EMERGENCY rESpONSE PLAN

**THIS EMERGENCY RESPONSE PLAN IS ONLY A SAMPLE TEMPLATE. IT SHOULD BE REVIEWED AND UPDATED IN ITS ENTIRETY TO ENSURE THAT IT IS RELEVANT TO THE PARTICULAR CLINIC.**

*Templates are provided as an example and it is intended that a physician/manager/owner of a worksite will tailor it to their own operation to help meet the requirement under the OHS Act that they will ensure the health, safety and welfare of workers at their worksite.*

# Emergency Response Plan

The purpose of the Emergency Response Plan is to ensure the safety of employees and patients during an emergency. Summaries of the information provided in this section are posted in (location).

## Potential emergencies

The following emergencies have been identified, and procedures for their response are detailed in this plan.

* Fire
* Violence / Aggression
* Medical emergency
* Hostage
* Bomb threat / suspicious package
* Natural disaster
* Chemical spill / hazardous substance release
* Utility outage

## Emergency equipment

| **Item** | **Location** |
| --- | --- |
| First Aid Kit - Alberta No. XX kit  (specify which one according to section 1.5) | (e.g., in lunchroom, at nurses’ station) |
| Automated External Defibrillator (AED) |  |
| Eyewash bottle |  |
| SDS binder |  |
| Fire extinguisher ABC |  |
| Fire extinguisher ABC |  |
| Fire extinguisher ABC |  |
| Fire extinguisher ABC |  |
| Fire extinguisher ABC |  |
| Fire extinguisher ABC |  |
| Muster point |  |
| Panic alarm |  |
| Spill kits (biohazardous, chemical) |  |

## Emergency communications

|  |  |  |
| --- | --- | --- |
| **INTERNAL** | | |
| **Name** | | **Phone number** |
| Owner name | | Work:  Cell: |
| Office manager | | Work:  Cell: |
| Medical office assistant | | Work:  Cell: |
| **EXTERNAL** | | |
| **Type of service** | **Contact** | **Phone number** |
| Fire, police and ambulance |  | 911 |
| Building property manager | (name) | P: (enter phone number)  C: (enter phone number) |
| Sewer | City of Calgary | 311 |
| Electricity | (name) | P: (enter phone number) |
| Gas | (name) | 24-hour emergency  P: (enter phone number) |
| Poison | Poison Control | P: 403.944.1414 |
| Security alarm | (name) | P: (enter phone number) |
| Closest emergency care | (location) | P: (enter phone number) |

## Location of emergency services

| SERVICE | ADDRESS |
| --- | --- |
| Nearest Emergency Care (specify name) |  |
| Nearest Police Station (specify name) |  |
| Nearest Calgary Fire Department (specify name) |  |
| Ambulance (nearest) (specify name) |  |

## First aid requirements

Based on the criteria in the Alberta OHS Code 2009, the following first aid supplies and training are required:

| **Hazard Class (per OHS Code)** | **First Aid Supplies** | **First Aiders** |
| --- | --- | --- |
| Refer to OHS Code to determine your clinic’s first aid requirements | Refer to OHS Code to determine your clinic’s first aid requirements | Refer to OHS Code to determine your clinic’s first aid requirements |

First aid services, equipment and supplies must be readily available and accessible at all times.

First Aider requirements are considered met provided a physician is available to treat an injured or ill worker at all times.

First aid equipment and supplies must be maintained in a clean, dry and serviceable condition and clearly identified by a first aid sign.

Transportation of injured or ill individuals to the nearest healthcare facility will be provided by the {Determine who: A co-worker, a clinic manager?}.

## Fire protection requirements

All facilities must adhere to the *Alberta Fire Code*.

| Requirements | |
| --- | --- |
| Fire detection and suppression | Fire detection and suppression requirements will be determined by facility owners or property management companies. Maintenance of these systems is also their responsibility. |
| Fire extinguishers | Dry chemical (ABC type) fire extinguishers are required to be displayed conspicuously in work areas, hung from walls with unobstructed access. Maintenance of fire extinguishers is the responsibility of (determine who). |
| Fire doors | Fire doors must be kept closed at all times and access must not be obstructed. At the clinic, these include designated emergency exit doors, including stairwell entrances. |

## Fire wardens and captains

Fire Wardens and a Fire Captain are designated at the Clinic.

Wardens are responsible for ensuring their designated areas are clear during an evacuation and to assist anyone needing help during the evacuation.

The Fire Captain or one of the Fire Wardens will communicate with Calgary Fire Department personnel. The Fire Captain is responsible for communicating to employees an “all clear” when it is safe to re-occupy the building. If the Fire Captain is absent, the Fire Warden covering their quadrant will take on this responsibility. Each designated fire warden will have a backup warden for their quadrant. It is the main fire warden that is responsible for notifying their backup when they will be away from the office.

## Emergency training requirements

### General awareness for all employees

All employees need to be knowledgeable of the Emergency Response Plan and review it during new-hire orientation.

All Emergency Response Procedures will be reviewed with employees annually either through a drill or discussed as a monthly Safety Moment.

### Fire wardens

Fire Wardens will review their procedures annually.

### First aiders

First Aiders will receive first aid training; their certifications will be kept current.

## Fire and medical emergency drills

Annual fire and medical emergency drills will be performed to practice responses and identify areas for improvement.

Participation of all clinic employees is mandatory during a fire drill.

Annual drills at the Clinic will be coordinated by the Clinic or property management company.

## Safety moments

The following Emergency Response Procedures will be reviewed annually as Safety Moments at team meetings in accordance with the calendar below:

|  |  |
| --- | --- |
| **Emergency Response Procedure** | **Review Month** |
| Violence / Aggression | January |
| Hostage | March |
| Bomb Threat / Suspicious Package | April |
| Chemical Spill / Hazardous Substance Release | June |
| Natural Disaster | August |
| Utility Outage | October |
| Medical Emergency | November |

## Emergency response procedures

### The Muster Point is (designate muster point). If a fire warden is absent, the fire captain or another warden will direct others to ensure all quadrants are evacuated.

### Fire

| **Emergency Response** | **FIRE** |
| --- | --- |
| **Purpose** | To alert workers and others on site of the fire and the actions to be taken to ensure the safety and security of themselves, patients, visitors staff members, physicians and the facility. |
| **Activation** | Upon discovery of fire. |
| **Fire wardens** | **Quadrant 1 (describe location):**  Monday - Friday (day): (enter employee names)  Monday - Friday (evening): (enter employee names)  Weekend: (enter employee names)  (add in for each Quadrant) |
| **Fire captains** | (enter employee names) |
| **Muster point** | (designate muster point) |
| **Procedure** | **UPON DISCOVERING A FIRE:**  **Step 1:** Leave fire area immediately and close doors.  **Step 2:** Activate the fire alarm at the fire pull station.  **Step 3:** All occupants follow the evacuation order by leaving the building at the nearest exit. Do not use elevator. Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The employee attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 4:** Await the arrival of the Fire Department at the muster point and stay off roadways.  **Step 5:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 6:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 7:** Only the Fire Captain communicates with the Calgary Fire Department.  **Step 8:** When advised by the Calgary Fire Department, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building.  \*\*\*NOTE: Do not attempt to fight a fire unless it is VERY SMALL. Employees are never to endanger themselves.  **IF THE FIRE IS VERY SMALL AND AN ATTEMPT WILL BE MADE TO FIGHT THE FIRE:**  **Step 1:** Have an exit strategy planned or escape purposes.  **Step 2:** Locate a fire extinguisher.  **Step 3:** Use the fire extinguisher by following the PASS protocol:  P: Pull pin  A: Aim nozzle at base of Fire  S: Squeeze trigger  S: Sweep side to side, aiming at the base of the Fire, not directly into it.  **Step 4:** Report fire to your manager.  **Step 5:** (determine who) and Fire Captain to determine if fire department is to be called.  \*\*\*NOTE: Do not use more than one fire extinguisher. Leave immediately if the Fire cannot be contained.  **UPON HEARING A FIRE ALARM:**  **Step 1:** Leave area immediately and close doors.  **Step 2:** All occupants follow the evacuation order by leaving the building at the nearest exit (do not use the elevator). Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The employee attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 3:** Fire Wardens will sweep through their quadrants to ensure that all occupants have evacuated.  **Step 4:** Fire Wardens will bring the employee list for their quadrant and the Fire Captain will bring the visitor log sheet as they exit.  **Step 6:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 7:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 8:** Only the Fire Captain communicates with the Calgary Fire Department.  **Step 9:** When advised by the Calgary Fire Department, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building. |
| **Post incident actions** | **Step 1:** Fire Captain or Fire Wardens to secure the scene.  **Step 2:** Conduct a site inspection.  **Step 3:** Report incident to relevant regulatory bodies, if applicable.  **Report to OHS if:**   * Incident results in a death. * Incident results in a worker being admitted to hospital. * Incident involves an unplanned or uncontrolled explosion, fire or flood that causes or may cause a serious injury. * Incident involves the collapse or failure of any component of a building or structure.   **Report to WCB if:**   * Incident causes any injury or illness where there is lost time or the need to temporarily or permanently modify work beyond the date of the incident. * Incident results in death or permanent disability. * Incident causes a disabling or potentially disabling condition due to occupational exposure or activity (ex. mental health concern, poisoning, infection etc.). * Incident requires the need for medical/mental health treatment beyond first aid. * Incident causes the incurrence of medical aid expenses (ex. prescription medications, physiotherapy, dental treatment etc.).   **Step 6:** Affected employees/visitors/patients/contractors and witnesses to complete an Incident and Investigation form.  **Step 8:** OHS committee or representative to review incident information and discuss lessons learned.  **Step 9:** Make any updates to policies or procedures as needed. |
| **Drill / training** | **Frequency:** Annually  **Coordination:**  (determine who will organize the drill)  **Parties Involved:** All employees. |

### Violence / aggression

| **Emergency Response** | **VIOLENCE / AGGRESSION** |
| --- | --- |
| **Purpose** | To de-escalate a violent individual or alert workers and others on site to an incident of aggression or violence against themselves, a patient, visitor, staff member or physician. |
| **Activation** | Any employee experiencing violence or aggression or an employee witnessing violence or aggression against a patient, visitor, staff member or physician. Violence is the threatened, attempted or actual conduct of a person that causes or is likely to cause physical or psychological injury or harm and includes domestic or sexual violence. |
| **Procedure** | **Step 1:** Determine level of severity of the violence or aggression and if it is physical or verbal. To help determine, look for a weapon or actual physical harm happening.  **IF IT IS POSSIBLE TO ATTEMPT TO DIFFUSE THE SITUATION SAFELY**  **Step 2:**  Begin the aggression diffusion process:   * Awareness - Tune into your surrounding environment to prepare for the situation as an individual is escalating.   + Focus on your breathing.   + As the individual is escalating, their territorial space is widening; be aware of that and give them that space.   + As the individual is escalating, you need to decide if you will maintain eye contact or look away. Every individual and situation is different. * Containment - Look at specific strategies you can use to contain or diffuse the situation.   + Equalize your height with the individual, if possible.   + Turn sideways.   + Ask and use the individual’s name and tell them your name.   + Speak softly and slowly.   + Offer food, drink, etc.   + Validate and paraphrase to show you are attentively listening.   + Acknowledge their problem.   + Use “we” instead of “you”.   + Try to offer choices.   + Try to distract.   + Use silence.   + Ask questions.   + Set a limit such as “this conversation has gone too far and will now end”. * Problem Solving: begin to solve the individual’s problem once they have deescalated   + Ask “why”? * Closing: End the conversation   + Thank the individual, but acknowledge inappropriate behavior   If the individual continues to escalate at any point in the aggression diffusion process, use one of the three following methods to disengage:   * Politely end the conversation. * Set a limit such as “this conversation has gone too far and will now end”. * Leave in any way possible.   **Step 3:** Report the incident to (determine who).  **IF IT IS NOT POSSIBLE TO DIFFUSE THE SITUATION SAFELY**  **Step 2:** Attempt to evacuate if it is safe to do so.  **Step 3:** Warn others if possible.  **Step 4:** Quickly go to the nearest secure room; do not go to washrooms or common areas.  **Step 5:** Lock or barricade door.  **Step 6:** Turn off lights.  **Step 7:** Stay away from windows and doors.  **Step 8:** Take cover if available.  **Step 9:** Remain absolutely quiet.  **Step 10:** If unable to de-escalate, call 911 or direct someone to do so.  \*\*\*NOTE: No cellphone use unless necessary to communicate regarding the incident. Cellphones should be shut off or put on silent.  **Step 11:** Activate panic alarm if available.  **Step 12:** Await the arrival of the emergency services. |
| **Drill / training** | This will not be a drill. It will be presented as one of the monthly safety moments (determine who) during a team meeting.  **Frequency:** Annually  **Coordination:** (determine who) to provide a monthly emergency response safety topic to review.  **Parties Involved:** All employees. |

### Medical emergency

| **Emergency Response** | **MEDICAL EMERGENCY** |
| --- | --- |
| **Purpose** | To provide immediate medical attention to someone in a medical emergency. |
| **Activation** | Witnessing a person on the worksite experiencing a medical emergency. |
| **Procedure** | **Step 1:** Summon medical staff/first aiders on site.  **Step 2:** Call 911 to request an ambulance. Ensure that details regarding the location and nature of the emergency are clearly communicated to 911. If calling 911 is delegated, have that person report back to you to verify that the call was made.  **Step 3:** In the event of a serious injury, cordon off the area and do not allow anyone access or to handle, remove or operate any equipment in the area until the investigators are satisfied they have collected all necessary information.  **Step 4:** Await response from emergency services. Listen to any guided instructions provided by emergency services until they arrive at the scene. |
| **Drill / training** | **Frequency:** Semiannually (one monthly safety topic and one drill annually).   * Safety Moment: Annually, this emergency response will be presented as one of the monthly safety moments. * Drill: Annually.   **Coordination:**   * Safety Moment: (determine who) to provide a monthly emergency response safety topic for managers to review with their teams. * Drill: (determine who is responsible).   **Parties Involved:**   * Safety Moment: All employees. * Drill: First aiders. |

### Hostage

| **Emergency Response** | **HOSTAGE** |
| --- | --- |
| **Purpose** | To alert workers and others on site to an incident where a patient, visitor, staff member or physician is being held against their will by another individual or where someone is threatening violence with a weapon. |
| **Activation** | When an employee becomes aware that someone on the work site is being held hostage. |
| **Procedure** | **UPON HEARING OR WITNESSING A HOSTAGE SITUATION**  **Step 1:** Remove yourself from any danger by leaving the immediate area.  **Step 2:** Assist others in evacuating from the area of danger if safe to do so and prevent others from entering.  **Step 3:** Call 911 or activate panic button if available.  **Step 4:** Attempt to evacuate if it is safe to do so (use email, other technology, or discreet in-person communication depending on the situation).  **Step 5:** If you cannot evacuate, take measures appropriate to the circumstances:   * Warn others discreetly. * Quickly go to the nearest secure room; do not go to washrooms or common areas. * Lock or barricade door. * Turn off lights. * Stay away from windows and doors. * Take cover if available. * Remain absolutely quiet, * No cellphone use unless necessary to communicate regarding the incident. * Cellphones should be shut off or put on silent.   **Step 6:** Await the arrival of emergency services.  **UPON BEING TAKEN HOSTAGE**   * Remain calm, be polite, and cooperate with your captors. * DO NOT attempt escape unless there is an extremely good chance of survival. It is safer to be submissive and obey your captors. * Speak normally. DO NOT complain, avoid being belligerent and comply with all orders and instructions. * DO NOT draw attention to yourself with sudden body movements, statements, comments or hostile looks. * Observe the captors and try to memorize their physical traits, voice patterns, clothing or other details that can help provide a description later. * Avoid getting into political or ideological discussions with your captors. * Try to establish a relationship with your captors and get to know them. Captors are less likely to harm you if they respect you. * If forced to present terrorist demands to authorities, either in writing or on tape, state clearly that the demands are from your captors. Avoid making a plea on your own behalf. * Try to stay low to the ground and away from windows or doors if possible. |
| **Drill / training** | This will not be a drill. It will be presented as one of the monthly safety moments by managers during a team meeting.  **Frequency:** Annually  **Coordination:** (determine who) to provide a monthly emergency response safety topic.  **Parties Involved:** Allemployees. |

### Bomb threat / suspicious package

| **Emergency Response** | **BOMB THREAT / SUSPICIOUS PACKAGE** |
| --- | --- |
| **Purpose** | To alert workers and others on site of a bomb threat or a suspicious item discovered during a visual scan of the workspace and detail the actions to be taken to ensure the safety and security of themselves, patients, visitors, staff members, physicians and the facility. |
| **Activation** | Employee sees a suspicious package during an environmental scan or receives any form of communication that states there is a bomb at the worksite. |
| **Procedure** | **SUSPICIOUS PACKAGE**  **Step 1:** Do not handle, open, shake or smell the suspicious package.  **Step 2:** Gently place it on a flat surface; if possible, cover the package with a trash can, article of clothing, etc.  **Step 3:** Close the door to the area and evacuate the immediate area.  **Step 4:** Call 911.  **Step 5:** Inform (determine who).  **Step 6:** Anyone who handled the package should wash their hands thoroughly.  **Step 7:** Do not allow anyone to access the immediate area.  **Step 8:** Do not evacuate the building or activate the fire alarm unless directed to do so by the Fire Captain or a (determine who).  **Step 9:** Await the arrival of emergency services.  **EVACUATION ORDERED**  **Step 10:** Activate evacuation system.  **Step 11:** All occupants follow the evacuation order by leaving the building at the nearest exit (do not use elevator). Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The healthcare professional or PCN staff member attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 12:** Fire Wardens will sweep through their quadrants to ensure that all occupants have evacuated.  **Step 13:** Fire Wardens will bring the employee list for their quadrant and the Fire Captain will bring the visitor log sheet as they exit.  **Step 14:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 15:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 16:** Only the Fire Captain communicates with Emergency Services.  **Step 17:** When advised by Emergency Services, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building.  **BOMB THREAT**  **If received by phone:**  **Step 1:** Listen; do not interrupt the caller. Remain calm and courteous.  **Step 2:** Notify someone while the call is still occurring; have them call 911 and notify (determine who).  **Step 3:** Get as much information as possible, including exact wording of threat, location and description of device, when it is to detonate, why they placed the bomb, description and details of the caller’s speech and background noises.  **Step 4:** Await the arrival of emergency services.  **If received in the mail or by email:**  **Step 1:** Do not throw away, delete or respond.  **Step 2:** Call 911.  **Step 3:** Notify (determine who).  **Step 4:** Await the arrival of emergency services.  **EVACUATION ORDERED**  **Step 5:** Activate evacuation system.  **Step 6:** All occupants follow the evacuation order by leaving the building at the nearest exit (do not use elevator). Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The healthcare professional or PCN staff member attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 7:** Fire Wardens will sweep through their quadrants to ensure that all occupants have evacuated.  **Step 8:** Fire Wardens will bring the employee list for their quadrant and the Fire Captain will bring the visitor log sheet as they exit.  **Step 9:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 10:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 11:** Only the Fire Captain communicates with Emergency Services.  **Step 12:** When advised by Emergency Services, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building. |
| **Drill / training** | This will not be a drill. It will be presented as one of the monthly safety moments.  **Frequency:** Annually  **Coordination:** (determine who) to provide a monthly emergency response safety topic.  **Parties Involved:** All employees. |

### Chemical spill / hazardous substance release

| **Emergency Response** | **CHEMICAL SPILL / HAZARDOUS SUBSTANCE RELEASE** |
| --- | --- |
| **Purpose** | To alert workers and others on site of a chemical spill and hazardous substance release and detail the actions to be taken to ensure the safety and security of themselves, patients, visitors, staff members, physicians and the facility. |
| **Activation** | The discovery of a chemical spill or hazardous substance release. |
| **Procedure** | **CHEMICAL SPILL**  **Step 1:** If toxic or corrosive chemicals come into contact with your skin, flush the affected area with clean water; use an eyewash bottle for the eyes.  **IF THE SPILL IS LARGE:**  **Step 2:** Activate evacuation system.  **Step 3:** Fire Captain or Fire Warden will call the Fire Department at 911.  **Step 4:** If safe to do so, find SDS sheet to review chemical spill instruction and provide to emergency services.  **Step 5:** All occupants follow the evacuation order by leaving the building at the nearest exit (do not use elevator). Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The healthcare professional or PCN staff member attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 6:** Fire Wardens will sweep through their quadrants to ensure that all occupants have evacuated.  **Step 7:** Fire Wardens will bring the employee list for their quadrant and the Fire Captain will bring the visitor log sheet as they exit.  **Step 8:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 9:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 10:** Only the Fire Captain communicates with Emergency Services.  **Step 11:** When advi  sed by Emergency Services, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building.  **IF THE SPILL IS SMALL:**  **Step 2:** Using the chemical spill kit and personal protective equipment, contain the spill if safe to do so. The following equipment and supplies must be readily available:   * Paper towels or other absorbent material * Gloves * Safety eyewear * Gown or other protective clothing * Leak-proof container and/or garbage bags   **Step 3:** Clear everyone from the immediate area. Close the door to the affected area.  **Step 4:** Obtain and review the SDS for the material that was spilled.  **Step 5:** Wear appropriate personal protective equipment including gloves and safety eyewear.  **Step 6:** Do not allow the material to spread. Dike, block or contain the spread of the spill by using absorbing material.  **Step 7:** Contaminated waste, including absorbent materials, must be properly packaged in a leak-proof container; garbage bags (double bag) may be suitable.  **Step 8:** Clean up the spill area with a regular cleaning detergent.  **Step 9:** Ensure waste container is labeled as hazardous waste with the name of the material that was spilled. Do not dispose of as regular waste. Contact local authorities regarding disposal requirements (<http://www.calgary.ca/UEP/WRS/Pages/What-goes-where/Chemicals-Health-care.aspx>).  **Step 10:** Report the spill to (determine who).  **HAZARDOUS SUBSTANCE RELEASE**  **Step 1:** Evacuate the area immediately.  **Step 2:** Do not use matches or a lighter and avoid creating static electricity.  **Step 3:** Activate evacuation system  **Step 4:** All occupants follow the evacuation order by leaving the building at the nearest exit (do not use elevator). Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The healthcare professional or PCN staff member attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 5:** Fire Wardens will sweep through their quadrants to ensure that all occupants have evacuated.  **Step 6:** Fire Wardens will bring the employee list for their quadrant and the Fire Captain will bring the visitor log sheet as they exit.  **Step 7:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 8:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 9:** Only the Fire Captain communicates with Emergency Services.  **Step 10:** When advised by Emergency Services, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building. |
| **Drill / training** | This will not be a drill. It will be presented as one of the monthly safety moments.  **Frequency:** Annually  **Coordination:** (determine who) to provide a monthly emergency response safety topic.  **Parties Involved:** All employees. |

### Natural disaster

| **Emergency Response** | **NATURAL DISASTER** |
| --- | --- |
| **Purpose** | Notify workers and others on site of the need to follow directions to limit personal injury or exposure to a natural disaster to ensure the safety and security of themselves, patients, visitors, staff members, physicians and the facility. |
| **Activation** | Following a government or authorities-issued weather warning where there is risk of structural damage. |
| **Procedure** | **TORNADO WEATHER WARNING**  **Step 1:** Fire Captain or {determine who} to announce to all employees to take cover. Repeat message three times.  **Step 5:** All occupants to take shelter in an inner hallway or an interior room. If this is not possible, stay away from windows, glass walls, outside walls and doors. Take shelter under a heavy table or desk.  **Step 6:** Crouch down as low as possible, with your faces down and use your hands to cover your head.  **Step 7:** Follow any additional instructions provided by the Fire Captain or (determine who).  **SEVERE THUNDERSTORM WEATHER WARNING**  **Step 1:** Fire Captain or (determine who) to announce to all employees “Please take cover.” Repeat message three times.  **Step 5:** All occupants to take shelter in an inner hallway or an interior room. If this is not possible, stay away from windows, glass walls, outside walls and doors.  **Step 6:** Stay away from items that conduct electricity, such as corded telephones, appliances, sinks, bathtubs, radiators and metal pipes.  **Step 7:** Follow any additional instructions provided by the Fire Captain or (determine who).  **OTHER WEATHER WARNINGS**  There are multiple other weather warnings. In the case a weather warning other than Tornado or Severe Thunderstorm Warning is declared, the following steps will be followed:  **Step 1:** (determine who) to determine the severity and risk to employees.  \*\*\*NOTE: The responses and the respective communication will vary based on the circumstances. |
| **Drill / training** | This will not be a drill. It will be presented as one of the monthly safety moments.  **Frequency:** Annually  **Coordination:** (determine who) to provide a monthly emergency response safety topic.  **Parties Involved:** All employees. |

### Utility outage

| **Emergency Response** | **UTILITY OUTAGE** |
| --- | --- |
| **Purpose** | To notify staff of the need to follow directions to limit personal injury or exposure during a utility outage to ensure the safety and security of themselves, patients, visitors, staff members, physicians and the facility. |
| **Activation** | Following the loss of a utility (power, water or heat) at the work site. |
| **Procedure** | \*\*\*NOTE: In a power outage, emergency lighting should activate automatically.  **Step 1:** (determine who) to make determination if the building must be evacuated.  **NO EVACUATION NECESSARY**  **Step 2:** (determine who) to announce to all employees: “There is a power/heat/water outage. Please stay inside the building and await further instruction.” Repeat message three times.  **Step 6:** (determine who) to determine next steps based on the circumstance.  **IF DETERMINED THAT EMERGENCY SERVICES ARE NECESSARY**  **Step 7:** Fire Captain or (determine who) to call 911.  **Step 9:** Await the arrival of the Fire Department inside the building.  **Step 10:** Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 11:** Fire Captain or Wardens will relay information to Fire Department upon arrival.  **Step 12:** Do not leave the building until the Fire Captain has permitted you to do so.  **EVACUATION NECESSARY**  **Step 2:** (determine who) to activate evacuation system.  **Step 6:** All occupants follow the evacuation order by leaving the building at the nearest exit (do not use elevator). Follow any additional instructions provided by the Fire Warden and/or Fire Captain.   * The healthcare professional or PCN staff member attending to a patient or visitor will be responsible for their evacuation, if safe to do so. If unsafe, notify a Fire Warden/Captain. * Assist those with mobility issues if safe to do so. If unsafe, notify a Fire Warden/Captain.   **Step 7:** Fire Wardens will sweep through their quadrants to ensure that all occupants have evacuated.  **Step 8:** Fire Wardens will bring the employee list for their quadrant and the Fire Captain will bring the visitor log sheet as they exit.  **Step 9:** At the muster point, Fire Wardens will perform headcounts of their areas and report to the Fire Captain.  **Step 10:** Do not re-enter the building until the Fire Captain gives the “all clear”.  **Step 11:** Only the Fire Captain communicates with Emergency Services.  **Step 12:** When advised by Emergency Services, the Fire Captain will give communicate the “all clear” when it is safe to re-enter the building. |
| **Drill / training** | This will not be a drill. It will be presented as one of the monthly safety moments.  **Frequency:** Annually  **Coordination:** (determine who) to provide a monthly emergency response safety topic.  **Parties Involved:** All employees. |

## Post emergency response incident actions

Once any type of Emergency Response has been activated, the following post incident actions must be completed:

**Step 1:** Fire Captain to secure the scene.

**Step 2:** (Determine who) to conduct a site inspection.

**Step 3:** Report incident to relevant regulatory bodies, if applicable.

**Report to OHS if:**

* Incident results in a death.
* Incident results in a worker being admitted to hospital.
* Incident involves an unplanned or uncontrolled explosion, fire or flood that causes or may cause a serious injury.
* Incident involves the collapse or failure of any component of a building or structure.

**Report to WCB if:**

* Incident causes any injury or illness where there is lost time or the need to temporarily or permanently modify work beyond the date of the incident.
* Incident results in death or permanent disability.
* Incident causes a disabling or potentially disabling condition due to occupational exposure or activity (ex. mental health concern, poisoning, infection etc.).
* Incident requires the need for medical/mental health treatment beyond first aid.
* Incident causes the incurrence of medical aid expenses (ex. prescription medications, physiotherapy, dental treatment etc.).

**Step 6:** Affected employees/visitors/patients/contractors and witnesses to complete an Incident and Investigation form.

**Step 7:** Track incident in the Incident tracker.

**Step 8:** (Determine who)to review incident information and determine lessons learned.

**Step 9:** Make any updates to policies or procedures as needed.