

5.0

CODE GREEN IMPLEMENTATION – EVACUATION

5.1.1 CODE GREEN

A Code Green could be the result of an internal emergency or an external event that may cause the need for full or partial evacuation of the building.

An internal event that may cause the activation of a Code Green may be the result of a fire via 2nd stage fire alarm, flood, local utility failure (e.g. electricity, water, sewer, natural gas), a natural disaster event (e.g.. significant storm, earthquake, flooding), or a external event that affects the occupancy of the facility such as a transportation or motor vehicle accident (e.g. railway, vehicle, seaway), a external local fire, smoke, noxious gas event.

The level of evacuation and degree to which the plan will be put into effect will depend on the nature of the emergency.

Fire Alarm Second Stage Notification; A Code Green evacuation alarm is initiated by the activation of the second stage audible alarm signal. Activation and initiation of the second stage alarm signal is by manually key triggering the alarm from any manual fire alarm pull station. Second Stage alarm releases all magnetically controlled secured doors. Second stage alarm indicates that a Code Green has been put into effect and that evacuation of the area at risk is to be initiated. Evacuation of the area at risk is to include evacuating to a safe zone beyond the fire separation doors. As required further progressive or whole evacuation is to take place. Activation of second stage alarm signal will sound on the floor level where it was manually keyed from. Second stage audible alarm is identifiable by a more frequent repeated fast pace alarm tone.

General Notification

A Code Green may also be called identifying the area of the building to be evacuated or a Code Green Stat may be called meaning that the total facility must be evacuated.

A Code Green may be elevated to a Code Green Stat at any time during the process as deemed necessary by the Incident Commander.

5.1.2 DUTIES OF INCIDENT COMMANDER

- Code Green alarm/call Initiated.
- First Floor Registered Nurse - to act as Incident Commander and to take control of the situation by directing facility wide response.
- Confirm location of Code Green evacuation and or second stage alarm on fire alarm annunciator panel.
- Dispatch the designated 2nd Floor Scene Coordinator to the emergency scene.
- Upon notification and activation of a Code Green retrieve the following information;

Code Green Information

Code Green Details	Response
1. What type and details of emergency	
2. Exact location of emergency	
3. Impact of emergency to facility	
4. Expected duration of emergency	

- Telephone the Fire Department by calling 911, verify the event and location of the alarm.
- For evacuation declare and announce a “Code Green”, make the following announcement slowly and distinctly:

“Code Green - Code Green (proceed to identify the area/location/zone of the building to be evacuated). Nursing Staff assigned as identified by the coded symbol on the Nursing Assignment Sheet report immediately to area of evacuation to assist with evacuation”.

“Code Green - Code Green (proceed to identify the area/location/zone of the building to be evacuated). Nursing Staff assigned as identified by the coded symbol on the Nursing Assignment Sheet report immediately to area of evacuation to assist with evacuation”.

OR

- As required for total evacuation declare and announce a “Code Green Stat”, make the following announcement slowly and distinctly:

“Code Green Stat - Code Green Stat”
“Code Green Stat - Code Green Stat”

PROCEED TO

- At First Floor Elm Lodge Nurse Station put on Emergency Responder” green vest, pick up two-way radio.
- **On evenings, nights & weekends and holidays call;** The Manager on Call, advise as to the status of the situation. In consultation with the Manager on Call assess the need to activate the Emergency Operations Control Group, Manager on Call to initiate fan-out. Membership as per Appendix A-2. Contact information as per Administration Fan-Out Appendix B-1.
- **On evenings, nights, weekends and holidays call;** Support Services/Maintenance on cell number 613- 802-4868 advise of the situation, to assess building systems and equipment operations and to call in.
- **On evenings and night shifts, weekends and holidays;** as designated on the Nursing Assignment Sheet as per coded symbol ∞ send staff member to the front door to meet the fire department, have person share as much information as possible e.g. location, floor, room, status of fire. If necessary take crew to location, return to front door.

- Via two-way radio acquire relevant information from the Scene Coordinator about the emergency situation.
- Assign a scribe.
- Proceed to take the necessary immediate actions to minimize the effects of the emergency.
- Brief the staff of the situation and of the immediate actions to be taken.
- Take necessary other immediate actions to ensure the health, safety and welfare of the residents, staff and visitors.
- Direct appropriate immediate emergency response.
- As per the Homes Administration Manual Policy # 0202-12-01 "Critical Incident Reporting", if applicable given the type of incident advise the Ministry of Health LTC Division of the issue within the time frame stated.
- Communicate with emergency responders and the E.O.C.G for support and guidance.
- Relinquish the role of Incident Commander upon request via the authority of the E.O.C.G. or local authority having jurisdiction.

AS SITUATION ESCALATES

- Determine the safest method, route and extent of evacuation, supplies needed, provide additional support if needed. General principals include evacuation to a safe zone staging area with ambulatory first, followed by wheelchair and then non-ambulatory/beds. Resident(s) may be rolled into a blanket and dragged to a designated safe location or staging area as determined by Incident Commander or Scene Coordinator.
- As E.O.C.G established and members in place relinquish the role of Incident Commander Responsibilities to the E.O.C.G Operations Leading Authority (Chair), Incident Commander continue to work with the E.O.C.G to address the emergency.
- Depending on the nature of the emergency either manage the emergency from First Floor Nurse Station by providing direction to the Scene Coordinator/Unit Communications Person or report to area to be evacuated and provide required assistance and direction.
- Depending on the nature and extent of evacuation, in preparation for total building evacuation from the initial safe zone relocate residents to an assigned designated staging area.
- Provide the necessary immediate direction and actions to ensure the health, safety and welfare of the residents, staff and visitors and provide direction as required.
- Communicate with emergency responders and the E.O.C.G for support and guidance.
- As required request and provide notification to assisting agencies such as: Fire Department, Law Enforcement, Fire/EMS personnel, Public Health, Hospital, M.O.H.L.C.
- Complete Incident Report Form 001 located in Appendix O, submit to E.O.C.G. Leading Authority.
- As situation escalates in collaboration with the E.O.C.G work through Section 5.2 Evacuation Plan Logistics and Job Action appendixes.

All Clear:

- After having been notified by the Scene Coordinator /E.O.C. Control Group that the situation is to return to normal and or that 2nd stage fire alarm and the magnetic door lock systems have been reset proceed to page twice the following;

“Your attention please, Code Green All Clear, Resume Normal Duties”

5.1.3 DUTIES OF SCENE COORDINATOR

- Code Green and or 2nd stage fire alarm/call initiated.
- Designated Second Floor Registered Nurse to act as Scene Coordinator.
- At Second Floor Spruce Lodge Nurse Station put on a green vest, pick up two-way radio then respond to the emergency scene.
- At the scene take charge and control of the emergency or if Incident Commander at the scene in conjunction with, give direction as required, work with emergency responders to complete evacuation measures.
- If evacuation of the area is required and is fire related if not done proceed with second stage fire alarm, key trigger second stage evacuation alarm via nearest manual fire alarm pull station and proceed with evacuation. Inform “Incident Commander” of location/area to be evacuated. As required request additional resources.
- Determine the safest method, route and extent of evacuation, supplies needed, and additional support.
- General principals include evacuation to a safe zone staging area with ambulatory first, followed by wheelchair and then non ambulatory/beds. Residents may be rolled into a blanket and dragged to a designated safe location or staging area.
- In preparation for total building evacuation from the initial safe zone relocate residents to an assigned designated staging area for triaging.
- Retrieve medication carts and chart racks, take to safe zone with residents.
- Remain in constant communication with staff in the area and the Incident Commander via the two-way radio. If two-way radio is not operable delegate a runner to send information back to the Incident Commander.
- If assessment of area determines a safe condition via two-way radio brief Incident Commander of the Code Green status.
- Upon arrival of the fire department and other emergency responders provide a status of the event. In conjunction with the fire department assess the situation and determine the ongoing necessary evacuation actions.

All Clear:

- If fire alarm related once the fire department or other designated authority has assessed the situation and confirmation is given of the “all clear” to occupy the area proceed to;
 - Via the two-way radio notify the Incident Commander that a “Code Green-All Clear” is pending upon resetting of the 2nd stage fire alarm and magnetic door lock key switch systems.

- In the company of the Fire Department, Director of Support Services and or Maintenance Mechanic at the Main Entrance vestibule proceed to reset the fire alarm panel and the magnetic door lock key switch.
- Upon the resetting of the fire alarm system and magnetic door lock key switch via the two-way radio notify the Incident Commander of the “Code Green-All Clear” and to proceed with the page. The Incident Commander is then to make the “Code Green All Clear” page.
- Proceed to return emergency green vest, two-way radio and fire extinguisher back to their original locations.
- Work with Incident Commander to complete reporting requirements.

5.1.4 DUTIES OF NURSING UNIT COMMUNICATIONS PERSON AT EACH RHA

- Code Green alarm/call initiated.
- Immediately as assigned on the Nursing Assignment sheet by the coded symbol of * go to the unit Nurse Station, put on “Emergency Responder” red vest, pick up two-way radio.
- If fire alarm related check fire alarm annunciator, confirm location of zone, ensure evacuation instructions and procedures have been completed.
- Oak Lodge - Special Care Unit; If fire alarm initiated Immediately upon activation of the first stage fire alarm assign a person/s to monitor all 5 exit doors, (1) main entry/exit corridor door, (1) dining room door, (1) north/west corridor door, (1) north stairwell door, (1) north/east stairwell door. Doors will unlock upon activation of 2nd stage. Doors are to be monitored until the all clear has been paged, after the all clear page is made each door shall be checked to confirm the doors have been secured. If found not secured notify the Scene Coordinator.
- If in the affected area or if announced as Code Green Stat;
 - Initiate and provide direction on evacuation measures.
 - Determine the safest method, route and extent of evacuation, supplies needed, and additional support.
 - General principals include evacuation to a safe zone staging area with ambulatory first, followed by wheelchair and then non ambulatory/beds. Residents may be rolled into a blanket and dragged to a designated safe location or staging area.
 - In preparation for total building evacuation from the initial safe zone relocate residents to an assigned designated staging area for triaging.
 - Brief the Scene Coordinator/fire department responding to the scene of the situation.
 - Receive direction from Incident Commander and/or Scene Coordinator.
- If in un-affected area, begin to prepare the area for evacuation, remain on stand-by for possible evacuation.

5.1.5 MANAGER ON CALL

- As the emergency elevates the Manager on Call will receive a call from the Incident Commander. The Incident Commander will advise the Manager on Call of the status of the emergency. In consultation with the Incident Commander the Manager on Call is to ensure completion of appropriate reporting requirements that all appropriate first responders have been called, and proceed as required to activate the establishment of the Emergency Operations Control Group. Membership as per Appendix A-2, contact information as per Administration Fan-Out Appendix B-1.

5.1.6 NURSING STAFF

- Upon Code Green report to Home Units. Employees who are away from their work area (e.g. on break) - return to assigned work area.
- If in the affected area assist with necessary evacuation.
- As assigned per coded symbol * on the Nursing Assignment Sheet carry out the duties of Unit Communications Person.
- As per Code Green paged instruction as designated per coded symbol Ω on the Nursing Assignment sheet report to the area of evacuation to assist with evacuation.
- As assigned per coded symbol ∞ on the Nursing Assignment Sheet pick up 2 - way radio at first floor Nursing Station Office and report to main front entrance, meet fire department and provide information such as on the location, floor, room, status of fire. As necessary communicate with Incident Commander and Scene Coordinator via two-way radio, to use follow instructions on two-way radio. If necessary take crew to location, return to front door.
- Others if in un-affected area prepare area for evacuation and remain on standby for further instructions.
- Determine the safest method, route and extent of evacuation, supplies needed, request additional support if needed. Report needs to Unit Communications/Scene Coordinator.
- General principals of evacuation include evacuation to a safe zone staging area with ambulatory first, followed by wheelchair and then non-ambulatory/beds. Resident(s) may be rolled into a blanket and dragged to a designated staging area.
- Depending on the nature and extent of evacuation, in preparation for total building evacuation from the initial safe zone assist in relocating residents to an assigned designated staging area for triaging.

5.1.7 MAINTENANCE STAFF

- Upon activation of Code Green proceed to area to be evacuated work in close liaison with Incident Commander / "Scene Coordinator".
- As required assist with the emergency response requirements.

- Prepare to shut down boilers, gas, electrical, ventilation and any other building systems. Notify Incident Commander of any unusual circumstances.

5.1.8 DUTIES OF ALL OTHER STAFF ON SITE

Upon activation of a Code Green:

- Employees who are away from their work area (e.g. on break) - return to assigned work area (or) if normally assigned the labour pool and assist with required fire response.
- Evacuation/Reporting Area;
 - Staff assigned to work within a resident home area; Clear hallways of equipment so there is unobstructed path. If assigned in affected area assist staff with evacuation. If assigned in unaffected area report to the nurse station at your designated work area await for further instructions, remain on alert.
 - All other staff (those not working on a Home Unit and unless otherwise directed above); Clear hallways in work area of equipment so there is unobstructed path. During regular business hours M-F report to First Floor Classroom, this to become part of the labour pool. During all other times; including evenings, nights, weekends and holidays report to Level One, Elm Lodge Nurse Station.
- As directed follow the instructions of the Scene Coordinator.

5.1.9 LEADERSHIP TEAM

- During Regular Business Hours; The following Leadership Team members are to report to the emergency scene; Administrator, Director of Care, Director of Support Services, Environmental Services Manager.

The first Leadership Team member to arrive is to dialogue with the Incident Commander and Scene Coordinator. As required and as the response measures elevate assume the role of Incident Commander or Scene Coordinator.

Other Leadership Team Responsibilities:

Assistant Director of Care; Report to area of responsibility, liaise with Unit Communications person, provide assistance as required.

Activation Coordinator; Report to First Floor Central Therapy, secure area report to Labour Pool.

Director of Finance and Administration; Report to Labour Pool, assume Labour Pool Communication person's role, direct staff as required.

Dietary Services Manager; Secure Kitchen/Basement Area await for further instructions.

5.1.10 TYPES OF EVACUATION

Evacuation could consist of the following;

IMMEDIATE AREA EVACUATION;

- i. **Immediate Danger Area Evacuation:** Remove residents, staff and visitors in the immediate area. The general rule is to evacuate residents within 2 rooms on either side of the room and immediately across the hall.

PARTIAL EVACUATION:

- i. **Horizontal Evacuation:** Move residents, staff and visitors to the nearest point of safety, possibly the wing opposite to that in which the fire is situated beyond the corridor fire doors.
- ii. **Vertical Evacuation:** May be downwards or upwards to the nearest point of safety. Preferably move residents, staff and visitors two floors down using the nearest stairway which is away from the immediate location of the fire.

TOTAL EVACUATION:

- i. **Total Building Evacuation:** In extreme situations the evacuation involves the entire facility. Move residents, staff and visitors out of the building through the nearest exit.

EVACUATION SEQUENCE:

- i. Residents/visitors in immediate area of danger.
- ii. Ambulatory residents/visitors.
- iii. Semi-ambulatory residents/visitors (wheelchairs).
- iv. Non-ambulatory residents.

5.1.11 EMERGENCY OPERATIONS CONTROL GROUP

- When a call has been received of a “Code Green” situation the E.O.C.G members are to report to the facility. E.O.C.G. members are as outlined in Appendix A-2. Depending on the emergency other senior levels of Management can become part of the E.O.C.G. and serve as Team Leaders as per Appendix N Job Action sheets.
- Establish and follow the guidelines of the establishment and activities for the E.O.C.G as outlined in Section One.

5.1.12 ACTIVATING THE PERSONNEL POOL TELEPHONE FAN OUT/ALERTING PROCESS

- If activation required refer to Emergency Plan Section Two; Activation of an Emergency Section 2.1.4 Personnel Pool Telephone Fan Out/Alerting Process.

5.1.13 ELEVATION OF CODE GREEN

- As required for additional instruction and resource information refer to Emergency Plan Section Two; Activation of an Emergency.

5.1.14 INCIDENT DOCUMENTATION AND REPORTING

- As per the Homes Administration Manual Policy # 0202-12-01 "Critical Incident Reporting", if applicable given the type of incident advise the Ministry of Health LTC Division of the issue within the time frame stated.

5.2 EVACUATION PLAN LOGISTICS

As the emergency escalates the following measures as required are to be initiated and completed by the Incident Commander/Leading Authority of the Emergency Operations Control Group and other assigned Leaders.

The following outlines enhance measures, delegation of team leaders and other necessary steps and consideration to complete a full or partial evacuation of the building.

Evacuation Considerations Include;

- I. Degree of Evacuation
The emergency situation will determine the extent of evacuation necessary. The Incident Commander/E.O.C.G Leading Authority is to make an assessment whether the facility faces an internal or external hazard or both and degree of evacuation required.
 - A. Decision to Evacuate
 1. In the event of a hazard, which requires a complete or partial evacuation of the facility the Incident Commander/ or E.O.C.G Leading Authority is to give the order to evacuate in collaboration with response agencies.
 2. If the circumstances are such so that there is no immediate danger to the life and safety of residents, staff and visitors the Incident Commander/or E.O.C.G. Leading Authority is first to determine the availability of transportation resources and destination sites before giving the order to evacuate.
 3. Once transportation resources and relocation destination sites are identified the Incident Commander/ or E.O.C.G. Leading Authority shall give the order to activate the procedures to initiate an orderly and timely transfer of residents to the pre-designated destination site(s).

4. When it is determined that evacuation is necessary the Incident Commander/or E.O.C.G. Leading Authority will provide directives for Code Green overhead announcement of page: The specific directive will depend upon the level of evacuation required (E.g., Part, Horizontal, Vertical, or Full). Incident Commander will determine to which areas the residents are to be moved.

II. Type of Evacuation

A. Partial Internal Evacuation

This will be instituted when a fire or other threat of life has been determined in or near Resident's room or other area. Remove the resident(s) and other personnel from the threatened area to a separately protected area in another evacuation zone of the Home.

1. Horizontal

- a) Horizontal movement refers to multiple zones and movement left to right or right to left as specified by the Incident Commander.
- b) Move residents/visitors/employees who are closest to danger first
- c) The designated area chosen by the Incident Commander/Scene Coordinator to provide the nearest and safest protected area.

2. Vertical

- a) Vertical movement takes into consideration having multiple floors for resident care or tornado shelter basement area.
- b) Move residents/visitors/employees who are closest to danger first
- c) Move vertically down or up toward ground/exit floor and designated area specified by Incident Commander/Scene Coordinator that provides the nearest and safest protected area.

B. Full External Evacuation

Full evacuation will likely be determined by the Incident E.O.C.G. Leading Authority based off of the present circumstance and the ability of the facility to properly maintain resident care. Activate alternate site plan options. Additional staff may be called in to assist with the evacuation as well as transportation resources and accepting facilities be contacted and advised of the need to fully evacuate residents from the Home.

1. E.O.C.G Leading Authority will identify and secure the designated location according to those sites available. This is done in collaboration with the response agency contact person.

2. Incident Commander/Scene Coordinator will determine which floors and/or smoke zones are evacuated first and in which order. Those floors that are most in danger or the floors of the incident are to be evacuated first. Then adjacent floors are to be evacuated. Otherwise, evacuation is to start at the top floor and work downwards. In all incidents, residents are to be evacuated according their triage level.
3. Incident Commander/Scene Coordinator/ or E.O.C.G Leading Authority is to identify area(s) for Staging.

In addition to the above evacuation logistics the Incident Commander/ or E.O.C.G. Leading Authority is to assign and delegate the following Team Leaders.

5.2.1 E.O.C.G. LEADING AUTHORITY (Chair) AND ASSIGNMENT OF TEAM LEADERS

E.O.C.G Leading Authority (Chair):

Core mission is to;

Organize and direct the Emergency and Emergency Operations Command Centre (E.O.C.G.). Assign essential Team Leaders and give overall strategic direction for the incident and management of and support activities, including emergency response and recovery. Authorize total facility evacuation if warranted. Refer to E.O.C.G. Leading Authority (Chair) Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

E.O.C.G. Leading Authority (Chair) to determine and assign the following designated Team Leaders.

Staging Leader/Staging Area

Core mission is to;

Set up, organize, and manage the deployment of a staging area, assess and review the needs for supplementary resources, including personnel, vehicles, equipment, supplies and medications. Staging Leader to refer to Staging Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Discharge Triage Leader: (Nurse)

Core mission is to;

Responsible for working with the Incident Commander and Staging Leader on a Resident Management Plan, including identifying current census, type and degree of evacuation, overseeing resident triage system and coding of residents.

To also serve as the conduit for information to internal and external stakeholders, including staff, and families, as approved by the Incident Commander. Refer to Discharge Triage Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Transportation Leader

Core mission is to;

Acquire, organize and manage the deployment of human resources. Refer to Transportation Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Personnel Team Leader

Core mission is to;

Acquire, organize and manage the deployment of vehicle resources to vehicle staging area. Refer to Personnel Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Equipment and Supply Team Leader

Core mission is to;

Organize and manage the deployment of supplementary equipment and supplies. Refer to Equipment and Supply Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Building Infrastructure and Systems/Essential Services/Grounds Team Leader

Core mission is to;

Organize and manage the services required to sustain and repair the Homes infrastructure operations, essential services and grounds. Refer to Building Infrastructure and Systems Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Environmental Services Team Leader

Core mission is to;

Ensure environmental services are in place and maintained. Refer to Environmental Services Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Food Services Team Leader

Core mission is to;

Organize and maintain food preparation and delivery services for residents and other required needs. Refer to Food Services Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Traffic/Security Team Leader

Core mission is to;

Organize and manage vehicular traffic and security for the facility. Refer to Traffic/Security Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Business Continuity/IT Team Leader

Core mission is to;

Ensure business and I.T. functions are maintained and or restored to meet ongoing Business and I.T. continuity needs. Refer to Business Continuity/I.T. Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

Medication and Resident Personal Needs/Records Team Leader

Core mission is to;

Organize and manage the retention, deployment and tracking of necessary resident medication, records and personal needs. Refer to Medication and Resident Personal Needs/Records Leader Job Action sheet for specific duties and tasks as found in Appendix N in Master and Sub Master Manuals. Forms to be used are found in Appendix O in Master and Sub Master Manuals.

5.2.2. Logistics of Resident Triage System

A systemic method for triaging residents is key to a successful evacuation. A rational movement of resident's from the Home units to a staging area then from the Staging Area in preparation for transportation prior to transfer is necessary to move residents quickly and safely, the following two-step evacuation approach should be taken;

Staff on the Unit-From Home Unit to Staging Area;

- A. From a Home Unit to a Staging area; Known as Reverse START Triaging
 1. Residents that are ambulatory and relatively stable will have first priority for moving off the Home units. These residents require minimal assistance, resident is usually ambulatory, are less resource intensive and many can be led off the unit with one or two staff members in groups. - Green Category.
 2. Next is those who require some assistance, may require wheel-chairs and or 1-2 staff members. Accompanied out by nursing assistants or other personnel. Use wheelchairs and wheeled commodes. Bed bound patients utilize beds. - Yellow Category.
 3. Next is non ambulatory, acutely ill, unstable those who require maximum assistance. Possibly bed bound. May require 2-3 staff. Use registered personnel and assistants. - Red Category.
- B. TRADITIONAL START; Resident Triaging at Staging area to another site location. At this point residents will be coded the appropriate level of triage category.

Revert back to original priority once the resident reaches the staging area prior to transfer because you will want to get the most unstable residents moved first.

 1. RED
 2. YELLOW
 3. GREEN

Triage Chart

Triage Level	EVACUATION FROM HOME UNIT to ONSITE STAGING AREA Reversed START Priority	STAGING to ANOTHER SITE LOCATION Traditional START Priority
RED - IMMEDIATE	These residents require maximum assistance to move. In an evacuation, these residents move LAST from the Home units. These residents may require 2-3 staff members to transport.	These residents require maximum support to sustain life in an evacuation. These residents move FIRST as transfers from our facility to another healthcare or other facility.
YELLOW – DELAYED	These residents require some assistance and should be moved SECOND in priority from the Home unit. Residents may require wheelchairs or stretchers and 1-2 staff members to transport.	These residents will be moved SECOND in priority as transfers from our facility to another healthcare or other facility.
GREEN - MINIMAL	These residents require minimal assistance and can be moved FIRST from the unit. Residents are ambulatory and 1 staff member can safely lead several residents who fall into this category to the staging area.	These residents will be moved LAST as transfers from our facility to another healthcare or other facility.

5.2.3. Resident Tracking

Tracking the movement of residents, staff, throughout the organization during an evacuation is imperative to the reconciliation process that must occur to assure everyone has gotten out safely.

A. Guidelines

1. Each resident who is being transported to destination site is triaged according to the START triage protocols and assigned a color based on acuity level. The triage level should be identified on the resident's chart and matched to all forms.

B. Resident Tracking Tools

1. Resident Evacuation Tracking Form 005 located in Appendix O– documents the evacuation triage level assigned to the resident as well as equipment needs, departing information, relocation information, mode of transportation.
2. Master Resident Evacuation Tracking Form 006 located in Appendix O- is a master list which documents and summarizes residents evacuated.

C. Resident Identification System

1. Triage at Staging Area: A START triage assessment must be made by the Discharge Triage Leader upon arrival to the Staging Area. As the assessments are completed triage colour coded tags will be used to identify what level of priority the resident has been given (RED, YELLOW, GREEN) for transport.
 - a. Discharge Triage Leader for each resident to complete a Resident Evacuation Tracking Form 5.
2. Resident Triage
 - a. A triage colour coded tag is to be assigned to residents utilizing the START System protocol,
 - i. A triage colour code category is to be assigned to the resident based on the resident's acuity, this information is to be recorded on the Resident Tracking form.
 - b. For all residents both those who were discharged and those who are being evacuated if possible are to be entered into the point click care within one hour or as soon as possible of the resident leaving the facility.

D. Resident Records and Supplies

1. Chart
 - a. To be kept with the resident at all times.
2. Medication/Personal Items
 - a. Medication and Personal belongings as the emergency escalates to be retrieved/salvage under the direction of the Medication/Resident Records and Personal Needs Leaders authority. Personal Items will be placed in bags and labelled with residents name and taken with the resident if there is time and it is safe to do so. Resident items sent with the resident need to be documented in the chart.

5.2.4. Demobilization

- A. In the case of a partial evacuation, Incident Commander will provide directives according to its communications policy, e.g. notify to announce all clear and return to normal operations can commence.
- B. In the event of a complete evacuation demobilization of the Alternate Care Site Plan will be followed. If no Alternate Care Site operational Emergency Communication and Notification procedures will be followed to notify staff when to return to work.
- C. The appropriate agencies are to be notified so that they can approve the reopening of the evacuated facility.

5.2.5. Job Action Sheets and Forms

All Team Leader Job Action sheets as identified in this plan have been placed in the Master and Sub Master Emergency Preparedness Manuals located in Appendix N.

Forms to be used during the emergency include the following and have been placed in the Master and Sub Master Emergency Preparedness Manuals located in Appendix O.

The following is a list of the Forms.

- O-1 Form 001 Incident Report- Briefing Meeting Sheet
- O-2 Form 002 Operational and Decision Making Log
- O-3 Form 003 Facility Systems and Infrastructure Assessment Status Form
- O-4 Form 004 Incident Needs Request and Message Form
- O-5 Form 005 Resident Evacuation Tracking Form
- O-6 Form 006 Master Resident Evacuation Tracking Form
- O-7 Form 007 Leader and Team Names Assignment List
- O-8 Form 008 Evacuation Leader Assignment Flow Chart