional authorities about the return as required.

_____ Check all operational equipment before occupancy.

_____ Designate a central control area for returning residents, staff, and equipment.

_____ If needed, arrange for a meal or snack for returning residents.

_____ Review list of residents who will be returning and prepare schedule for return.

_____ Contact staff regarding scheduling for re-admission.

_____ Notify advisory and attending physicians of return of date and time.

_____ Notify families about the time and date of return.

Note: Schedule re-admission of residents who have been with families last.

_____ Double-check and identify residents as they disembark from various means of transportation.

_____ Assess and document resident status upon return to the home.

_____ Notify Corporate Communications for an updated media statement.

_____ Investigate missing items immediately.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved in practice or policy/ procedure.

_____ Replenish used Job Action Checklists in Home Specific Emergency Plan binder.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Green Nurses and Managers/ Supervisors
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Provide direction and guidance to staff participating in the evacuation, refer to evacuation procedures below.

_____ Take direction from and report to the Incident Manager or other Incident Management System leaders.

_____ When evacuating externally, remove emergency disaster boxes from the building and bring them.

_____ Identify evacuees with name badges, wristbands, or other type of identification.

_____ Maintain a head count of residents and staff, keeping the Incident Manager informed.

_____ Remove resident charts if time and situation permit.

_____ Track the destinations of residents.

_____ Provide for the continuing care of residents.

_____ If the Code Green is isolated to another wing, ensure a staff member remains in your assigned area to provide resident care and send all other staff to assist with the Code Green.

_____ Begin evacuation using the procedures below, as per the stage announced by the Incident Manager:

Stage 1, Fire Zone- Partial horizontal evacuation, moving from one area of the floor to another area of the same floor behind fire barrier doors.

Stage 2, Wing or Floor- Partial evacuation of a larger area, such as an entire unit or multiple units. This could continue to be a horizontal evacuation or a vertical evacuation, moving from one floor towards the ground floor (do not use elevators unless authorized by fire department).

Stage 3, Total- Full evacuation of the building to an external refuge location.

_____ It is important to recognize that some residents may have experienced past trauma or displacement, and the process of leaving their home could trigger distressing memories or emotions. To support their well-being, ensure that compassionate communication and additional emotional or practical supports are available as needed.

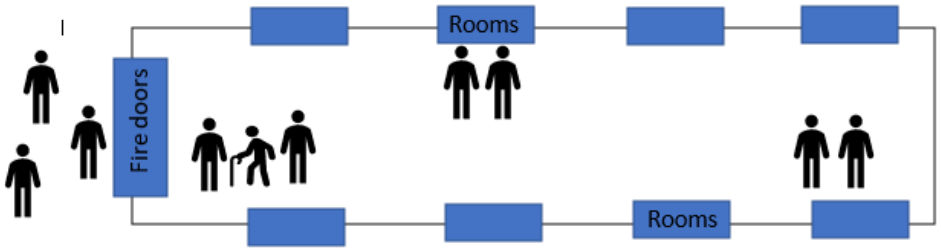
EVACUATION PROCEDURES

1. Staff members will be designated to be on the outer side of the fire doors taking received residents, or to go room to room evacuating residents. Try to have the same number of people receiving residents at the fire door as teams evacuating residents from rooms (for example, you have 9 staff members, 3 will receive residents at the fire doors and 6 will be broken into teams to evacuate rooms).

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green Nurses and Managers/ Supervisors
Job Action Checklist

2. All staff who are going room to room must be in teams of two. Teams enter rooms and bring resident(s) to the closest fire doors.
3. Staff waiting on the other side of fire doors take the residents to safety.
4. After a team has confirmed there are no residents in a room, they close the door and flag the room as empty.
5. Steps 1-3 continue until all the residents in the affected area have been evacuated.



Order of Evacuation

1. Ambulatory residents; residents who can walk with little assistance.
2. Residents who use wheelchairs.
3. Residents who are bedridden; 2 staff required to move, sometimes can bring the bed with them, other times may have to use demonstrated lifts and carries to place on a sheet or blanket and pulled across the floor.
4. Uncooperative residents; if a resident is refusing to leave or being difficult, move on to the next resident and come back for them at the end.

If the evacuation is due to an emergency/ risk in a specific room:

1. When evacuating, remove resident(s) from the room of the emergency. Close and tag the door to inform of empty room.
2. Next, remove resident(s) from the rooms beside and across the hall from the room of the emergency. Close and tag the door to inform of empty room.
3. Remove all remaining resident(s) from the area of the emergency up to the fire doors.
4. Ensure all rooms in the area have been searched and doors have been tagged to inform of the empty room.

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green All Staff Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Upon hearing a Code Green being announced begin evacuation procedures immediately. The location identified in the Code Green announcement will indicate where individuals need to be evacuated from.

If you are providing care to a resident, quickly finish or stop the care where able and ensure the resident is safe before leaving the room.

_____ Ensure residents and visitors in your work area are in a safe location. For example, remove any resident who is bathing from the tub.

Note: at least one staff member must remain in the resident areas not being evacuated to tend to resident safety.

_____ Shut down any equipment properly (e.g., ovens, laundry equipment).

_____ Close all doors.

_____ Proceed directly to the Code Green area identified. Use the stairs. DO NOT use the elevator(s) unless approved by the Fire Department or other authority involved in the evacuation (e.g., police for a bomb threat, structural engineer for a roof collapse).

_____ If you are not in your work area when the Code Green is announced (e.g., on break), immediately return to your own work area to ensure residents are safe, equipment is properly shut down, and doors are closed (unlocked).

_____ Report to the Incident Manager at the Code Green location.

_____ Following the evacuation procedures below, remove residents and visitors from the Code Green area to an area determined as safe by the Incident Manager.

_____ Begin evacuation using the procedures below, as per the stage announced by the Incident Manager:

Stage 1, Fire Zone- Partial horizontal evacuation, moving from one area of the floor to another area of the same floor behind fire barrier doors.

Stage 2, Wing or Floor- Partial evacuation of a larger area, such as an entire unit or multiple units. This could continue to be a horizontal evacuation or a vertical evacuation, moving from one floor towards the ground floor (do not use elevators unless authorized by fire department).

Stage 3, Total- Full evacuation of the building to an external refuge location.

_____ It is important to recognize that some residents may have experienced past trauma or displacement, and the process of leaving their home could trigger distressing memories or emotions. To support their well-being, ensure that compassionate communication and additional emotional or practical supports are available as needed.

Evacuation Procedures:

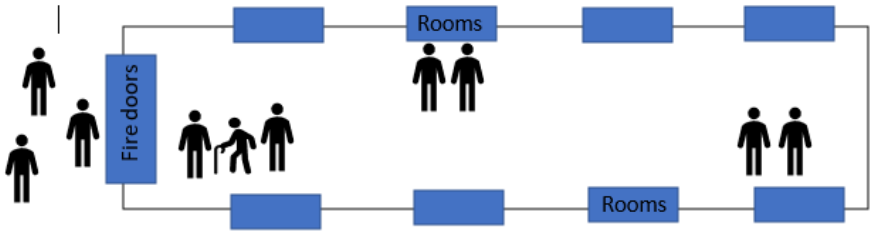
1. Staff members will be designated to be on the outer side of the fire doors taking received residents, or to go room to room evacuating residents. Try to have the same number of people receiving residents at the fire door as teams evacuating residents

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Green All Staff Job Action Checklist

from rooms (for example, you have 9 staff members, 3 will receive residents at the fire doors and 6 will be broken into teams to evacuate rooms).

2. All staff who are going room to room must be in teams of two.
3. Teams enter rooms and bring resident(s) to the closest fire doors.
4. Staff waiting on the other side of fire doors take the residents to safety.
5. After a team has confirmed there are no residents in a room, they close the door and flag the room as empty.
6. Steps 1-3 continue until all the residents in the affected area have been evacuated.



Order of Evacuation

1. Ambulatory residents; residents who can walk with little assistance.
2. Residents who use wheelchairs.
3. Residents who are bedridden; 2 staff required to move, sometimes can bring the bed with them, other times may have to use demonstrated lifts and carries to place on a sheet or blanket and pulled across the floor.
4. Uncooperative residents; if a resident is refusing to leave or being difficult, move on to the next resident and come back for them at the end.

If the evacuation is due to an emergency/ risk in a specific room:

1. When evacuating, remove resident(s) from the room of the emergency. Close and tag the door to inform of empty room.
2. Next, remove resident(s) from the rooms beside and across the hall from the room of the emergency. Close and tag the door to inform of empty room.
3. Remove all remaining resident(s) from the area of the emergency up to the fire doors.
4. Ensure all rooms in the area have been searched and doors have been tagged to inform of the empty room.

_____ Close all unlocked doors and windows where safe to do so.

_____ Search all rooms and each resident room including bathrooms and closets in your assigned area properly and thoroughly and use evacuated indicators, identifying the room is vacant. Do not use evacuated indicators if a person is still in the room. Inform Incident Manager if there are people in the room.

_____ When evacuation is complete, report to Incident Manager for further instructions.

_____ You may be required to relocate to another building with residents to provide care. Continue to provide quality care and comfort to residents.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Green Executive Director/Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Seek updates from Incident Manager to determine actions. If you are the Incident Manager refer to the Incident Manager checklist and designate responsibilities accordingly.

_____ Upon being notified by the Incident Manager that a Code Green full evacuation has been determined and that additional staff is required, start calling staff from the most current staff call-back list.

Note: Begin calling based on staff who live closest to the home.

_____ Advise staff to ensure they have identification with them when responding to the staff call-back.

_____ If residents are being evacuated out of the home, you must call IT to activate emergency access on Point Click Care:

- Call IT at 905-470-5611
- Tell the help desk that you need PCC remote access enabled for your home.
- Tell the help desk this is an **EMERGENCY SITUATION,** and your call needs to be escalated to the Application Support Team **IMMEDIATELY**. This step is imperative to ensure your access is granted as soon as possible.

_____ Notify the Regional Director of Operations and Health authority of the situation and keep them updated.

_____ Assist with evacuation using the procedures below, as per the stage announced by the Incident Manager:

Stage 1, Fire Zone- Partial horizontal evacuation, moving from one area of the floor to another area of the same floor behind fire barrier doors.

Stage 2, Wing or Floor- Partial evacuation of a larger area, such as an entire unit or multiple units. This could continue to be a horizontal evacuation or a vertical evacuation, moving from one floor towards the ground floor (do not use elevators unless authorized by fire department).

Stage 3, Total- Full evacuation of the building to an external refuge location.

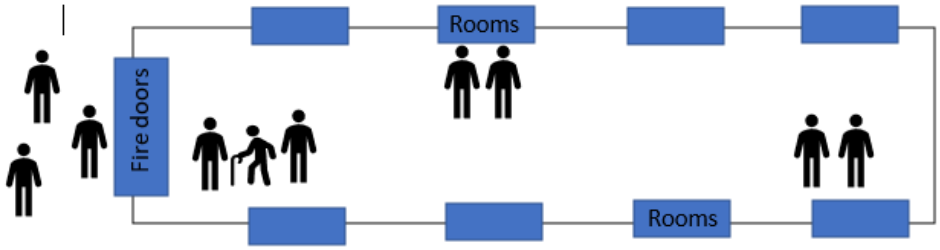
_____ It is important to recognize that some residents may have experienced past trauma or displacement, and the process of leaving their home could trigger distressing memories or emotions. To support their well-being, ensure that compassionate communication and additional emotional or practical supports are available as needed.

EVACUATION PROCEDURES

1. Staff members will be designated to be on the outer side of the fire doors taking received residents, or to go room to room evacuating residents. Try to have the same number of people receiving residents at the fire door as teams evacuating residents from rooms (for example, you have 9 staff members, 3 will receive residents at the fire doors and 6 will be broken into teams to evacuate rooms).

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

2. All staff who are going room to room must be in teams of two. Teams enter rooms and bring resident(s) to the closest fire doors.
3. Staff waiting on the other side of fire doors take the residents to safety.
4. After a team has confirmed there are no residents in a room, they close the door and flag the room as empty.
5. Steps 1-3 continue until all the residents in the affected area have been evacuated.



Order of Evacuation

1. Ambulatory residents; residents who can walk with little assistance.
2. Residents who use wheelchairs.
3. Residents who are bedridden; 2 staff required to move, sometimes can bring the bed with them, other times may have to use demonstrated lifts and carries to place on a sheet or blanket and pulled across the floor.
4. Uncooperative residents; if a resident is refusing to leave or being difficult, move on to the next resident and come back for them at the end.

If the evacuation is due to an emergency/ risk in a specific room:

1. When evacuating, remove resident(s) from the room of the emergency. Close and tag the door to inform of empty room.
2. Next, remove resident(s) from the rooms beside and across the hall from the room of the emergency. Close and tag the door to inform of empty room.
3. Remove all remaining resident(s) from the area of the emergency up to the fire doors.
4. Ensure all rooms in the area have been searched and doors have been tagged to inform of the empty room.

RECOVER

All Clear Procedures

Once the Incident Manager/fire services has advised that the Code Green is all clear and residents can move back into the home or their rooms:

_____ Notify Regional Director of Operations.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Green Executive Director/Designate
Job Action Checklist

_____ Ensure all incident documentation has been completed.

_____ Determine if the provincial health authority or regulatory body should be notified.

_____ Notify the provincial Occupational Health and Safety office (e.g., Ministry of Labour) if any staff suffers a critical injury.

_____ Notify the Regional Director of Operations.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff support as needed (EAP, etc.)

_____ If emergency access was activated on Point Click Care, deactivate emergency access.

When the emergency is over, and the staff have moved residents back into the home:

- Call IT at 905-470-5611
- Tell the help desk that you need PCC remote access removed for your home.

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

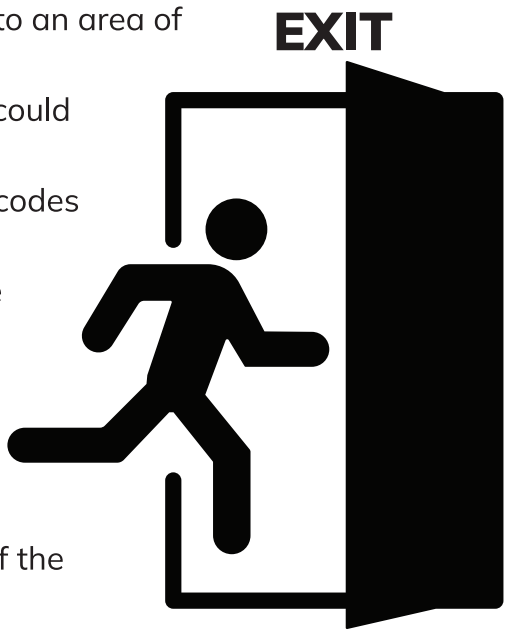
CODE GREEN

Emergency response - Evacuation

What does it mean?

Code Green is the designated phrase used alert and notify staff that they must leave an area and move themselves and residents/visitors to an area of safety. Code Green is a response to a condition/incident/event emergency where if occupational of an area or site continues, it could put persons in danger of injury.

A Code Green – evacuation may be caused by other emergency codes such as Code Red (fire), Code Brown (hazardous/chemical spill), Code Black (bomb threat), Code Purple (hostage situation), Code Silver (active assailant) or Code Grey (infrastructure disruption/failure).



What do I do?

- Staff discovering an initial dangerous or hazardous condition will activate an evacuation of the immediate area of the danger.
- To notify staff of a Code Green, announce 3 times, "**Code Green** + location" (the location is the area to be evacuated).
- The level of evacuation (Stage 1, 2 or 3) will be escalated as determined by the Incident Commander or emergency officials and the degree of danger, risk and level of the emergency.
- When an emergency evacuation is required and called, evacuate the area of the danger, then the rooms across and beside the area of the danger and then the remainder of the area immediately.

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Code Green Procedures
- Review the Code Green plan and checklists that describes your area's role and evacuation procedures if there is an emergency that causes the need to evacuate.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.03
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Yellow- Missing Resident	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	April 6, 2026

POLICY

Emergency Response Codes

PROCEDURE

Code Yellow is announced when a resident has been identified as missing. Residents are considered missing when they are not in a location where staff can find them and are not signed out of the home.

Prevent

The Director of Care/Charge nurse will:

- ☐ Assess all residents upon move-in for wandering and exit-seeking, reassess as required.
- ☐ Apply mitigation strategies for residents identified as exit-seeking; wander guards, tailored behavioral programs, locked units, registered with Alzheimer's society wandering registry, etc.

The Executive Director/Designate will ensure the following:

- ☐ Post a sign at all entrances/exits informing visitors to not assist/open doors for residents unless they know the resident is permitted to leave the home.
- ☐ When the home has planned downtime of maglock or locked doors in which the doors will be unlocked for any period of time, instruct staff to monitor doors until the downtime has ended to ensure no residents exit the building and use the *Planned Downtime Planning Tool* from section 3 of the Emergency Planning and Management Manual.
- ☐ Ensure all visitors and contracted services are aware of potential safety risks and are aware of a clear escalation pathway for concerns (e.g., direct them to the Director of Care/ Charge Nurse).

Respond

- ☐ All Staff must follow the procedures for a missing resident as per their designated Job Action checklists and follow direction from the Incident Manager.

TOOLS

1. Code Yellow- Incident Manager Job Action Checklist
2. Code Yellow- All Staff Job Action Checklist
3. Code Yellow Resident Risk Assessment
4. Code Yellow- Executive Director/Designate Job Action Checklist
5. Code Yellow Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

Resident Name: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Stage 1: At time person is deemed missing:

Record the time action was initiated *(note on the line below):*

If you believe the resident to be at risk of harm (i.e., has exited the building and the weather is extremely hot or cold, the resident is known to be exit seeking, there are clinical concerns, etc.), if the resident was seen leaving the building by a person or on camera and/or after 30 minutes of resident identified as missing regardless of the completeness of the current search for the resident, call a Code Yellow overhead and go to Stage 3.

_____ Time notified of missing resident: _____

_____ Name and designation of individual who noted the resident missing (visitor, volunteer, PSW, RN, etc.):

_____

_____ Time noticed missing by the individual. _____

_____ Ensure a staff member is assigned to check the resident sign in/out sheets.

_____ Call/ designate a staff member to call the unit nurse/program supervisors on other units/program areas to determine if the resident is on other floors/units.

_____ Speak to staff who have recently provided care to the resident and ask if the resident exhibited any responsive expressions or demonstrated verbal or non-verbal communication that they want to leave the home. Obtain a description of the resident including their clothing and physical appearance.

_____ Announce or designate a staff member to announce overhead:

"Attention please, would (Resident's Name) please return to (unit/program area) immediately"

"Attention please, would (Resident's Name) please return to (unit program area) immediately"

"Attention please, would (Resident's Name) please return to (unit/program area) immediately"

Stage 2: After searching the immediate area, begin broader search of home and exterior grounds.

If you believe the resident to be at risk of harm (i.e., has exited the building and the weather is extremely hot or cold, the resident is known to be exit seeking, there are clinical concerns, etc.) and/or after 30 minutes of resident identified as missing regardless of the completeness of the current search for the resident, go to Stage 3.

_____ Set up an Emergency Operations Centre location to designate staff search areas (refer to procedure Emergency Operations Centre Designation)

_____ Announce or designate a staff member to announce:

"Code Yellow, all available staff please proceed to *LOCATION* (command centre)"

"Code Yellow, all available staff please proceed to *LOCATION* (command centre)"

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Incident Manager Job Action Checklist

"Code Yellow, all available staff please proceed to *LOCATION* (command centre)"

_____ Advise all staff, students, and volunteers that you are looking for a specific resident, show them a picture and description of what the resident was last wearing.

_____ Designate staff to search different areas of the home (all units/floors), assign staff to areas they know best (utilize checklist below to note which staff are assigned where). ***Note:*** *If a resident is reported as being seen leaving the home through an exit door, begin searching the exterior grounds and neighborhood immediately.* Designate one staff member in each search area to act as the team leader, ensure they report back to the Incident Manager every 10 minutes (go back, call or walkie talkie).

_____ Designate staff to check external sitting areas (utilize checklist below to note which staff are assigned where). Designate one staff member in each search area to act as the team leader, ensure they report back to the Incident Manager every 10 minutes (go back, call or walkie talkie).

_____ Designate staff to check all external exits to ensure they are properly secured. If the home has a wander guard system, ensure it is properly functioning. If a door is noted as unlocked or the wander guard system is not functioning, ensure staff immediately report back to the Incident Manager for escalation and alignment of search to those areas.

_____ Assign a registered nursing staff member to complete the Code Yellow Resident Risk Assessment.

_____ Designate staff to call any external locations that the resident may be known to frequent (movie theatre, Tim Hortons, shopping centre, etc.), ask if they have seen the resident. Provide a description of the resident and a call back number for them to contact the home if they see the resident.

_____ If not already aware, inform the Executive Director/ Designate of the missing resident.

_____ Inform the resident physician of the missing resident.

_____ Contact family and notify them of the missing resident. Ask family/visitors to confirm that the resident did not leave with them. If the resident did not leave with them, ask them if the resident exhibited any responsive expressions or demonstrated verbal or non-verbal communication that they want to leave the home

INITIAL SEARCH OF THE HOME AND GROUNDS

		Staff assigned to search basement team leader:		# of staff	
		Staff assigned to search 1st floor team leader:		# of staff	
		Staff assigned to search 2nd floor team leader:		# of staff	
		Staff assigned to search 3rd floor team leader:		# of staff	
		Staff assigned to search 4rd floor team leader:		# of staff	
		Staff assigned to search 5th floor team leader:		# of staff	

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Yellow Incident Manager Job Action Checklist

		Staff assigned to search Penthouse/roof team leader:			# of staff	
		Staff assigned to search grounds and parking team leader:			# of staff	
		Staff assigned to search the basement	# of staff		# of staff	
		Staff assigned to search:	# of staff		# of staff	
		Staff assigned to search:	# of staff		# of staff	
		Staff assigned to search:	# of staff		# of staff	

Remind the team leaders to send one person back to, call or walkie talkie the Incident Manager *every 10 minutes.*
Note: *This form is to be adapted to the home floor plan as appropriate. All areas must be searched.*

Stage 3: Call police: If you believe the resident to be at risk of harm and/or after 30 minutes of resident identified as missing regardless of the completeness of the current search for the resident. Continue to Search and complete the actions below.

_____ Police called (9-1-1). Complete Missing persons report. Provide a description of the resident and last time seen. Provide police with the completed Code Yellow Resident Risk Assessment.
Time Called: _____

_____ When police arrive at the home, provide a photograph of the resident and a description of what they were last wearing. Provide police with a summary of actions that were completed prior to their arrival.
Time of arrival: _____

_____ Advise the police if the resident is registered with the Alzheimer's Society Wandering Registry so the police can access the file on their CPIC system.

_____ Activate the staff call-back list if assistance searching is required.

_____ Obtain and distribute a photo of the resident to all searchers.

_____ Designate staff to conduct another search of the home, utilize the checklist below to note which staff were designated to which areas. Assign staff to areas they know best. Search until you are confident that every area of the home has been sufficiently checked and the resident is not located.

_____ Designate staff to begin an external search at the same time as the internal search. Provide maps of the area (obtained from the Home Emergency Response Plan and Fire Safety Plan) and indicate where they are to search. All external searches should be done in pairs. Utilize the Surrounding Community Search Checklist below to note which staff are searching in which areas. Staff must report back by phone every 10 minutes.

_____ Designate staff to call any external locations that the resident may be known to frequent again (movie theatre, Tim Hortons, shopping centre, etc.), ask if they have seen the resident. Provide a description of the resident and a call back number for them to contact the home if they see the resident.

_____ Keep Executive Director/ Designate updated.

_____ Notify and keep in contact with the family/ substitute decision maker of the missing resident.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Incident Manager Job Action Checklist

Person notified: _____

Time of notification: _____

_____ Continue to search until resident is found or notified by police and/or Regional Director of Operations to stop.

SECOND SEARCH OF THE HOME AND GROUNDS

Assign different staff to search each area.

		Staff assigned to search basement team leader:		# of staff	
		Staff assigned to search 1st floor team leader:		# of staff	
		Staff assigned to search 2nd floor team leader:		# of staff	
		Staff assigned to search 3rd floor team leader:		# of staff	
		Staff assigned to search 4rd floor team leader:		# of staff	
		Staff assigned to search 5th floor team leader:		# of staff	
		Staff assigned to search Penthouse/roof team leader:		# of staff	
		Staff assigned to search grounds and parking team leader:		# of staff	
		Staff assigned to search the basement	# of staff	# of staff	
		Staff assigned to search:	# of staff	# of staff	
		Staff assigned to search:	# of staff	# of staff	

Remind the team leaders to send one person back to, call or walkie talkie the Incident Manager every 10 minutes.

Note: *This form is to be adapted to the home floor plan as appropriate. All areas must be searched.*

INITIAL SURROUNDING COMMUNITY SEARCH

Record the time area was searched *(note on the line below):*

_____ Staff assigned to search **Area 1** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west

_____ ❑ to the north

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Yellow Incident Manager Job Action Checklist

_____
_____ ❑ to the east
_____ ❑ to the south

Area 1 Team Leader: Reported back at:

_____ Staff assigned to search **Area 2** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 2 Team Leader: Reported back at:

_____ Staff assigned to search **Area 3** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 3 Team Leader: Reported back at:

_____ Staff assigned to search **Area 4** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 4 _____ Team Leader: _____ Reported back at: _____

*Remind **all** staff to report to the Incident Manager /designate every 10 minutes.*

SECOND SEARCH OF THE SURROUNDING COMMUNITY

Assign different staff to search each area.
***Record the time area was searched** (note on the line below):*

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Incident Manager Job Action Checklist

_____ Staff assigned to search **Area 1** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 1 Team Leader: Reported back at:

_____ Staff assigned to search **Area 2** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 2 Team Leader: Reported back at:

_____ Staff assigned to search **Area 3** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 3 Team Leader: Reported back at:

_____ Staff assigned to search **Area 4** bordered by: (*make this specific to the home including maps/photos)*

_____

_____ ❑ to the west
_____ ❑ to the north
_____ ❑ to the east
_____ ❑ to the south

Area 4 _____ Team Leader: _____ Reported back at: _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Incident Manager Job Action Checklist

*Remind **all** staff to report to the Incident Manager /designate every 10 minutes.*

Use additional sheets for additional notes:

Area Search Expanded

Recover

All Clear Procedures

_____ When the resident has been found, announce or designate a staff member to announce:
"CODE YELLOW– ALL CLEAR"
"CODE YELLOW– ALL CLEAR"
"CODE YELLOW– ALL CLEAR"

_____ Resident Found Where: _____

_____ By whom? _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Incident Manager Job Action Checklist

_____ Resident condition: _____

_____ Medical Assessment or EMS required?

_____ Advise all searchers and authorities who have been contacted that the resident has been located, including:

_____ Resident family/SDM

_____ Police (if found by someone other than police)

_____ Executive Director/Designate

_____ Searchers advised

_____ Respective Health Authority

_____ Incident Report completed

_____ Update resident care plan as required.

_____ Ensure home Wanderguard system is functioning.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.
Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved

_____ Replenish used Job Action Checklists.

Comments: ** Ensure all calls are documented.*

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow All Staff Job Action Checklist

Date: _____ Name: _____

Resident Name: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Stage 1: Staff Who Identified the Resident as Missing; begin search, notify charge nurse.

_____ Record the time the resident was first identified as missing. _____

_____ Search the resident's living area and areas in the home the resident is known to go. Ask nearby staff members and volunteers to help search.

_____ Check the leave of absence book, visitors' log, and ask other staff and residents if they have seen the resident.

_____ Check external sitting areas.

_____ **When resident has been missing for 5 minutes**, notify the Charge Nurse/ Incident Manager (even if the search is not complete). Charge Nurse will notify the Incident Manager or will become the Incident Manager until relieved by a more senior staff member.

_____ Follow instructions from the Incident Manager and continue to search.

Stage 2: Once Code Yellow is announced, report to the area designated as the Emergency Operations Centre and seek instruction for searching remainder of home and grounds.

_____ One staff member, at minimum, must remain in each resident home area and program area to maintain the safety and security of other residents.

_____ Upon hearing a resident is missing, notify the Incident Manager if you have seen them.

_____ Search the home area assigned to you by the Incident Manager. Look in resident rooms, under beds, in closets, bathrooms, lounges, stairwells, utility rooms, staff rooms, storage rooms, shower rooms, etc.

If you are provided with a floor plan or map, identify areas you have searched with an "X" on the map.

If you are designated as the "team leader" for the area, you must report to the Incident Manager every 10 minutes (phone, walkie- talkie or in person).

_____ Search external sitting areas around the home.

_____ If an external area is assigned to you to search, always search with a partner. Search the neighbourhood in the direction assigned to you within a four-block radius. Conduct the external search in a vehicle, not on foot. If a map of the area is provided to you, identify areas you have searched with an "X" on the map. Trained search teams from emergency services will do a more thorough ground search.

If you are aware of an external area the resident is known to frequent and it is within your assigned external search perimeter, notify the Incident Manager and check this area. If it is not within your assigned perimeter, notify the Incident Manager and they will notify the individual assigned to that perimeter.

Report to the Incident Manager every 10 minutes (phone or in person).

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow All Staff Job Action Checklist

Stage 3: Within 30 mins of resident missing. Police engaged by Incident Manager.

_____ Police are being notified by the Incident Manager. Continue to search for the resident as per instructions by the Incident Manager. If police provide you direction, follow their direction.

If you are unable to locate the resident.

_____ Report to the Incident Manager for additional tasks which may include another search of already checked areas.

Note: The number of searches carried out in each designated area will be determined by the Incident Manager.

_____ Report all findings to the Incident Manager.

_____ Continue to search until the Incident Manager advises you to stop.

If you find the resident.

_____ If the resident appears to be in imminent danger, call 9-1-1 or ask someone else around you to call 9-1-1.

Contact the Incident Manager to inform them the resident has been found and their current state.

_____ Approach the resident if safe to do so. Assess the resident's condition by taking the necessary steps to ensure their health, safety and comfort.

_____ If not already done, contact EMS at 9-1-1 if directed to by the Incident Manager.

_____ If the resident is alright, ask them to return with you to the home.

_____ If you are registered nursing staff:

Notify the treating medical practitioner if necessary.

Document the incident in the resident's progress notes and brainstorm strategies with the team and the resident's family/ SDM for future mitigation of similar incidents.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Resident Risk Assessment

Date: _____ Incident Manager: _____

Resident Name: _____

**Attach of photo of the resident to this risk assessment for the police*

Individual Completing the assessment (name and designation): _____

Physical

Sex _____ Personal Pronoun _____

Age_____

Race_____

Hair Colour and Length _____

Clothing _____

Glasses _____

Other physical traits _____

Medication

Life Saving _____

High Risk _____

Intellectual

Cognition_____

Language _____

Other _____

Capabilities

Ambulation _____

Ambulatory Aids _____

Other _____

Social

POA/SDM (s) _____

Places Frequented _____

Visitors_____

LOA's_____

Independent_____

Other_____

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow Resident Risk Assessment

Other Information

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Yellow
Executive Director/Designate Job Action Checklist

Date: _____ Name: _____

Resident Name: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Assist in searching for the missing resident.

_____ Seek updates from Incident Manager/ Police to determine actions.

If resident is not found after 30 minutes, notify:

_____ the Regional Director of Operations.

_____ the Health Authority and/or regulatory body as applicable

Recover

_____ Notify your Regional Director of Operations.

_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required (determine if the provincial health authority/ regulatory body should be notified).

_____ Arrange for staff support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE YELLOW

Missing Resident

What does it mean?
Code Yellow is the designated phrase used to alert staff to an incident in which a resident is considered missing. A resident is considered missing when they are not in the location where staff expect to find them.

What do I do?

Stage 1:
- Search common areas.
- Check Leave of Absence books/ see if resident is signed out
- Contact family to determine if resident is with them
- Notify Charge Nurse/ Incident Manager
- Announce 3 times, "Attention please, would (Resident's Name) please return to (unit/program area) immediately"



If you believe the resident to be at risk of harm (i.e., has exited the building and the weather is extremely hot or cold, the resident is known to be exit seeking, there are clinical concerns, etc.) begin Stage 3 immediately.

Stage 2:
- Announce 3 times, "**Code Yellow**, all available staff please proceed to location (command centre)"
- Search all areas of the home
- Search external sitting areas
- Ensure external exits are properly secured
- Call external locations the resident may be known to frequent for information

Stage 3: (Resident at risk of harm or greater than 30 minutes)
- **Call 9-1-1** and report the missing person
- Search external location within a 4-block radius of the home (report into the home by phone every 10 minutes)
- Follow direction from police

When the resident is found:
- Assess the resident's condition
- Contact the Incident Manager and EMS at **9-1-1** if necessary
- Announce 3 times, "**Code Yellow, All clear**"

Review it before you need it:
- Refer to your Home's Emergency Planning and Management Manual Code Yellow
- Review the Code Yellow chechlists that describes your area's role if a missing resident emergency occurs.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.04
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Black- Bomb Threat	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

- ☐ A Code Black is announced after any bomb threat, whether it is a phone call to the home, in a letter/email/social media or identification of a suspicious package.
- ☐ When receiving a bomb threat call, complete the Code Black Staff Receiving the Threat Job Action Checklist for Call Receiver Information.
- ☐ Immediately following the phone call, complete the Bomb Threat Report within the Staff Receiving the Threat Job Action Checklist for the police investigation. Fill out as much of the report as possible. Give the Incident Manager a full account.

  A copy of the Bomb Threat Report must be accessible at all nursing stations and at reception.
- ☐ When receiving a written, mailed, or electronic threat, or locating a suspicious object, complete the corresponding checklist in the Code Black Staff Receiving the Threat Job Action Checklist.
- ☐ All Staff must follow the procedures for a bomb threat as per their designated Job Action checklists and follow direction from the Incident Manager.

TOOLS

1. Code Black Staff Receiving the Threat Job Action Checklist
2. Code Black Incident Manager Job Action Checklist
3. Code Black All Staff Job Action Checklist
4. Code Black Executive Director/Designate Job Action Checklist
5. Code Black Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Black- Bomb Threat
Staff Receiving the Threat Job Action Checklists

Date: _____ Name/Position: _____

Date: _____ Staff Name: _____

Respond

Code Black Call Receiver Information

Always consider any bomb threat to be a verified threat to the facility and initiate Code Black procedures.

When a bomb threat is received: Listen, be calm and courteous. Obtain as much information as you can. Try to write out the exact wording of their responses and the threat.

Do not interrupt the caller

Do not hang up the call

Do not place the caller on hold

_____ Flag down a co-worker using non-verbal cues or write on a piece of paper to report the call to police (9-1-1) immediately using a landline phone. Do not inform the caller that you have informed the police.

Time co-worked was flagged: _____

_____ Notify the home's Incident Manager.

Time Incident Manager was notified: _____

_____ Ask the questions listed in the Bomb Threat Report on the next page and complete the report.

***Note:** Most callers will not reveal who or where they are, but an attempt should be made to obtain this information anyway. Once you hang up the phone, alert the most senior staff in the home.*

You may use the space below to write notes.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Staff Receiving the Threat Job Action Checklists

Questions to Ask	***Exact Wording of Threat***
1. When is the bomb going to explode?	
2. Where is it now?	
3. What does it look like?	
4. What kind of bomb is it?	
5. What will cause it to explode?	
6. Did you place the bomb?	
7. Why did you place the bomb?	
8. What is your address? Where are you?	
9. What is your name?	

Sex of Caller	***Age***	***Type of Accent***	***Time of Call***	***Length of Call***	***Name/ phone number on caller ID***

Did the caller appear familiar with the office or building by his/her description of the bomb location?
❑ Yes ❑ No

Caller's Voice				
❑ Calm	❑ Laughing	❑ Lisp	❑ Disguised	❑ High pitched
❑ Angry	❑ Crying	❑ Raspy	❑ Accent *(what kind?)*	❑ Intoxicated
❑ Excited	❑ Normal	❑ Deep	❑ Stutter	❑ Fake
❑ Slow	❑ Distinct	❑ Ragged	❑ Rapid	❑ Poor command of language
❑ Slurred	❑ Nasal	❑ Loud	❑ Soft	
❑ Clearing Throat	❑ Cracking Voice	❑ Deep Breathing	❑ Familiar *(who did it sound like?)* _____	❑ Used slang/ uncommon words

Background Sounds				
❑ Street Noises	❑ House Noises	❑ PA System	❑ Animals	❑ Quiet
❑ Airport Noises	❑ Motor	❑ Long Distance	❑ Music *(what kind?)*	❑ Train Noises
❑ Voices	❑ Office Machinery	❑ Clear	❑ Static	❑ Party Atmosphere
❑ Factory Machinery	❑ Local	❑ Other *(please specify)*		

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Staff Receiving the Threat Job Action Checklists

Message/ Language Used		
❑ Well Spoken	❑ Foul	❑ Incoherent
❑ Irrational	❑ Recorded Message	❑ Message was read by threat-maker

Remarks

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Black- Bomb Threat
Staff Receiving the Threat Job Action Checklists

Receiving A Written, Mailed Or Electronic Threat

Treat all threats seriously.

_____ If the threat is written, mailed or dropped off, avoid handling the document to preserve fingerprint evidence.

_____ If the threat was sent electronically (email, text, social media etc.):

- Do not forward or delete the message unless requested to do so by the authorities.
- Save the message for future reference by the authorities.
- Do not respond to the message.

Type of threat received: _____

Time the threat was received: _____

_____ Notify the Incident Manager, who will notify the police.

Time Incident Manager was notified: _____

_____ Record the steps you have taken: _____

_____

_____

_____ Give the Incident Manager a full account of your steps.

_____ Follow the Incident Manager's and/or Police instructions.

Suspicious Object/Package Located or Received

Treat all suspicious objects as a real threat.

_____ Do not touch, move or open the object. If you are holding the package, gently put it down and wash your hands. If the package is believed to contain chemical, biological, radiological or nuclear items, any individual exposed to the opened package must be contained and instruction must be given by Law Enforcement on next steps.

_____ If the package was delivered, take note of who delivered it and provide a detailed description:

_____

Time package was located: _____

Location: _____

By whom: _____

_____ Record a description of the item: _____

_____

_____ Do not activate light switches, slam doors or move nearby objects in the area surrounding the suspicious object.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Staff Receiving the Threat Job Action Checklists

_____ Do not use portable radios (walkie-talkies), cell phones or other electronic devices.

_____ Notify the Incident Manager, who will notify the police and announce the Code Green to remove people from the affected area. Be able to provide a description of the package.

Time Incident Manager was notified: _____

___ If "Code Green" initiated for area where package located– refer to "Code Green" procedure.

___ If instructed by Incident Manager and/or Police, conduct visual search for other suspicious objects. Visual search instructions can be found below.

Visual Search Procedures

Staff should conduct a visual search of the area they are in to determine if there are any suspicious items. For the visual search staff should:

Visually search for any unusual or suspicious objects around the home. Visual searches will be conducted in the areas the staff are currently located in and include open closets, bathrooms, toilets, garbage cans, recycling bins, laundry carts, and medication carts, cabinets, under chairs, tables, and beds (do not open anything to conduct your search, only search cabinets, drawers, etc. that are already open).

Rooms should be searched in a counterclockwise rotation and from ceiling to floor.

Look only with your eyes.

Stand in the room in silence and listen for any unusual sounds.

Do not open any doors, cabinets, or drawers.

Do not close any doors, cabinet, or drawers.

Do not turn on or off any lights.

Look for any trip wires (an object such as a string or wire that if touched may cause an explosive device to detonate) and avoid the area if found.

Visually search from floor to ceiling.

If a suspicious item is discovered, evacuate the area and notify the Incident Manager immediately.

Advise any residents and visitors in the area to remain still and silent.

Check in with the nurse in the unit every 10 minutes to report findings.

RECOVER

After hearing the "all clear" announced.

_____ Participate in the analysis and debrief session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Incident Manager Job Action Checklists

Date: _____ Incident Manager: _____

Respond

After Being Notified of a Phone Threat

Always consider any bomb threat to be a verified threat to the facility and initiate Code Black procedures.

If you were also the individual receiving the threat, refer to the "Staff Receiving the Threat Job Action Checklists."

- ____ Time you were notified of the threat: _____
- ____ Ensure 911 has been notified via landline telephone.
  Time 9-1-1 was notified: _____
- ____ Implement the Incident Management System (identify the IMS roles and responsibilities) as applicable.
- ____ Initiate the Code Black as per the below checklists for a non-specific threat or a threat to a specific location once you have obtained the details from the person who received the threat.
- ____ Determine if the Emergency Operations Centre needs to be established and if so, coordinate actions (information on the Emergency Operation Centre can be found in the Emergency Planning and Management Manual.
- ____ Residents and visitors advised to remain calm, still, and quiet until told otherwise.

A Non-Specific Threat

If the caller was not specific as to the location of the bomb within the home.

- ____ Announce or delegate a staff member to announce three times:
  "CODE BLACK – ALL VISITORS, STAFF AND RESIDENTS, PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. Remain in place until further instructions are provided."
  "CODE BLACK – ALL VISITORS, STAFF AND RESIDENTS, PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. Remain in place until further instructions are provided."
  "CODE BLACK – ALL VISITORS, STAFF AND RESIDENTS, PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. Remain in place until further instructions are provided."
  If the home has a wireless call bell system, shut this off and conduct Q15 minute checks on the residents.
- ____ Instruct staff to conduct visual search of their immediate area. Search procedures can be found below.
- ____ If initiating a Code Green and require additional support, refer to the code green procedure.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

____ Delegate a staff member to begin staff call-back notification if additional help is required.

____ Notify Executive Director/Designate.

____ Notify regulatory body and/or provincial health authority as applicable.

____ Be sure to have your home specific map for use by police if required.

____ Act as liaison to police until additional support arrives.

____ Once police arrive, take direction from them for next steps.
Take note of the officers' badge number: _____

A Threat to a Specific Location

If the caller identified a specific location within the home.

____ Announce or delegate a staff member to announce three times:

"CODE BLACK *(LOCATION)* – ALL VISITORS, STAFF, AND RESIDENTS PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. THANK YOU - CODE GREEN *(LOCATION)* - PLEASE CALMLY EVACUATE *(LOCATION).*"

"CODE BLACK *(LOCATION)* – ALL VISITORS, STAFF, AND RESIDENTS PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. THANK YOU - CODE GREEN *(LOCATION)* - PLEASE CALMLY EVACUATE *(LOCATION).*"

"CODE BLACK *(LOCATION)* – ALL VISITORS, STAFF, AND RESIDENTS PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. THANK YOU - CODE GREEN *(LOCATION)* - PLEASE CALMLY EVACUATE *(LOCATION).*"

____ Search the relocation area before moving residents into it.

____ Instruct staff to conduct a visual search of their immediate vicinity to determine if there are any unusual or suspicious objects. Search procedures can be found below.

____ Delegate a staff member to begin staff call-back notification if additional help is required.

____ Notify Executive Director/Designate

____ Notify regulatory body and/or provincial health authority as applicable.

____ Obtain your home specific map for use by police if required.

____ Act as liaison to police until additional support arrives.

____ Once the police arrive, take direction from them for the next steps.
Take note of the officers' badge number: _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Incident Manager Job Action Checklists

Visual Search Procedures

Staff should conduct a visual search of the area they are in to determine if there are any suspicious items. For the visual search staff should:

Visually search for any unusual or suspicious objects around the home. Visual searches will be conducted in the areas the staff are currently located in and include open closets, bathrooms, toilets, garbage cans, recycling bins, laundry carts, and medication carts, cabinets, under chairs, tables, and beds (do not open anything to conduct your search, only search cabinets, drawers, etc. that are already open).

Rooms should be searched in a counterclockwise rotation and from ceiling to floor.

Look only with your eyes.

Stand in the room in silence and listen for any unusual sounds.

Do not open any doors, cabinets, or drawers.

Do not close any doors, cabinet, or drawers.

Do not turn on or off any lights.

Look for any trip wires (an object such as a string or wire that if touched may cause an explosive device to detonate) and avoid the area if found.

Visually search from floor to ceiling.

If a suspicious item is discovered, evacuate the area and notify the Incident Manager immediately.

Advise any residents and visitors in the area to remain still and silent.

Check in with the nurse in the unit every 10 minutes to report findings.

RECEIVING A WRITTEN, MAILED OR ELECTRONIC THREAT

Always consider any bomb threat to be a verified threat to the facility and initiate Code Black procedures.

If you were also the individual receiving the threat, refer to the "Staff Receiving the Threat Job Action Checklists".

- ____ Receive details from the staff member who received the threat.
  Time details received: _____
- ____ Notify police (9-1-1) using landline telephone and provide details, do not handle a written or mailed threat.
  Time police notified: _____
- ____ Follow direction of police.
- ____ Notify Executive Director/ Designate.
- ____ If the threat identified a specific location, refer to the procedures above for a Threat to a Specific Location.
- ____ If the threat does not identify a specific location, refer to the procedures above for A Non-Specific Threat.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Incident Manager Job Action Checklists

SUSPICIOUS OBJECT/PACKAGE LOCATED OR RECIEVED

Always consider any bomb threat to be a verified threat to the facility and initiate Code Black procedures.

If you were also the individual receiving the threat, refer to the "Staff Receiving the Threat Job Action Checklists".

_____ Receive details from the individual who located the object.
Time details received: _____

_____ Notify police (9-1-1) using landline telephone and provide details of the object and its location.
Time police notified: _____

_____ Follow direction from Police.

_____ Announce or delegate a staff member to announce three times:
"CODE BLACK *(LOCATION)* – ALL VISITORS, STAFF, AND RESIDENTS PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. THANK YOU - CODE GREEN *(LOCATION)* - PLEASE CALMLY EVACUATE *(LOCATION).*"

"CODE BLACK *(LOCATION)* – ALL VISITORS, STAFF, AND RESIDENTS PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. THANK YOU - CODE GREEN *(LOCATION)* - PLEASE CALMLY EVACUATE *(LOCATION).*"

"CODE BLACK *(LOCATION)* – ALL VISITORS, STAFF, AND RESIDENTS PLEASE TURN OFF ALL CELL PHONES AND OTHER WIRELESS DEVICES IMMEDIATELY. THANK YOU - CODE GREEN *(LOCATION)* - PLEASE CALMLY EVACUATE *(LOCATION).*"

_____ Clear and secure the area surrounding the suspicious object to ensure the safety of residents, staff and others present.

_____ Search the relocation area before moving residents into it.

_____ Notify Executive Director/Designate.

_____ Notify regulatory body and/or provincial health authority as applicable.

_____ Obtain your home specific map for use by police if required.

_____ Act as liaison to police until additional support arrives.

_____ Once the police arrive, take direction from them for next steps.
Take note of the officers' badge number: _____

_____ Do not activate light switches, slam doors or move nearby objects in the area of the suspicious object.

_____ Do not use portable radios (walkie-talkies), cell phones or other electronic devices.

_____ Do not assume there is only one device. Inform staff to visually search their immediate vicinity for suspicious objects (see visual search procedures above).

_____ Delegate a staff member to begin staff call-back notification if additional help is required.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Black- Bomb Threat
Incident Manager Job Action Checklists

Recover

After being notified by police or other officials that the bomb threat has ended and the area is safe, the "All Clear" will be in effect.

_____ Announce or designate a staff member to announce three times,
"Code Black All Clear"
"Code Black All Clear"
"Code Black All Clear"

_____ Instruct staff members to return residents to their home areas.

_____ If you have a wireless call bell system that was turned off, ensure you turn it back on.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.
Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Complete required incident documentation.

_____ Replenish used Job Action Checklists.

Notes:

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Black- Bomb Threat
All Staff Checklist

Respond

If you are the individual who received the threat, refer to the "Staff Receiving the Threat Job Action Checklists".

_____ Follow all instructions from the Incident Manager.

_____ Inform the Incident Manager of any suspicious objects or suspicious events observed.

_____ Turn off cell and wireless phones immediately upon hearing the Code Black announcement.

_____ Conduct a visual search as per procedures below if instructed to do so by the Incident Manager Report suspicious, unusual, or unknown items, packages, and people to the Incident Manager.

_____ If a Code Green is called, assist in the evacuation.

_____ If/ when police arrive, follow police instructions.

Visual Search Procedures

Staff should conduct a visual search of the area they are in to determine if there are any suspicious items. For the visual search staff should:

Visually search for any unusual or suspicious objects around the home. Visual searches will be conducted in the areas the staff are currently located in and include open closets, bathrooms, toilets, garbage cans, recycling bins, laundry carts, and medication carts, cabinets, under chairs, tables, and beds (do not open anything to conduct your search, only search cabinets, drawers, etc. that are already open).

Rooms should be searched in a counterclockwise rotation and from ceiling to floor.

Look only with your eyes.

Stand in the room in silence and listen for any unusual sounds.

Do not open any doors, cabinets, or drawers.

Do not close any doors, cabinet, or drawers.

Do not turn on or off any lights.

Look for any trip wires (an object such as a string or wire that if touched may cause an explosive device to detonate) and avoid the area if found.

Visually search from floor to ceiling.

If a suspicious item is discovered, evacuate the area and notify the Incident Manager *immediately.*

Advise any residents and visitors in the area to remain still and silent.

Check in with the nurse in the unit every 10 minutes to report findings.

Recover

After hearing the "all clear" announced.

_____ Participate in the analysis and debrief session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Black Executive Director/ Designate
Job Action Checklist

Respond

_____ Notify and update the Regional Director of Operations.

_____ Follow instructions from the Incident Manager and Police.

_____ Notify the regulatory body and/or provincial health authority as applicable

Recover

_____ Notify your Regional Director of Operations.

_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required. Notify regulatory body and/or provincial health authority as applicable.

_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc.
All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE BLACK

Emergency response - Bomb threat



What does it mean?

Code Black is the designated phrase to alert staff of a verbal/ written bomb threat or discovery of a suspicious letter, package, or object.

What do I do?

- Treat all threats seriously. Remain calm and turn off all cellular phones and wireless devices. Do not activate light switches, call bells, move objects, or slam doors.
- Notify police services, **CALL 9-1-1**
- Report suspicious, unusual, or unknown items, packages and
- people to the Incident Commander.
- If a **Code Green** is announced, assist with evacuation.
- Ensure all actions taken are documented on the applicable Code Black Checklist.

Receiving a threat:

- Telephone threat: Remain calm and courteous. Do not argue or hang up. Complete the Bomb Threat Report in the employee receiving the threat checklist. Gather as much information from the caller as possible.
- Electronic threat: Do not reply to, forward, delete or destroy email/ text message/ fax

Suspicious item found/received:

Do not touch or let others touch it. Initiate Code Green for that area. Assume there is more than 1 device, search relocation area before moving residents.

- **Non-specific threat: Announce 3 times,** "CODE BLACK + Home Name- ALL VISITORS AND STAFF PLEASE TURN OFF ALL CELL PHONES AND WIRELESS DEVICES IMMEDIATELY."
- **Specific threat: Announce 3 times**, "CODE BLACK + location- ALL VISITORS AND STAFF PLEASE TURN OFF ALL CELL PHONES AND WIRELESS DEVICES IMMEDIATELY. CODE GREEN + location, PLEASE CALMLY EVACUATE location".

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Code Black
- Review the Code Black plan and checklist that describes your area's role if a Code Black occurs.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.05
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Orange- External Disaster	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Code Orange is announced when the home is about to receive an influx of people requiring emergency care due to an external or natural disaster such as a tornado, earthquake, hurricane or severe storm or internal evacuation.

- ☐ When Code Orange is announced, all staff must return to their assigned stations and report to their supervisor.
- ☐ All staff must follow direction from their supervisor/manager and the Incident Manager.
- ☐ When Code Orange is announced, department managers and supervisors are to proceed to the Emergency Operations Centre for instructions within 10 minutes.
- ☐ The Incident Manager and Executive Director/Designate must follow the procedures for Code Orange as per their designated Job Action checklists.

TOOLS

1. Code Orange Incident Manager Job Action Checklist
2. Code Orange Executive Director/Designate Job Action Checklist
3. Code Orange Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Orange- External Disaster Incident Manager
Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Upon receipt of a phone call advising of the potential for incoming residents, gather the following information:

Time call received: _____

Caller's name: _____

Caller's job title: _____

Organization: _____

Contact phone: _____

Cell phone: _____

Contact email: _____

What is the disaster? _____

Where are residents arriving from? _____

Estimated time of arrival: _____

Anticipated duration of stay: _____

Estimated number of incoming residents: _____

Demographics of incoming residents (LTC, retirement, group home, community, hospital): _____

Resources accompanying the residents (nursing staff, PSW's, volunteers, etc.): _____

Condition of residents (physical, medical, emotional etc.): _____

Resources residents require (medical equipment, locked unit, special care etc.): _____

- ETA less than 3 hours (180 minutes) – immediately notify all staff of "Code Orange"
- ETA greater than 3 hours (180 minutes) – call together the IMS Team

If Residents are arriving in less than 3 hours (180 minutes)

_____ Announce or designate a staff member to announce three time: "Code Orange"

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Orange- External Disaster Incident Manager
Job Action Checklist

"Code Orange"

_____ "Code Orange"

_____ Executive Director/Designate notified.

_____ Initiate Emergency Fan out list

_____ Initiate Incident Management System (IMS) team.

_____ First IMS meeting – 20 minutes after "Code Orange" paged. Go to IMS Team Checklist below

If Residents Are Arriving in More Than 3 Hours (180 Minutes)

Calling a Code Orange is not required

_____ Executive Director/Designate notified.

_____ Initiate Incident Management System (IMS) team.

_____ First IMS meeting – 20 minutes after "Code Orange" paged. Go to IMS Team Checklist below

IMS Team Checklist

Assign Incident Management Team Positions for the following jobs (IMS job actions can be found in your Home Specific Emergency Response Plan). One individual may have multiple jobs.

Operations _____

Logistics _____

Planning _____

Finance/Administration _____

Safety _____

Liaison _____

Communications _____

_____ Job Action Sheets from Tab 5 of the Home Specific Emergency Response Plan provided to the individuals assigned the corresponding jobs.

_____ Delegate staff to complete other tasks as required.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Orange- External Disaster Incident Manager
Job Action Checklist

Tasks to be addressed by the IMS Team:

_____ Call the original contact to reconfirm the data on incoming residents.

Information:

_____ Evaluate the capability of the home to assist in the incident. Look at your common areas that could be converted into care areas, private rooms converted to semiprivate rooms, semiprivate rooms into ward rooms, etc.

Based on conversation and needs of the evacuating facility, liaise with the local authorities to establish a supply of emergency beds, lifts and slings, oxygen, incontinence products, privacy curtains, etc. to be delivered and additional resources required.

_____ Communicate with the originating organization to advise how many residents can be accepted and the restrictions on their present conditions based on the resources available. Determine if the evacuation site staff will be accompanying the residents.

_____ Implement the Emergency Fan out list to call in the staff required to receive the residents.

_____ Establish a receiving area where residents can be triaged and assessed, utilizing incoming resident documentation forms. Utilize safety cones or other forms of indicators to identify where people should be going and where they are restricted from. Have provisions available for snacks and beverages upon arrival.

Location:

_____ Establish an area(s) for housing the incoming residents (e.g. multi-purpose room). Consider how many residents are incoming and the size of the room, if the room will be crowded or loud utilize more than one area.

Location(s):

_____ Establish washrooms for incoming residents.

Locations:

_____ Ensure residents arriving are appropriately identified from evacuation site and obtain labels to provide to new residents as identification tags.

_____ Ensure staff arriving are appropriately identified from evacuation site and obtain labels to provide to incoming staff as identification tags.

_____ Set up Family Information Support Centre for the associated influx of family members and friends of the incoming residents.

Develop a plan for ongoing communication to all residents, families and staff

Location:

_____ Ensure access is controlled –all exterior entrances locked.

Assign staff to the following:

_____ Staff member assigned to direct incoming residents, families, etc. ensuring that the arriving residents' access designated areas only.

Name(s):

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Orange- External Disaster Incident Manager
Job Action Checklist

_____ RN(s) assigned to patient triage/assessment area.

Name(s):

_____ Dietitian (if available) assigned to patient triage/assessment area.

Name(s):

_____ Social Worker (if available) assigned to patient triage/assessment area.

Name(s):

_____ Additional staff assigned to patient triage/assessment area to maintain documentation and assist as needed e.g building beds.

_____ Name(s):

_____ Provide coloured arm bands or tags to staff in the home so that they can be easily identified by incoming residents and staff.

_____ Consider additional staffing for programs and dietary to occupy and feed the incoming residents.

_____ Assign an individual(s) to secure the entrance/exit of the receiving and housing area to ensure no new residents leave.

Name(s):

_____ Considering implementing a wanderguard immediately on any residents identified as being known to wander.

It is important to recognize that some residents may have experienced past trauma or displacement, and the process of leaving their home could trigger distressing memories or emotions. To support their well-being, ensure that compassionate communication and additional emotional or practical supports are available as needed.

_____

Staff assigned to resident home areas:

_____ Nursing staff

Name(s): _____

_____

_____

_____

_____ Social Work staff

Name(s): _____

_____

_____

_____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Orange- External Disaster Incident Manager
Job Action Checklist

_____ Housekeeping staff

Name(s): _____

_____

_____

_____

_____ Dietary staff

Name(s): _____

_____

_____

_____

_____ Laundry staff

Name(s): _____

_____

_____

_____

_____ Administration support (documentation)

_____ Name(s): _____

_____

_____

_____

_____ Feeding plan determined (including potentially feeding staff)

_____ Overnight accommodations/facilities plan determined

Tables required: _____

Chair required: _____

Food required: _____

Mattresses required: _____

Blankets/ pillows required: _____

Storage Bins for Resident property and supplies: _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Orange- External Disaster Incident Manager
Job Action Checklist

Privacy screens: _____

Additional equipment required: _____

Tasks to be addressed by the IMS Team, Initiate reports/ requests to:

_____ Regulatory body and/or provincial health authority as applicable: _____

_____ Local Emergency Management: _____

_____ Local Public Health: _____

_____ Red Cross: _____

_____ Local Grocery Suppliers: _____

_____ Local Bedding / Linen Suppliers: _____

_____ Other: _____

Recover

"All Clear" Procedures

After Code Orange has ended and guest residents have left:
The following checklist is to be complete by both the Incident Manager and the Executive Director/Designate.

_____ Ensure all documentation is completed and filed with appropriate authorities.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Orange- External Disaster Incident Manager
Job Action Checklist

Notes:

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Orange Executive Director/ Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations throughout the situation.

_____ Follow instructions from the Incident Manager.

_____ Ontario LTC Homes only: If the number of incoming residents exceeds the number of beds the LTC home is licensed for and the residents are expected to be there for more than 24 hours, the home must apply for a temporary emergency license to increase the approved number of beds. This license is through the Ministry of Long-Term Care and can cover a term of 1 year.

Further information about the Temporary Emergency Long-Term Care Home Capacity Form can be obtained through email to LTCHomes.Licensing@ontario.ca.

Recover

_____ Notify your Regional Director of Operations.

_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.

_____ Arrange for staff support as needed (EAP, etc.)

_____ Participate in the debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada)Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE ORANGE

Emergency response - External disaster

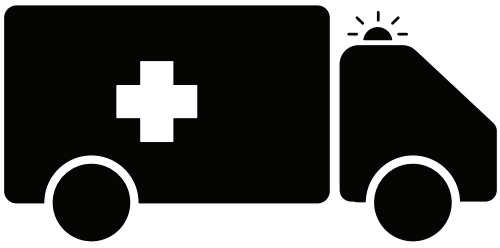
What does it mean?

Code Orange is the designated phrase to alert and notify staff of the need to prepare for or respond to a disaster external to the home that is causing residents/patients from another facility to be relocated to this home, which is likely to exceed available resources, staffing levels, require additional or extraordinary assistance or possible multi-site responses.

What do I do?

Once the home has been notified of additional incoming residents:

- Use the Code Orange Incident Manager checklist to gather all pertinent information and prepare for their arrival
- Notify the Executive Director/Designate and Regional Director
- If residents are expected to arrive in less than 3 hours, announce 3 times, "**Code Orange**" (if they are arriving in more then 3 hours no announcement is necessary)
- Initiate the Incident Management System and assign roles
- Initiate the staff call back process if required
- Establish an in-home receiving area
- Set up a Family Information Support Centre



Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual Code Orange
- Review the Code Orange plan and checklists that describes your area's role if an external disaster occurs and people are being evacuated into your long term care home.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM1-P10.06
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Natural Disasters and Extreme Weather Events	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Prepare

The Executive Director/Designate will:

- ☐ Monitor for local extreme weather alerts or advisories to ensure timely communication with residents and staff.
- ☐ Do not select another nearby Extendicare home as your home's only evacuation site as they are likely to be affected by the same disaster.
- ☐ Know where staff live and where the nearest hotels are located in the event the weather event or disaster will require staff to stay nearby.

Respond

- ☐ Announce the occurring or impending event or disaster.
- ☐ The Executive Director/Designate and Incident Manager will use their designated Natural Disasters and Extreme Weather Job Action Checklists when responding to any natural disaster or extreme weather event such as a winter storm, tornado, flood, forest fire, earthquake or hot weather advisory.
- ☐ All staff will follow instructions provided by the Incident Manager.
- ☐ All staff will refer to the Natural Disasters and Extreme Weather Events Information to understand what to do during a Tornado or Earthquake.
- ☐ Refer to policy/procedure, Preventing Heat-Related Illnesses when managing heat-related events.

TOOLS

1. Natural Disasters and Extreme Weather Incident Manager Job Action Checklist
2. Natural Disasters and Extreme Weather Executive Director/ Designate Job Action Checklist
3. Natural Disaster and Extreme Weather Events Information Sheet
4. Natural Disaster and Extreme Weather Events Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved.
Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Natural Disasters and Extreme Weather Events
Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Impending Winter Storm, Tornado, Flood or Forest Fire marked by Environment Canada in your area as a Yellow, Orange or Red alert:

Time ***Record the time action was initiated***

_____ Notification received from: _____

_____ Agency: _____

_____ Contact Information: _____

_____ Known information: _____

- If Environment Canada issues an orange or red weather warning indicating severe weather is incoming and likely to cause significant damage, disruption, or health impacts, take the following actions as applicable to the situation:

_____ Contact the Executive Director/ Designate if not already aware.

_____ Shelter in place until the weather event has passed.

_____ Close all outside windows and doors.

_____ Move residents and instruct residents and visitors to move away from windows and doors.

_____ Conduct a meeting with staff, residents and visitors to inform of the extreme weather event and what safety precautions have been put in place.

_____ Have staff stay at nearby hotels to ensure they can get to work.

_____ Ensure staff are available to stay past their shift end time in the event the next shift cannot arrive on time.

_____ Call in extra staff if ability to get to work will be severely compromised.

_____ Modify the menu or find another source of food in the event food delivery cannot arrive on time.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved.
Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Natural Disasters and Extreme Weather Events
Incident Manager Job Action Checklist

During/ Immediately After a Winter Storm, Tornado, Flood, Forest Fire or Earthquake

Time ***Record the time action was initiated***

_____ If pipes freeze or water is not drinkable, enact Code Grey – Water Supply.

_____ If there is a power loss or HVAC Systems fail, enact Code Grey – Essential Services.

_____ If notified by municipality to evacuate, enact Code Green.

_____ If storm/disaster causes another facility to be evacuated to the home, enact Code Orange.

_____ If air outside is not safe to breathe, enact Code Grey – Air Exclusion.

During a Tornado

Time ***Record the time action was initiated***

_____ Ensure residents, visitors and staff are away from windows and doors. Move them into rooms without windows and exterior walls if possible.

_____ Close doors of rooms with windows and exterior walls.

_____ Instruct and assist residents, visitors and staff to crouch close to the floor away from any heavy and unrestrained equipment. If there is a sturdy table or countertop, crouch underneath it.

_____ Instruct and assist residents, visitors and staff to cover their head with their arms, pillows, blankets and mattresses if available. If a resident cannot be removed from a bed, cover them with a blanket.

_____ Ensure no one moves until confirmation is received that the Tornado has passed.

_____ If there is fallen debris and anyone is trapped, do not attempt to remove them, call 9-1-1 and wait for assistance.

During an Earthquake

Time ***Record the time action was initiated***

_____ As soon as you begin to feel the shake, ensure anyone who is able drops to their knees and crawls.

_____ Ensure residents and visitors are away from windows and doors. Move them into rooms without windows and exterior walls if possible.

_____ Instruct and assist residents, visitors and staff to crouch close to the floor away from any heavy and unrestrained equipment.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved.
Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Natural Disasters and Extreme Weather Events
Incident Manager Job Action Checklist

_____ Instruct and assist residents, visitors and staff to hide underneath a sturdy table or countertop (if there is one) and hold on.

_____ Assist residents in walkers to put on the brake, sit on their walker, lean forward and put their arms and hands over their neck and head. Place a blanket or pillow for protection if possible.

_____ Assist residents in wheelchairs to put on the brake, lean forward and put their arms and hands over their neck and head. Place a blanket or pillow for protection if possible.

_____ Assist residents who cannot be removed from beds to roll into their stomach and cover their back, neck and head with pillows and blankets.

_____ Ensure no one moves until the shaking stops. There may continue to be aftershocks; instruct staff, residents and visitors to crawl on the floor, stay down, cover themselves and hold onto a sturdy object as before.

_____ If there is fallen debris and anyone is trapped, do not attempt to remove them, call 9-1-1 and wait for assistance.

Hot Weather Advisory:

Time ***Record the time action was initiated***

_____ Stay inside the building with windows and doors closed and Air Conditioning running.

_____ Provide staff and residents with water, other cold beverages and snacks (popsicles, ice cream, etc.). Encourage residents to take a sip every time you walk past them.

_____ Ensure activities do not include a lot of exertion.

_____ Call in extra staff so team members can take more frequent breaks.

_____ Reference *Preventing Heat Related Illnesses*.

_____ Utilize hot weather checklists.

If air conditioning units are not working:

_____ Enact procedures for Code Grey – Essential Services, Failure of HVAC Systems, Cooling Systems:

_____ Ensure curtains and blinds are closed to areas exposed to the sun.

_____ Move residents out of rooms where the exterior walls are exposed to the sun.

_____ Open windows and exterior doors, with proper supervision, during cooler night-time hours.

_____ Monitor conditions to ensure the safety of residents and staff when a cooling failure is extended.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved.
Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Natural Disasters and Extreme Weather Events
Incident Manager Job Action Checklist

_____ Ensure clinical assessments have been completed that identify which residents are most at risk during extreme hot weather.

_____ Ensure an adequate amount of cold beverages and snacks are available for residents and staff.

_____ Notify the Executive Director/Designate to discuss alternate climate control options.

_____ Initiate non-emergency evacuation in situations where the temperature becomes a health or safety risk.

Recover

Time ***Record the time action was initiated***

_____ When the extreme weather event or warning of an extreme weather event has ended, notify residents, staff and visitors that it has ended.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

Hold Analysis and Debrief with staff, residents and visitors involved.

_____ *Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.*

_____ Notify appropriate stakeholders and resident families of the event.

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved.
Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Natural Disasters and Extreme Weather
Executive Director/ Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations.

_____ Follow instructions from the Incident Manager.

Recover

_____ Notify your Regional Director of Operations.

_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.

_____ Notify the regulatory body and/or provincial health authority as applicable, Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Natural Disasters and Extreme Weather Events Information Sheet

What to Do During a Tornado



- Know who the Incident Manager is and escalate concerns as needed.
- Ensure residents, visitors and staff are away from windows and doors. Move them into rooms without windows and exterior walls if possible.
- Close doors of rooms with windows and exterior walls.
- Instruct and assist residents, visitors and staff to crouch close to the floor away from any heavy and unrestrained equipment. If there is a sturdy table or countertop, crouch underneath it.
- Instruct and assist residents, visitors and staff to cover their head with their arms, pillows, blankets and mattresses if available. If a resident cannot be removed from a bed, cover them with a blanket.
- Ensure no one moves until confirmation is received that the tornado has passed.
- Do not attempt to remove individuals trapped by fallen debris. Call 9-1-1 and wait for assistance.

What to Do During an Earthquake



- As soon as the shake is felt, ensure anyone who is able drops to their knees and crawls.
- Ensure residents and visitors are away from windows and doors. Move them into rooms without windows and exterior walls if possible.
- Instruct and assist residents, visitors, and staff to crouch close to the floor away from any heavy and unrestrained equipment.
- Instruct and assist residents, visitors, and staff to hide underneath a sturdy table or countertop (if there is one) and hold on.
- Assist residents who use walkers to put on their walker brake, sit on their walker, lean forward, and put their arms and hands over their neck and head. Place a blanket or pillow for protection if possible.
- Assist residents in wheelchairs to put on the brake, lean forward and put their arms and hands over their neck and head. Place a blanket or pillow for protection if possible.
- Assist residents who cannot be removed from beds to roll into their stomach and cover their back, neck and head with pillows and blankets.
- Ensure no one moves until the shaking stops. There may continue to be aftershocks; instruct staff, residents, and visitors to crawl on the floor, stay down, cover themselves and hold onto a sturdy object as before.
- Do not attempt to remove individuals trapped by fallen debris. Call 9-1-1 and wait for assistance.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

NATURAL DISASTERS AND EXTREME WEATHER EVENTS

Emergency response

What does it mean?

Natural Disasters and Extreme Weather are natural events that occur in the environment that may be dangerous and have the potential of incurring negative effects. This includes earthquakes, floods, tornados or hurricanes, dangerously high or low temperatures, or storms causing large snow accumulations or high winds.

What do I do?



- Shelter in place until the disaster/event has passed
- Close all open outside windows and doors
- Instruct and help residents and visitors to move away from outside windows and doors
- Do not leave until it has been confirmed by a legitimate source that the disaster/event has ended

Tornado/ Hurricane or Earthquake:

- Crouch close to the floor away from any heavy and unrestrained equipment. If there is a sturdy table or countertop, crouch underneath it. Assist residents and visitors to do the same.
- Cover your head with your arms, pillows, blankets and mattresses if available. Assist residents and visitors to do the same. If a resident cannot be removed from a bed, cover them with a blanket.
- Assist residents in wheelchairs or walkers to put on the brake, sit on their walker/ wheelchair, lean forward and put their arms and hands over their neck and head. Place a blanket or pillow for protection if possible.
- Assist residents who cannot be removed from beds to roll into their stomach if possible and cover their back, neck and head with pillows and blankets.
- If there is fallen debris and you or anyone is trapped, do not attempt to move/remove them, **call 9-1-1** and wait for assistance.

Review it before you need it:

- Refer to your home's Emergency Planning and Management Manual Natural disasters and extreme weather events.
- Review the Natural disasters and extreme weather events plan that describes your area's role if an event occurs.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.07
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Grey- Air Exclusion	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

- ☐ Code Grey- Air Exclusion is announced when there is an occurrence outside the home that has the potential to contaminate the air and affect the health and safety of residents, families, staff and volunteers.
- ☐ Close any open windows.
- ☐ Apply wet towels or linens to seal any external air infiltration (i.e., from window air conditioning units once unplugged), as able.
- ☐ Turn off local air exchange systems, including individual air conditioning units in offices and residents' rooms.
- ☐ Remain inside the home unless instructed otherwise.
- ☐ Follow the procedures for air exclusion as per your designated Job Action checklists and follow direction from the Incident Manager.
- ☐ Registered staff, monitor residents for respiratory symptoms and treat accordingly.
- ☐ Care staff, assist with resident assessment and interventions, as required.

TOOLS

1. Code Grey- Air Exclusion Incident Manager Job Action Checklist
2. Code Grey- Air Exclusion Maintenance Job Action Checklist
3. Code Grey- Air Exclusion All Staff Job Action Checklist
4. Code Grey- Executive Director/Designate Job Action Checklist
5. Code Grey- Air Exclusion and Essential Services Poster

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Air Exclusion
Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific. If some of the actions are not applicable to your home, remove them and add the correct actions.*

Respond

Record the time action was initiated

_____ Notification received from: _____

_____ Agency: _____

_____ Contact Information: _____

_____ Known information: _____

_____ If air exclusion incident was identified by the home, assess the need for Code Grey – Air Exclusion activation. Call 9-1-1 to inform the Fire Department.

_____ Announce or delegate a staff member to announce (repeat three times):
"CODE GREY – AIR EXCLUSION – PLEASE CLOSE ALL OPEN WINDOWS AND EXTERIOR DOORS"
"CODE GREY – AIR EXCLUSION – PLEASE CLOSE ALL OPEN WINDOWS AND EXTERIOR DOORS"
"CODE GREY – AIR EXCLUSION – PLEASE CLOSE ALL OPEN WINDOWS AND EXTERIOR DOORS"

_____ Instruct staff to follow the Code Grey – Air Exclusion All Staff Job Action Checklist.

_____ Ensure all outside windows and doors are closed.

_____ Ensure all residents outside are moved to inside the building. Account for all residents and visitors. Refer to visitor's sign-in sheet and resident absence/outings log.

_____ Notify Executive Director/ Designate.

_____ Notify Maintenance Supervisor.

_____ Ensure the ventilation system is shut down (instruction provided in the home's Emergency Response Plan).

- If your home has an Air Conditioning unit such as a roof top unit that recirculates inside air, have your HVAC contractor adjust the economizer to ensure it is not bringing in any outside air and you may leave the air conditioner on.
- If your home has an air conditioning unit that requires outside air and the air quality conditions continue to be detrimental, shut down your air conditioning units and refer to policy/ procedure Preventing Heat-Related Illnesses

_____ Turn off the makeup-air unit (MUA) in the kitchen when gas fired equipment such as ovens and steamers are not in use. The MUA MUST be on when gas fired equipment is in use to eliminate carbon monoxide buildup

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Air Exclusion
Incident Manager Job Action Checklist

Respond

Record the time action was initiated

_____

Assign staff to each entrance to restrict the exit of residents, staff and visitors from within the home to reduce harmful effects from outside air. Ensure that each door has closed completely before opening the next door in the vestibules.
Note: *Although an individual cannot be legally prevented from exiting the building, ensure*
_____ *that they are provided an explanation on the potential hazards of the outdoor air quality.*

_____ Monitor residents, staff and visitors for abnormal breathing difficulties.

Establish contact with the local emergency services (Fire/Police) as appropriate to gather
_____ information on the extent of the hazard and to provide an update on the status of the home.

Recover

Air outside is no longer contaminated
Once receiving official word that the Code Grey – Air Exclusion emergency is over

Record the time action was initiated

_____ Notification received from:

_____ Known information:

Call an end to the Code Grey – Air Exclusion emergency by announcing or delegating a staff member to announce (repeat three times):
"CODE GREY – AIR EXCLUSION – ALL CLEAR"
"CODE GREY – AIR EXCLUSION – ALL CLEAR"
_____ *"CODE GREY – AIR EXCLUSION – ALL CLEAR"*

Instruct maintenance personnel to turn on air exchange systems. Ensure filters are checked
_____ and cleaned or replaced as necessary.

_____ Notify appropriate stakeholders (family, staff, senior management, etc.).

_____ Hold Debrief and analysis with staff, residents and visitors involved.

Debriefing and analysis notes will include the time and date of the debriefing, the location, list
_____ *of attendees, and notes from the discussion; what went well and what needs to be improved.*

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Air Exclusion
Maintenance Job Action Checklist

Date: _____ Name: _____

**Note, you may edit this job action checklist to be home specific. If some of the actions are not applicable to your home, remove them and add the correct actions.*

Respond

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

Shut down HVAC (heating, ventilation, air conditioning) systems to avoid drawing in externally contaminated air (schematics can be found in the home's Emergency Response Plan) (If your home has an Air Conditioning unit such as a roof top unit that recirculates inside air, have your HVAC contractor adjust the economizer to ensure it is not bringing in any outside air, your Air Conditioning can then be left on. If your home has an air conditioning unit that requires outside air and the air quality conditions continue to be detrimental, shut down your air conditioning units).

_____ Shut down completed at (time): _____

Shut down air system exhaust fans to avoid creating negative pressure within the building.

_____ Shut down completed at (time): _____

_____ Close vents (louvers), if possible: entrances and exits.

_____ Ensure all outside windows and doors are closed.

Open foyers with vestibule-style doors (first set closes before second set opens) one at a

_____ time after the other door is closed.

If the home has automatic doors, disconnect all the automatic function of the doors

_____ (instructions can be found in the home's Emergency Response Plan).

Recover

Air Exclusion – All Clear

Once receiving official word that the Code Grey – Air Exclusion emergency is over:

Record the time action was initiated

_____ Notification received from: _____

_____ Agency: _____

_____ Turn on air exchange/HVAC system(s).

_____ Check air filters and clean or replace as necessary.

_____ Reconnect automatic door function, if applicable.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Air Exclusion
Maintenance Job Action Checklist

Recover

Air Exclusion – All Clear

Once receiving official word that the Code Grey – Air Exclusion emergency is over:

_____ ***Record the time action was initiated***

_____ Participate in the incident debrief and analysis.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Air Exclusion
All Staff Job Action Checklist

Date: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Notify the Incident Manager upon discovery of contaminated air external to the home.

_____ Bring residents inside and close doors and windows upon hearing a Code Grey – Air Exclusion announcement.

_____ Follow the directions of the Incident Manager.

_____ Do not disrupt work procedures under a Code Grey – Air Exclusion alert; continue to provide quality care to residents.

_____ Turn off all exhaust fans including cooking hoods, dryers in laundry, tub room exhaust fans, and air exchange systems within the department.

_____ Do not initiate any new procedures that would use air exchange systems.

_____ Turn off any window air conditioner units in residents' rooms and around the home. Place towels or linens around the units where there are gaps between the units and the window to seal out any external contaminated air.

_____ Await further instruction from Incident Manager or designate.

_____ Assist in turning off any surrounding air exchange systems outside the department and/or unit, if required.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey Executive Director/Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations.
_____ Follow instructions from the Incident Manager.

Recover

_____ Notify your Regional Director of Operations.
_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.
_____ Notify the regulatory body and/or provincial health authority as applicable.
_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.
_____ Send communications regarding the incident to residents, families and staff as required.
_____ Arrange for staff support as needed (EAP, etc.)
_____ Participate in the debriefing and analysis session.
_____ Upload completed Debrief and Analysis Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE GREY

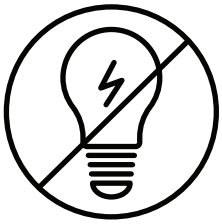
Emergency response - Air Exclusion and loss of essential services

What does it mean?

Code Grey is the designated phrase used to alert staff of a loss of any critical infrastructure in the home. There are 5 categories to a Code Grey that each have their own set of procedures regarding how to respond in the emergency event. These Code Grey categories are; Air Exclusion, Essential Services, Building Flood, Water Supply and Carbon Monoxide

What do I do?

Code Grey- Air Exclusion



- Stay indoors and prevent others from going outside.
- Assess the need for Code Grey activation and **Call 9-1-1** if needed
- **Announce code grey – Please close all open windows and exterior doors 3Xs**
- Close all windows and doors
- Turn off exhaust fans in your department including:
  - cooking hoods
  - dryers in laundry
  - tub room exhaust fans, and
  - air exchange systems such as HVAC (including individual air conditioning units in residents' rooms, if required)
- Monitor residents, staff and volunteers for abnormal breathing difficulties and provide treatment if needed

Code Grey- Essential Services

- **HVAC system malfunction/ breakdown:** Contact Maintenance and notify the Executive Director if the situation is extended and temperatures create an uncomfortable situation for residents.
  - Ensure residents are provided extra blankets, hot or cold beverages, etc. according to the situation.
- **Power failure:** Ensure the generator is operating and adequate fuel is available for refilling to maintain all life safety and other systems on emergency back-up. Turn off any non-essential operating equipment.

For all Code Grey emergencies: Be prepared to evacuate if necessary

Review it before you need it:

- Refer to your home's Emergency Planning and Management Manual, Code Grey
- Review the Code Grey plan that describes your area's role if a Code Grey occurs.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.08
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Grey- Essential Services	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Code Grey, Essential Services is announced when any of the homes essential services are not functioning (essential services include but are not limited to, telephones, computer systems, fire alarm system, mag lock systems, wanderguard systems, life safety systems, call bells, elevators, HVAC systems, power, etc.).

Prepare

The Executive Director/ Designate will:

- ☐ Be familiar with the procedures for disconnecting the automatic operation of doors, if applicable. Ensure instructions are included in the home's Emergency Response Plan.
- ☐ Ensure the home is equipped with a stand-by generator or has access to one quickly, with little notice.
- ☐ Ensure the home's Emergency Response Plan includes (printed) schematics of air exchange controls, ventilation, and/or HVAC equipment including each of their locations.
- ☐ Keep flashlights at each nursing station to assist in the event of a power failure.
- ☐ Consider purchasing inverter battery packs to allow beds to continue to be raised and lowered during a power outage.
- ☐ Ensure an adequate supply of extension cords is kept in a designated area of the home (for example a cabinet in each nursing station/Emergency Operations Centre) to have at least 2 extension cords for every 10 beds if home is not fully powered by a generator.

  Note: Improper extension cord use can be a potential fire hazard:
  - *Do not create octopus electrical connections (multiple extension cords plugged into a single power outlet);*
  - *Use extension cords capable of carrying the intended load (i.e., do not use an extension cord for a window A/C unit that is meant for a desk lamp); and*
  - *Do not plug a power bar into an extension cord (power bars should be plugged directly into the wall outlet).*

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

- ☐ Conduct a monthly review of the eMAR backup system to ensure it is backing up the files hourly. Refer to PointClickCare eMAR Backup System SOP for instructions on file backup.
- ☐ Ensure laptops, tablets and work phones are charged.
- ☐ Be aware of which printer is connected to the stand-by generator.
- ☐ Ensure laptops, tablets and work phones are charged.
- ☐ Be aware of which printer is connected to the stand-by generator.
- ☐ Ensure the home has flow sheets for documentation of resident care in the event of a power failure.

Respond- All Staff

- ☐ Do not turn on any electrical equipment.
- ☐ Be alert to the potential of elevator shutdown during a power failure. If the power has been "flickering", avoid the use of elevators.
- ☐ Ensure non-functioning maglock outdoor and stairwell doors are monitored.
- ☐ Refer to applicable policy/procedure, Preventing Heat-Related Illnesses if there is an HVAC system failure.
- ☐ Follow the procedures for a loss of essential services as per the designated Job Action checklists and follow direction from the Incident Manager.
- ☐ Direct Care Staff, complete and document resident checks every 15 minutes when the nurse call bell system is not working using the 24-hour Resident Check Log.
- ☐ Direct Care Staff, use a designated cellular phone to notify families, as applicable and if required.

TOOLS

1. Code Grey- Essential Services Incident Manager Job Action Checklist
2. Code Grey- Essential Services Maintenance Job Action Checklist
3. Code Grey- Essential Services Dietary Job Action Checklist
4. Code Grey- Essential Services Nursing Staff Job Action Checklist
5. Code Grey- Executive Director/Designate Job Action Checklist
6. 24 Hour Resident Check Log

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Essential Services
Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific. If some of the actions are not applicable to your home, remove them and add the correct actions.*

Respond
Power Failure

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Determine the extent of the power failure (limited to home area, full home or involves the immediate community).

_____ Evaluate what areas have power within the home and what areas do not. List areas without power:

_____

_____

_____ Announce or delegate a staff member to announce (repeat three times) if communications systems are functioning:
"CODE GREY – ESSENTIAL SERVICES – POWER FAILURE [PROVIDE LOCATION]"
"CODE GREY – ESSENTIAL SERVICES – POWER FAILURE [PROVIDE LOCATION]"
"CODE GREY – ESSENTIAL SERVICES – POWER FAILURE [PROVIDE LOCATION]"

_____ Assign staff to monitor all maglock doors that may be deactivated.
Note: *If the home does not have a generator, or the generator does not power the mag lock doors, the home must assign a person to supervise all doors leading to the outside and stairwells until power is restored.*
List staff and respective door assignments: _____

_____

_____

_____

_____ Delegate staff to check/reset the maglocks when the generator starts.

_____ Determine if the fire panel/ fire alarm system is still functioning.

_____ If the fire alarms continue to function but the fire department will not be notified of a fire, ensure all staff are aware of the need to call 9-1-1 immediately upon the activation of the fire alarm.

_____ If the fire alarm system and fire panel are not functioning, assign staff to conduct hourly checks around the home and document the checks using the Fire Watch Log in the Fire Safety Plan. Ensure all staff are aware of the need to call 9-1-1 immediately upon detection of a fire.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Essential Services
Incident Manager Job Action Checklist

_____ If the power failure involves the immediate community contact the local utility to determine extent of the power outage. Get details, including approximate time frame for power restoration:

_____

_____ Notify the Executive Director/ Designate if the power will be out for more than 30 minutes and provide an update on the home's status (e.g., building temperatures, life safety systems, resident care issues, etc.).

_____ Notify the Support Services Manager.

_____ Notify and instruct the Maintenance Lead to follow the Code Grey – Essential Services Maintenance Job Action Checklist.

_____ Instruct Nursing Staff to follow the Code Grey – Essential Services Nursing Job Action Staff Checklist.

_____ If power outage is expected to last over mealtimes, instruct Dietary Department Lead to follow the Code Grey – Essential Services Dietary Job Action Checklist.
Note: *This is only applicable for homes that have generators that don't power the entire home. Some generators provide full power and modified menus and dietary services are not required.*

_____ Ensure residents continue to receive essential care. If nurse call bell system is not functioning, ensure resident checks are being conducted and documented every 15 minutes using the 24-hour Resident Check Log.

_____ Instruct staff to turn off any non-essential operating equipment.

_____ Ensure that all life safety systems are operating.

_____ Direct maintenance staff to check the generator and fuel levels if the generator has been running for more than 4 hours.

_____ If the home has no generator, replace residents' large oxygen units with smaller portable ones. Call oxygen supplier if more oxygen tanks are needed (number on Emergency Phone List).

_____ If applicable, move residents who sleep on pressure relief mattresses (air mattresses) onto regular mattresses.

_____ If power failure will be longer than 1 hour, initiate the Incident Management System Team.

_____ Complete Critical Incident Report as per province-specific requirements and process, if required (i.e., if the outage length or in-home temperature meets critical incident criteria).

_____ Consider the possibility of an evacuation if situation is severe. If required, enact Code Green – Evacuation.

_____ Use battery operated lights in resident rooms and washrooms if overhead lighting is not powered.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

_____

_____ If the power failure results in a failure to the nurse call bell system, failure of maglocks and/or failure of elevators, use checklists below.

Nurse Call Bell System Failure

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Contact nurse call bell system repair company (number on Emergency Phone List), if failure is not related to power outage.

_____ Notify Executive Director/ Designate.

_____ Notify Maintenance Department Lead.

_____ Complete an initial assessment to determine where each resident is currently located.

_____ Announce or delegate a staff member to announce (repeat three times) if communications systems are functioning:
"CODE GREY – ESSENTIAL SERVICES – NURSE CALL BELL SYSTEM DOWN, REPORT TO YOUR ASSIGNED FLOOR NURSING STATION"

_____ Instruct care staff to conduct and document resident checks every 15 minutes using the 24-hour Resident Check Log.

_____ Assign staff to check all common areas at least every 15 minutes.

_____ Instruct staff to monitor and report resident movement to and from common areas/resident rooms to the Incident Manager.

_____ Consider using the fan out list to bring in more staff, if needed.

_____ Assign two staff members to determine if call bells are working by testing all of them. Log attempts/times:

_____

_____

Maglock Failure

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Essential Services
Incident Manager Job Action Checklist

Maglock Failure

Record the time action was initiated

_____ Contact maglock repair company (number on Emergency Phone List), if failure is not related to power outage.

_____ Notify Executive Director/ Designate.

_____ Notify Maintenance Department Lead.

_____ Announce or delegate a staff member to announce (repeat three times) if communications systems are functioning:
"CODE GREY – ESSENTIAL SERVICES – MAGLOCK SYSTEM DOWN, REPORT TO YOUR ASSIGNED FLOOR NURSING STATION"

_____ Instruct staff to monitor all doors as well as all stairwells on all floors, and front, back and side doors.
List staff and respective door assignments: _____

_____

_____

_____ Use staff fan out list to call in extra staff, one for each door, if needed.

_____ Ensure every door is constantly monitored by a dedicated staff member.

_____ Call in more staff to take over door monitoring if maglocks are down more than 8 hours.

Elevator Failure

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Contact elevator repair company (number on Emergency Phone List), if failure is not related to power outage. Provide detailed information on the issue including number of elevators down, etc.

_____ Notify Executive Director/Designate.

_____ Notify Support Services Manager.

_____ Notify Maintenance Department Lead.

_____ Announce or delegate a staff member to announce (repeat three times) if communications systems are functioning:
"CODE GREY – ESSENTIAL SERVICES – (ALL or #) ELEVATOR DOWN"

_____ Implement contingency plan to porter residents, food, linen and other supplies up/down the stairs in consultation with DOC, Support Services Lead and Dietary Department Lead. Refer

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Elevator Failure

Record the time action was initiated

_____ to home specific contingency plans in home's Business Continuity Plan for (but not limited to):

- _____ ☑ Portering residents
- _____ ☑ Delivering food
- _____ ☑ Delivering clean laundry
- _____ ☑ Removing soiled laundry
- _____ ☑ Removing garbage
- _____ ☑ Other

_____ If one elevator is still operational, consider the need to assign a person to act as an elevator operator to ensure equal and timely movement of both people and supplies
Name of individual assigned: _____

_____ Discuss and review with staff techniques and equipment on hand to move residents off the floor in case of an emergency.

_____ Notify Resident and Family Council of contingency plans.

Telephone System Failure

Record the time action was initiated

_____ Contact the telephone company to determine the reason of the failure and the expected downtime (the number can be found in the Emergency Contact list).

_____ Notify staff members of the failure, provide them with a cell phone to make emergency calls with. If the home does not have a cell phone, you can purchase a pay as you go phone from a local store.

_____ If the downtime is expected to last more than three hours, contact families, staff and the pharmacy to notify them of the downtime and ways they can reach the home (email, specific building cell phone, etc.)

_____ Determine if the failure has affected the call bell system, if the system is down, refer to section "Nurse Call Bell System Failure" above.

_____ Determine if the fire panel/ fire alarm system is still functioning.

_____ If the fire alarms continue to function but the fire department will not be notified of a fire, ensure all staff are aware of the need to call 9-1-1 immediately upon the activation of the fire alarm.

_____ If the fire alarm system and fire panel are not functioning, assign staff to conduct hourly checks around the home and document the checks using the Fire Watch Log in the Fire Safety Plan. Ensure all staff are aware of the need to call 9-1-1 immediately upon detection of a fire.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Loss of Computer Systems

Record the time action was initiated

_____ Determine the extent of the loss; is it the computer, an application on the computer or the internet.

_____ Conduct a check of other systems in the home to ensure they remain functioning (maglocks, phone system, call bells, fire monitoring systems, Wanderguard, etc.).

_____ If any other systems are affected, utilize corresponding checklists for their downtime to ensure resident and staff safety.

_____ If the issue is determined to be the internet, contact your internet provider (the number can be found in the Emergency Contact list) to determine the reason for the downtime and estimated length.

_____ If the issue is determined to be internet, Hot Spot from a Cell phone for access to policies on the Pulse and other essential information.

_____ If it is a computer issue and you have attempted regular problem-solving measures (open/close programs, restart computer, etc.), contact IT to determine the problem and obtain assistance.

_____ Instruct nursing staff to utilize the Essential Services Nursing Staff Job Action Checklist for resident charting and eMAR backup.

_____ Instruct staff to write down anything that will need to be charted or documented after the computer systems are back online.

HVAC Failure

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Announce or delegate a staff member to announce (repeat three times) if communications systems are functioning:
"CODE GREY – ESSENTIAL SERVICES – HVAC SYSTEM DOWN"

HEATING SYSTEM FAILURE:

_____ Notify Maintenance Department Lead to ensure HVAC contracted service provider (number on Emergency Phone List) is contacted, if failure is not related to power outage.

_____ Notify Executive Director/ Designate to discuss alternative heating options such as portable heaters. A disaster recovery company can supply rentals; the contact information can be found in the Emergency Phone List. Utilize the maintenance Portable Convection Heater Checklist prior to use of a portable heater.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

HVAC Failure

_____ ***Record the time action was initiated***

_____ Notify Support Services Manager to ensure there are adequate blankets for residents.

_____ Monitor conditions to ensure the safety of residents and staff when a heating failure is extended.

_____ Discharge residents to family until the heat is restored, if appropriate and required.

_____ Initiate non-emergency evacuation in situations where the temperature becomes a health or safety risk.

_____ If the temperature in the home falls below 22°C:

_____ Close windows, drapes and blinds to prevent heat from escaping and to reduce drafts.
If there is concern with the ability to get enough heaters for the entire time, identify one or more areas where residents may go together that heat can be provided. There should be at least one such area identified on each floor of the building where residents reside. These areas must be large enough to prevent over-crowding (allow 15 sq. ft. per resident) and be well ventilated.
Provide warm fluids (tea, coffee, hot chocolate, soups, etc.) to help raise core body temperatures.
Ensure residents are dressed appropriately, encourage layering of clothing, and warm sweaters.
Ensure appropriate warm bedding is available and supplied to each resident.
Encourage programs that promote movement to help promote circulation.

COOLING SYSTEM FAILURE:

_____ Ensure curtains and blinds are closed to areas exposed to the sun.

_____ Provide staff and residents with water, other cold beverages and snacks (popsicles, ice cream, etc.).

_____ Move residents out of rooms where the exterior walls are exposed to the sun.

_____ Where possible, install fans to create air movement within warm areas of the home.

_____ Open windows and exterior doors, with proper supervision, during cooler night-time hours.

_____ Monitor conditions to ensure the safety of residents and staff when a cooling failure is extended.

_____ Ensure clinical assessments have been completed that identify which residents are most at risk during extreme hot weather.

_____ Ensure an adequate amount of cold beverages and snacks are available for residents and staff.

_____ Notify the Executive Director/ Designate to discuss alternate climate control options.

_____ Call in extra staff so team members can take more frequent breaks.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

HVAC Failure

Record the time action was initiated

_____ Ensure activities do not include a lot of exertion.

_____ Initiate non-emergency evacuation in situations where the temperature becomes a health or safety risk.

Recover

Essential Services Restored

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Call an end to the Code Grey – Essential Services emergency by announcing or delegating a staff member to announce (repeat three times):
"CODE GREY – ESSENTIAL SERVICES – ALL CLEAR"
"CODE GREY – ESSENTIAL SERVICES – ALL CLEAR"
"CODE GREY – ESSENTIAL SERVICES – ALL CLEAR"

_____ If turned off, instruct maintenance personnel to turn on air exchange systems. Ensure filters are checked and cleaned or replaced as necessary.

_____ Assign a staff member to check/reset the maglock doors as applicable.

_____ Assign a staff member to check the fire panel and fire alarm system to ensure they are functioning properly.

_____ Notify appropriate stakeholders (family, staff, senior management, etc.).

_____ Hold Analysis and Debrief with staff, residents and visitors involved.
Debriefing and analysis notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Replenish used Job Action Checklists.

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Essential Services
Maintenance Job Action Checklist

Date: _____ Maintenance: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Loss of Power

Record the time action was initiated

Determine the:

_____ Cause of the power failure: _____

_____ Extent of the power failure: _____

_____ Approximate time frame for power outage: _____

_____ Report above information back to the Incident Manager.

_____ Ensure that the generator is operating and providing emergency electrical power to all life safety and other systems on emergency back-up, where applicable.

_____ Check the generator and fuel levels every 4 hours to ensure it is operating within normal parameters and that there is adequate fuel, where applicable.

_____ Ensure the fuel tank for the generator is refilled when it approaches 50% capacity. Contact a fuel vendor to deliver fuel to the home.

Recover

_____ When the power returns, ensure all electrical equipment is on and functioning appropriately.

_____ Participate in the analysis and debrief session.

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Essential Services
Dietary Job Action Checklist

Date: _____ Dietary Department Lead/designate: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Essential Services

Record the time action was initiated

_____ Refer to dietary policies and procedures for menus for emergency situations when planning alternate meals in emergency situations that may include: no gas; no electricity; and/or no water.

_____ Monitor/record the fridge/freezer temperatures during power failures. Refrigerated food must be discarded if the power failure causes any food to exceed 5°C (40°F).
Note: *Without electrical power, a full upright or chest freezer may keep food frozen for up to 2 days if the doors are kept closed. A half-full freezer may keep food frozen for up to 1 day. However, if the food has thawed it must be disposed of. Never re-freeze thawed food. If in doubt, dispose of the food.*

Emergency food deliveries:

_____ Call food delivery company (see Emergency Home List for contacts).

General:

_____ Develop and submit contingency plan to relevant regulatory authority depending on the situation.

_____ Arrange daily meetings to discuss meal plans and ensure all staff understands coordination of meal (dietary) working with DOC/ADOC for nursing cooperation.

_____ Use emergency menus. These are available for loss of power, gas, water, or combination.

_____ If elevator is not working, porter food up the stairs. Coordinate this process with DOC/ADOC as health care aides would need to help.

Loss of walk-in units: short term

_____ Use all reach in refrigerators/freezers in kitchen, basement and units.

_____ Arrange for storage from Food Supplier's refrigerated truck, or rent one, and utilize potential storage at sister homes.

Loss of walk-in units: long term

_____ Limit purchasing to smaller more frequent orders which can be stored in reach in fridge/freezer.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

_____ Modify menus to include more non-perishable items.

Loss of all refrigeration units: short term

_____ Change the menu and do a cook-off of perishable items.

_____ Lock walk-ins and strictly monitor access to prolong the food, following HACCP guidelines.

_____ Arrange for long-term planning such as rental or use of Food Supplier's refrigerated truck, rental of generator etc.

Loss of all refrigeration units: long term

_____ Limit purchasing to smaller more frequent orders.

_____ Change menus to non-perishable items.

_____ Follow emergency menus as needed.

Loss of some refrigeration units: short term

_____ Freeze what can be frozen and limit quantities of items needed for fridge. This may require more frequent ordering or trips to grocery store for milk, etc.

_____ Store refrigerated products in reach-in or unit fridges.

Loss of some refrigeration units: long term

_____ Limit purchasing to smaller more frequent orders.

_____ Follow emergency menus as needed.

Loss of freezing units short term

_____ Pull needed supplies for next 2 days to thaw in fridge and keep door closed, monitoring temperature and product.

_____ If available, use other freezer (reach-in and deep-freeze) as needed.

Loss of freezing units long term

_____ Change menus as necessary to use up product in freezer; pull, thaw, cook-off product.

_____ Change menus to non-perishable items, following emergency menus as needed.

_____ Call sister homes to store food; limit purchasing to smaller more frequent orders which can be stored in fridge and cooked as needed. Ice cream, etc. stored in reach-in and deep-freeze units.

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Essential Services
Dietary Job Action Checklist

_____

Total loss of main kitchen: short term

_____ Modify menus. Use emergency menus.

_____ Use servery units as needed to prepare breakfast items such as toast; steam tables can be used to cook eggs; use other sources of protein such as yogurt, cheese etc.

_____ Use coffee machines. Make cold cereal available (serveries are always stocked).

_____ Use disposable dishes.

_____ Set up kitchen prep area in nearby common areas, such as activity rooms.

_____ Daily menu items could be purchased at grocery store.

_____ Call sister homes to borrow food supplies or small equipment as needed.

_____ Plan with sister homes to prepare food and porter using HACCP guidelines.

Total loss of main kitchen: long term

_____ Change menus for the estimated time frame using emergency menus as needed.

_____ Arrange for refrigeration truck rental/use; call sister homes to store food.

_____ Limit purchasing to smaller more frequent orders.

Loss of cooking equipment: short term

_____ Modify menus. Use emergency menus.

_____ Use servery units as needed to prepare breakfast items such as toast; steam tables can be used to cook eggs; use other sources of protein such as yogurt, cheese, etc.

_____ Use coffee machines. Make cold cereal available (serveries are always stocked).

_____ Consider setting up kitchen prep area in a nearby common area, such as an activity room.

_____ Purchase daily menu items at grocery store if needed.

_____ Call sister homes to borrow food supplies or small equipment as needed.

_____ Plan with sister homes to prepare food and porter using HACCP guidelines.

_____ Contact kitchen repair company both for repairs and lending of any equipment (number on Emergency Contact List).

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

_____

Loss of cooking equipment: long term

_____ Change menus for the estimated time frame using emergency menus as needed.

_____ Arrange for refrigeration truck rental/use, call sister homes to store food.

_____ Limit purchasing to smaller more frequent orders.

_____ Temporarily take over other suitable common areas as needed.

_____ Arrange for borrowing or purchasing smaller cooking equipment.

Recover

_____ When the power returns, ensure kitchen equipment is functioning appropriately.

_____ Restock food in refrigerator and freezer as required.

_____ Participate in the analysis and debrief session.

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Essential Services
Nursing Staff Job Action Checklist

Date: _____ Nursing Staff: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Essential Services: No internet connectivity

Record the time action was initiated

_____ Use designated computer to access eMAR backup and print off. Refer to PointClickCare's eMAR Backup System SOP.

_____ Complete flow charts and resident documentation on paper.

_____ Contact Director of Care and Consultant Pharmacist if unable to access eMAR or eMAR backups on the computer.

Recover

_____ Update resident charts as required.

_____ Participate in the analysis and debrief session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey Executive Director/ Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations.
_____ Follow instructions from the Incident Manager.

Recover

_____ Notify your Regional Director of Operations.
_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.
_____ Notify the regulatory body and/or provincial health authority as applicable.
_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.
_____ Send communications regarding the incident to residents, families and staff as required.
_____ Arrange for staff support as needed (EAP, etc.)
_____ Participate in the debriefing and analysis session.
_____ Upload completed Debrief and Analysis Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessib format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

24-Hour Resident Check Log

Initial under the corresponding time after you have conducted the resident check in the assigned area.

Date: _____ Area: _____

BUILDING AREA/ROOM CHECK Q 15 MINUTE INTERVALS

TIME OF DAY	0600-0615	0615-0630	0630-0645	0645-0700	0700-0715	0715-0730	0730-0745	0745-0800	0800-0815	0815-0830	0830-0845	0845-0900	0900-0915	0915-0930	0930-0945	0945-1000
Initial																
TIME OF DAY	1000-1015	1015-1030	1030-1045	1045-1100	1100-1115	1115-1130	1130-1145	1145-1200	1200-1215	1215-1230	1230-1245	1245-1300	1300-1315	1315-1330	1330-1345	1345-1400
Initial																
TIME OF DAY	1400-1415	1415-1430	1430-1445	1445-1500	1500-1515	1515-1530	1530-1545	1545-1600	1600-1615	1615-1630	1630-1645	1645-1700	1700-1715	1715-1730	1730-1745	1745-1800
Initial																
TIME OF DAY	1800-1815	1815-1830	1830-1845	1845-1900	1900-1915	1915-1930	1930-1945	1945-2000	2000-2015	2015-2030	2030-2045	2045-2100	2100-2115	2115-2130	2130-2145	2145-2200
Initial																
TIME OF DAY	2200-2215	2215-2230	2230-2245	2245-2300	2300-2315	2315-2330	2330-2345	2345-2400	0000-0015	0015-0030	0030-0045	0045-0100	0100-0115	0115-0130	0130-0145	0145-0200
Initial																
TIME OF DAY	0200-0215	0215-0230	0230-0245	0245-0300	0300-0315	0315-0330	0330-0345	0345-0400	0400-0415	0415-0430	0430-0445	0445-0500	0500-0515	0515-0530	0530-0545	0545-0600
Initial																

Note: *This form may be used to document visual checks of resident rooms/areas during loss of essential services such as call bells, fire systems or at the discretion of the Incident Manager.*

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.09
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Grey- Building Flood	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

- ☐ Code Grey, building flood is announced when there is a flood affecting the inside of the building.
- ☐ Notify your Supervisor/Manager or the Incident Manager upon discovery of a building flood.
- ☐ All staff remain away from the area of the flood unless the Incident Manager has requested assistance and follow instructions from the Incident Manager.
- ☐ Evacuate residents from the area of the flood as required and instructed by the Incident Manager.
- ☐ Incident Manager and Executive Director/Designate; follow the procedures for a flood within the building as per the designated Job Action checklists.

TOOLS

1. Code Grey- Building Flood Incident Manager Job Action Checklist
2. Code Grey - Executive Director/Designate Job Action Checklist
3. Code Grey- Building Flood, Water Supply and Carbon Monoxide Poster

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Building Flood
Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific. If some of the actions are not applicable to your home, remove them and add the correct actions.*

Respond
Building Flood

Record the time action was initiated

_____ Notification received from: _____

_____ Extent of flood: ☐ Minor ☐ Moderate ☐ Severe ☐ Unknown

_____ Known information: _____

_____ Announce or delegate a staff member to announce (repeat three times):
"CODE GREY – BUILDING FLOOD – LOCATION"
"CODE GREY – BUILDING FLOOD – LOCATION"
"CODE GREY –BUILDING FLOOD – LOCATION"
PLEASE REMAIN AWAY FROM AREA

_____ Turn off or have maintenance turn off water supply (instructions can be found in the home's Emergency Response Plan):
- At the affected area (using affected area shut-off valve, i.e., sink/toilet/tub shut-off valve)
- At the main valve (for the entire home), if required.

Note: *There may be separate shut-off valves for hot- and cold-water supply.*

_____ Which valve(s) was shut off?: _____

_____ If the water supply is turned off at the main valve (for the entire home), enact *Code Grey-Water Supply.*

_____ Place "Caution Wet Floor" sign(s) in affected area if the extent of the flood is minor.

_____ Relocate residents, staff and visitors from affected area (refer to Code Green – Evacuation)
Note: *Extent of evacuation will be determined by level of risk to staff and resident safety and/or imminent damage to the building.*

_____ Notify Executive Director/ Designate.

_____ Notify Maintenance.

_____ Contact plumber to repair the leak if required.

_____ Remove or instruct staff to shut-off and/or remove equipment and supplies from the affected area if safe to do so. If the water is up to the electrical outlets, do not enter the affected area.

_____ Post a staff member at each entrance to ensure no residents, staff or visitors enter the affected area if the affected area cannot be secure.

_____ Instruct a staff member to mop up the water if the flood extent is minor.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Grey – Building Flood
Incident Manager Job Action Checklist

_____

_____ If the flood extent is severe, consider renting a sump pump to remove the water, or contact your local fire department for assistance, as needed.

_____ If the flood has caused an area of the home to be unsafe, enact Code Green and evacuate the area or entire home as required.

_____ Escalate the situation to the Regional Director of Operations as required.

Recover

Building Flood – All Clear

Once receiving official word that the leak has been fixed and the water in the affected area has been cleaned up.

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Call an end to the Code Grey – Building Flood emergency by announcing or delegating a staff member to announce (repeat three times):
"CODE GREY – BUILDING FLOOD – ALL CLEAR"
"CODE GREY – BUILDING FLOOD – ALL CLEAR"
"CODE GREY – BUILDING FLOOD – ALL CLEAR"

_____ Dry out all affected supplies and equipment to ensure no damage or mould growth.

_____ Assess the affected area. Dehumidifiers may need to be rented to dry the area thoroughly, a disaster recovery company may need to be used for this depending on the extent of the water damage (contact information can be found in the Emergency Contact list).

_____ Notify appropriate stakeholders (family, staff, senior management, etc.).

_____ Hold Analysis and Debrief with staff, residents and visitors involved.
Debriefing and analysis notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey Executive Director/ Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations.
_____ Follow instructions from the Incident Manager.

Recover

_____ Notify your Regional Director of Operations.
_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.
_____ Notify the regulatory body and/or provincial health authority as applicable.
_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.
_____ Send communications regarding the incident to residents, families and staff as required.
_____ Arrange for staff support as needed (EAP, etc.)
_____ Participate in the debriefing and analysis session.
_____ Upload completed Debrief and Analysis Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE GREY

Emergency response - Building flood, water supply and carbon monoxide

What does it mean?

Code Grey is the designated phrase used to alert staff of a loss of any critical infrastructure in the home. There are 5 categories to a Code Grey that each have their own set of procedures regarding how to respond in the emergency event. These Code Grey categories are; Air Exclusion, Essential Services, Building Flood, Water Supply and Carbon Monoxide.

What do I do?

Code Grey- Building Flood

- Remove residents/staff from affected area and restrict access to the area
- **Announce code grey – Building flood - Location 3Xs**
- Turn off the water supply at only the affected area if possible, or at the main valve if required (if the main valve is shut off, a Code Grey- Water Supply will be in effect)
- Contain the flood if possible, and mop up the water if a small amount, if a large amount a sump pump rental or assistance from the local fire department may be required

Code Grey- Water Supply

- **Announce code grey -Water supply - Do not consume tap water 3Xs**
- Provide residents with bottled water for drinking
- Use bottled water for cooking
- If it is a boil water advisory, follow instructions on the boil water Advisory Information Sheet
- Alternate sources of washrooms must be identified, these may be nearby facilities or portable toilet rentals



Code Grey- Carbon Monoxide

- Immediately evacuate all individuals from the area the alarm is sounding and restrict access to the area
- **Announce code grey– Carbon monoxide- Location 3Xs**
- Open all windows and outside doors in the area
- Shut down all fuel burning appliances in the area

For all Code Grey emergencies: Be prepared to evacuate if necessary

Review it before you need it:

- Refer to your home's Emergency Planning and Management Manual, Code Grey
- Review the Code Grey plan that describes your area's role if a Code Grey occurs.

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.10
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Grey- Water Supply	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

- ☐ Code Grey, water supply is announced when there is an issue with the water that limits, ceases, or contaminates the home's water supply, and/or makes the water unpotable and has the potential to affect health and safety.
- ☐ Follow the Boil Water Advisory Information Sheet to respond to boil water advisories. *Note: Information provided from the local public health authority or municipality shall supersede the Code Grey – Water Supply: Boil Water Advisory Information Sheet*
- ☐ Follow direction from the Incident Manager.
- ☐ Incident Manager and designated IMS Operations Manager - follow the procedures for a water supply disruption as per the designated Job Action checklists.

TOOLS

1. Code Grey- Water Supply Incident Manager Job Action Checklist
2. Code Grey- Water Supply Operations Manager Job Action Checklist
3. Code Grey- Water Supply Executive Director/Designate Job Action Checklist
4. Code Grey- Water Supply: Boil Water Advisory Information Sheet

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Water Supply
Incident Manger Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Water Supply

Record the time action was initiated

_____ Notification received from: _____

_____ Agency, if applicable: _____

_____ Contact Information: _____

_____ Known information: _____

_____ Announce or delegate a staff member to announce (repeat three times):
"CODE GREY – WATER SUPPLY – DO NOT CONSUME TAP WATER"
"CODE GREY – WATER SUPPLY – DO NOT CONSUME TAP WATER"
"CODE GREY – WATER SUPPLY – DO NOT CONSUME TAP WATER"

_____ Notify Executive Director/ Designate.

_____ Notify Maintenance Lead.

_____ Notify Support Services Manager

_____ Notify Dietary Department Lead

_____ Contact municipal offices to determine the severity and length of water supply disruption.
Note: *Always consider the timeline to be double what the city municipality says.*
Note details of information provided, including anticipated length of disruption:

_____

_____

_____ Communicate all important information gathered to the Executive Director/ Designate, floor nursing staff, Director of Care and all department leads.

_____ Provide residents and visitors with the Boil Water Advisory Information Sheet or the tip/information sheet provided by local public health authority or municipality, as required.
Refer to *Code Grey – Water Supply: Boil Water Advisory Information Sheet.*

Disruption lasting less than 4 hours:

_____ Distribute bottled water to units for resident use.

_____ Consider canceling non-essential programs/events/services, especially those involving outside visitors to save current water supply for residents and staff.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Water Supply
Incident Manger Job Action Checklist

_____

Disruption lasting more than 4 hours:

_____ Enact the Incident Management System (IMS) Operations Manager role.

_____ Consider using the fan out list to bring in more staff.

_____ Contact nearby buildings to request the use of their washrooms for staff and provide staff extended breaks to accommodate using the washrooms in outside facilities.
Note details external washroom facilities that staff can use:

_____

_____ _____

_____ Consider families taking home residents where practical.

_____ Make arrangements for additional bottled water (4 litres for every person every 12 hours).

_____ Consider the rental of portable toilets.

_____ Refer to contingency plans to provide care to residents including but not limited to the following:

Bathing/washing residents: _____

Cleaning spills/body fluids: _____

Cleaning soiled shared equipment: _____

Cleaning and sanitizing dietary equipment: _____

Washing soiled linens/clothing _____

Disruption lasting more than 24 hours:

_____ Collaborate with the IMS Team to consider a non-emergency evacuation.

_____ Consider using the fan out list to bring in more staff.

Advanced notice of water supply loss:

_____ Notify all departments to initiate contingency planning.
Note: *Plans should anticipate a water outage of up to double the anticipated time (e.g., if public works advises water will be out for 2 hours, plan for 4 hours)*

_____ Consider canceling all non-essential programming when there is advanced notice of a water disruption.

_____ Ensure there is enough bottled water to supply each person (resident and staff) with 4 litres every 12 hours.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Water Supply
Incident Manger Job Action Checklist

Recover

Code Grey – Water Supply All Clear
Once receiving official word from authorities that the water is safe and drinkable and/or water is flowing again:

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

Call an end to the Code Grey – Water Supply emergency by announcing or delegating a staff member to announce (repeat three times):
"CODE GREY – WATER SUPPLY – ALL CLEAR"
"CODE GREY – WATER SUPPLY – ALL CLEAR"
_____ *"CODE GREY – WATER SUPPLY – ALL CLEAR"*

_____ Notify appropriate stakeholders (family, staff, senior management, etc.).

Hold Debrief and Analysis with staff, residents and visitors involved.
_____ *Debriefing and analysis notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.*

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Water Supply
Operations Manager Job Action Checklist

Date: _____ Designated IMS Operations Manager: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Under the direction of the Incident Manager, make arrangements for additional supplies of bottled water to ensure on-site supplies are equivalent to four (4) liters per person per twelve (12) hours, for cooking and drinking water.

_____ Consider portable toilets for rental.
Note: *Some models are self-contained trailers that are wheelchair accessible with heating and air conditioning.*

_____ A water tanker can be used to provide water for flushing toilets using a pump/hoses or trolleys/pails to transport the water. This is a labour-intensive effort and has the added risk of wet floors causing a slip and fall hazard; therefore, if this option is chosen, caution needs to be exercised.

Recover

All Clear
Once receiving official word that the Code Grey – Water Supply emergency is over:

Record the time action was initiated

_____ Notification received from: _____

_____ Participate in the debrief and analysis session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey Executive Director/ Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations.
_____ Follow instructions from the Incident Manager.

Recover

_____ Notify your Regional Director of Operations.
_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.
_____ Notify the regulatory body and/or provincial health authority as applicable.
_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.
_____ Send communications regarding the incident to residents, families and staff as required.
_____ Arrange for staff support as needed (EAP, etc.)
_____ Participate in the debriefing and analysis session.
_____ Upload completed Debrief and Analysis Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Water Supply:
Boil Water Advisory Information Sheet

Drinking, Food Preparation and Teeth Brushing



Option 1: Provide bottled water.

Option 2: Boil tap water for at least 1 minute at a full rolling boil and allow to cool down before using. Water can be stored in jugs to be used at later times.

Handwashing, Bathing and Showering



- Unless informed otherwise by the local public health officials, it is safe to continue to wash your hands, bathe and shower during a boil water advisory.
- Ensure you scrub your hands with soap and water for at least 20 seconds and then rinse them under running water.
- When bathing and showering ensure no water is swallowed or put into the mouth. If there is risk of water being swallowed, offer a bed bath/ sponge bath instead.

Dishwashing



- Use disposable dishes and utensils for ease.
- If disposable dishes are not used, the dishwashing machine can be used if the water reaches a rinse temperature of 180°F (82°C) or higher or it has a sanitizing cycle.
- For hand washing dishes there are 2 options:

  Option 1: Boil tap water for at least 1 minute at a full rolling boil and wait until it has cooled before putting your hands in.

  Option 2: Wash and rinse dishes as normal. In another sink mix 1 teaspoon of unscented household liquid bleach per 1 gallon of warm water (example, if the sink fits 3 gallons of water, mix in 3 teaspoons of bleach). Soak all washed and rinsed dishes in the bleach-water mixture for at least one minute. Place dishes in drying rack to air dry.

Laundry



- Laundry services can be conducted as usual.

Cleaning



- For cleaning products that are mixed with water, the water should be one of 2 options:

  Option 1: Bottled water.

  Option 2: Tap water boiled for at least 1 minute at a full rolling boil and allowed to cool down.

- If water is used to wash/rinse surfaces, the water should be one of 2 options:

  Option 1: Bottled water.

  Option 2: Tap water boiled for at least 1 minute at a full rolling boil and allowed to cool down.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.11
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Grey- Carbon Monoxide	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Prevent/Prepare

The Executive Director/Designate will:

- ☐ Ensure preventive maintenance and inspections are conducted on all fuel-burning devices and equipment in the home such as furnaces, water heaters, kitchen equipment, etc. as per Preventive Maintenance program and manufacturer's requirements.
- ☐ Never use any generator inside the home.
  Generators are run outdoors, at least 6 metres (20 feet) from any window, door, or vent.
- ☐ Ensure carbon-monoxide detectors/alarms are installed in any room with a fuel burning appliance such as the kitchen, laundry, HVAC equipment rooms, etc. as well as at each nursing station.
  If using battery-operated or battery backed-up detectors, replace the batteries every 6 months (typically when clocks change each spring and fall).
- ☐ Ensure the home's Emergency Response Plan includes instructions on how to turn off the main gas supply and location of the main gas valve/switch, as well as instructions for shutting off other fuel/gas run equipment.

All Staff will:

- ☐ Report all damaged or suspicious equipment (including suspicious odours) immediately to maintenance staff.

Respond

- ☐ Announce Code Grey, carbon monoxide when carbon monoxide is detected in the home.
- ☐ Leave the affected area upon hearing a carbon monoxide detector alarm and/or upon an announcement of a Code Grey – Carbon Monoxide alert that identifies the area you are in.
- ☐ Follow the procedures for carbon monoxide as per the designated Job Action checklists and follow direction from the Incident Manager.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE					
SECTION:	Emergency Response Codes	**DESCRIPTION:**	Code Grey- Carbon Monoxide	**INDEX:**	EPM2-P10.11

TOOLS

1. Code Grey- Carbon Monoxide Incident Manager Job Action Checklist
2. Code Grey- Carbon Monoxide All Staff Job Action Checklist
3. Code Grey- Carbon Monoxide Executive Director/Designate Job Action Checklist

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Carbon Monoxide
Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Record the time action was initiated

_____ Notification received from: _____

_____ Agency, if applicable: _____

_____ Contact Information: _____

_____ Known information: _____

_____ Announce or delegate a staff member to announce (repeat three times):
"CODE GREY – CARBON MONOXIDE – LOCATION"
"CODE GREY – CARBON MONOXIDE – LOCATION"
"CODE GREY – CARBON MONOXIDE – LOCATION"

_____ Begin evacuation of the affected area where the alarm is sounding immediately. (Refer to Code Green – Evacuation)

_____ Instruct staff and provide assistance to open all windows and outside doors in the affected area.

_____ Instruct staff and provide assistance to turn off all fuel burning appliances in the area (e.g., stove, dryer, etc.).

_____ Call for a qualified service technician to attend.

_____ Notify Executive Director/ Designate.

_____ Notify Maintenance Lead.

_____ Call 9-1-1 in the event residents and/or staff are feeling unwell.

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Carbon Monoxide
Incident Manager Job Action Checklist

Recover

All Clear
Once a qualified service technician has fixed or eliminated the source of the leak and testing has determined no further presence of Carbon Monoxide:

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

Call an end to the Code Grey – Carbon Monoxide emergency by announcing or delegating a staff member to announce (repeat three times):
"CODE GREY – CARBON MONOXIDE – ALL CLEAR"
"CODE GREY – CARBON MONOXIDE – ALL CLEAR"
_____ *"CODE GREY – CARBON MONOXIDE – ALL CLEAR"*

_____ Notify appropriate stakeholders (family, staff, senior management, etc.).

Hold Debrief and analysis with staff, residents and visitors involved.
_____ *Debriefing and analysis notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.*

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey – Carbon Monoxide
Staff Checklist

Date: _____ Staff Member: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Record the time action was initiated

_____ Notification received from: _____

_____ Known information: _____

_____ Notify the Incident Manager upon hearing a carbon monoxide alarm.

_____ Follow the directions of the Incident Manager.

_____ Begin evacuating residents from the affected area where the alarm is sounding immediately. (Refer to Code Green – Evacuation)

_____ Open all windows and outside doors in the affected area.

_____ Turn on any electric-run exhaust fans including cooking hoods, tub room exhaust fans, and air exchange systems, as applicable, within the area where the carbon monoxide was detected.
Note: *Carbon monoxide is not combustible and does not pose a fire/explosion hazard.*

_____ Turn off all fuel burning appliances in the area (e.g., furnace, stove, dryer, etc.).

_____ Report to the Incident Manager any symptoms of carbon monoxide poisoning (headache, dizziness, weakness, vomiting, chest pain, confusion) being felt by you or any other staff, resident, or visitor.

_____ Restrict the entry of individuals into the affected area until the Incident Manager announces an All Clear.

Recover

After being notified that it is safe to return to the home area and the "all clear" has been announced.

_____ Return residents back to their home area.

_____ Participate in the debrief and analysis session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Grey Executive Director/Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations
_____ Follow instructions from the Incident Manager.

Recover

_____ Notify your Regional Director of Operations.
_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.
_____ Notify the regulatory body and/or provincial health authority as applicable.
_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.
_____ Send communications regarding the incident to residents, families and staff as required.
_____ Arrange for staff support as needed (EAP, etc.)
_____ Participate in the debriefing and analysis session.
_____ Upload completed Debrief and Analysis Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.12
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Brown- Hazardous/ Chemical Spill	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Prevent/Prepare

The Executive Director/Designate and housekeeping staff will:

- ☐ Store all hazardous materials as per Safety Data Sheets (SDS) and manufacturer recommendations.
- ☐ Do not store hazardous materials above shoulder height.
- ☐ Monitor all hazardous materials for expiry and dispose of them appropriately upon expiry.
- ☐ Keep all hazardous material in the receptacle they were bought in.
- ☐ Be trained in Workplace Hazardous Materials Information System (WHMIS).
- ☐ Post SDS in well known places in the home.
- ☐ Store spill kits in well known places in the home and be trained on their use.
- ☐ Identify where decontamination showers and eye wash stations are located.

Respond

- ☐ Code Brown is announced when hazardous materials are unexpectedly released and/or the size of the spill prevents staff from carrying out a safe cleanup.
- ☐ If you are responsible for cleaning spills - upon hearing a Code Brown called, go to the area of the spill and follow direction as per the designated Code Brown Job Action Checklist.
- ☐ Incident Manager and Executive Director/Designate - follow the procedures as per the designated Code Brown Job Action Checklist.
- ☐ If you are not responsible for cleaning the spill - upon hearing a code brown called, stay away from the area of the spill. If you are near the spill remove yourselves and others from the area.
- ☐ All staff - follow instructions from the Incident Manager.

TOOLS

1. Code Brown Incident Manager Job Action Checklist
2. Code Brown Individual Responsible for Cleaning the Spill Job Action Checklist
3. Code Brown Executive Director/Designate Job Action Checklist
4. Code Brown Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Brown Incident Manager
Job Action Checklist

Date: _____ Incident Manager: _____

Reporting staff member: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Spill

If it is a hazardous/chemical spill, follow the below checklist. If it is a noxious odour/fume unrelated to a spill, skip to the Noxious Odour/ Vapours checklist.

Record the time action was initiated *(note on the line below):*

_____ Time spill discovered.

Person discovering the spill: _____

Location of the spill: _____

Substance spilled (if known): _____

_____ Block off the area and establish a safety perimeter.

_____ Incident Manager will notify all staff of the "Code Brown" identifying the location (unit/area).

Announce, or designate a staff member to announce three times:

"CODE BROWN (location); residents and visitors please stay away from the area"
"CODE BROWN (location); residents and visitors please stay away from the area"
"CODE BROWN (location); residents and visitors please stay away from the area"

_____ After hours, notify the Executive Director/Designate to determine if maintenance staff should be called in.

If the spill is of a flammable material or there are any injuries/illness from the spilled material:

Note, if you have deemed it safe for the home to clean the spill, skip to the next section of this checklist titled, "If you have deemed it safe for the home to clean the spill" (information regarding how to assess if the spill is safe is included in this section as well).

_____ Call 9-1-1. Do NOT pull the fire alarm.

_____ Clear the area of all persons.

_____ Until the individual responsible for cleaning the spill arrives:

- **S** safely evacuate everyone from the immediate area and secure area
- **P** prevent the spread of vapours by closing doors
- **I** initiate appropriate spill procedure (see safety data sheet (SDS) binder)
- **L** leave all electrical equipment alone. do not turn on or off.
- **L** locate any information regarding the chemical (see SDS binder), if possible, and act accordingly

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Brown Incident Manager
Job Action Checklist

_____ Ensure there are no sources of ignition.

_____ Ventilate the area by opening windows (if safe to do so).

_____ Attend to any people who may be contaminated. Contaminated clothing must be removed immediately, and the skin flushed with water for no less than fifteen minutes. Utilize designated decontamination shower and/or eye wash station as required. Contaminated clothing is left for Spill Response Team to determine disposal or cleaning methods.

Note: *If the clothing contamination is flammable or highly toxic, then it should be disposed of not laundered.*

_____ Determined if an evacuation required: ☑ Yes ☑ No

_____ "Code Green" procedures follow and "Code Green" announced if emergency evacuation of area is required.

_____ Executive Director/ Designate notified if evacuation is required or injuries occurred.

_____ Fire Department arrival (if 9-1-1 called)

_____ EMS arrival (if 9-1-1 called)

_____ Police arrival (if 9-1-1 called)

If you have deemed it safe for the home to clean the spill:

The individual responsible for cleaning the spill can clean the spill if:

The home has the correct spill kit, resources and PPE to clean the material

The individual responsible for cleaning the spill fully understands the procedures to clean the material

The spill is a known material and of a manageable size to clean (under 1 liter)

The spill is not flammable

_____ Until the *individual responsible for cleaning the spill* arrives:

S safely evacuate everyone from the immediate area and secure area

P prevent the spread of vapours by closing doors

I initiate appropriate spill procedure (see safety data sheet (SDS) binder)

L leave all electrical equipment alone. do not turn on or off.

L locate any information regarding the chemical (see SDS binder), if possible, and act accordingly

_____ Maintenance staff arrive at the location to assess the situation

_____

Name: _____

_____

Name: _____

_____ Certified worker rep of the Health & Safety Committee

Name: _____

_____ Additional team members:

Name: _____

Name: _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Brown Incident Manager
Job Action Checklist

_____ Name and quantity of the substance spilled determined: _____

_____ Safety Data Sheet(s) (SDS) obtained

_____ Appropriate Personal Protective Equipment (PPE) for the spill available and utilized.

_____ Floor drains and other means of environmental release protected.

_____ Local Public Works Department notified if spill reached floor drains or has other environmental release.

_____ Individual responsible for cleaning the spill initiated clean-up.

_____ Contaminated material cleaned up properly, contained and labeled.

_____ External assistance requested of commercial spill response team (if required).

If external support requested for clean up:

Name and contact information of external support requested: _____

Company Name: _____

Contact Person: _____

Telephone: _____

Other contact info: _____

_____ Executive Director/ Designate notified of external assistance request

_____ Notify appropriate government/expert agencies for safety and environmental purposes such as legislative requirements for handling and clean-up.

_____ Initiate the Incident Management System and assigned roles if required.

_____ Proper disposal of waste material

Method of disposal: _____

Name of disposal company: _____

Contact Information: _____

Date/Time of removal: _____

_____ Surface of spill area decontaminated. Method of decontamination: _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Noxious Odour/Vapours

_____ Time odour/fumes discovered.

Person discovering the odour: _____

Location of the odour: _____

Substance causing the odour (if known): _____

Effects of the odour/vapours: _____

_____ Charge Nurse notified will assume the role of Incident Manager until relieved of the role by a more senior staff member.

_____ Remove all individuals from the area of the odour/ fumes. If they have been experiencing symptoms such as burning eyes, coughing, shortness of breath, weakness, etc. ensure they seek medical attention and send them to the hospital if necessary.

Block off the area and establish a safety perimeter.

_____ Incident Manager will notify all staff of the "Code Brown" identifying the location (unit/area).

Announce, or designate a staff member to announce three times:

"CODE BROWN (location); residents and visitors please stay away from the area"
"CODE BROWN (location); residents and visitors please stay away from the area"
"CODE BROWN (location); residents and visitors please stay away from the area"

_____ Ventilate the area by opening windows (if safe to do so).

_____ After hours, notify the Executive Director/ Designate to determine if maintenance staff should be called in.

Depending on the location of the odour/vapours and the equipment it could be released from, contact the appropriate maintenance company (i.e. washer/dryer, HVAC, kitchen equipment, etc.)

Company Name:

Contact Person:

Telephone:

Other contact info:

Actions taken by maintenance company:

_____ Executive Director/ Designate notified of external assistance request

_____ Notify appropriate government/expert agencies for safety and environmental purposes such as legislative requirements for handling and clean-up.

_____ Initiate the Incident Management System and assigned roles if required.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Recover

All Clear Procedures

_____ When the spill or noxious odour/vapour has been removed and cleaned and the area decontaminated, notify the staff and residents by announcing, or designating a staff member to announce three times:

"CODE BROWN ALL CLEAR"
"CODE BROWN ALL CLEAR"
"CODE BROWN ALL CLEAR"

_____ Arrange for operations to return to normal.

_____ Complete a situation/incident report and send to provincial authorities as required.

_____ Notify the regulatory body and/or provincial health authority as applicable immediately if any evacuation or displacement of residents occurs or if there is any disruption to the home operations.

_____ Notify appropriate stakeholders (family, staff, senior management, etc.).

_____ Hold Debrief and Analysis with staff, residents and visitors involved.

Debriefing and analysis notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Brown Individual Responsible for Cleaning the Spill
Job Action Checklist

Date: _____ Reporting Spill Response Team: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

Record the time action was initiated *(note on the line below):*

_____ Upon hearing the Code Brown alert, proceed to the spill location to assess the situation.

_____ The individual responsible for cleaning the spill may be the Incident Manager unless a more senior staff member is present.

_____ Use the *Code Brown Incident Manager Job Action Checklist* to determine if the spill is manageable or unmanageable.

Manageable Spills- Clean Up Procedures

_____ Initiate clean-up following the assessment of the spill and your team's capacity.

Clean up the spill only if:

You have the correct spill kit, resources, and PPE to clean the material

You fully understand the procedures to clean the material

The spill is a known material and of a manageable size to clean (under 1 liter)

The spill is not flammable

Note: *If the spill is outside the capability of your team, follow the steps outlined below in Unmanageable Spill Procedures*

_____ If possible, stop the source of the leak or spill.

_____ Consult the Safety Data Sheets (SDS) to understand the appropriate cleaning procedures and PPE required.

_____ Obtain the spill response kit. This kit will include absorbent materials and other equipment to disperse, collect and contain spill control materials (e.g., brushes, scoops, sealable containers).

_____ Protect all floor drains or other means of environmental release.

_____ Distribute loose spill control materials over the entire spill area, working from the outside, circling to the inside, reducing the chance of splash, or spread of the spilled chemical.

_____ Absorb the spilled materials using a brush and scoop to place materials in an appropriate container. Use polyethylene bags for small spills. Five-gallon pails or 20-gallon drums with polyethylene liners may be appropriate for larger quantities.

_____ Complete a hazardous waste sticker, identifying the material as spill debris involving (identify) chemical, and affix onto the container.

Note: *Spill control materials may need to be disposed of as hazardous waste. Refer to municipal public works for specifics based on the type and quantity of the chemical spilled.*

_____ Decontaminate the surface where the spill occurred using a mild detergent and water when

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

appropriate.

Unmanageable Spills

_____ Assess the spill. If the spill is determined to be outside the capabilities of the individual responsible for cleaning the spill, make arrangements for external assistance, which could include a commercial spill response team.

_____ Follow the Code Brown Incident Management Job Action Checklist, sections for, *"if the spill is of a flammable material or there are any injuries/illness from the spilled material" and/or "If external support requested for cleanup"*.

Recover

_____ Participate in the debrief and analysis session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Brown Executive Director/ Designate
Job Action Checklist

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Notify and update the Regional Director of Operations.
_____ Follow instructions from the Incident Manger.

Recover

_____ Notify your Regional Director of Operations.
_____ Ensure all incident documentation has been completed and any outside organizations have been notified as required.
_____ Notify the regulatory body and/or provincial health authority as applicable.
_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.
_____ Arrange for staff support as needed (EAP, etc.)
_____ Participate in the debriefing and analysis session.
_____ Upload completed Debrief and Analysis Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

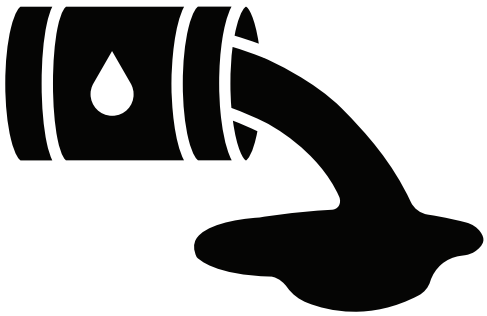
CODE BROWN

Emergency response - Chemical spill/ Hazardous material

What does it mean?

Code Brown is the phrase used to alert staff to a spill or leak involving a chemical, biological, or radioactive material that may pose a threat to your health or to the environment. This includes noxious odours/vapours.

What do I do?



When a spill is discovered do not touch

- Announce 3 times, "**Code brown + location**"
- Move people away from the spill to prevent exposure
- Isolate the area and deny entry
- Seek/provide medical attention if there are injuries
- Evaluate the spill:
  - Assess for hazards such as fire, explosion or chemical fumes
  - Stop source of spill if it can be done quickly and safely
  - Notify your supervisor/ the Incident Manager
  - Contain the spill if possible, if not and the spill is unsafe, **CALL 9-1-1**

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Code Brown
- Review the Code Brown procedures and checklist that best describes your role in a Code Brown situation

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.13
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Silver- Active Assailant	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Prevent/Prepare

- ☐ If you notice an individual has a weapon, do not open the door for them.
- ☐ Review and be familiar with the Active Assailant Emergency Response Action Plan and Code Silver Resident Care Decisions document.

Respond

- ☐ Announce Code Silver and the area where the active assailant is located when an individual with a weapon is in the building (a weapon may be any object that is used in a threatening manner).
- ☐ Remain away from the area of the active Code Silver.
- ☐ If you are in the area of the active Code Silver, leave the area and assist others to do so if safe.
- ☐ Follow the procedures for Code Silver as per the designated Job Action checklists and follow direction from the Incident Manager.

TOOLS

1. Code Silver- Active Assailant Emergency Response Action Plan
2. Code Silver- Resident Care Decisions
3. Code Silver- Incident Manager Job Action Checklist
4. Code Silver- All Staff Job Action Checklist
5. Code Silver- Executive Director/Designate Job Action Checklist
6. Code Silver Poster

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Silver
Active Assailant Emergency Response Action Plan

Any team member discovering becoming aware of an incident in which a weapon (firearm, edged weapon, explosive device, or instrument that can cause bodily harm or injury) is being used by an individual(s) actively engaged in killing, or attempting to kill, people, should do the following:



RUN

- Have an escape route and plan in mind
- If you are with a resident, see **Code Silver Resident Care Decisions**
- Leave the area of the threat immediately; leave your belongings behind
- Do not wait for others to follow and do not stop to assist anyone injured by the assailant. If an injured person is ambulatory and will not delay your escape, have them travel with you away from the building
- Choose a safe exit to leave the facility
- Call **911** when it is safe to do so



Depending on the situation/where you are, your best option may be to HIDE

- Get out of the assailant's view
- Block entry to your hiding place; close and secure doors. As able, cover any door windows, barricade the door with beds, desks, supply carts, heavy furniture
- Turn out the room lights. The room must seem to be empty.
- Stay quiet; silence your pager and cell phone; turn off any source of noise (e.g. radio, TV)
- If safe and able, particularly if there are injured individuals with you, call 911 (cell or landline) to report where occupants or the assailants are sheltering. Do what you can to help any injured individuals who are sheltering with you
- Remain where you are until Police announce themselves and they open the door to allow you out



If RUN or HIDE are not safe options, when your life is in imminent danger; prepare to FIGHT

- As a last resort and only when your life is in imminent danger
- Attempt to incapacitate the assailant
- Act with physical aggression. If with others, act as a team; use improvised weapons (e.g. fire extinguishers, scissors, chairs)

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Silver
Active Assailant Emergency Response Action Plan

Staff not in close proximity to the incident

Upon hearing of a Code Silver – Active Assailant:

- Stop all movement through the building
- Do not return to a Unit /Resident Home Area in close proximity to the incident
- Stay away from the incident location (if known)



Depending on the situation/where you are, your best option may be to HIDE

- Confidently and calmly assure other staff, residents, and visitors to remain within their secured locations
- Block entry to your hiding place; close and secure doors. As able, cover any *door* windows, barricade the door with beds, desks, supply carts, heavy furniture
- Turn out the room lights. The room must seem to be empty.
- Stay quiet; silence your pager and cell phone; turn off any source of noise (e.g. radio, TV)
- If safe and able, particularly if there are injured individuals with you, call **911** (cell or landline) to report where occupants or the assailants are sheltering. Do what you can to help any injured individuals who are sheltering with you
- Remain where you are until Police announce themselves and **they** open the door to allow you out



If HIDE is not a safe option, when your life is in imminent danger; prepare to FIGHT

- As a last resort and only when your life is in imminent danger
- Attempt to incapacitate the assailant
- Act with physical aggression. If with others, act as a team; use improvised weapons (e.g. fire extinguishers, scissors, chairs)

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Silver
Resident Care Decisions

Health care professionals may be faced with the decision about the safety of residents and visitors in their care who may not be able to evacuate due to age, injury, illness, disability or because of an ongoing medical procedure.

Every reasonable attempt to continue caring for residents must be made, but in the event this becomes impossible without putting others at risk for loss of life, certain decisions must be made.

If an assailant is on, or in close proximity to your unit/resident home area:

If an assailant is on, or in close proximity to your Unit/Resident Home Area, and you are with a resident you may have to make decisions about your own personal safety and the temporary discontinuation of resident care. Staff should take steps to protect residents if there is time and using a method that does not jeopardize the personal safety of the staff or interfere with Police actions. These steps may include evacuating the area or preventing entry to an area where the active assailant is located. However, during an active assailant situation staff may find there is not sufficient time to do anything but to ensure their own safety. In this instance, as soon as the situation has resolved the staff should promptly resume care of residents.

- Staff are to follow the ***RUN, HIDE, FIGHT*** action plan, even if you are engaged in resident care.
- Temporarily discontinue all resident care
- Assist residents to evacuate with you if they are able and if it is safe to do so
- If you are with a resident who cannot escape with you:
- Let the resident know that you have to leave
- Instruct the resident to remain calm and stay alert
- Instruct the resident to remain quiet and not to make contact with the assailant
- Turn off the lights in the resident room and secure the door as best you can upon exiting

If **RUN** is not a safe option, hide in as safe a place as possible. If it is best for you to remain in a resident's room, follow the **HIDE** actions, in the Response Algorithm. If you are in a specialty care unit, secure the unit entrance(s) by any means available (e.g. door locks, furniture, cabinets, bed, equipment, supply carts, etc.)

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Silver Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

Respond

_____ Time assailant discovered (approximate).

_____ Call 9-1-1 and notify the police of the situation. Tell them as much information as possible:

- Location and number of the assailant(s) (current, last known, and/or direction headed)
- Type and number of weapon(s)
- Description of the assailant(s)
- Any comments or demands made by the assailant
- Information on victims/injured persons and/or hostages (name, how many, location in the building)
- Any other information you feel may be relevant

_____ Keep the phone off the hook so the police can continue to listen to the situation.

_____ Time 9-1-1 called (approximate).

_____ Announce, or designate a staff member to announce three times,

"CODE SILVER *(location)"*
"CODE SILVER *(location)"*
"CODE SILVER *(location)"*

_____ Refer to *Code Silver – Active Assailant Emergency Response Action Plan* for information on what to do (run, hide, fight- only as a last resort) *and, Code Silver Resident Care Decisions* for further direction, as necessary.

_____ Evacuate the area of residents, staff and others if safe to do so.

_____ Do not allow anyone to enter the building (aside from Police).

_____ Delegate an employee to meet the police at the main entrance or outside the building if the assailant is in the main lobby area and provide as much information as you can to assist the police. Inform the police of any weapons the assailant is in possession of, if known. Provide optional access to the scene (e.g., stairways/elevators).

Provide the police an update on:

- Location and number of the assailant(s) (current, last known, and/or direction headed)
- Type and number of weapon(s)
- Description of the assailant(s)
- Any comments or demands made by the assailant
- Information on victims/injured persons and/or hostages (name, how many, location in the building)
- Precise location and floor plan of the area controlled by the assailants(s), if appropriate;
- Location of people who could not be evacuated and may or may not be injured;
- Location and number of telephones in the available area.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Silver Incident Manager Job Action Checklist

When Police Arrive

_____ Time of arrival (approximate).

_____ Ensure you do not present yourself as a threat to them:

- Drop any items in your hands (e.g. bags, jackets, etc.)
- Immediately raise hands and keep them visible at all times
- Remain calm and follow the officers' instructions; avoid screaming and/or yelling
- Avoid making quick movements toward officers

Do not stop to ask officers for help or direction when evacuating: proceed in the direction from which officers are entering the area.

As soon as police arrive, they will assume control of the situation.

_____ Provide police with access codes, cards and master keys as required to allow them to enter any area within the building.

_____ Initiate a lockdown of the building as instructed by the police.

_____ Account for all residents, staff, visitors and volunteers.

_____ Notify the Executive Director/ Designate if not already aware.

_____ Contact necessary authorities and governing agencies.

_____ Establish the Incident Management System Team in the Emergency Operations Centre.

_____ Appoint a Public Information Officer who will work with the Corporate Communications team to provide appropriate information to families and other stakeholders and communicate with the media. Provide them with the ICS checklist for their role.

Recover

Upon notification from the police that the situation has ended and all individuals in the home are safe the all clear procedures are in effect.

_____ Announce or delegate a staff member to announce three times,

"CODE SILVER ALL CLEAR"
"CODE SILVER ALL CLEAR"
"CODE SILVER ALL CLEAR"

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Account for residents, staff, volunteers and visitors.

_____ Ensure residents, staff, volunteers or visitors involved speak with the police following the incident.

_____ Ensure all staff involved complete a written report of the incident details and submits it to the Executive Director/ Designate before leaving.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Silver All Staff Job Action Checklist

Date: _____

Respond

Staff In the Area of the Active Assailant

Staff member identifying the threat:

_____ If you are the first to notice an active assailant, do not confront them. Run, evacuate if possible, or hide.

_____ If you are nearby to a supervisor/manager, notify them. Call 9-1-1 and notify the police of the situation. Tell them as much information as possible:

- Location and number of the assailant(s) (current, last known, and/or direction headed)
- Type and number of weapon(s)
- Description of the assailant(s)
- Any comments or demands made by the assailant
- Information on victims/injured persons and/or hostages (name, how many, location in the building)
- Any other information you feel may be relevant

Remain on the phone so the police can continue to listen to the situation and follow any instructions provided.

_____ If it is safe, evacuate the area/home and assist other staff, residents, and visitors around you to evacuate. See *Active Assailant Emergency Response Action Plan* page 1, for run, hide, fight procedures for staff member discovering the incident or in close proximity to the incident.

_____ Remain where you are until Police tell you it is safe to come out.

Staff in the area of the threat, upon hearing the Code Silver announcement:

_____ If it is safe, evacuate the area/home and assist other staff, residents, and visitors around you to evacuate.

See *Active Assailant Emergency Response Action Plan* page 1, for run, hide, fight procedures for staff member discovering the incident or in close proximity to the incident.

_____ If you were unable to leave the situation and are now in physical danger and under attack, cover and protect your head and neck with anything you can find and drop and roll if possible, trying to get cover or get away.

_____ Do not allow anyone to enter the area/home.

_____ Health care professionals may be faced with the decision about the safety of residents and visitors in their care who may not be able to evacuate due to age, injury, illness, disability or because of an ongoing medical procedure. Every reasonable attempt to continue caring for residents must be made, but in the event, this becomes impossible without putting others at

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Silver All Staff Job Action Checklist

risk for loss of life, certain decisions must be made. Utilize the *Code Silver Resident Care Decision* document to help make these difficult decisions.

_____ Remain where you are until Police tell you it is safe to come out.

Staff in another area of the home, upon hearing the Code Silver announcement:

_____ Stay where you are, do not attempt to return to your department or floor.

_____ Lock any external doors and doors between the home area you are in and the next home area.

_____ In small groups, hide in different rooms, preferably ones with doors that lock, and lock the door.

_____ See *Active Assailant Emergency Response Action Plan* page 2, for run, hide, fight procedures for staff member not near the incident.

_____ Health care professionals may be faced with the decision about the safety of residents and visitors in their care who may not be able to evacuate due to age, injury, illness, disability or because of an ongoing medical procedure. Every reasonable attempt to continue caring for residents must be made, but in the event this becomes impossible without putting others at risk for loss of life, certain decisions must be made. Utilize the *Resident Care Decision* document to help make these difficult decisions.

_____ Remain where you are until Police tell you it is safe to come out.

When police arrive:

_____ Ensure you do not present yourself as a threat to them:

- Drop any items in your hands (e.g. bags, jackets, etc.)
- Immediately raise hands and always keep them visible
- Remain calm and follow the officers' instructions; avoid screaming and/or yelling
- Avoid making quick movements toward officers
- Do not stop to ask officers for help or direction when evacuating. Proceed in the direction from which officers are entering the area

_____ Remain in a safe location and have residents and visitors remain in a safe location, as instructed by police until the situation is under control and all witnesses have been identified and questioned. Do not leave the safe location until police have instructed you to do so.

Recover

_____ If you were involved in the incident, complete a written report of the event and submit it to the Executive Director/ Designate.

_____ Participate in the analysis and debrief session.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Silver - Executive Director/ Designate
Job Action Checklist

Date: _____ Executive Director/ Designate: _____

Respond

_____ Seek updates from Incident Manager/ Police to determine actions.

_____ Provide any required support to Police such as, floor plans, opening locked doors, or contacting maintenance for the potential shutdown of utilities.

_____ Notify and update the Regional Director of Operations.

_____ Determine if the regulatory body and/or provincial health authority need to be notified during the emergency.

_____ Help set up the Emergency Operations Centre if required (procedures for the Emergency Operations Centre can be found in the Emergency Planning and Management Manual).

Recover

Upon notification that the active assailant situation has ended and all individuals in the home are safe the all clear procedures are in effect.

_____ Notify your Regional Director of Operations.

_____ Notify the regulatory body and/or provincial health authority as applicable.

_____ Notify the Health and Safety Committee and government labour authorities (e.g. Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Complete a critical incident report and any other incident documentation required.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff and resident support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE SILVER

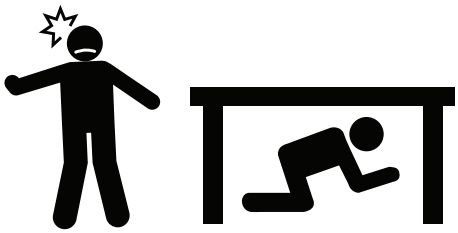
Emergency response - Active Assailant

What does it mean?

Code Silver is the designated phrase used to communicate and activate a standard organizational response to an incident in which a weapon (firearm, edged weapon, explosive device, or instrument that can cause bodily harm or injury) is being used by an individual(s) actively engaged in killing, attempting to kill or harm people within any of our Resident Care Homes.

What do I do?

- Hide and **Call 9-1-1** immediately. Provide as much information as possible about the situation
- Remain calm and evacuate if safe to do so
- Do NOT confront any individual that is armed with a weapon
- If possible, assist residents and others to evacuate the areand redirect
  others attempting to enter the area
- Hide if you are unable to evacuate
- Fight, only if you have no other option. Work together with nearby team members and use objects around you to assist
- Announce 3 times, "**Code Silver + location**" so that others know to stay away





Run as quickly and safely as possible



Hide if you can't run/evacuate



Only if you have no other option

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Code Silver
- Review the Code Silver plan and checklists that describes your area's role if you are in an Active Assailant emergency

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.14
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Purple- Hostage Situation	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Prevent/Prepare

- ☐ If you notice an individual with a weapon or acting aggressively, do not open the door for them and try not to allow them entry into the home.
- ☐ Review the Code Purple, Taken Hostage Tip Sheet so that you are familiar with what to do if you are taken hostage.

Respond

- ☐ Code Purple is communicated when an individual has been taken hostage in the home. Do not announce the code overhead as this may cause panic for the hostage taker.
- ☐ If you are not in the area of the active Code Purple, stay away.
- ☐ Get away from immediate danger and evacuate residents from the area if safe to do so.
- ☐ Call the police (9-1-1) and provide as much information as possible, i.e., location of the incident, number of hostage takers and hostages, physical description and names of the hostage takers and hostages (if known), any weapons involved (if known), your name, location, and telephone number.
- ☐ Incident Manager and Executive Director/Designate - follow the procedures for Code Purple as per the designated Job Action checklists.
- ☐ All staff - follow direction from the Incident Manager.
- ☐ Do not speak to the media. Do not use telephones or social media, including your wireless devices.

Recover

- ☐ Complete a situation report of the details of the incident and submit to the Executive Director/Designate before leaving the home.

TOOLS

1. Code Purple Incident Manager Job Action Checklist
2. Code Purple Executive Director/Designate Job Action Checklist
3. Code Purple Taken Hostage Tip Sheet
4. Code Purple Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Purple Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

Respond

_____ Upon witnessing or being notified of a hostage situation in the home, assess the situation and take charge.

If not already done, immediately call police at 9-1-1 and inform them of the situation.

Time called: _____

_____ Do NOT page code purple overhead; designate staff members to notify areas around the hostage situation if safe to do so. These staff members are to notify the individuals in the area of the situation and assist them to evacuate.

_____ Do not allow anyone entry into the home, designate a staff member to remain at the entrance to inform people if safe to do so.

_____ Do not attempt to physically assault the hostage taker or negotiate with them. Cooperate with them and do not anger them, if you are the person taken hostage, refer to the Code Purple Taken Hostage Tip Sheet.

_____ Call police with an update within 5 minutes of first call.

_____ Delegate a staff member to meet police at the front entrance to provide direction to the scene, including the possible use of emergency stairwells or alternate access points.

Time of police arrival: _____

_____ When police arrive, they will assume control. Have the following information ready to provide them;

- ❑ Identities and number of hostages (photos if available)
- ❑ Identities and number of captors (photos if available)
- ❑ Type and number of any weapons involved
- ❑ Threats and demands made
- ❑ Precise location and floor plan of the area controlled by the captors
- ❑ Location of anyone who couldn't be evacuated but aren't considered hostages
- ❑ Location and number of phones in the area

_____ Account for all persons in the building (residents, staff, volunteers, students, visitors, outside contractors), use the visitor sign in log to help with this.

_____ Notify the Executive Director/ Designate if not already aware.

_____ Contact necessary authorities and governing bodies

_____ Establish the Incident Management System Team in the Emergency Operations Centre (information on the Emergency Operations Centre can be found in the Emergency Planning and Management Manual).

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Purple Incident Manager Job Action Checklist

_____ Appoint a Public Information Officer who will contact the Corporate Communication team and will provide appropriate information to families and the media. Provide them with the IMS Checklist for their role.

Recover

Upon notification from the police that the hostage situation has ended and all individuals in the home are safe, all clear procedures are in effect.

_____ Announce or designate a staff member to announce three times,

"Code Purple- ALL CLEAR"

"Code Purple- ALL CLEAR"

"Code Purple- ALL CLEAR"

_____ Account for all persons in the building (residents, staff, volunteers, students, visitors, outside contractors), use the visitor sign in log to help with this.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Ensure residents, staff, volunteers, or visitors involved speak with the police following the incident.

_____ Ensure all staff involved completes a written report of the incident details and submits it to the Executive Director/ Designate before leaving the home.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Purple - Executive Director/Designate
Job Action Checklist

Date: _____ Executive Director/ Designate: _____

Respond

_____ Seek updates from Incident Manager / Police to determine actions.

_____ Provide any required support to Police such as, floor plans and opening locked doors.

_____ Notify and update the Regional Director of Operations.

_____ Determine if the regulatory body and/or provincial health authority need to be notified during the emergency.

_____ Help set up the Emergency Operations Centre if required (information on the Emergency Operations Centre can be found in the Emergency Planning and Management Manual).

Recover

Upon notification from the police that the hostage situation has ended and all individuals in the home are safe, all clear procedures are in effect.

_____ Notify the regulatory body and/or provincial health authority as applicable.

_____ Notify the Health and Safety Committee and government labour authorities (e.g. Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Complete a critical incident report and any other incident documentation required.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff and resident support as needed (EAP, etc.)

_____ Notify your Regional Director of Operations.

_____ Participate in the analysis and debriefing session.

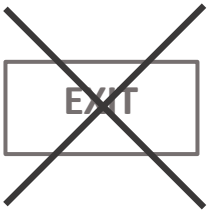
_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Code Purple – Taken Hostage Tip Sheet

When Taken Hostage



1. Remain calm, be polite, cooperate and follow instructions.
2. Do not leave unless you are certain you and anyone else with you is not in danger.
3. Hide all personal belongings such as phone, keys, name badge etc. Anything that may make your captor believe you are a person of importance or a threat.
4. Do not negotiate with the captor(s), just agree with them. Leave decision-making and/or action to resolve the situation to the police.
5. Avoid sudden movements or an aggressive / threatening stance or behaviour. Keep eye contact but do not stare at them. Try to act friendly and relaxed.



6. Do not speak unless spoken to, let your captor(s) know your name and use their name as much as possible if you know it to make a connection.
7. Meet demands with positive responses such as, "I'll do my best". Never say "no."
8. Cooperate with your captor(s) and follow instructions. Do not make any suggestions to your captor(s) as they might think you plan to escape or have other motives.
9. Do not turn your back on your captor(s) unless ordered to and maintain eye contact without staring.
10. Be reassured that your fellow workers and police negotiators are doing their best to get you out safely. Be prepared to speak with police over the phone.



11. Stay low to the ground and away from windows and doors, if possible.
12. Do not attempt to fight with or disarm your captor(s) unless this is the absolute last resort and your life is in imminent danger, in which case:

    Attempt to incapacitate the captor(s) with physical aggression. If you are with other hostages, work as a team and use anything you can find as a weapon; fire extinguisher, chairs, tables, lamps, etc.

Upon Arrival of Police





- DO NOT run or yell when rescue comes.
- Drop anything in your hands, take cover on the floor with your hands visible and remain still for your protection.
- Initial police response team will come in with guns and will not stop to help victims. Rescue teams will follow and will provide aid.
- Do not disturb possible evidence. This is a crime scene. Expect police questions.

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE PURPLE

Emergency response - Hostage situation

What does it mean?

Code Purple is the designated phrase used to alert staff to an incident where any person is being held against their will by another individual.

What do I do?



If you are being held against your will:

- Remain calm. If spoken to, respond in a calm voice
- Do not be aggressive or use threatening language or body language
- Do not engage in conversation
- Never say “no”
- Review the Code Purple Taken Hostage Tip Sheet in the Code
- Purple policy

If you encounter a Code Purple situation:

- Remove other individuals from the vicinity for their own safety. If
- moving is not advisable, shelter in place behind secured doors Prevent
- traffic by closing doors to the affected area
- **Do NOT announce a Code Purple**
- **Call 9-1-1**. Be prepared to provide as much information as possible (i.e., location of the incident, number of hostage takers and hostages, physical description and names of hostage takers/ hostages (if known), weapons involved, your name, location and telephone number)
- In unaffected areas, close and secure doors if possible. Ask visitor and residents to remain where they are until the “All Clear” is announced

Review it before you need it:

- Refer to your Home’s Emergency Planning and Management Manual, Code Purple
- Review the Code Purple plan, tip sheet and checklists that describes your area’s role if a hostage situation occurs

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.15
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code White- Violent Situation	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Code White is announced when there is a violent situation or person that is posing a threat to themselves, others or the property.

Prevent/ Prepare

- ☐ Do not allow entry to an individual acting aggressive or violent.
- ☐ Registered staff - conduct a risk assessment at admission on all residents to evaluate risk of verbal or physical responsive behaviours as well as document and communicate strategies to mitigate any risk from such behaviours.
- ☐ Executive Director/Designate - ensure all staff receive training to support individuals with a cognitive impairment or mental health disorder e.g. Gentle Persuasive Approach.

Respond

- ☐ Announce Code White when there is a violent situation or person that is posing a threat to themselves, others or the property.
- ☐ Use the De-Escalation Techniques tool when trying to de-escalate a potentially violent situation.
- ☐ Follow the procedures for Code White as per the designated Job Action checklists and follow direction from the Incident Manager.

TOOLS

1. Code White Incident Manager Job Action Checklist
2. De-escalation Techniques
3. Code White All Staff Job Action Checklist
4. Code White Executive Director/Designate Job Action Checklist
5. Code White Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code White Incident Manager
Job Action Checklist

Date: _____ Incident Manager: _____

Reporting Staff Member: _____

Respond

Upon seeing or being notified of a violent, aggressive or threatening individual in the home:

_____ Try to de-escalate or redirect the situation using words. Give the person space. If there are multiple staff members at the scene, have one staff member attempt to de-escalate the situation while the other staff member stands behind to assist in removing the speaking staff member from any direct contact as needed. It is best if only one staff member is talking and trying to de-escalate so they do not to further agitate or confuse the aggressive individual. Remove objects from the area that can be used as weapons, ensure there is a clear exit route.

If the aggressive individual can be calmed, a Code White does not need to be paged, and the police do not need to be called, the "All Clear" will be in effect.

Review Tool 2, *De-escalation Techniques,* for assistance on how to de-escalate an aggressive situation.

Never physically confront the agitated or aggressive individual, use action-oriented verbal communication and non-violent interventions to de-escalate the situation safely. Do not try to remove a weapon or subdue the person. Do not respond to threats.

If the aggressive person is a resident, continue to monitor the situation for potential for re-escalation. Be prepared to intervene again using de-escalation techniques such as Gentle Persuasive Approach. Attempt to identify triggers and remove those triggers as soon as possible. Keep your tone of voice non confrontational and volume level low.

_____ If anyone feels threatened, life endangered, there is a possibility of an escalation of violence, the individual has a weapon (initiate Code Silver) and/or the individual has taken a hostage (initiate Code Purple) remove yourself/others from the confrontation and call police, 9-1-1.
Time called: _____

_____ Direct staff to remove all persons from the area of the threat if safe to do so.

_____ Determine if any weapons are involved. Never confront someone with a weapon.

_____ Announce or designate a staff member to announce 3 times,
"Code White- *location*- stay away from *location*"
"Code White- *location*- stay away from *location*"
"Code White- *location*- stay away from *location*"

_____ Decide whether to enact the Incident Management System, if so, delegate IMS roles.

_____ Delegate a staff member to meet the police at the main entrance with directions, any background information and alternate access to the situation.

_____ Delegate a person to notify the Executive Director/ Designate if not already aware.

_____ Update the police within 5 minutes of the first call if they have not yet arrived.

_____ Ensure first aid is provided (when safe to do so; do not attempt to remove anyone who is hurt from the violent situation), and EMS (9-1-1) is called for any injuries.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code White Incident Manager
Job Action Checklist

Recover

All clear:

_____ When police have informed you that the situation is under control,

_____ Announce or designate a staff member to announce 3 times,

"Code White- ALL CEAR"

"Code White- ALL CEAR"

"Code White- ALL CEAR"

_____ Ensure all staff involved in the incident (including those involved in evacuating the area)
_____ complete an incident report on their observations and actions – prior to leaving.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

De-escalation Techniques

- **One person to take control of situation**
  Only one person should be managing an escalated situation with back up as needed. One person should take the lead for communication. Another person should be available to remove the speaking staff member from any direct contact as needed but should remain silent. Too many people talking can further agitate and confuse the aggressive individual.

- **Apologize**
  Even if you had no control over the situation, apologize for their experience. Be sincere. This will often diffuse a situation.

- **Empathize- Try to Understand their feelings.**
  It is likely that this situation is about their feelings, even if they are unable to vocalize them. Try to identify their feelings through the words, actions and expressions they are portraying to better understand what they are going through.

- **Listen and do not be Judgmental.**
  Do not dismiss or judge what the individual may say, listen to their concerns and understand that their thoughts and feeling are real.

- **Stay out of their personal space.**
  People often get upset or overwhelmed by others being too close to them, they may also feel threatened thinking you may use physical force.

- **Have an escape route.**
  Know your exits and be prepared to leave if the situation escalates.

- **Do not use threatening words or gestures.**
  Keep the tone of you voice calm, be mindful of what expressions are on your face, don't move quickly or abruptly. Avoid negative and aggressive words such as swear words and words with negative meanings.

- **Don't get emotional.**
  Remain calm and in control of yourself.

- **Do not give in to challenges and challenging questions.**
  Answering challenging questions is likely to be detrimental to the de-escalation. Responses can agitate the individual further or show them that they can obtain authority over you. Attempt to re-direct them by offering to help and offering solutions to the problem at hand.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

De-escalation Techniques

- **Give them time to think and make decisions.**
  People are less comfortable when they have to make quick decisions without the time to think it over. Give them the time to think about what they want, think about what you have said and make an informed non-rushed decision. Allow them to express their feelings and validate those feelings.

Follow these preferred ways of approaching residents with responsive expressionsrelated to dementia such as:

- **Know your resident.**
  Know what triggers the expressions of the resident and if there is an option to remove those triggers to de-escalate the situation. Use what you know about the resident to try and engage them.

- **Remove any bystanders if possible and give the resident space.**
  Allow the resident the space to de-escalate on their own, do not crowd them.

- **Remain calm.**
  Speak to the resident with a calm, soothing voice.

- **Offer support from a distance if the resident is being physically responsive.**
  Stay away from the resident so they cannot cause harm to you or themselves. Offer verbal support.

- **Don’t touch the resident.**
  Placing your hands on someone should only be used as a last resort and only if you are trained in a behavior support program such as GPA. Remove those in danger VS trying to physically handle the situation.

- **Know your surroundings.**
  Know your exit points if the situation escalates. Don’t back yourself into a corner.

- **Use close relationships.**
  If it is safe to do so, have someone well known and close to the resident attempt to engage them, call their name and try to divert their attention.

- **Only one person should be communicating with the resident.**
  Multiple people trying to communicate with the resident may confuse and overwhelm them. Support staff should remain close in case intervention is needed (e.g., to call 911).

- **If the resident starts to calm down, try to lead them to a place of safety.**
  This allows them to have the appropriate time and space to calm down without unnecessary distractions or triggers. Offer them support and medicate as ordered.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code White All Staff Checklist

Respond

- ☐ If you are in a situation with an aggressive individual or a resident who is exhibiting responsive expressions and are concerned about a risk of harm, try to verbally de-escalate or redirect the situation. Give the person space. If there are multiple staff members at the scene, have one staff member attempt to de-escalate the situation while the other staff member stands behind to assist in removing the speaking staff member from any direct contact as needed. It is best if only one staff member is talking and trying to de-escalate so they do not to further agitate or confuse the aggressive individual.
- ☐ If the aggressive individual can be calmed, a Code White does not need to be announced, the "All Clear" will be in effect.
- ☐ Review Tool 2, De-escalation Techniques for assistance on how to de-escalate an aggressive situation.

  Never physically confront the agitated or aggressive individual, use action-oriented verbal communication and non-violent interventions to de-escalate the situation safely. Do not try to remove a weapon or subdue the person.
- ☐ If you are in a situation where you feel threatened, your life is in danger, there is a possibility of an escalation of violence, the individual has a weapon (initiate Code Silver) and/or the individual has taken a hostage (initiate Code Purple) remove yourself from the confrontation and immediately call 9-1-1. Provide as much information as possible about the situation to the police.
- ☐ If you were unable to leave the situation and are now in physical danger and under attack, cover and protect your head and neck with anything you can find and drop and roll if possible, trying to get cover or get away.
- ☐ Advise the Incident Manager, if possible, of the Code White situation. If the Incident Manager is not in proximity, advise a staff bystander of the Code White, identifying the location, and if a weapon is involved.
- ☐ Ask the staff designate to notify the Incident Manager and ensure the Code White is announced.
- ☐ If you are in the immediate area, and/or responding to the Code White, assist in evacuating residents from the area of threat, if necessary. Follow instructions from The Incident Manager. The Incident Manager may instruct you to return to your duties once the situation is under control.
- ☐ Follow all instructions from any emergency services upon their arrival.

Recover

When the Incident Manager or emergency services informs the Code White has ended and you hear the "all clear" announced:

- ☐ Return to regular job responsibilities.

1. Complete a written report of the incident details and submit to the Executive Director/ Designate before leaving the home.
2. Attend and participate in the debrief held by the Incident Manager and Executive Director/ Designate.

- ☐ If the incident involved a resident and you are involved in the residents' care, assist the registered nursing staff to identify triggers for the resident's expressions to update the plan of care.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code White - Executive Director/ Designate Job Action Checklist

Respond

_____ Notify and update the Regional Director of Operations.

_____ Follow instructions from the Incident Manager.

_____ Consult Extendicare Occupational Health and Safety policies if the incident results in a critical or serious incident/injury.

RECOVER

_____ Notify your Regional Director of Operations.

_____ Notify regulatory body and/or provincial health authority as applicable if a resident is critically injured or is sent to hospital due to injury: initiate a critical incident report. Ensure all incident documentation has been completed and any outside organizations have been notified as required.

_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE WHITE

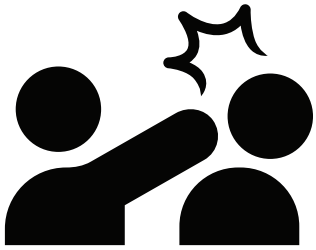
Emergency response - Violent situation

What does it mean?

Code White is the phrase used to alert staff to any aggressive or violent situation. Staff need to call a Code White when facing a situation that makes them feel unsafe or creates a fear of violence due to the behaviour of another person. The goal is to preserve everybody's safety, and to address the behaviour in a safe, respectful, and caring manner.

What do I do?

If you are involved in a Code White incident:



- Remain calm and leave the area if able to do so
- If you cannot leave, maintain a safe distance from the aggressor
- Call for help and announce 3 times, " **Code White+ location**" if able
- Talk in a low non-threatening voice. Clearly and firmly tell the aggressor that his/her behaviour is unacceptable, unwelcome and they should stop
- If a resident is involved, employ responsive behaviour management strategies as outlined in the plan of care
- Listen and give the aggressor the opportunity to express their feelings or demands, and try other means to diffuse the situation (refer to Code White De-escalation Techniques)

If you discover a Code White Incident:

- Announce 3 times, " **Code White + location**"
- If the situation puts the safety of residents, staff or visitors at risk, immediately **call 9-1-1**
- Remove other individuals from the area for their own safety. Reduce traffic by closing door in affected area.
- The staff member who has the best relationship with aggressor should handle the situation, if applicable ad safe to do so
- Ask other staff to help as required and **call 9-1-1** as appropriate
- When the emergency is over, announce 3 times " **Code White all clear**"

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Code White
- Review the Code White plan and checklist that describes your area's role if a Code White occurs

Extendicare

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.16
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Code Blue- Medical Emergency	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	April 10, 2026

POLICY

Emergency Response Codes

PROCEDURE

- ☐ Code Blue is announced when there is a medical emergency involving anyone on the property of the home.
- ☐ Incident Manager and Executive Director/Designate - follow the procedures for Code Blue as per the designated Job Action checklists.

All Staff:

- ☐ If you discover a medical emergency, contact a nurse or medical practitioner, or summon help immediately by calling out: CODE BLUE. I need help in (location).
- ☐ If it is determined to be a cardiac arrest and you are the first person on the scene trained in CPR, you must identify whether or not to initiate CPR by reviewing the Goals of Care (if available) to determine the resident's wishes. When a resident's wishes are unknown, you must proceed with CPR. Begin CPR following current Basic Cardiac Life Support guidelines and using appropriate PPE as determined by a Point of Care Risk Assessment (PCRA).
- ☐ You are only to conduct CPR if you are trained to do so.

  Note: *The decision not to provide CPR does not preclude the use of other forms of treatment or care. A resident who does not wish CPR remains eligible for all other appropriate treatments intended to increase comfort and quality of life, such as clearing a blocked airway (e.g. suctioning).*
- ☐ If you are the second staff at the scene, announce CODE BLUE.
- ☐ Call 9-1-1 and state, "Medical emergency (describe the specific problem)." The dispatcher will need to know:
  - Is the resident conscious?
  - Is the resident breathing?
  - What is the nature of the emergency?
  - The location of the incident.
  - The location telephone number.
- ☐ Report back to the emergency scene when calls are complete and follow instructions from the Incident Manager.

TOOLS

1. Code Blue Incident Manager Job Action Checklist
2. Code Blue Executive Director/Designate Job Action Checklist
3. Code Blue Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Blue Incident Manager
Job Action Checklist

Date: _____ Incident Manager: _____

Respond

_____ Upon notification of a medical emergency and not already announced, announce or designate a staff member to announce "Code Blue" three times.

_____ Attend the scene and bring required emergency equipment from the nursing station (suction machine, oxygen, v/s readers, etc.).

_____ If time allows, an informing call must be made to the resident's POA as soon as possible.

_____ Determine if EMS is required. If required and not already called, call or delegate a staff member to call 9-1-1. Provide First Aid/CPR as needed.
Indicate time 9-1-1 was called.

_____ If the medical emergency involves a resident, you must identify whether or not to initiate CPR by reviewing the Goals of Care (if available) to determine the resident's wishes.

When a resident's wishes are unknown, you must proceed with CPR if you are trained to do so.

Note: The decision not to provide CPR does not preclude the use of other forms of treatment or care. A resident who does not wish CPR remains eligible for all other appropriate treatments intended to increase comfort and quality of life, such as clearing a blocked airway (e.g. suctioning).

_____ Delegate a staff member to meet EMS/Fire Department if 9-1-1 was called. Instruct the staff member to bring them to the area of the emergency and provide them with any pertinent information.

_____ Redirect staff/volunteers who are not required to return to their duties.

_____ Complete the below information.

Record the time action was initiated *(note on the lines below):*

_____ Charge Nurse notified of Medical Emergency

_____ Patient originally observed/discovered by

_____ Arrival time of EMS

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Blue Incident Manager
Job Action Checklist

Arrival times and names of the responding nursing staff

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

A nurse or first aid trained staff member will assess the patient and determine what interventions are required.

Summary of Assessment:

Summary of Interventions:

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Blue Incident Manager
Job Action Checklist

Recover

All Clear:

_____ Announce or designate a staff member to announce 3 times,
"Code Blue- ALL CLEAR"
"Code Blue- ALL CLEAR"
"Code Blue- ALL CLEAR"

_____ Ensure all reporting requirements (critical incident report, health authorities, etc.) are met.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Code Blue - Executive Director/ Designate Job Action Checklist

Date: _____ Executive Director/Designate: _____

Respond

_____ Notify and update the Regional Director of Operations.

_____ Follow instructions from the Incident Manager.

Recover

All Clear:

_____ Notify your Regional Director of Operations.

_____ Notify next of Kin, as appropriate.

_____ Notify regulatory body and/or provincial health authority as applicable if a resident is critically injured or is sent to hospital due to injury: initiate a critical incident report. Ensure all incident documentation has been completed and any outside organizations have been notified as required.

_____ Notify the Health and Safety Committee and government labour authorities (e.g., Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Arrange for staff support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

CODE BLUE

Emergency response - Medical emergency

What does it mean?

Code Blue is the designated phrase used to alert personnel and provide clear guidelines and direction on how to respond to any person experiencing an acute medical emergency, airway threat, respiratory and/or cardiac arrest.

What do I do?

- CPR-Certified staff are responsible to support resuscitation until EMS arrives unless the individual is known to have a Do Not Resuscitate Order.
- Ensure **9-1-1** has been called.
- Direct EMS to the location of the emergency.
- Assist as directed throughout the resuscitation.
- If a resident, ensure the resident's records are available for EMS.
- Clear away any excess equipment or supplies; assist other residents away from the area.



- If involving a resident, notify resident's family/SDM if EMS transfer is necessary.

Review it before you need it:

- Familiarize yourself with any equipment you are responsible to use and its location.
- Know how to alert others; by call bell, overhead page, walkie-talkie, etc.
- Refer to your Home's Emergency Planning and Management Manual, Code Blue
- Review the Code Blue procedure and checklists that describes your area's role if a medical emergency occurs

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM2-P10.17
SECTION:	Emergency Response Codes	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Secure Home	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Response Codes

PROCEDURE

Respond

- ☐ If the home has been notified by local or provincial police/RCMP of a dangerous situation outside the home in which a secure home is required, or there is an undesirable and potential dangerous individual attempting to enter the home, the home is to immediately begin secure home procedures and announce secure home.

  Secure home means the outside windows and doors are locked and secured but the inside of the home is business as usual. If the threat is expected to remain outside Secure Home would be enacted.

- ☐ If the threat is an individual in the home with a weapon, enact Code Silver, if the individual has taken a hostage, enact Code Purple.
- ☐ Follow the procedures for Secure Home as per the designated Job Action checklists and follow direction from the Incident Manager.

All staff will:

- ☐ Close all outside windows and doors.
- ☐ Close all curtains/blinds to outside windows.
- ☐ Stay away from doors and windows leading to the outside.

TOOLS

1. Secure Home- Incident Manager Job Action Checklist
2. Secure Home- Executive Director/Designate Job Action Checklist
3. Secure Home Poster

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Secure Home Incident Manager Job Action Checklist

Date: _____ Incident Manager: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ If the secure home situation is not due to notification from police/RCMP, call 9-1-1 to notify them of the situation immediately. Tell them as much information as possible:

- Location and number of the undesirable individual(s) or situation (current, last known, and/or direction headed)
- Type and number of weapon(s) if any
- Description of the undesirable individual(s) or situation
- Any comments or demands made by the undesirable individual(s)
- Information on any possible injured persons (name, how many, location)
- Any other information you feel may be relevant

_____ Announce, or designate a staff member to announce three times,
"SECURE HOME"
"SECURE HOME"
"SECURE HOME"

_____ Designate staff to go immediately to any outdoor sitting areas to bring residents back into the building.

_____ Close and lock or designate a staff member to close and lock all outside windows and doors.

_____ Switch any doors to manual so they are controlled from the inside only.

_____ Close or designate a staff member to close curtains to outside windows/doors where possible.

_____ Follow any instructions provided by police.

_____ Do not allow anyone in or out of the home until police arrive or notify you that the secure home has ended.

Recover

Upon notification from the police that the situation has ended and all individuals in the home are safe the all clear procedures are in effect.

_____ Announce or delegate a staff member to announce three times,
"SECURE HOME ALL CLEAR"
"SECURE HOME ALL CLEAR"
"SECURE HOME ALL CLEAR"

_____ Unlock or designate a staff member to unlock doors and windows and open curtains.

_____ Provide support to residents, staff and volunteers impacted by the situation. Arrange for medical aid and/or counseling services as needed and requested.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Secure Home Incident Manager Job Action Checklist

_____ Account for residents, staff, volunteers and visitors.

_____ Ensure residents, staff, volunteers or visitors involved speak with the police following the incident.

_____ Ensure any staff involved complete a written report of the incident details and submits it to the Executive Director/ Designate before leaving.

_____ Hold Analysis and Debrief with staff, residents and visitors involved.

Analysis and Debriefing notes will include the time and date of the debriefing, the location, list of attendees, and notes from the discussion; what went well and what needs to be improved.

_____ Replenish used Job Action Checklists.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Secure Home Executive Director/ Designate
Job Action Checklist

Date: _____ Executive Director/ Designate: _____

**Note, you may edit this job action checklist to be home specific.*

Respond

_____ Seek updates from Incident Manager/ Police to determine any required actions.

_____ Provide any required support to Police such as floor plans.

_____ Notify and update the Regional Director of Operations.

_____ Determine if the regulatory body and/or provincial health authority need to be notified during the emergency.

_____ Help set up the Emergency Operations Centre if required for an elongated Secure Home (beyond 3 hours) (procedures for the Emergency Operations Centre can be found in the Emergency Planning and Management Manual).

Recover

Upon notification that the secure home situation has ended and all individuals in the home are safe the all clear procedures are in effect.

_____ Notify your Regional Director of Operations.

_____ Notify the regulatory body and/or provincial health authority as applicable.

_____ Notify the Health and Safety Committee and government labour authorities (e.g. Ministry of Labour) if any staff suffers a critical injury (as defined by the Occupational Health and Safety Act). Engage corporate Health and Safety department for support.

_____ Complete any incident documentation required.

_____ Send communications regarding the incident to residents, families and staff as required.

_____ Arrange for staff and resident support as needed (EAP, etc.)

_____ Participate in the analysis and debriefing session.

_____ Upload completed Analysis and Debrief Report in the Quality and Operations Reporting Team.

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

SECURE HOME

Emergency response

What does it mean?

Secure Home is the designated phrase to alert staff of the need to remain inside the home with the doors and windows locked.

What do I do?



Close and lock all outside windows and doors

- Close all curtains to the outside
- Announce 3 times, "**Secure Home**"
- If the secure home isn't informed by the police, **call 9-1-1** and provide them with as much detail as possible
- Stay away from all outside windows and doors
- Do not leave the building and instruct others not to leave
- Remain in Secure Home until instructed by Police that the threat has ended

Review it before you need it:

- Refer to your Home's Emergency Planning and Management Manual, Secure Home
- Review the Secure Home procedure and checklist that describes your area's role if a Secure Home is enacted.

Extendicare

SECTION 3- Emergency Plans

POLICY			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM3-P10
SECTION:	Emergency Plans	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Emergency Plans	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	April 10, 2026

POLICY

The Executive Director/Designate is responsible for ensuring the home has a home-specific Fire Safety Plan and Emergency Response Plan that is reviewed and updated as required and on an annual basis. The Fire Safety Plan, Emergency Response Plan, and Extendicare Pandemic Plan will be followed in the event of an emergency situation as required.

STANDARD

- All staff will be educated on what information is in their home-specific plans and Extendicare Pandemic Plan and where to locate them upon hire and annually thereafter.
- The home must conduct a Hazard Identification and Risk Analysis (HIRA) for the home using the HIRA guidelines and reflect this information in the Emergency Response Plan (ERP) and Fire Safety Plan (FSP), making emergency plans for the risks identified.
- The ERP will include a contingency plan for the care of residents in an emergency such as:
  - Detailed roles and responsibilities during an emergency (job action checklists)
  - Arrangements with local authorities and institutions to provide shelter and resources
  - Alternate sources to supply emergency power, water, food and fuel
  - A communications plan; and
  - Resident identification procedures, including photographs and identification bracelets.
- The home will:
  - Develop the ERP in accordance with provincial government and municipal regulations
  - Include community and home stakeholders in the planning process and document their involvement; and
  - Review it with the Regional Director of Operations and the Occupational Health and Safety Committee.
- The Executive Director/Designate will ensure the following information in the ERP is present and updated as necessary every year and as required when changes occur:
  - Emergency telephone numbers, including public utilities and government agencies
  - Head office emergency contacts, including Communications
  - Staff Call-back List (updated as required in order to be current)

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

- Key suppliers, contractors and support services
- All emergency code checklists
- IMS Team checklists
- Building site plan showing access roads, evacuation meeting area(s), etc.
- Floor plans identifying key life safety and exit information
- Floor plans identifying each room and attached room search checklists
- Maps showing the search area quadrants around the home; and
- Mutual aid agreements with other facilities for evacuation assistance

- The FSP will be reviewed annually and as required, the review date will be updated.
- The FSP will be reviewed and approved by the Chief Fire Official having jurisdiction where applicable.
- If at least one health authority at the local, provincial, federal, or international level has declared an official state of Pandemic outbreak the Executive Director/Designate will deploy the Extendicare Pandemic Plan as well as the home specific Outbreak Plan.

PROCEDURE

1. Fire Safety Plan
2. Emergency Response Plan
3. Pandemic Plan

REFERENCES

Alberta Emergency Management Agency
http://www.aema.alberta.ca/

Emergency Management Ontario
https://www.ontario.ca/page/emergency-management-ontario

Emergency Management Organizations
https://www.getprepared.gc.ca/cnt/rsrcs/mrgnc-mgmt-rgnztns-en.aspx

Manitoba Emergency Plan
https://www.manitoba.ca/asset_library/en/emo/mb-emergency-plan.pdf

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EMP3-P10.01
SECTION:	Emergency Plans	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Fire Safety Planning	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	February 27, 2026

POLICY

Emergency Plans

PROCEDURE

The Executive Director/Designate must:

- ☐ Complete the Fire Safety Plan (FSP) with home-specific information.
- ☐ Review and update the FSP annually and as needed (a plan template with updated dates and any changes will be provided by the Head Office Risk team annually).
- ☐ Provide the FSP to the local Fire Marshall to review and sign off upon creation of the plan and as anything changes in the plan as applicable.
- ☐ Organize, with the local fire department, when the annual fire and evacuation drill will take place.
- ☐ Designate an individual in the home to be responsible for fire safety, conducting fire drills, training staff on responsibilities and fire panel usage.
- ☐ Ensure 1 fire drill on each shift is conducted every month.
- ☐ After an inspection from the local fire department where action items have been identified for repair, complete the Fire Safety Inspection Action Plan with the individual responsible for fire safety in the home.

The individual responsible for fire safety in the home must:

- ☐ Plan 1 fire drill on each shift every month.
- ☐ Ensure all staff have participated in at least one live fire drill every year.
- ☐ Help in planning the annual fire and evacuation drill with the Executive Director/Designate and fire department.
- ☐ Complete the Fire Safety Inspection Action Plan with the Executive Director/Designate after an inspection from the local fire department where action items have been identified.
- ☐ Conduct a monthly test of the fire and life safety system to ensure it is properly functioning.
- ☐ Complete the second section, "Fire System Testing" of the Fire Alarm, Drill, Test or Repairs form during the monthly testing of the fire and life safety system.
- ☐ Complete the third section, "Unscheduled Fire Alarm Signal Activation" of the Fire Alarm, Drill, Test or Repairs form if the fire alarm is activated for any reason other than a planned drill.
- ☐ Complete the fourth section, "Fire Alarm Equipment Test or Repair" of the Fire Alarm, Drill, Test or Repairs form if the fire and life safety system requires a repair.
- ☐ After a fire drill:
- ☐ Complete the first section, "Fire Drill" of the Fire Alarm, Drill, Test or Repairs form after every fire drill.
- ☐ Complete the Fire Drill Evaluation Form- Scene of Fire Alarm during a fire drill on the

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

unit that the 'fire' occurs.

- ☐ Designate an individual on another unit/area of the home to observe the staff during a fire drill and complete the Fire Drill Evaluation Form- Other Areas during a fire drill.

TOOLS

1. Fire Safety Plan
2. Fire Safety Inspection Action Plan
3. Fire Alarm, Test or Equipment Repairs
4. Fire Drill Observation Form- Scene of Fire Alarm
5. Fire Drill Observation Form- Other Areas
6. Fire Watch Log
7. Fire Drill Evaluation Form
8. Record of Fire Drill Attendance Form

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Date of Last Review: March 25, 2026

Fire Safety Plan

The Pines Long-Term Care Home

98 Pine Street, Bracebridge, ON P1L 1N5

705-645-4488

FAX 705-645-6857

First Submitted: March 13th, 2026
Reviewed & Approved April 7th, 2026
Approved by: Jonathan Taylor - Fire Prevention Officer

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

FIRE SAFETY PLAN
TABLE OF CONTENTS

SECTION

Introduction 1.0
Distribution 2.0
Human Resources Audit 3.0
Building Resources Audit 4.0
Emergency Procedures For Residents 5.0
Emergency Procedures Sign 5.1
Emergency Procedures For All Employees 6.0
Emergency Procedure for First Responders 6.1
Emergency Procedures For Incident Manager 6.2
Emergency Procedures For Registered Staff 6.3
Emergency Procedures For Care Staff 6.4
Emergency Procedures For Social Workers 6.5
Emergency Procedures For Program Employees 6.6
Emergency Procedures For Dietary Employees 6.7
Emergency Procedures For Housekeepers, Janitors And Laundry Employees 6.8
Emergency Procedures For Maintenance Employees 6.9
Emergency Procedures For Volunteers 7.0
Emergency Procedures For Staff Call-Back List 8.0
Evacuation of Residents 9.0
Procedure for Evacuation of Residents 9.1
Team and Chain Formation 9.2
Persons Requiring Assistance 9.3
Accountabilities 10.0
Extinguishment, Control And Containment 11.0
Control of Fire Hazards 12.0
Alternative Measures 13.0
Tests, Inspections And Checks 14.0
Fire Drills 14.1
Record Of Fire Drill Attendance Form 14.2
Sample Fire Drill Schedule 14.3
Schematic Diagrams 15.0
Letter to Fire Chief 16.0
Out of Service Signage 17.0
Fire Watch 18.0

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

Introduction

SECTION 1.0

All provinces in Canada have adopted the National Fire Code Act (NFCA) and National Building Code as the standard. However, each province manages compliance and sets its own penalties for non-compliance. This Fire Safety Plan is required by the National Fire Code and the Alberta, Manitoba, Ontario, and Saskatchewan Provincial Fire Code Section 2.8:
This Fire Safety Plan is designed to provide occupant safety in the event of [a] fire, to provide effective utilization of the fire safety features of the building and to minimize the possibility of fires. This plan discusses what occupants are to do in the event of [a] fire, fire safety, supervisory staff and related duties, and other related issues.
The Fire Safety Plan will also assist firefighters in the performance of their duties, by providing floor plans, and building and resident information, if an emergency ever occurs.

SAFETY PLAN DIRECTIVE

In order for this plan to be effective, management, and staff must know the Fire Safety Plan and be able to implement it in the event of a fire. The National and Provincial Fire Codes requires the owner to be responsible for carrying out the provisions for fire safety (see Section 8 of this plan), and defines "owner" as "any person, firm, or corporation controlling the property under consideration." Consequently, the owner may be any one of, or a combination of parties, including building management, maintenance staff, and tenant groups.
Each home is required to keep a copy of this Fire Safety Plan, as outlined in Section 2 of this plan. Homes are also required to store a copy in the Fire Safety Plan box. The Fire Safety Plan box is located in either the main lobby or main entrance of the home. In addition, a key to open the Fire Safety Plan Box must be mounted adjacent to the fire plan box in a separate and locked box.
Any person(s) who contravenes any provision of the provincial fire code and every director and or officer of a corporation who knowingly concurs of such contravention is subject to the penalties outlined in the provincial fire code.
The Chief Fire Official is to be notified regarding any subsequent changes in the approved Fire Safety Plan.

Distribution

SECTION 2.0

1.0	**DISTRIBUTION OF THE FIRE SAFETY PLAN**	A copy of the fire safety plan must be distributed to the following stakeholders listed below.
1.1	**STAKEHOLDERS**	• The Bracebridge Fire Services • The Pines Long-Term Care Home, Bracebridge, Ontario
1.2	**DISTRIBUTION IN THE HOME**	The Pines • At least one hard copy upstairs (Maple/Birch) and one downstairs (Oak/Cedar)
2.0	**COMMITMENT TO RESIDENTS**	• Residents are provided with a resident handbook that outlines the fire emergency procedures and important information related to fire safety. • A Copy posted on the Resident and Family Portal as well as the District of Muskoka Website
3.0	**CHANGES TO THE FIRE SAFETY PLAN**	Once approved, the Bracebridge Fire Services will require the Fire Safety Plan, or parts thereof, to be resubmitted if: • There are any changes to occupancy or use; • There are any changes in standards; • The Fire Safety Plan has not been kept current; and/or, • The Chief Fire Official judges the current Fire Safety Plan no longer being acceptable. The Chief Fire Official is to be notified regarding any changes in the approved Fire Safety Plan and procedures. A sample letter to request approval from Chief Fire Official on changes to the Fire Plan can be found in Section 16.0 of this plan.

Human Resources Audit

SECTION 3.0

OWNER:	The Pines Long-Term Care Home	Telephone 705-645-4488
	98 Pine Street, Bracebridge, ON P1L 1N5	

ADMINISTRATOR: Jennifer Ridgley

Office Tele 705-645-4488: 4877 **Alternate Number:** 705-394-4854

DIRECTOR OF CARE: Dallas Miller

Office Tele 705-645-4488: 4861 **Alternate Number:** 705-394-4171

DIETARY MANAGER: Scot Gray

Office Tele 705-645-4488: 4801 **Alternate Number:** 705-644-4248

ACTIVITY MANAGER: Christina Rochette

Office Tele 705-645-4488: 4824 **Alternate Number:** 705-646-3485 ; 705-644-2814

ENVIRONMENTAL SERVICES MANAGER: Steve Files

Office Tele 705-645-4488: 4804 **Alternate Number:** 705-641-8643

PROPERTY MANAGEMENT:	The District of Muskoka 70 Pine Street Bracebridge, ON P1L 1N3 705-645-2100
MONITORING AGENCY:	**The Home is monitored by:** Huronia 544 Greer Road, Port Sydney, ON 1-888-363-9311 ; 705-730-0843

Building Resources Audit

SECTION 4.0

The Pines is located at 98 Pine Street, Bracebridge, ON, at/near the intersection of Pine Street and Taylor Road.

The building is a Public long-term care facility and is classified as a Group B Division 2 , Long Term Care Home.

The building is odd in shape and has two storeys in height and does not have a basement level.

The building has a sprinkler system throughout and is constructed with non-combustible fire breaks comprising of concrete block and a concrete slab floor.

The building is constructed of combustible construction materials.

The building contains a total of 160 resident suites, with a total capacity of 160 residents.

There are 96 bed units on the main floor and 64 bed units on the second Floor

FIRE DEPARTMENT CONNECTION

The Fire Department Connection is located at the Front of the building.

MAIN GAS SHUTOFF

The main gas shutoff is located at the front of the building to the right of the front entrance.

MAIN ELECTRICAL SHUT OFF

The main electrical shutoff is located behind the laundry room. Room number 413

WATER SHUTOFF – SPRINKLER SYSTEM/DOMESTIC WATER

The facility is protected with a Wet/Dry Sprinkler System.
The main sprinkler shutoff and domestic water supply are located in the sprinkler room. Room number 430.

1.0 FIRE ALARM SYSTEM

The facility is equipped with a two-stage detection and fire alarm system that can be activated automatically or manually.

- Manual activation occurs through the use of pull stations or the insertion of a key into the annunciator panels.
- Automatic activation occurs when the smoke or heat detectors trigger the main panel to activate. The activation of the sprinkler system will also engage the fire alarm system.

1.1 FIRE ALARM CONTROL PANEL

The building is equipped with a two-stage fire alarm system with fire alarm bell audible devices provided throughout the facility. Smoke and heat detectors, sprinklers, pull stations and kitchen hood suppression systems are also part of the system.
The main fire panel is located in the Electrical room, room number 429.
The home has 1 main generator for emergency power, as well as a second back-up if the first generator fails .
The fire alarm system is monitored by Huronia. They can be reached at 1-888-363-9311, 24 hours a day.

1.2 FIRE PANELS

The main Fire panel is located in the Electrical room on the main floor. There are fire panels in each of the nursing centers as well as in the vestibule.
The fire panels provide the facility with instant identification of locations under the threat of fire by listing the location of the detector (heat and/or smoke and/or flow) as well as the pull station that has been activated.
Refer to the schematic diagram(s) to identify the locations of the fire located in the vestibule. Alarm control panel and the annunciator panels.

1.3 FIRE ALARM BELLS

Fire alarm bells are located throughout the facility in all zones, as well as all service areas. The fire alarm system operates in two-stages; the alert stage and the alarm stage.
The fire alarm bells will transmit two distinctive sounds depending on the stage of the fire alarm system:

ALERT STAGE:	Initial activation and potential fire warning. The fire alarm bells will sound a long ring every 2 or 3 seconds.
ALARM STAGE:	Should an evacuation be required, the fire alarm bells wi ring continuously. Initiation of second stage is done manually at the pull station. Strobe lights will also be activated.

1.4 HEAT DETECTORS

Heat detectors detect when temperatures rise above a specified level or with a combination of rate and rise. Refer to schematic diagrams for location(s) of heat detectors.

1.5 SMOKE DETECTORS

Smoke detectors detect smoke concentration. Refer to the schematic diagrams for location(s) of smoke detectors.

1.6 PULL STATIONS

Pull stations are activated manually by pulling on the handle which will initiate the alert stage of the fire alarm system. The alarm stage can only be initiated by authorized persons by inserting the fire key into any pull station and turning it.
All employees must know the location of the pull stations and detectors throughout the building as well as fire zones of the facility. This will promote quick response in an emergency for those staff responsible to report to the fire scene. Refer to the schematic diagrams for location(s) of pull stations.

1.7 SPRINKLER HEADS

The flow of water activates the fire alarm through a water flow alarm switch on each floor.
An indicator light on the fire panel will identify the area in which the sprinkler head has been activated.
The building does have a sprinkler system.

1.8	**ELECTROMAGNETIC LOCKING DEVICES (MAG-LOCKS)**	Mag-locks are installed throughout the building on various exits and doors. They are controlled by the Fire Alarm System as an ancillary function. Upon activation of the Fire Alarm System, the Mag-locks will release their controlled doors. The Mag-lock system has a key switch located: in the front vestibule. The key switch provides two functions; release and reset. It can be used to release all Mag-locks at any time. It can also be used to reset the Mag-locks once they are released. If the Fire Alarm System caused the release of the Mag-locks, the Fire Alarm System must be returned to normal before the reset function of the key switch can be used. Refer to the schematic diagrams for location(s) of Mag-lock and their associated devices.
1.9	**DOOR HOLD OPEN DEVICES**	Door hold open devices are located at the doors separating the building into separate zones. These devices are controlled by the Fire Alarm Control System as an ancillary function. Upon activation of the Fire Alarm System, the door hold open devices release the doors. Refer to schematic diagram for location(s) of door hold open devices.
1.10	**TROUBLE ALARM**	A trouble alarm indicates a trouble situation in the fire alarm system. When the trouble alarm activates, a buzzer will sound at the annunciator panel and a light on the annunciator panel will flash under Trouble Alarm.
1.11	**SUPERVISORY ALARM**	A supervisory alarm indicates a change in a supervised portion of the fire alarm system. When the supervisory alarm activates, a buzzer will sound at the annunciator panel and a light on the annunciator panel will flash under Supervisory Alarm.

1.12	**OPERATION OF THE SYSTEM**	Activation of heat and smoke detectors, pull stations and sprinkler systems will automatically initiate the following events: a) Fire alarm bells will ring once every three seconds (alert stage); b) The LED annunciator in the Fire Control Panel and the remote annunciator panels indicate the zone of initiation; c) A manual Alarm stage activation will be required to cause the fire alarm bells to sound in alarm mode; d) Fire alarm bells will continue to sound during the alert or alarm stage until manually silenced; e) Ventilation systems will shut down; f) Hold open devices on doors will be released upon initiation of the alert stage of the fire alarm; g) Signal is sent directly to the monitoring station; and, h) Doors with magnetic locking devices are released upon initiation of the alarm stage of the fire alarm.
2.0	**BOILER ROOM**	Building is heated by: Gas and Electric Location of boiler room: second floor, service (staff) corridor
3.0	**EXITS**	Location of all exit signs in the building: See attached maps. Refer to schematic diagram for all exits.
4.0	**FIRE DEPARTMENT ACCESS**	The access route for the fire department is: around the back of the building The primary fire department entrance is: Pine Street Refer to schematic diagram for fire department access route(s).

5.0	**PORTABLE FIRE EXTINGUISHERS**	Fire extinguishers are located throughout the facility. The facility is equipped with: 55 ABC extinguishers The kitchen is equipped with: 1 AK located in the kitchen Refer to schematic diagram for location(s) of portable fire extinguishers**.**
6.0	**STANDPIPE AND HOSE SYSTEM**	A standpipe and hose system are provided in the building. The standpipe and hose system are supplied from a 4" riser. The riser isolation valve is located: to the North of the entrance Hose outlets are 1 ½" and no hose is supplied
7.0	**EMERGENCY LIGHTING**	Remote emergency lighting heads are located in the generator rooms of the facility. Remote heads are powered by battery packs. The duration of emergency lighting is one hour.
8.0	**KITCHEN HOOD SUPPRESSION SYSTEMS (KHSS)**	A wet chemical KHSS is provided in the kitchen. A manual release for the KHSS is located in the kitchen near the suppression system. Refer to schematic diagram for KHSS location(s).

9.0	**EMERGENCY GENERATOR**	In the event of power failure, the facility is equipped with one emergency generator and a second as a back-up. The emergency generator is located: main is located in it's own building at the back of the home and the other is in the generator room of the addition Refer to schematic diagram for location(s) of the emergency generator. In the event of power failure, the facility is equipped with an emergency generator that powers all life safety systems (i.e. fire alarm system, nurse call system, door security, resident elopement control system, emergency lighting, exit lights, and one elevator.
10.0	**KEY LOCK BOX**	The key lock box is located to the right of the front door. This lock box contains master keys for all interior locked doors.

Emergency Procedures For Residents

SECTION 5.0

PROCEDURE

WHEN YOU HEAR THE FIRE ALARM

ALL RESIDENTS	1. Stay calm. 2. Remain in your room with the door closed. 3. Turn off all non-medical equipment in the room. 4. Follow instructions given by employees and volunteers. 5. If you are away from your room, go with an employee to a designated safe location.
WHEELCHAIR RESIDENTS	1. Travel along the right-hand side of the hallway, close to the wall so that the corridor is not blocked. Go with an employee to a designated safe location.

IF THE FIRE IS IN YOUR ROOM/AREA	1. Leave the room/area immediately and close the door if possible. 2. Call for help and notify employees and other residents. 3. If able, pull the fire alarm at the pull station.
IF THE FIRE IS NOT IN YOUR ROOM/AREA	1. Remain in your room with the door closed and wait for an employee to assist you.
IF SMOKE IS COMING THROUGH THE DOOR	1. Place a wet towel at the bottom of the door to keep out smoke. 2. Attempt to notify staff of your location. Wait for help to arrive.

Emergency Procedures Sign

SECTION 5.1

IN CASE OF FIRE

UPON DISCOVERY OF FIRE

- Leave the fire area, immediately.
- Close all doors behind you. Alert staff and occupants.
- Activate the fire alarm system. Use the pull station.
- Call 9-1-1 (from a safe location) to request fire/rescue services.
- Use exit(s) to leave the building.
- Do not use elevators.

UPON HEARING ALARM

- If intermittent signal (1st stage) – stand by and prepare to leave the building.
- If continuous signal (2nd stage) – leave the building via the nearest exit. Close all doors behind you.

CAUTION

- If smoke is heavy in the corridor, it may be safer to stay in your area. Close door and place a wet towel at base of door.
- If you encounter smoke in stairway, use alternative exit or find refuge in nearest suite.

Emergency Procedures For All Employees

SECTION 6.0

PROCEDURE		
SUMMARY		Employees must respond immediately to any fire emergency following the procedures listed below. Employees must understand and be able to implement all procedures for fire emergencies. The procedures must be permanently posted by each manual pull station.
1.0	**SOUNDING OF FIRE ALARM**	All employees in the home are expected to respond immediately when the fire alarm sounds.
2.0	**RESPONSIBILITIES OF ALL EMPLOYEES**	1. All employees must immediately proceed to assigned area: fire scene, work area, or emergency operations centre (formerly known as the command centre). 2. Listen for an announcement of where the fire site is located while proceeding to the nearest annunciator panel. 3. Employees who are not assigned to the fire scene must return to their assigned work area unless they are at the scene of the fire or in a resident's room. In these situations, all employees are under the direction of the charge nurse (incident manager) and must stay at the site of the fire carrying out duties that are assigned to them. 4. Employees proceeding to the fire scene or to their work area are to move quickly, but cautiously, approaching stairwells and smoke barrier doors with caution. 5. Check all doors before opening and look through the window (if possible) for signs of a fire. If the door has no window, place the

		back of your hand on the door at the top and feel for heat and/or look for smoke at the base. 6. Proceed only if the way is free and clear of fire and smoke. If there are signs of smoke and/or fire, proceed to another stairwell and repeat the checks for safety. Never use elevators. 7. If it is unsafe to return to your work area, report to the Emergency Operations Centre. 8. Do not resume normal duties until the Incident Manager has called an end to the fire emergency situation. *NOTE: Always proceed to the fire scene in pairs; take a fire extinguisher.*
3.0	**RESPONSIBILITIES OF DEPARTMENT HEADS (EXCEPT OFFICE COORDINATOR), DESIGNATED DEPARTMENTAL STAFF, MAINTENANCE STAFF AND ANY OTHER PERSONNEL**	1. Go to the fire scene to assist as directed by the Incident Manager. Take a fire extinguisher to the scene. 2. Resume normal duties only after "Code Red – All Clear" is announced times three.

Emergency Procedure for First Responders

Section 6.1

PROCEDURE

DISCOVERY OF FIRE OR SMOKE

FIRST RESPONDER

1. Ensure that the **R-E-A-C-T** sequence is initiated:

R Remove endangered people from immediate danger (evacuate).

E Ensure room doors and windows are closed.

A Activate fire alarm pull station closest to the site of the fire. Activate the second stage of the fire alarm system if evacuation is necessary.

C Call 911 and say:

"There is a fire at The Pines located in: Name Exact Location of Fire Including Floor, Home Area and Room Number

T Try to confine/contain/extinguish fire, if possible, without undue risk using the nearest fire extinguisher.

Note: Place wet towels, sheets, blankets, pillows or other confining materials at the bottom of the closed door to the room with the fire, to restrict rapid transfer of smoke to the rest of the area.

OTHER EMPLOYEES

1. Stop all normal activities.
2. Assist the first responder. Take supplies (i.e. fire extinguisher) to the fire scene, *if needed*.
3. If the fire cannot be extinguished, close the door and place wet materials under the door to restrict the rapid transfer of smoke to the rest of the home.
4. At all times, take direction from the Incident Manager and/or IMS Leaders for evacuation procedures.
5. Once all residents have been evacuated from the fire scene, begin the team and chain evacuation procedure.
6. Move residents and visitors towards the evacuation site, ensuring that they are not exposed to smoke and/or blocking evacuation routes.
7. Check and evacuate all rooms and ensure that all:
   a. Lights are turned on,
   b. Oxygen concentrators are turned off,
   c. Windows and doors are closed, and
   d. Rooms that are evacuated are flagged.

Emergency Procedures For Incident Manager

SECTION 6.2

PROCEDURE

INCIDENT MANAGER OR DESIGNATE

Upon hearing the fire alarm, the Incident Manager must immediately:

1. Proceed to the nearest annunciator panel and read the fire location.
2. If the first to the main panel, announce or arrange to have announced (repeat three times):

   CODE RED – (SPECIFY LOCATION OF FIRE SITE)
3. Put on the orange vest located adjacent to the main fire alarm panel. Direct someone to collect the clipboard with the Resident list, next of kin list, fan out list, employees on duty list, etc.
4. Designate an employee to proceed to elevators and bring elevators to lower level. Do not allow the use of elevators during a fire emergency situation.
5. Proceed to the fire scene if safe to do so and assume control of the situation:
   a. Ensure all persons in immediate danger are rescued,
   b. Direct evacuation procedures as required,
   c. Communicate with others by sending an employee as a runner, and
   d. Liaise with fire department upon arrival as to the conditions at the fire site and the actions that have been taken.
6. Determine in consultation with fire department if employees must:
   a. Continue evacuation preparations, or
   b. Resume work with limited duties while remaining vigilant.
7. Direct activities of the Emergency Operations Centre (formerly known as the Command Centre) and Evacuation Area.
8. Determine in consultation with the fire department when the home is safe from fire.
9. Direct or take fire department personnel to annunciator and/or main panel. Only reset the fire alarm system when advised it is safe to do so.
10. Once the main fire panel has returned to 'system normal', reset the maglocks on all exit doors by cycling the maglock key by the front door fire panel.
11. Announce or arrange to announce (repeat three times):

    CODE RED – ALL CLEAR

PROCEDURE

FIRE ALARM PREPARATION

REGISTERED NURSE OR REGISTERED PRACTICAL NURSE

1. The Nurse is the RN/RPN in charge of their home area. Most often this is an RPN.
2. During a fire alarm, the Nurse is responsible for the safety of residents and visitors in their home area and response of personnel.
3. At the beginning of each shift, the Nurse confirms the attendance of "fire scene" PSWs in their area from a staffing schedule and confirms that staff is aware of their responsibilities in the event of a fire alarm.
4. Inspect their designated home area once during each shift to ensure that there is no danger of fire.

UPON HEARING THE FIRE ALARM

1. Always proceed to the fire scene in pairs
2. Take a fire extinguisher

REGISTERED STAFF/ CHARGE NURSE DUTIES

1. During the fire alarm, the nurses in charge of the units are responsible for the safety of residents and visitors in their home area as well as personnel on their unit.
2. In the event of a fire alarm, the unit change nurse should do the following in the order shown:
   c. Proceed immediately to the nurses' station in their designated unit and listen for the announcement over the telephone system. (Please note annunciator panels are also located in the nursing stations as well as the front vestibule).
3. Obtain a resident list.
4. If the fire is located within their home area, the nurse will proceed to the fire location and assume control until the Incident Manager arrives:
   a. Ensuring all persons in immediate danger are rescued,
   b. Direct evacuation procedure, as needed,
   c. Maintain control until relieved by the Incident Manager or the IMS leader.

5. If the fire is not located in their home area or unit, nurses will ensure staff are responding to the fire alarm appropriately, redirecting as required:
   a. Ensure staff are remaining in their home area to fulfill their duties (i.e. close fire doors, check all rooms for signs of fire and or smoke, clear hallways, report resident and visitor locations to the IMS leader).
   b. Account for all residents and staff of the home area using the resident list, write down location of residents and visitors in the unit. Check the resident sign-out list.
6. Turn off all unnecessary equipment.
7. If conditions with the unit become unsafe due to smoke, heat, or fire:
   a. Initiate evacuation of unit,
   b. Notify Incident Manager or IMS leader of the decision to evacuate, the route to be taken, and the intended destination.
8. When "Code Red – All Clear' has been announced three times, and staff return to the work area, check that all unused fire extinguishers are replaced.

Emergency Procedures For Care Staff

SECTION 6.4

PROCEDURE

UPON HEARING THE ALARM

CARE STAFF

1. Stop all normal activities. Ensure resident safety.
2. Assigned "fire scene" duties:
   a. Wait for fire location announcement or confirm location of fire on an annunciator panel.
   b. Designated PSW proceed to fire scene with a fire extinguisher.
   c. Report to and take direction from the Incident Manager (person wearing orange vest) at the site.
3. Staff remaining undertake a review or "sweep" of the area to:
   a. Check for fire conditions (smoke, heat, flames);
   b. Close all doors and windows in the area;
   c. Turn on all lights;
   d. Close any fire doors;

e. Ensure all exits are clear;
f. Clear all hallways and corridors; move all carts and portable equipment into safely stored areas;
g. Move all residents to a safe location, and
h. Direct all residents and visitors as required.
i. Report to the Emergency Operations Centre (formerly known as the Command Centre) of the outcome of the sweep including the location of all residents, volunteers, and visitors. Standby to await further instructions from the Nurse.
j. Monitor doors throughout fire alert and ensure wandering residents do not leave while exit door locks are deactivated.
k. Remain on emergency alert until the "all clear" is given to resume normal activities. Once the Incident Manager calls an end to the emergency "Code Red-All Clear", sweep the unit and notify all residents, volunteers, and visitors that it is safe to resume normal activities.
l. Ensure that all fire safety equipment is replaced.
m. Ensure that all residents are accounted for.

Emergency Procedures For Activities Staff

SECTION 6.6

PROCEDURE

UPON HEARING THE ALARM

ACTIVITIES EMPLOYEES

1. If you are involved in a program and in a safe location (separated from the fire location by two sets of doors), close the door and supervise the residents.
2. If you are in a unit, report to the Nurse for directions.
3. If you are not actively involved in a program and not in a unit, return to the Activities office.
   c. Close windows and doors,
   d. Check for residents in the vicinity and ensure their safety,
   e. Flag all rooms that have been evacuated, and
   f. Report to the Emergency Operations Centre.

Emergency Procedures For Dietary Staff

Section 6.7

PROCEDURE

UPON HEARING THE ALARM

DIETARY EMPLOYEES

1. Turn off all kitchen equipment.
2. Before leaving the kitchen, turn off ceiling fans, close doors and windows.
3. Check other areas to ensure that all windows and doors have been closed.
4. Where appropriate, assist residents via planned evacuation routes to ensure their safety.
5. Flag all department rooms that have been evacuated.
6. Report to the Emergency Operations Centre (formerly known as the Command Centre) for assigned duties.

COOKING APPLIANCE FIRES

DIETARY EMPLOYEES

4. If a fire occurs involving the cooking appliances, pull the pin to activate the fixed extinguishing system. The extinguishing nozzles mounted under the hood will discharge a wet extinguishing agent extinguishing the fire.
5. If it is not possible to pull the pin, the system will automatically discharge the extinguishing agent when the heat from the fire releases the fusible links.
6. When the system discharges, the building fire alarm system will activate and the gas supply to the cooking appliances is cut off.
7. Note: The “K” type extinguisher is never to be used unless the fixed extinguishing system has deployed first.
8. The “K” type extinguisher is primarily meant to be left for use by the responding Firefighter.
9. If one is installed in the cooking area and if it is safe to do so, a portable BC fire extinguisher may be used by staff to extinguish small cooking fires before the fixed extinguishing system activates.
10. Note: Never use an ABC fire extinguisher to extinguish a fire involving cooking appliances installed under the exhaust hood.
11. No attempt should be made to reset the kitchen suppression system.
12.

Emergency Procedures For Housekeepers, and Laundry Employees

Section 6.8

PROCEDURE

UPON HEARING THE ALARM

HOUSEKEEPERS

1. Lock and move housekeeping cart to a safe location out of the hallway and line of traffic.
2. Staff assigned to "fire scene" duties:
   a. Proceed to the fire scene,
   b. Take a fire extinguisher.
   c. Report to and take direction from the Incident Manager (person wearing orange vest)
3. Staff working in a resident home area are to remain in the area and check:
   a. Check for fire conditions (smoke, heat, flame),
   b. Close all doors and windows in the area,
   c. Turn off the lights,
   d. Close any fire doors that have failed to close,
   e. Make sure all exits have clear access,
   f. Check that the portable fire extinguisher is available,
   g. Clear all the hallways by moving all carts and equipment into rooms,
   h. Move all residents and visitors in an open area into a room with a door (resident room, activity room, dining room, etc.) and close the door.
   i. Direct residents and visitors to stay in their current location with the door closed until the "all clear" is announced,
   j. Proceed to the Emergency Operations Centre (formerly known as the Command Centre) Note Location and report the outcome of the initial "sweep" including the location of all residents, visitors, volunteers, and others.
   k. Standby at the Emergency Operations Centre to await further instructions,
   l. Monitor doors throughout the fire alert as assigned to ensure wandering residents do not leave while fire door locks are deactivated.
4. Remain on emergency alert until "Code Red-All Clear" is announced. Once an "all clear" has been given, "sweep" the unit to notify residents, visitors, and volunteers that it is safe to resume regular activities, open doors and reassure residents.

LAUNDRY STAFF	1. Turn dryers to cool down phase and turn off all other equipment in the laundry room. 2. Monitor the area for any residents or visitors.

Emergency Procedures For Maintenance Employees

SECTION 6.9

PROCEDURE

UPON HEARING THE ALARM

MAINTENANCE EMPLOYEES	1. Lock and move cart(s) to safe location. 2. Check for fire conditions (smoke, heat, flames). 3. Close all doors and windows in the area before leaving. 4. Turn off all lights. 5. Make sure all exits, and planned evacuation routes are clear. 6. Lock and supervise elevators. 7. Report to Emergency Operations Centre (formerly known as the Command Centre).

Emergency Procedures For Volunteers

SECTION 7.0

PROCEDURE

UPON HEARING THE ALARM

VOLUNTEERS

1. STAY CALM.
2. Stay with residents in a safe location.
3. If not with residents, proceed to nearest nursing station desk and wait for further instructions from staff.
4. Do not run.
5. Resume normal duties only after a "Code Red – All Clear" is announced.

IF YOU DISCOVER A FIRE

VOLUNTEERS

1. Ensure that the R-E-A-C-T sequence is initiated:

R Remove endangered people from immediate danger (evacuate).

E Ensure room doors and windows are closed.

A Activate fire alarm pull station closest to the site of the fire. Activate the second stage of the fire alarm system if evacuation is necessary.

C Call 911 and say:

"There is a fire at The Pines located in: Name Exact Location of Fire Including Floor, Home Area and Room Number

T Try to confine/contain/extinguish fire, if possible, without undue risk using the nearest fire extinguisher.

Note: *Place wet towels, sheets, blankets, pillows or other confining materials at the bottom of the closed door to the room with the fire, to restrict rapid transfer of smoke to the rest of the area.*

2. Report to Emergency Operations Centre and wait until tasks can be assigned. You will be oriented and assigned to specific tasks and will receive support and supervision from management and supervisory staff.
3. Volunteers will be assigned to tasks such as:
   m. Assisting in care and comfort of residents and families
   n. Transportation of equipment and supplies

Emergency Procedures For Staff Call-Back List

SECTION 8.0

SUMMARY	The staff call-back list will be used for the purpose of calling in employees to assist in an emergency situation only. The list must be updated quarterly or as required by the Administrator. The Administrator or designate is to distribute and update staff call back lists to the Callers and Alternate Callers and review the procedure with them as required.

PROCEDURE

UPON HEARING THE ALARM

ADMINISTRATOR OR DESIGNATE

1. Determine personnel needed and begin fan out procedure until the required number of employees have been obtained.
2. Telephone Huronia and initiate the call back tree. They will call as listed and inform them that an emergency situation is occurring and that they are needed to report to the home. If a Caller cannot be reached, the Alternate Caller will be notified and assigned the list of the Caller that could not be reached.

CALLERS OR DESIGNATE

1. Telephone the employees on your list. Do not leave a message.
2. Once all the employees on your list have been called, notify the Administrator, or designate of the results.
3. Continue to attempt to reach any employees that were not immediately reached.
4. Check in with Administrator for directions as to next steps.

EMPLOYEES REPORTING FOR DUTY

1. Employees reporting for duty will report to the Emergency Operations Centre upon arrival at the facility location to receive their assignments.

Evacuation of Residents

SECTION 9.0

PROCEDURE

1.0 SUMMARY

The objective of an evacuation is to remove residents from danger in the shortest amount of time possible.

2.0 RISK LEVEL

Any fire emergency situation is a progressive incident. This means that the longer it takes to isolate the source(s) of danger and evacuate residents, the greater the changes of someone being seriously injured.

3.0 EVACUATION PLAN

As part of the Emergency Response Plan, there must be an evacuation plan that indicates the following:

2. Planned evacuation routes,
3. Evacuation Centre location,
4. Emergency Operations Centre (formerly known as the Command Centre) (inside building),
5. Evacuation Location (outside building),
6. Assigned exits, and
7. Assessment and Treatment Centre location.

4.0 PARTIAL EVACUATION

A partial evacuation must occur if the emergency situation can be contained to a specific area of the building that ensures the safety of all residents and employees.

4.1 EVACUATION STAGES

Evacuation starts with removing residents from individual rooms to beyond a set of fire doors. Partial evacuation is carried out if the disaster itself can be contained in a particular area of the facility. If safety of the residents cannot be ensured, total evacuation of the facility will be carried out.

STEP I FIRE ZONE or partial evacuation is the initial response to the emergency situation. It involves removing residents from the rooms(s)/area threatened by the source of the disaster:

1. Room of emergency site,
2. Rooms on each side of the emergency site,

3. Room directly across from emergency site,

Evacuate these residents beyond fire/smoke separation doors to a safe area by Team and Chain Evacuation procedure outlined inside this plan.

Note: Fire evacuation routes are away from the fire. Depending on the fire situation, the amount of smoke, and the flow of traffic of the fire department, the IMS leader may permit the movement of residents past the rooms with the fire if it is safe and more expedient to do so.

STEP II WING EVACUATION - If a fire cannot be contained to a single fire zone, evacuate residents beyond the fire separation doors to another safe zone within the building (internal area of refuge). Residents in immediate danger should be moved first.

STEP III TOTAL EVACUATION occurs if smoke and or fumes continue to spread throughout the facility, or the IMS Leader or Fire department gives the order to evacuate the entire building.

Person giving the order should allocate exits to be used by various wings so that movement will be quick and orderly.

Take residents to a safe distance away from the facility (Evacuation Site). Stay out of the way of emergency vehicles.

Evacuate away from the fire area to the next zone. If unable to reach safe zone, evacuate out of the facility via the nearest exit. Check to ensure evacuation of fire zone is complete.

A one-way traffic flow should be maintained where possible. Tally resident count to verify that evacuation is complete.

Note: At this step it is critical that Transfer/Discharge system is initiated to a safe location or "evacuation site."

5.0 COMPLETE EVACUATION

A complete evacuation must occur if the emergency situation cannot be contained to a specific area and/or the safety of all residents and employees cannot be ensured.

5.1	**AUTHORITY TO ORDER EVACUATION**	Authority and responsibility for the evacuation decision generally rests with the IMS leader or Fire department (if present). Any Nurse can order evacuation of their area if residents under their care are endangered by fire, smoke or any other factor.

Procedure for Evacuation of Residents

SECTION 9.1

SUMMARY	Residents will be evacuated in a calm and orderly manner according to the evacuation plan. Employees are to guide residents along the planned evacuation route(s). Resistive residents will be evacuated last. Rooms that have been evacuated must be flagged using the evacuation identification system. Establish Emergency Operations Centre (EOC) (formerly known as the Command Centre) – the most senior position (person) on site (that is not at the fire scene) must take charge of the EOC. It is located <Identify location> (i.e. reception desk/main lobby) or alternate site <identify location> (i.e. activity room/Administrator's office).

PROCEDURE

DECISION TO EVACUATE

INCIDENT MANAGER

1. Assess the emergency situation and determine whether the incident requires a partial or complete evacuation.
2. Initiate Incident Management System (IMS).
3. Determine and communicate evacuation route(s).
4. Convert the fire alarm system to the second phase to create a continuous ringing sound.

   Note: If the communication system(s) fail, send a runner to notify all employees of the code red emergency situation.

5. Identify and determine appropriate evacuation stages and evacuate the specific area where the emergency situation is occurring.
6. Call 911 immediately. (Preferably on a cell phone)
7. Liaise with authorities to determine:
   a. The end of the partial evacuation, or
   b. The need to call a complete evacuation.
8. Direct Residents and employees to the Evacuation Site using planned evacuation routes.

LOGISTICS LEADER

9. Remove the following records from the building using linen hamper bags:
   a. Resident Care Plans,
   b. M.A.R. Books,
   c. Resident Medical Charts
   d. L.O.A. Books,
   e. Emergency Response Package
   f. Disaster Box(es),
   g. SDS Master Binder, and
   h. If possible, pictures of residents
10. Direct and organize residents and employees to the Area of Refuge. If required, used planned transportation.

    <u>Note:</u> Ensure that emergency vehicles have an unobstructed path into the Home.

PUBLIC INFORMATION LOGISTICS LEADER

1. Liaise with the Incident Manager and the Corporate Communications Department and follow directions as required.
2. Update employees, residents, family members, community leaders, and media as required. This is the Administrator or Delegate ONLY

SECTION 9.2

Team and Chain Formation

SUMMARY	To ensure a smooth process for evacuating residents during an emergency situation, residents will be moved in a calm and orderly manner using the team and chain formation during any code red emergency situation.

PROCEDURE

LOGISTICS LEADER	1. Organize all employees into teams of two, stationed approximately 10 to 15 feet apart from each other.
TEAMS	1. Team A enters room and brings resident(s) to the doorway. 2. Team B takes resident(s) and hands off to Team C. 3. Team A closes the door and flags the room. *Note: Team A is to flag each room after it has been completely evacuated.* 4. Teams pass groups of residents between each other, towards the Area of Refuge. *Note: Residents are to be escorted in single file or in small groups. Traffic should only flow in one direction.*

Persons Requiring Assistance

SECTION 9.3

In the event of a fire alarm, Residents will count on employees to provide some level of assistance.

Residents are to be classified as either ambulatory or non-ambulatory.

Ambulatory residents are evacuated first unless other residents remain in immediate danger. The evacuees should be gathered and led in groups or in single file. Once the ambulatory residents have been evacuated all other residents can be assisted.

Non-ambulatory residents may be evacuated by wheelchair or by other wheeled conveyance. This is easiest and fastest for covering a distance but requires transferring the resident to a chair. Residents can be pulled from the bed onto a blanket and pulled along the floor. Blankets are usually readily available but carpeted hallways make this very difficult. In this case, if two are more carriers are available, the blankets can be used as an improvised stretcher. Stryker chairs are available at all stairwells.

As a care facility, detailed files of each resident is maintained and kept readily available in the event of an emergency. Use the form attached to log which Residents needed assistance.

Accountabilities

SECTION 10.0

1.0 RESPONSIBILITIES OF THE OWNER

In a court of law, the definition of owner can mean the person whose name is on the title, executive officer in a corporation owning the building, an administrator, a night supervisor/manager or even a maintenance supervisor/manager.

The building owner/manager has numerous responsibilities as specified in the Fire Code and must ensure that the following measures are incorporated in the Fire Safety Plan:

Establishment of emergency procedures to be used in case of a fire emergency.

Appointment and organization of designated 'supervisory employees' to care out fire safety duties.

Training of 'supervisory employees' and other staff so that they are aware of their responsibilities for fire safety.

Holding of fire drills in accordance with the Fire Code, incorporating emergency procedures appropriate to the building.

Control of fire hazards in the building.

Maintenance of building facilities provided for the safety of occupants (keeping records of same).

Provisions of alternate measures for safety of residents during shutdown of fire and life safety systems.

Ensure the information in the Fire Safety Plan is current, and notifying the Chief Fire Official regarding changes to the Fire Safety Plan.

Designate and train sufficient alternates to replace 'supervisory employees' during any absence.

Post and maintain on each floor area emergency procedures for residents.

Ensure the approved Fire Safety Plan or parts thereof are distributed.

Be able to inform staff in the operation of Fire Alarm Systems and its associated devices.

Be able to inform staff in the operation of the sprinkler system.

2.0 RESPONSIBILITIES OF SUPERVISORY EMPLOYEES

1. Be trained and know the emergency evacuation procedures.
2. Maintain an up-to-date list of occupants requiring assistance to evacuate in the event of an emergency.
3. Know the fire extinguishment, control, or confinement procedures.
4. Practice measures to control fire hazards.
5. In the event of any shutdown of the fire and life safety systems, initiate alternative measures.
6. Maintain the fire alarm/sprinkler system and other fire protection features in good operating condition.
7. Participate in fire drills.
8. Report any hazards or immediate threats to life safety to your supervisor/manager.
9. Obtain and comply with the Fire Code and regulations in your jurisdiction.

2.0 RESPONSIBILITIES OF ALL EMPLOYEES

1. Be trained and know the emergency evacuation procedures.
2. Maintain an up-to-date list of Residents requiring assistance to evacuate in the event of an emergency.
3. Know the fire extinguisher, control and confinement procedures.
4. Practice measures to control fire hazards**.** In the event of any shutdown of the fire and life safety systems, ensure alternative measures are initiated.
5. Ensure the fire alarm/sprinkler system and other fire protection features are operating properly.
6. Participate in fire drills.
7. Report any hazards or immediate threats to safety to your Supervisor/Manager.
8. Obtain and comply with the National and Provincial Fire Code.

Extinguishment, Control, and Containment

SECTION 11.0

1.0 SUMMARY

1. The production of toxic fumes in buildings makes firefighting potentially dangerous, particularly if a large amount of smoke is being generated.
2. Only after ensuring everyone has evacuated the area, the alarm has been initiated and the fire department notified, should an experienced person (familiar with fire extinguisher operation) attempt to extinguish a small fire.

   Note: This is a voluntary act. Never attempt to fight a fire alone. If it cannot be easily extinguished with the use of a portable fire extinguisher, leave the area, and confine the fire by closing the door.

2.0 OPERATING A FIRE EXTINGUISHER

P – Pull Pin	Pull the pin. This will also break the tamper seal.
A – Aim Extinguisher	Aim low, pointing the extinguisher nozzle (or its horn or hose) at the base of the fire and not at the flames. Ensure that the fire is not between yourself and the exit.
S – Squeeze Trigger	Squeeze the handle to release the extinguishing agent.
S – Sweep	Use a sweeping motion from side to side, pointing the extinguisher at the base of the fire, until it appears to be out. Watch the area. If the fire re-ignites, repeat "PASS" procedure.

3.0 KITCHEN HOOD SUPPRESSION SYSTEM (KHSS)

1. In the event of a fire in the cooking equipment in the kitchen, the Kitchen Hood Suppression System (KHSS) must be activated.
2. The "K" type extinguisher is never to be used unless the HSS has activated.
3. Never use an ABC fire extinguisher to extinguish a fire involving cooking appliances installed under the exhaust hood.
4. If a fire occurs below the KHSS, and it is safe to do so, the manual release pull station must be activated to initiate the system. The

location of the KHSS manual release pull station is identified on the Schematic Diagrams.

Control of Fire Hazards

SECTION 12.0

The following describes the specific requirements to control fire hazards:

- ❑ All exits must be clear of obstructions at all times
- ❑ No blocking of automatic fire doors
- ❑ Posted fire instructions located at pull stations
- ❑ Clear access to the building
- ❑ Paint cans and aerosol cans are stored in metal cabinets
- ❑ Any items stored must be at least 18" below sprinklers
- ❑ Only flame retardant drapes, carpets and mattress covers are used
- ❑ Residents' appliances are inspected for CSA approval
- ❑ Use of temporary wiring is not permitted where it presents a fire hazard
- ❑ Heating appliances are not permitted in residents' rooms
- ❑ Combustible refuse is stored in designated areas only
- ❑ Kitchen equipment and filters are routinely cleaned
- ❑ Flammable material controlled
- ❑ Rooms are kept clean and orderly
- ❑ Heaters are not blocked
- ❑ Dryer vents are cleaned out daily and bi-weekly
- ❑ Fire procedures are to be discussed during the pre-admission interview and orientation

Alternative Measures

SECTION 13.0

1.0	**SUMMARY**	1. The following are alternative measures to be taken in the event of a shut down or other disabling circumstances of specific life safety devices/systems.
1.1	**FIRE EXTINGUISHERS**	1. Portable fire extinguishers shall be recharged as soon as possible after use. If the building is open to the public during a recharge delay, replacement extinguishers must be available.

1.2	**SPRINKLER SYSTEM**	1. In the event that the automatic sprinkler system becomes inoperative, all employees shall be made aware of the situation and repairs shall be affected as soon as possible. 2. Notify the fire department 705-645-8258 every time the sprinkler system is non-operational.
1.3	**FIRE ALARM SYSTEM**	1. In the event that the fire alarm system becomes inoperative, a responsible employee shall be assigned to conduct hourly fire watch inspections of the whole building and to calmly alert all Residents in the event of a fire. 2. The employee conducting fire watch duties must have a portable communication device in order to immediately call 911 in the event of a fire emergency. 3. Notify the fire department 705-645-8258 any time the fire alarm system is non-operational.
1.4	**KITCHEN HOOD SUPPRESSION SYSTEM (KHSS)**	1. In the event the Kitchen Hood Suppression System (KHSS) becomes inoperative, all staff shall be made aware of the situation and repairs shall be made immediately. All cooking, which produces grease-laden vapours, must be stopped. 2. Notify the fire department 705-645-8258 any time the KHSS is non-operational.
2.0	**SHUTDOWN OF FIRE PROTECTION EQUIPMENT**	1. In the event of any shutdown of fire protection equipment or part thereof, Residents, the owner and Fire Department 705-645-8258 shall be notified 2. Instructions and procedures for alternate provisions must be posted in the case of an emergency. 3. The following are the procedures that are to be followed in the event of a shutdown of any part of a fire protection system or equipment: a. Notify the fire department and the monitoring company. Give your name, 98 Pine Street, Bracebridge, ON and a description of the work and when you expect it to be corrected. b. Post Out of Service notices on front entrances, other entrances, all floors, nursing stations, stating the work and

when it is expected to be completed. A sample of this notice can be found in Section 17.0 of this Fire Safety Plan.

c. An appointed designated employee will conduct a walk-through of the affected area every hour, keeping records of what is observed. These records will be kept in the Log Book in the Administrators office.

   Note: The designated employee must be equipped with a flashlight.

d. If a fire is found, immediately activate the Fire Alarm System if it is operational. If not, call the 911 and alert the Incident Manager of the situation.

e. Update fire department and Residents/employees when the work has been completed and all systems are operational.

Tests, Inspections And Checks

SECTION 14.0

The Fire Chief periodically inspects buildings to ensure that the required checks, inspections, and tests are being carried out.
It is stated in the Fire Code that records of all tests and corrective measures are required to be retained for a minimum of two years and made available to the fire department upon request.
If the time interval between tests exceeds two years, the written records shall be kept for a period of the test interval plus one year.
The owner is responsible to ensure that all checks, inspections, and tests are completed. Always refer to the Provincial Fire Code for complete requirements.

DEFINITIONS

CHECK:	Means a **visual observation,** to ensure the device or system is in place and is not obviously damaged or obstructed.
INSPECTION:	Means a **physical examination**, to determine that the device or system will apparently perform in accordance with the intended function.
TEST:	Means the **operation of a device or system** to ensure that it will perform in accordance with its intended operation or function.

The Administrator will assign a designated employee and/or qualified contractor(s) to fulfill the following maintenance requirements:

5 YEARS:	Every 5 years, pressurized water and carbon dioxide fire extinguishers shall be hydrostatically tested.
6 YEARS:	Every 6 years, stored pressure extinguishers that require a 12 year hydrostatic test shall be emptied and subjected to the applicable maintenance procedures.
12 YEARS:	Every 12 years, mild steel or aluminum shell fire extinguishers shall be hydrostatically tested.

GENERAL LIFE SAFETY SYSTEMS	ROLE RESPONSIBLE
Doors in fire zone separations shall be checked as frequently as necessary to ensure that they remain closed, unless doors are controlled by a door hold-open device that is operated by the fire alarm.	Managers, during fire drills
All required exit signs shall be clearly visible and maintained in a clean and legible condition at all times.	Maintenance, monthly
Internally illuminated exit signs are kept clearly visible at all times.	Maintenance, monthly
WEEKLY:	
When subject to accumulation of combustible deposits, hoods, filters and ducts shall be checked weekly and be cleaned when such deposits create an undue fire hazard.	Maintenance
MONTHLY:	
Doors in fire separations shall be inspected monthly for proper operations.	Managers
YEARLY:	
Fire dampers and fire-stop flaps shall be **inspected** annually, or based on a schedule via contractor acceptable to the Chief Fire Official.	Huronia
Every chimney, flue, and flue pipe shall be **inspected** annually and cleaned as often as necessary to keep them free from accumulations of combustible deposits.	Huronia
Disconnect switches for mechanical air-conditioning and ventilating systems shall be **inspected** annually to establish that the system can be shut down.	Huronia

PORTABLE FIRE EXTINGUISHERS	ROLE RESPONSIBLE
Except as otherwise stated in this section maintenance and testing of portable fire extinguishers shall be in conformance with NFPA 10.	Chubb
Each portable extinguisher shall have a tag securely attached to it showing the maintenance or recharge date, the servicing agency and the signature of the person who performed the service.	Chubb
A permanent record containing the maintenance date, the examiner's name and a description of any work or hydrostatic testing carried out shall be prepared and maintained for each portable fire extinguisher.	Chubb
All extinguishers shall be recharged after use or as indicated by inspection or when performing maintenance. When recharging is performed, the recommendations of the manufacturer shall be followed.	Huronia
MONTHLY:	
Portable fire extinguishers shall be inspected monthly.	Maintenance Worker
YEARLY:	
Extinguishers shall be subject to maintenance not more than one year apart or when specifically indicated by an inspection**.**	Huron
Maintenance procedures shall include a thorough examination of the three basic elements of an extinguisher: 4. mechanical parts 5. extinguishing agent 6. expelling means	Huronia
Every twelve months, pump tank water, and pump tank calcium chloride base antifreeze types of extinguishers shall be recharged with new chemicals or water, as applicable.	N/A

SPRINKER SYSTEMS (WET) –	ROLE RESPONSIBLE
Auxiliary drains shall be inspected as required to prevent freezing.	Sprinkler
WEEKLY:	
Except for electrically supervised valves, all valves controlling water supplies to sprinklers and alarm connections shall be checked weekly to ensure that they are not sealed or locked in the open position.	Maintenance
MONTHLY:	

SPRINKER SYSTEMS (WET) –	ROLE RESPONSIBLE
Valves controlling water supplies to sprinklers and alarm connections shall be inspected monthly to ensure that they are sealed or locked in the open position. On all sprinkler systems, an alarm test, using the inspector test connection shall be performed monthly to ensure all flow switches are activated.	Maintenance
TWO MONTHS:	
All transmitters and water flow devices shall be tested at two-month intervals.	Maintenance
SIX MONTHS:	
Gate-valve supervisory switches and other sprinkler system supervisory devices shall be tested at six-month intervals.	Sprinkler
SPRINKER SYSTEMS (DRY)	**ROLE RESPONSIBLE**
Auxiliary drains shall be inspected as required to prevent freezing.	Maintenance
WEEKLY:	
Check that dry pipe sprinkler system air pressure is being maintained.	Maintenance
MONTHLY:	
Test the sprinkler system alarm using the alarm test connection.	PMT
Check dry system compressors: • Oil level • Belt condition	Maintenance
ANNUALLY:	
Inspect dry pipe valve water priming level. Conduct a dry pipe system trip test.	Sprinkler
Exposed sprinkler piping hangers shall be checked yearly to ensure that they are kept in good repair.	Sprinkler
EVERY 5 YEARS	
DRY ONLY – Hydro statistically test the dry standpipe system	Sprinkler
EVERY 15 YEARS	
Inspect dry pipe sprinkler system for pipe obstructions – flush the system.	Sprinkler

SPRINKER SYSTEMS (WET) –	ROLE RESPONSIBLE
GENERAL SPRINKLER MAINTENANCE -YEARLY	
Sprinkler heads shall be checked at least once a year to ensure that they are free from damage, corrosion, grease dust, paint, or whitewash. They shall be replaced where necessary as a result of such conditions.	Huronia
On wet sprinkler systems, water-flow alarm test using the most hydraulically remote test connection, shall be performed annually.	Huronia/chubb Edwards/Vipon
Sprinkler system water pressure shall be tested annually or after any sprinkler system control valve has been operated, with the main drain valve fully open, to ensure that there are no obstructions or deterioration of the main water supply.	Huronia/chubb Edwards/Vipon
Plugs or caps on fire department connections shall be removed annually and the threads inspected for wear, rust or obstruction. Re-secure plugs or caps, wrench tight. If plugs or caps are missing, examine the Fire Department connection for obstructions, back flush if necessary and replace plugs or caps.	Huronia/chubb Edwards/Vipon

FIRE ALARM	ROLE RESPONSIBLE
Fire alarm system components shall be kept unobstructed.	Maintenance
Fire alarm system power supply disconnect switches shall be locked on in an approved manner.	Maintenance
DAILY:	
The following daily checks shall be conducted and if a fault is established, appropriate corrective action shall be taken: 7. Check the principle and remote trouble lights for trouble indication; 8. Inspection of the AC power-on light shall be done to ensure its normal operation.	Maintenance
MONTHLY:	
Every month the following test shall be conducted and if a fault is established, appropriate corrective action shall be taken: 9. One manual alarm initiating device shall be operated, on a rotating basis, and shall initiate an alarm condition; 10. Function of all signal devices shall be ensured;	Maintenance

FIRE ALARM	ROLE RESPONSIBLE
11. The annunciator panel shall be checked to ensure correct annunciation; 12. Intended function of the audible and visual trouble signals shall be ensured; 13. Fire alarm batteries shall be checked to ensure that: a. Terminals are clean and lubricated where necessary, b. Terminal clamps are clean and tight, and c. Electrolyte level and specific gravity, where applicable, meet manufacturer's specifications. 14. Communication from at least one remote firefighter emergency tele705-645-4488 location control unit shall be tested monthly on a rotational basis so that all such tele705-645-4488s are tested at least once per year.	
YEARLY:	
Yearly tests shall be conducted by a certified fire alarm and or contractor as required by all applicable codes. Tests shall be in conformance with CAN/ULC S536, Inspection and Testing of Fire Alarm System.	Chubb Edwards

COMMERCIAL COOKING EQUIPMENT	ROLE RESPONSIBLE
Commercial cooking equipment exhausts and fire protection systems shall be installed and maintained in conformance with NFPA 96, Ventilation Control and Fire Protection of Commercial Cooking Operations.	Chubb Edwards
Ensure "K" type portable fire extinguishers are provided to protect commercial cooking equipment and are readily available for use in an emergency.	Chubb Edwards
WEEKLY:	
Hoods, grease removal devices, fans, ducts, and other equipment shall be checked weekly and cleaned as necessary, prior to surfaces becoming heavily contaminated with grease or oily sludge.	Dietary Manager
MONTHLY:	
Inspect the fixed extinguishing system and verify the following: 15. The extinguishing system is in its proper location.	Maintenance

COMMERCIAL COOKING EQUIPMENT	ROLE RESPONSIBLE
16. The manual actuators are unobstructed. 17. The tamper indicators and seals are intact. 18. The maintenance tag or certificate is in place. 19. No obvious physical damage or condition exists that might prevent operation. 20. The pressure gauge(s), if provided, is in operable range. 21. The nozzle blow-off caps are intact and undamaged. 22. The hood, duct, and protected cooking appliances have not been replaced, modified or relocated.	
EVERY 6 MONTHS:	
Inspection and maintenance of special extinguishing systems shall be conducted in conformance with the appropriate NFPA standard.	Maintenance
EVERY 12 YEARS:	
The following parts of the chemical extinguishing system shall be subjected to a hydrostatic pressure test: 1. Containers, 2. Auxiliary pressure containers, and 3. Hose Assemblies.	Huronia

EMERGENCY POWER SYSTEMS (CSA-C382 for details)	ROLE RESPONSIBLE
MONTHLY:	
Check all components of the system; operate the generator set under at least 50% of rated load for 30 minutes.	Maintenance
SIX MONTHS:	
Check and clean crankcase breathers, governors and linkages on emergency generators.	Maintenance
YEARLY:	
Inspect and service generator and generator set.	Total Power
EVERY 2 YEARS:	
Check torque heads and valve adjustments for engines.	Total Power
EVERY 3 YEARS:	

EMERGENCY POWER SYSTEMS (CSA-C382 for details)	ROLE RESPONSIBLE
Inspect and service injector nozzles and valve adjustments on diesel engines.	Total Power
EVERY 5 YEARS:	
Check insulation of generator windings	Total Power
ELEVATORS	**ROLE RESPONSIBLE**
Ensure keys required to recall elevators and to permit independent operation are in their appropriate location.	Maintenance
3 MONTHS:	
Every three months the elevator door opening devices operated by means of photo-electric cells shall be tested to ensure that the devices become inoperative after the door has been held open for more than 20 seconds with the photo-electric cell covered.	Maintenance
If required, the key operated switch located outside an elevator shaft shall be tested to ensure that the actuation of the switch will render the emergency stop button in each car inoperative and bring all cars to the street floor or transfer lobby by cancelling all other calls after the car has been stopped at the next floor at which it can make a normal stop.	Maintenance
If required, key operated switches in each elevator car shall be tested to ensure that the actuation of the switch will: 1. Enable the elevators to be operable independently of other elevators, 2. Allow operation of the elevator without interference from floor call buttons, 3. Render door re-opening devices inoperative, and 4. Control the opening of power operated doors only by the continuous pressure on the “door open” button to ensure that if the button is released while the door is opening, the doors will automatically close.	Maintenance

Fire Drills

SECTION 14.1

1.0	**SUMMARY**	Fire Drills are to be performed monthly in each facility to provide employees with realistic training and practice in steps to take in the event of a fire. The Fire Department and the monitoring company will be notified of the fire drill before and after each fire drill. Contact the Fire Department 705-645-8258 and the Monitoring Company at Huronia 1-888-363-9311 before conducting the fire drill and when the fire drill has been completed.
2.0	**FREQUENCY**	Fire drills should simulate an actual fire emergency and will: 1. Be performed monthly on all shifts, in different locations and at different times. 2. Include practice in evacuation procedures and practice in the use of fire extinguishers. 3. Night drills may be conducted as silent drills requiring three annual drills with full bells.
3.0	**SCHEDULING**	Administrator or designate will organize and initiate the monthly drills on all shifts according to the pre-planned schedule. The effectiveness of these exercises can be supported through pre-planning. Schedule of drills must be incorporated into the Quality Service/Management Program. All employees are required to respond to each fire alarm as a real emergency. Fire drills should not occur in a pattern which allows employees to predict a drill. Drills will be a combination of announced and unannounced, ensuring employee training and practice. The Administrator or designate will notify the fire department and monitoring company at the beginning and end of each fire drill. Determining the fire drill schedule should consider the following variables: 1. Location 2. A/C power 3. D/C power 4. Bells ring 5. Silent 6. Time

4.0	**STAFF DEVELOPMENT RESPONSIBILITIES**	The Environmental Services Manager or designate may provide overall coordination of the fire drill, to assist in analyzing the response to the drill and correcting any deficiencies that may occur. They are required to complete the Report of Fire Drill in order to document employee behaviour in carrying out fire procedures. They must conduct a post drill review to pinpoint areas where the drill deviated from the Emergency Response Plan. The Environmental Services Manager or designate will monitor and maintain records of employee attendance at fire drills. They will evaluate employee response in terms of training needs and advise the Administrator accordingly.
5.0	**STAFF ATTENDANCE**	Each regularly scheduled employee must participate in at least two fire drills per year.
6.0	**RECORD OF FIRE DRILL ATTENDANCE FORM**	All staff in attendance at the time of a fire drill will sign the Record of Fire Drill Attendance Form. Transferring the attendance from the Record of Fire Drill form to the Continuing Education Report form will assist the Administrator or designate in planning future drills. All records of the fire drills must be kept for a minimum of two years. They should be made part of a fire drill logbook.
7.0	**REPORT OF FIRE DRILL**	A Report of Fire Drill form will be completed by the Administrator or designate to document the actions and effectiveness of employees in implementing fire procedures following each drill. Copies of the Report of Fire Drill will be sent to the Administrator each month.

7.1.1

7.1.1	**ANNUAL FIRE EVACUATION DRILL**	Carry out a fire drill at least once during each 12-month period for an approved scenario representing the lowest staffing level complement in the occupancy in order to confirm that there is sufficient supervisory staff available to carry out the duties as required in the Fire Safety Plan. The Chief Fire Official must be notified within an approved time period for this fire drill that is to be carried out on an annual basis.

FACILITY: The Pines LOCATION: 98 Pine Street, Bracebridge

REPORT TO: Environmental Services Manager DATE: ____ Time: ____

TYPE OF DRILL

❑ FIRE DRILL ❑ ALARM ACTIVATED ❑ FIRE SITUATION

❑ SILENT ALARM ❑ STAFF EDUCATION ❑ SPECIAL EXERCISE

How quickly was location of fire identified? _____minutes

Were appropriate steps taken to confine the fire?	❑ Yes	❑ No
Was fire code and location heard clearly over the Phone System? (3 times)	❑ Yes	❑ No
Was fire code and location heard clearly over the walkies? (3 times)	❑ Yes	❑ No
Did all fire/smoke doors close automatically?	❑ Yes	❑ No
Did all fire bells rings?	❑ Yes	❑ No
Was Huronia notified before and after the drill?	❑ Yes	❑ No
Did Huronia monitoring service receive the signal?	❑ Yes	❑ No
Was evacuation done correctly as per the Emergency Preparedness Plan?	❑ Yes	❑ No

Receptionist/Designate:

Stayed in the lobby to direct traffic?	❑ Yes	❑ No

Emergency Response Captain:

Announced the fire location?	❑ Yes	❑ No
Checked annunciator panel for location?	❑ Yes	❑ No
Went to fire scene to direct procedures?	❑ Yes	❑ No
Announced all clear?	❑ Yes	❑ No

Registered Nurse:

Reported directly to assigned areas?	❑ Yes	❑ No
Directed staff according to procedure?	❑ Yes	❑ No

Other Nursing Staff:

Went to assigned areas?	❑ Yes	❑ No
Searched for fire and closed door on all units?	❑ Yes	❑ No
Removed residents in danger?	❑ Yes	❑ No

Housekeeping Staff:

Cleared carts and equipment from corridor?	❑ Yes	❑ No
Reported to assigned areas?	❑ Yes	❑ No
Assisted in location/evacuation procedure?	❑ Yes	❑ No

Laundry Staff:

Turned off all equipment?	❑ Yes	❑ No
Closed all doors?	❑ Yes	❑ No
Checked service areas?	❑ Yes	❑ No

Maintenance Staff:

Shut off equipment and left work area secure?	❑ Yes	❑ No
Went to fire area with extinguisher?	❑ Yes	❑ No

Dietary Staff:

Turned off all equipment?	❑ Yes	❑ No
Left kitchen?	❑ Yes	❑ No
Searched and closed door in adjacent area?	❑ Yes	❑ No
Evacuated dining room (if necessary), assigned staff to remain with residents?	❑ Yes	❑ No
Reported to Command Centre?	❑ Yes	❑ No

Activities:

Checked area and secured as appropriate?	❑ Yes	❑ No
Supervised residents in safe area?	❑ Yes	❑ No
Followed proper procedures?	❑ Yes	❑ No

Beautician:

Followed proper procedures?	❑ Yes	❑ No

Residents:

Did residents actively participate in the drill?	❑ Yes	❑ No

FOR ANY "NO" RESPONSE, PROVIDE COMMENTS BELOW:

Identify problems/concerns:

Identify Corrective Action(s) taken or record in-service topics:

Signature _____

FIRE DRILL OBSERVATION REPORT

Resident Home Area/Location: _____

Documentation Completed by: _____

Date, Time and Location of Fire Drill: _____

Requirement (check to say if requirement was met)	***YES***	***NO***
Was the code red page clearly heard?		
Was the location of the fire clearly heard?		
Did all staff report back to Resident Home Area?		
Did all the fire/smoke doors close automatically?		
Did all the fire bells ring?		
Did the RPN provide clear direction to the staff/volunteers/visitors?		
Were all resident's rooms checked: Lights turned on • O2 turned off • Windows closed, doors closed • Evacu tags activated appropriately		
Were all residents accounted for? (was someone delegated the role of completing the head count?)		
Were all residents/visitors moved to a safe area given the location of the fire?		
Was the buddy system used?		
Were all the hallways cleared of equipment and carts?		
Were med carts and chart carts moved into the safe zone. Were they placed in a safe location (not blocking the hallways)		
Did residents remain calm?		

Questions/Concerns Raised:

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

FIRE DRILL OBSERVATION REPORT

DEBRIEF

1. Review REACT

Remove those in immediate danger
Ensure the room door is closed
Activate the fire alarm (if not already done)
Call the Fire Department
Try to extinguish or contain the fire

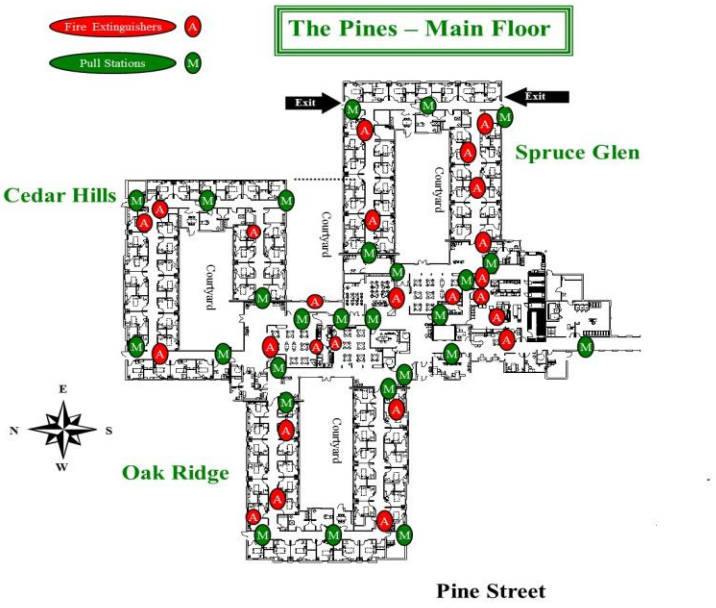
2. Location of, Exits, Fire Extinguishers and Pull Stations
3. Fire Zones

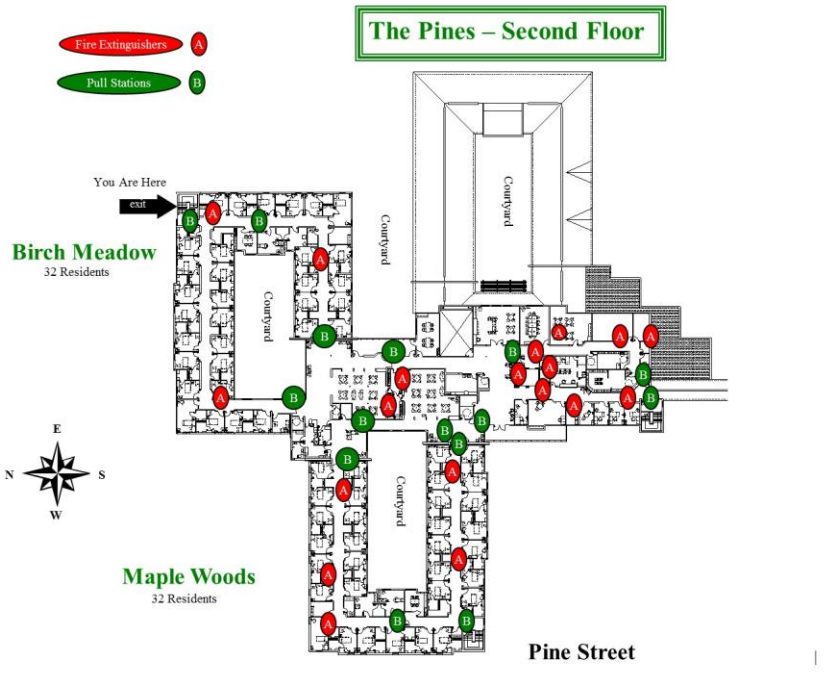
FIRE DRILL PARTICIPANTS:

NAME	DEPARTMENT

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

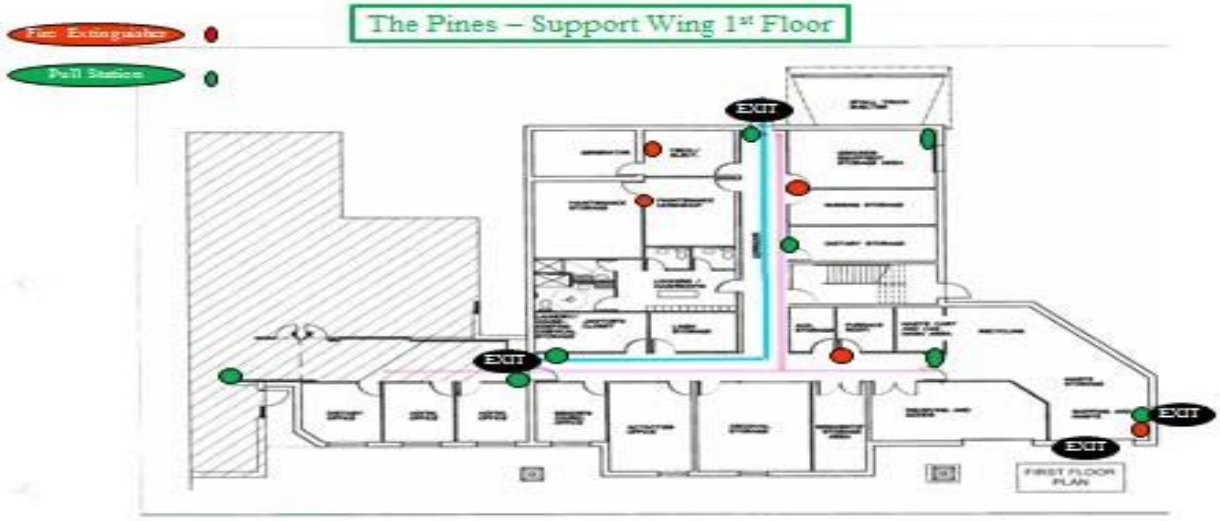
THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

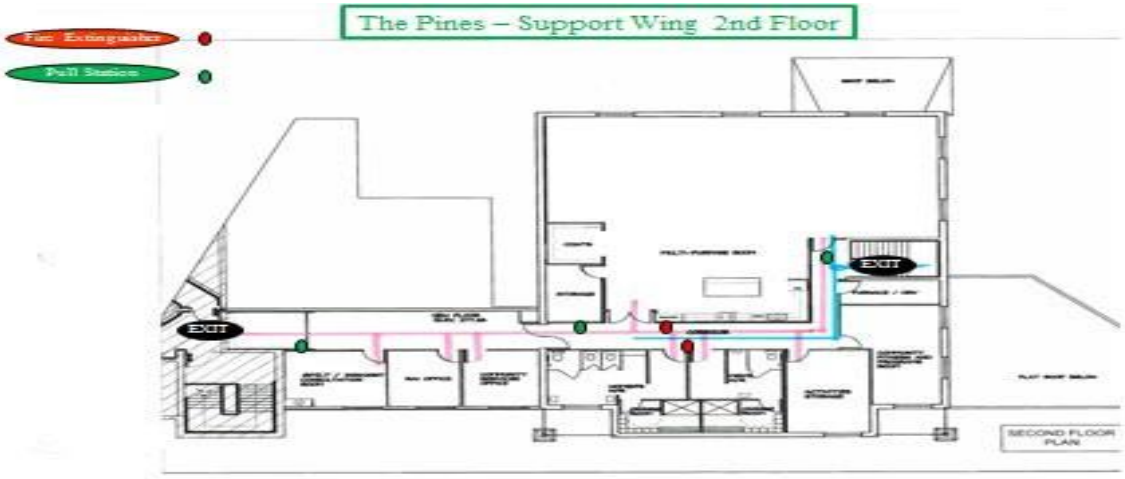




HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857





HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

Fire Chief
Mr. Kevin Plested
225 Taylor Road
Bracebridge, ON P1L1K1.
Date: March 24, 2026

Dear Mr. Kevin Plisted;

Enclosed please find a copy of the Fire Plan for The Pines. I would appreciate your review of the document and would be pleased to receive any recommendations or suggestions regarding the Plan. I would be pleased to meet with you to review the plan at your convenience.

Following review of the Plan, please return the Plan with a covering letter acknowledging your review, any recommendations for approval and if the plan is considered appropriate and meets requirements of your fire service.

Thank you for your assistance in maintaining our high standards of fire safety.

Sincerely,

Jennifer Ridgley RN BScN

Administrator

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

Out of Service Signage

SECTION 17.0

Out of Service

A Fire Watch is Patrolling the Affected Areas of the Building

IN CASE OF A FIRE DIAL 9-1-1

FIRE PROTECTION SERVICES OUT OF SERVICE

In the event of any shutdown of the fire alarm system, sprinkler system, or any part thereof, the home must notify the fire Department and the Monitoring Company. A fire watch must be implemented immediately and OUT OF SERVICE notices must be posted at all entrances, at each elevator, at nursing stations, and on each floor.

Staffing Levels

Time of Day	# of RNs	# of Staff	# of Managers
Days	2	80	8
Evenings	2	60	0
Nights	2	10	0

The Fire Department will be met at the front door by a staff member who will direct them to the Incident Manager and inform the Fire Department of the location of the incident.

Fire Watch

SECTION 18.0

FIRE WATCH FORM

DATE: _____

TIME DECLARED: _____ **HOME AREA:** _____

TIME CORRECTED: _____

Time	Days	Evenings	Nights	Comments
6:00 AM				
7:00 AM				
8:00 AM				
9:00 AM				
10:00 AM				
11:00 AM				
12:00 PM				
1:00 PM				
2:00 PM				
3:00 PM				
4:00 PM				
5:00 PM				
6:00 PM				
7:00 PM				
8:00 PM				
9:00 PM				
10:00 PM				
11:00 PM				
12:00 AM				
1:00 AM				
2:00 AM				
3:00 AM				
4:00 AM				
5:00 AM				

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

FIRE WATCH:

The RN in Charge of the building will be notified immediately when there is an interruption or malfunctioning of the fire alarm and/or sprinkler system and a **FIRE WATCH** will be declared. It is the responsibility of all staff on duty to do physical walkabouts and hourly inspections of the affected area(s) in the home. The Charge RN is to sign and document their findings on this Form from the time the Fire Watch is issued until such time as the Fire Watch is declared as resolved/over and all fire systems are functioning once again.

ALL STAFF ARE TO LOOK FOR SIGNS OF FIRE (smoke, smoldering, flames, heat)
IF ANY SIGNS OF FIRE EXIST,
IMPLEMENT FIRE PROTOCOLS/PLANS & CALL 911 IMMEDIATELY

ALL STAFF ON DUTY IN THE AFFECTED AREA(S) AT THE TIME OF THE FIRE WATCH ARE TO SIGN BELOW
It is EVERYONE'S responsibility to participate in the FIRE WATCH

STAFF NAME (Print)	STAFF SIGNATURE	INITIALS	TITLE

HEALTH SERVICES DEPARTMENT
Long-Term Care Services
70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 **Toll-Free:** 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES
Long-Term Care Home
98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857

THE PINES
LONG-TERM CARE HOME

Extendicare

Fire Safety Inspection Action Plan

Home Name: _____ Date Inspected: _____ Inspector: _____

Executive Director: _____ Regional Director: _____

Issue	Required Action	Person Responsible	Time Frame	Date Completed

Jan. 2026

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Alarm, Test or Equipment Repairs

This form is to be completed by the person responsible for conducting & coordinating the fire alarm system repair and monthly fire alarm system test(s) and responding to unscheduled fire alarm activation.

Fire System Testing

Date: _____ Time: _____

1. Fire alarm system tested on secondary source of power (battery backup or generator)? ❑ Y ❑ N ❑ n/a
2. Fire Alarm system activated correctly? ❑ Y ❑ N ❑ n/a
3. Second stage alarm signal activated correctly (where applicable)? ❑ Y ❑ N ❑ n/a
4. Annunciator Panel(s) indicated the correct zone of alarm origin? ❑ Y ❑ N ❑ n/a
5. "All Clear" announced and staff instructed to sign fire drill attendance record? ❑ Y ❑ N ❑ n/a
6. Fire alarm reset and returned to primary source of power? ❑ Y ❑ N ❑ n/a
7. Fire alarm auxiliary devices reset and checked for normal operations:
   - Elevators (guest and service) ❑ Y ❑ N ❑ n/a
   - Maglocks (entrance, exits and locked units) ❑ Y ❑ N ❑ n/a
   - HVAC units ❑ Y ❑ N ❑ n/a
   - Hold open features on fire separation doors ❑ Y ❑ N ❑ n/a
8. Fire alarm system clear of any "trouble" indication? ❑ Y ❑ N ❑ n/a
9. Confirmed fire alarm monitoring company received alarm signal at _____hrs. & reset at _____hrs.
10. Alarm Monitoring Company and Fire Department notified after fire alarm? ❑ Y ❑ N ❑ n/a
11. When applicable, confirm if Fire Department received the alarm signal? ❑ Y ❑ N ❑ n/a
12. No. of staff attended: _____

Comments, recommendations for changes to fire safety plan or procedures:

Name	Signature	Date

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Alarm, Test or Equipment Repairs

Unscheduled Fire Alarm Signal Activation

Date: _____ Time: _____

Cause of Fire Alarm determined to be:

1. Fire Department arrival time (if known): _____hrs. Badge #: _____
2. Fire alarm control panel reset only after the Fire Dept. has given the all clear signal after checking? ❑ Y ❑ N ❑ n/a
3. Fire alarm "trouble signal" clear? ❑ Y ❑ N ❑ n/a
4. "All Clear" announced and staff instructed to sign fire drill/alarm attendance record? ❑ Y ❑ N ❑ n/a
5. Fire alarm auxiliary devices reset and checked for normal operations:
   - Elevators (guest and service) ❑ Y ❑ N ❑ n/a
   - Maglocks (entrance, exits and locked units) ❑ Y ❑ N ❑ n/a
   - HVAC units ❑ Y ❑ N ❑ n/a
   - Hold open features on fire doors ❑ Y ❑ N ❑ n/a

Comments, recommendations for changes to fire safety plan or procedures:

Name _____ Signature _____ Date _____

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Alarm, Test or Equipment Repairs

Fire Alarm Equipment Repair

Date: _____ Time: _____

1. Fire alarm system repair company notified of repairs required? ❑ Y ❑ N ❑ n/a
2. Company Name: _____ Date: _____ Time: _____
3. Tel.#: _____ Contact Person: _____
4. Fire alarm system repaired? ❑ Y ❑ N ❑ n/a
   Date: _____ Time: _____

Problem:

Conclusion, recommendations for changes to fire safety plan or procedures:

Name	Signature	Date

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Drill Observation Form – Scene of Fire Alarm

Date: _____ Shift: _____ Time: _____

Location: _____ Floor: _____ Pull Station/Smoke detector: _____

Type of Fire Simulated: _____ Unannounced Drill: ❑ Y ❑ N

Section 1 – Immediate Staff Response	Competently Performed	Pts Scored
R – Removed person(s) from immediate danger (4pts.)	❑ Y ❑ N	
E – Ensured doors and windows are closed (4pts.)	❑ Y ❑ N	
A – Activated the fire alarm using the nearest pull station (4pts.)	❑ Y ❑ N	
C – Called 9-1-1 /Inform Reception with exact location of fire (4pts.)	❑ Y ❑ N	
T – Tried to extinguish and/or further evacuate (4pts.)	❑ Y ❑ N	
Did the Charge Nurse wear Orange Vest and assume role of Incident Manager? (4pts.)	❑ Y ❑ N	
Were the adjacent rooms & opposite room searched & evacuated? (4pts.)	❑ Y ❑ N	
Did the staff use the evac-alert tag on the doors after evacuating the rooms? (4pts.)	❑ Y ❑ N	
Were the corridors cleared (equipment in proper place) in the drill area? (4pts.)	❑ Y ❑ N	
Staff acted in a calm manner, took instructions and acted as a team? (4pts.)	❑ Y ❑ N	
(40 points possible) Sub-Section Total:		

Section 2 – Staff Knowledge	Competently Performed	Pts Scored
Does staff know location of fire exits in the drill area? (4pts.)	❑ Y ❑ N	
Does staff know location of pull stations in the drill area? (4pts.)	❑ Y ❑ N	
Does staff know location of fire extinguishers & fire hose reels in the drill area? (4pts.)	❑ Y ❑ N	
Does staff know where adjacent smoke compartments are in the fire drill area? (4pts.)	❑ Y ❑ N	
Did staff switch off all electrical equipment in the rooms that were evacuated? (4pts.)	❑ Y ❑ N	
Did staff shut off all oxygen equipment in the rooms that were evacuated? (4pts.)	❑ Y ❑ N	
Does staff know the proper sequence & procedures to evacuate residents? (4pts.)	❑ Y ❑ N	
Did secondary teams (e.g. PSWs from other nursing units) report to the fire unit? (4pts.)	❑ Y ❑ N	
Did staff account for all residents on the floor by checking off the resident list? (4pts.)	❑ Y ❑ N	
Were all fire exits manned and/or in case of locked unit, both doors manned? (4pts.)	❑ Y ❑ N	

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Drill Observation Form – Scene of Fire Alarm

	(40 points possible) Sub-Section Total:	
Unit Scoring Grid: *70 – 80 points = Excellent* *60 – 70 points = Acceptable* *50 – 60 points = In-service Required* *< 50 points = In-service & Re-Drill*	*Score:* *Add Sections 1 & 2* *(80 points possible)*	

Continue form on Page 2

Section 3 – Fire Alarm Equipment & Emergency Response Performance	**Competently Performed**	**Pts Scored**
Were "CODE RED" & "Correct Location" paged three times (clear & audible)? (5pts.)	❑ Y ❑ N	
Were fire alarm devices functioning properly in the drill area (audible tone)? (3pts.)	❑ Y ❑ N	
Did the Nursing Unit Fire Panel indicate the correct location of the fire alarm? (3pts.)	❑ Y ❑ N	
Did the automatic fire separation doors close and latch in drill area? (3pts.)	❑ Y ❑ N	
Did the mag-locks release automatically during the fire alarm in drill area? (3pts.)	❑ Y ❑ N	
Was the response from other nursing units and departments to the fire scene immediate? (3pts.)	❑ Y ❑ N	
(20 points possible) Sub-Section Total:		
Overall Drill Total Sections 1, 2, and 3 100 points possible		

Floor Coordinator Name

Floor Coordinator Signature

Observer Conducting Drill name:

Observer Conducting Signature

Jan. 2026

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Watch Log

Area: _____

BUILDING AREA/ROOM CHECK Q 1 HOUR INTERVALS

Note: *This form may be used to document visual checks of the home during loss of fire safety systems. This form may also be useful when monitoring the loss of other essential services such as call bells or used at the discretion of the Incident Manager.*

Initial under the time you have conducted the check.

Date ↓	**AM**												**PM**											
Time Of Day →	0000	0100	0200	0300	0400	0500	0600	0700	0800	0900	1000	1100	1200	1300	1400	1500	1600	1700	1800	1900	2000	2100	2200	2300

Jan. 2026

Helping people live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Fire Drill Evaluation Form

Review the drill with the individual who observed the scene of the fire and the individual who observed another home area to help answer the questions below.

Please note, this form can be adjusted based on the tasks you have assigned to different roles.

Location of fire: _____ Date: _____ Time: _____

Type Of Drill

❑ Fire Drill ❑ Alarm Activated ❑ Fire Situation ❑ Silent Alarm

How quickly was location of fire identified?	_____minutes
Were appropriate steps taken to confine the fire?	❑ Yes ❑ No
Was fire code and location heard clearly over the P.A. system? (3 times)	❑ Yes ❑ No
Did all fire/smoke doors close automatically?	❑ Yes ❑ No
Did all fire bells rings?	❑ Yes ❑ No
Was Fire Department notified before and after the drill?	❑ Yes ❑ No
Did Fire Department monitoring service receive the signal?	❑ Yes ❑ No
Was evacuation done correctly as per Code Green Procedures?	❑ Yes ❑ No

Designate:

Announced the fire location?	❑ Yes ❑ No
Stayed in the lobby to direct traffic?	❑ Yes ❑ No
Announced all clear?	❑ Yes ❑ No

Incident Manager:

Checked annunciator panel for location?	❑ Yes ❑ No
Went to fire scene to direct procedures?	❑ Yes ❑ No

Registered Nurse:

Reported directly to assigned areas?	❑ Yes ❑ No
Directed staff according to procedure?	❑ Yes ❑ No

Other Nursing Staff:

Went to assigned areas?	❑ Yes ❑ No
Searched for fire and closed door on all units?	❑ Yes ❑ No
Removed residents in danger?	❑ Yes ❑ No
Assigned individuals went to area with fire extinguisher?	❑ Yes ❑ No

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Fire Drill Evaluation Form

Housekeeping Staff:

Cleared carts and equipment from corridor?	❑ Yes	❑ No
Reported to assigned areas?	❑ Yes	❑ No
Assisted in location/evacuation procedure?	❑ Yes	❑ No

Laundry Staff:

Turned off all equipment?	❑ Yes	❑ No
Closed all doors?	❑ Yes	❑ No
Checked service areas?	❑ Yes	❑ No
Secured elevator on first floor? (if appropriate)	❑ Yes	❑ No

Maintenance Staff:

Shut off equipment and left work area secure?	❑ Yes	❑ No

Dietary Staff:

Turned off all equipment?	❑ Yes	❑ No
Left kitchen?	❑ Yes	❑ No
Searched and closed door in adjacent area?	❑ Yes	❑ No
Evacuated dining room (if necessary)?	❑ Yes	❑ No
Assigned staff to remain with residents?	❑ Yes	❑ No
Reported to Emergency Operations Centre?	❑ Yes	❑ No

Programs:

Checked area and secured as appropriate?	❑ Yes	❑ No
Supervised residents in safe area?	❑ Yes	❑ No
Followed proper procedures?	❑ Yes	❑ No

Beautician:

Followed proper procedures?	❑ Yes	❑ No

Residents:

Did residents actively participate in the drill?	❑ Yes	❑ No

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Fire Drill Evaluation Form

For any "no" response, provide comments below:
Identify problems/concerns:

Corrective actions to be discussed in the debrief.

Name _____

Signature _____

Jan. 2026

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Record Of Fire Drill Attendance Form

Date: _____ Time: _____

Fire Drill Location: _____

Name (Please Print)	Department	Signature

Jan.2026

Helping people
live better

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM3-P10.02
SECTION:	Emergency Plans	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Home Specific Emergency Response Plan	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Plans

PROCEDURE

The Executive Director/Designate must:

- ☐ Complete the Emergency Response Plan (ERP) with home specific information and in accordance with provincial and municipal regulations and regulatory body.
- ☐ Include community partners and the interdisciplinary team when completing and updating the home specific plan (local police, EMS, transportation, suppliers, gas companies, evacuation sites, etc.) and document their input.
- ☐ Review the completed plan with the Regional Director of Operations and Occupational Health and Safety Committee.
- ☐ Review and update the ERP every year and as needed.
- ☐ Designate an individual in the home to be responsible for emergency preparedness; conducting emergency response drills/ tabletops monthly.
- ☐ Ensure drills are conducted on all 13 emergency response codes every year.

The individual responsible for emergency planning and fire safety in the home must:

- ☐ Plan 1 emergency response drill/ table-top per month.
- ☐ Plan 1 fire drill on each shift every month.
- ☐ Help plan the annual fire and evacuation drill with the Executive Director/Designate and fire department.

If it is known that there will be a planned downtime on a system in the home such as wanderguard, door locks, water, internet, etc.:

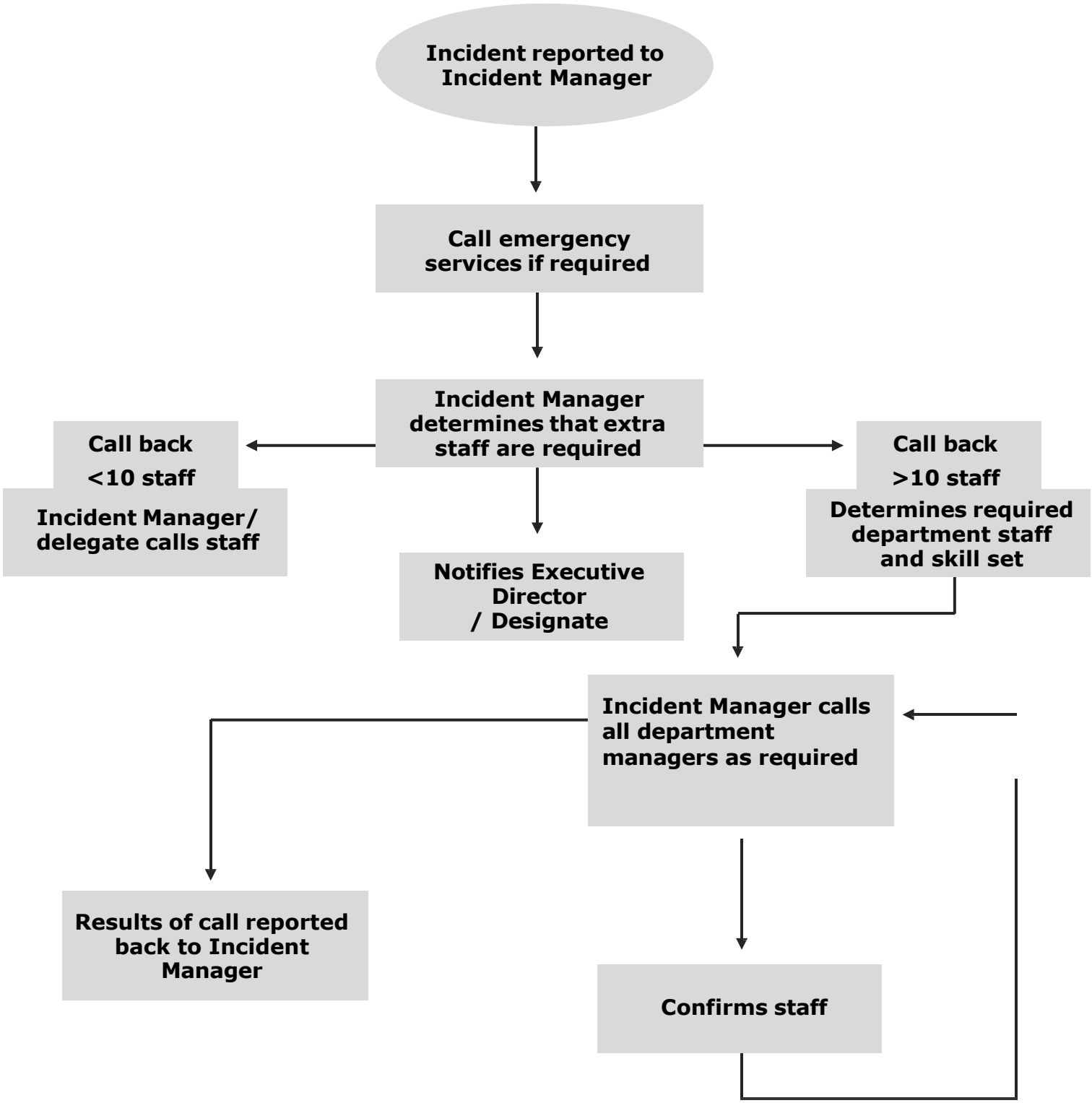
- ☐ Complete the Planned Downtime Planning Template to plan for any possible issues and concerns that may arise during the downtime.

TOOLS

1. Emergency Response Plan Template
2. Staff Call Back Flow Chart
3. Planned Downtime Planning Template

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Staff Call Back Flow Chart



Jan. 2026

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Planned Downtime Planning and Checklist

Date: _____

Planning for the Downtime
What service(s) is/are planned to be down?
How long will it be down for?
Who will lead the downtime and be the Incident Manager (may be more than 1 person if the downtime is planned to be over 1 shift)?
How will this affect residents (consider your unique mix of residents, what are the risks?)?
What is your mitigation plan for the effects on the residents (supplies needed, extra staffing, medical requirements, etc.)?
How will this affect staff?
What is your mitigation plan for the effects on staff (extra staffing, more frequent breaks, education and reminders beforehand, etc.)?
How will it affect operations? Will this result in other downtimes (for example planned power outage may result in loss of cooking equipment, laundry, water supply, etc.)?

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Planned Downtime Planning and Checklist

What is your mitigation plan for the effect on operations?
If the downtime lasts longer than expected, how will your mitigation plans be affected (do you need alternative plans, do you continue with your plans, etc.)?
Are there contracted services that will be affected? Who and how?
How will this downtime affect visitors?
What is your mitigation plan for the effect on visitors?

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare

Planned Downtime Planning and Checklist

Communication Plan
How will you communicate the planned downtime and mitigation plans to residents and families?
How will you communicate the planned downtime and mitigation plans to staff?
How will you notify contracted services of the risks and their roles?
If you require head office support or escalation, how will you communicate the planned downtime and mitigation plans to head office or ask for assistance?
If there are external stakeholders that need to be notified, who will you notify and how will you communicate the planned downtime and mitigation plans or ask for assistance (ex. Fire dept, health authority, regulatory body, police services, are of refuge, etc.)?
How will you communicate the planned downtime and mitigation plans to visitors?
Has your staff completed training related to the downtime and mitigation plan (ex. Code Grey, Code Green, safe lifts and transfers, roles and responsibilities, etc.)?

Helping people live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Planned Downtime Planning and Checklist

Planned Downtime Checklist

____ Have you put mitigation plans in place to minimize the risks of the downtime?

____ Have you enacted your communication plan?

Helping people
live better
This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Extendicare



CORPORATE PANDEMIC PLAN

Corporate Pandemic Plan
Table of Contents

	PAGE
Key Terms and Acronyms	2
Introduction	5
Background	5
Planning	7
Legislative Authorities	8
Roles and Responsibilities in a Pandemic	10
Pre-Pandemic Planning: Corporate Office Support	12
Site-Specific Pre-Pandemic Preparation	19
Pre-Pandemic Assessments and Ongoing Monitoring Requirements	20
Essential Services and Services that can be curtailed during a Pandemic	21
Surveillance: Detecting & Monitoring	22
Staff Contingency Plan	23
Inventory	24
Security and Physical Plant	24
Immunization	26
Education	26
Ethical Considerations	27
Infection Control	29
Environmental Cleaning	33
Personal Protective Equipment (PPE)	35
General Infection Prevention and Control	38

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026

Key Terms and Acronyms

ACUTE RESPIRATORY INFECTION (ARI)
Acute respiratory infection is an infection that may interfere with normal breathing. It can affect just your upper respiratory system, which starts at your sinuses and ends at your vocal cords, or just your lower respiratory system, which starts at your vocal cords and ends at your lungs.

AIRBORNE TRANSMISSION
Refers to the dissemination of either airborne droplet nuclei (small particle residue from evaporated droplets) or dust particles containing the infectious agent. Such micro-organisms remain suspended in the air for long periods and are widely dispersed by air currents. The micro-organisms may be inhaled by susceptible hosts, who may be some distance away for the source resident, depending on environmental factors.

CDC
Centre for Disease Control and Prevention

DIRECT CONTACT TRANSMISSION
Occurs when micro-organisms are transferred from direct physical contact between an infected or colonized individual and a susceptible host (skin-to-skin contact).

INCIDENT MANAGEMENT SYSTEM (IMS)
Tool that provides a standard framework for responding to internal and external events that requires an immediate reordering of daily priorities and deployment of human or material resources.

INDIRECT CONTACT TRANSMISSION
Involves the transfer of micro-organisms to a susceptible host via an intermediate object (e.g., contaminated instruments, inanimate objects).

DROPLET TRANSMISSION
Refers to large droplets (>5µm in size) that are generated when the source resident coughs or sneezes, or during the performance of certain procedures such as bronchoscopy or suctioning. These droplets are propelled a short distance (<2 metre) through the air and are deposited on the mucous membranes of the nose or mouth and possibly eyes of the new host.

DROPLET AND CONTACT PRECAUTIONS
Precautions designed to reduce the transmission of disease spread by contact with respiratory secretions generated by sneezing, coughing, laughing or speaking.

EXPOSURE
Contamination with potentially body fluids or secretions by contact with mucous membranes, broken skin or inhalation of aerosols.

ACUTE RESPIRATORY INFECTION (ARI) SCREENING
A routine process by which specific respiratory related questions are asked to resident, staff or visitor.

HAND HYGIENE
Hand hygiene with liquid soap and running water (15 to 20 seconds contact time with soap) or use of alcohol-based hand rub (ABHR - 70% to 90% alcohol, isopropanol or ethanol) for 15 to 20 seconds.

HIERARCHY OF CONTROLS
The hierarchy of controls consists of engineering controls, administrative and work practices and Personal Protective Equipment (PPE).

1. Engineering controls are the first and most effective line of defense because they involve permanent changes in the health care setting that reduce exposure to infectious agent and they eliminate the risk of "human error" or non-compliance with recommended practices or use of PPE.
2. Administrative and work practices include ways of organizing and providing care and services — at the system level and the individual organization level — that reduce the risk of exposure.
3. PPE refers to equipment worn to prevent the transmission of disease while in contact with residents with transmissible disease.

INFLUENZA-LIKE ILLNESS (ILI)
Acute onset of respiratory illness with fever and cough, and one or more of the following: sore throat, arthralgia, myalgia or prostration, which could be due to influenza virus. In children under five, gastrointestinal symptoms may also be present. In persons under five or 65 and older, fever may not be prominent.

ISOLATION
Limiting a resident's movement and social contacts when he/she has an active infectious disease or is the carrier of an infectious disease.

MODES OF TRANSMISSION
Routes of transmission of infectious agents have been classified as contact, droplet, airborne, fomites and vector borne. Contact is the most common route of transmission of infectious micro-organisms from symptomatic or asymptomatic resident. Droplet transmission is also common for resident with active respiratory symptoms. Airborne occur less frequently, and vector borne transmissions are rare.

PHAC
Public Health Agency of Canada

PIDAC
Provincial Infectious Diseases Advisory Committee (committee reports to the Chief Medical Officer of Health for Ontario)

PPE
Personal Protective Equipment refers to equipment worn to prevent the transmission of disease while in contact with resident with transmissible disease.

QUARANTINE
Separating and restricting the movement of people who are not ill but have been exposed to an infectious disease.

ROUTINE PRACTICES
Routine practices are methods which are used regularly to protect ourselves when there is potential for contact with blood or body fluids. We cannot always tell if a person has an infection, so we must treat all blood and body fluids as potentially infectious. Body fluids can include feces, urine, vomit, nasal secretions, sputum, saliva, vaginal secretions, wound drainage, etc.

WHO
World Health Organization

Introduction

Pandemics spread around the world. A pandemic is distinguished by its scope. It becomes a worldwide epidemic, or pandemic, when a disease spreads easily and rapidly through many countries and regions of the world and affects a large percentage of the population where it spreads.

A pandemic starts when a new infectious disease emerges that is different from common strains. Because people have no immunity to the new virus, it can spread quickly and infect hundreds of thousands of people. Pandemic viral infections often develop when an animal or bird virus is transmitted to humans and then the virus develops so that it can travel from human to human.

The novel virus will have to be studied to determine the incubation period and its virulency. The length of time that the virus is contagious will vary as well.

A pandemic virus can appear very similar to seasonal infections that already occur in our populations. Because people may have little or no immunity to this novel virus, the spread of the disease can occur with devastating effects on the population. The symptoms can be like influenza: fever, headache, aches and pains, chills, fatigue, stuffy nose, sneezing, sore throat and cough.

An acute respiratory illness (ARI) is spread when someone with the infection coughs or sneezes, and droplets containing the virus come in contact with another person's nose, mouth or eyes. It can also be spread by coughing or sneezing into their hands and contaminate things they touch, such as a door handle. Other people can become infected if they touch the same object and then touch their face.

As we know, a pandemic may last globally as long as eighteen months in several waves with mortality and morbidity increasing/decreasing sporadically. Waves of severe disease may last for up to 4 months.

Background

Advanced planning for a large scale and widespread health emergency is required to optimize service delivery during a pandemic. Unlike other public welfare emergencies, a pandemic will impact on multiple programs across our provinces simultaneously. Therefore, contingency planning is required to mitigate the impact of a pandemic through planning, preparation and collaboration.

This Pandemic Plan has a national scope, and its purpose is to provide the staff and management of our Extendicare sites with guidelines for the preparedness and response to a pandemic.

Our sites will work in collaboration with federal, provincial, municipal, health/community care and other agencies to plan and respond to a pandemic crisis.

Note: *In this document, "sites" refers to all Extendicare and Extendicare Assist physical locations including all corporate offices.*

PURPOSE
All sites together with the federal and provincial governments and regional public health authorities believe in a pro-active approach towards creating a community wide, regional, provincial and organization Pandemic Plan. This plan is to be included in the site's Emergency Response/Disaster Plan. The purpose of the plan is to:

- Minimize serious illness and death through infection prevention and control practices and protocols
- Minimize disruptions in care and services to our residents
- Ensure that all staff members are prepared to provide care and services safely to our residents
- Maintain the health of residents and staff members during a pandemic; and
- Maintain the consistent operation and business function of our corporate offices, long-term care homes, and retirement homes

Planning

PLANNING ASSUMPTIONS	
Extendicare's four key strategies for preparation of and during a pandemic are: **READINESS, WATCHFULNESS, DECISIVENESS, & TRANSPARENCY.**	
Readiness	Planning and preparation at our corporate offices and in all our sites in anticipation of a potential pandemic.
Watchfulness	Practising active screening and surveillance in all our LTC homes, retirement communities and home care settings to identify the earliest signs of a possible outbreak.
Decisiveness	Managing the spread of an outbreak quickly and effectively.
Transparency	Ongoing communications with corporate, LTC homes, retirement communities and home care staff, residents, and families.

An Acute Respiratory Illness (ARI) pandemic outbreak will affect the entire health care system in many communities. Health care facilities will have limited capacity. Our sites may not have the same level of support from other health care services in the community.

Pandemic Plans must be coordinated with the plans of other organizations in the community and with the local/regional plans.

The number of health care workers available to provide care may be reduced by up to one- third for a variety of reasons. Usual sources of supplies may be disrupted or unavailable. A vaccine may not be available for at least 18-24 months after the pandemic strain is identified. When available, it may be in short supply.

Extendicare will have to rely on traditional infection prevention and control practices e.g. hand hygiene, appropriate PPE, physical distancing, isolation and cohorting staff and residents as the main line of defense.

To meet community needs during a pandemic, resources including staff, supplies and equipment may have to be reassigned or shifted. Care protocols may change, and practices may have to be adapted as the pandemic evolves.

Extendicare will need effective ways to communicate with residents' families and friends, to meet their needs for information but reduce the demands on staff.

Accurate reporting and early diagnosis are essential. Reporting will include all signs and symptoms to determine if another strain of the virus is developing.

To reduce the risk to staff of acquiring an acute respiratory illness in the workplace, our health care settings are expected to:

- Ensure all staff have the education, training and supervision they need to protect themselves and provide effective care;
- Institute appropriate occupational health and infection prevention and control measures; and
- Provide appropriate PPE.

This plan is based on and reflects the pandemic planning and direction from the following:

- World Health Organization (WHO)
- Public Health Agency of Canada (PHAC)
- Canadian Pandemic Influenza Plan (CPIP)

As Extendicare has sites in multiple provinces, there is a requirement for each site to follow their province's provincial Pandemic Plan in addition to the Extendicare's Pandemic Plan:

Alberta	http://www.health.alberta.ca/documents/APIP-Pandemic-Plan-2014.pdf
Manitoba	http://www.gov.mb.ca/health/publichealth/cmoh/docs/ppim.pdf
Ontario	http://www.health.gov.on.ca/en/pro/programs/emb/pan_flu/docs/ch_01.pdf

Coordinating Authorities

WORLD HEALTH ORGANIZATION: WHO Pandemic Influenza Preparedness and Response

To assist with pandemic planning, the World Health Organization (WHO) has developed the phases of a pandemic. These are widely used in pandemic planning around the world to help guide the planning response.

PHASE	DESCRIPTION
Phase 1	No new influenza subtypes have been detected in humans. An influenza virus subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection is considered low.
Phase 2	Virus circulating among domesticated or wild animals is known to have caused infection in humans and is therefore considered a potential pandemic threat.
Phase 3	An animal or human-animal influenza reassortment virus has caused sporadic cases or small clusters of disease in people but has not resulted in human-to-human transmission sufficient to sustain community-level outbreaks. Limited human-to-human transmission may occur under some circumstances, for example, when there is close contact between an infected person and an unprotected caregiver. However, limited transmission under such restricted circumstances does not indicate that the virus has gained the level of transmissibility among humans necessary to cause a pandemic.
Phase 4	Is characterized by verified human-to-human transmission of an animal or human-animal influenza reassortment virus able to cause "community-level outbreaks." The ability to cause sustained disease outbreaks in a community marks a significant upwards shift in the risk for a pandemic.

PHASE	DESCRIPTION
	Any country that suspects or has verified such an event should urgently consult with WHO so that the situation can be jointly assessed and a decision made by the affected country if implementation of a rapid pandemic containment operation is warranted. Phase 4 indicates a significant increase in risk of a pandemic but does not necessarily mean that a pandemic is a forgone conclusion.
Phase 5	Is characterized by human-to-human spread of the virus into at least two countries in one WHO region. While most countries will not be affected at this stage, the declaration of Phase 5 is a strong signal that a pandemic is imminent and that the time to finalize the organization, communication, and implementation of the planned mitigation measures is short.
Phase 6	The pandemic phase is characterized by community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in Phase 5. Designation of this phase will indicate that a global pandemic is under way. During the post peak period, pandemic disease levels in most countries with adequate surveillance will have dropped below peak observed levels. The post-peak period signifies that pandemic activity appears to be decreasing; however, it is uncertain if additional waves will occur and countries will need to be prepared for a second wave. Previous pandemics have been characterized by waves of activity spread over months. Once the level of disease activity drops, a critical communications task will be to balance this information with the possibility of another wave. Pandemic waves can be separated by months, and an immediate "at-ease" signal may be premature. In the post-pandemic period, influenza disease activity will have returned to levels normally seen for seasonal influenza. It is expected that the pandemic virus will behave as a seasonal influenza A virus. At this stage, it is important to maintain surveillance and update pandemic preparedness and response plans accordingly. An intensive phase of recovery and evaluation may be required.

Source: World Health Organization

PUBLIC HEALTH AGENCY OF CANADA (PHAC) – Guidance for Canada

To help guide pandemic planning and response in Canada, the Public Health Agency of Canada has developed a numbering system to reflect pandemic activity in Canada. The Canadian activity level number is used in conjunction with the WHO phase number to confirm the level of pandemic activity in Canada.

- 0 - indicates no activity in Canada
- 1 - indicates low activity and low risk in Canada
- 2 - indicates higher activity and risk in Canada

Emergency Management in Canada Is Organized into Five Stages:

STAGE	DESCRIPTION
1. Prevention	Involves activities taken to prevent or avoid an emergency or disaster. The eradication of smallpox is an example of a prevention strategy.
2. Mitigation	Involves actions that can reduce the impact of an emergency or disaster. Influenza immunization and infection prevention and control measures are health-specific examples of mitigation. They will not prevent a pandemic, but they may lessen its impact by reducing disease transmission.
3. Preparedness	Involves measures that are put in place before an emergency occurs that will enhance the effectiveness of response and recovery activities, such as developing plans, tools and protocols; establishing communication systems; conducting training; and testing response plans.
4. Response	Involves the coordinated actions that would be undertaken to respond to an emergency or disaster.
5. Recovery	Involves activities that help communities recover from an emergency or disaster and return to a state of normalcy. This includes activities to repair damage, rebuild infrastructure, restore services, provide financial assistance and the ongoing treatment and care for the sick or injured. This stage may also include prevention/mitigation measures designed to avert a future emergency (e.g. Vaccination to prevent a future outbreak). The recovery phase also applies to those involved in response who need time to recuperate and renew themselves.

Note: *Sites will also follow the direction of their Provincial and local Public Health Authorities.*

Roles and Responsibilities in a Pandemic

The World Health Organization (WHO) is responsible for coordinating a global response to a pandemic, including:

- has established the phases for pandemic planning and made recommendations about how all jurisdictions should plan for and manage a pandemic
- declaring a pandemic

The Government of Canada is responsible for coordinating the nation-wide response, including:

- communicating with the World Health Organization, the US Centers for Disease Control, other national /international organizations to coordinate surveillance, investigation and vaccine activities
- confirming pandemic activity in Canada

- procuring/distributing diagnostic reagents and technical information to provincial/territorial public health laboratories
- research to develop a new vaccine
- establishing a domestic vaccine manufacturing capacity
- acquiring vaccine and antiviral drugs and allocating them equitably
- providing vaccine and antiviral drugs to specific populations for which the federal government is responsible (e.g., First Nations, RCMP, military personnel)
- PHAC has developed the Canadian Pandemic Influenza Plan for the health sector, which describes the actions the federal government will take and sets out expectations for the provinces and territories

The Provincial Government is responsible for planning and managing the response to a pandemic in the province, including:

- implementing national recommendations for surveillance and immunization programs
- maintaining provincial surveillance activities, reporting diseases caused by the novel virus and participating in national surveillance activities
- coordinating investigations of outbreaks and clusters of acute respiratory infection (ARI)/influenza-like illness (ILI)
- confirming pandemic activity in the province
- undertaking tasks most effectively done at the provincial level (e.g., bulk purchasing equipment, stockpiling and distributing medical supplies, distributing vaccine and antivirals)
- providing guidelines and direction to local public health authorities and the health care system to ensure a consistent response across the province
- supporting special studies to enhance the province's capacity to manage a pandemic
- coordinating public education programs

Municipal government and local public health authorities are responsible for coordinating the local response to a pandemic, including:

- maintaining a local surveillance system, reporting clusters of ARI/ILI, and investigating outbreaks
- confirming pandemic activity locally
- developing plans to provide mass immunization and distribute vaccines, antiviral drugs and medical supplies
- liaising with local partners (e.g., emergency responders, hospitals, community services, mortuary services, schools, workplaces)
- assessing the capacity of local health services, including health human resources, and helping health services identify additional/ alternative resources
- defining clear responsibilities for communication at the local and facility level during a pandemic
- collaborating with the provincial government to deliver public information/education programs
- delivering mass vaccination / prophylaxis program

Each local health unit will have a pandemic coordinating plan that will set out the steps that local healthcare organizations/services should take to prepare for and respond to a pandemic.

Pre-Pandemic Planning: Corporate Office Support

HUMAN RESOURCES	
Restricting Workplace Entry of Staff Acute Respiratory Illness (ARI) Symptoms	Should there be a pandemic risk, sites will post notices at all entry points advising staff and visitors not to enter if they have any respiratory symptoms. If a person feels ill, or if someone observes that another person is exhibiting symptoms at work, they are to contact their direct Manager.
Increasing Social Distancing	Social distancing means minimizing human-to-human contact in peak phases of the pandemic. Contacts are those persons who have had close (less than 2 meters) physical or confined airspace contact with an infected person within 3 days of that person developing symptoms. These are likely to include family members and/or living companions/workmates (if in confined workspace environments) and possibly recreational companions. To increase social distancing, the following measures should be taken: • Avoid face-to-face meetings; minimize meeting times; meet in large rooms; • Avoid unnecessary travel; • Cancel or postpone non-essential meetings/workshops/training sessions; leave a gap between shifts, where applicable; • Ventilate the workplace between shifts, where possible; • Avoid employees gathering in cafeterias and restaurants; introduce staggered lunch times; and • Use communications and network technologies and devices to communicate, including working-at-home remotely.
Staff Travel	Should a pandemic be declared in Canada, staff might be asked to cancel any business/travel plans and/or put future travel plans on hold. Should Extendicare feel it is necessary to issue a "no travel" advisory for staff, this information will be disseminated to all staff. If you are a staff member and have returned from a country that is affected by a pandemic, you may be asked to stay at home on quarantine. Please contact your immediate manager or your People and Culture Representative for more information.
Working at Home	During a peak period of a pandemic, all staff and volunteers who are considered "non-essential" will be asked to work from home. Your direct manager will advise you if you should work at home or not.

HUMAN RESOURCES	
Employee (Self) ARI Screening	All employees receive information on routine self -ARI Screening at orientation. Routine self- ARI Screening is an ongoing, daily process for employees who work directly with residents. If a staff member fails a routine self- ARI Screen, they must contact their manager immediately for further direction. In the event of a pandemic, enhanced ARI Screening practices may be necessary which are specifically related to an infectious disease. The IMS team will provide information to sites and employees regarding the enhancements.
Employee Exposure to Pandemic Illness/Staff Quarantine	During a pandemic, it is likely that employees may be exposed to a pandemic illness either through their work with residents or from the community. Any reported employee exposures must be reported to the Occupational Health and Safety department by the Supervisor. Further direction will be provided from the Extendicare's People and Culture (P&C) division and Occupational Health and Safety (OH&S) department related to eligibility for Short Term Disability, requirements for Return-to-Work forms and length of time that is required to be off work. Staff may be asked to self-quarantine and follow PH authority. Employees will be advised by the OH&S department regarding appropriate documentation protocols for employee exposure to pandemic illness through work-related means.

INFORMATION TECHNOLOGY/TELEPHONE SUPPORT	
During a Pandemic situation, the Information Technology Team will ensure the following supports are in place to address the operational needs within the field:	
Cell Phones	• Technical supports and liaison with our vendors regarding any service needs or requirements.
Direct Phone Lines – Service Provider	• Technical support and liaison with telephone services supplier (i.e., Telus) regarding any service needs or requirements. • Support to sites for transfer/forwarding of telephone lines as required. • Provide direction to the field regarding voicemail system/email and advising if alternate contact numbers (i.e., cell phone) should be listed on voicemail/email greeting due to any service provider systems issues.
Telephone Equipment	• Provide technical support and liaison with Telephone Equipment supplier and other vendors regarding any service needs or requirements. • Will provide the back-up supports to ensure operations can be maintained based on the operational needs.
Laptops	• Provide technical supports and liaison with laptop provider and the corporate office regarding any service needs and requirements. • Ensure additional resources from corporate are in place to assist with distribution.
Resident Database	• Ensure availability of knowledgeable staff to provide necessary support to maintain resident databases (i.e., Point Click Care) and any functions related to the resident database that may be required (i.e., reports). • Ensure regular system maintenance to minimize system issues or challenges. • Ensure back-up resource for the resident database vendor is available and establish contingency plans. • Ensure that finance components and requirements of the resident database are properly supported.
Back-up Support	• Maintain and review inventories for all department staff with regards to laptops and cell phones. • Establish emergency/contingency contact numbers with the office and contacts for field.
Stockpile and Moving of Inventory	• Stockpile a contingency supply of laptops that may be sent to employees as needed to accommodate staff working off-site. • Track equipment distribution to ensure follow-up and return when no longer required, ensuring emergency supply is only used for appropriate situations.

FINANCE

The adverse economic effects of a pandemic could be significant, locally, provincially and nationally. The Extendicare Finance Continuity Plan will serve as a guide to maintaining operational stability during times of emergency, disaster, pandemic or unforeseen events:

- facilitate timely, responsible decision making and communication process
- minimize risk to residents, staff and the organization
- reduce disruption to billing, payroll and accounts payable processing
- monitor/track cash flow and emergency expenditures
- protect essential equipment, records and other assets

It is expected that all substantial pandemic related expenditures will be discussed in collaboration between the Senior Leadership Team and the Finance Department prior to any transactions occurring. Specialized coding may be required to identify emergency expenditures during a state of pandemic. Issues that may have a substantial financial impact during a pandemic include:

- Staff absenteeism
- WSIB/exposure/quarantine management
- Reduction of program services
- Increase in PPE purchase requirements
- Staff training requirements
- Hiring/Orientation demands
- EAP
- Legal

COMMUNICATIONS DEPARTMENT

The goal for our Communication Department is to provide accurate and timely information both internally and externally about illness prevention, health emergency preparedness and our role during a health emergency in a way that:

- is in line with the PHAC's and provincial public health authorities messaging
- informs and reassures the public and the media of Extendicare's preparedness to assist in a potential pandemic
- encourages emergency preparedness
- encourages the prevention of disease transmission
- informs the public about what Extendicare and the site is doing operationally
- provides local communication materials
- provides reliable internal communication support for all staff

The Communications Department will be the point of contact for media and will manage all public information regarding the pandemic. The Pandemic IMS Team will also prepare messages and release significant information approved by the Communication Department, as applicable.

The Communications Department will:

- Prepare messages in collaboration with the Pandemic IMS Team
- Respond to media requests for information
- Monitor the media to ensure that they are accurately reporting the information to the public
- Coordinate media briefings and conferences
- Prepare and brief spokesperson

COMMUNICATIONS DEPARTMENT

- Consider website information and updates
- Investigate and manage rumours related to the emergency
- Work closely in collaboration with the Pandemic IMS Team and
- Maintain a Personnel Log of all actions taken

Extendicare's Emergency Response Plan (ERP) Manual, the Incident Management System (IMS) contain the communication framework, responsibilities/functions and policies and procedures to ensure communication during an emergency event like pandemic.

Each site's ERP contains a fan out list, internal employee contact information to ensure our management of the emergency event is coordinated and based on timely communication to and from all internal and external stakeholders.

External stakeholders with respect to pandemic include:

- WHO
- PHAC/local Public Health Units
- Provincial Ministries of Health
- Local Contractors/Funders
- Local City/Municipal Emergency Management Units/Planners
- External Service Provides (O, PT, Pharmacy)
- Residents/Families

Internal stakeholders include:

- Internal staff at each site
- Corporate office staff

COMMUNICATION PROCESS

Background	Effective internal and external communications provide the backbone for a coordinated response to an emergency event. Information will be shared throughout Extendicare and to/from external stakeholders in a timely and accurate manner. Communications will focus on providing up-to-date accurate information about the event and required actions to be taken to respond to the situation. The Corporate Communications Department will support the site with the communications process during a pandemic or other emergency event. In addition to this, regular messaging will be coordinated with key internal and external players and shared with relevant media throughout the emergency process. This may include email communications or in serious cases, joint press conferences with lead agencies (e.g., Ministries of Health).
Communication Plans	• All residents, family members and employees will be informed of the outbreak/pandemic using a prepared script via telephone or email • Media statements or media releases will only be made by the designate individual at each site

COMMUNICATIONS DEPARTMENT	
	• Maintain up-to-date contact lists for staff and residents' substitute decision makers/families or caregivers (including telephone and email addresses if available) • While this information is always available online on PointClickCare in the residents' health records and their financial files, it is essential that an up-to-date list be maintained and included in the Emergency Response policies and procedures and updated regularly • For breakdown of our internal communications systems: follow loss of communications in the Emergency Planning and Management policies and procedures
Format of Communications	Urgent emergency/pandemic management related information will be communicated through the Corporate IMS team. The information sent out by the IMS Team includes: • Information pertaining to the emergency event (what it is, the reason for concern and the need for response) • Q&As • Extendicare's overall plan for addressing the event • Required actions at the sites and who is responsible • Personal actions staff can take to protect themselves and loved ones • Educational materials for staff and/or clients • New/revised processes, policies and procedures • Key messages for external stakeholders, as required • Contact information for additional questions • Updates related to the event and/or • Notification that the emergency event is over and any final actions
Modes of Communication	The following modes of communication can be used during an emergency event to communicate with our decentralized staff members: • A 24-hour emergency line where staff can call in and receive daily updates, information/ direction • Email to mobility devices • Confidential voice mail • Group voice mail • Individual phone calls • Teleconferences • Virtual meetings • Newsletters • Social media • Handouts/Mail outs • Posting of notices/reminders on a specific community and staff notice boards • Public Service Announcements where internal communications have failed and/or

COMMUNICATIONS DEPARTMENT	
	• Social media accounts, which may continue running during emergencies In addition, internal staff also have access to communications via email system, the intranet, network shared drives.

Site-Specific Pre-Pandemic Preparation

INCIDENT MANAGEMENT SYSTEM (IMS)	
IMS Team	The Incident Management System team will be selected based on expertise, experience with outbreaks, knowledge of the local situation and background. This team will be responsible for carrying out various activities related to the emergency.
Incident Manager	Responsible for overall management of the site in which the emergency occurs. The Incident Manager will assign IMS roles that mimic everyday staff routines and responsibilities as closely as possible. The Incident Manager/designate may assume all the roles/functions to meet the needs of the emergency or can designate a person to a role or roles. *The designated person(s) can assume more than one role/function at a time based on the site's staffing complement; there must be an Incident Manager on all shift (this role will fall to the most senior staff member at the location).*
Public Information Officer	In consultation with Extendicare's Corporate Communications Department, the Public Information Officer is responsible for the development and release of information about an incident to the public, families, stakeholders and the media. ***Note:*** *The Corporate Communications Department must approve all emergency information released.*
Liaison Officer	Responsible for community liaisons and advising the Incident Manager/Senior Command about issues related to external assistance and support in consultation with Corporate Communications.
Safety Officer / Coordinator	Responsible for monitoring conditions and developing safety protocol for the overall health and safety of residents and staff/volunteers. The Safety Officer must have the knowledge and professional experience to identify and/or reduce occupational hazards.
Information Technology Officer	Responsible for managing IT requirements or issues during an emergency at the site level. Liaises with the corporate IT department, as required and provides a status report to the Incident Manager.
Operations Manager	Responsible for carrying out the emergency response, evacuation, triage, containment, damage mitigation, recovery and directives of the Incident Manager. When required, coordinates and ensures ongoing resident care during emergency operations and monitors operational issues or needs including the implementation of the Emergency Response Plan and Extendicare's operations resources.
Planning Manager	Responsible for monitoring the incident and developing scenario and resource projections. Develops plan options for both short-term and long-term incident

INCIDENT MANAGEMENT SYSTEM (IMS)	
	scenarios; and collects, collates, evaluates and conducts analyses of incident information for the IMS Team.
Logistics Manager	Responsible for providing facilities, services and materials to support the emergency, including maintaining physical/environmental services of the building, ensuring adequate supplies and support for incident operations, and conducting or collecting information for damage assessments of the home/office.
Finance / Administration Manager	Responsible for financial and administrative support to an incident, including business processes, cost analysis, financial and administrative aspects, and ensuring compliance with financial policies and procedures. Provides direction and supervision to finance and administration section staff, including their organization and assignment; and ensures appropriate documentation of all incident activities and administrative support for the IMS Team leaders.
Senior Command Incident Manager	The Vice President, Operations and/or designate/Regional Director of Operations is responsible for the overall management of the site involved in an emergency.
Senior Command	This role is initiated in an emergency involving more than one site (e.g. pandemic).

Pre-Pandemic Assessments and Ongoing Monitoring Requirements

ASSESSMENT & MONITORING OF RESIDENTS' CARE NEEDS	
Identify:	• Residents who can be discharged to family members in the event of an outbreak • Residents whose needs could be met by home care • Residents who must continue to be cared for in a home • Residents who are likely to require acute care • Residents at higher risk of complications from respiratory illness List to be kept in pandemic plan binder and updated regularly. See format below:

RESIDENT CARE NEEDS ASSESSMENT FOR PANDEMIC PLAN				
Residents who can be discharged to family members	Residents whose needs could be met by home care	Residents who must continue to be cared for in a home	Residents who are likely to require acute care	Residents at higher risk of complications from influenza

- - -	- - -	- - -	- - -	- - -

Essential Services and Services that can be curtailed during a Pandemic

During a pandemic, staff will likely be in short supply; they will have to focus on delivering essential services.

Services that MUST be maintained to provide care and protect residents/clients' health	• life-maintaining medications and treatment • basic bathing, peri-care and mouth-care • changing of linens as needed only • basic laundry services e.g. towels, face cloths, bed linens & pajamas • dietary services for fluids and nutrition • Housekeeping and enhanced disinfection – enhanced
Services that can be reduced or curtailed	• Physiotherapy, • Occupational Therapy • Appointments • Recreational activities • Hairdressing • Foot-care for non- diabetics • Personal laundry
Outside services scheduled to come in that are essential and those that can be postponed or provided remotely	• Pastoral Care • Oxygen supplier • Family member visiting a resident who is imminently dying • Repair company for emergencies • Blood work/lab technicians • Doctors, Nurse Practitioners

All others can be postponed unless the pandemic lasts a long time, then re-assessment of essential needs must be determined.

Surveillance: Detecting & Monitoring

SURVEILLANCE	
Surveillance is the continuous and systematic process of collecting, analyzing, interpreting and disseminating descriptive information to monitor public health and ensure timely interventions to reduce morbidity and mortality. Surveillance is the essential component of any effective infection, prevention and control program. It is unlikely that the spread of a pandemic strain will first be detected in our sites, however because residents/clients are highly vulnerable, a pandemic could spread quickly and easily from the community to the site.	
Purpose:	Surveillance is our sites' primary function. A strong surveillance program will ensure early identification of a potential outbreak or an outbreak in its early stages so that control measures can be instituted as soon as possible to protect residents/clients and staff
Responsibility for Surveillance:	• Infection Control Practitioner • Registered Staff on every shift including weekends and holidays
Target Groups for Surveillance:	• Residents/Clients • Staff • Students • Volunteers • Family/Friends • Visitors
ARI Surveillance	Surveillance for an ARI must be ongoing throughout the year and increased as flu season progresses. If a pandemic is declared in the province, respiratory screening for all staff and essential visitors is required
Resident/Client Surveillance	• LTC homes are required to do continuous site-wide surveillance to establish baseline levels of infection throughout the year • Infection rates above the baseline may indicate an outbreak or the arrival of the pandemic strain in the site
Ongoing Surveillance Program	The ongoing surveillance program includes: • Screening of all new admissions as directed by Health Authority • Ongoing assessment of residents for signs and symptoms as per case definition(s) • Testing will be required to determine the causative agent, when symptoms are identified • The Infection Control Professional or delegate reports any potential outbreak to the Public Health Unit

SURVEILLANCE	
Staff, Student & Volunteer Surveillance	• Conducted throughout the year • Ensure all staff, students and volunteers are aware of early signs & symptoms of the infection • Clear expectation that you will not come into work when ill (this policy may change during a Pandemic) • All are expected to report illnesses to the DOC or delegate, confidentiality ensured • Clusters will be reported to the Public Health Unit and to the Joint Occupational Health & Safety Committee • Any occupationally acquired infection must be reported to the Ministry of Labour (Ontario) following Provincial legislation
Family Members and Visitor (including contractors) Surveillance	Anyone entering or carrying on activities within this facility must be screened (active or passive) for symptoms of ARI each time they enter. Signs and hand hygiene stations are to be posted at all entrances instructing family members and visitors to: • Perform hand hygiene • Self/active screen for symptoms of ARI (new cough, new shortness of breath, fever) as per Ministry guidelines • Not to enter if they have respiratory symptoms • Ask to sign in and out to maintain a record in the event of an emergency or outbreak

Staff Contingency Plan

Optimizing Deployment of the Workforce:

- To identify the skills and competencies required to provide care
- To provide tools that can be used to assess skills

Competencies are defined as the skills, knowledge and judgment required to deliver a particular health care service. A competency-based approach identifies the competencies required and the competencies available to deliver the services that people need during an influenza pandemic.

Up to 20-50% absenteeism from work, vendors, and services within our sector may occur. Absenteeism will be the result of staff becoming ill, staying home to care for others, or refusal to go to work. Ill staff will be directed by Public Health as to the length of time they need to remain off work. Behavioral change may occur during a pandemic – staff may limit their activities and choose to avoid others. They may become fearful, angry or opportunistic. Staff with secondary jobs will be required to choose between employers.

Inventory

- Identify required supplies/alternative supply chains
- The site should have an Inventory Tracking Sheet
- Traditional supply chains may be disrupted
- Establish relationships with alternative suppliers/sources
- The site should have a list prepared of the following suppliers and an alternate supplier. See following format:

Supplies Required	Supplier	Alternate Supplier
Equipment suppliers		
Food suppliers		
Pharmacies		
Oxygen suppliers		
Attending physicians		
Coroner		
Medical Supplies		
Incontinence Products		
Environmental (cleaning and laundry) supplies		

Economic/legal implications due to the pandemic may occur including:

- Staff overtime/km compensation
- Unable to provide service
- Unable to meet contractual obligations
- Unforeseen purchases may be necessary
- Replacement products may be at a higher cost
- Critical functions conducted by external contractors, consultants and vendors may be erratic and limited (technology, delivery services, suppliers, contractors)

Security and Physical Plant

Sites may require additional or different security procedures to lock down the site and/or to safeguard supplies.

To make provisions to manage traffic flow into and within, the sites may implement the following measures:

- Entry to the building will be only through the main entrance
- Staff exit from the building will be the main entrance
- Essential visitors exit from the building will be through the main entrance
- All people except staff who enter the building are required to sign the register and sign out when leaving
- All people who enter the building will be required to screen as per public health screening criteria and guidelines

Immunization

IMMUNIZATION STATUS	
Residents Immunization Status	• At Extendicare we recommend all residents receive annual influenza vaccines, and COVID vaccines unless contraindicated. • We also offer residents Tetanus diphtheria and pertussis T-DAP vaccinations • The immunization record of the resident shall be retained in their individual plan of care • If the resident is being transferred, the receiving health care facility must be informed about their immunization status along with their transfer sheet and an outbreak notification form
Staff and Volunteers' Immunization Status	• Extendicare has an annual influenza immunization campaign, and all staff are encouraged to participate • Extendicare has a policy that requires the COVID 19 primary series vaccination as a condition of employment. All staff are encouraged to get their boosters when eligible and in home clinics are offered where able

Education

Preparedness will include ongoing education of staff, volunteers, residents, residents and families the site's pandemic plan. A significant amount of information will focus on infection prevention and control practices and measures to protect the health of staff and residents. The site's DOC or designate and the ICP (Infection Control Practitioner) are responsible for developing education plans and providing training.

Education Plans must include:	• The person/position responsible for the training/education program: DOC or designate & ICP • The education required for staff, including staff who do not routinely care for residents but might have to during a pandemic • Education for volunteers • Education required for residents, Residents' Council, families, and the Family Council, which may include training family members to assist with some aspects of care during a pandemic e.g. bed baths, feeding & toileting • Education for visitors • Methods for training staff and volunteers quickly for new and altered roles - e.g. job descriptions and duties sheets developed and available • Approaches to training - e.g. team-based approaches will ensure any temporary workers receive appropriate support and supervision, and cross-training to ensure staff are able to cover one another's duties

	• Frequency of training - e.g. during orientation, then annually. This may occur more frequently if threat of pandemic is imminent • Every effort will be made to ensure that education provided by the sites is consistent with that provided by other sites and health care organizations in the community and province
Education Programs should include but not be limited to:	• Extendicare's pandemic plan • The importance of hand hygiene and proper hand hygiene techniques • Appropriate cleaning and disinfection of equipment i.e. any equipment that is shared between residents must be cleaned and disinfected after each use • Appropriate use of PPE which includes application, removal and disposal of gloves, gowns, eye protection, and surgical masks • Risks associated with infectious diseases • Staff conducting risk assessments • Benefits of case finding/surveillance • Principles and components of routine infection control practices • Risks of transmission • Procedures that are considered high risk and why • Individual staff responsibility to keep other staff and residents safe • Employer's responsibility to protect workers' health • Risks, benefits and myths regarding immunization • Changes to exclusion policies during a pandemic and why

Ethical Considerations

Ethical considerations need to be made ahead of time re: which services will be provided; how services will be provided; who will be allowed into the site; how limited resources will be used.

Individual liberty/ Protection of the Public from Harm *(i.e., isolation)*	They will also ensure that all those involved are aware of the medical and ethical reasons for these measures, the benefits of complying and the consequences of not complying.
Proportionality	Restrictions on individual liberty and measures to protect public from harm should not exceed the minimum required to address the actual level of risk or need in the community. Sites will use the least restrictive or coercive measures possible when limiting or restricting liberties or entitlements.
Privacy: Individuals have a right to privacy, including	During a pandemic, it may be necessary to override this right to protect the public from serious harm; however, to be consistent with the ethical principle of proportionality, sites will limit any disclosure to only information required to meet legitimate public health needs.

the privacy of their health information	
Equity	During a pandemic, sites will strive to preserve as much equity as possible between the needs of residents with influenza and residents who need care for other diseases, and to establish fair decision-making processes/criteria. When sites must identify residents and staff who will have priority access to antivirals, vaccines or other treatment, they will ensure that everyone is aware of the criteria used to make those decisions (see tables). They will also be aware of the impact that these decisions may have on the site.
Duty to Provide Care/Reciprocity	Health care workers have an ethical duty to provide care and respond to suffering. During a pandemic, demands for care may overwhelm health care workers and their institutions and create challenges related to resources, professional practice, liability and workplace safety. Health care workers may have to weigh their duty to provide care against competing obligations (i.e. their own health, family, and friends). To support staff in their efforts to discharge their duty to provide care, sites will strive to ensure the appropriate supports are in place (e.g. resources, supplies, equipment), provide support for staff to fulfill their personal/family responsibilities, take steps to ease the burden on staff and their families and establish a mechanism to deal with staff concerns and work exemptions.
Trust	Trust is an essential part of the relationship between organizations and their staff, between the public and health care workers, and among organizations within a health system. Sites will take steps to build trust with staff, families and other organizations before the pandemic occurs and to ensure decision making processes are ethical and transparent.
Solidarity	A pandemic will require solidarity among community, health care institutions, local public health units, and government. Solidarity requires good, straightforward communication and open collaboration to share information and coordinate health care delivery.
Stewardship	Sites will be entrusted with governance over scarce resources, such as vaccines, antivirals, equipment, and health care workers. To ensure good stewardship of scarce resources, Sites will consider both the benefit to the public good and equity (i.e. fair distribution of both benefits and burdens). As part of stewardship, Sites will determine how resources will be allocated for residents who are at end of life.
Respect for Cultural Diversity/Beliefs	Sites will strive to continue to respect residents' cultural values and religious beliefs throughout a pandemic.

Infection Control

INFECTION CONTROL – TRANSMISSION	
The primary strategies for preventing pandemic spread are the same as those for all communicable diseases • Vaccination if available • Early detection and treatment with antiviral medications if available • The use of infection control measures to prevent transmission during the provision of care When a pandemic begins, a vaccine may not yet be available, and a supply of antiviral drugs may be limited. The ability to limit transmission will, therefore, rely heavily on the appropriate and thorough application of infection control measures. While it is commonly accepted that an acute respiratory illness transmission requires close contact—via exposure to large droplets (droplet transmission), direct contact (contact transmission), or near-range exposure to aerosols if performing certain procedures (airborne transmission)—the relative clinical importance of each of these modes of transmission is essential. Given some uncertainty about the characteristics of a new pandemic strain, all aspects of preparedness planning for a pandemic must allow for flexibility and real-time decision- making that take new information into account as the situation unfolds. The specific characteristics of a new pandemic virus—virulence, transmissibility, initial geographic distribution, clinical manifestation, risk to different age groups and sub- populations, and drug susceptibility—will remain unknown until the pandemic gets underway. If the new virus is unusual in any of these respects, updated infection control guidance will be provided.	
Transmission	Early in a pandemic, it may not be clear that a resident with acute respiratory infection (ARI) has the novel virus. Therefore, precautions consistent with all possible etiologies, including a newly emerging infectious agent, should be implemented. This may involve the combined use of airborne and droplet/contact precautions, in addition to routine practices, until a diagnosis is established.
Mode of Transmission	Transmission from person to person is generally consistent with spread through close contact (i.e., exposure to large respiratory droplets, direct contact, or near-range exposure to aerosols). There may be some evidence of airborne transmission over long distances or prolonged periods of time dependent on; exposure, activities of provider, and displayed resident symptoms.
Droplet Transmission	Droplet transmission involves contact of the conjunctivae or the mucous membranes of the nose or mouth of a susceptible person with large-particle droplets containing micro-organisms generated from a person who has a clinical disease or who is a carrier of the micro-organism. Droplets are generated from the source person primarily during coughing, sneezing, or talking and during the performance of certain procedures such as suctioning. Transmission via large-particle droplets requires close contact between source and recipient persons, because droplets do not remain suspended in

	the air and generally travel only short distances (about a 2-metre perimeter) through the air. Because droplets do not remain suspended in the air, special air handling and ventilation are not required to prevent droplet transmission. Based on epidemiologic patterns of disease transmission, large droplet transmission has been considered a major route of an acute respiratory illness transmission.
Contact Transmission	Contact transmission may occur through either direct skin-to-skin contact or through indirect contact with virus in the environment. Transmission via contaminated hands and fomites (contaminated inanimate objects). Direct-contact transmission involves skin-to-skin contact and physical transfer of micro- organisms to a susceptible host from an infected or colonized person, such as when staff position/transfer a resident, bathe resident, or perform other resident-care activities that require physical contact. Direct-contact transmission also can occur between two residents (e.g., by hand contact), with one serving as the source of infectious micro-organisms and the other as a susceptible host. Indirect-contact transmission involves contact of a susceptible host with a contaminated intermediate object, usually inanimate, in the resident's environment.
Airborne Transmission	Airborne transmission occurs by dissemination of either airborne droplet nuclei or small particles containing the infectious agent. Micro-organisms carried in this manner may be dispersed over longer distances by air currents and may be inhaled by susceptible individuals who have not had face-to-face contact with (or been in the same room with) the infectious individual. Some medical procedures can generate aerosols such as: CPAP, BIPAP, Nebulizer Therapy, Manual Bag Mask Ventilation or CPR/Code Blue. Therefore, additional precautions (airborne) may be necessary.
Small-Particle Aerosol	The addition of airborne precautions, including respiratory protection (an N95 filtering face piece respirator or other appropriate particulate respirator), may be considered for a novel virus exhibiting increased transmissibility, during initial stages of an outbreak and as determined by other factors such as vaccination/immune status of staff and availability of antivirals. As the epidemiologic characteristics of the pandemic virus are more clearly defined, WHO and PHAC will provide updated infection control guidance, as needed.

SUMMARY OF INFECTION CONTROL PROTECTION DURING A PANDEMIC INFLUENZA	
COMPONENT	RECOMMENDATIONS
ARI Screening	As per Extendicare's policy, residents are screened daily for ARI symptoms. During a pandemic, increased screening will be required, and sites will follow public health directives
Respiratory Hygiene/Cough Etiquette	Cover the mouth/nose when sneezing/coughing; use inner aspect of elbow area or use tissues and dispose in receptacles; perform hand hygiene after contact with respiratory secretions; wear a mask (procedure or surgical); sit or stand as far away as possible (2 metres) from persons who are displaying respiratory symptoms when at all possible.

SUMMARY OF INFECTION CONTROL PROTECTION DURING A PANDEMIC INFLUENZA	
COMPONENT	RECOMMENDATIONS
Hand Hygiene	The 4 Moments for Hand Hygiene: 1. BEFORE initial Patient/Client environment contact 2. BEFORE aseptic procedures 3. AFTER body fluid exposure/risk 4. AFTER Patient/Client environment contact If hands are visibly soiled or contaminated with respiratory secretions, they should be washed with soap and water. In the absence of visible soiling of hands, approved alcohol-based hand rub products for hand disinfection are preferred over soap and water because of their superior microbicidal activity, reduced drying of the skin and convenience.
PPE: includes gloves, gown, face protection	Always ensure adequate supply of PPE. Under no circumstances should service be provided if appropriate PPE is not available. Extendicare sites must always maintain a 14-day rotating supply of PPE inventory. PPE are to be used: during procedures and resident-care activities when contact of clothing/exposed skin with blood/body fluids, secretions, and excretions is anticipated; during procedures and resident care activities likely to generate splash or spray of blood, body fluids, secretions, excretions. When providing care to residents that are displaying respiratory symptoms; and for touching blood, body fluids, secretions, excretions, and contaminated items; for touching mucous membranes and non-intact skin. The type of mask/respirator to be used will be dependent upon the virulence of the pandemic disease, procedures/tasks being performed, and the active respiratory symptoms of the resident.
Safe Work Practices	Avoid touching eyes, nose, mouth or exposed skin with contaminated hands (gloved or ungloved); avoid touching surfaces with contaminated gloves and other PPE that are not directly related to resident care (e.g., doorknobs, keys, light switches, telephone, TV remote). **If wearing a mask, extra precaution must be taken to not manipulate the mask on face with contaminated hands/gloves.*
Soiled Equipment for Resident Care	Handle resident equipment in a manner that prevents the transfer of micro-organisms to oneself, to others and environmental surfaces; wear gloves if visibly contaminated; perform hand hygiene after handling equipment. All equipment must be cleaned and disinfected after each use.
Soiled Linen and Laundry	Handle in a matter that prevents transfer of micro-organisms to oneself, others, and to environmental surfaces; wear gloves (gown if necessary) when handling and transporting soiled linen and laundry; and perform hand hygiene. Avoid 'hugging' the linen/laundry against your body.
Environmental Cleaning and Disinfection	Emphasize cleaning/disinfection of frequently touched surfaces (e.g., phones, keyboards, light switches, door handles, shared dishes/cutlery, shared workspaces, bathroom surfaces).

SUMMARY OF INFECTION CONTROL PROTECTION DURING A PANDEMIC INFLUENZA	
COMPONENT	RECOMMENDATIONS
Physical Distancing	The principle is to minimize social gatherings during a pandemic outbreak to reduce the chances of exposure. Physical distancing can occur in conjunction with the promotion of respiratory/hand hygiene etiquette. Examples of physical distancing practices include cancelling routine in-person meetings in the workplace. At times like report, staff will stand with at least a 2-metre distance separation. Use alternative methods of communications such as e-mail, teleconferencing and web conferencing to support business continuity. Residents should also practice physical distancing at times. Persons at high risk for complications of acute respiratory illnesses should try to avoid public gatherings (e.g., movies, religious services, public meetings) when there is a pandemic in the community. They should also avoid going to other public areas (e.g., food stores, pharmacies). Alternatives such as home delivery for grocery/pharmacy are encouraged.
Signage at front doors	1. Post visual alerts/signage at the entrance to the building instructing all persons with respiratory symptoms to: • Discourage unnecessary visits • Contact office reception by phone for further direction/assistance • Practice respiratory etiquette 2. Post signs that promote cough and hand hygiene etiquette in common areas (e.g., elevators, reception areas, cafeterias, bathrooms, meeting rooms) where they can serve as reminders to all persons on the site. 3. Facilitate adherence to respiratory hygiene/cough etiquette. 4. Ensure the availability of materials in reception areas for staff and visitors. 5. Provide tissues and receptacles for used tissue disposal. 6. Provide conveniently located dispensers of alcohol-based hand rub. 7. Provide liquid soap and disposable towels for hand washing where sinks are located. 8. Promote the use of procedure or surgical masks and physical distancing by person with symptoms of influenza. 9. If residents are coughing, ensure they are put on isolation; if staff are coughing ensure that they are staying home. 10. Monitor staff illness. 11. Discuss cleaning and disinfection activities with contracted environmental services. 12. Provide disposable disinfectant wipes for staff use (particular attention to shared workspace areas). 13. Ensure a 2 week supply/inventory in addition to pandemic supply.

GENERAL INFECTION PREVENTION & CONTROL PRACTICES IN HEALTH CARE SETTINGS:
• Engineering controls such as ventilation systems in accordance with CSA Standards (Special Requirements for Heating, Ventilation and Air Conditioning (HVAC) Systems in Health Care Facilities • Routine and additional transmission-based infection control precautions (droplet, contact, airborne), hand hygiene, respiratory hygiene and cough etiquette • Screening both staff and residents • Spatial separation of residents with symptoms, and cohorting, • Immunization & surveillance • Use enhanced cleaning protocols • Education & training • PPE • Others as determined by the health unit based on the illness case definition

PRECAUTIONS FOR HIGH-RISK PROCEDURES:
• Certain respiratory procedures such as nebulizers or aerosol generating treatments are considered higher risk. Extra precautions will be required to ensure maximum worker protection. • When residents are diagnosed with the pandemic virus, all elective high-risk procedures e.g. dental care, should be postponed until the illness is resolved. Any non-elective high-risk procedure should be performed using appropriate precautions to reduce the risk of exposure.

Environmental Cleaning

Use the same routine ENHANCED infection control and cleaning procedures during a pandemic as done for seasonal outbreaks. See IPAC and Housekeeping/Laundry Services policies and procedures.

- All horizontal and frequently touched surfaces should be cleaned and disinfected daily and more often when soiled.
- May use commercial, pre-packaged disinfectant wipes with a contact time of 1 minute that are easily accessible to all staff to allow efficient cleaning of equipment and surfaces.
- Follow the Public Health Agency of Canada protocol that includes the appropriate cleaning agents to use and the contact time < 5 minutes.
- Procedures are established for assigning responsibility and accountability for enhanced cleaning of all environmental surfaces including furniture e.g., bed

rails, overbed table, telephone and non-critical resident care items e.g., call bell.

- Disinfection methods will be reviewed annually.
- Resident care items will be cleaned and disinfected between each resident use, including mechanical lifts.
- Components of an effective cleaning process include enough detergent-disinfectant in the correct concentration applied with a clean cloth, and a contact time that complies with manufacturer's label and workplace safety requirements.
- Routine practices are used in the handling of soiled linen.
- Do not allow soiled linen to contact any surface.
- Do not allow soiled linen to contact personal clothing/uniforms.
- Handle soiled linen with gloves.
- Wash hands after handling soiled linens.
- Routine practices are applied to handling clinical waste. Double bagging of waste is NOT required.
- Disposable dishes and cutlery may be required.

CLEANING RESIDENT CARE EQUIPMENT

- Remind staff, students, and volunteers of the guidelines for cleaning, and disinfecting resident care equipment
- Disposable equipment should be used whenever proper cleaning of the equipment can no longer be done
- Soiled resident care equipment should be handled in a manner that prevents exposure to skin and mucous membranes and contamination of clothing or the environment
- Equipment should be cleaned and disinfected prior to and between uses

The Extendicare Environmental Checklist during Pandemic Outbreak is to be utilized.

HAND HYGIENE	
• This is considered the most important measure in preventing the spread of infections • Staff, volunteers, and residents shall be instructed in proper hand hygiene • Do not use resident sinks for hand hygiene unless no other alternative is available	
Staff and volunteers should perform hand hygiene:	• Before direct contact with a resident • After any direct contact with a resident and before touching the face • During the doffing process and disposing of PPE - including gloves • Before performing invasive procedures • Between certain procedures on the same resident where soiling of hands is likely, to avoid cross-contamination of body sites • After contact with blood, body fluids, secretions, and excretions • After contact with items known or likely to be contaminated with blood, body fluids, secretions, and excretions, including respiratory secretions e.g., oxygen tubing, used tissues, masks, items handled by residents • Before preparing, handling, serving, or eating food and before feeding a resident • ABHR is as effective as hand washing if hands are not visibly soiled • If hands are visibly soiled, they must be washed with soap and running water • If soap and running water are not available, cleanse hands first with detergent containing towelettes to remove visible soil and then use ABHR • Resident/clients sinks should NOT be used by staff and volunteers for hand hygiene unless no other alternative is available: sinks in both tub & shower rooms can be designated as staff washing stations. Take care to avoid contamination and use an alcohol-based hand sanitizer after hand washing
Residents	• Hands should be cleaned frequently but especially after using the bathroom and before and after eating • Criteria for Selecting Alcohol-based hand sanitizer: 70% to 90% alcohol (isopropanol or ethanol)

Personal Protective Equipment (PPE)

- PPE must be accessible and readily available for all staff
- Accessible hand hygiene stations in appropriate locations
- Signage instructing all staff, visitors, and volunteers on when and how to practice hand hygiene
- Ensure that staff have quick, easy access to PPE required for droplet and contact precautions:

- hand sanitizer,
- masks (surgical and N95),
- eye protection,
- gloves, and
- gowns.

PPE	
Masks	The term "mask" refers to a surgical or procedure mask, unless stated otherwise by Public Health Authorities. • Staff and volunteers should wear masks covering their nose and mouth when providing direct care within two meters of a resident with respiratory symptoms • Whenever a resident with respiratory symptoms is not in his/her room, the resident will wear a surgical mask, if tolerated • Masks should be changed if they become wet, or contaminated by secretions • Staff wearing masks must remove their mask before caring for another resident, and when leaving the resident's dedicated space/room • Masks should be handled only by the strings/ties, to prevent self-contamination If Universal masking is ordered by public health authorities, staff will follow these directives (see policy Universal PPE Strategy in IPC manual).
Criteria for Selecting Masks:	• Securely covers the nose and mouth • Substantial enough to prevent droplet penetration • Use N95 masks and goggle-type eye protection: • when identified as necessary by Public Health • when suspected TB • during any high-risk activity that may result in the formation of an aerosol/mist
Eye Protection	• Eye protection includes the use of safety glasses, goggles, and face shields. It does not include personal eyeglasses • Eye protection will be worn when providing direct care and within two metres of a resident with respiratory symptoms • Safety glasses, goggles, and face shields should be removed carefully to prevent self-contamination • If re-used, eye protection will be cleaned in a manner that will not lead to contamination, according to the manufacturer's recommendations and Extendicare's policies • To prevent self-contamination, health care workers must not touch their eyes during care of a resident with an acute respiratory illness

PPE	
Criteria for Selecting Eye Protection	• Eye protection must provide a barrier to splashes from the side • May be safety glasses, goggles, or face shields • May be single use disposable or washable before re-use • Prescription eyeglasses are not acceptable as eye protection
Gloves	• Staff & volunteers should wear gloves when they are likely to have contact with body fluids or touch contaminated surfaces • Gloves are an additional protective measure and are not a substitute for proper hand hygiene • Gloves should be put on before entering and removed prior to leaving the resident's room or dedicated bed space • Gloves should fit the wearer to prevent cross-contamination through contact • Gloves should be changed between procedures on the same resident • Hands must be washed immediately after removing gloves • When a gown is worn, the cuff of the gloves must cover the cuffs of the gown • Single-use gloves should not be reused or washed • Gloves should be changed whenever a tear of leak is suspected
Gowns	• Long-sleeved gowns must be worn during procedures and resident care where clothing might be contaminated • Gowns should be removed before leaving the resident's room or dedicated space • Follow the recommended process for PPE removal
After the health care provider has completed resident care and is more than a two-metre distance from the resident:	• Remove gloves and discard using a glove-to-glove/skin-to-skin technique • Remove gown – discard in linen hamper in a manner that minimizes air disturbance • Perform hand hygiene • Remove eye protection and discard or place in clear plastic bag and keep for decontamination, as appropriate • Remove mask by ear loops or ties and discard • Perform hand hygiene • This is the minimum procedure • If staff believe their hands have become contaminated during any stage of PPE removal, they should perform hand hygiene before proceeding further.
Procuring, Storing and Distribution of PPE	Building and maintaining a rotating 14-day emergency PPE inventory/stockpile is to protect our services against supply interruptions caused by emergency/pandemic situations.

PPE	
	A provincial contract for PPE vendor supply is maintained through the SGP Purchasing Partner Network Team. It is expected that all sites will purchase all PPE supplies through the contractual vendor unless otherwise approved. • All items maintained in inventory will be rotated on a first-in, first-out basis to prevent stock from deterioration, contribute to employee/resident safety and to fully utilize the merchandise purchased. • All case goods should have the date of receipt stamped on the outside of the box upon arrival. A dedicated staff member will check dated items in the inventory to ensure that the oldest items are issued first. • Dated items must be checked on packages/supplies during the rotation procedure. • Assign a dedicated space for your supplies (clean, dry, temperature controlled). • Inventory record management must be monitored and concise to ensure stock supply is maintained. • Categorize inventory by type of product/PPE. • Purchase new PPE inventory to replace those items you have used to maintain a 14-day supply. When you purchase new supply, check the expiration dates with associated products. • Move existing supplies forward and place the newly purchased stock items in the back. • Any supply/stock items discovered that have reached expiration are to be pulled from the inventory. • All sites are to maintain a 14-day stockpile inventory of all PPE supplies. Extendicare has a stockpile that can be distributed in the event of a pandemic.

General Infection Prevention and Control

Reduce your risk of contracting a communicable disease by:

- Having the annual influenza immunization
- Performing hand hygiene often
- Keeping a two-meter distance from someone who is coughing or sneezing
- Avoiding activities where large numbers of people gather in enclosed spaces
- Thoroughly cleaning and disinfecting surfaces in the home
- Complying with public health measures
- Staying home from work when ill
- Practicing respiratory etiquette by coughing or sneezing into a tissue or sleeve

Extendicare

PROCEDURE			
MANUAL:	Emergency Planning and Management	**INDEX:**	EPM3-P10.03
SECTION:	Emergency Plans	**EFFECTIVE DATE:**	January 13, 2025
DESCRIPTION:	Pandemic Plan	**REVIEWED DATE:**	January 12, 2026
APPROVED BY:	Senior Director, Corporate Quality and Risk	**MODIFIED DATE:**	

POLICY

Emergency Plans

PROCEDURE

The Executive Director/Designate must:

- ☐ Deploy the Corporate Pandemic Plan when at least one health authority at the local, provincial, federal, or international level have declared an official state of Pandemic outbreak.
- ☐ Ensure all staff are trained on pandemic management on orientation and annually.
- ☐ Ensure the home has home specific outbreak plans in the event of a Pandemic outbreak.

TOOLS

1. Corporate Pandemic Plan

This document is uncontrolled when printed. Extendicare (Canada) Inc. will provide, on request, information in an accessible format or with communication supports to people with disabilities, in a manner that takes into account their disability. This document has been prepared by and remains at all times property of Extendicare (Canada) Inc. All rights reserved. Confidential and Proprietary Information of Extendicare (Canada) Inc. © 2026