


Leamington Mennonite Home  
Long Term Care

**EMERGENCY MANAGEMENT  
POLICY AND PROCEDURE**

<b>CATEGORY:</b> General	<b>SUBJECT:</b> Emergency Management Plan	<b>SECTION:</b> A <b>POLICY:</b> 1
<b>DATE:</b> June 27, 2022	<b>Administrator's Signature:</b> 	

**EMERGENCY MANAGEMENT PLAN**

**POLICY:**

The Leamington Mennonite Home will have a current Emergency Management Plan in place for all entities that will promote processes related to the prevention of risk and ensure that people and property are safeguarded in the event of an emergency.

In developing and updating the Emergency Plan, the Home will:

- Consult with entities that may be involved in or provide emergency services in the area where the Home is located including, without being limited to, community agencies, health service providers, partner facilities, and resources that will be involved in responding to the emergency, and keep a record of the consultation;
- Ensure that hazards and risks that may give rise to an emergency impacting the Home are identified and assessed, whether the hazards and risks arise within the Home or in the surrounding vicinity or community; and
- Consult with the Residents' Council and Family Council.

An emergency will be defined as an urgent or pressing situation or condition presenting an imminent threat to the health or wellbeing of residents and others within the Home that requires immediate action to ensure the safety of persons within the Home.

A recognized system of codes identified by colour or procedure will be used to ensure common understanding of the emergency. No codes or colours will be added or deleted by the Home.

Each Emergency Management Plan will provide directions to all staff using the Emergency Response Team (ERT) framework to ensure leadership and command of any and all emergencies or potential emergencies within the Home.

Code/Emergency	Description	Practice Months
Red	Fire	Every Month, Every Shift
Black	Bomb Threat	January
White	Physical Threat / Violence	February
Fan Out List	Team Member Fan Out	March
Green	Evacuation	May-Oct.
Blue	Medical	April
Orange	External	May
Yellow	Missing Person	June
Grey	Infrastructure Loss / Failure	July

<b>Brown</b>	Internal Emergency (Leak/Spill/Hazard)	August
<b>Silver</b>	Active Shooter/Armed Intrusion/Hostage Situation	September
<b>Boil Water Advisory</b>	Drinking water supply contaminated	October
<b>Building Lockdown</b>	Implemented to secure/protect when unauthorized person enters /threatening communication, etc.	November
<b>Outbreak / Epidemic / Pandemic Preparedness</b>	Outbreaks of communicable disease, of public health significance, epidemics & pandemics	August/September

**PROCEDURE:**

The Home will carry out Emergency Management responsibilities through focus on four interrelated activities: mitigation, preparedness, response, and recovery.

1. Mitigation: Reduction of exposure to, or probability of loss from emergency events.
2. Preparedness: Establishment of authorities and responsibilities for emergency actions along with resource designation to support them. Includes education and practice of drills and exercises.
3. Response: Time sensitive actions taken in the event of an emergency to reduce negative impact to residents and staff. Response to emergencies will first focus on Life Safety and will utilize the principles of Emergency Response and follow Code Procedures as outlined in this manual.
4. Recovery: The effort to restore infrastructure and resident life to normal.

The Administrator or designate will:

- On an annual basis, review evidence of complete Emergency Management Plan for the Long Term Care Home.
- Monitor through regular operations reports that Emergency Plans are practiced in accordance with relevant legislation and organizational policies and procedures.
- Develop and maintain a location-specific Emergency Management Plan that ensures mitigation, preparedness (including practice strategies and education), response, and recovery for all defined emergencies.
- Ensure the Emergency Management Plan is kept in a location accessible to all team members.
- Ensure all staff are aware of the location of the Emergency Management Plan and how to navigate the plan in the event of an emergency.
- Ensure the Emergency Management Plan is kept up to date as updates/changes are issued from the Home, which will include:
  - Annual (at minimum) evaluation and update to location-specific Emergency Plan (as required)
  - Annual (or more frequently as needed) updating of all emergency contact information, including but not limited to community agencies, partner facilities, and resources that will be involved in responding to an emergency; and
  - Evaluation and update (as required) of the Home’s Emergency Management Plan within 30 days of an emergency being declared over, after each instance that an emergency plan is activated.
- Document any evaluation of and update to the Emergency Management Plan.

- Conduct specific education and practice sessions for managers and nurses with building charge responsibilities.
- Coordinate with Chief Financial Officer (CFO) any budgetary considerations to ensure the necessary execution of the Emergency Management Plan.
- Ensure practice and documentation of code practice and orientation/training activities as per policy.
- Communicate results to management and staff and implement improvements to process as needed.
- Review the Individual Accommodation Process, the Individual Accommodation Plan, and the Individualized Workplace Emergency Response Plan to consider the accessibility needs of staff with disabilities, where applicable, in accordance with the Accessibility for Ontarians with Disabilities Act.
- LTC-ON: Complete and submit Emergency Plan Attestation annually as required (form/process pending further direction from Ministry).