



Fire Safety Plan - 2022

Union Villa Long-Term Care Home

4300 Highway 7, Markham, Ontario L3R 1L8

Version: 2022/07/11

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INTRODUCTION

The Ontario Fire Code, Section 2.8 requires the implementation of a FIRE SAFETY PLAN for this building/occupancy. The plan is to be kept in the building in the approved location.

The implementation of the Fire Safety Plan helps to ensure the effective utilization of life safety features in a building to protect people from fire. The required Fire Safety Plan should be designed to suit the resources of each individual building or complex of buildings. It is the responsibility of the owner to ensure that the information contained within the Fire Safety Plan is accurate and complete.

The Fire Protection and Prevention Act Part VII, Section 28, states that in the case of an offence for the contravention of the fire code, a corporation is liable to a fine of not more than \$100,000 and an individual is liable to a fine of not more than \$50,000 or imprisonment for a term not more than one year or both.

This official document is to be kept readily available at all times for use by staff and fire officials in the event of an emergency.

The fire safety plan approved location is 1/F Main Entrance, CSC desk.

Plan Submission Procedures

At least two (2) copies of the Plan (8½ x 11 format) must be submitted to the Chief Fire Official. Upon approval, one copy shall be returned to the author and one copy shall be retained by the Fire Department.

The Chief Fire Official is to be notified regarding any subsequent changes in the approved Fire Safety Plan.

BUILDING RESOURCESDISTRIBUTION LIST

| Copy No. | Department |
|-----------------|--|
| | 1/F CSC Desk (Main Entrance) |
| 1 | CEO office |
| 2 | Administration office |
| 3 | Environmental Support Services Manager office |
| 4 | 1/F Nurse Manager office |
| 5 | Director of Care office |
| 6 | Food Services Manager office and Main Kitchen |
| 7 | Buttonville Nursing Station |
| 8 | Cedar Grove Nursing Station |
| 9 | Victoria Square Nursing Station |
| 10 | Box Grove Nursing Station |
| 11 | Union Mills Nursing Station |
| 12 | |
| 13 | Environmental Support Services Supervisor office |
| 14 | Maintenance Workshop, Union Villa |
| | Maintenance Workshop, Wyndham Gardens |
| 15 | Manager, Unionville Community Centre for Seniors office 17 Anna Russell Way |
| 16 | Chief Financial Officer office |
| 17 | Manager, Human Resources office |
| 18 | Chairpersons of JOHS Committee |
| 19 | Recreation office |
| 20 | Manager, Adult Day Program office |
| 21 | Housing Manager office (Wyndham Gardens) |

BUILDING DESCRIPTION

Union Villa, at 4300 Highway 7 in Unionville, is a three-storey, non-combustible building. The building operates and is staffed on a 24-hour, seven day a week basis.

The 160 residents live in five (5) care units, located on the main and two upper floors. Each care unit is referred to as a “Resident Home Area”; one Resident Home Area is located on the main floor and two Resident Home Areas are on each of the two upper floors.

The physical design, layout and structural features of the building at time of completion fully meet compliance with the relevant provincial legislation, including the *Long Term Care Homes Act*, Ontario Fire Code and Ontario Building Code requirements.

Main Floor:

The main floor consists of:

- A portion of the original building.
 - This original building is not sprinklered and has identified de-commissioned equipment in the furnace and storage rooms.
 - The de-commissioned service equipment is identified in those rooms, and access doors leading to service rooms are also identified.
- One “Resident Home Area” with accommodation for 32 residents, made up of:
 - 20 one bed rooms, each with a self-contained washroom;
 - 12 one bedrooms that share a washroom between two rooms;
 - A dining room for 32 people with an adjoining servery that is open at the respective meal times and Common space dedicated for the 32 residents on the “Resident Home Area”, including an activity room, a lounge and a multi-program room;
 - Central tub and shower rooms for the 32 residents on the “Resident Home Area”;
 - Work areas for staff (Nursing Station);
 - Utility/storage rooms and a housekeeping closet for use by the respective department staff, public washroom and storage room; and
 - Personal laundry room located on the West side of the building.
- Administration offices for some of the management team and the business office staff.
- The staff lounge and staff change areas.
- The laundry room for cleaning of linens and residents’ personal laundry (central for the building).
- The receiving and garbage disposal areas for the building.
- Front reception, lobby and common areas for use by all 160 residents of the facility.
- The main kitchen facilities located at the North East side of service corridor provide food services for the residents.

- Day Guest Program area utilized by approx 15-20 (Max 20) day clients and is staffed. This area is accessible by an Exterior door situated south at the East Parking lot and from within the building.

The main floor “Resident Home Area” accommodates residents with dementia and/or cognitive impairments, and is thereby equipped with the necessary security features to control access and egress from the unit. In this manner, the residents at risk of exiting are prevented from leaving unnoticed from the Resident Home Area.

The front entrance on the main floor is the access point for emergency response services (ambulance and fire department).

Second and Third Floors:

The second and third floors are identical in design. Each floor is split into two “Resident Home Areas”, with each “Resident Home Area” accommodating 32 residents.

Each “Resident Home Area” on each floor has:

- 20 one-bedroom units, each with a self-contained washrooms;
- 6 two-bedroom units that share a washroom;
- A dining room that accommodates all of the residents on the Resident Home Area;
- A shared servery with the other dining room on the floor;
- An activity room, a lounge, tub and shower rooms, utility/storage rooms and a housekeeping closet, public washroom and storage room;
- Work areas for staff (Nursing Station);
- Personal laundry located on the West side of the building in Cedar Grove and Box Grove; and
- Central tub and shower rooms.

Outdoor Courtyard and Patio Areas:

Outdoor areas are designed in a manner that recognizes the mobility needs of residents using wheelchairs and walkers.

There is a central courtyard, as well as terraces from each upper floor, with appropriate barrier-free features to support wheelchair access. The main courtyard is equipped with wanderguard features, a call-bell and storage shed.

Barrier-free wheelchair access is provided at main outside exits, including entrance to the courtyard and balcony space.

FLOOR PLANS

See Attached.

BUILDING AUDIT

Fire Alarm System

1. The Fire Alarm System is a zoned two-stage, addressable, non-coded system as defined in the Ontario Building Code.
2. FIRST STAGE (ALERT STAGE) OF THE ALARM is a slow repetitive ringing/sounding throughout the building.
3. SECOND STAGE (ALARM STAGE) OF THE ALARM is a rapid temporal ringing/sounding throughout the building.
4. The fire alarm system is activated by one of the following mechanisms:
 - Automatically by the operation of a fire detector.
 - Automatically by the operation of a sprinkler flow switch.
 - Manually by pulling the lever of a pull station.
 - Automatically by the operation of a smoke detector.
 - Automatically by the Kitchen Suppression system.
5. When the fire alarm is activated by one of the above, the following will occur:
 - Signal in the building will sound an alert signal.
 - Annunciation panels will identify the location where the alarm originated.
 - Roof top unit fans will be automatically turned off as it is a smoke controlled system.
 - Elevators will go to the main floor.
 - Hold-open devices for fire doors will de-energize closing all doors.
 - Signal will be automatically transmitted to the fire alarm system monitoring station and the Fire Department.
6. The alert signal will continue to sound indefinitely until it is manually keyed into the Alarm Stage at a pull station, or if an additional fire alarm device is activated, sending it into alarm.
7. Trouble on the system will be indicated on the annunciation panels when a condition that is not normal occurs, such as power failure, short circuit, faulty fuse, broken wire, or other breakdown.
8. The keys to manually initiate 2nd stage evacuation are located at Front Desk and all Nursing Stations (Adjacent to Annunciation panel).
9. Carbon Monoxide detectors are connected to the Fire Panel and cause a trouble condition upon activation. Carbon Monoxide detectors are located in Main Kitchen (N.E. service corridor), Laundry room (N.E. service corridor), Mechanical

room (N.E. service corridor) and Mechanical room located in New Building Service area on the North East side of the ground floor.

Occupancy Type: B2-Care & Treatment

Occupant Load: 240 (160 Residents + 80 staff on average)

ACCESS:

Designated Fire Route: Yes

Nearest Municipal Hydrant Location: Two (2) directly across road on South Side of Highway #7

Private Hydrants: Yes **Location:** Near Front Entrance along Fire Route at East Side

Lockbox: Yes **Location:** Entrance

Heating: Natural Gas

Main Gas Shut-off: North East Staff Entrance

Main Electrical Shut-off: Main Electrical Room, East Corridor

Main Domestic Water Shut-off: 1/F Mechanical Room

Fire Alarm System: Two Stage

Make: Mircom

Model: QX-5000 Series

Main Panel Location: Electrical Room(Ground floor)

Annunciation Panel Location: Main entrance vestibule & all Nursing stations.

Fire Alarm Description: (2) Two Stage, Inhibit device which upon pressing “all call” will beep 3x before being able to relay a message. When message is being delivered audible devices turn off until message is complete.

Sprinkler System: Wet Type

Connected to the Fire Alarm System: Yes

Location of Sprinkler Room/Shut Off Valves:

Mechanical Room/New Building

2nd and 3rd Floor Servery: Above Dishwasher (in ceiling)

Standpipe System: Yes (in old section)

Fire Department Connection: Yes Description: **Siamese Connections**

Location:

- Beside Main Entrance (Sprinkler)
- By Maintenance Doors - North East Corner (Standpipe)

Fire Pump: No

Fixed Extinguishing System for Commercial Cooking Equipment: Type K

portable

Type: Wet Chemical

Connected to F/A System: Yes

Fuel Source: Natural Gas

Fuel Shut Off for Appliances: In Kitchen

Type K Extinguisher: West Side of Main Kitchen

Other Extinguishing Systems:

Portable Fire Extinguishers: Yes

Portable Fire Extinguishers: Type: ABC (Refer to schematic drawings)

Wet Chemical Guardian III: Located in Adult Day Program above stove in kitchen.

Emergency Lighting: Yes Location: Throughout Building

Emergency Power: Generator

Diesel *Emergency generator will provide emergency power for at least 1 hour

Fuel Supply Location: North East (outside Maintenance Room)

Transfer Switch Location: Enclosed Generator Room (Behind Generator)

Equipment Powered by Generator:

- Emergency Lights
- Elevators
- Designated circuits and red receptacles
- Fire alarm system

Electromagnetic Locking Devices and Hold Open Devices

Yes (Manual release switch location): At Reception Desk

Proper Signage

Yes

Exits: Refer to schematics for type and location of exits

Elevators:

Firefighter (FF) Elevator red helmet designation: Yes

Automatic Recall: Yes

Manual Recall: Yes

Manual Recall Switches: Yes/ Location: Main Floor (Elevator Landing)

Total Number of Elevators: 2

Total Number of FF Elevators: 0

FF Elevator Location: N/A

Floors Served by Elevator: 3

Location of recall/operating keys: Firebox (entrance)

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RELOCATION AGREEMENTS

PURPOSE:

1. To ensure agreements with other facilities are negotiated and signed.
2. To ensure that agreements are reviewed a minimum of once yearly.

PROCEDURE:

1. Unionville Home Society has signed agreements with a number of facilities in the event that Residents have to be relocated.
2. These agreements are attached.
3. The Administrator is responsible for the review of these agreements.

CURRENT AGREEMENTS:

RELOCATION SITES/CONTACTS FOR EMERGENCY SITUATIONS

| Name of Facility | General Location | Phone Number | Administration | Accommodation (Number of Residents) | Written Agreements (yes/no) |
|-------------------------|-------------------------|---------------------|-----------------------|--|------------------------------------|
| Mon Sheong | Richmond Hill | 416-977-3762 | Stella Ng | 20-28 | Yes |
| Parkview Public School | Unionville | | Camille Logan | 162 | Yes |
| Laidlaw Transportation | Markham | 905-294-5104 | Gary Goslin | 162 | Yes |
| Markhaven | Markham | 905-294-3322 | Dian Cairns | 30 | Yes |
| Parkview Home | Stouffville | 905-640-1911 | Solange Taylor | 30 | Yes |

HUMAN RESOURCES

Planning Assumptions:

1. On the average, the numerical status of residents in Union Villa is as follows:
 - (1) 70 residents requiring heavy nursing care (assistance to transfer).
 - (2) 70 residents requiring direction and guidance (use assistive device).
 - (3) 20 mobile residents, unable to take direction.
 - (4) 15-20 (20 max) day guests, mobile (day time only).

2. On average, the number of staff in Union Villa is as follows:
 - (1) Weekdays – 58 on day shift, 20 on evening shift, 9 on night shift.
 - (2) Weekends – 19 on day shift, 20 on evening shift, 9 on night shift.

3. The number of persons who can be accepted during an expansion of services (reception from another location) is **30 for a maximum of three days.**

4. The Fire Safety Plan is based on the Emergency Code system as outlined in EPM A-03.

During an emergency situation, the Administrator shall establish a Crisis Management Team composed of:

 - a) CEO, New Unionville Home Society
 - b) Chief Financial Officer
 - c) Administrator
 - d) Director of Care
 - e) Assistant Director of Care
 - f) Manager, Human Resources
 - g) Nurse Manager on Duty
 - h) Environmental Support Services Supervisor
 - i) Food Services Manager
 - j) Other persons as required

5. Responsibilities: The responsibilities of the Crisis Management Team are:
 - a. Coordinate the emergency situation.
 - b. Make the decision regarding evacuation (in conjunction with Police & Fire authorities).
 - c. Notification of key personnel.
 - d. Liaison with outside agencies (Provincial, York Region, Town of Markham).
 - e. Request support from outside agencies.
 - f. Media communications.
 - g. Make the decision regarding the acceptance of evacuees from another facility.

6. Command Centre: The Crisis Management Team shall operate from the Command Centre, located in the Administrative Area at the front of Union Villa.

The alternate Command Centre, in the event of a total evacuation of Union Villa, is located in the Office of Public Health, Shops of Unionville, across Highway 7 from Union Villa.

ORGANIZATION STAFFING STRUCTURE

Management and administrative staff and front line staff are assigned to work in specific departments, with each department having dedicated roles and functions. Every department has a supervisor, manager, or Director who reports to the Administrator. The Administrator is the lead person in charge of the building.

The different departments are as follows:

Nursing: Includes Registered Nurses, Registered Practical Nurses, Personal Support Workers and Health Care Aides. This is the largest department, with staff assigned to one of three shifts (days, evenings and nights) to provide 24-hour care coverage on all five Resident Home Areas. The Director of Care supervises this department.

Dietary: Cooks and Dietary Aides work for a contracted service under the supervision of the Food Services Manager.

Housekeeping: Housekeeping Aides and General Maintenance/Housekeeping staff work for the Supervisor, Environmental Support Services.

Maintenance: Maintenance staff members work all three shifts and provide 24-hour coverage reporting to the Supervisor, Environmental Support Services.

Laundry: A Laundry Aide works evenings and reports to the Supervisor, Environmental Support Services.

Recreation: Recreation staff members are assigned by floor and report to the Recreation Supervisor.

Day Guest: Approximately 15-20 day guests, 4-5 staff. Report to Adult Day Program Manager.

Administration: All administration staff, including Directors, report to the CEO.

In addition to the regular complement of facility staff, there are other health care disciplines who are not employed by the facility, but do visit on a regularly scheduled basis to provide services. This includes physicians for medical care, consulting dietitian, therapy services providers, several visiting clinic professionals, etc. The home also has a volunteer roster, with volunteers assigned to different activities and areas in the building.

STAFF SCHEDULE:

| STAFF | DAY SHIFT (Mon-Fri) | DAY SHIFT (Sat-Sun) | EVENING SHIFT (Mon-Fri) | EVENING SHIFT (Sat-Sun) | NIGHT SHIFT (Mon-Fri) | NIGHT SHIFT (Sat-Sun) |
|--------------------------------------|------------------------------------|------------------------------------|--|--|--------------------------------------|--------------------------------------|
| CEO | 1 | 0 | 0 | 0 | 0 | 0 |
| C-level/Directors | 3 | 0 | 0 | 0 | 0 | 0 |
| Admin/Office Personnel | 9 | 0 | 0 | 0 | 0 | 0 |
| Reception (Cust. Service) | 1 | 1 | 1 | 1 | 0 | 0 |
| Director of Care | 1 | 0 | 0 | 0 | 0 | 0 |
| ADOC/Nurse Manager RN | 1 | 1 | 1 | 1 | 1 | 1 |
| Unit Supervisors RPN | 5 | 5 | 5 | 5 | 1 | 1 |
| PSW | 18-20 | 18-20 | 17 | 17 | 6 | 6 |
| Recreation Supervisor | 1 | 0 | 0 | 0 | 0 | 0 |
| Recreation Staff | 3 | 2 | 1 | 2 | 0 | 0 |
| Food Services Manager | 1 | 0 | 0 | 0 | 0 | 0 |
| Dietician | 1 | 0 | 0 | 0 | 0 | 0 |
| Dietary Staff | 7-12 | 7-12 | 6 | 6 | 0 | 0 |
| Environmental Services Supervisor | 1 | 0 | 0 | 0 | 0 | 0 |
| Maintenance Personnel | 1 | 1 | 1 | 1 | 1 | 1 |
| Housekeeping Staff | 5 | 5 | 1 | 1 | 0 | 0 |
| Laundry Staff | 1 | 1 | 1 | 1 | 0 | 0 |
| TOTAL: | 57 | 48 | 32 | 35 | 8 | 8 |

KEY EMERGENCY CONTACTS

Business Building Name: Union Villa
Address: 4300 Highway #7, Unionville, ON
Business Phone: 905-477-2839 or 904-477-2822
Business Owner: Unionville Home Society
Address: 4300 Highway #7, Unionville, ON
Postal Code: L3R 1L8
Phone Number: 905-477-2839 or 905-477-2822

After Hour Contacts (24 hour telephone numbers):

Nurse Manager in Charge
Phone: 905-477-2822 (ext. 4421)

Fire Alarm Monitoring Company: Pyronet Phone: 416-255-2116
Sprinkler Monitoring Company: Pyronet Phone: 416-255-2116
Fire Protection System Maintenance Co.: Accurate Fire Protection, Phone: 905-532-0014

DISASTER PLAN RESPONSIBILITIES

| AREA | RESPONSIBLE PERSON |
|---|---|
| MAIN COMMAND STATION / EVACUATION BINDER | ADMINISTRATOR & CRISIS MANAGEMENT TEAM |
| DISASTER AREA | ENVIRONMENTAL SERVICES SUPERVISOR |
| TRIAGE COMMAND POST (FOUR STAFF) | ASSISTANT DOC/NURSE MANAGER UNIT SUPERVISOR UNIT SUPERVISOR RECREATION STAFF |
| EMERGENCY MEDICAL SUPPLIES | UNIT SUPERVISOR |
| TRANSFER TAGS | CUSTOMER SERVICE |
| FOOD | DIETARY MANAGER |
| LINENS | LAUNDRY AID |
| FANOUT CONTACT | CUSTOMER SERVICE |
| RESIDENT AND STAFF LISTS | CUSTOMER SERVICE |

EMERGENCY INTERNAL CONTACTS

| | |
|---------------------------------|-----------------------|
| CEO | Abby Katz Starr |
| Administrator | Terry Collins |
| Director of Care | <i>Silvia Raposso</i> |
| Manager, Environmental Services | Sameer Singh |

NOTE: Phone numbers of the above individuals and all available staff, volunteers and Board Members are located in the Evacuation Binder and in the In-Charge Manual.

FAN OUT SYSTEM

This is an extract of Policy EPM A-04 of the Emergency Preparedness Plan.

Policy:

A systematic process shall be in place to contact staff members quickly in an emergency situation. This process is known as the "Fan Out System" and uses a phone-tree called the "Fan Out List."

Each department manager shall have a designated group of staff members who may be contacted in an emergency situation.

Procedure:

All department heads/managers are to receive a designated section of the staff phone list to contact in case of an emergency.

The designated corporate support person shall update the Fan Out List monthly and redistribute to department heads/managers with each change. Department heads/managers are responsible to advise Human Resources when there are changes to the Fan Out List.

All Department Heads/Managers are to keep the Fan Out List in an appropriate place, one at their residence, the other to be carried with them.

The Fan Out List, which includes a list of staff who are able to respond in an emergency, is posted at the Customer Service Centre in the evacuation binder. Copies shall also be kept in the Nurse Manager Office.

In a crisis situation, the Administrator/delegate is responsible for initiating the Fan Out System. In the absence of the Administrator/delegate (i.e., off-shift crisis), the Nurse Manager may initiate the Fan Out System.

When the Fan Out System is initiated, calls shall include the following information:

- a. Your Name.
- b. The fact that the Fan Out System is being initiated.
- c. Request the individual to make their assigned calls.
- d. Request the individual to report to Union Villa when completed.
- e. Request the individual bring two (2) blankets and a working flashlight, if possible.

Example phone call: "Hello {individual's name}, this is {your name} from Union Villa. We are initiating our Fan Out System because we have a loss of power and the backup

generator is not working. Please make your assigned calls and report to Union Villa. Please remember to bring two (2) blankets and a working flashlight, if possible.

The Fan Out System shall be tested on an annual basis. Tests shall be performed using the following language to initiate the Fan Out System:

“This is a TEST of the Fan Out System. Please advise how long it will take you to return to Union Villa. You do not have to report to Union Villa. Please note the time you were contacted and make your assigned call(s).

A record of the responses shall be kept during tests of the Fan Out System and reviewed by the Administrator and Crisis Management Team following the test. Debriefings shall be conducted as necessary.

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FIRE SAFETY AND EMERGENCY RESPONSE PREPAREDNESS

STAFF TRAINING

Policy:

1. The general orientation program shall provide instructions on fire drills and emergency procedures.
2. There shall be a test to ensure that staff has understood the instructions given.
3. Specific in-services shall be done throughout the year on emergency procedures.

Procedures:

1. All new employees shall be given a minimum four-hour orientation including fire safety and other emergency training. This training shall be repeated at least annually and where required.
2. During the general orientation program, staff shall be taught fire drill procedure following the **R.A.C.E.** process.
3. Staff shall be shown the location of pull stations, fire extinguishers and fire hose cabinet on each unit/department.
4. Designated staff shall be shown the annunciation panel with an explanation on its use. They shall be shown the location of all annunciation panels. Paging protocol shall be reviewed. Tests shall be given and reviewed during the session.
5. Evacuation and emergency lifts and carries shall be reviewed but not practiced at this time (see in-service training). All employees receive education of the use of the Emergency Evacuation Chairs.
6. All Emergency Codes shall be reviewed and each staff member shall be given a laminated Universal Code Card to be kept on their person (with their nametag/swipe card).
7. All staff shall review **R.A.C.E.** following the monthly fire drill on each shift.
8. Employees shall review **R.A.C.E.** and the Emergency procedures during their annual performance review.
9. Supervisor, Environmental Services maintains a record of attendance at fire drills and fire alarms.
10. Human Resources maintains records of attendance at in-service education sessions.

11. Nurse Managers, who are in charge of the building in the absence of the Administrator and the Director of Care, are trained in the operation of the fire system.

EMERGENCY PROCEDURES FOR VISITORS

Emergency procedures signage shall be affixed to the wall at all fire alarm pull stations and in elevator lobbies.

IN CASE OF FIRE

Upon Discovery of Fire:

- R.A.C.E. (Remove, Alarm, Contain, Extinguish)
- Leave fire area immediately and close doors
- Sound Fire Alarm
- Visitors to wait for further instructions from Unit Supervisor

Upon Hearing Fire Alarm:

- Do Not Use Elevator

If Intermittent Signal:

- Prepare to leave the building
- Listen to announcements/instructions

If Continuous Signal:

- Leave Building via nearest Exit when it is required to do so
- Close doors behind you
- Do not use elevator

REMAIN CALM

STAFF RESPONSE TO FIRE EMERGENCY

CODE RED SUMMARY

Policy:

CODE RED shall be used:

1. To alert all occupants when a fire is discovered.
2. When there is a suspicious event that may lead to a fire (i.e., smoke, smelling something burning).
3. Upon activation of Fire Alarm System.
4. When conducting fire drills.

Procedures:

GENERAL INSTRUCTIONS FOR ALL STAFF:

At the beginning of your shift, ensure that you:

- Know the location of the fire alarm pull stations and fire extinguishers
- Know the exit locations
- Know what to do in the event of a fire
- Know how to report a fire
- Ensure that smoking policies are strictly adhered to
- Keep all fire and exit doors closed (except those on “hold-open devices”) and unobstructed
- Keep doorways and corridors unobstructed and hazard-free.

SUSPECTED FIRE OR SMOKE – REMAIN CALM

If the door is shut to a room where smoke or fire is suspected to be located, the staff person shall do the following:

- If there is the smell of smoke, the staff person must immediately activating the fire alarm at the nearest pull station and remove resident from the area. The staff person is not to look for the source of the smoke before sounding the fire alarm.
- Feel the door (Using the back of your hand) for heat-check for smoke under the door.
 - If hot upon touch, DO NOT OPEN the door.
 - If the door is not hot, open slowly to check the extent of the fire. If it is safe to enter, do so, but only for rescue purposes.

IF YOU DISCOVER SMOKE OR A FIRE – REMAIN CALM**INITIATE R.A.C.E.**

- R – Remove** Remove residents from the immediate area while calling out “CODE RED” and location.
- A – Activate** Activate the fire alarm pull station
- C – Contain** Close all remaining doors and windows in the fire zone
- E – Extinguish** If the fire is small and you know you can put it out quickly, do so

R - REMOVE

Remove anyone in danger if it is safe to do so. Call for help.

Evacuate the room where the fire is, the room on either side and the room opposite. Check under the bed (resident may be hiding), the bathroom and closet, if it is safe to do so.

A - ACTIVATE

Pull the nearest fire alarm pull station or delegate someone to do this.

If fire is on a Resident Home Area, the Unit Supervisor is responsible for phoning the fire department 911 & reporting the “Code Red” and its location within the building via the overhead paging system located at the Nursing station.

If fire is in common area, Customer Service Coordinator calls 911 & pages Code Red.

After hours (20:00 – 8:00) the phone call and page is done by the Nurse Manager.

C – CONTAIN

Check all doors for heat, using the back of your hand. Check all tub rooms.

Open the evacuation alert flap on the door of the evacuated room and secure by closing door.

Make sure that all doors and windows are closed in the fire zone.

Except for those rooms that must be evacuated, residents may remain in their rooms.

Place wet towels where needed to control smoke.

E – EXTINGUISH

Extinguish the fire if it is safe to do so, with an assistant – NEVER ALONE.

Always make sure you have an exit.

IF YOU HEAR THE FIRE ALARM

1. Return to your assigned work area if safe to do so. Do not use the elevator.
2. Close all doors and windows.
3. Determine the location of all residents. Reassure residents and visitors that the situation is under control.
4. Ensure that corridors and exits are clear.
5. Listen to the announcements over the paging system. Prepare to evacuate if directed to do so.
6. Do not use telephones unless essential.
7. The alarm system has two bells.
 - First stage – alert signal at 20 times per minute
 - Second stage – evacuation alarm at 60 times per minute. This bell means initiate vertical evacuation by listening and following instructions. Nurse Manager or Environmental Manager to activate 2nd stage alarm when necessary and calling “Code Green” (horizontal evacuation) and “Code Green Stat” for a vertical evacuation.

COMMUNICATIONS

The Nurse Manager on duty is responsible for calling 911 or delegating such.

After the alert signal has sounded, Customer Service (on site 8:00 a.m.- 8:00 p.m.) shall make the following announcement: (If customer service representative is not onsite, Nurse Manager shall make announcement)

“The first stage fire alarm has been activated inIt is presently being investigated. Please stand by for further information.”

Once the “All Clear” has been determined by the Fire Department or the person in charge (for a fire drill), the unit supervisor shall make the following announcement three times: **“Code Red All Clear”**

EMERGENCY RESPONSE - EVACUATION

Policy:

1. There is a process in place to ensure orderly, safe and expedited evacuation of Residents and staff in the event of an emergency/disaster.
2. All employees are responsible and accountable for understanding and demonstrating ongoing competence in the order of evacuation in the event of a disaster/emergency.
3. Evacuation Alert flaps are used to indicate to all that a room has been evacuated.

General Procedure:

When evacuating residents:

1. The Nurse Manager must be aware of the physical capabilities and limitations of the staff on his or her assigned Resident Home Area.
2. If certain staff members can only perform limited lifting, they are to provide assistance to those staff members who can lift without difficulty.
3. When in the process of moving residents, staff should communicate with the residents, keeping each resident informed of what the staff person is doing and what is expected of the resident. Staff should work in pairs whenever possible.
4. Staff can assist ambulatory residents and should carry only those who must be carried.
5. Residents are to be evacuated starting with those who are least resistive in the following order-those who are:
 - Ambulatory
 - Wheelchair dependent
 - Non-Ambulatory
 - Resistive

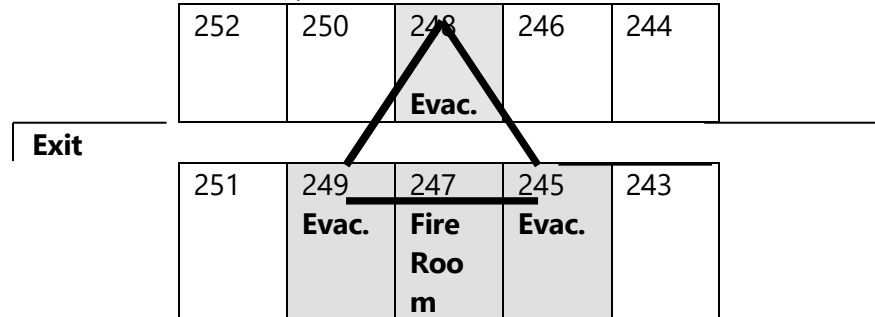
Lifts and Carries Options:

- Side-by-side and Bear Hug for the semi-ambulatory
- Cradle Drop and Swing Carry for non-ambulatory
- There are 4 Evacuation Chairs available for use.
- Evacuation first takes place horizontally from the emergency area to a safe zone on the same floor and then vertically to lower floors in the building.

Specific Procedures:

There are four types of **emergency** evacuation procedures that can be initiated in our facilities and they are as follows:

- 1) **CODE RED EVACUATION:** this includes the evacuation of the room in which the fire originated, and the rooms on either side, and directly across the fire location as well as the rooms on the floor directly above. This evacuation shall be announced over the voice communication system as "**CODE RED**", followed by the exact location of the fire as indicated on the fire panel in the main lobby.
 - a) **CODE RED** is initiated by the person discovering the fire (RACE).
 - b) Evacuation of fire location and rooms to either side and directly across the fire location (The triangle of safe fire evacuation).



- 2) **CODE GREEN EVACUATION:** this includes the complete evacuation of residents and staff from the disaster area to a safe area beyond the fire doors **on the same floor**. This evacuation is announced on the page as "**CODE GREEN**" followed by the unit name. This is repeated three times.
 - a) **CODE GREEN** is initiated by the person in charge of the fire upon escalation in the status of the emergency/disaster.
 - b) This includes complete evacuation of the disaster area (i.e., Resident Home Area/department) to a designated safe area behind the fire doors on the **same floor**.

- 3) **CODE GREEN STAT EVACUATION: Vertical Evacuation** – this includes the complete evacuation of residents and staff from the disaster area in a **Vertically downward** direction. This evacuation shall be announced as "**CODE GREEN STAT**" followed by directions on how the unit is to be evacuated.
 - a) **CODE GREEN STAT** is initiated at the discretion of the person in charge of the fire scene.
 - b) **CODE GREEN STAT** includes a complete evacuation of the disaster area in a **vertical downward direction** and may involve one unit/department or the whole building.
 - c) Where time permits all exits that promote safe evacuation shall be utilized.
 - d) Where the above is not possible the designated safe exits shall be utilized to evacuate.
 - e) Where **CODE GREEN STAT** involves more than one unit/department, and when other exits are appropriate/available, evacuation routes to be used by individual

unit/departments shall be announced over the voice communication system in order to prevent cluttering/blocking of the stairwells.

- 4) **TOTAL EVACUATION:** this involves total evacuation of all persons in the facility. **This will be indicated by the sounding of the Stage Two evacuation alarm** (i.e., a rapid continuous ring). Total evacuation is initiated at the discretion of the Fire Department or the most senior staff member on-site (e.g., Administrator/delegate or Nurse Manager).
- a) **TOTAL EVACUATION** is initiated at the discretion of the Fire Department and/or Administrator/delegate in a crisis or impending danger situation (stage 2 alarm).
 - b) **TOTAL EVACUATION** will be conducted in an orderly and timely fashion as announced over the voice communication system.
 - c) The order of **TOTAL EVACUATION** will be determined by location, severity and the extent of disaster/emergency situation and various options/methods of evacuation may be utilized as safe and appropriate.

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STAFF RESPONSE TO FIRE – ADMINISTRATOR

Policy:

1. The Administrator shall:
 - a. Demonstrate in-depth understanding of their role during a CODE RED.
 - b. Attend mandatory fire safety education at a minimum annually to enhance comprehension of the practices in the facility.
2. The Administrator has lead responsibility for fire safety coordination, including managing a fire emergency response.

Fire Prevention Responsibilities of the Administrator/Delegate:

The Administrator has lead responsibility for fire safety prevention, coordination, including managing a fire emergency response and deciding to activate the second stage of the alarm to initiate full evacuation of the building.

The Administrator is responsible for:

1. Keeping all facility-specific fire safety and fire emergency response procedures up-to-date, including the fire safety plan for the facility. These procedures shall be reviewed annually and updated as required.
2. Ensuring that routine and preventative maintenance programs are in place for fire safety equipment and fire protection systems.
3. Ensuring that all staff, according to assigned responsibilities, receives appropriate training in the use of fire protection equipment and actions to take when responding to a fire emergency.
4. Ensuring that fire drills take place monthly and on each shift, and that records are kept of the fire drills conducted.
5. Maintaining an emergency kit (red backpack) to be used in the event of evacuation, and a separate set of all keys for the facility. Emergency keys shall be located in the administration area for easy access by the Fire Department on arrival at the building in the event of an emergency.
6. Posting signs in the building, including at the Visitor sign-in book, all fire pull stations and at each elevator to advise visitors and residents of fire safety procedures.
7. On admission and annually thereafter, providing information to residents and their families on the emergency response procedures for the facility.
8. Ensuring that a smoking policy is in place and enforced within the facility.

Fire Response Procedures of the Administrator/Delegate:

1. Upon hearing the first stage alert signal and CODE RED, the Administrator goes the location of the fire and takes command.
2. Ensure that Unit Supervisor/Nurse Manager carries out their responsibilities.
If fire is on a Resident Home Area, the Unit Supervisor is responsible for phoning the fire department 911 & reporting the "Code Red" and its location within the building via the overhead paging system located at the Nursing station.
If fire is in common area, Customer Service Coordinator calls 911 & pages Code Red.
After hours (20:00 – 8:00) the phone call and page is done by the Nurse Manager.
3. **IF THERE IS NO FIRE** and if it is a false alarm (confirmed by a search of the affected area of the building)
Ensure the Fire Department is notified to advise the false alarm
 - Authorize Maintenance staff member to silence or reset the fire alarm and notify Fire Department personnel of false alarm.
 - Ensure the magnetic door locks are reset and the pull station is reset (both are done by the Maintenance person on site)
 - Ensure the monitoring station is advised of the above.
4. **IF THERE IS A FIRE** - after steps 1 and 2, take the lead in directing the fire response until arrival of the Markham Fire Department personnel. See NURSE MANAGER responsibilities. See page 30-33.
5. If the Administrator/delegate determines the need for horizontal evacuation an announcement is made by Unit RPN/Nurse Manager/Customer Service Coordinator to prepare for **CODE GREEN**.
6. If the Administrator/delegate determines the need for vertical evacuation the fire alarm system must immediately be moved into Second Stage alarm an announcement is made to prepare for **CODE GREEN STAT**.
7. Administrator/delegate ensures that families are kept apprised of situation.
8. Administrator/delegate notified MOHLTC of the incident.

When the Fire Department arrives, the Fire Department will take over leading the fire emergency response, and all staff shall take direction from the Fire Department.

STAFF RESPONSE TO FIRE – NURSE MANAGER

Policy:

1. The Nurse Manager shall:
 - a) Demonstrate an in-depth understanding of their role during a **CODE RED**.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.
 - c) Have an understanding and working knowledge of:
 - i. The Emergency Preparedness Plan for the facility;
 - ii. The location of emergency response resources, including access to all keys for the building and the emergency kit;
 - iii. The Fire Safety Plan for the building; and
 - iv. ALL residents who will require assistance in the event of an evacuation as well as the names of the residents with special needs who would require special requirements in the event of evacuation (e.g., g-feed, therapeutic surfaces, portable oxygen).
2. PLEASE NOTE: Reception Off Hours - The Nurse Manager is charged with the responsibility of assigning reception duties to a staff member.
3. In the absence of the Administrator/delegate, the Nurse Manager shall assume responsibility for fire safety/response coordination.

Fire Response Procedures of the Nurse Manager:

1. If fire is on a Resident Home Area, the Unit Supervisor is responsible for phoning the fire department 911 & reporting the "Code Red" and its location within the building via the overhead paging system located at the Nursing station.
If fire is in a common area, Customer Service Coordinator calls 911 and pages Code Red.
After hours (20:00 – 08:00) the call and page is done by the Nurse Manager.
2. Nurse Manager calls Administrator/delegate to inform of CODE RED. Nurse Manager is "in charge" of the Crisis Response Team until Administrator/delegate or Fire Department arrives and takes charge.
3. If fire alarm sounds after hours (20:00 – 08:00) Nurse Manager phone calls Maintenance staff member on duty (as they may be located on the North Campus). The mobile phone number is 416-677-5603.
4. Put on the Orange Fire Vest.
5. Pick up the Fire Safety Plan and the Evacuation Binder. Ensure critical resident information is evacuated (i.e., resident care profiles, clinical charts).
6. Go to the Fire Zone to assess the situation and give direction to and supervise the staff at the Fire Zone. Determine the exact location and nature of the fire.

7. Ensure that staff members follow **R.A.C.E. (if safe to do so)** and rooms are evacuated as per **CODE RED** procedures (i.e., the room of the fire location, the rooms on either side of the fire location, followed by those rooms directly across the hall from the fire area. Vacant/Exit tags (evacuation door tag) shall be used to identify vacant rooms.
8. Ensure that hallways and stairways are kept clear of debris, stairwell doors and doors in fire separations are closed and doors are not wedged open.
9. As soon as residents are evacuated from the area of immediate danger, staff members are to proceed to the other remaining rooms within the fire zone, closing all the doors and windows.
10. Once a room has been evacuated, the Vacant/Exit tag (evacuation door tag) is used to signify that the room has been checked and is empty.
11. Assign an RPN/PSW to carry out the following duties:
 - Ensure that an assigned staff member is accounting for all residents and that logs are being completed to track movement of residents.
 - Ensure staff members have reported to Resident Home Areas in the non-Fire Zones.
 - Ensure staff are distributed evenly to the non-Fire Zone Resident Home Areas.
 - Assign a staff member to go to the area immediately above or below the Fire Zone to assess the situation and report back to the Nurse Manager.
 - Ensure that triaging is taking place as per protocol and that Paramedics are kept informed of urgent cases for prompt transfer to nearby acute centers.
12. If necessary, instruct staff members to evacuate any other area deemed to be at risk. For instance, on other floors, residents shall be evacuated from the rooms directly above and below the affected fire area.
13. Ensure staff members:
 - a. Close all doors
 - b. Calm and reassure residents
 - c. Answer call bells as needed in the absence of regular staff
 - d. Await further instructions or the "All Clear" announcement
14. Note – the Crisis Response Team shall monitor this procedure to ensure that all available staff members have been assigned tasks in support of the Nurse Manager.
15. Report to Fire Department upon their arrival. The Report should include exact location of fire and response actions taken.
16. Ensure that the Care Plan Binders (located at the Nursing Station of each Resident Home Area) and the Resident List (located at Customer Service Centre) are removed from Fire Zone area.
17. Have staff who discovered the fire or who were in the area before or during the fire make written independent statements on what they observed and did.
18. Ensure that fire area is sealed and that burned material is not discarded.

NOTE: If at any time during the fire you determine Resident/staff safety is at risk you shall initiate CODE GREEN or CODE GREEN STAT. (Most Senior staff member present at time to initiate).

See below and Emergency Response – Evacuation pages 25-27.

Stage Two Alarm – Total Evacuation:

If a major fire occurs, which necessitates a total evacuation of the building before the arrival of the Fire Department, the Nurse Manager or Maintenance person shall **initiate the second stage of the fire alarm system:**

- Break the glass in the nearest fire alarm pull station by pulling the lever down
- Insert the **evacuation key** and **turn** (the alarm will now ring at 60 strokes per minute until it is reset when directed to do so by the Fire Department)
- Follow **CODE GREEN, CODE GREEN STAT** procedures
- Activate the Fan-out system (**note – if the Crisis Management Team or any member is present, the activation of the Fan-out system is their responsibility**)
- The Fire Department will be in charge upon its arrival

Post Alarm Procedures:

The Nurse Manager shall:

1. Accompany Fire Department personnel to reset the panel. Panel reset is done by Nurse Manager in case of fire drill or false alarm.
2. Announce the “All Clear” signal three times over the voice paging system (CODE RED ALL CLEAR) if the Environmental Services Supervisor is not present.
3. Ensure all persons are accounted for by confirming headcounts were performed in all Resident Home Areas/departments.
4. Ensure all Unit Supervisors, Adult Day Program, Customer Service/Admin and Dietary/Laundry conduct a fire debriefing session and complete the “Fire Response Report” for their Resident Home Area/department. These forms are forwarded to the Environmental Services Supervisor. Ensure all staff members sign the attendance portion of the report.
5. Complete any other reports as required.

NURSE MANAGER RESPONSIBILITY SHEET CHECK-OFF

The Nurse Manager is in charge until the arrival of Administrator or Emergency Services (Police, Fire, EMS).

| The Nurse Manager: | Check: |
|--|--------|
| 1. Shall not become involved in physical activity. | |
| 2. Shall delegate responsibilities. | |
| 3. Shall obtain as much information about the incident as possible, including: | |
| a. Nature of the incident | |
| b. Exact location | |
| c. Estimated number of Residents and/or casualties to be evacuated | |
| d. Appropriate access and egress routes | |
| 4. Shall call or delegate a staff member to notify appropriate emergency services (as necessary): | |
| a. Fire | |
| b. EMS | |
| c. Police | |
| 5. Shall organize staff members to proceed with the evacuation if necessary, ensuring all residents are given a name tag (name, home, medical info). | |
| 6. Initiate the Fan Out System (through the Administrator) if necessary. | |
| 7. Delegate a staff member to meet emergency services at appropriate entrance and indicate: | |
| a. Nature of incident | |
| b. Location | |
| c. Estimated number of casualties | |
| d. Estimated number of stretchers | |
| e. Estimated number of wheelchairs, walkers, etc. | |
| f. Other pertinent information | |
| 8. Delegate a staff member to record movement of residents in conjunction with EMS | |
| 9. Remove Emergency Plan Manual and Care Plan Binders from Nursing Stations and ensure they are taken to the Command Post. | |
| 10. Proceed to identified central collecting area | |
| 11. Pass appropriate information to Emergency Services as necessary | |
| 12. Designate staff members to accompany residents being transported to alternate facilities by bus. | |

STAFF RESPONSE TO FIRE – RPN/UNIT SUPERVISOR

Policy:

1. The RPN/Unit Supervisor shall:
 - a) Demonstrate an in-depth understanding of their role during a **CODE RED**.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.
 - c) Have an understanding and working knowledge of the Fire Safety Plan for the building.
2. In the event of a CODE RED, the RPN/Unit Supervisor shall:
 - a) Identify the location of the alarm via the Fire Panel.
 - b) Announce the Code Red via Fire Panel if Fire Zone is in their Resident Home Area. Call 911 to alert the Fire Department.
 - c) Direct staff for resident/visitor safety or evacuation.

Fire Response Procedures of the RPN/Unit Supervisor:

A. IF THE FIRE IS IN YOUR AREA:

UPON HEARING THE ALARM:

1. Check location of Fire Zone on the Fire Alarm panel.
2. If fire is on a Resident Home Area, the Unit Supervisor is responsible for phoning the fire department 911 & reporting the "Code Red" and its location within the building via the overhead paging system located at the Nursing station.
If fire is in a common area, Customer Service Coordinator calls 911 and pages Code Red.
After hours (20:00 – 08:00) the phone call and page are done by the Nurse Manager.
3. Call fire department (call 911) and give following information:
 - i. Caller is Union Villa Long-Term Care Home and your name and location of the home (4300 Highway 7, Unionville).
 - ii. There is a fire in the building.
 - iii. Location of the Fire Zone.
4. Take charge in the Resident Home Area and delegate the staff to carry out the duties - Evacuate all Residents from immediate fire area. Please remember: the first responsibility is the safety of the Residents.

R – Remove - remove residents from the immediate area while calling out “CODE RED” and location.

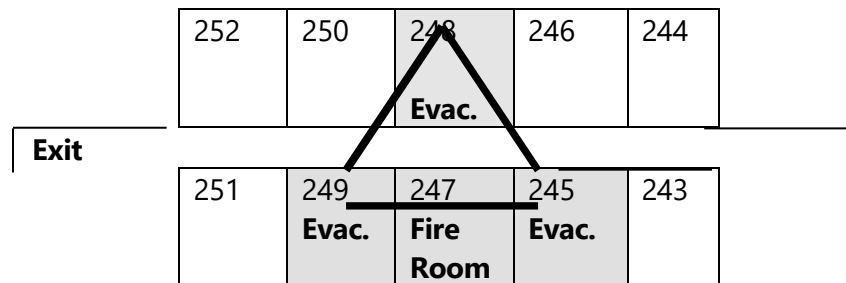
A – Activate – activate the fire alarm

C – Contain – close all remaining doors and windows in the fire zone

E – Extinguish - if the fire is small and you know you can put it out quickly, do so

5. Evacuate residents in the room with fire, then in rooms across hall and on either side of immediate fire area to safe area, “The triangle of safe fire evacuation”.

Example:



6. Assign staff members to monitor each stairwell door until magnetic doors and hold open devices are reset.
7. Ensure all staff members:
 - Close all doors and windows
 - Calm and reassure residents
 - Answer call bells as needed in the absence of regular staff
 - Await further instructions or the “All Clear” announcement
8. Remaining rooms – Residents may stay in rooms with doors and windows closed. Evacuate to safe area beyond fire doors if danger threatens.
9. Flip the Evacuation Alert Tag on door of vacant rooms (once checked). When evacuating rooms, it is important to check all possible areas, for example, closets, under beds, in the washroom and other possible areas where a resident could hide. The windows and the bedroom door shall be closed as part of the evacuation of the room.
10. Clear halls of all equipment and residents.
11. Electrical equipment – turns off all fans, radios, televisions, etc. – leave the lights on.
12. Account for all staff, visitors and residents using master list.
13. Be prepared to evacuate with the Care Plan Binder.
14. After the “All Clear” has sounded, open the doors and resume normal activities.
15. The Unit Supervisor completes the “Fire Response Report” for the Resident Home Area and submits it to the Nurse Manager.

B. IF THE FIRE IS NOT IN YOUR AREA:UPON HEARING THE ALARM:

1. Listen for fire location over Public Address system.
2. Any staff member who is on break shall return to the Resident Home Area using the stairs (avoid crossing the fire line).
3. Take charge of the Resident Home Area and provide specific directions to staff.
4. Assign a staff member to monitor each stairwell doors until magnetic doors and hold open devices are reset. On Union Mills, assign a staff member to monitor the unlocked interior door to the secured unit.
5. Close all doors and windows – Residents may stay in their rooms or be assembled in one of the central safe locations in the resident home area.
6. Clear halls of all equipment and residents.
7. Electrical Equipment – turn off all fans, televisions, computers, radios, etc. Leave lights on.
8. Account for all residents, staff and visitors using master list. If any resident is missing initiate “Code Yellow”.
9. Keep residents calm. Staff members to monitor each wing to ensure Residents stay in rooms and no signs of fire are evident.
10. Be prepared to evacuate with Care Plan Binder.
11. After the “All Clear” has sounded, open the doors and resume normal activities.
12. The Unit Supervisor shall facilitate a debrief on the Resident Home Area with all staff members, complete the “Fire Response Report” and submit it to the Nurse Manager.

NOTE: If at any time during the fire you determine Resident/staff safety is at risk you shall initiate CODE GREEN or CODE GREEN STAT. (Most Senior staff member present at time to initiate).

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STAFF RESPONSE TO FIRE – CARE AND SUPPORT SERVICES STAFF

Policy:

1. The Care and Support Services Staff (includes PSW, HCA, Housekeeping Aide, Programs staff) shall:
 - a) Demonstrate an in-depth understanding of their role during a **CODE RED**.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.

Fire Response Procedures of the Care and Support Services Staff:

The Unit Supervisor on the Resident Home Area shall take charge and delegate the care and support staff in carrying out the following duties.

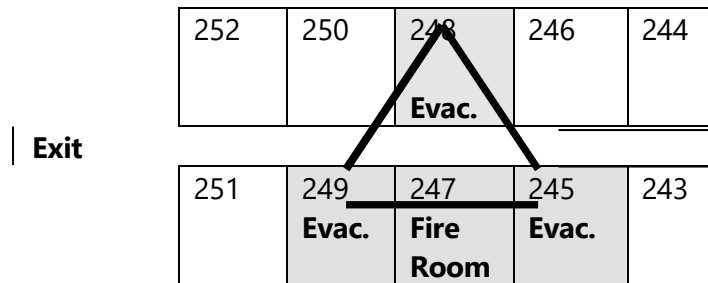
SHOULD the Unit Supervisor be away from the floor when a fire is discovered or the alarm sounds, the staff member discovering the fire assumes the role of Unit Supervisor takes charge and assigns duties until relieved by the Unit Supervisor, Nurse Manager or the Fire Department. See responsibilities for RPN/Unit Supervisor on page 34-36.

A. IF THE FIRE IS IN YOUR RESIDENT HOME AREA:

UPON HEARING THE ALARM:

1. Care and support services staff in the affected area shall immediately assist with the evacuation of the residents from the fire area and ensure that others in the vicinity are aware of the fire emergency.
2. Check the immediate area for fire and/or smoke - if found, begin **R.A.C.E.**:
 - R – Remove** - remove residents from the immediate area while calling out “CODE RED” and location.
 - A – Activate** – activate the fire alarm
 - C – Contain** – close all remaining doors and windows in the fire zone
 - E – Extinguish** - if the fire is small and you know you can put it out quickly, do so
3. All staff members who are on break shall return to their assigned floor to assist with relocation of residents – staff shall return to the unit using the stairwell or other route that is furthest from the fire location – if safe to do so.
4. Evacuate Residents in rooms across hall and on either side of immediate fire area to safe area “The triangle of safe fire evacuation”.

Example:



5. Evacuated Residents shall be assembled in a central area (lounge/dining room) beyond the fire door.
6. Flip the Evacuation Alert Tag on door of vacant rooms (once checked). When evacuating rooms, it is important to check all possible areas, for example, closets, under beds, in the washroom and other possible areas where a resident could hide. The windows and the bedroom door shall be closed as part of the evacuation of the room.
7. If a tag is missing or not flipped open, the room shall have to be checked to see if a re-entry has occurred.
8. As the residents are being evacuated from the area of immediate danger, other care and support staff are to proceed to the other rooms within the fire zone, closing all windows and the doors and opening the door tag (Vacant/Exit tag).
9. After evacuation of an area, no person is to return to that area until the "CODE RED ALL CLEAR" is given.
10. Once the "All Clear" has sounded, open the doors and resume normal activities.
11. All staff members shall participate in a debrief meeting on the Resident Home Area and sign the "Fire Response Report" to acknowledge their participation.

B. IF THE FIRE IS NOT IN YOUR AREA:

UPON HEARING THE ALARM:

1. Listen for fire location over Public Address system. If the origin of the alarm is on another floor or in another Resident Home Area on the same floor, care and support staff shall ensure that all residents in the immediate area are away from the fire emergency and are accounted for. This may be done by placing them in their rooms or by assembling them in a central or safe location within the floor area.
2. Any staff member on break shall return to the resident home area using the stairs (do not cross the fire line).
3. Care and support staff members are to keep all residents calm, await further instructions, and be prepared to evacuate – if safe to do so.

4. Close all doors and windows – Resident may stay in rooms.
5. Flip the Evacuation Alert Tag on door of vacant rooms (once checked). When evacuating rooms, it is important to check all possible areas, for example, closets, under beds, in the washroom and other possible areas where a resident could hide. The windows and the bedroom door shall be closed as part of the evacuation of the room.
6. One staff member shall be assigned to monitor stairwell doors until magnetic doors and hold open devices are reset.
7. One staff member to monitor each wing to ensure Residents stay in rooms and no signs of fire are evident.
8. One staff member to account for all Residents, staff and visitors using master list. Advise Unit Supervisor of missing residents. If any resident is missing initiate "Code Yellow".
9. Clear halls of all equipment and Residents.
10. Electrical equipment – turn off all fans, televisions, computer, radios.
11. Await further direction from Unit Supervisor.
12. After the "CODE RED ALL CLEAR" has sounded, open the doors and resume normal activities.
13. All staff members shall participate in debrief meeting and sign the "Fire Response Report" to acknowledge their participation.

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STAFF RESPONSE TO FIRE – LAUNDRY STAFF

Policy:

1. The Laundry staff shall:
 - a) Demonstrate an in-depth understanding of their role during a **CODE RED**.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.

Fire Response Procedures of the Laundry Staff:

UPON HEARING THE ALARM:

1. Turn off all equipment, fans and any electrical outlets in the laundry room.
2. Close all doors and any windows in the laundry room and then leave the laundry room closing the door behind them
3. If you are away from the laundry room, return to the laundry room immediately and complete #1 and #2.
4. Remain in the hallway outside of Laundry Room to await further instructions.
5. All staff members shall participate in a debrief meeting and sign the "Fire Response Report" to acknowledge their participation.

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STAFF RESPONSE TO FIRE – ENVIRONMENTAL SERVICES SUPERVISOR

Policy:

1. The Environmental Services Supervisor/delegate shall:
 - a) Demonstrate an in-depth understanding of their role during a **CODE RED**. In the absence of the Administrator/delegate, the Environmental Services Supervisor shall assume responsibility for fire safety/response coordination.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.
 - c) Have an understanding and working knowledge of:
 - i. The Fire Safety Plan for the building;
 - ii. The Emergency Preparedness Plan for the facility; and
 - iii. The location of emergency response resources, including access to all keys for the building and the emergency kit.
 - d) Have a good understanding and knowledge of the Ontario Fire Code, the building's fire equipment, the fire alarm system and fire safety protocols.
2. The Environmental Services Supervisor/delegate shall:
 - a) Ensure the fixed automatic extinguishing system for the kitchen range hood is maintained and tested in accordance with the Fire Code.
 - b) Ensure all fire protection equipment and fire safety building features are checked, tested, inspected and maintained in accordance with the Fire Code and all applicable standards.
 - c) Ensure permanent records are maintained in their office of all fire equipment inspections, tests and maintenance procedures.
 - d) Ensure the preventative maintenance programs are implemented as set out in the fire plan.
 - e) Ensure that all commercial cooking equipment and appliances are maintained in good working order and are safe for use. Ensure that all grease filters in hoods and duct systems servicing commercial cooking appliances are cleaned regularly (with Food Services Manager).

Fire Response Procedures of the Environmental Services Supervisor:

UPON HEARING THE ALARM:

1. Determine the location of the Fire Zone from the nearest annunciation panel/phone.
2. Proceed to the Fire Zone and assist the Unit Supervisor to determine the exact location, nature, and extent of the fire.

3. Direct the maintenance staff member to the front door to meet the Fire Department.
4. Assist the Unit Supervisor to evacuate any residents within the Fire Zone to a safe area beyond the fire doors.
5. Check to ensure building ventilation system has shut-off due to fire alarm activation.
6. Assist the Unit Supervisor to ensure all staff members are following procedures as required.

Post Alarm Procedures:

1. Obtain Fire Response Report from Nurse Manager and ensure completion. Follow-up on any areas of concern. Provide Report to Administrator for sign-off.
2. Report on the "Fire Response Report" and any concerns to the Leadership Team.
3. Report on the "Fire Response Report" and any concerns and actions taken to the Joint Health and Safety Committee.
4. File the report in Fire Reports binder in the Environmental Support Services Supervisor's office.

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STAFF RESPONSE TO FIRE – FOOD SERVICES MANAGER

Policy:

1. The Food Services Manager shall:
 - a) Demonstrate in-depth understanding of their role during a CODE RED.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.
2. The Food Services Manager shall (in conjunction with the Environmental Services Supervisor):
 - a) Ensure that all commercial cooking equipment and appliances are maintained in good working order and are safe for use.
 - b) Ensure that all grease filters in hoods and duct systems servicing commercial cooking appliances are cleaned regularly.

Fire Response Procedures of the Food Services Manager:

A. IF THE FIRE IS IN YOUR AREA AND IT IS SAFE TO DO SO:

UPON DISCOVERY OF A FIRE IN THE KITCHEN:

1. The Food Service Manager shall take charge and delegate the staff to carry out the duties.
 - R – Remove** - remove residents from the immediate area while calling out “CODE RED” and location.
 - A – Activate** – activate the fire alarm
 - C – Contain** – close all remaining doors and windows in the fire zone
 - E – Extinguish** - if the fire is small and you know you can put it out quickly, do so
2. Ensure all staff members:
 - Close all doors and windows
 - If the fire is on the cooking surface, activate the automatic extinguishing system in the range hood, if required.
 - Turn off the cooking equipment and fans.
3. Assign a staff member to monitor exits from the building (old building exit and staff exit).
4. Check the staff locker rooms to ensure empty.
5. If staff members are on break, ensure they return to the kitchen.
6. Meet laundry and dietary staff in hallway outside of laundry room, perform headcount of staff and wait for further instructions from Nurse Manager.

7. Await further instructions or the "CODE RED ALL CLEAR" announcement before resuming normal duties.
8. All staff members shall participate in debrief meeting and sign the "Fire Response Report" to acknowledge their participation.

B. IF FIRE IS NOT IN YOUR AREA:

UPON HEARING THE ALARM:

1. Return to the kitchen:
 - a) Ensure equipment is in off position, windows and doors closed.
 - b) Assign staff to monitor any residents in the area.
2. Assign a staff member to monitor exits from the building (old building exit and staff exit).
3. Check the staff locker rooms to ensure empty.
4. If staff members are on break, ensure they return to the kitchen.
5. Meet laundry and dietary staff in hallway outside of laundry room, perform headcount of staff and wait for further instructions from Nurse Manager.
6. All staff members shall participate in debrief meeting and sign the "Fire Response Report" to acknowledge their participation.

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STAFF RESPONSE TO FIRE – DIETARY STAFF

Policy:

1. Dietary staff members shall:
 - a) Demonstrate in-depth understanding of their role during a CODE RED.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.

Fire Response Procedures of the Dietary Staff:

UPON DISCOVERY OF A FIRE IN THE KITCHEN:

1. Pull the fire alarm. Assist anyone in immediate danger to evacuate the area using R.A.C.E.:
 - R – Remove** - remove residents from the immediate area while calling out “CODE RED” and location.
 - A – Activate** – activate the fire alarm
 - C – Contain** – close all remaining doors and windows in the fire zone
 - E – Extinguish** - if the fire is small and you know you can put it out quickly, do so
2. Turn off all electrical and gas equipment.
3. Shut all fire doors in kitchen. Close all windows and doors to the kitchen to confine the smoke and fire.
4. Ensure passageways are clear.
5. Attempt to extinguish fire – use only BC rated portable extinguisher on grease fire.
6. For the dietary exhaust hood extinguishing system:
 - (1) Remove pin in head of extinguisher.
 - (2) Rotate red lever clockwise.
7. Leave the kitchen area, making sure that doors are closed on the way out
8. Meet in hallway outside of laundry room and wait for further instructions from Nurse Manager.
9. All staff members shall participate in debrief meeting and sign the “Fire Response Report” to acknowledge their participation.

UPON DISCOVERY OF A FIRE IN THE SERVERY:

1. Pull the fire alarm. Assist anyone in immediate danger to evacuate the area using R.A.C.E.:
R – Remove - remove residents from the immediate area while calling out “CODE RED” and location.
A – Activate – activate the fire alarm
C – Contain – close all remaining doors and windows in the fire zone
E – Extinguish - if the fire is small and you know you can put it out quickly, do so
2. Turn off all electrical equipment.
3. Close all windows in the dining area to confine the smoke and fire.
4. Attempt to extinguish fire – use only BC rated portable extinguisher on grease fire.
5. Ensure passageways are clear.
6. Assist care and support services staff with the evacuation of residents to a safe zone if that is the area of the fire emergency.
7. All staff members shall participate in debrief meeting and sign the “Fire Drill or Fire Report” to acknowledge their participation.

B. IF FIRE IS NOT IN YOUR AREA:UPON HEARING THE ALARM:

1. If staff members are working in the Resident Home Area, assist care and support services staff with the evacuation of residents to a safe zone if that is the area of the fire emergency.
2. If staff members are on break, return to kitchen and follow directions of Food Services Manager.
3. Gather with laundry and dietary staff in hallway outside of laundry room.
4. All staff members shall participate in debrief meeting and sign the “Fire Response Report” to acknowledge their participation.

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STAFF RESPONSE TO FIRE – MAINTENANCE STAFF

Policy:

1. The Maintenance staff shall:
 - a) Demonstrate in-depth understanding of their role during a CODE RED.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.

Fire Response Procedures of the Maintenance Staff:

A. IF YOU DISCOVER SMOKE OR A FIRE – REMAIN CALM

INITIATE R.A.C.E.

- | | |
|-----------------------|---|
| R – Remove | Remove residents from the immediate area while calling out “CODE RED” and location. |
| A – Activate | Activate the fire alarm pull station |
| C – Contain | Close all remaining doors and windows in the fire zone |
| E – Extinguish | If the fire is small and you know you can put it out quickly, do so |

B. IF THE FIRE IS NOT IN YOUR AREA:

1. Proceed to the front door and ensure driveways, entranceways are free of obstacles.
2. Check the Lobby annunciation panel for the fire location. Meet the Fire Department and take them to the fire area.

Post Alarm Procedures:

1. Reset fire alarm pull stations after approval is obtained from the Fire Department.
2. After fire panel reset, check fire panel to make sure it is functioning.
3. Check exhaust/ventilation systems to make sure they are functioning.
4. Put elevators back on service.
5. Reset magnetic door locks. Check all exit doors to ensure system is operational.
6. Go to kitchen and re-light pilot lights for gas stoves, grill, etc.
7. Return fire extinguisher to storage location. If it has been used, put in Environmental Services Supervisor’s office for service and take a new one to the storage location.
8. Ensure critical IT equipment (modem, nurse call, etc) is operational.

STAFF RESPONSE TO FIRE – CUSTOMER SERVICE STAFF

Policy:

1. Customer Service Coordinators shall:
 - a) Demonstrate in-depth understanding of their role during a CODE RED.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.

Fire Response Procedures of the Customer Service Staff:

A. ON DISCOVERING THE FIRE/SMOKE AND IF SAFE TO DO SO:

REMAIN CALM - INITIATE R.A.C.E.

- R – Remove** Remove residents from the immediate area while calling out “CODE RED” and location.
- A – Activate** Activate the fire alarm pull station
- C – Contain** Close all remaining doors and windows in the fire zone
- E – Extinguish** If the fire is small and you know you can put it out quickly, do so

B. ON HEARING THE ALARM:

1. Check location of Fire Zone on the annunciation panel.
2. If fire is on a Resident Home Area, the Unit Supervisor is responsible for phoning the fire department 911 & reporting the “Code Red” and its location within the building via the overhead paging system located at the Nursing station.
If fire is in a common area, Customer Service Coordinator calls 911.
After hours (20:00 – 08:00) this is done by the Nurse Manager.
3. Call fire department (call 911) and give following information:
 - i. Caller is Union Villa Long-Term Care Home and your name and location of the home (4300 Highway 7, Unionville).
 - ii. There is a fire in the building.
 - iii. Location of the Fire Zone.
4. Terminate unnecessary phone calls by saying: “We are in an emergency situation, please call back”.
5. Post the “DO NOT ENTER” sign on the front door. Prevent visitors from entering and/or exiting the building.
6. Be ready to implement any emergency calls.
7. Paging System must be available for giving further direction to staff as necessary.

8. At the direction of the Administrator /designate initiate the fan out calling system in order to notify key personnel of the emergency/disaster.
9. Be prepared to evacuate with the evacuation information binder, visitor's sign-in binder, and resident identification tags.
10. Do not allow Residents or visitors to go upstairs before "CODE RED ALL CLEAR" is announced.
11. Ensure a headcount of admin support/leadership staff members is taken so that all are accounted.
12. All staff members shall participate in debrief meeting and sign the "Fire Response Report" to acknowledge their participation.

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STAFF RESPONSE TO FIRE – ADMIN AND LEADERSHIP STAFF

Policy:

1. Admin and Leadership staff shall:
 - a) Demonstrate in-depth understanding of their role during a CODE RED.
 - b) Complete mandatory fire safety education annually to maintain knowledge of current practices and participate in monthly fire drills.

Fire Response Procedures of the Admin and Leadership Staff:

A. ON DISCOVERING THE FIRE/SMOKE AND IF SAFE TO DO SO:

REMAIN CALM - INITIATE R.A.C.E.

- R – Remove** Remove residents from the immediate area while calling out “CODE RED” and location.
- A – Activate** Activate the fire alarm pull station
- C – Contain** Close all remaining doors and windows in the fire zone
- E – Extinguish** If the fire is small and you know you can put it out quickly, do so

B. IF YOU ARE IN A RESIDENT HOME AREA:

1. Assist care and support services staff with the evacuation of residents to a safe zone if that is the area of the fire emergency.
2. Remain in Resident Home Area and await further instructions from Unit Supervisor/Nurse Manager.
3. All staff members shall participate in debrief meeting and sign the “Fire Drill or Fire Report” to acknowledge their participation.

C. IF YOU ARE NOT IN A RESIDENT HOME AREA:

1. Return to Administrative corridor. Ensure evacuation of the area, closing all windows and doors. Open door tag to indicate room is vacant. Check all doors along hall.
2. Gather in the front lounge/lobby area and reassure Residents/visitors. One member of the staff is to take a census of the lounge/lobby area to note the names of Residents/ volunteers/ visitors in the lounge/lobby area.
3. Ensure the area is not congested and direct traffic as needed.
4. Close all windows and doors in lounge/chapel area.
5. Await further instructions from the Nurse Manager.

6. Await the "CODE RED ALL CLEAR" announcement.
7. Ensure a Headcount is taken and All staff members shall participate in debrief meeting and sign the "Fire Drill or Fire Report" to acknowledge their participation.

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STAFF RESPONSE TO FIRE – VOLUNTEERS

Policy:

1. Volunteers shall:
 - a. Demonstrate in-depth understanding of their role during a **CODE RED**.
 - b. Attend mandatory fire safety education at a minimum annually to enhance comprehension of practices in the facility.

Fire Response Procedures of Volunteers:

WHEN THE ALARM SOUNDS:

1. **If you are located in the Fire Zone:**
 - a. Take directions from the Unit Supervisor.
 - b. Evacuate the area along with the Residents.
 - c. Await further instructions or the "All Clear" announcement.

Volunteers shall participate in debrief meeting and sign the "Fire Drill or Fire Report" to acknowledge their participation.

2. **If you are located in the non-Fire Zone:**
 - a. Congregate in the public gathering areas of the resident home area.
 - b. Await further instructions or the "All Clear" announcement.

Volunteers shall participate in debrief meeting and sign the "Fire Drill or Fire Report" to acknowledge their participation.

STAFF RESPONSE TO FIRE – CONTRACTED SERVICES

Policy:

Contracted services staff (e.g., Hairdressing, Physiotherapy, IT, Dietician, Physician, Building/Equipment Services) shall:

- a. Demonstrate in-depth understanding of their role during a **CODE RED**.
- b. Attend mandatory fire safety education at a minimum annually to enhance comprehension of practices in the facility.

Fire Response Procedures of Contracted Services:

A. ON DISCOVERING THE FIRE/SMOKE AND IF SAFE TO DO SO:

REMAIN CALM - INITIATE R.A.C.E.

- R – Remove** Remove residents from the immediate area while calling out “CODE RED” and location.
- A – Activate** Activate the fire alarm pull station
- C – Contain** Close all remaining doors and windows in the fire zone
- E – Extinguish** If the fire is small and you know you can put it out quickly, do so

B. IF YOU ARE IN A RESIDENT HOME AREA:

1. Assist care and support services staff with the evacuation of residents to a safe zone if that is the area of the fire emergency.
2. Remain in Resident Home Area and await further instructions from Nurse Manager.
3. All contracted services staff members shall participate in debrief meeting and sign the “Fire Response Report” to acknowledge their participation.

C. IF YOU ARE NOT IN A RESIDENT HOME AREA:

1. Ensure evacuation of the area in which you are working, closing all windows and doors. Open door tag to indicate room is vacant.
2. Gather in the front lounge/lobby area and await further instructions from the Nurse Manager.
3. All contracted services staff members shall participate in debrief meeting and sign the “Fire Response Report” to acknowledge their participation.

CONTROL OF FIRE HAZARDS

Fire safety precautions shall be in place and supported through the following mechanisms:

- Direction to the staff on identifying/reporting hazards
- Electrical equipment check
- Maintenance of building facilities and fire protection equipment
- Annual fire system inspection by Fire Department
- External safety inspection of the building
- Joint Occupational Health and Safety Committee inspections
- Annual training of staff, volunteers, contracted services staff, and visitors of fire safety plan and procedures.

STAFF RESPONSIBILITIES FOR IDENTIFYING/REPORTING HAZARDS

1. All staff members are directed to always be on the alert for any condition that constitutes a fire hazard and to report such a condition to their supervisor. Escalate as necessary to Administrator.
2. Fire safety hazards include, but are not limited to:
 - i. Residents, visitors or staff found smoking in non-designated areas (smoking not permitted in the building)
 - ii. Defective electrical equipment, for example: bare wires, electrical equipment that is malfunctioning
 - iii. Exit lights/doors that are not well lit and/or free from obstructions
 - iv. Broken plugs, frayed electrical cords or extension cords in use in the Home
 - v. Blocking of fire equipment or fire corridors or exits.
 - vi. The holding open of fire doors.
 - vii. Accumulation of rubbish, waste or other flammable materials in any area.
 - viii. Unsafe cooking practices in the activity rooms, kitchen, servery, staff lunch room and admin kitchenette.
3. The Administrator shall ensure immediate action is taken to rectify any identified or reported fire safety hazard.

ELECTRICAL EQUIPMENT CHECK

- All electrical equipment shall be C.S.A. approved before use.
- Each piece of electrical equipment brought in by resident, for example, TV's, radios and electric razors, must be individually tagged with the name of the resident, the date and initial of the person who has inspected the equipment.
- The safety of electrical equipment shall be checked by maintenance staff as follows:
 - On admission if a resident is bringing in equipment;
 - Whenever new equipment is purchased for use in the Home; and
 - For both resident and facility equipment, annually thereafter by the maintenance person.

MAINTENANCE OF BUILDING FACILITIES AND FIRE PROTECTION EQUIPMENT

1. The Environmental Services Supervisor has the overall responsibility of ensuring daily, weekly, and monthly checks of the building are performed to identify and rectify as appropriate, and fire hazards.
2. Systems shall be checked, tested and inspected by the identified staff as per the frequency set out in the attached schedule.
3. The Administrator is responsible for ensuring that the attached schedule is followed, and where applicable, that any necessary repairs and supporting emergency protocols are put into place to protect the safety of residents, staff and visitors to the facility.
4. Fire safety "checklists" are an integral part of internal quality control and management reporting. The objectives are as follows:
 - a) To monitor compliance with regulated requirements for fire safety standards.
 - b) To provide timely and accurate information to the Administrator regarding existing or optional fire safety hazards.
 - c) To provide information regarding staff performance and awareness with respect to safety regulations/requirements and their need for in-service education.

Policy:

Fire safety maintenance audits are conducted in accordance with legislative requirements.

1. To ensure that all components of Fire Alarm System are functional.
2. To prevent premature breakdown of equipment.

FREQUENCY SCHEDULE

Definitions:

- CHECK:** Conduct visual observation to ensure the device or system is in place and is not obviously damaged or obstructed.
- INSPECT:** Conduct physical examination to determine that the device or system will apparently perform in accordance with its intended function.
- TEST:** Test operation of device or system to ensure that it will perform in accordance with its intended operation function.

| System Item | Requirement | Frequency | Responsibility |
|--------------------|--|--|--|
| Fire Exits | To provide unobstructed means of egress from the building (doors & hardware in proper working order, and areas kept free of carts, lifts, equipment and other obstructions). | Daily Monitoring Monthly Check and Inspection | All staff Maintenance |
| Emergency Lighting | Emergency lighting system must be in proper working order. | Weekly Check Monthly Check and test Semi-Annual Test and Inspection | Maintenance Maintenance Contracted Service |
| Fire Alarm System | To ensure that the fire alarm system is in proper working order and meets compliance with Fire Code. | Daily Check of Fire Alarm Central Control Monthly Test and Inspection (includes annunciator panel & voice paging system) Annual Test and Inspection All test's shall be done in accordance with CAN/ULC S536-97 | Maintenance Maintenance Contracted Service |

| System Item | Requirement | Frequency | Responsibility |
|--|--|---|--|
| Fire Exit Lights | Lights for fire exits must be "on" at all times | Daily Monitoring Monthly Check | All staff (any defects submitted as Maintenance Work Request online system) Maintenance |
| Sprinkler Heads and Heat/Smoke Detectors | Must be securely fastened, no obstructions, "on" at all times and in working order. | Daily Monitoring Monthly Check and Inspection Annual Check and Inspection | All staff Maintenance Contracted Service |
| Voice paging system | To ensure that the system is in proper working order at all times for clear announcement of information within the building. | Monthly Check and Inspection | Maintenance |
| Fire Extinguishers | To ensure Fire extinguishers are Fully charged and in correct area. | Monthly Check and Inspection Annual Inspection | Maintenance Contracted Service |
| Fire Department Access | Fire department access must be maintained at all times at exterior entrance doors to building and in parking areas. | Daily Check and Inspection | All staff Maintenance |
| Emergency Generator | Must be in proper working order for alternate service in the event of emergency. | Weekly Check of fluid levels and lubricants. Operate for 60 minutes Monthly Check and test Check and clean crankcase, breathers, governors and linkages.(6 mths) Semi-Annual Check and test | Maintenance Maintenance Contracted Service Contracted Service |

| System Item | Requirement | Frequency | Responsibility |
|---|--|--|---|
| Fire Doors | Fire Doors to have appropriate rating by area, be operable and be properly positioned. | Daily Monitoring Monthly Check and Inspection | All staff Maintenance |
| Flammable Liquids and Compressed Gases | To be properly stored in fire rated areas and in areas where no smoking is permitted. | Daily Monitoring Monthly Check and Inspection | All staff Maintenance |
| Elevators | Must be in proper working order as per design and Code. | Quarterly Check and Inspection of doors, switches and controls. Monthly Service and Annual Inspection | Contracted Service Contracted Service |
| Sprinklers | Sprinklers must be in proper working order and meet Fire Code standards | Monthly check of valves for "open" position Annual Check and test | Maintenance Contracted Service |
| Carbon Monoxide Detectors | Shall be maintained in accordance with Manufacturers specifications. | Monthly check As required | Maintenance Contracted Service |
| Kitchen Extinguishing System (dry chemical) | To ensure system is charged and in proper working order. | Monthly Check and Inspection Semi-Annual Check, Test and Inspection | Maintenance Contracted Service |
| Kitchen Cooking Area Exhaust and Ducts | Exhaust area and ducts must be kept clean and free of potential fire safety hazards. | Daily hood cleaning mechanism operation Monthly Check and Inspection | Food Service staff and Supervisor General maintenance (afternoon shift) Maintenance |

| System Item | Requirement | Frequency | Responsibility |
|------------------------------------|---|--|---|
| Fire Separations | <u>Monthly</u> - to ensure doors close on sounding of fire alarm, and that doors & hardware are secure, undamaged and working properly. <u>Annual</u> – to ensure closures, dampers and fire stops are operable. | Monthly Check and Inspection Annual Check and Inspection | Maintenance Maintenance |
| Water Supplies for Fire Protection | To ensure appropriate functioning and water pressure for systems that support fire protection | Weekly Check of Valves Monthly Check and Inspection Annual Test and Inspection | Maintenance Maintenance Contracted Service |
| Fire dampers | To ensure that dampers work in according to the Ontario Fire Code | Annual inspection and maintenance | Maintenance and contractor |
| Laundry room – Resident Care area | To ensure that the laundry is kept free of fire hazards | Monthly and annual lint clean-up | Maintenance and contractor |
| Laundry Equipment – Laundry Room | To ensure that the laundry is kept free of fire hazards | Daily lint clean-up Monthly and annual lint clean-up | 1 st shift Laundry Staff Maintenance and contractor |

FIRE LOG BOOK

Policy:

The Fire Log Book is kept in the maintenance department; records are maintained by the Environmental Services Supervisor and are made available to the Fire Department on request.

Procedure:

1. Maintenance staff is responsible for regular inspection of fire alarm system and auxiliary equipment.
2. Environmental Services Supervisor maintains the Fire Log Book.
3. Environmental Services Supervisor is responsible for developing a schedule for semi-annual and annual inspections performed by an outside contractor.
4. The original copy of inspection shall be posted by the main fire panel and a copy shall kept in the office of the Environmental Services Supervisor.
5. In the event of the emergency evacuation of the building, it is the responsibility of the maintenance staff to take the fire logbook with them.

FIRE RETARDANT MATERIALS

Policy:

1. Provide a safe environment for residents and staff.
2. Requirement of the Ontario Fire Code.

Procedures:

1. Drapes, curtain, bedding material and other decorative material, including textiles used in the building, shall meet the requirements for high degree of flame resistance.
2. Purchaser of textile materials shall comply with the requirement of the Ontario Fire Code.

FIRE EXTINGUISHMENT, CONTROL OR CONFINEMENT

In the event a small fire cannot be extinguished with the use of portable fire extinguisher or the smoke presents a hazard for the operator, the door to the area should be closed to confine and contain the fire. Leave the fire area. Ensure that the Fire Alarm System has been activated and that Markham Fire & Emergency Services has been notified prior to an attempt to extinguish the fire. Only those persons who are trained and familiar with extinguisher operation may attempt to fight the fire.

Operation of Portable Fire Extinguishers:

Remember the "PASS"

P – Pull the safety pin

A – Aim at the root of the fire

S – Squeeze the trigger handle

S – Sweep from side to side (watch for fire restarting)

Never re-hang extinguishers after use. Ensure they are properly recharged by a person that is qualified to service portable fire extinguishers and that a replacement extinguisher is provided.

Keep extinguishers in a visible area without obstructions around them.

NOTE: Prior to using a K-type extinguisher, activate the kitchen extinguishing system to avoid electrocution.

ALTERNATE MEASURES FOR TEMPORARY SHUTDOWN OF FIRE PROTECTION EQUIPMENT OR SYSTEMS

Policy:

1. The Administrator/delegate ensures that where any fire protection equipment and/or the fire alarm system or any part thereof, are shut down or out of order:
 - a) Steps shall immediately be taken to effect the necessary repairs (most likely will require contacting the fire system maintenance contractor; the respective telephone number is to be kept in easy access to staff); and
 - b) Alternative fire safety measures shall be immediately implemented to ensure the safety of residents, staff and visitors to the building. Announcement to all staff using the overhead paging system or e-mail system that alternative measures are to be implemented; with reliance on the overhead paging system for announcements and sounding of an alarm if necessary.

2. If the fire alarm is out of order, alternative measures include:
 - a) Announcement to all staff using the overhead paging system or e-mail system that alternative measures are to be implemented;
 - b) Immediate notice of the malfunction or breakdown to the Markham Fire Department and Fire Alarm Monitoring Company;
 - c) Staff patrols of the building to check for fire hazards or actual fire situations;
 - d) A request that all visitors leave the building unless other over-riding circumstances prevail; and
 - e) Announcing that there is a fire system alert, using the overhead paging system, to initiate the fire safety and emergency response plan in the event of an actual fire incident or fire emergency in the facility.

Procedures:

1. The Administrator /delegate shall initiate the alternate measures (fire patrol) procedure.
2. The Customer Service Coordinator shall make an announcement to implement the alternate measures procedure. NOTE: In the event paging and phone communication systems are also down, staff will be requested to run messages to all floors/departments.
3. Signs are posted in all areas of the building to alert staff and residents that alternative safety measures are in effect.
4. The Customer Service Coordinator shall ensure that the Fire Department (905)-477-2011 and the Fire Monitoring Company, are notified of any fire protection system

impairments and planned temporary shutdowns of sprinkler protection systems for repairs or alterations and their restoration of service again. This includes the shutdown of sprinkler control valves or fire protection water supplies for more than a 24-hour period.

5. The Administrator shall notify the Ministry of Health and Long Term Care of the situation and that established alternative fire safety measures shall be implemented.
6. The RN/RPN/delegate shall assign one staff to fire safety patrol to check every resident room and washroom and all other rooms on the Resident Home Area every fifteen (15) minutes until the fire alarm system is operational.
7. One staff member in the Food Services department shall be assigned to fire safety patrol to check the kitchen area including all storage rooms, coolers and dining rooms every fifteen (15) minutes until the fire alarm system is operational.
NOTE: If the Food Services department is closed, the Nurse Manager/delegate of the building shall assign this responsibility.
8. The Maintenance staff shall be assigned to fire safety patrol to check all other rooms in the basement and old building section and all stairwells every fifteen (15) minutes until the fire alarm system is operational.
9. Staff members conducting the fire patrols shall record the time and date of each 15 minute tour and shall also note any deficiencies and action taken. Records must be forwarded to the Environmental Services Supervisor for filing with the fire alarm test records.

Outcomes:

1. Staff follows alternate measures to monitor the building if the fire alarm system is not operating due to repairs or malfunction.
2. The Markham Fire Department is notified of planned temporary shutdowns of the sprinkler protection system for repairs or alterations and their restoration to service including the shut-down of sprinkler control valves or fire protection water supplies for more than a 24-hour period.
3. The Markham Fire Department and the Ministry of Health and Long Term Care are notified of any fire protection system impairments.
4. Each tour of the building by the fire safety patrol is recorded by time and date. Any deficiencies noted and corrective measures are also recorded.

Additional References:

1. Ontario Fire Code – Article 6.5. 2.1.
2. Fire safety Planning for Institutional Facilities OFM-TG-02-1999, 6.2 Alternate Measures for Temporary Shutdown of Fire Protection Equipment or Systems (pg. 19)

ALTERNATE MEASURES CHECKLIST – MAIN FLOOR

TO BE COMPLETED BY MAIN FL HOUSEKEEPING STAFF EVERY 15 MINUTES
OR AFTER HOURS, LAUNDRY STAFF TO COMPLETE EVERY 15 MINUTES.

DATE: _____

SIGNATURE: _____

| Time | Offices | Heritage Lounge | Reception Area | Washrooms | Day Program | Private Family Room | Chapel | Hairdresser | Recreation Office |
|------|---------|-----------------|----------------|-----------|-------------|---------------------|--------|-------------|-------------------|
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FIRE DRILLS

PREPAREDNESS POLICY

Policy:

Staff and residents shall participate in fire drills monthly on each shift with fire safety procedures and comply with the Long Term Care Homes Act and the Ontario Fire Code Regulation 388/97.

Procedure:

1. All staff of the facility (all shifts) shall participate in the fire drills so that over the course of the year, each staff person shall have participated in one or more drills.
2. Fire drills shall occur at least once each month on each shift, and all staff on-site during that shift shall participate.
3. The fire drills shall occur so that each shift shall be covered randomly as selected by the management staff of the facility.
4. Staff locating the simulated "fire drill condition" shall be expected to respond as they would in an actual fire situation – refer to staff response for discovery of smoke/fire, and staff responsibilities in the event of a fire emergency.
5. The Administrator, Senior Leadership Team, Environmental Services Supervisor and/or the designated Charge Person shall monitor staff actions and responses on-site.
6. The names of all staff attending the fire drill shall be recorded on the facility's fire drill report form (see L-10-05) – the Administrator is responsible for ensuring that this form and a recording system are in place.
7. If a false alarm occurs, it shall constitute the fire drill for that month on that shift.
8. A master schedule of all monthly fire drills (by date, time and shift) and the staff person responsible for conducting the drill shall be developed at the start of each year, and available to the senior management team.
9. After each fire drill, the staff person responsible for conducting the fire drill (in most cases this shall be the Environmental Services Supervisor – Charge Nurses on all shifts shall also take turns as assigned) shall complete and submit to the Administrator the facility's fire drill report form.
10. Each fire drill report shall be kept on file at the facility in the Environmental Services Supervisor's office, in a format that is easily accessed for inspection by the Markham Fire Department.

Conducting Fire Drills

The person responsible for conducting the fire drill shall take the following steps:

1. Notify the Fire Alarm Monitoring Company responsible for monitoring the fire alarm that there will be a fire drill.
2. Notify the Markham Fire Department at least five minutes prior to the drill being conducted.
3. Simulate a fire condition in a randomly selected area of the building.
4. Ensure proper annunciation of the fire drill.
5. Ensure that all bells are ringing.
6. Ensure that all fire doors close.
7. Reset the pull station, or smoke detector and the fire alarm system after the drill is over.
8. Notify the Fire Alarm Monitoring Company and Markham Fire Department that the drill is completed.
9. Hold a brief meeting with staff to ensure that procedures were followed and to discuss any problems and shall communicate results of the debrief meeting to the Leadership Team.
10. Keep a record of fire drills for three years including any special comments or problems, with the fire drill report form submitted to the Administrator after each fire drill.
11. Conducting Fire Drills for the Night Shift: In order to avoid disturbing residents while they sleep, the night shift will put into place a “silent” system for conducting fire drills.

Every reasonable effort will be made to conduct fire drills for the night shift at a time that is least disturbing for residents, and that simulates to the best extent possible, actual fire emergency situations.

Room Checks

1. The process for checking rooms shall include a method for identifying the rooms that have been thoroughly checked and evacuated. The evacuation tags confirming that a room has been evacuated shall be obvious and clearly distinguishable in the corridor next to the room.
2. During the monthly fire drills, staff shall practice using the pre-defined symbol or marking device.
3. After a thorough check of the room, the staff person shall place the symbol or marking device in the pre-defined position at the doorway before closing the

door to indicate that the room has been checked and is empty. This is to save time by not re-checking the rooms unless the evacuation tag has been moved or is not in the specified location as set out in the facility's fire emergency response policy.

4. The symbol or device in the wrong location shall indicate that the room has had a re-entry or has somehow been disturbed, thereby requiring another check.
5. All staff shall be trained on the use and well aware of the evacuation tag that is in place for identifying rooms that have been searched.

Additional References:

1. Fire Safety Planning for Institutional Facilities OFM-TC-02-1999, 7.1 Fire Drills (page 20)
2. Ontario Fire Code Regulations 388/97

FIRE RESPONSE REPORT

Routing: The following areas must complete a report and the staff members working must sign a report: Corporate Office Area, Laundry/Kitchen/Maintenance Area and each Resident Home Area, signed by all staff assigned to the RHA (all disciplines). Forward completed report to the Environmental Service Supervisor.

Date: _____ Time: _____

| Question | Yes | No | Comments |
|--|-----|----|----------|
| Was the Fire Department called and when? (before & after) | | | |
| Was the Alarm Monitoring Company called and when? (before & after) | | | |
| Who sounded the Alarm? | | | |
| Which pull station was used? | | | |
| Which Code is announced? | | | |
| Did staff react promptly? | | | |
| Did all fire doors close? | | | |
| Did all bedroom doors latch properly? | | | |
| Could you hear the alarm location? | | | |
| Were all residents accounted for? | | | |
| Did staff monitor stairwell doors? | | | |
| Did staff sign the fire drill report? | | | |
| Were there any obstructions in front of the fire doors at the time of the alarm? If yes, what was the obstruction? | | | |
| Did you review the following: RACE | | | |
| Is the fire extinguisher used? And it's location? | | | |
| Location of fire or smoke | | | |

Do you have any concerns, problems or suggestions?

Corrective Action to be taken by Maintenance Department, if Applicable.

Director of Nursing and Personal Care: _____ Administrator _____
 Report seen by: JOHSC _____ ESS _____
 CEO _____ Report filed in ESS's Office

