

FJ Davey Home

Emergency Operations

Plan

Updated 04April2025



F.J. Davey Home
long term care, long term custodial

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Definition of an Emergency

For the purpose of this plan, an emergency or disaster is defined as any situation, or the threat of any situation, requiring any of the following:

- complete or partial evacuation
- relocation of residents
- acceptance of additional residents and/or other persons, or expansions of services relating to a situation outside the Home
- isolation or quarantine of all or any part of the Home

EXTERNAL AND INTERNAL EMERGENCY

Various types of emergencies could result in the evacuation and relocation of residents. External disaster is anything which happens outside of the Home. Some examples of external disaster could be:

- Chemical spills (SSM Emergency Services would provide direction through on-scene command or emergency control group to the CEO/Administrator).
- flood
- inclement weather

An internal disaster is a disaster that occurs within the Home, for example:

- fire
- bomb threat
- disruption of water, heating or hydro
- walk-out

Purpose and Scope

The purpose of our Emergency Operations Plan (EOP) is to describe our all-hazards approach to emergency management, and by so doing, support the following incident objectives:

- Maintain a safe and secure environment for residents, staff and visitors;
- Sustain our organization's functional integrity, including our usual service and business functions (continuity of operations); and
- Integrate into the community's emergency response system as necessary.

The scope of this plan extends to any event that disrupts, or has the potential to disrupt, our normal standards of care or business continuity. This includes the impact due to internal incidents, such as a fire, or external incidents, such as an earthquake.

The Emergency Operations Control Group for the City of Sault Ste. Marie

The Emergency Operations Control Group can be activated by any member of the group if this would assist in establishing control more rapidly. They can be contacted 24/7 through police service (949-6300 or 911 as case may dictate. Emergency Services may provide on-scene command center if situation dictates (This may not occur if widespread issue).

Information on the situation will be collected and all official directions and information will be issued from the Emergency Operations Control Group Headquarters.

Business hour contacts: 949-6300 Ext. 324, 321 or 323.

Where requested by the Emergency Operations Control Group attendance may be required by a representative from the F.J. Davey Home (as directed by the C.E.O.) to provide updates or to update on-scene staff.

Organizational Approval

This document is the F.J. Davey's **Emergency Operation Plan (EOP)** and states our understanding of how we manage and conduct actions under emergency conditions. It will be reviewed and updated if necessary on an annual basis.

This EOBCP has been reviewed and approved by our organization's leadership.

Approved By: Connie Lee

Signature

Connie Lee Administrator

Printed Name/Title

February 08, 2023

Date of Review	Signature	Date	Signature
February 10, 2024	Connie Lee		
April 04, 2025	Connie Lee		

Rapid Response Guides

Follow these steps if you recognize a potential or actual emergency that may threaten or impact:

- the health and safety of occupants (including residents, staff, and visitors),
- the care center's ability to provide care, or
- the environment or property.

STEP 1	Protect yourself and those in the immediate area from harm. If appropriate, call 9-1-1 for emergency response and sound the facility alarm and/or overhead code if appropriate per our EOP See <i>Rapid Response Guides</i> for hazard-specific protocols.
STEP 2	Take a deep breath and assess the situation. Gather basic facts: <ul style="list-style-type: none"> • Type of incident, including specific hazard/agent, • Location of incident, • Number and types of injuries, and • What you have done so far. If the situation allows, begin to document your actions
STEP 3	Contact your immediate supervisor to report the incident and get further instructions. If you are unable to contact your supervisor, activate the Incident Commander (IC) position and the Emergency Operations Plan (EOP). Activate overhead codes or facility emergency alert system as appropriate.
STEP 4	Notify additional authorities if appropriate and indicated by protocols.
STEP 5	Follow facility policy for documenting actions and incident reporting.

Critical Phone Numbers:

Name/Title	Primary Telephone	Secondary Telephone
MANAGER ON CALL CELL PHONE	705-941-8113	
Connie Lee Administrator / ED	705-942-2204 x 217	
Fran Conley EDOC	705-942-2204 x 220	
Palma Gervasi DOC	705-942-2204 x 238	
Kerri Tanner DOC	705-942-2204 x 235	
ADOC	705-942-2204 x	
Ryan Scott- EHS Manager	705-942-2204 x237	
Erica Sus – Dietary Manager	705-942-2204 x 236	
Chris Kertesz – Dietary Supervisor	705-942-2204 x211	
Hannah Grisdale – Dietary Supervis		
Sue Burns – Activity Manager	705-942-2204 x 221	
ECI VP LTC Assist Division	Aimie Vahrmeyer	
ECI IPAC Consultant	Kerry Gartshore	
ECI Regional Director	Johanna Horne	
ECI Communications	Macrina S. 647-502-8552	media@extendicare.com
ECI Clinical Consultant	Linda Q	1-647-466-1851

Facility Profile

Facility Name	F. J. Davey Home
Facility Address	733 Third Line East
Facility Location (Cross streets, Landmarks, Longitude and Latitude Coordinates)	3 rd Line east North east of the Sault Area Hospital and East of Great Northern Road
Facility Telephone #	705-942-2204
Facility Fax #	705-942-2234
Facility Email	Businessoffice@fjdaveyhome.org
Facility Web Address	http://fjdaveyhome.org
Administrator/Phone #	705-942-2204 x 217
Emergency Contact Person/Phone #	705-849-7729
Maintenance Coordinator/Phone #	705-942-2204 x 237
Insurance Agent/Phone #	HIROC Insurance newclaims@hiroc.com 1-800-465-7357
Owner/Phone #	Board Chair – Sue McClean Asmclean4@gmail.com 705-971-6996 Vice Chair –
Attorney/Phone #	Steve Shoemaker Wishart Law Firm 705-949-6700
Year Facility Built	2004
Fire Alarm System/Contact #	See emergency contact numbers
Security Alarm System/Contact #	ATS 705-759-8999 press 2
# of Licensed Beds	374
Average # of Staff – Days	130
Average # of Staff – Nights	58
Emergency Power Generator Type	Toromont Diesel generator
Emergency Power Generator Fuel	Diesel
Emergency Communication System	Cell phones / radio – hand held
Like-Facility #1 for Resident Evacuation¹ (within 10 miles)/Phone #	Maple View LTC Home
Like-Facility #2 for Resident Evacuation (within 10 miles))/Phone #	Van Dale LTC home
Like-Facility for Resident Evacuation (beyond 25 miles))/Phone #	Algoma Manor LTC Home Thessalon
Like-Facility for Resident Evacuation (beyond 25 miles))/Phone #	Blind River Golden Birches 705-356-2265 North Shore Health Network
Other	

¹ Our facility has a Memorandum of Understanding (MOU) with at least one nearby facility (within 10 miles) and one out-of-the-immediate-area facility (beyond 25 miles) to accept evacuated residents, if able to do so.

Vendor Contact Information

NAME	NUMBER	NAME	NUMBER
Plumbing (McLeod Bros)	705-945-8459	Diesel Generator (Toromont) Service repair	705-759-2444
Snow Plow Service (Phillips Haulage)	705-254-4015 705-255-0111 (Grant's cell)	Diesel Fuel (McDougal Fuels)	705-949-6202
Boilers/Heating (Henderson)	705-949-7870	Garbage Compacter (GFL)	705-257-1802
Natura Gas / Propane (Union gas – major) (Henderson)	705 759-6339 705-759-8481 705-949-7870	Refrigeration (RepAire)	705-256-5050
Power Failure (P.U.C) (After hours)	705-759-6500 705-759-6555	Fire Alarm System / Sprinkler (Iroy Life and Fire) Address: 6-475 Trunk Rd	705-560-4626 1-800-461-5914 705-945-1558
Electrical Guzzo Electric	705-989-9100	False Alarm (ATS monitoring)	705-946-7999
Roofing (Dynamic) (Pager)	705-946-7718 705-946-7677	Water (No Pressure) / delivering potable water(P.U.C.) (General Inquiry)	705-759-6555 705-759-6500 705-759-6522
Overhead Lifts Email: cory.judd@handicare.com	1-877-304-5488 Ext. 7 (repairs)	Elevator (Thyssen Krupp (Dover) (Toll Free)	705-946-1995 1-800-363-6837
Austco Nurse Call	1-888-670-9997 1-905-731-1830	Glass Breakage and Front door issues (Glass Employee)	705-949-5733
Dishwasher (Johnson Diversy)	1-800-668-7171	Telephone , Voicemail, Fire Monitoring (ATS)	705-759-8999 press 'A2'
Video Surveillance (ATS) (System) ATS Bell	705-759-8999 Press '2'	Monitor Problem (MicroAge) Pager 24 Hours	705-971-9083 705-942-3000
Fire Department	705-949-3335	City Police Department	705-949-6300
NorPro Security Dispatch Car (emergency)	705-949-3227 705- 25-69567	Cell Phone Service Name: ATS Bell Address: 270 Bruce Street	705-759-8999

IN AN EMERGENCY CALL 911

VENDOR CONTACT INFORMATION		
Food: perishable Name: Sysco Ontario – North Address: 65 Elmdale Rd. City: Cavan-Monaghan , ON State/Zip Code: K9J 0G5 Phone:1-855-222-0615 Fax: 1-866-774-1772 Email: Margarit.Michael@ont.sysco.com Website: sysco.ca	Food: non-perishable Name: Sysco Ontario – North Region Address: City: State/Zip Code: Phone: 1-855-222-0615	Food: Ice Name: RJ's (for XL bags) Address:238 Wellington Str. W City:Sault Ste. Marie, ON State/Zip Code: P6A 1H7 Phone:705-942-5940

VENDOR CONTACT INFORMATION		
Pharmacy Name: Medisystems Address: Toronto, ON Phone: 416-961-0712 Dale Yoon 416-884-0089 Cristina Paciocco 249-622-1140 Christina.paciocco2@imedisystem.com Camille Roussel Operations manager Camille.roussel@imedisystem.co 1-877-722-3542 Helen Huh President Helen.huh@imedisystem.com 416-803-3527	Sanitation Supplies Name: Diversey Canada Inc Address: Unit 3, 61050 Kennedy Road City: Mississauga, ON Postal Code: L5T 2J4 Phone: 1-800-668-7171	Paper Goods – Kitchen Name: Sysco Ontario – North Address: City: State/Zip Code: Phone: 1-855-222-0615
Incontinence Supplies Name: Cardinal Address: City: State/Zip Code: Phone: Medical Supplies MedLine 1-800-268-2848 canadacs@medline.com 5150 Spectrum Way, Suite 300 Mississauga, ON L4W 5G2	Linen Supplies Name: George Courney Address: 7500 Highway 27 Unit 23 City: Vaughn, ON State/Zip Code: Phone: 1-800-387-3501 Emergency Laundry Services Cintas – can be accessed via CINTAS at 705-253-1131 Emergency evening weekend access - Scott – 705-971-7486 or John M at 705-255-8618 Cost is 2.00/pound. They will pick up and drop off but would be better if we did this. a Cube Vac can be rented through Home Hardware There is a 24-48 hour turn around on laundry	Paper Goods – Toiletries Name: Wood Wyant Address: 42 Rue De L'Artisan City: Victoriaville, QC State/Zip Code: G6P 7E3 Phone: 705-759-8365 press 0

VENDOR CONTACT INFORMATION		
Transportation – Alternates Name: Address: City: State/Zip Code: Phone: Fax: Email: Website:	Transportation – Truck, Cargo Van, Trailer Name: Address: City: State/Zip Code: Phone: Fax: Email: Website:	Amateur Radio Service Name: Address: City: State/Zip Code: Phone: Fax: Email: Website:
Internet Service Provider Name: Shaw Communications / Extendicare Address: 23 Manitou Drive City: Sault Ste. Marie, ON State/Zip Code: P6B 6G9 Phone: 1-877-742-9249 Fax: Email: Website:	Food – Bread Name: Canada Bread 2 International Blvd, Etobicoke, ON M9W 1A2 1-877-229-1042	Food – Milk Lock City Dairy 938 McNabb Str. Sault Ste. Marie, On 705-256-6455

Hotels

Hotel	Phone #	Hotel	Phone #
Microtel and Suites	frontdesk@microtelinnssm.ca 705-450-2423	Fairfield Inn and suites	705-253-7378
Water Tower Inn	1-800-461-0800		
Quattro Hotel	705-942-2500		

Infectious Disease

Initial Actions	
<input type="checkbox"/>	Contact Algoma Public Health immediately, isolate all suspected residents and staff 705-759-5416
<input type="checkbox"/>	Call a Manager Huddle with Extendicare IPAC team

Outbreak Management Cheat Sheet

- **Possible Outbreak:** 2 or more Residents exhibiting respiratory or gastro-symptoms that are new or unusual for the resident.

- If you identify a possible outbreak notify Algoma Public Health immediately 705-942-4646 the homes contact is Jennifer Francella ext 3103. If she is not available, notify who is on call. After hours and weekend contact # 705-759-5416
- Restrict potentially infected residents to their rooms, placing appropriate signage and PPE outside of the rooms.
- Initiate line listing (locate in "P" drive in folder named outbreak forms)
- Derive a case definition if not defined by Algoma Public Health. *The case definition must be communicated to all home areas to ensure accurate reporting of symptoms. See example definitions on back of page.*
- Post signage at the Entrance to the home and all RHA's (signs available in the P drive "outbreak forms" folder)
- Arrange an Outbreak Team Meeting and complete the "initial outbreak form" (located in "P" drive in folder named outbreak forms). A representative from every department needs to be an outbreak Team meeting.
- Update all team members of the infection activity in the home
Review the data collected
- Define the case definition Note: the case definition is to be updated as other symptoms appear and communicated to all staff via email.
- Determine the cut off time for new cases to be added to the line listing (I recommend 0700).

- **Notify the following of a confirmed or suspected outbreak:**

Algoma Public Health PH# 705-942-4646

Ministry of Labor (if staff affected) Tel: 1-877-202-0008 or 1-800-461-7268 Email: webohs@ontario.ca

Regional IPAC Consultant : Kerry Gartshore Cell # 705-256-9335 email:

Kegartshore@extendicare.com

Administrator: Connie Lee / EDOC: Fran Conley / Infection Control Lead: Jessica Reed

Board Chair – Sue McLean

Regional Director – Johanna Horne

Executive Director / Administrator

Connie Lee ext 217

Nursing Services Medical Director/ Attending Physicians Dr. Hirvi		Dietary Manager Erica Sus Ext 302	Registered Dietitian	Activation Services and Resident Programs		Environmental Services and Maintenance		IPAC / Education	IT	Payroll/ Benefits HR Finance
Executive Director of Nursing Fran Conley ext 220		Food Services Supervisor #1 Chris K Ext 230		Resident program Manager Sue Burns ext 221		Manager – Ryan Scott Ext 237		Manager – Jessica Reed		
Palma Gervasi-DOC Ext 238 Kerri Tanner – DOC Ext - 235		Food Services Supervisor #2 Hannah G / Marianne Ext 211		Activatio n Aids (19)	Social Worker (1)			IPAC Program – Screeners / Swabbers /		
NP	RHA Teams(43) PSWs (190)	Cooks		Physio therapy	Volunte	Handy Person	Environm ental Service Aids Laundry	Pandemic and clinical supplies		
Staffing Clerk		Dietary Aids		Physioth erapy Assist	Tuck Shop		Seamstre ss	Health Safety		
RAI-MDS Coordinators				Resident Council	Family Council			Education		
BSO										
Charge Nurses										

Figure 1. Organization Chart

Emergency Operations Plan

Program overview

Position	Job Duty	2 nd Option
Administrator	Incident Command Center Lead Liaison responsibilities Logistics Call Extendicare Care IT if need wireless access at another location	EDOC
EDOC	Operational Manager Resident Triage coordination Coordinate Nursing Department Duties	DOCs
DOC	Logistics Nursing Responsibilities Resident preparation Resident personal supply list Mandatory Medical Supply List Master evacuation tracking form	
Operations Manager	Financial and admin action job list sheets Business office preparation Human resources management Calling in staff	
Dietary Manager	Food and dietary preparation Logistics assistance	
Dietary Supervisor	Food and Dietary preparation Dietary dept responsibilities	
Dietary Supervisor		
EHS Manager	Planning job action sheet Safety Job action check sheet Infrastructure job action check sheet Security job action check sheet Transportation job action check sheet It job action check sheet EHS Dept shut down protocols Facility system status report	
Activity Manager	Public Information Transportation coordination and support Volunteer registry Volunteer skills check list form	

1. The job action check list for each of these positions is based on the type of Code.
 - if an evacuation, use Code Green check lists
 - If Code Grey – use appropriate Check Lists

2. Volunteer skills in the event of an emergency. This check list ([SECTION 5](#)) should be used with each volunteer that is assigned a task during the emergency

Emergency Operations Center (Incident Command Center ICC)

- Job Duties and Responsibilities / Roles – See ([SECTION 3](#)) [Job Duties](#).
- Location : on site at FJ Davey home will be Maple Court on First floor
- Location : Off site will be the Garage – this building is heated, has a phone and Internet access
- Equipment [Checklist](#) – See ([SECTION](#)) [5 Incident Command Center \(ICC – SETUP\)](#)

Documentation

- See the Situation Report ([SECTION 5](#))– [ICC Set up and Forms](#)
- See Incident Tracking Sheet ([SECTION 5](#)) - [ICC Set up and Forms](#)

Communication Plan

See Communications Protocols for Emergencies – ([SECTION 4](#))

- All external communications must go through the Administrator and Board Chair in collaboration with Extendicare Media Department
- Procedures for Stage 1 (low risk), stage 2 (moderate risk), and stage 3 (high risk are outlined in ([SECTION 4](#)) [Communications](#)

Crisis Communication processes are outlined as follows

- Stage 1 – Low risk – no serious injury to resident or staff
- Stage 2 – moderate – a home specific issue, little risk of occurring at another home
- Stage 3 – high – potential or actual harm to residents or staff , reputational risk
- Stage 4 – critical – has caused direct harm to resident or staff, reputational risk

Crisis communication plan checklist- see ([SECTION 4](#)) [Communications](#)

The FJ Davey communication plan supports *rapid* and *accurate* communication both internally and externally.

Relative to internal communications, the facility maintains a contact list of all staff, including telephone numbers and email addresses (if available). This contact information may be used whenever it is necessary to notify staff of a threat or emergency that may impact or involve them.

- This list is updated monthly by the Administrator with a copy kept in the Emergency Disaster box in the front foyer and a 2nd copy kept in the front of the Emergency Preparedness and Response Manual in the Maple Court Room

Once an incident is recognized that may require activation of the incident command center , the person who first recognizes the incident should immediately notify their supervisor or the senior manager on site.

Our internal communication equipment includes:

FJ Davey Home

- ☐ Overhead Page
- ☐ Hand Held radios
- ☐ Cell phones with texting
- ☐ Message board
- ☐ Staff Stat to send mass messaging to staff
- ☐ Runner
- ☐ Other
- ☐ mass email out to all staff

Communication with relevant external partners will:

- 1) gather information relevant to the incident, and
- 2) share information regarding the facility's status, activities and needs.

Our facility will report incidents as required to jurisdictional authorities, e.g., report a fire to the local fire department. Our external communication equipment includes:

- ☐ Land lines
- ☐ Cell phones with texting
- ☐ Hand held radios
- ☐ emails
- ☐ video conferencing
- ☐ Internet
- ☐ Other

Information Sharing

If our facility is impacted by an emergency, we will communicate our:

- 1) current situation,
- 2) response activities and
- 3) resource needs, if any to Extendicare Corporate and the Sault Ste. Marie Disaster team.

Communication will be coordinated through Extendicare Communications department and the Home Administrator

Resident and Family Communication

- The Activities Manager will lead communications to the Family Council, Resident council and the family email list serve.
- In the event of an emergency, family members may be notified and briefed on the status of the facility and the condition of their loved one as soon as it is feasible to do so.
- A copy of POA phone numbers is kept in the emergency box in the front foyer

- In case of an emergent situation, where time and conditions do not allow us to communicate with our resident's families in a timely manner, we may utilize
 - o Our mass email list serve
 - o Volunteers to call families
 - o Extendicare personnel
 - o Red Cross
 - o Algoma Public Health
 - o and other methods as available to provide a phone number to families where they can call and obtain information on the status and location of their resident.

Public Relations Liaison

- will be managed by the Administrator in collaboration with the Media Department of Extendicare, the Medical Director and Board Chair

Employee Preparedness and Operations

Employees may be requested to report to their work site and provide services related to emergency response and recovery operations in addition to their normally assigned duties. Supervisors, co-workers, and residents share an expectation that medical services will proceed uninterrupted and that medical needs generated by the incident impact will be addressed. Preparedness planning in this facility should be recognized as a shared responsibility between nursing home leadership and staff. All staff are expected to have a current *family disaster plan* so that they can fulfil their work obligations knowing that their families are well prepared and safe.

- No staff will enter or leave the home without permission from the incident command center
- Work schedules will be adjusted to meet the work demands of the moment and the rules with the Collective Agreement may need to be suspended temporarily
- No personal phone calls will be allowed without permission
- All previously approved time off may be cancelled
- Employees should be available to report to work if it is safe to do so

Staffing During an Emergency

Staff Recall

The FJ Davey Home staff may be called in and/or availability may be requested by a pre-designated staff person. The individuals contacted may be asked to report for duty immediately or be scheduled for future shifts during the emergency. The location of a detailed emergency contact list for staff is located within each department and as noted above

Staff Call Back List and Fan Out

See (SECTION 4) Communications

- Administrator duties
- Activating the staff call back list – will be done using staff stat which has all staff entered

All staff in regular and part-time positions should contact their immediate supervisor or manager if they are unable to report to duty as scheduled.

Employees may be assigned to Team A or Team B and should report to duty as follows:

- **Team A** will report to the facility as scheduled once an emergency is declared, and travel is safe. Team A will remain at the facility for the duration of the disaster event and its effects, and until relieved by Team B.
- **Team B** members are expected to report to duty to their department or labor pool when an all-clear is called by the Incident Commander (IC) or local officials, and it is safe to travel. Team B is the Relief Team

Employees who do not provide direct patient care and whose departmental functions can be halted until the emergency situation is over will be designated as either Team A or Team B and deployed to a labor pool. Those employees will report directly to the Maple Court incident command center for assignment.

Team A and Team B will be encouraged to bring the following to the facility:

- o Staff identification
- o Medications/personal items
- o Money: cash and change for vending
- o Flashlight with extra batteries
- o Critical personal phone numbers
- o Battery-operated cell phone charger

Emergency Staff – Contract Staff

Superior Staff It (LOCAL) Kristy Dube kristy@superiorstaffit.team
Plan A staffing support (LOCAL) algoma@jointheteam.com ;
SimCare staffing Agency (TORONTO) Liquid Capital Corp Neil Risso nrisso@liquidcapitalcorp.com

Staff Responsibility

Team A and B employees will be deployed and rotated, as deemed appropriate by the Incident command Center during the duration of the disaster; work in various assigned shifts; and/or provide non-routine duties.

Staff Support

To the extent that the facility's needs permit, space may be provided for families of working staff during the disaster. Reasonable sleeping and showering areas will be assigned to off-duty staff. Families should bring snacks, drinks, linens, personal items and children's activities whenever possible. Food will be provided in the cafeteria from a limited menu and at reasonable prices. Food for residents will be the priority.

Use of Volunteers

It is the policy of our facility to maximize our staff and utilize approved staffing registries in the event that we are unable to cover our staffing needs during an emergency. If this strategy fails to meet our needs, our facility may request additional help by reaching out to families and volunteers. We may also utilize emergent volunteers for non-resident care if necessary.

The use of volunteers will be coordinated by the Activity Manager - See (SECTION 5) ICC Set Up and Forms – Volunteer Skills Check Sheet

- ☐ Receiving volunteers
- ☐ Processing and registering volunteers
- ☐ Issuing assignments and providing briefing on tasks and responsibilities
- ☐ Credentialing as indicated by task assignments (if feasible)
- ☐ Badging for site access and function as indicated
- ☐ On-site training (as appropriate) and equipping as indicated for both safety and job efficacy
- ☐ Assign key staff to supervise the volunteers closely
- ☐ Reassignment as tasks are completed
- ☐ Demobilizing and out-processing (return badges, receive feedback from volunteers, address medical and psychological issues and arrange after-care, obtain contact information for any surveillance or medical follow-up, and thank volunteers for their service)

Resource Management

Resource management is critical to maintaining safe and effective care of residents and staff. Emergencies can easily lead to unusual resource challenges like the need to evacuate

residents to an alternate location; unavailability of supplies delivered on a “just in time” basis; etc.

See the Disaster Supply Inventory – See [\(SECTION 5\) ICC Set Up and Forms – Disaster Inventory List](#)

- This is to be filled out as soon as possible to better understand what is in place at the time

Disaster Boxes

- See [\(SECTION 5\) ICC Set and Forms](#) for what is to be contained in the Disaster Box
- The disaster box is located
 - o Front Foyer Lobby – locked white box – resident list, staff list, other
 - o Maple Court – Disaster box – tagged shut – all forms, cell phone charger
 - o Maple Court – disaster box – supplies
 - o Maintenance Shop – Disaster box supplies – Tarp, caution tape, batteries...

Disaster Water Supplies

- Appendix G- for Disaster Water Supplies; Appendix H for a Site Map with the locations for shutoffs, fire suppression and emergency supply locations; and

Disaster Meal Menu-

- Connect with the Dietary Department for the Disaster Meal Menus. We have a system for shelf-life management -- rotate through usual stock if possible, or rotate through suppliers' stock, and budget and plan for replacement for all consumable supplies as indicated by the situation.

Our facility has established agreements with a variety of vendors for our re-supply and recovery needs.

Laundry Services

- See vendor contact information for emergency access to laundry services

Coordination with Response Partners

We recognize that the majority of emergencies experienced by our facility will likely involve other response partners.

Our facility has established relationships with relevant response partners in the community. These include:

Sault Ste. Marie Community Emergency Management

The Sault Ste. Marie Community Emergency Management Coordinator, along with the city of Sault Ste. Marie Emergency Operations control team, will support the FJ Davey Home in augmenting the facility specific emergency response plans.

As the city is notified of an emergency, and that the facility has implemented their emergency response plan, it will assess the need for involvement and, as needed, will assist with coordinating the effective management of the emergency.

The city of Sault Ste. Marie Emergency response plan includes an inventory of site evaluations for suitable areas for refuge beyond what individual facilities have. This body has 24/7 access to municipal properties, and has blanket agreement with the school boards with chi include 24/7 contact for access sot schools as needed.

Site Evacuation

- Site evacuation falls under the Code Green Protocols of the Emergency Preparedness and Response Manual Please reference this resource

Evacuation and Leaving the Home is a very last resort, and is defined as:

- Immediate Emergent Evacuation – all staff and residents will be moved immediately to the two outside “muster points”. See appendix A
- Planned Evacuation - Sufficient notice allows for planning and placement
- Stage 1 – partial horizontal evacuation from one area of a floor to another area of the same floor
- Stage 2 – partial evacuation , such as an entire floor or multiple units, can be horizontal or vertical evacuation
- Stage 3 – full evacuation of Building

Authority to Order an Evacuation

Internal Disaster – in Collaboration with the Regional Director, The CEO/Administrator, or in their absence, the following personnel in succession: (1) Director or Resident Nursing Services; (2) Lead Charge Nurse; (3) Director of Environmental Services, has the authority until the arrival of the Fire or Police Chief or his designate, and any further decisions will be made in consultation between the authorities on site.

External Disaster - The Emergency Operations Control Group of the City of Sault Ste. Marie will declare the disaster. The order to evacuate will be given to the CEO/Administrator or designate who will activate the plan.

Warning System

Once the disaster has been declared, the switchboard operator in the Home will announce over the P.A. system three time and the local Radio and TV stations will send out an announcement. This must be cleared with the Extendicare Communications department first, as the Phone call list may be adequate.

Contacting Key Staff and Outside Resources

- Access staff phone out process as noted above in the communications section.

Evacuation Routes and Destinations

Partial Evacuation (Planned Evacuation) - Holding areas, if required, will be:

- a) Celebration Room
- b) Worship Space
- c) Restorative Care
- d) Family Dining / Interdisciplinary Rooms

Full Evacuation - Refer to the Community Partner Sault Ste. Marie 24 Hour Care Facility and Community Partner Emergency Response Strategy

PRIMARY EVACUATION ROUTES	
Evacuation within the Building	
<p>Primary Route – RED - Assemble in RHA Lounge and Dining Room -Level One – exit to courtyard / The courtyard is opened by the GM Key -Level 2 and 3 - Exit through EN and ES stairwells Secondary Route – GREEN – Exit through distal stair wells on RHA to exterior or building Evacuation Zones – See appendix A Residents are evacuated in the following Priority – Every Unit will have a list of their residents and their mobility status on the wall at the nursing desk by the computer. Use this to determine who is mobilized first and to ensure you have removed all residents.</p> <ul style="list-style-type: none"> - Mobile - Mobile with aids - Immobile 	
External Evacuation off Property	
Evacuation to the North	Evacuation to the East
Primary Route: Highway 17 – Least preferred route	Primary Route: Highway 17 Support available in Thessalon, Blind River, Espanola, Sudbury
Alternative Route:	Alternative Route:
Evacuation to the South	Evacuation to the West
Primary Route: Not available unless NO OTHER option	Primary Route: Not available

Traffic Control and Security

The situation will guide the type of security and traffic control required

- Police Service of Sault Ste. Marie will assist whenever possible with traffic flow in and out of the facility, and if required, regulation of entry into premises and security of the premises.
- If the police are not available, the Administrator or alternate, as per chain of command, will coordinate the security of the premises. All staff and other personnel must present identification for entry to the premises during a disaster situation.
- Call-out staff could be directed to park at a pre-arranged area or at the direction of on-the-scene police officers.

Staff Responsibilities in the Event of An Evacuation

Note: Staff responsible in the event of a fire alarm are outlined in Fire Safety section of the Health and Safety Manual

- SEE EMERGENCY OPERATIONS PLAN – SECTION 3- JOB DUTIES FOR:
 - o All duties as outlined by Manager and Dept

Water Leakage Response Plan

Initial Response

- Notify the Manager or Charge Nurse or Maintenance Personnel immediately if a water leakage of any kind is found. Maintenance staff will take responsibility of turning off any valves and / or calling the plumbing contractor
- Cordon off the area to stop any foot traffic, put up wet floor signage
- Assess any safety risks. If a large amount of water impacting any aspect of resident care or function of department, ensure a code Grey is called
- Obtain the spill kit

Decision to Shelter in Place

The biggest decision our Incident Command Center lead (the Administrator or designee) may need to make is whether to stay or go in response to a threatened or actual emergency. This decision is always based on the best interests of the residents; shelter in place is often the preferred method over facility evacuation due to the stress to residents associated with evacuation to another facility or alternate care site.

Situations that may warrant shelter in place include:

- Severe weather
- Hazardous materials incidents
- Nuclear accidents

Earthquakes
Wildfires

PROCEDURES

Once the Incident command center makes the decision to shelter in place, the following activities occur:

INITIAL (See Rapid Response Guide – Shelter in Place)

INTERMEDIATE

- If not already completed, notify the MOHLTC and Public Health of the unusual occurrence and activation of facility's EOBCP, including shelter in place status.
- Complete staff notification and assignments. Continue to call in personnel as needed
- Assess residents frequently and offer comfort and reassurance.
- Periodically, brief staff on the incident, check-in on their well-being and perform assignments. Reassign as the situation changes.
- Identify any unsafe areas related to the threat. If there are cracks and vents around doors and windows, they should be sealed with duct tape during a hazmat situation.
- If hazard areas are identified, move residents to safety and clearly mark areas "Do Not Enter". Use tape and other signage to keep people away from threats.
- Suspend normal business operations and close the facility.
- Advise and remind all residents and visitors to stay inside the facility until further notice. They should be told why they are being asked to stay, the expected duration, and exactly what they should do to remain safe.
- Activate Code Grey – air exclusion, or other appropriate intervention

EXTENDED

If shelter in place is to be prolonged, be prepared to access emergency supplies
Listen to the radio for instructions and updates from local officials.
Continue coordination with local emergency management
Maintain use of Incident command center
Notify families and staff of "All Clear".

Authority to Re-Enter

Demobilization and Transition to Recovery

Demobilization involves the release of resources used to respond to the incident. As the response phase transitions to the recovery phase, increasing numbers of resources may be demobilized, until the transition is complete.

- Complete the Post Emergency Check list (SECTION FIVE) ICC Set Up and Forms
- Complete the post Emergency Debrief

Authority to Call for Re-entry

Following an emergency evacuation, re-entry into F.J. Davey Home must be preceded by the approval of appropriate jurisdictional authorities (local or provincial , etc.)

The Executive Director / Administrator or designee notifies appropriate authorities to request approval for re-entry once it is deemed safe. Subsequently the following are also notified or return to normal operations:

- Extendicare Corporate – Regional Director
- Ministry of Health and Long Term Care and LTC Ombudsman
- Management team and staff
- Residents and family
- Medical Director
- Board of directors
- Police Department
- Fire Department
- Sault Ste Marie Emergency Management Agency
- Insurance Agent

Post Evacuation Return Transportation

Following a disaster, Local emergency management officials will be made aware of the type of transportation likely to be needed by facility residents so that they can receive the appropriate priority when assistance is needed with transport services.

Agreements will be in place with public and private transportation agencies, ambulance services, wheelchair accessible services and other transportation options in the community, including family and volunteers.

Return transportation will be arranged by the facility in collaboration with the local EMS and/or emergency management agency. The post-evacuation return to the facility may need to occur in shifts over days or weeks.

The Executive Director / Administrator or his/her designee (EDOC) is responsible for determining the order in which residents are returned to the facility.

Post Disaster Procedures for the Facility

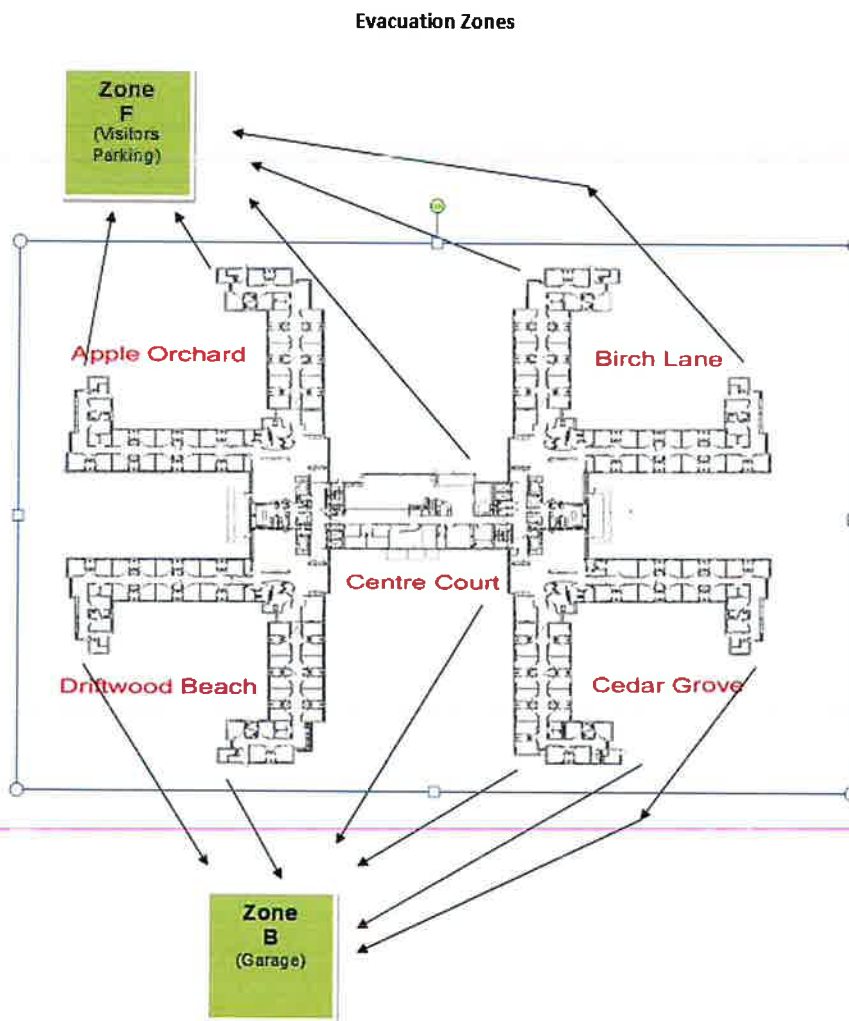
The Incident Management Team may continue during the recovery phase to determine priorities for resuming operations, including:

- Physically secure the property.
- Conduct Damage Assessment for residents and the facility
- Protect undamaged property. Close up building openings. Remove smoke, water, and debris. Protect equipment against moisture.
- Restore power and ensure all equipment is functioning properly.
- Separate damaged repairable property from destroyed property. Keep damaged property on hand until insurance adjuster has visited the property.
- Report claim to insurance carrier.
- Take an inventory of damaged goods. (This is usually done with the insurance adjuster).

FJ Davey Home

Appendix A - Facility Evacuation and Maps

2 Muster Points



Appendix B - Disaster Water Supplies

To ensure safe water for residents, staff and visitors during a crisis, our facility maintains:

- An emergency water supply that is suitable and accessible;
- An emergency water supply consistent with applicable regulatory requirements; and
- Methods for water treatment when supplies are low.

WATER

Total Water Disruption: (Contingency Plan located in the Emergency Preparedness Manual)

Currently the Home has two water lines feeding the facility, one from Third Line north of the building and the other from Great Northern Road (west) along the old Davey Home main road. If both lines were to break, the Home would have no water from the City underground water grid.

The City has multiple sources of water, one being Lake Superior along with 4 wells. In addition, they maintain 2 reservoirs full of water that would supply the city for 2 days. The city has piping to install a temporary water main, as noted below

PUC has a plan in place to hook up two lines from a water hydrant at Great Northern Retirement Centre and bring the two lines overland (140 meters) to the fire hydrant at the north-west corner of the Northern Treatment Centre, thus giving us a somewhat reduced volume of water, but still enough water to ensure that the Home could still operate. This water will also be supplying the jail.

In the event that P.U.C. cannot supply the Home with alternative City water, the main water inlet to the building has a two-inch test outlet and if nothing else can be done, we could hook a two-inch hose to it then bring in a water tanker to supply the Home with water. A pump would have to be rented from Service Rental (705) 949-6650, with no guarantee that water could be pushed to the Penthouse boilers.

The P.U.C. authority frowns on this idea because of back water contamination potential. PUC has assured the Home that they will supply us with water.

P.U.C. Contacts: Paul Dalseg, P.U.C. Services Inc., Manager 705-759-6533
Don Didonato, P.U.C. Services Inc., Supervisor 705-759-6528
Brooke Suurna – Brooke.suurna@ssmpuc.com
Jairus Patterson – Communications Supervisor - 705-759-6581
jairus.patterson@ssmpuc.com

Resource	Quantity	Location
Equipment to boil large volumes of water (adequate supply of large pots, commercial cooking kettles, etc.)		
Empty containers to store and transport boiled water (buckets, jugs, etc.)		
On-site water storage (boilers, hot water tanks, ice makers)		

Water Treatment Methods

Boiling

Boiling is the safest method of treating water. In a large pot or kettle, bring water to a rolling boil for 1 full minute, keeping in mind that some water will evaporate. Let the water cool before drinking.

Boiled water will taste better if you put oxygen back into it by pouring the water back and forth between two clean containers. This also will improve the taste of stored water.

Chlorination

You can use household liquid bleach to kill microorganisms. Use only regular household liquid bleach that contains 5.25 to 6.0 percent sodium hypochlorite. Do not use scented bleaches, color safe bleaches, or bleaches with added cleaners. Because the potency of bleach diminishes with time, use bleach from a newly opened or unopened bottle.

Add 16 drops (1/8 teaspoon) of bleach per gallon of water, stir, and let stand for 30 minutes. The water should have a slight bleach odor. If it doesn't, then repeat the dosage and let stand another 15 minutes. If it still does not smell of chlorine, discard it and find another source of water.

SPECIAL NOTE: RESIDENT HYDRATION DURING EVACUATION

During evacuation, bottled water and/or necessary liquid thickeners for those individuals with swallowing restrictions should accompany residents to maintain safe hydration levels.

Job Duties

Roles and Responsibilities

Incident Command Center - Job Duties Assignment

Position	Job Duty	2 nd Option
Administrator	Incident Command Center Lead Liaison responsibilities Call Extendicare Care IT if need wireless access at another location	EDOC
EDOC	Operational Manager Resident Triage coordination Coordinate Nursing Department Duties	DOCs
DOC	Logistics Nursing Responsibilities Resident preparation	
Operations Manager	Financial and admin action job list sheets Business office preparation Human resources management Calling in staff	
Dietary Manager	Food and dietary preparation Logistics assistance	
Dietary Supervisor	Food and Dietary preparation Dietary dept responsibilities	
Dietary Supervisor		
EHS Manager	Planning job action sheet Safety Job action check sheet Infrastructure job action check sheet Security job action check sheet Transportation job action check sheet It job action check sheet EHS Dept shut down protocols	
Activity Manager	Public Information Transportation coordination and support	

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 environment 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.

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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
<ul style="list-style-type: none"> Incident Manager Green 	<ul style="list-style-type: none"> Operations Manager 	<ul style="list-style-type: none"> Planning Manager 	<ul style="list-style-type: none"> Logistics Manager 	<ul style="list-style-type: none"> Finance/ Administration Manager
<ul style="list-style-type: none"> Safety/ Health and Wellness Officer 	<ul style="list-style-type: none"> Information Technology Lead 			
<ul style="list-style-type: none"> Public Information Officer 				
<ul style="list-style-type: none"> 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	

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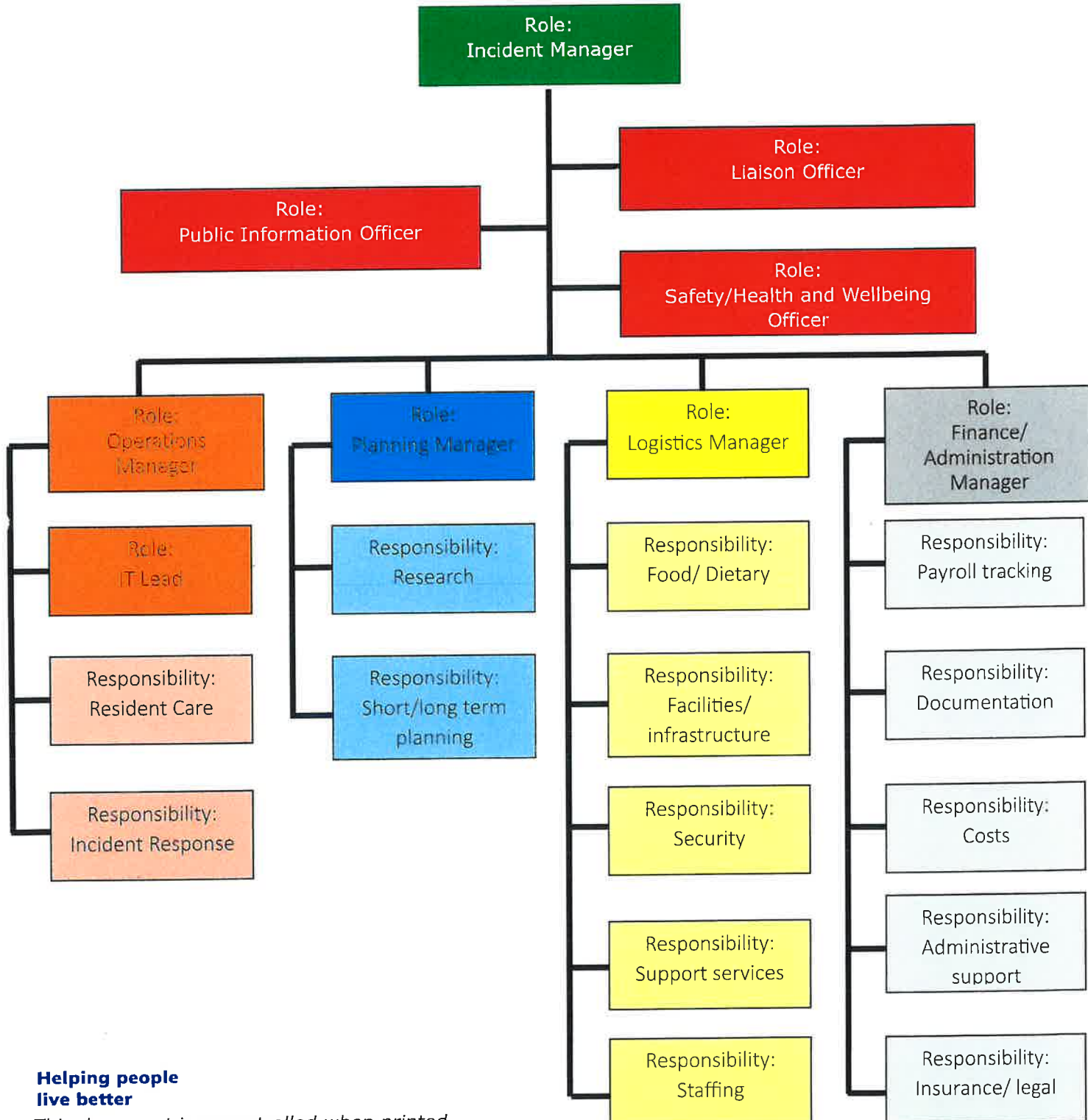
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The Incident Management System

IMS Organization Chart and Responsibilities

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

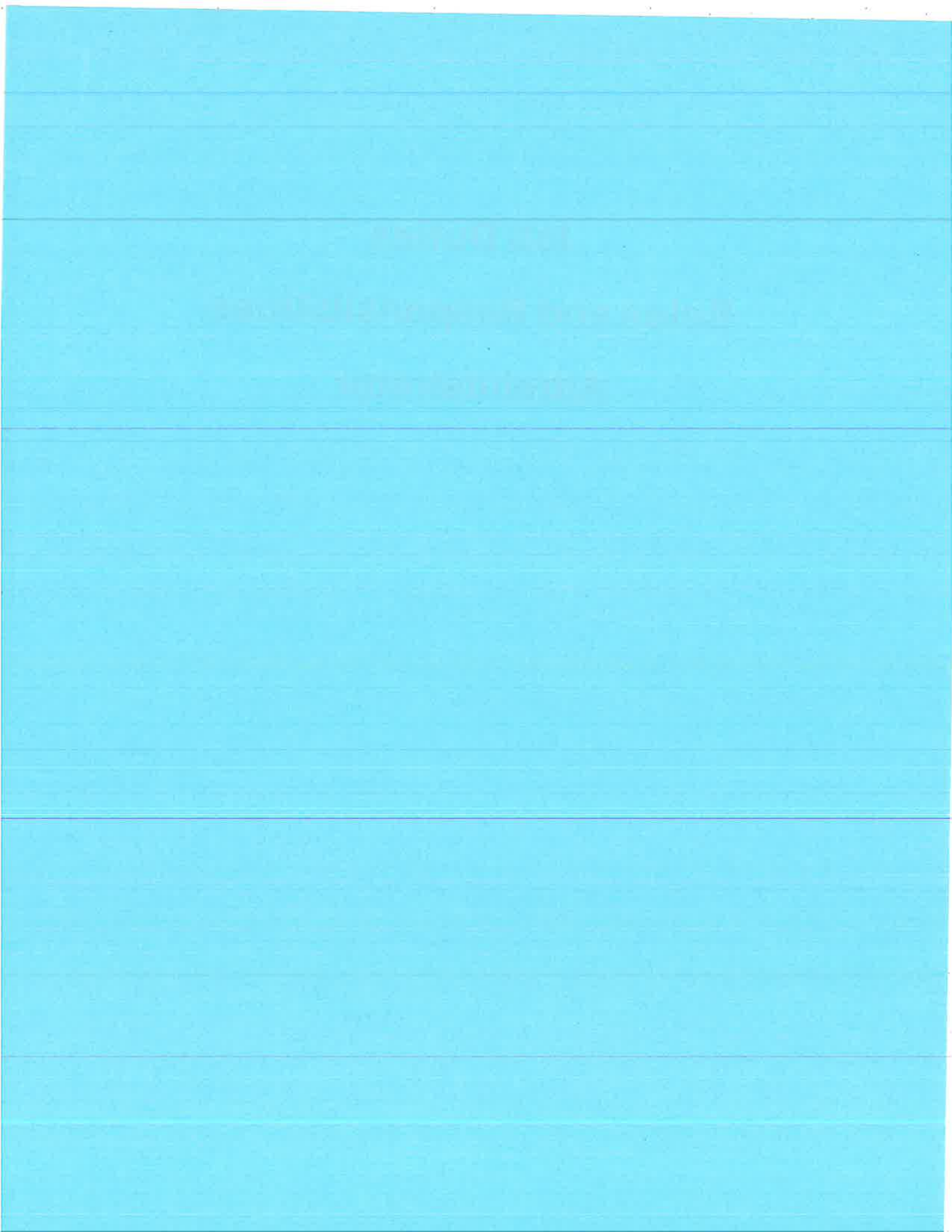


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Job Duties
Roles and Responsibilities
Administrator



Ex TENDICARE

IMS Leader Job Action Checklist - **Incident Manager** **– Administrator** **or EDOC in** **Administrator** **Absence**

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

Role: Organize and direct the emergency operations and ensure ongoing resident care. Give overall direction for home operations and, if needed, authorize evacuation.

Name: _____

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

Initiate the Incident Management System (Date and Time)
Don the Incident Manager (safety) vest. Appoint the following
as needed

Position	Job Duty	2 nd Option
Administrator	Incident Command Center Lead Liaison responsibilities Call Extendicare Care IT if need wireless access at another location	EDOC
EDOC	Operational Manager Resident Triage coordination Coordinate Nursing Department Duties	DOCs
DOC	Logistics Nursing Responsibilities Resident preparation	
Operations Manager	Financial and admin action job list sheets Business office preparation Human resources management Calling in staff	
Dietary Manager	Food and dietary preparation Logistics assistance	
Dietary Supervisor	Food and Dietary preparation Dietary dept responsibilities	
Dietary Supervisor		
EHS Manager	Planning job action sheet Safety Job action check sheet Infrastructure job action check sheet Security job action check sheet Transportation job action check sheet It job action check sheet EHS Dept shut down protocols	

Activity Manager	Public Information Transportation coordination and support Get census – Residents, staff, visitor	
------------------	---	--

Time Done

- _____
- _____ Announce a status/action plan meeting of the IMS Team.
- Receive a status report and discuss the initial action plan with the team.
- Receive the initial home damage survey report (Logistics function).
- Obtain census (residents, staff, volunteers, visitors) and status from the Activity Manager
- _____ Establish contact with:
- The Regional Director (time _____)
 - The Corporate Communications Department (Time: _____)
 - Ministry of Health/provincial health authorities (Time: _____)
 - Ministry of Labour (Time: _____)
 - Municiple Authorities (Time: _____)
 - Board Chair (Time: _____)
 - other LTC Homes (Time: _____)
 - Other Agencies as required (State Time and Name):
- _____
- _____
- _____
- _____
- _____ Authorize resources as requested by the IMS Team.
- Establish a meeting cycle and ensure the team meets as per the meeting cycle.
- Communicate status to the Regional Director or designate.
- Ensure Corporate Communications has approved all media releases.
- _____ Access IT department if have to set up wireless access at another location for PCC

IMS Leader Job Action Checklist – Liaison

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

LIAISON – JOB ACTION SHEET

Role: The Liaison functions as the incident contact person for representatives from other agencies.

Name: _____

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

_____ Receive appointment and briefing from the Incident Manager.

_____ Read this entire Job Action sheet.

_____ Establish a list of key contacts from other agencies:

- Ministry of Health / AHS / provincial authorities:

- Public Health:

- EMS: 9-1-1

- Municipal Emergency Operation Center (EOC):

- Other agencies:

- Other homes (as appropriate):

Code Orange – obtain information on the number of incoming residents that can be received and the type of care that can be provided.

_____ **Code Green** – obtain information on the number of residents that need to be transferred and the type of care required.

_____ Keep the applicable health authority contacts updated as per their directives and requirements.

_____ Request assistance from other residential care homes or agencies, as required.

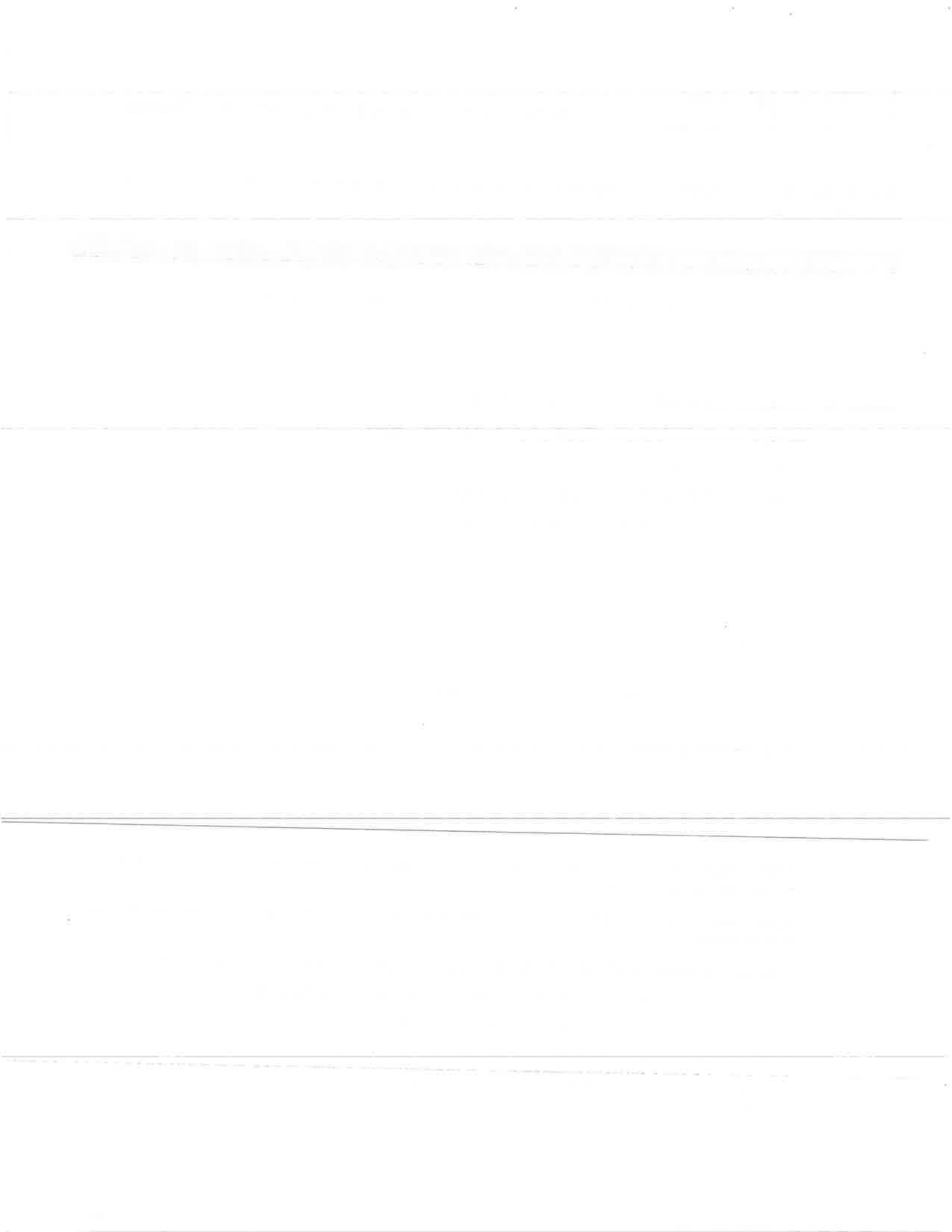
_____ Request assistance from municipal agencies, as required.

_____ Respond to requests and concerns from the IMS Team regarding organizational issues.

_____ Assist the Operations and Logistics managers in soliciting additional staffing resources from other agencies, as required.

_____ Appoint Liaison support staff, as required.

_____ Attend IMS Team meetings



IMS Leader Job Action Checklist – Logistics

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

LOGISTICS – JOB ACTION SHEET

Role: Logistics is the function of:

- Organizing and supplying additional staff;
- Maintaining the physical environment, food, water and supplies to support the operations;
- Maintaining the physical environment services of the building;
- Conducting or collecting information for damage assessments of the residential care home.

Name: _____

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

- _____ Receive appointment and briefing from the Incident Manager.
- _____ Read this entire Job Action Sheet and attached sub-function check lists.
(HR, Food/Dietary, Facilities Management, IT, Security, Purchasing)
- _____ Appoint leaders, as required (insert names).
- _____ Operations leader(s):
- _____ Nursing Department _____
- _____ Housekeeping _____
- _____ Laundry _____
- _____ Maintenance _____
- _____ Human Resources Leader _____
- _____ Infrastructure Leader _____
- _____ Security Leader _____
- _____ Brief leaders on the situation and action plan.
- _____ Establish a regular meeting cycle of Logistics Team members.
- _____ Ensure life safety systems are operating (fire alarm, sprinkler, lighting, call bell systems and door security).
- _____ Have the Security Leader initiate a fire watch EVERY HOUR if the fire alarm is out of service.
- _____ Obtain a damage assessment from the Facilities Management Leader.
- _____ Consult with the IMS Team regarding the need for staff/volunteer food and shelter.

LOGISTICS – JOB ACTION SHEET CONTINUED

_____ Develop an inventory of:

- _____ ☐ Medical/Nursing supplies
- _____ ☐ PPE for patient contact (surgical/N95 masks, gowns, sanitizer etc.)
- _____ ☐ Housekeeping/cleaning supplies
- _____ ☐ Linen and blankets
- _____ ☐ Water
- _____ ☐ Food
- _____ ☐ Other _____

_____ Contact each department to determine equipment and supply needs.

_____ Create lists of available suppliers, pricing etc.

_____ Coordinate purchasing with Administration/Finance Manager.

_____ Coordinate the protection of inventory with the Security Leader.

_____ Obtain needed supplies with the assistance of Administration/Finance Manager.

_____ Attend IMS Team meetings.

Situation Report

Use this report to document the time and details of significant events. Provide this report to other IMS leaders of during Emergency Operations Centre meetings.

Date: _____ Incident _____

Period Covered _____ to _____
Time and Date (d/m/y) Time and Date (d/m/y)

REPORT

Initial: _____ Current: _____

Resources Committed: _____

Response/Mitigation Objectives:

Total Injuries: _____ Total Fatalities: _____

Emergency service involvement (i.e. police, fire, EMS): _____

Problems Encountered:

Solutions:

Outstanding Issues: _____

Weather watches and warnings (if applicable): _____

Actions/Objectives (to be accomplished before the next meeting):

Operations: _____

Planning: _____

Logistics: _____

Finance/Administration: _____

Safety: _____

Liaison: _____

Public Information: _____

NEXT MEETING:

Date/Time: _____

Distribution (specify): _____

Incident Tracking Sheet

Originator: _____

Date: _____ Time: _____

Phone/Fax: _____ Received by: _____

A. ISSUE/CONCERN/REQUEST	B. ACTION REQUIRED

C. OPTIONS CONSIDERED	D. ACTION TAKEN

E. REFERRED TO		F. RESOLVED BY	
Date: _____	TIME: _____	Date: _____	TIME: _____

G. ANTICIPATED COSTS	H. ACTUAL COSTS

I. PROBLEMS ENCOUNTERED	J. DETAIL OUTSTANDING, UNRESOLVED OR INCOMPLETE REQUESTS

ADDITIONAL COMMENTS

Incident Tracking Sheet

INCIDENT PROGRESS NOTES

Type of Incident: _____

Date: _____ Start Time: _____ Finish Time: _____

Name of Incident Manager: _____

Note Taker: _____

Time	Event	Signature

Job Duties
Roles and Responsibilities
Executive Director of Care

IMS Leader Job Action Checklist – Operations

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

OPERATIONS – JOB ACTION SHEET

Role: Operations is the function of carrying out:

- a. The emergency response;
- b. Evacuation;
- c. Triage;
- d. Containment;
- e. Damage mitigation;
- f. Recovery; and
- g. The directives of the Incident Manager.

Where the incident directly impacts resident care, Operations will coordinate and ensure ongoing resident care throughout the emergency.

Name: _____

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

- _____ Receive appointment and briefing from the Incident Manager.
- _____ Read this entire Job Action Sheet.
- _____ Appoint teams for each area of the operation (e.g. search, evacuation, nursing), as needed.
- _____ Brief all teams for each area of the operation.
- _____ Provide direction to the teams.
- _____ Determine which teams are involved in the emergency and which teams are maintaining normal operations (normal operations may be assigned to one team leader).
- _____ Provide direction regarding the emergency response actions for the incident (e.g. evacuation, search, reception).
- _____ Coordinate staffing requirements with the Logistics Manager who will arrange for additional staff as required.
- _____ Receive, coordinate and forward all requests for personnel and supplies to the Logistics Manager.
- _____ Establish an advisory group, as required (e.g. Medical Director).
- _____ Attend the IMS Team meeting.

Job Duties – Operations - NURSE MANAGERS

Resident Triage Process to Exit the Building and Receiving at New Site

The Following steps will be followed in evacuating residents from the building

First Actions (Coordinated by the Directors of Nursing)

- Obtain Resident name list from Front Entrance – Make at least 4 copies
- Separate Lists into Apple / Drift Side and give to One DOC and into Cedar / Birch Side and give to other DOC
- Place a table at each fire door each DON can take a side and register clients as they come down.
- DOC to send runner to third floor to notify each unit sequentially to start sending down their residents.
- The Runner is then to gather the med carts, treatment carts, chart carts to bring down to service level loading dock.
- RPN to lock the keys for the med cart in the med cart
- When residents arrive at the registration table, use the resident list and account for each resident. ENSURE they have a label with their name and RHA written on it
- Once this information is confirmed, have a staff member move the resident to the pick up area in the celebration room or load onto the transport vehicle
- Once third floor is cleared move on to second floor and so on

RPN

- Prior to any resident leaving their unit, the RPN is to place an appropriate color sticker on resident noting name and RHA. MUST also ensure resident has a name band in place
- The DOCs will coordinate which unit / level moves to evacuate to the main floor first, second, and so on
- The DOCs will ensure all residents have been moved to the main floor (Level one) prior to loss of power or loss of elevators
- Ensure all residents have a name band and a colored sticker
 - o Residents to be grouped by Floor – Green – level one
 - Blue – level two
 - Yellow – level Three

RESIDENTS WHO WILL BE GOING HOME

- Reach out to RAI Coordinator to get list of families who have noted they will take their resident home if an emergency evacuation
 - o Print list from PCC
- ONCE ALL RESIDENTS ARE at the evacuation site, then call families to come pick up resident
- Communication coordinator (Activity manager) to gather staff to start calling families who have indicated they can take their loved one home

- Activity Manager to coordinate placement of message on website stating the contact extension or phone number of all of management team, the RPN cell number for each unit, the charge nurse phone cell number

- Family message :

- o The FJ Davey home is evacuating secondary to a ____
- o You have noted that you would take your loved one home is a mass evacuation
- o Please pick up your loved at the evacuation center; located.....
- o Your loved one will be carrying a bag that contains some of their personal items
- o The # for the pharmacy is this – you may need to reach out to get additional medication

- Incident Command Center Lead or Operations Lead will determine who is the receiving team at the accepting evacuation site

- All staff from an evacuated unit will go with the residents from that unit
- After arrival at evacuation site, reconfirm all residents present against the resident list
- Commence calling families of those who have noted they will pick their loved one up
- Operations lead determines who is the lead person at the receiving site.

Job Duties
Roles and Responsibilities
Director of Care

Code Green – Evacuation RPN Roles and Responsibilities

Updated May 29, 2025

You will get instructions from the command center when you are to begin to move residents to the celebration room start with the below tasks to prepare

The RPN will receive name labels, personal bags and a list of personal belongings to gather from the command center

Note Name labels coding: Ensure you to write on each label the resident's Full name and the RHA that the resident is from.

- Level 3- Yellow
- Level 2 – Blue
- Level 1 - Green

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 carry 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.

RPN Actions in the event of a code green

- Gather all PSW's – discuss game plan
 - o Take the evacuation listing copies off the bulletin board that is by the main computer on the RHA
 - o Review with PSW's the evacuation listing to ensure the most mobile residents are evacuated first (see above and review with PSW's)
 - o Hand out the evacuation list, personal belonging listing and bags to the PSW's
 - o Gather Medication, treatment and resident chart carts- lock keys for medication cart in the cart.
 - o As PSW's bring residents to the desk, place the residents name label on the resident (Full name and RHA)
 - o Delegate a staff member to move the resident to the celebration room area to the distribution table (DON's)
 - o Designate a staff member to bring med, treatment and chart cart down to loading dock

PSW Actions in the event of an evacuation

- o Start with the residents on evacuation listing who are most independent- see above
- o Gather resident belongings as per the list and check off – mark residents name on the bag
- o Bring the resident up to the desk
- o Designate a staff member to bring med cart down to celebration room

Nursing Resident Care

Directors of Care

- EDOC to reach out to Medical Director and NP to update on situation, Clinical Issues, resident placement
- Communicate with receiving area to ensure spaces are allocated, and staffing in place
- Determine safe location for medications and narcotics
 - Emergency drugs, narcotics, and stock antibiotics will be removed by the nursing supervisor or her designates, and kept by her until suitable storage arrangements can be made.
- Coordinate gathering of supplies and where these are to be stored at the alternate site (tens, dressing supplies, other)
- Temporary Discharge of Residents – DOC will determine which residents can be potentially discharged and assign staff to reach out to families re same.
 - As many residents as possible will be discharged to the care of families after they have been transferred to the holding areas.
 - residents should require no direct nursing or medical intervention.
 - The EDOC in collaboration with HCCSS will be responsible for considering residents for temporary discharge, and coordinating this discharge.
 - The EDOC will delegate a staff member to inform families.
 - Any resident being discharged to his/her family will be picked up at the outside holding area. All prescribed medications with direction for their administration must accompany each resident. All discharges must properly be noted and recorded on the residents' charts.
- The DOC will assign staff to gather additional medical supplies , organize, label per unit , and ensure they arrive at evacuation site

Transportation for Residents (UTILIZE APPENDIX E TO TRACK WHERE RESIDENTS ARE GOING)

- **Residents who are independent in ambulation:** may be evacuated first unless there are extenuating circumstances. They should load first on vehicles where there are multiple rows of seats and move to the back of the vehicle. They may be accompanied by a designated staff member to the designated mode of transportation. If safe and appropriate, families may be offered an opportunity to take their family member home for care during the anticipated period of disruption to services.
- **Residents who require assistance with ambulation:** will be accompanied by designated staff member to the designated mode of transportation. If safe and appropriate, families may be offered an opportunity to take their family member home for care during the anticipated period of disruption to services. This may include residents with assistive devices.
- **Residents who are non-ambulatory:** will be transferred by designated staff members via the designated mode of transportation. This may include residents in wheelchairs or those who are bedridden.

- **Residents with equipment/prosthetics:** essential equipment/prosthetics will accompany residents and should be securely stored in the designated mode of transportation.

Charge Nurse

- Will coordinate movement of residents from home area to staging area in the home for pick up and accompany to alternate site
- Will coordinate printing off / gathering the MAR for residents on Each unit and bringing to that unit and handing directly to RPN team lead

Team Leader RN/RPN on RHA

- is responsible for the evacuation of his/her area and must remain on the RHA until the area is completely evacuated : they will be responsible for residents, nursing records, medications, etc. If time permits, residents are to be dressed, carrying a blanket. The Team Leader RN/RPN or his/her designate will keep a record of the number of residents evacuated.
- A list of all residents in the Home and room number and evacuation status is kept in each Resident Home Area (RHA). This is to be updated on a continual basis by the RHA Clerk on the unit.
- The RPN will complete the Resident Evacuation Tracking Form (Appendix E)

Vital Records and Identification

Nursing Records - Nursing records must be evacuated with the resident in the following priority order:

- Resident Care Plans
- Medication Records
- Medical Records
- Doctors Files

This pertains to both horizontal and vertical evacuations.

DON will gather Charting Box which contains blank progress notes and other required forms

Resident Identification - Residents will be identified by one or more of the following:

- medication record (MAR) photos
- clothing labels
- wallet or purse identification
- Identi-bands where applicable
- The RPN will designate a PSW on the unit to ensure EVERY resident has a name band in place
- DON will assign 2 staff to go to all units to have staff print out a current transfer form from PCC and place in paper record

Medications -

- All emergency drugs, narcotics and stock antibiotics will be removed by the RHA Team Leader from their stored location and will be transferred to safe or holding areas.
- Essential medications and associated supplies to be evacuated and relocated as time and circumstances permit are as follows:
 - The drug cart as a whole will be brought to the evacuation site
 - The RPN will delegate a PSW to ensure there is an adequate supply of Medication cups, drinking cups, and syringes and to gather Additional supplies from storage as circumstances allow.
 - Transportation will be arranged to move medication to relocation facilities after all residents have been moved.
- At the best of times, there is one month's supply of prescriptions and stock medication. However, there are times when the supply of prescription medications may be as low as 3-4 days. Depending on the circumstances of the relocation, the following can be carried out:
 - Medications will be given as long as they last
 - Medisystem is available on a 24/7 basis. If able, they will supply medications.
 - Some residents' medications may be obtained from another residents supply. In this case, the attending Physician or Medical Director will provide accurate documentation of the drugs.

Medical Supplies –

- Essential dressing supplies, as determined by the nurse on each floor, will be sent with the resident.
- The DOC will work with the RHA team lead to ensure adequate supplies will be obtained from storage and delivered to each relocation facility with medications.
- Required medical Supply list – see Section 5 – ICS Forms
- DOC to designate PSW – Stores person and RAI Coordinator – to Gather all medical Supplies – place in labelled boxes at shipping door for transport

Clothing

- Where possible, one change of clothing and blanket will accompany each resident to a relocation facility.
- DOC to print off 32 copies for each RHA of what is to be packed (see list – Section 5 – ICS Forms) for each resident and give that along with the bags from ICS to designated staff so it can be brought to each RHA so they can get the residents ready
- Staff are to check off items packed and place list in the bag with the items when done
-

Personal Items

- The following items should, if possible, accompany the resident; canes, walkers, wheelchairs, dentures, glasses, hearing aids, purses and wallets.

Feeding of Residents

- The RHA team leads will designate staff to ensure all resident receive the support they need to eat

Receiving Team at Evacuation Site

- DON will assign 2 persons to be the key leads at the receiving site (RAI Coordinators and One DON)
- Residents will be grouped by floor – Green – level one / Blue – Level 2 / Yellow – Level 3
- Each level will be assigned at least 2 teams with an RPN lead and 5 PSWs – they will ensure residents and belongings stay together, get people settled, ensure identification in place, call families

Resident Personal Supply List -Evacuation - to be placed in bag with resident name

(If time permits) -Check mark what is in the bag below

Provide completed list to the RPN

[illegible]

Mandatory Medical Supply List - If time permits

✓	Item	# Needed	FJD Labelled?
	Tena Supplies	1	
	Oxygen concentrator /Oxy go and filled liquid Oxygen canisters	1	
	Vital equipment		
	Wound care supplies -Treatment cart		
	Medication Cart – Back up USB sticks	1	
	Back up eMar computer	1	
	Back up – paper charting	1	
	Commode Chairs		
	Blankets/towels	1	
	Wash basins/Bed pan/urinal		
	Bath Chairs		
	Sara stedy/Sara sit to stand and Chorus lifts		
	Maxi lift with slings		
	Slider sheets	1	
	Heel Boots		
	Tube Feed Pump / equipment	1	
	Suction machine / equipment		
	Catheter supplies		
	PPE supplies	1	
	Spoons/cups/medication cups		
	Garage bags		
	Sharps container		
	Extra needles for insulin pens	1	



F.J. Davey Home

APPENDIX E - MASTER RESIDENT EVACUATION TRACKING FORM

1. INCIDENT NAME:		2. FACILITY NAME:		FJ DAVEY HOME	
3. DATE PREPARED:		4. RESIDENT TRACKING MANAGER:			
5. RESIDENT EVACUATION INFORMATION					
RESIDENT NAME:				MEDICAL RECORD	
DISPOSITION <input type="checkbox"/> HOME <input type="checkbox"/> FACILITY TRANSFER <input type="checkbox"/> TEMP. SHELTER	MODE OF TRANSPORTATION	ACCEPTING FACILITY NAME & CONTACT INFO	TIME FACILITY CONTACTED & REPORT GIVEN	TRANSFER INITIATED (TIME/TRANSPORT CO.)	MED RECORD SENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
					MEDICATION SENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
					MD/FAMILY NOTIFIED: <input type="checkbox"/> YES <input type="checkbox"/> NO
					ARRIVAL CONFIRMED: <input type="checkbox"/> YES <input type="checkbox"/> NO
RESIDENT NAME:				MEDICAL RECORD	
DISPOSITION <input type="checkbox"/> HOME <input type="checkbox"/> FACILITY TRANSFER <input type="checkbox"/> TEMP. SHELTER	MODE OF TRANSPORTATION	ACCEPTING FACILITY NAME & CONTACT INFO	TIME FACILITY CONTACTED & REPORT GIVEN	TRANSFER INITIATED (TIME/TRANSPORT CO.)	MED RECORD SENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
					MEDICATION SENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
					MD/FAMILY NOTIFIED: <input type="checkbox"/> YES <input type="checkbox"/> NO
					ARRIVAL CONFIRMED: <input type="checkbox"/> YES <input type="checkbox"/> NO
RESIDENT NAME:				MEDICAL RECORD	
DISPOSITION <input type="checkbox"/> HOME <input type="checkbox"/> FACILITY TRANSFER <input type="checkbox"/> TEMP. SHELTER	MODE OF TRANSPORTATION	ACCEPTING FACILITY NAME & CONTACT INFO	TIME FACILITY CONTACTED & REPORT GIVEN	TRANSFER INITIATED (TIME/TRANSPORT CO.)	MED RECORD SENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
					MEDICATION SENT: <input type="checkbox"/> YES <input type="checkbox"/> NO
					MD/FAMILY NOTIFIED: <input type="checkbox"/> YES <input type="checkbox"/> NO
					ARRIVAL CONFIRMED: <input type="checkbox"/> YES <input type="checkbox"/> NO
6. CERTIFYING OFFICER:		7. DATE/TIME SUBMITTED:			



NHICS FORM 255 | MASTER RESIDENT EVACUATION TRACKING FORM

PURPOSE: RECORD INFORMATION CONCERNING RESIDENT DISPOSITION DURING A FACILITY EVACUATION
ORIGINATION: OPERATIONS BRANCH
COPIES TO: PLANNING SECTION CHIEF AND DOCUMENTATION UNIT LEADER

NHICS255
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Job Duties
Roles and Responsibilities
Office Manager

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Job Duties – Financial and Administration

Business Office responsibilities

Business Office
Executive Director / Administrator <ul style="list-style-type: none">• Ensure external partners are notified of emergency – Sault Ste. Emergency Response Team, Extendicare Corporate, MOHLTC, Board of Directors• Work with Management Leads to initiate Staff call in list
Payroll and Benefits Lead <ul style="list-style-type: none">• Work with scheduling staff to initiate staff call in procedure The Business Office is responsible for supervising: all cash, cheques and other essential records in the event of partial evacuation affecting the office area, or total evacuation.• In Maple Court location - Coordinate Incoming staff, volunteers or visitors will report to the centrally located personnel assignment centre located in the Celebration Room of the Home, and will receive their assignments from the Administrator or designate as per chain of command. Requests from department heads or alternates for staff will be cleared through this authority.•
Human Resource Lead <ul style="list-style-type: none">• Work with Dietary Management Team and assist where directed
Office Records Accounts Payable Lead <ul style="list-style-type: none">• Office records are to be evacuated only as time and circumstances allow in the following order:• resident records• financial records• staff records• cash• cheques and account books
IT Services <ul style="list-style-type: none">• will set up internet access for medication carts• will set up internet and work stations for computer access
**Review Business Continuity Plan for additional Information

IMS Leader Job Action Checklist – Administration/Financial

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

ADMINISTRATION/FINANCIAL – JOB ACTION SHEET

Role: 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.

Name: _____

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

- _____ Receive appointment and briefing from the Incident Manager.
- _____ Read this entire Job Action Sheet.
- _____ Appoint Administration/Finance support staff, as required.
- _____ Ensure documentation of all IMS Team meetings, discussions, decisions and actions daily.
- _____ Receive a copy of all documentation/reports from all IMS managers and organize the documentation daily.
- _____ Ensure a copy of all outgoing and incoming faxes/emails is maintained.
- _____ Obtain a copy of all resident transfer charts for documentation protection.
- _____ Maintain a chronological chart of all key incidents, actions etc.
- _____ Determine and provide administrative support for each IMS team:
 - _____ ☐ Incident Manager _____
 - _____ ☐ Operations _____
 - _____ ☐ Planning _____
 - _____ ☐ Logistics _____
 - _____ ☐ Safety _____
 - _____ ☐ Liaison _____
 - _____ ☐ Public Information _____
- _____ Appoint administrative support staff/volunteers as required.
- _____ Consider appointing runners for messaging, as required.
- _____ Monitor and document all purchases and expenditures.

IMS Leader Job Action Checklist – Administration/Financial

ADMINISTRATION/FINANCIAL – JOB ACTION SHEET CONTINUED

_____ Provide financial reports to the Incident Manager and appropriate Regional Director.

_____ Maintain written reports summarizing financial data relative to personnel costs, supplies and miscellaneous expenses.

_____ Monitor current financial balances and credit limits.

_____ Request approval to extend lines of credit or other banking services, as required.

_____ Negotiate terms of payment for supplies and emergency purchases (Contact Regional Director for approval, as required).

_____ Document expenditures for reimbursement submissions.

_____ Notify insurance companies (document the time and who was spoken to) **in coordination with Corporate office.**

_____ Receive and document alleged claims. Use photographs and video to document, where appropriate. Enlist the assistance of the Safety Officer and Security Leader, where appropriate.

_____ Obtain statements from all claimants and witnesses.

_____ Update Senior Command, who will determine the need for legal counsel, as required.

_____ Review contracts or agreements being negotiated on short notice with vendors.

_____ Provide a summary of all alleged claims for Corporate Office, Administrator and Regional Director.

_____ Attend IMS Team meetings.

IMS Leader Job Action Checklist – Human Resources

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

HUMAN RESOURCES – JOB ACTION SHEET

Role: The Human Resources function will:

- a. Collect, inventory and assign staff and volunteers as needed;
- b. Provide for long term scheduling for extended events;
- c. Document scheduling and hours worked;
- d. Report to the Logistics Manager.

Name: _____

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

- _____ Collect and inventory available staff at a central point.
- _____ Receive requests and assign available staff, as required.
- _____ Call back off-duty staff and volunteers, in consultation with IMS Leader/Administration, as required.
- _____ Establish a pool of volunteers, identifying skill levels.
- _____ Ensure the home has a current list of all volunteers including names and contact information.
- _____ Brief the Logistics Manager frequently as to staff/volunteer availability.
- _____ Ensure documentation of all staff arriving and leaving, time sheets etc.
- _____ Provide time sheet tabulations to the Administration/Finance Manager.
- _____ Provide for staff rest and relief; establish a staff rest area, as required.
- _____ Work out scheduling for long term events to maximize staff utilization.
- _____ Monitor staff and volunteers for signs of stress/inappropriate behaviour and report to IMS Leader.
- _____ Provide for an Employee Assistance Program, as required.

Dietary

Job Duties – Dietary Food

Dietary Services
Relocation centre is to be assessed by the appropriate authorities for equipment and supplies available (local centres - by the Home Senior Staff and Emergency Operations Control Group)
If cooking facilities are available, Dietary Manager will contact suppliers and arrange to have food and supplies delivered to relocation centre. The Dietary Manager is responsible for having an updated list of suppliers.
Provide list of dry goods to staff of items to be packed to relocate to evacuation site. See Section 5 for list
The menus will be adapted to available equipment, type of resident, season/weather, number of available staff, and availability of food supplies. Emergency menus are available in policy manual NC-05-01-08 Appendix 1-4 and can be implemented as needed.
If cooking facilities are not available at relocation centre, Dietary Manager will arrange for prepared food to be delivered from other LTC homes, local hospital, or if necessary purchased from local caterer or restaurant.
If adequate supply of dishes, glasses, and cutlery are available and a dishwasher or 3-sink system is available, regular items will be used. If supply or dish washing capabilities are not available, disposable dishes, glasses, and cutlery will be used.
Meal delivery to residents will be co-ordinated by Dietary Manager depending on physical set up of relocation centre.
All available staff will be utilized to feed residents who require assistance at meal times.

IMS Leader Job Action Checklist – Food and Dietary

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

FOOD AND DIETARY – JOB ACTION SHEET

Role: The Food and Dietary function will:

- a. Ensure continuity of food services throughout the emergency event for both residents and staff;
- b. Organize food and water stores for preparation and rationing during periods of anticipated or actual shortage;
- c. Report to the Logistics Manager.

Name: _____

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

- _____ Meet with dietary staff who are not involved in emergency operations.
- _____ Estimate the number of meals which can be served with existing inventory.
- _____ Inventory the supply of emergency drinking water.
- _____ Update the Logistics Manager regularly.
- _____ Coordinate the acquisition of food supplies.
- _____ Anticipate what is needed for staff breaks.
- _____ Project the needs of any incoming residents (Code Orange).
- _____ Arrange for dietary assessment of any incoming residents.
- _____ With the Logistics and Administration Managers, make arrangements for outside food services, if required.
- _____ Screen food received from alternate sources to ensure all food is safe and comes from an approved source.
- _____ Inform your dietary consultant

Food

Tube Feed Formula

Supplements

Thickened Fluids

Thickener

Individually wrapped snacks – fruit cups, applesauce, pudding cups, cookies, crackers, etc.

Other easy to transport and/or ready-to-eat foods as able – bananas, bread, peanut butter, muffins, etc.

Gluten Free snacks

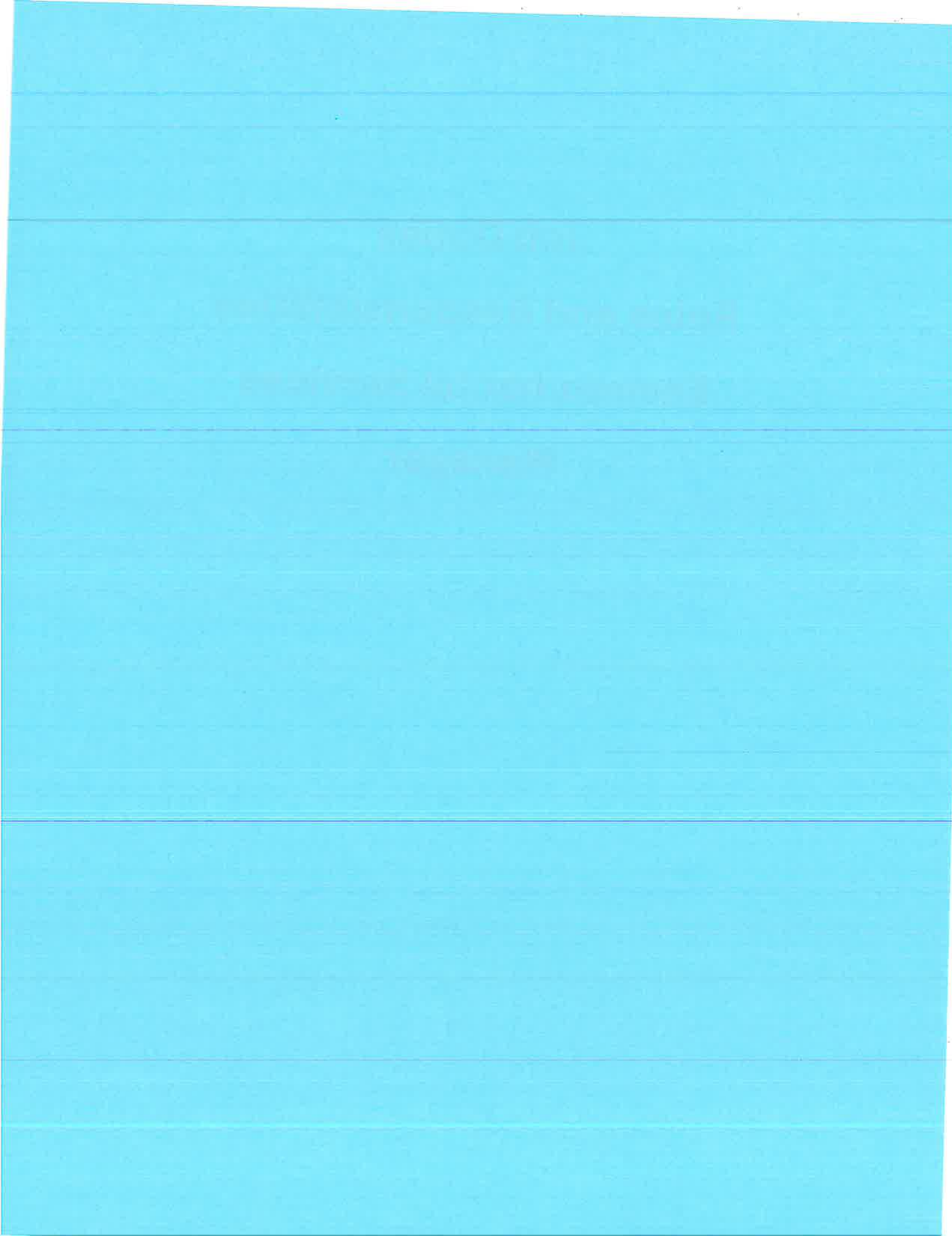
Equipment & Supplies

Robot Coupe Blixer – used to mince and puree food

Blender

Box of plastic spoons

Job Duties
Roles and Responsibilities
Environmental Services
Manager



Appendix C - Security Assessment

The Security Assessment is designed to minimize the risk of any loss that may occur during or following an emergency.

PROMPT	YES	NO
Facility Emergency Operations Plan		
Local public safety agencies have a copy of the facility emergency operations plan?		
The facility has designated a security person (Maintenance) responsible for security operations on a daily basis and during an emergency?		
An individual is assigned the responsibility to cut off gas and power to the building during emergencies which require shut off of utilities.		
An individual is assigned to greet public safety officials at the front of the building when they are called upon to respond to an emergency?		
Staff are designated to check offices, utility rooms, storage rooms, and outside doors at the end of the day to ensure they are locked?		
Policies and Procedures		
Contact information and assignments in the EOBCP are updated at least bi-annually?		
There are formal procedures during a lockdown situation that staff are aware of ?		
Lockdown procedures detail incidents of violence involving residents, staff and families, and incidents of civil disorder/unrest?		
There is a plan to notify residents' families immediately following a facility evacuation?		
The facility has an emergency response team?		
The emergency response team has security management as a component?		
A specific plan exists to provide assistance to residents and visitors who are visually or mobility impaired during facility evacuations?		
Training		
Emergency procedure training for staff in ongoing?		
Annual tabletop or functional exercises are conducted to give staff a chance to refresh what they've been trained on?		
Facility security and vulnerabilities are part of awareness training?		
Regular lockdown and shelter in place drills are conducted?		
Drill time of day changes to ensure all shifts are covered?		
Training is provided to staff so they know how respond to media inquiries following an emergency?		

PROMPT	YES	NO
Perimeter Security		
Adequate space exists for first responders and emergency response vehicles to enter and exit the facility entrance and grounds?		
Parking spaces for visitors and staff are clearly marked?		
Outdoor/exterior lighting is routinely checked for damage or bulbs that have burned out?		
Outdoor/exterior area surrounding facility is regularly cleared of brush and kept clear of debris?		
Utility boxes and exchanges are secured from tampering?		
The parking lot has video surveillance?		
Door and window locks are checked regularly?		
Appropriate locks are installed on any basement doors and windows?		
Night lighting is sufficient, meeting minimum lighting standards for points of ingress, parking lots and walking paths.		
Securing Pharmaceuticals		
A staff person and back-up is designated to safely control and secure resident medications during an emergency.		
During a facility evacuation, staff know the procedure to account for receipt, usage, disposition and reconciliation of controlled medications?		
Interior		
Current facility listing of important phone numbers and extensions is readily available for staff?		
Visitor check-in procedure is established that notes destination, time and date of visit?		
Staff onsite where identification badges at all times?		
Hazardous chemicals are labeled and stored properly?		
Food in the kitchen is properly labeled, stored and rotated?		
Computers and equipment are properly inventoried, and secured?		
Facility rooms (offices and conference spaces) that are not in use are locked?		
Public safety officials have access to the facility emergency operations plan, site plan, and floor plan for emergencies that occur after-hours?		
Alarm codes and master keys are available to local public safety officials?		
For severe weather incidents, sheltering locations are noted on the building floor plan?		

PROMPT	YES	NO
Evacuation		
The facility planned its evacuation routes and sites with consult from local law enforcement, fire and emergency management personnel?		

A process is established for accounting for all residents, visitors and staff following an evacuation?		
Pre-planning has been done to ensure residents with mobility issues can evacuate safely?		
Dining quarters and kitchen areas are clearly marked with evacuation procedures and routes?		

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

PLANNING – JOB ACTION SHEET

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

Name: _____

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

- _____ Receive appointment and briefing from the Incident Manager.
- _____ Read this entire Job Action Sheet.
- _____ Establish a status board and keep it current.
- _____ Ensure all IMS Team members have appropriate policies/plans.
- _____ Monitor the external influences (e.g. weather, utilities, staffing, supplies, etc.).
- _____ Project the possible situation(s) in 2 hours (short term).
- _____ Prepare options to respond to the possible short term situation.
- _____ Project the possible situation(s) in more than 2 hours (long term).
- _____ Prepare options to respond to the possible long term situation.
- _____ Prepare a plan/strategy to restore the home to normal operations.
- _____ Estimate the resource requirements and financial implications (in coordination with Administration/Finance Manager) to return to normal operations.
- _____ Attend IMS Team meetings.

IMS Leader Job Action Checklist – Safety

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

SAFETY – JOB ACTION SHEET

Role: The Safety function monitors and has authority over the safety of operations.

Name: _____

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

- _____ Receive appointment and briefing from the Incident Manager.
- _____ Read this entire Job Action Sheet.
- _____ Don a Safety Officer vest (high visibility vest for ease of identification).
- _____ Communicate with the IMS Team to determine safety / security concerns.
- _____ Advise the Incident Manager and IMS Team immediately of any at risky, hazardous or security conditions.
- _____ Ensure the Joint Health and Safety Committee is consulted.
- _____ Appoint Assistant Safety Officers, as required, to assist with monitoring site safety.
- _____ Provide direction to any person performing a task in a hazardous manner to ensure all staff is working in a safe manner.
- _____ Ensure appropriate response to injuries / illness (EMS / Fire, as needed).
- _____ Investigate any injuries or illnesses related to the incident.
- _____ Notify the applicable labour authorities (WSIB/WCB/provincial Occupational Health and Safety) of any critical injuries.
- _____ Attend IMS Team meetings.

IMS Leader Job Action Checklist – Information Technology

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

INFORMATION TECHNOLOGY – JOB ACTION SHEET

Role: The Information Technology function will:

- a. Manage IT requirements or issues during an emergency situation at the home level;
- b. Act as a liaison between the corporate IT department and the home, as required;
- c. Report to the Logistics Manager.

Name: _____

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

- _____ Ensure a main communication system (telephone) is operating as effectively as possible.
- _____ Ensure location is properly equipped (including telephone, computer systems, etc.)
- _____ Coordinate with the Corporate IT Department, if required.
- _____ Coordinate with security to prevent unauthorized access to electronic equipment and/or any information contained therein.
- _____ Appoint additional staff who have sufficient technical experience to maintain equipment and troubleshoot problems at the home level.
- _____ Create and maintain an inventory of community and private sector communications equipment and facilities within the community, which could be used to augment existing communications systems.
- _____ Make arrangements to acquire additional communications resources as needed.
- _____ Arrange for the operation and integration of all fax machines, computers, wi-fi routers and other technological resources as required.
- _____ Provide regular briefings to the Logistics Manager.

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

INFRASTRUCTURE – JOB ACTION SHEET

Role: The Infrastructure function will:

- a. Maintain the integrity of the physical building and provide adequate environmental controls;
- b. Report to the Logistics Manager.

Name: _____

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

- _____ Coordinate facilities' maintenance staff who are not involved in emergency operations.
- _____ Confirm status of the telephone and computer systems with the Information Technology Lead
- _____ Assess the status of the call bell system.
- _____ Assess the status of door security throughout the building.
- _____ Notify the Logistics Manager immediately if the fire alarm system is out of service and a fire watch is required.
 - ☐ Coordinate the efforts of IT, telephone and fire alarm service companies.
 - ☐ Conduct a damage/operational assessment for:
 - ☐ Structural
 - ☐ Electrical
 - ☐ Generator
 - ☐ Water and sanitary waste management
 - ☐ Heating/Cooling
 - ☐ Natural Gas
 - ☐ Fuel supply
 - ☐ Elevators
 - ☐ Other _____
- _____ Control observed hazards, leaks, and contamination and/or notify emergency services (9-1-1), as appropriate.
- _____ Ensure the Safety Officer is notified of any hazardous situations.
- _____ Coordinate with home maintenance contractors and utilities.
- _____ Identify areas for immediate repair and report to Incident Manager.
- _____ Arrange for a structural engineer to assess the building, if required.
- _____ Photograph and document all damage
- _____ Identify areas where immediate salvage could save critical services and equipment.
- _____ Establish alternate sanitation systems (portable toilets, hand washing areas), if required.
- _____ Provide regular briefings to the Logistics Manager.
- _____ Refer to home-specific Loss of Essential Services plans when necessary

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

SECURITY – JOB ACTION SHEET

Role: The Security function will:

- a. Organize and establish scene / home security;
- b. Report to the Logistics Manager.

Name: _____

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

- _____ Appoint security staff to monitor safety and security. (This can be staff from all departments.)
- _____ Coordinate with contracted security services, if applicable.
- _____ Implement a lockdown of the home, except for staff and emergency personnel, if required.
- _____ Remove unauthorized persons from restricted areas.
- _____ Ensure fire routes and ambulance loading areas are clear at all times.
- _____ Assist the Information Officer with establishing a media area.
- _____ Initiate contact with fire / police / EMS agencies through the Liaison Officer.
- _____ Provide vehicle and pedestrian traffic control.
- _____ Ensure security of food, water, medical / vaccine supplies, fuel and other resources.
- _____ Ensure all safety and security appointed staff document all actions and observations.
- _____ Establish a fire watch / patrol **30 minutes (or as directed by your local fire department)** if the fire alarm is out of service
- _____ Complete the fire watch log if the fire protection systems are off-line. Refer to Appendix EP-03-01-01 A2, Fire Watch Log and Appendix EP 13-01-02 A2, 24-Hour Resident Check Log.
- _____ Post signage at main entrance to all floors that fire system is out of order (Found in Fire Safety, Section 17)
- _____ Ensure regular briefings with safety and security personnel.
- _____ Provide regular briefings to the Logistics Manager.

Environmental and Maintenance Emergency Roles and Responsibilities

Environmental Services Maintenance

Emergency Shut Down Check List

- complete Emergency shut down of required equipment and track on form (Appendix D)

Facility System Status Report and Check

- complete status report and provide to Administrator (Appendix D)

Traffic Control

- EHS Assistant Manager appoints person to direct traffic – one at each entrance to property

Disaster Preparedness Inventory List

- EHS manager assigns personnel to complete inventory and copy to ES manager and Administrator (Appendix 38)

Security Assessment

- EH assist manager completes security assessment as soon as able (Appendix C)
- Assign a staff member to check facility q12hours

Linen Supplies for Evacuation Site

- Depending on area of concern assign staff to go to linen room on RHA to gather blankets and pillow. Place in clear garbage bags and bring to Celebration Room
- ES Manager designates 2 staff to collate supplies, and arrange transportation to evacuation site
- ES Manager to reach out to emergency contact for linen laundering and supply (CINTAS)

Delivery of Supplies to Evacuation Site

- Depending on area of concern bring one HSK cart stocked with Germicide detergent and cloths to designated area in Celebration room with Pail and Mop.
- ES Manager designates staff member to work with Activity program manager to coordinate transportation of supplies
- Reach out to vendors to obtain cube van, trailer or some way of moving supplies

Water Supply

- See Appendix G

FACILITY SYSTEM STATUS REPORT

1. INCIDENT NAME:		2. FACILITY NAME:	
3. DATE PREPARED:		4. TIME PREPARED:	
		5. OPERATIONAL PERIOD:	

6. SYSTEM STATUS CHECKLIST		
COMMUNICATION SYSTEM	OPERATIONAL STATUS	COMMENTS <small>(IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)</small>
FAX	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
INFORMATION TECHNOLOGY <small>(EMAIL/REGISTRATION/PATIENT RECORDS/TIME CARD SYSTEM/INTRANET, ETC.)</small>	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
NURSE CALL SYSTEM	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
PAGING – PUBLIC ADDRESS	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
RADIO EQUIPMENT	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
TELEPHONE SYSTEM- Land Line	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL	

NONFUNCTIONAL	NA	
FULLY FUNCTIONAL	FULLY FUNCTIONAL	
TELEPHONE SYSTEM - CELL	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
VIDEO-TELEVISION-INTERNET-CABLE	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
OTHER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	

7. SYSTEM STATUS CHECKLIST (CONTINUED)		
INFRASTRUCTURE SYSTEM	OPERATIONAL STATUS	COMMENTS (IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)
ROADWAYS / DRIVES	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
FIRE DETECTION/SUPPRESSION SYSTEM	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
FOOD PREPARATION EQUIPMENT	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
ICE MACHINES	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL	

	NONFUNCTIONAL NA	
LAUNDRY/LINEN SERVICE EQUIPMENT	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
STRUCTURAL COMPONENTS (BUILDING INTEGRITY)	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
OTHER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
RESIDENT CARE SYSTEM	OPERATIONAL STATUS	COMMENTS (IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)
PHARMACY SERVICES	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
DIETARY SERVICES	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
OTHER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
OTHER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	

8. SYSTEM STATUS CHECKLIST (CONTINUED)		
SECURITY SYSTEM	OPERATIONAL STATUS	COMMENTS (IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)
DOOR LOCKDOWN SYSTEMS	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL	
	NA	
SURVEILLANCE CAMERAS	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
OTHER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	COMMENTS (IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)
UTILITIES, EXTERNAL SYSTEM	OPERATIONAL STATUS	
ELECTRICAL POWER-PRIMARY SERVICE	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
SANITATION SYSTEMS	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
WATER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL	

	NA	
NATURAL GAS	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
OTHER	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
UTILITIES, INTERNAL SYSTEM	OPERATIONAL STATUS	COMMENTS (IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)
ELECTRICAL	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
BACKUP GENERATOR	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
UTILITIES, INTERNAL SYSTEM	OPERATIONAL STATUS	COMMENTS (IF NOT FULLY OPERATIONAL/FUNCTIONAL, GIVE LOCATION, REASON, AND ESTIMATED TIME/RESOURCES FOR NECESSARY REPAIR. IDENTIFY WHO REPORTED OR INSPECTED)
ELEVATORS/ESCALATORS	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
HAZARDOUS WASTE CONTAINMENT SYSTEM	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL NONFUNCTIONAL NA	
HEATING, VENTILATION, AND AIR CONDITIONING (HVAC)	FULLY FUNCTIONAL PARTIALLY FUNCTIONAL	

	9. CERTIFYING OFFICER:
--	------------------------

	NONFUNCTIONAL	
	FULLY FUNCTIONAL	
OXYGEN	FULLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	
BOILER DOMESTIC HOT WATER	FULLY FUNCTIONAL	
	PARTIALLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	
BOILER HEATING SYSTEM	FULLY FUNCTIONAL	
	PARTIALLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	
SUMP PUMP	FULLY FUNCTIONAL	
	PARTIALLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	
WWATER SYSTEM	FULLY FUNCTIONAL	
	PARTIALLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	
WATER CIRCULATORS	FULLY FUNCTIONAL	
	PARTIALLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	
OTHER	FULLY FUNCTIONAL	
	PARTIALLY FUNCTIONAL	
	NONFUNCTIONAL	
	NA	

Emergency Shut Down List

There are several instances where deactivation of facility systems may be required during a disaster/crisis. Examples include:

Severe weather

Earthquake

Civil disturbance

Terrorism attack

Accidental event (power spike, outage, gas leak, over-pressurization, etc.)

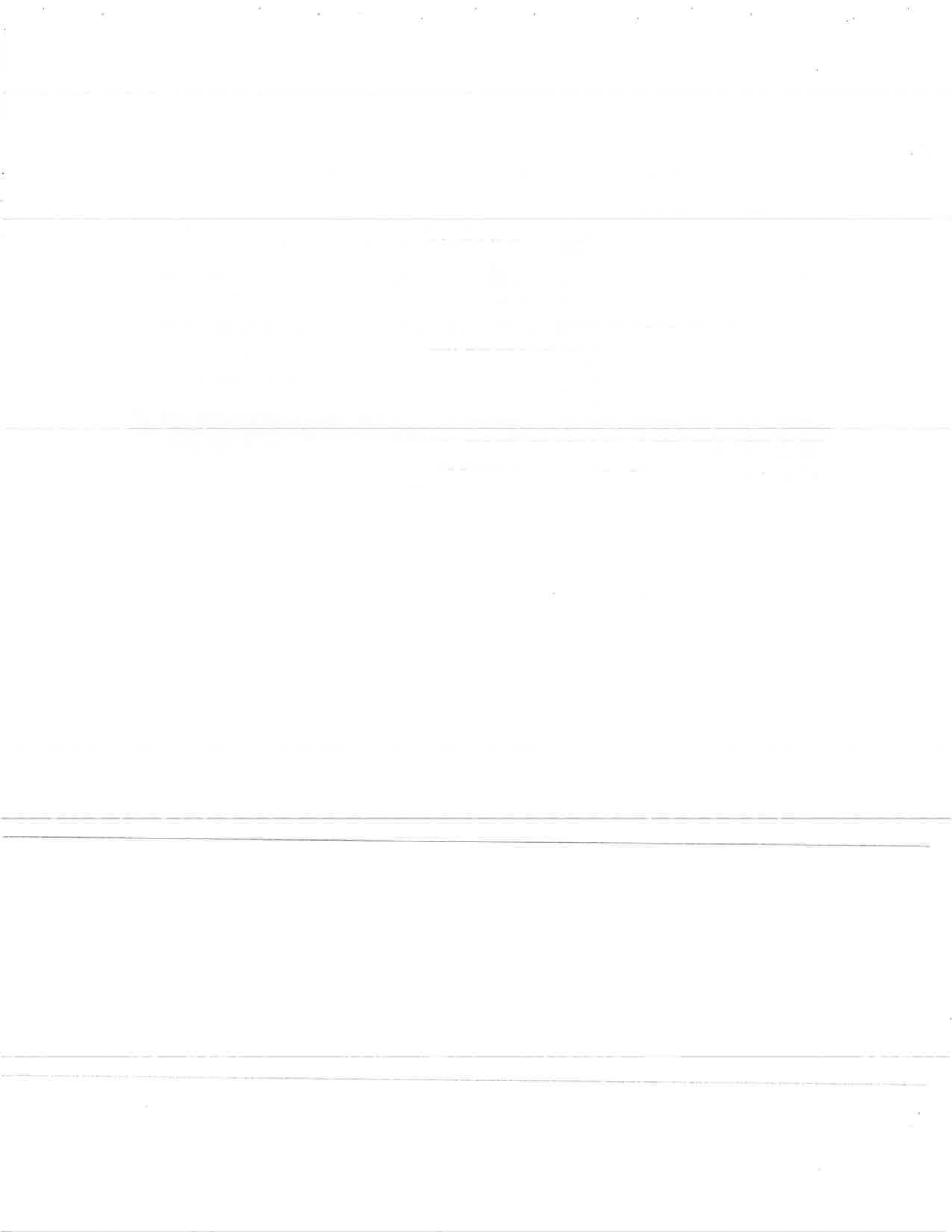
Process:

- obtain approval of the Administrator at the time of the crisis
- notify Vendors when their service is shut down by the facility.
- Notify staff when services are shut down temporarily.

EMERGENCY SHUTDOWN CHECKLIST	
NATURAL GAS	
Vendor: Union Gas	24-hr Phone: 705-759-8481 or call 911
Account #: FJ Davey Home	
Description of Location	
<ul style="list-style-type: none"> • Meter: external area of the garage in the chained in area beside it • Shutoff valves: 	
Action Steps for Shutdown	
<input type="checkbox"/>	Action 1: at man door at back loading dock there is shut off valve that is closed by the staff
<input type="checkbox"/>	Action 2: straight out from door at loading dock
<input type="checkbox"/>	Action 3: pull lever down clockwise to bottom of valve
Comments:	
ELECTRIC	
Vendor: PUC	24-hr Phone: 705-759-6555
Account #:	
Description of Location	
<ul style="list-style-type: none"> • Main electrical panel: Service • Outside meter: 	

<ul style="list-style-type: none"> • Main breaker: • Sub-breakers and sub-panels: 		Action Steps for Shutdown	
Action 1: see code grey shut down process / go to penthouse top level		<input type="checkbox"/>	Action 2: exit left from elevator, locate breakers labelled Code Grey
Action 3: stand off to the side of the panel and ONLY THEN, shut breakers off		<input type="checkbox"/>	Comments:
WATER			
Vendor: PUC		Account #:	
24-hr Phone: 705-759-6555			
Description of Location			
<ul style="list-style-type: none"> • Shut off valve(s): • Water meter: 			
Action Steps for Shutdown			
Action 1: go to service level, go through door AD 008 to AD 009		<input type="checkbox"/>	
Action 2: once in go to the Right % of the way back there is a large water main		<input type="checkbox"/>	
Action 3: locate blue turn valve handles #1 and #2 ; Turn to the right (clockwise) to bottom shut out off valve		<input type="checkbox"/>	Comments:
HVAC			
Vendor: Henderson Contracting		Account #:	
24-hr Phone: 705-949-7870			
Description of Location			
<ul style="list-style-type: none"> • Electric shutoff switch(s): • Gas Valves: 			
Action Steps for Shutdown			
Action 1: go up to penthouse floor, go left off elevator to far wall. There are large breaker panels labelled HMM		<input type="checkbox"/>	
Action 2: all 16 breakers need to be shut down ; each area is labelled		<input type="checkbox"/>	
Action 3:		<input type="checkbox"/>	
Comments:			
BOILER			
Vendor: Henderson Contracting		Account #:	
24-hr Phone: 705-949-7870			
Description of Location			
<ul style="list-style-type: none"> • Main electric shutoff switch: 			

<ul style="list-style-type: none"> Boiler shutoff switches < indicate how many boilers, gas and electric, etc.> 	
Action Steps for Shutdown	
<input type="checkbox"/>	Action 1: go to penthouse, leave elevator and go straight ahead to back wall. The boilers are all located along that wall with # 6 being to the far left and # 2 being to the right
<input type="checkbox"/>	Action 2: go Boiler #6 pull the red lever down to shut it down. This is the same process for Boiler #5 – this shuts down domestic hot water
<input type="checkbox"/>	Action 3: - go to Boiler #4 #3 # 2 – these are for radiant heat and shut down the same way
	Comments:
COMPUTER/INFORMATION TECHNOLOGY SERVICES	
Vendor: MicroAge	24-hr Phone: 705-942-3000
Account #:	



Completed by:

Incident:

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

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Job Duties
Roles and Responsibilities
Activity Manager

Activation Program

Arranging Transportation

- The CEO/Administrator, or designate as per chain of command, will be responsible for coordinating, through the Activity Program Manager the mobilization of the Home vehicles first, then arranging for additional transportation.
- The Home's van will be used to transport medical supplies and emergency equipment to the relocation centre.
- The CEO/Administrator or designate will contact the Emergency Operations Control Group or transportation department for additional transportation.

Equipment allocation, Coordination and Supply

- Manager assigns staff (Physiotherapists) to Works with DOCs to determine what equipment (walkers, wheel chairs , ect) are required
- Coordinate tagging and identification of equipment

Communication to Family / Family Council

- Manager works with Administrator to craft messages to family and family council

Volunteer Coordination

- The activity Manager will coordinate the use of volunteers, including the signing in, allocation of work, tracking hours and time
- This will be done using the "Volunteer Skills in the Event of an Emergency" form (Section 5)

Resident Attendance and Support

- Manager assigns staff to provide 1:1 support for high risk residents / coordinate activities to support residents and families
- Will provide support with feeding residents

IMS Leader Job Action Checklist – Public Information

Note: All documentation during the emergency must be given to the Administrator daily and kept on file for a minimum of three years.

PUBLIC INFORMATION – JOB ACTION SHEET

Role: The Public Information function organizes communications with families, stakeholders and the media (as appropriate) and provides information updates.

Name: _____

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

- _____ Receive appointment and briefing from the Incident Manager.
- _____ Read this entire Job Action sheet.
- _____ Coordinate all communications with the Corporate Communications Department.
- _____ If media is on-site, or expected, establish a Public Information area away from where the response is being coordinated and resident home areas. Inform on-site media of the physical areas which they have access to and those which are restricted. (Co-ordinate with the Security Leader and Corporate Communications.)
- _____ Issue the initial incident information report to the news media as per directives from Corporate Communications.
- _____ Contact other involved agencies to coordinate released information. Keep the Liaison Officer informed on actions.
- _____ Obtain a progress report from IMS Team, as appropriate.
- _____ Establish communications with family members/residents/staff.
- _____ Assist Corporate Communications in preparing responses for anticipated questions.
- _____ Attend IMS Team meetings.

Volunteer Skills in the Event of an Emergency

Name: _____

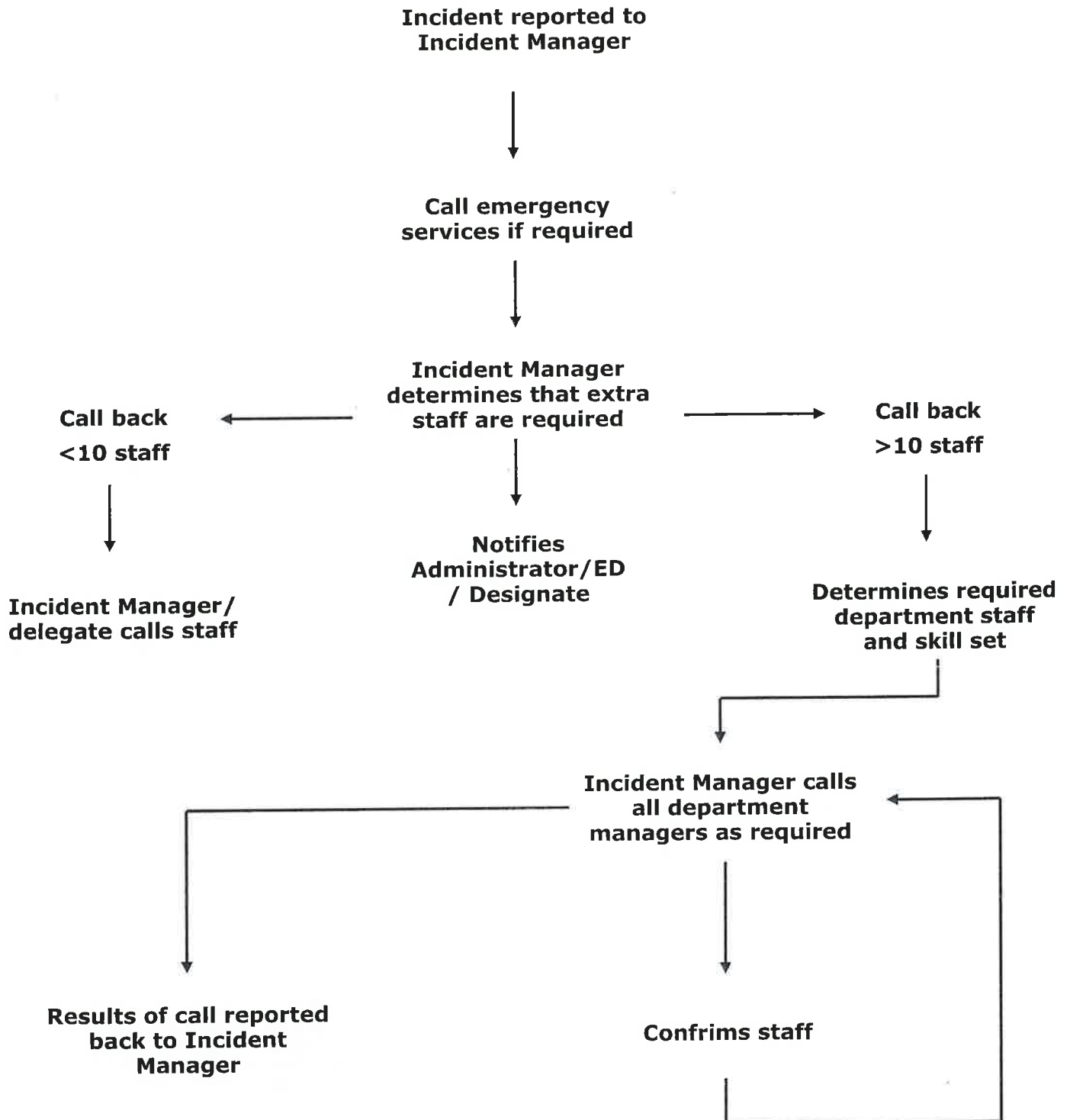
Phone: _____

Date: _____

SKILLS/EXPERIENCE		Provide Details
Provide Care	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Food Service	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Security	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Recreation	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Child Care	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Emotional Support	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Logistics Support	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Administrative Support	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Communication

Staff Call Back Flow Chart



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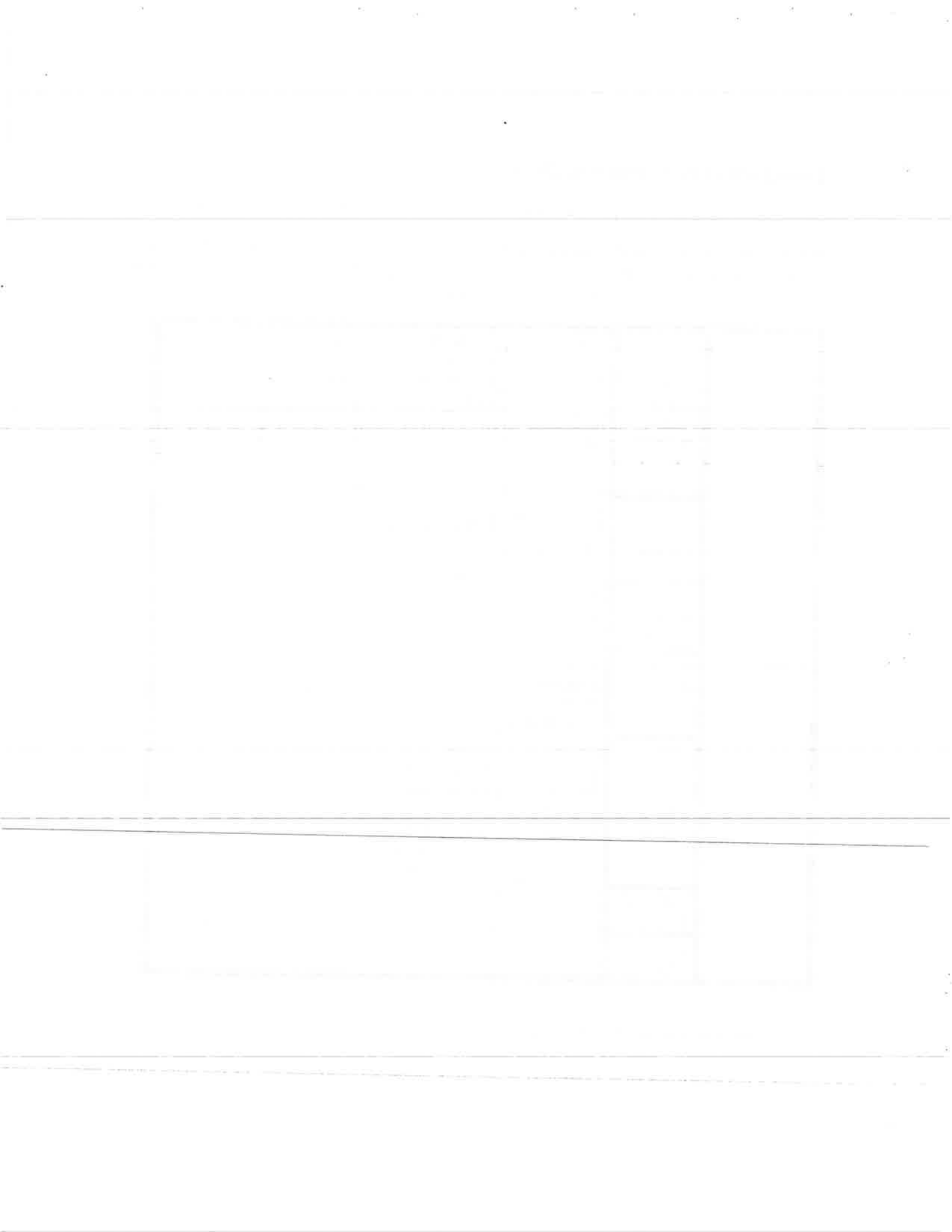
Emergency Phone tree Fan Out List

Each column calls out to the persons / departments designated in the next column to the right

In almost all cases the first emergency call or notification will come to the charge nurse on duty.
The charge nurse on duty will first and foremost call the Manager on call 705-941-8113 who will call the Administrator and send a mass text to the manager group

Administrator	EDOC Determine who is Plan A staff who is Plan B staff	DOC#1	Charge Nurse	RPNs	
			RAI , NP		
		DOC #2	BSO, RPNs	PSWs	
			IPAC		
	EHS Manager	Receiving sites			
		Contractors			
	EHS Assist Manager	Personal rooms staff member	HSK and Laundry Staff		
		Maintenance staff			
	Business office	Staff schedulers			
		Accts payable lead			
	Dietary Manager	Dietary supervisor 1	Cooks		
			Contractors		
		Dietary supervisor 2	Dietary aids		
		Activity manager	Activity aids Social worker Physio staff		
	Regional Director				
	Board Chair				

- Use Staff stat to reach as many employees at once



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.

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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 (Administrator/Executive Director or designate at the home level)
- Manager, Corporate Communications
- The Regional Director responsible for the impacted home
- The Long-Term Care (Nursing) Consultant for the home
- Director of Operations
- Director, SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)

Crisis Communications Process

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note <ul style="list-style-type: none"> Clarify the issue and Extendicare's position on the event including key messages 	Communications Department	<ul style="list-style-type: none"> Administrator/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:

- The Administrator/Executive Director of the impacted home
- Incident Manager (Regional Director)
- The Long-Term Care (Nursing) Consultant for the home
- Director of Operations
- Dietitian Consultant (if necessary)
- Senior Director, Operational Quality and Risk
- Senior Director, Corporate Quality and Risk
- Operations Vice President
- Manager, Corporate Communications
- Director, SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note <ul style="list-style-type: none"> Clarify the issue and Extendicare's position on the event including key messages 	Communications Department	Administrator/Executive Director Regional Director Ops/VP QRI Media
Media Q&As	Communications Department	Administrator/ Executive Director Regional Director
Bulletin <ul style="list-style-type: none"> To post in the home if deemed necessary 	Communications Department	Residents, Families, Staff

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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
- The Administrator/Executive Director of the impacted home
- Incident Manager (Regional Director)
- The Long-Term Care (Nursing) Consultant for the home
- Dietitian Consultant (if necessary)
- Operations Vice President
- Senior Director, Operational Quality and Risk
- Senior Director, Corporate Quality and Risk
- Manager, Corporate Communications
- Director, SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)
- Fire and Life Safety Consultant (if necessary)

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note <ul style="list-style-type: none"> Clarify the issue and Extendicare's position on the event including key messages 	Communications Department	Impacted homes Media Administrator/Executive Director Regional Director Ops/ VP QRI CEO
Media Q&As	Communications Department	Impacted homes
Bulletin <ul style="list-style-type: none"> To post in the home if deemed necessary by the IMS Team 	Communications Department	Impacted homes
RISK ALERT <ul style="list-style-type: none"> 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 Administrators If the ALERT is sent nationally it will also be posted on FLOW 	IMS Team (compiled by Communications Lead)	All homes at risk
Teleconference <ul style="list-style-type: none"> If deemed necessary by IMS Team 	IMS Team	All homes that received the RISK ALERT

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Crisis Communications Process

Product	Prepared By	Audience
<ul style="list-style-type: none"> Held by members of the IMS Team to provide further explanation of the RISK ALERT and the required actions 		
Updates <ul style="list-style-type: none"> 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
<ul style="list-style-type: none"> 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
- The Administrator/ Executive Director of the impacted home
- Incident Manager (Regional Director)
- The Long-Term Care (Nursing) Consultant for the home
- Senior Director, Operational Quality and Risk
- Senior Director, Corporate Quality and Risk
- Dietitian Consultant (if necessary)
- Operations Vice President
- Manager, Corporate Communications
- Director, SGP (if necessary)
- Environmental Consultant (if necessary)
- Infection Prevention and Control Consultant (if necessary)
- Fire and Life Safety Consultant (if necessary)

Communication Deliverables:

Product	Prepared By	Audience
Briefing Note <ul style="list-style-type: none"> Clarify the issue and Extendicare's position on the event including key messages 	Communications Department	All homes

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Crisis Communications Process

Media Q&As	Communications Department	All homes
Bulletin <ul style="list-style-type: none"> To post in the home if deemed necessary by the IMS Team 	Communications Department	All homes
RISK ALERT <ul style="list-style-type: none"> 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 Administrators If the ALERT is sent nationally it will also be posted on FLOW 	IMS Team (compiled by Communications Lead)	All homes at risk
Teleconference <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> To catalogue the communication requested and released regarding the issue The Briefing Note Any media requests (print, television, radio) 	Communications Department	IMS Team

Crisis Communications Process

Stage 2: Moderate		Communication Deliverables:	
Product		Prepared By	Audience
Communications Log <ul style="list-style-type: none"> To catalogue the communication released and request(s) regarding the issue such as: <ol style="list-style-type: none"> Briefing Note, Media Q&As, Bulletins Any media requests (print, television, radio) 		Communications department	IMS Team

Stage 3: High		Communication Deliverables:	
Product		Prepared By	Audience
Communications Log <ul style="list-style-type: none"> To catalogue the communication released and request(s) regarding the issue such as: <ol style="list-style-type: none"> Briefing Note, Media Q&As, Bulletins, Risk Alerts Updates, letters, any media requests (print, television, radio) Applicable meeting minutes Debrief results 		Communications Department	IMS Team
Final Update <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> To catalogue the communication released and request(s) regarding the issue such as: <ol style="list-style-type: none"> Briefing Note, Media Q&As, Bulletins, Risk Alerts, Updates, letters 		Communications Department	IMS Team

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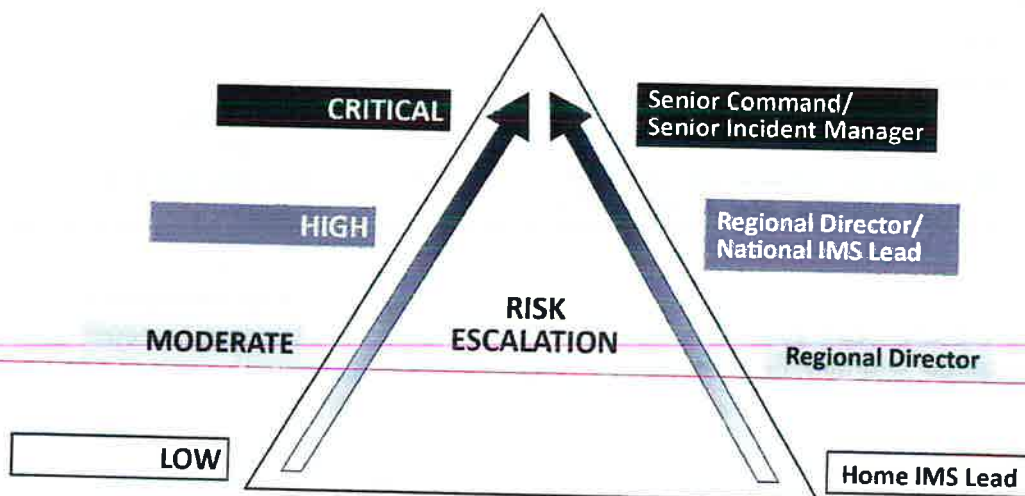
Crisis Communications Process

<ul style="list-style-type: none"> b. Any media requests (print, television, radio) c. Applicable meeting minutes d. Debrief results 		
Final Update <ul style="list-style-type: none"> • 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 <ul style="list-style-type: none"> • 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.

Crisis Communications Process

Risk Management Communications Process for Regional Directors

1. RD and Communications receive notification from home regarding potential issue.
2. RD determines level of risk based on 4 stages outlined in Crisis Communications Process.
3. RD 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 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 <ul style="list-style-type: none"> 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	

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Crisis Communications Process

Issue	IMS team Members (titles)	IMS Team Members
Equipment issues (e.g. lift malfunction, toaster fires, etc.) <ul style="list-style-type: none"> 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	
<ul style="list-style-type: none"> 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	
Product Alert/Recall <ul style="list-style-type: none"> 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 	Logistics Chief (representative from SGP)	
	Incident Manager	
	Communication Officer	
	Liaison Officer	
	Safety /Health and Wellness Officer	
	Information Technology Lead	
	Operations Chief	
Abuse/Assault/Intruder <ul style="list-style-type: none"> NO LOW OR MODERATE definition Reports of same or reports of intruders, alleged theft 	Planning Chief	
	Logistics Leader (representative from SGP)	
	Dietitian (to offer advice on what to replace the product with, if necessary)	
	Incident Manager	
	Communication Officer	
	Liaison Officer	
	Safety/Health and Wellness Officer	

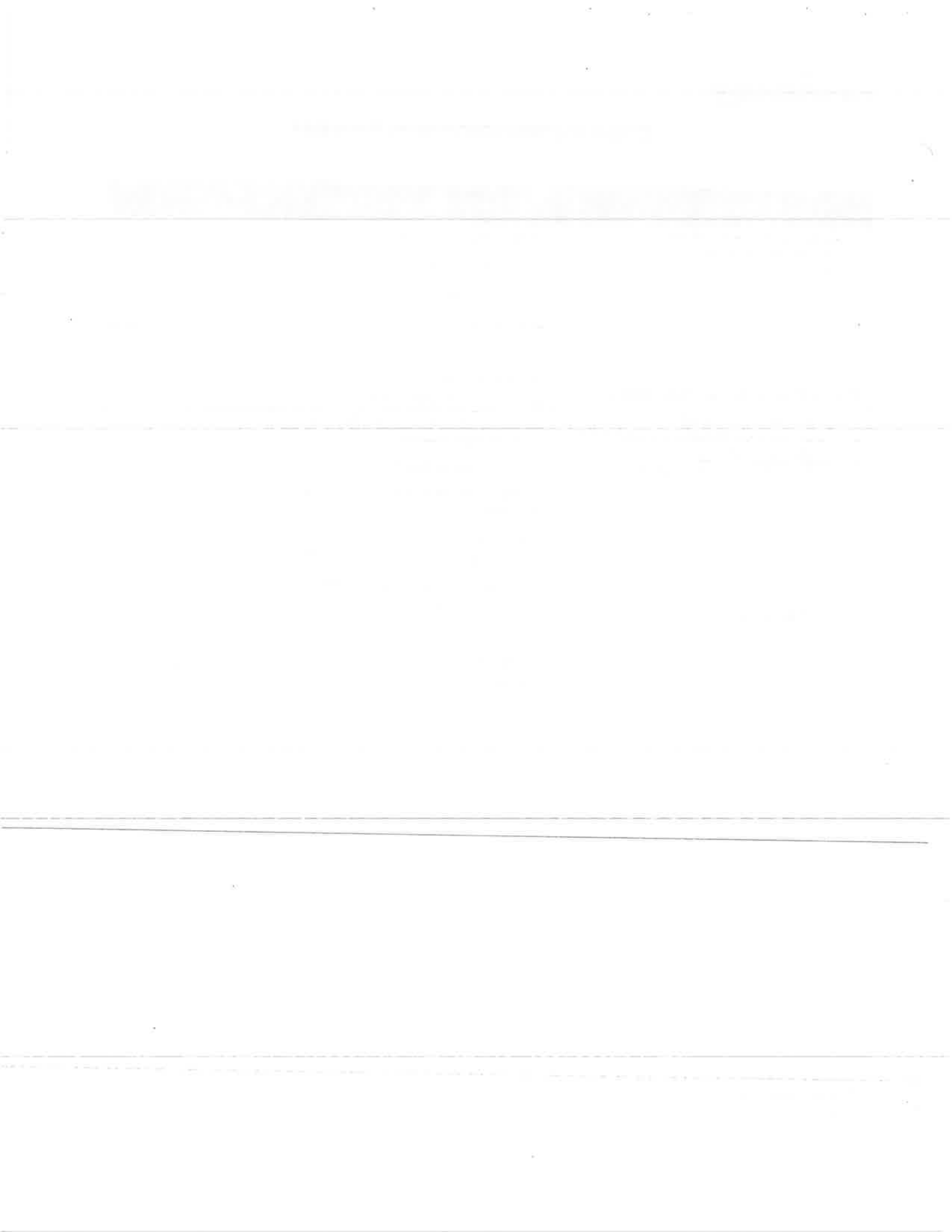
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Crisis Communications Process

Issue	IMS team Members (titles)	IMS Team Members
<ul style="list-style-type: none"> Moderate – alleged only, investigation in play High – actual 	Information Technology Lead	
	Operations Chief	
	Planning Chief	
	Logistics Chief	
Strike/Potential Labour Unrest <ul style="list-style-type: none"> Low: Excess sick calls Moderate: Information picket lines High: Work to rule Critical: No report to work 	HR Senior Lead	
	Human Resources Director	
	Administrator/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	



Crisis Communications Plan Checklists

Name: _____

Date: _____

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

_____	Public Information Officer designated:	_____
_____	Public Information Officer	_____
_____	Incident:	_____
_____	Incident Manager:	_____
_____	Senior Manager on location:	_____
_____	Administrator on location:	_____
_____	Briefed by Incident Manager	_____
_____	Type of incident	_____
_____	Services on location or involved in responding to the incident	
_____	<input type="checkbox"/> EMS: 9-1-1	
_____	<input type="checkbox"/> Police: 9-1-1	
_____	<input type="checkbox"/> Fire: 9-1-1	
_____	<input type="checkbox"/> Public Health	_____
_____	<input type="checkbox"/> Public Works	_____
_____	<input type="checkbox"/> Transit	_____
_____	<input type="checkbox"/> Other	_____
_____	Any injuries or deaths	_____
_____	General actions being taken	_____
_____	Issues of contention identified	_____
_____	Briefing with Administrator or Senior Manager	
_____	Spokesperson identified	
_____	Interview or press briefing time scheduled	_____
_____	Location for interview/briefing identified	_____
_____	Length of interview/briefing	_____
_____	Briefing notes	
	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	

Crisis Communications Plan Checklists

Key points to communicate:

- ☐ The priority is the health and safety of our residents, volunteers and staff
- ☐ All available resources required are being deployed
- ☐ We are working closely with emergency/allied agencies (identify key agencies)
- ☐ We are working to ensure that the incident will not reoccur

Other points:

--

Identify questions media may ask:

Q:	
A:	

Q:	
A:	

Briefing/press-release approved by: _____

- ☐ Copies of press release printed for distribution to press.
- ☐ Record all interviews, briefings, or other discussions with the media
- ☐ Administrator and Regional Director notified of any contentious issues that may be in the media

Incident Command Center Forms

Site Maps

Emergency Agreements

City of Sault Ste. Marie

THE HISTORY OF THE

REIGN OF

CHARLES THE FIRST

BY

JOHN BURNET

OF

THE UNIVERSITY OF OXFORD

IN TWO VOLUMES.

LONDON,

Printed by J. St. John, at the

PRINTERS, in the Strand.

1724.

MDCCXXIV.

Printed by J. St. John, at the

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