



Support for Seniors and the Community
to better Independent Living



CANES EMERGENCY preparedness plan

*In the event an emergency is in effect, please refer
to the following document*

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STAFF COPY

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Emergency Preparedness Plan Checklist

In the event an emergency is in effect, ensure the following actions are taken:

<input type="checkbox"/>	<p>Notify all members of the Agency by following the appropriate Emergency Notification Response protocol. Refer to SECTION 3 for Emergency Notification Protocols specific for the Agency. Please note Section 3.4 outlines the Emergency Control Structure that must be followed in the case of an emergency.</p> <ul style="list-style-type: none"> • CANES Community Care Notification Protocol Section 3.1
<input type="checkbox"/>	<p>Once the emergency in effect is identified, refer to SECTION 4 and follow the appropriate emergency/disaster protocol. Please note that tables in Sections 4.1, 4.2 and 4.3 indicate steps to follow based on the type of emergency/disaster. The tables in this section will outline the specific procedure to follow dependent on the emergency.</p> <ul style="list-style-type: none"> • Internal Emergencies/Disasters Section 4.1 • External Emergencies/Disasters Section 4.2 • Threatened Emergencies/Disasters Section 4.3
<input type="checkbox"/>	<p>The appropriate personnel must deliver their Health & Safety Responsibilities highlighted in Section 3.5. Individual Roles & Responsibilities during an Emergency Situation is outlined in Table 1.0.</p>
<input type="checkbox"/>	<p>Notify all relevant service and agency contacts as needed. Refer to APPENDIX 1 for all important contact information.</p> <ul style="list-style-type: none"> • Service Contracts Appendix 1.a • CANES Community Care Emergency Contacts Appendix 1.b
<input type="checkbox"/>	<p>Fire Plans with Floor Plans and Emergency Exit locations can be found in APPENDIX 2 for each Agency and Site.</p> <ul style="list-style-type: none"> • CANES Community Care Fire Plans Appendix 2.a
<input type="checkbox"/>	<p>In order to maintain this plan as effective, follow the Adverse Event Report Procedure and submit an Adverse Event Report if needed. Refer to SECTION 13 for Plan Maintenance.</p>
<input type="checkbox"/>	<p>Submit a Root Cause Analysis and Action Plan if requested by the CEO/COO. Refer to APPENDIX 4 for the Root Cause Analysis and Action Plan forms.</p> <ul style="list-style-type: none"> • Root Cause Analysis Appendix 4.a • Root Cause Analysis Action Plan Appendix 4.b

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SECTION 1: INTRODUCTION

CANES Community Care is dedicated to ensuring the safety of clients, and the health and safety of employees, within all of our practices. CANES will provide a safe and healthy environment by protecting employees from injury or occupational illness.

CANES Community Care will work to anticipate trends and events, plan for these events, and ensure that measures are in place, taking every reasonable precaution to ensure a safe and healthy work environment. We will meet or exceed acceptable industry practices and comply with legislative requirements.

CANES Community Care understands unexpected emergency situations may put clients and their families, and employees at risk, with potential negative effects on the organization. . This Emergency Preparedness Plan is an effective tool to support the organization to mitigate risk in emergency situations and/or natural disasters.

1.1 Purpose

To act as a comprehensive framework for CANES Community Care to effectively anticipate, respond to and recover from emergencies. The intent of this plan is to prevent, minimize and as far as possible, overcome the negative effects of emergency circumstances and/or natural or man-made disasters to our clients and their families, staff members, students, volunteers and the local community. The Emergency Preparedness Plan guides CANES Community Care to successfully respond to the needs of the community during planned or unplanned events/incidents.

1.2 Scope of Plan

The Emergency Preparedness Plan includes policies and procedures that shall be followed during emergency situations, with defined responsibilities for all CANES Community Care staff. The plan encompasses individual precautions and contact information to be executed appropriately in emergency situations.

1.3 Emergency

Definition: Any situation or occurrence of a serious nature, developing suddenly and unexpectedly, which places or has the potential to place the health, safety or security of the client and their family, staff, and/or community in jeopardy.

(Adapted from Canadian Centre for Occupational Health and Safety)

SECTION 2: HEALTH & SAFETY POLICIES

2.1 CANES Community Care

Health & Safety Policy 2013

We, the Board and management of CANES Community Care, in accordance with our belief in a community that finds ways of caring for each other, wish to express our vital interest in and concern for the health and safety of all of our employees and volunteers. The creation and maintenance of a working environment that is safe and healthy for all involved is a very important, ongoing strategic objective in the fulfillment of CANES' mission.

We will ensure that health and safety forms an integral part of all the endeavours at CANES and that all employees and volunteers are provided with the support and training necessary to fulfill their work tasks in a healthy and safe manner. We will take all responsible steps necessary to live up that responsibility. We will further ensure responsibility to promote and maintain safe and healthy working conditions for workers and volunteers under their supervision and will expect that every worker or volunteer in our employ will work in a manner which protects his or her health and safety by complying with the OHS Act and regulations and the policies and procedures of CANES.

We commit ourselves to working in partnership with CANES Community Care Joint Occupational Health and Safety Committee and see it functioning as the primary mechanism for implementing, evaluating and maintaining the Health and Safety Policy of CANES.

Dated: _____

Signed: _____

CANES Community Care
Chief Operating Officer

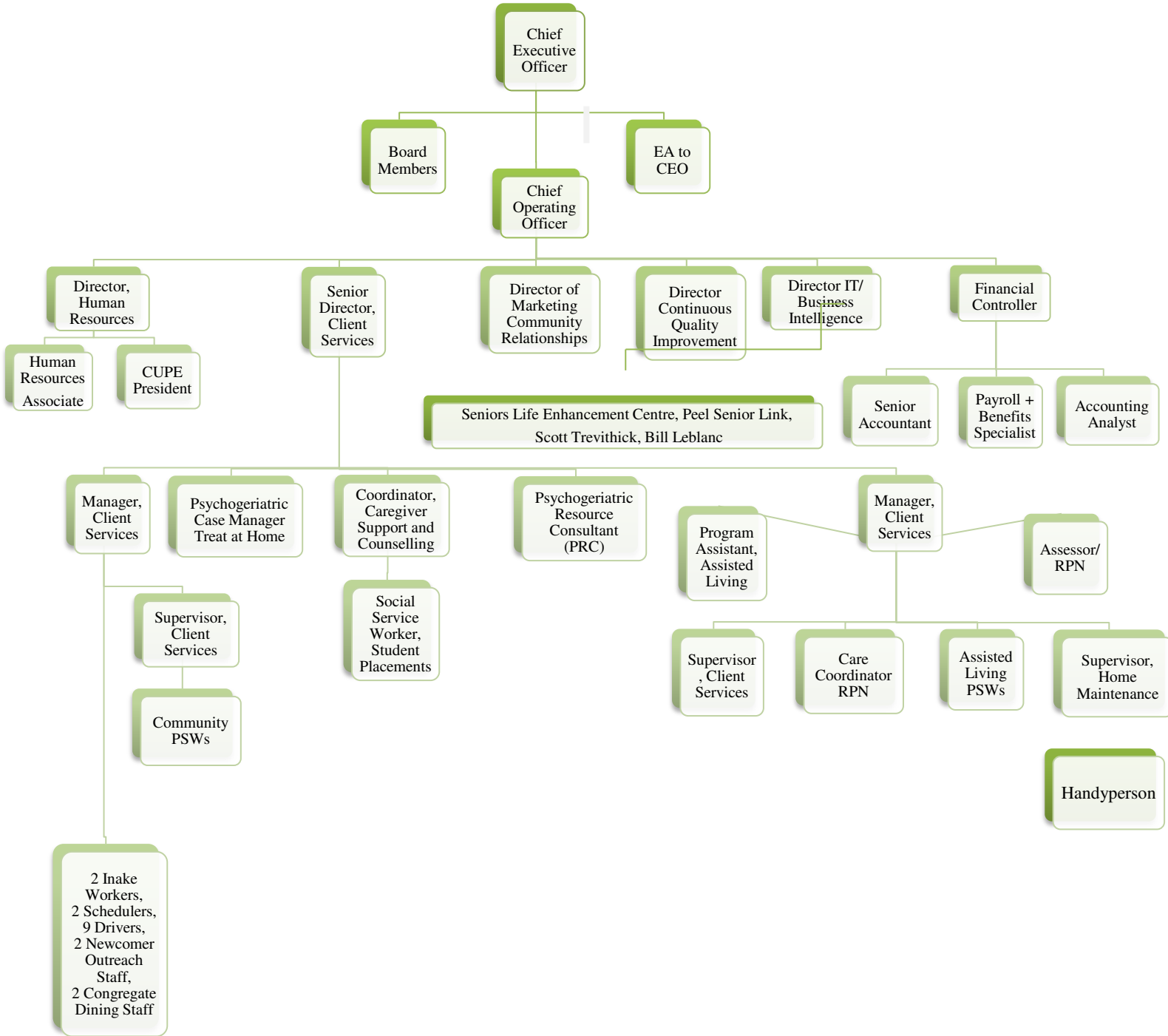
SECTION 3: EMERGENCY NOTIFICATION RESPONSE

The Agency website, Head Office and site voice mail messages will be used to disseminate information and update stakeholders in the event of an emergency. In the case of a health related emergency, reportable cases will be reported to Toronto Public Health and the Region of Peel Public Health Department.

In the event of an emergency, the CEO or designate is to be contacted and the appropriate notification protocol is to be followed. No employee, other than the CEO or designate will provide information verbally, written or otherwise expressed to the media.

Each site is outfitted with a crank radio that provides up-to-date information to be used in an emergency situation. 680 AM or 740 AM are all news radio stations

3.1 CANES Community Care Emergency Notification Protocol



3.2 Emergency Control Structure

Emergencies, crisis and disasters are events that require a coordinated response from multiple departments and potentially from emergency services and other community agencies under the control and direction of the Chief Executive Officer/Chief Operating Officer.

During a situation requiring an emergency response arises (i.e. Medical or injury emergency), the **Initial Response** for all staff is to **Call 911** and immediately notify emergency response agencies such as **Fire, Police** and/or **Ambulance**.

In the event an emergency/disaster is declared based on directive from the local health or government authorities, the CEO/COO will activate the following Emergency Response:

1. Contact all Department Directors by phone or e-mail and review safety conditions status of actual emergency condition.
2. Department Directors contact Client Services Manager/Program Manager or designate to initiate emergency response protocol.
3. All clients will be phoned to assess safety and immediate needs.
4. Department Directors will identify essential business functions/operations and services that must continue according to a pre-ranked client priority classification and operations as essential for business continuity.
5. All department Directors, Managers and Supervisors will have an updated Client Essential Service Record, and client emergency contact information for all staff.

3.3 Health & Safety Responsibilities

Agency

- Responsible for maintaining and endorsing Health & Safety Policies. CANES Community Care acknowledges it has a duty under the Occupational Health and Safety Legislation to take all reasonable precautions to protect all persons working on site (employees, volunteers, students and visitors of the agency).
- Establishing a Joint Management – Employee Occupational Health and Safety Program, that meets all Legislative requirements under the Occupational Health and Safety Act in Ontario.
- Ensuring all staff know where the Emergency Preparedness Plan is located and are aware of their roles and responsibilities during an emergency situation.

Senior Management

Chief Executive Officer/Chief Operating Officer

- Responsible for ensuring that the requirements of all Health and Safety regulations are met and the Emergency Preparedness Plan is reviewed and revised as required.

Department Directors

- Responsible for ensuring all processes and procedures used in their departments meet CANES Community Care's Health and Safety requirements.
- Ensure that all staff, volunteers and visitors are aware and comply with the appropriate Health and Safety guidelines in their area of responsibility.

Managers/Supervisors

- Ensure all employees are aware of Health and Safety rules and enforce safe work procedures, policies and legislated requirements.
- Advise employees of any health and safety hazards.
- Take all responsible precautions necessary for the protection of their employees.

General Information:

- 88 Humber College Blvd, Apt # 312 Assisted Living site is the designated alternate site for operations when 135 Queens Plate is inaccessible.
- In case of Power Outage clients will be advised to contact the CANES Emergency Line at **416-749-1599**. This phone number has call forwarding and voice mail features. This number will be provided to clients at the time of assessment and re assessment.
- Emergency Line phone is located at 88 Humber College Blvd. Scheduled Intake Worker/s will be responsible to answer this phone line.
- Staff members responsible for call out will write the date and time of the call on the call out list
- Staff members responsible for call outs will inform their designated alternates of their absences.
- All CANES staff member required to keep client, employee, brokerage, volunteer information or any other information related to CANES operations (in any form print, electronic) at their home as part of Emergency Preparedness Plan will treat this information as confidential and private. CANES Privacy and Confidentiality policy applies to such information.
- Text, email, phone messages will be as communication method with the staff.

Specific Responsibilities during an Emergency Situation:

- Upon Learning of an emergency COO calls CEO to receive approval to initiate the plan.
- **CEO** will call the Chair of the Board of Directors and funders.
- **COO** call Senior Management and Partners. ***Designated Alternate for CEO***
- **HR Director/Manager** calls the CUPE Local 3808 President
- **Financial Controller** will inform the staff assigned to the Finance Department on the nature of the emergency. During a period of downtime where CANES Financial information might not be accessible the department will focus on the core, or essential business. The payroll function will be processed by the Finance department. ADP software used to submit payroll information will be accessed

- remotely via the Internet in order to complete this task. Salaried staff will receive their usual pay. Hourly rate staff will be paid for the same number of hours as in the previous pay period. Any adjustments to the payroll will be processed during the next payroll run when conditions have returned to normal. The Financial Controller will update and report back to the Chief Operating Officer the status of the payroll run and any other financial issues which might have an affect the organization during the declared emergency period.
- **Director, Information Technology/Business Intelligence** will contact Senior Life Enhancement Centre, Peel Senior Link, Scott Trevithick, and Bill Leblanc.
 - **SD calls Managers Client Services, TAH, BSO and Care Giver and Counseling Program Staff and Program Partners and Sub contractors.** SD Client Services will keep the Emergency Preparedness Binder containing all the attachments at a secure place in his/her home. **Designated Alternate for COO**
 - **Manager Client Services-Transportation, Home Making and Community Programs** will print updated employee list every first Friday of the month and it at his/her home. Will print the transportation schedule on every Friday for coming week Saturday to Friday and keep a copy at his/her home . They will print a list of ADP and Dialysis clients with their contact number on every first Friday of the month to keep at his/her home in a secure place and provide a copy to SD client services. **Designated Alternate for SD Client Services and Manager Client Services –Supportive Housing**
 - **Manager Client Services- Supportive Housing, Home Maintenance** will print updated employee list from Procura every 1st Friday of the Month and keep it at his/her home. Will print an updated AL client list with contact information and risk code information for 88 Humber Hub and Spoke and Highway Terraces on every 1st Friday of the month to keep at his /her home in a secure place and provide a copy to SD. **Designated Alternate for SD Client Services and Manager Client Services –Transportation, Homemaking and Community Programs**
 - **Supervisor Client Services- Assisted Living** will print updated employee list from Procura every 1st Friday of the Month and keep it at his/her home. Will print an updated AL client list with contact information and risk code information for R.J. Smith and Westacres clients on every 1st Friday of the month to keep at his/her home and provide a copy to SD. **Designated Alternate for Supervisor Client Services –Community Support Services**
 - **Supervisor Client Services- Community Support Services** will print updated employee list from Procura every 1st Friday of the Month and keep it at his/her home. Will print an updated client list with contact information and risk code information for Community Clients and a separate list for CCAC clients on every 1st Friday of the month to keep at his/her home in a secure place and provide a copy to SD. Prints Community PSW schedule one day prior to the pay roll

/schedule pick day of the PSWs. ***Designated Alternate for Supervisor Client Services –Assisted Living***

- **Supervisor Home Maintenance** : Update brokerage worker list on November 15th and May 15th and provide a copy to SD Client Services for the Emergency Binder. Print a copy of the Handyman schedule on each Friday to keep at his/her home in a secure place and provide it to SD client services. On the day of the emergency call Handy Person and all clients scheduled for the service
- **Care Coordinator Homemaking Program**: Add the client phone number on the outlook calendar. Calls all the clients scheduled for Home visits and assist Supervisor Home Making in contacting clients and PSW
- **Newcomer Elderly Outreach Coordinators**. Update the client schedule one day before the event. Ccall the Group Program sites to advise them of the cancellation of the group program and call clients scheduled for home visit and group programs. If no access to data base, clients will not be called invidually, cancellation notice will be posted at event site.
- **Congregate Dining Coordinator**: Update the congregare dinning client schedule a day before the event. Call program site and clients scheduled for the congregare dining event. If no access to data base, clients will not be called invidually, cancellation notice will be posted at the CD site.
- **Psychogeriatric Resource Consultand, Care Giver Support Counselling Supervisor and Treat at Home Case Manager**. Add the client phone number on the outlook calendar. Call the clients scheduled for the homevisits and assist in duties as assigned at the time.
- **Attachments:**
 - A) Current Employee List
 - A.1) Client Services Team
 - A.2) CANES Office Staff Contact List
 - B) Current Client Lists with ERL Codes and Contact Information for
 - B.1)Supportive Housing,
 - B.2)Community Support Clients
 - B.3) CCAC clients
 - B.4) Dialysis Clients
 - B.5)ADP Clients
 - C) Assisted LivingSite and Contact Information List
 - D) Supplier List - PSW, Taxi, Brokerage workers
 - E) ERL codes definition
 - F) ADP and Dialysis Site Contact List
 - G) Congregate Dining Site List
 - H) NC South Asian program Site List

SECTION 4: TYPES OF DISASERS & EMERGENCIES

An **emergency** is defined as any situation or occurrence of a serious nature, developing suddenly and unexpectedly, and the health, safety or security of the client, staff, and or community are in jeopardy. (Source: Canadian centre for Occupational Health and Safety)

There are three common types of disasters which may affect the clients, staff, students, client family members, and volunteers of CANES Community Care:

Internal Disasters cause internal casualties or circumstances and can occur as a result of fires, explosions, bomb threats, floods, power outage, water supply interruption etc.

External Disasters overwhelm normal facilities and can occur as a result of storms, floods, fires in the community that affect essential services etc.

Threatened Disasters are impending natural catastrophes such as tornados, hurricanes, and snow storms etc., which threaten the delivery of services.

4.1 Internal Emergencies/Disasters

Appropriate actions for a given situation must be followed by all staff on duty.

Table 1.1: Internal Emergencies/Disasters During Operational Hours

SITUATION	ACTION
Fire	1. Follow Fire Procedures in the Fire Safety Head Office & Site policies
Bomb Threat/ Explosion	1. Follow Bomb Threat Procedure 2. Call 911 3. Follow all instructions from authorities
Flood	1. Follow Evacuation Procedures 2. Supervisors to ensure clients, staff, students & volunteers are safe 3. Unplug electrical appliances
Gas Leak	1. Follow Evacuation Procedures, using caution not to cause any ignition by scraping metal to metal at doors. 2. Open all doors 3. Do not use any lighters, matches 4. Unplug all appliances
Power outage	1. Use Cell Phones sparingly 2. Plug regular telephone, not requiring electricity, into wall jack 3. Use crank flashlight 4. Contact building superintendent/maintenance 5. Keep clients safe, warm and hydrated if hot 6. Follow Service Interruption Procedure

Water outage	<ol style="list-style-type: none"> 1. Contact building superintendent/management 2. Use emergency supplies as needed
Frozen Pipes	<ol style="list-style-type: none"> 1. Contact building superintendent/management 2. If possible, turn off all water supply valves (toilet/sinks) 3. Once water starts to flow to turn valves back on
No heat	<ol style="list-style-type: none"> 1. Contact building management 2. Ensure clients are safe and warm 3. Use space heaters if available 4. Follow evacuation procedures if necessary
Air conditioning malfunction	<ol style="list-style-type: none"> 1. Contact building management 2. Ensure clients are safe 3. Follow evacuation procedures if necessary
No land line telephone service	<ol style="list-style-type: none"> 1. Use cell phones and follow Service Interruption Procedure if needed 2. Change voice mail message on main phone advising of the situation and an alternate number to call 3. Notify COO of issue who will arrange for repair 4. Once phone line is repaired, change voice mail message back to original one
Servers or Server Room cannot be accessed	<ol style="list-style-type: none"> 1. COO will inform the Director, IT/BI. 2. Director, IT/BI will inform all parties as per CANES Emergency Protocol 3. All parties will be provided updates on the accessibility of the IT infrastructure at a minimum of every 24 hours via phone or email and/or as information becomes available. 4. The networking resource will be asked to standby for trouble shooting as soon as safely possible. 5. Once the systems are brought back online and fully functional, all parties will be informed of the status change by the COO.

4.2 External Emergencies/Disasters

Appropriate actions for a given situation must be followed by all staff on duty.

Table 1.2: External Emergencies/Disasters (within local community)

SITUATION	ACTION
Fire	<ol style="list-style-type: none"> 1. Follow Emergency Notification Protocol to stay in contact with all parties involved 2. Follow instructions of fire/police personnel
Power outage	<ol style="list-style-type: none"> 1. Use crank radio for updates - 680 AM or 740 AM are all news radio stations 2. Follow procedures for power outage above 3. Follow Emergency Notification Protocol if necessary to stay in contact with all parties involved
No land line	<ol style="list-style-type: none"> 1. Use cell phones

telephone service	<ol style="list-style-type: none"> 2. Use crank radio for updates - 680 AM or 740 AM are all news radio stations 3. If possible, change the main voice mail message to indicate situation and give an alternate cell number 4. If necessary, follow Emergency Notification Protocol to stay in contact with all parties involved
Water outage	<ol style="list-style-type: none"> 1. Use emergency supplies, water, hand sanitizer if necessary 2. Ensure clients are safe 3. Limit washroom access 4. Use radio, phone and internet to remain up to date on situation 5. Follow Emergency Notification Protocol to stay in contact with all parties involved
Gas supply outage	<ol style="list-style-type: none"> 1. Contact the gas company for updates 2. Ensure clients are safe and warm 3. If necessary, follow Emergency Notification Protocol to stay in contact with all parties involved
Nuclear Accident	<ol style="list-style-type: none"> 1. Close all doors and windows 2. Close all gaps in doors with blankets, etc. to block the flow of chemicals in the air 3. Contact authorities and follow all instructions 4. Follow Emergency Notification Protocol to stay in contact with all parties involved
Flood	<ol style="list-style-type: none"> 1. Close and block off all windows and doors to limit the water flow 2. Unplug electrical appliances 3. Ensure clients are safe 4. Contact authorities and follow all instructions 5. Follow notification plan to stay in contact with all parties involved
Gas Leak	<ol style="list-style-type: none"> 1. Unplug electrical appliances 2. Shut off HVAC (Centre II) to limit gas from entering the facility 3. Do not use any ignition sources 4. Close and block off all windows and doors to limit the gas entering the Centre 5. Contact authorities and follow all instructions 6. Follow Emergency Notification Protocol to stay in contact with all parties involved
Servers or Server Room cannot be accessed	<ol style="list-style-type: none"> 1. COO will inform the Director, IT/BI. 2. Director, IT/BI will inform all parties as per CANES Emergency Protocol 3. All parties will be provided updates on the accessibility of the IT infrastructure at a minimum of every 24 hours via phone or email and/or as information becomes available. 4. The networking resource will be asked to standby for trouble shooting as soon as safely possible. 5. Once the systems are brought back online and fully functional, all parties will be informed of the status change by the COO.

4.3 Threatened Emergencies/Disasters

Appropriate actions for a given situation must be followed by all staff on duty.

Table 1.3: Threatened Emergencies/Disasters

SITUATION	ACTION REQUIRED
Snow storm	<ol style="list-style-type: none"> 1. Listen to the radio for storm updates - 680 AM or 740 AM are all news radio stations 2. Follow Emergency Notification Protocol to stay in contact with all parties involved 3. Site Supervisors must ensure site has an adequate number of staff 4. Follow Extreme Weather Procedure if necessary
Tornado	<ol style="list-style-type: none"> 1. Use radio to keep posted of tornado warnings and watches - 680 AM or 740 AM are all news radio stations 2. Stay as low to the ground as possible 3. Stay away from windows and doors 4. After emergency is over, ensure clients and staff are safe 5. Follow Extreme Weather Procedure if necessary
Hurricane	<ol style="list-style-type: none"> 1. Use radio to keep posted of hurricane progress - 680 AM or 740 AM are all news radio stations 2. Stay as low to the ground as possible 3. Stay away from windows and doors 4. After emergency is over, ensure clients and staff are safe 5. Follow Extreme Weather Procedure if necessary
Earthquake	<ol style="list-style-type: none"> 1. Stay as low to the ground as possible 2. Stay away from windows and doors 3. After emergency is over, ensure clients and staff are safe 4. Follow Extreme Weather Procedure if necessary
Heat Waves/ Cold Spells	<ol style="list-style-type: none"> 1. Listen to the radio for extreme weather alerts 2. Follow Extreme Weather Procedure if necessary

Note: For all injuries, follow First Aid & Cardio-Pulmonary Resuscitation Policy & Procedure

SECTION 5: HAZARDS, RISKS & ASSETS

5.1 Risk Assessment

Risk Assessment: A risk assessment is conducted to determine a list of potential threats and their probability and impact on CANES Community Care. Probability of such an event affecting CANES Community Care and the surrounding community measures as Low (1), Medium (3), High (9).

The impact of the potential threats on CANES Community Care, client and service delivery measured as Low (1), Medium (3), High (9).

Table 1.4: Risk Assessment

#	Potential Threat	Probability	Possible Outcomes Consequences	Impact
1	Infectious Disease – Severe (Pandemic)	9	Loss, panic, staff shortage, service disruption	9
2	Infectious Disease	3	Service disruption, hospitalization, loss	3
3	Severe Weather	3	Service disruption, client isolation, property damage, staff shortage, financial	9
4	Blackout	3	No heat, light, power, service disruption, loss time	9
5	Fire	3	Service disruption, panic, property damage, injury, loss, liability	9
6	Fog	3	Staff shortage, service disruption	3
7	Flood	1	Service disruption, loss,	3*
8	Workplace Violence	1	Injury, loss time, liability	3
9	Severe Injury	1	Hospitalization, death, investigation	9
10	Transportation accident	3	Injury, loss, liability	3
11	Chemical Spills	1	Injury, loss time, liability	3
12	Medical Emergencies	3	Hospitalization, loss, liability	9
13	Communications system interruptions	1	Service disruption, loss time	3
14	Physical/information security breach	3	Liability, investigation	9
15	Earthquake	1	Service disruption, panic, property damage, injury, loss	9
16	Bioterrorism	1	Hospitalization, loss	9

* at 135 Queens Plate Drive

SECTION 6: EVACUATION PROCEDURE

The Chief Executive Officer or Designate will declare an evacuation if necessary. An evacuation will occur in the event the location is unable to be used for the provision of client or administrative services.

The following procedure must be followed in the event of an evacuation:

- Remain calm and do not use elevators unless instructed by trained emergency personnel
- Proceed to the nearest emergency exit and leave the building in an orderly and safe manner – Do not run
- Hold handrails and walk in a single file on the opposite side of the door (to allow others to enter and/or pass by) while using the stairwell
- Make way for Emergency Service Providers who may travel up the stairwell
- Once out of the building, proceed to the designated assembly location as far as possible from the building (under '2' sign in main parking lot at Head Office)
- Ensure manager/supervisor is aware of your presence and stay together
- Fire Wardens/Fire Marshalls will do a head count of clients, staff, volunteers and students after evacuation – Any missing persons must be reported to the Fire Department
- Fire Wardens/Fire Marshalls or senior management staff will do a head count of office/administrative staff – Any missing persons must be reported to the Fire Department
- Return to the building only after the Emergency Personnel gives the all clear signal
- In the event Emergency Personnel do not give a clear signal and no one can re-enter the building for an extended period of time, staff will proceed and escort all clients to established off site shelters
- Fire Wardens/Fire Marshalls or delegated office administrative staff will be responsible for taking the Client Emergency Contact List to alert family members and/or arrange for Transportation services to take clients home (if applicable)

SECTION 7: SERVICE INTERRUPTION PROCEDURE

In the event an emergency or disaster has occurred and the Agency may not be able to operate/provide service, the CEO or designate will evaluate the situation and determine whether to cease service.

1. The CEO will discuss the situation with all parties involved and determine a short term and long term resolution.
2. The plan will be communicated to Board, staff, clients, students and volunteers using the Emergency Notification Plan.
3. The CEO or designate will monitor the situation and communicate as required.

SECTION 8: FIRE SAFETY PROCEDURE

CANES Community Care maintains a fire safety plan for its head office employees and visitors and as well for all sites. The purpose of the Fire Safety Procedure is to ensure the safety of health office employees and site staff during an emergency situation or drill.

It is everyone's responsibility to recognize and report any fire hazard immediately. Please Refer to Appendix 2 for Fire Plans, Floor Plans and Emergency Exit Locations in Head Offices and all Sites. Please refer to Appendix 5 for Fire Safety and Prevention Policy.

8.1 Fire Safety Procedure: Head Office

In the event of a Fire and an alarm is triggered, all staff and volunteers are to evacuate immediately without verbal directions.

REMAIN CALM – USE STAIRWELL – DO NOT USE ELEVATORS

Upon discovery of smoke or fire:

- Evacuate the fire area while taking necessary keys
- Close all doors behind you (note: do not lock any doors)
- Activate the nearest fire alarm pull station
- Call 9-1-1 and give your name, address and location of fire
- Evacuate the building (refer to Evacuation Procedure)
- Proceed directly to pre-determined collection area and follow instructions from your Fire Warden
- Do not return to the building until it is declared safe to do so by a Fire Official (Fire Department Personnel, the building superintendent, or Fire Warden)

Upon hearing a fire alarm signal – Evacuation:

INTERMITTENT ALARM - Prepare to evacuate the building, awaiting further instructions via the Public Address System

CONTINUOUS ALARM - Evacuate the building immediately, taking the following precautions.

- Proceed to the nearest EXIT stairwell while taking necessary keys
- Close all doors behind you (note: do not lock any doors)
- Prior to opening the door, feel the bottom and top, and door knob with the **back of your hand** – **If hot:** brace yourself against the door and open slightly – If there is air pressure or hot drafts, close the door immediately
- If no fire or smoke is found in corridor, proceed to the stairwell and follow the same procedure as above for door to stairwell – Proceed if safe
- If the corridor is not safe, proceed to the other side of the building to the other stairwell that may be clear or return to your area

If emergency situation prevents evacuation:

- Close any doors – do not lock them for entry of fire personnel
- Call 9-1-1, giving your name, address and the emergency fire situation

- If possible, seal all cracks where smoke can enter
- Stay below smoke level and move to the most protected area
- Remain calm while waiting for fire personnel

In the event of a fire drill:

- Immediately proceed to the nearest stairwell while taking any necessary keys with you
- DO NOT USE ELEVATORS
- Lock office doors behind you
- Evacuate the building and proceed to the pre-determined meeting area and follow instructions given by Fire Warden
- Do not return to the building until it is declared safe to do so by a Fire Official (Fire Department Personnel, the building Superintendent or Fire Warden)

Fire Warden(s) Responsibilities:

- Identify staff that require assistance and provide list to building superintendent
- Attend training opportunities provided by building management
- Fill out an Emergency Checklist and Fire Evacuation List upon sounding of alarm (drill or otherwise)
- Ensure Head Office fire extinguisher is checked and maintained annually by qualified personnel

Table 1.5 Head Office Fire Wardens by Agency

CANES Community Care	
Fire Wardens	Director, Human Resources (Norma Mazzolino) Sr Director, Client Services (Jyoti Brar)

8.2 Fire Safety Procedure: Sites

In the event of a Fire and an alarm is triggered, all staff and volunteers are to evacuate immediately without verbal directions.

IMPORTANT: It is the responsibility of the fire and emergency personnel to escort the seniors out of the building.

Upon discovery of fire or smoke:

- Pull the fire alarm and call 9-1-1 and give your name, address and emergency situation
- If in office ensure office door is secure and all office windows are closed
- Exit the building immediately
- If with a client, ensure they are safe, close the door and exit the building immediately
- Always use the nearest stairwell and do not use the elevators

- Once outside the building, staff are expected to be available to receive and support the seniors as they are escorted out of the building by fire personnel
- Return to the building once it has been declared safe to do so by Fire Department and/or building management

Upon hearing a fire alarm signal- Evacuation:

- Proceed to the nearest exit while taking any necessary keys
- If with a client, ensure they are safe
- Prior to opening the door, feel the bottom and top, and door knob with the back of **your hand** – **If hot:** brace yourself against the door and open slightly – If there is air pressure or hot drafts, close the door immediately
- If no fire or smoke is found in corridor, proceed to the stairwell
- If the corridor is not safe, proceed to the other side of the building to the other stairwell that may be clear or return to your area
- Once outside the building, staff are expected to be available to receive and support the seniors as they are escorted out of the building by fire personnel
- Return to the building once it has been declared safe to do so by Fire Department and/or building management





If emergency situation prevents evacuation:

- Call 9-1-1, giving your name, address and the emergency fire situation
- Close any doors – do not lock them for entry of fire personnel
- If possible, seal all cracks where smoke can enter
- Stay below smoke level and move to the most protected area
- If with client, ensure they are safe and comfortable
- Remain calm while waiting for fire personnel

In the event of a fire drill:

- Follow the procedure that has been established by the building management at your site
- Do not return to the building until it is declared safe to do so by a Fire Official (Fire Department Personnel or the building Superintendent)

8.3 Use of Fire Extinguisher

- | | | |
|----------|---|---|
| P |  | Pull the pin |
| A |  | Aim |
| S |  | Squeeze |
| S |  | Sweep (right to left) at the base of the flames |
- Fire extinguishers are serviced annually by a qualified service technician.

It is not recommended that staff use an extinguisher when encountering fire, however, if fire is small and contained, follow these instructions

AND
ALWAYS CALL 911

Emergency Supply List: The following supplies will be on hand at all times in case of emergency (Corporate Office/site locations):

- Bottled water and Pre-packaged food
- Fully stocked first aid kit
- Crank Flashlight and Crank Radio

SECTION 9: EXTREME WEATHER PROCEDURE

This procedure will allow CANES Community Care to ensure essential duties of client care are completed during episodes of extreme weather in a manner that promotes client and staff safety.

It is the responsibility of the Chief Operating Officer and Senior Director, Client Services to monitor weather reports for development of extreme weather.

When it becomes apparent that extreme weather is possible, the Supervisors should review with staff and identify the following:

- Essential client duties that must be completed i.e. medication reminders or administration
- In the days leading up to the extreme weather, ensure clients have adequate food supplies in house; complete additional meal prep in advance
- Care plan options if staffing is limited:

i.e. cancel non-essential services if staff is not available; cancel showers, cancel bed making, where possible completing security checks by telephone, contacting client families and ask them to assist

- Determine which staff live close to site and which staff are able to get to work by bus
- If staffing is limited, can two teams be combined into one?

At the call of the Chief Operating Officer and Senior Director, Client Services,

- All non-essential visits (in both the hubs & spokes) will be cancelled and where possible teams be combined into one allowing two staff to travel together to complete the essential duties for the clients needing essential services.

1. If client visits are going to be cancelled or late due to limited staffing, clients must be notified by telephone.
2. Staff cannot leave their shift until replacement staff has arrived.
3. Staff working a double shift during extreme weather should be provided with a meal stipend (up to \$ 10.00 via Petty Cash).

Note: Site Supervisors must report ALL incidents (ie. Power outages, cancellations) to the Head Office immediately.

SECTION 10: FIRST AID

CANES Community Care client service staff are required to be competent in providing First Aid to clients and staff who are injured

Purpose: To set out a procedure for staff to follow when a client or staff is injured and needs First Aid.

Procedure:

First Aid: Providing care as a first responder to someone in need of urgent/immediate care for illness or injury.

Competency will be determined by a current First Aid certificate on file, issued by a recognized provider of First Aid training. The minimum standard is Adult First Aid.

First Aid:

1. Assess the client and the situation.
2. Provide First Aid, as trained.
3. If First Aid inadequate or it appears that First Aid is likely to be inadequate, activate Emergency Medical System (EMS) (call 911)
4. Document your observations, actions and client response in client's record.
5. Complete an Adverse Event Report.

In the event of an unexpected death confirmed by EMS, Police, Coroner or other Physician:

Whenever there is an unexpected death, police are required to treat the death as a homicide until there is an explanation for the death. Therefore the police will ask “**5 Ws**” –

Who – who passed away, who saw the client last, who reported the death, who is the next of kin

What – to the best of staff's knowledge what occurred/happened

Where – where was the client found

When – when was the client found, when was the client last seen alive

Weapon – was a weapon involved – if a weapon was involved, a tactical (SWAT) team will be dispatched.

Don't look at the gathering of this information as a negative thing. If police don't gather this information and later it is determined that the death was a homicide then in many cases it is too late to ask and evidence will be lost.

Police will ask for the name, address, phone number and date of birth of the staff reporting the death as well as from the staff who last seen the client alive. It is important that the police speak to the person who last saw the client alive, so police may call staff at home if staff have already left work. Staff and family names, addresses and phone numbers are not considered as private under Common Law or statutes, in these circumstances.

If the staff who last saw the client alive is not present, police will ask as part of the standard questioning for a description of the staff member (height, gender, hair colour, skin colour, eye

colour) of the staff. Again these questions are personal in nature, but necessary in case police need to locate the staff witness. These descriptions of possible witnesses, suspects or people of interest are vital to a police investigation.

Keep in mind the police are only doing their jobs – they conduct this type of investigation whenever there is an unexpected death including deaths in Long Term Care, retirement homes, private homes and hospitals.

SECTION 11: CLIENT SERVICES: EMERGENCY RESPONSE PROCEDURES

11.1 Client Services – Closure Protocols

Closure Procedure: Between 6:00a.m. and 7:00a.m. SD Client Services will contact Manager Client Services to advise the decision made by the Senior Management. SD Client Services and Manager Client Services will contact Supervisors Client Services, Supervisor Transportation, Supervisor Home Maintenance, NC Elderly Outreach Workers, Coordinator Caregiver Support and Counselling. All Personal Support workers will be advised of the closure using mass voice mail system by the Supervisors Client Services. Site Supervisors must report all incidents to the Head Office immediately.

Essential Services: Definition: Meeting the needs of the clients for whom availability of services is critical for their health, safety and survival, while maximizing the utility of available human and material resources.

Congregate Dining, Newcomer Elderly Outreach Group Programs are not considered essential services and will be closed in the event of an emergency/pandemic. Staff may be deployed to assist in other programs. The program coordinator/outreach workers will call all the clients, volunteers, educational/entertainment facilitator scheduled to attend the programs to advise them of the closure of the program. The program coordinators will report back to Manager Client Services that all clients, volunteers other persons scheduled to attend the programs have been informed of the closure.

Caregiver Support and Counselling: Program Coordinator will call all the clients scheduled to receive a visit that day of the agency closure and report back to Manager Client Services that all clients have been informed of the closure.

Transportation: In the event of an emergency and depending on the type of emergency all non-essential rides will be cancelled. If road ways are safe to drive essential rides will be provided

Essential rides are: Rides to dialysis, to hospital for surgeries/procedures/diagnostic testing etc., to specialist appointments. If roadways are unsafe to drive all rides will be cancelled. Supervisor Transportation will contact the drivers and schedulers to inform of the closure. Schedulers will contact all the clients scheduled to receive service to inform them of the closure. Schedulers will report back to the Supervisor Transportation after all clients have been contacted. Supervisor will report back to SD/Manager Client Services.

Home Maintenance: Manager Client Services will contact Supervisor.

Supportive Housing: Manager Client Services will contact the Supervisors Client Services, Supportive Housing program to inform them of the closures. Supervisors will work together to contact the staff on site and staff scheduled to work at all Supportive Housing sites. Supervisors will ensure that all sites are staffed by minimum one PSW for the next 24 hours. Supervisors will contact all the clients to inform them of the situation. Only essential services will be provided to isolated and vulnerable clients according to their risk ratings (see ERL codes).

Essential Services include: Emergency Response System (pager and Lifeline) clients and caregivers can contact on site staff through ERS or by telephone. On site Staff will respond to all calls received through pager and Lifeline as soon as possible. All callers will be directed to call 911 for medical emergencies.

Security Checks:

Activities of Daily Living: Clients receiving assistance with activities listed below and who do not have any other support system will receive services during an emergency.

Personal Care: Mouth Care, Transferring/positioning/turning, Dressing/undressing, Toileting, includes empty/change leg bag, Bowel routines, Assistance with eating, Assistance in taking pre-poured medication, changing non-sterile dressing.

Washing/showering, even though an essential service will be suspended during the emergency.

Homemaking: preparing /setup meals, Dishes, Laundry, Change of Linen only if necessary due to incontinence.

Community Support, Respite Care: Manager Client services will contact the Supervisor Client Services, Community Support Program to inform them of the closures. Supervisor will work with schedulers to contact the staff scheduled to work on that day. Supervisors will contact all the clients scheduled to receive services on that day to inform them of the situation. Only essential services will be provided to isolated and vulnerable clients according to their risk ratings (see ERL codes).

Activities of Daily Living: Clients receiving assistance with activities listed below and who do not have any other support system will receive services during an emergency.

Personal Care: Mouth Care, Transferring/positioning/turning, Dressing/undressing, Toileting, includes empty/change leg bag, Bowel routines, Assistance with eating, Assistance in taking pre-poured medication, Changing non-sterile dressing.

Washing/showering, even though an essential service will be suspended during the emergency.

Home making: preparing /setup meals, Dishes, Laundry, Change of Linen only if necessary due to incontinence.

Emergency Preparedness: All programs will plan ahead to be prepared for any emergencies/pandemic.

Congregate Dining New Comer Elderly Outreach Program: Program Coordinators of these programs to maintain an updated list of clients/volunteers/educational event facilitator attending the programs on a weekly basis in Procura. The list must contain their contact phone numbers.

Transportation:

Supervisor to maintain updated driver schedules in Procura, identifying the purpose of the rides. Supervisor Transportation, Manager Client Services and SD Client Services to keep an updated contact list with phone numbers/personal email of the transportation team. A copy of the schedule will be printed on Friday for the coming week. Manager Client Services –Transportation will keep this copy at her home. Following items to be available on all vehicles at all times:

- Personal Protective Kit containing: mask, gown, gloves, hand sanitizer
- First Aid and Transportation Safety Kit
- Fire extinguisher

Home Maintenance:

Supervisor will keep an updated handyman schedule in Procura. Supervisor Home Maintenance, Manager Client Services and SD Client Service to keep an updated contact list of the Home Maintenance team. Handy man to carry a PPE kit containing mask, gown, goggles and hand sanitizer.

Community Support Services:

Supervisors to maintain an updated client list with predefined priority ranking (ERL codes). List will be printed on a monthly basis until back up computer server is ready, at that time list will be posted on the shared drive on a monthly basis. Manager Client Services and SD Client Services to keep the client list with ERL codes with the on call package. Schedulers will maintain an updated list of client/worker schedules in Procura. Supervisors, Manager and SD Client Services will each have an updated contact list with phone numbers/email addresses of Community Support Services team and all Personal Support Workers. Supervisors to maintain a stock of PPE kits available in scheduling office.

Supportive Housing Services:

Supervisors to maintain an updated client list with predefined priority ranking (ERL codes). List will be printed on a monthly basis until back up computer server is ready, at that time list will be posted on the shared drive on a monthly basis. Supervisors will maintain in stock following items at all sites: non-perishable food, a case of water, flashlights, batteries for flashlight, pagers, emergency first aid kit as per Health and Safety requirements. Supervisors to maintain updated Supportive Housing client/worker schedule on shared drive. Supervisors, Manager and SD Client Services to keep an updated contact list with phone/numbers/email addresses of Supportive Housing team and all Personal Support Workers.

Fire Safety: Fire safety guidelines with identified meeting place(s) will be kept posted at all sites. All false Fire Alarms to be treated as fire drills and reported on Event Report

form. Supervisors to follow up with staff who did not evacuate as per fire safety guidelines. Supervisor will provide on a monthly basis, list of active clients identifying their mobility to the building management for the building Fire Safety box. Supervisor will maintain updated worker schedules in the Fire Marshall bag. Staff assigned to carry pager will act as Fire Marshall for the day and will carry the Fire Marshall bag. In the event Fire Marshall will inform the Fire Department of the staff on site who are not present at the meeting place.

Power Disruption: In case of power outage staff on site will inform the on call supervisor. Staff on site in consultation with supervisor will make the necessary changes to schedules to provide essential services to clients with ERL code 1 and 2 (see ERL Code definition sheet). Staff will also follow the guidelines for “When elevators are not working” to provide service to these clients. Staff on site will inform the clients whose services will be cancelled. Hourly phone security checks will be done on clients with Lifeline. If the power is not restored by the end of the shift at least one staff person will stay on site until the arrival of the staff from next shift.

Home at Last (HAL): Schedulers will keep an updated schedule of all HAL pickups arranged in Procura. Schedules will inform Manager and SD Client Services of any discharges scheduled after 1630 hrs and on weekends. In an emergency Home at Last rides will only be provided if hospitals need assistance to evacuate patients. All PSWs will carry PPE kits with them

11.2 Medical Emergency Response Protocol

In the event a client is experiencing a medical emergency (i.e. chest pain, breathing difficulty, falls, unconscious etc.)

1. Assess the client’s responsiveness and chief complaint
2. Give first aid if trained or if life threatening
3. Call 911 immediately and request Emergency Medical Services (EMS)
4. Do not attempt to move a person who has fallen and who appears to be in pain
5. Staff should stay calm and remain with the client at all times and reassure the client that help is on the way
6. Ensure the client is comfortable as possible
7. Upon arrival of EMS, brief the Paramedics on what actions you have taken with the client
8. Retrieve the name of the hospital the client is being taken
9. Report the incident to your Supervisor/Manager and complete an Event Report

SECTION 12: BOMB THREAT PROCEDURE

All bomb and similar threats involving CANES Community Care will be appropriately assessed and responded to in order to protect clients, staff, client family members, students, volunteers, tenants and property. It is important that all threats are carefully assessed and properly evaluated to determine the most appropriate course of action.

This procedure provides immediate direction to any person who may receive a bomb threat or similar threat or observe a suspicious article which may be associated with a bomb or similar threat involving CANES Community Care.

Bomb Threat Definition: Any direct or indirect threat or warning in respect of a real or simulated explosive or incendiary (flammable) device, or other similar source of harm.

1. If threat is by telephone:

- Prolong the call as long as possible. Keep the caller talking and follow the questions in the Telephone Bomb Threat Questionnaire posted on the site telephones (Please refer to Appendix 3)
- Give the Telephone Bomb Threat Questionnaire to emergency personnel
- Do not replace the phone handset because it allows for tracing the call
- Treat the threat as genuine

2. If a suspicious object is found:

- Do not touch the object
- Keep the area clear

3. If threat is by letter:

- Do not handle more than necessary
- Keep the area clear
- If possible, put the letter in a plastic envelope/bag to preserve any evidence

Important notes for ALL BOMB THREAT CASES

- **TURN OFF ALL CELL PHONES** – Do not use cell phones near any electronic equipment (i.e. Computer) that may trigger a device
- Call 911 to report to police when safe to do so
- Inform supervisor of direct or indirect threat
- Inform building superintendent

SECTION 13: TRAINING, DRILLS & EXERCISES

Training

CANES Community Care will have a mandatory training on health and safety for all employees annually. This will help control Accidents/Incidents, hazardous conditions and near misses in our organization.

SECTION 14: PLAN RECOVERY/MAINTENANCE

Plan Maintenance

To be useful and effective, this emergency plan must be kept current. All hazards and potential dangers must be reported immediately to the supervisors/managers.

14.1 Adverse Event Report Procedure

An Adverse Event report and root cause analysis of all near misses, adverse/sentinel events provides important information relating to incidents affecting the safety of clients, volunteers, staff and other individuals. The report will establish a standard procedure for reporting and conducting a root cause analysis of adverse/sentinel events & near misses.

Definitions:

Adverse Event – is an event that has a negative outcome upon a client, staff, visitor, or volunteer.

Sentinel Event – is an event that has a significant negative outcome upon a client, staff, visitor, or volunteer. Significant risk and/or loss of function, fracture of major bones, significant blood loss, CPR or death is classified as a “sentinel event”.

Near Miss – is an event that could have a negative outcome on a client/staff/visitor/volunteer had the circumstances not prevented the actual event from happening. Reporting of potential hazards also is classified as a “near miss”.

Non-Punitive Supportive Environment - No punishment or disciplinary action will be imposed for any specific error reported, except:

- a. Knowingly intentional acts with intent to harm or deceive.
- b. In the event, it becomes clear that staff competency is the root cause for a pattern of errors, management will make every reasonable effort to ensure staff can reliably deliver safe care. If it becomes clear that a staff member cannot practice in a reliably safe manner, in spite of education and counseling, this situation will be treated as a staff competency issue through normal disciplinary procedures.

Procedure:

The Adverse Event Report will be used for the following events, but not limited to:

- Falls and injuries
- Increased or sudden illnesses/emergencies/of clients,
- Adverse events involving visitors and volunteers to sites or Head Office,
- Medication events
- On the job injuries of staff
- Events of violence,
- Equipment failures,
- Loss of property, or
- The “near miss” of any of the above

Site staff will:

- Complete the Adverse Event Report and leave for the Supervisor

The Program Supervisors/Supervisor will:

- Review the Adverse Event Report, complete the “Supervisor” section by classifying the event and forwarding the report to the Coordinator, Training & Development
- Provide follow-up as required and determine appropriate prevention tactics to prevent a repeat of the event
- Debrief staff and clients/families regarding action plan to prevent re-occurrence of incident and lessons learned as a result of the incident
- File the original Adverse Event Report in the client or staff file
- Verbally report sentinel events to the Director, Operations upon completion of the Adverse Event Report

The Senior Director, Client Services will:

- Record the faxed Adverse Event Report in a tracking system and forward the report to the Chief Operating Officer.
- Forward any items identified on the Adverse Event Report as a health and safety concern to the Joint Occupational Health and Safety Committee and the C.O.O for review
- File the faxed Adverse Event Report
- Analyze the data from the tracking system on a quarterly basis
- Provide data to the Board and staff on a quarterly basis
- Initiate improvement activities for systemic issues identified

The Manager, Client Services will:

- Review the Adverse Event Report for completeness and follow-up as necessary with the supervisor
- Forward the Adverse Event Report to the Senior Director, Client Services

A Root Cause Analysis will be used to:

- Ensure agency wide identification and investigation of sentinel and adverse events protocol for all serious occurrences
- Evaluate the root cause of the event
- Identify those causative issues, systems or processes that represent core reasons for occurrence of the event and
- Develop an action plan that will prevent re-occurrence of the event

The Root Cause Analysis will be initiated when a request is made by the C.O.O. Please refer to Appendix 4 for Root Cause Analysis and Action Plan.

A Root Cause Analysis team, comprised of Managers, Supervisors and direct service staff involved in the event will analyze the occurrence.

The Root Cause Analysis will contain the following steps:

- the details of the event

Appendix A – ERL Codes Definition		
Emergency Responses Level (ERL)	Indicators	Examples
ERL 1 Very High	<ul style="list-style-type: none"> • Client requires assistance within 1-12 hours. • Clients may require mechanical/electrical equipment to sustain life. • Clients requires professional assistance in the event of an evacuation (i.e. ambulance) • Client has very limited or no available family support 	<ul style="list-style-type: none"> • Complex, fragile health status. • Client on life-sustaining electrically powered equipment with no available family support (e.g. ventilator, suction, oxygen compressor) or client completely dependent on others for care – CCAC is contingency plan. • # visits / hours are 7+ / week • Unstable, life threatening or quickly deteriorating health status • Significant unmet medical, physical, or functional needs- unable to perform ADL on own and has no supports • Significant risk of hospitalization if service(s) not provided or cannot be discharged if service is not provided • Absence of caregiver or community supports and cannot manage alone
ERL2 High Risk	<ul style="list-style-type: none"> • Client requires assistance within 13-24 hours. Clients may have high needs and a limited support network. • Client may require non-professional assistance in the event of an evacuation 	<ul style="list-style-type: none"> • Client on life-sustaining equipment with limited family support or client highly dependent on a caregiver or attendant care/CCAC. • People of all ages with heart conditions • People of all ages with chronic lung conditions • People of all ages with compromised immune systems • Children < 2 years or previously treated with ASA for conditions like juvenile rheumatoid arthritis and at risk of Reyes Syndrome • Potential for falls or unsafe situations, occasional wandering
ERL3	<ul style="list-style-type: none"> • Client requires assistance within 25- 	<ul style="list-style-type: none"> • Client has support network which is available to assist for up to 72 hours. Health is more stable

Medium Risk	72 hours. Clients in this category may be similar to a higher risk client but remain uncompromised because of a good support network.	<p>but potential for burnout and backup capacity is required.</p> <ul style="list-style-type: none"> • Pregnant women in the second and third trimester • Predictable deterioration or a recent change in health status • Client can be taught to do interventions with some oversight / monitoring and lack of service will not create severe adverse consequences • May be at risk of hospitalization if service delayed for too long or health status changes
ERL4 Low Risk	<ul style="list-style-type: none"> • Client can be placed on hold for up to 5 days. • Clients in this category may have other support to provide treatment/ care or care may have only an assessment component with minimal follow-up needed. 	<ul style="list-style-type: none"> • Client may live alone with complex, stable health needs; reliable, functional contingency plan exists over a longer term. • Important to health status but has been given initial teaching and has capacity to continue on own with minimal support • Limited caregiver support or some caregiver stress but can generally manage on own • Some unmet medical, physical, or functional needs – can perform ADL and has support • # visits / hours are 4-6 / week
ERL 5	<ul style="list-style-type: none"> • Client service can be placed on hold until the emergency situation has resolved. 	<ul style="list-style-type: none"> • May live alone but client is stable or minimal care needs that can tolerate service disruption • Generally stable, no safety concerns and coping • Few unmet medical, physical, or functional needs • Service or interventions started in hospital or home and person can generally manage on own • Low risk of hospitalization... not currently hospitalized • Caregiver available and managing adequately • # visits / hours are 1-3 / week • Low risk for complications

- the task that was being performed
- the day and time the event occurred
- the sequence of events that led to the event
- the reason the event occurred
- identification of risk reduction strategies

Documentation of a Root Cause Analysis Action Plan:

- The supervisor/manager will submit a Root Cause Analysis Action Plan report to the Director 5 days from the time of the Root Cause Analysis was initiated
- The Director will establish time line to assess effectiveness of action plan
- The Director will submit a comprehensive Root Cause Analysis and report to the CEO/COO
- Senior Management will review and evaluate the Root Cause Analysis process and the impact of the risk reduction activities, quarterly or as required
- Original copies of all reports and the Root Cause Analysis will be kept for one year in the Director's office
- Reports must be kept by the agency for 7 years

Appendix B – Congregate Dining Site List

Congregate Schedule and Program Days

A) Sites, Contact and Scheduled Days

1. Gord & Irene Risk Community Centre (G&I) 2650 Finch Ave W North York ON M9M 3A3 Management: Claudio (416) 395-7952 (3rd Wednesday of the month)
2. Highway Terraces Apartments (HT) 2314 Islington Avenue Etobicoke, ON M9W 5W9 Management: 4167452891
3. (2nd Tuesday of the month)
4. Fellowship Presbyterian Church (AGC) 80 Thistledown Blvd Toronto, ON Administration: (416) 741-3205, Church Member: Marian Nicholl 416-748-1053 (4th Tuesday of the month)
5. R.J. Smith. Apartments. (AGC) 101 Kendleton DR. M9V 1V1. Canes Community Care 416-742-0511 RJ – superintendent: Sam Corrado 416-981-5765 (Every Thursday)

B) Exceptions

- on Holidays.
- G&I risk may change to following Wednesday during March break.
- HT date is works with No Frills bus which come every 1st & 3rd Tuesday of the month. If they change their schedule, we'll have to adjust accordingly.

C) Scheduled Dates for the year 2013/14

July 2013:

RJ – 4th, 11th, 18th, 25th
HT – 9th
AGC – 23rd

Aug 2013:

RJ – 1st, 8th, 15th, 22nd, 29th
HT- 13th
AGC – 27th

Sep 2013:

RJ – 5th, 12th, 19th, 26th
HT – 10th
G&I – 18th
AGC 24th

Oct 2013:

RJ – 3rd, 10th, 17th, 24th, 31st
HT – 8th
G&I – 16th

AGC – 22nd

Nov 2013:

RJ – 7th, 14th, 21st, 28th

HT – 12th

G&I – 20th

AGC – 26th

Dec 2013:

RJ – 5th, 12th (Christmas Cheers at RJ), 19th, 26th

HT- 10th (Christmas Cheers at HT)

AGC- 17th (Christmas Cheers at AGC)

G&I – 18th (Christmas Cheers at G&I)

Jan 2014:

RJ- 2nd, 9th, 16th, 23rd, 30th

HT – 14th

G&I – 15th

AGC – 28th

Feb 2014:

RJ- 6th, 13th, 20th, 27th

HT – 11th

G&I – 19th

AGC – 25th

Mar 2014:

RJ- 6th, 13th, 20th, 27th

HT – 11th

G&I – 19th

AGC – 25th

Appendix C – NC South Asian Program Site List

#.	DAY OF WEEK	NAME OF GROUP	LOCATION/ADDRESS
1	MONDAY	HUMBERWOOD GROUP	850 HUMBERWOOD BLVD. ETOBICOKE, ON M9W 7A6 416-394-5700
2	TUESDAY	R. J. SMITH GROUP TERRY MILLER GROUP	101 KENDLETON DRIVE TORONTO, ON M9V 1V2 1295 WILLIAMS PKWY BRAMPTON, ON L6S 3J8
3	WEDNESDAY	NORTH KIPLING GUJRATI GROUP BRAMPTON SOCCER CENTRE GRUP	2 ROWNTREE RD. ETOBICOKE, ON M9V 5G6 416-394-8679 1495 SANDALWOOD PKWY E BRAMPTON, ON L6R 0K2 905- 458-4036 EXT 62203 – ROBERTA CANNING
4	THURSDAY	NORTH KIPLING PUNJABI GROUP	2 ROWNTREE RD. ETOBICOKE, ON M9V 5G6

APPENDIX D – FIRE PLANS: FLOOR PLANS & EMERGENCY EXITS

All Head Offices and Sites have floor plans floor plans and emergency exits that are posted by the fire plans/procedures. These plans can be found in the locations indicated below.

CANES Community Care Head Office and Sites' Floor Plans and Emergency Exit Locations

Head Office/Site	Floor Plans/Emergency Exit Locations
CANES Community Care Head Office	Health & Safety Board, Kitchen, Board Room, Scheduling Office, Exits
R.J. SMITH Supportive Housing	Bulletin Board S.H. Office
111 Kendleton Supportive Housing	Bulletin Board S.H. Office, CANES Binder
West Acres Supportive Housing	Bulletin Board S.H. Office
Highway Terraces Supportive Housing	Bulletin Board S.H. Office
88 Humber College Supportive Housing	Bulletin Board S.H. Office

APPENDIX E – TELEPHONE BOMB THREAT QUESTIONNAIRE

Date Call Received: _____ Time of Call: _____ Time Call Ended: _____

Person Receiving the Call: _____
Position: _____

Exact Words of Caller:

Ask the caller the following questions and keep on the line as long as possible:

What time is the bomb set to explode?

Where is it located?

What kind of bomb is it?

What does the bomb look like?

What will cause it to explode?

Did you personally place the bomb? _____ Why did you place it?

What is your name and address?

Description of voice (*circle all that apply*): Male/Female Calm/Nervous Young/Old
High/Low Raspy Accent
(describe) _____

Unique speech characteristics, e.g., impediments (lisp, stutter), repetition, fast or drawn out:

Unusual words or phrases:

Did you recognize the voice? Yes No If yes, who do you think it is? _____

Background noise (*circle all that apply*): Music Traffic Bells Whistles
Horns Boats Aircraft Machinery Other
(*describe*) _____

Did the caller have knowledge of site? Yes No If yes, explain _____

UPON EVACUATION, GIVE FORM TO EMERGENCY PERSONNEL

APPENDIX F – ROOT CAUSE ANALYSIS AND ACTION PLAN

a) Root Cause Analysis

Date:

Client Name:

Level of Analysis	Questions	Findings	Root Cause	Take Action
What happened?	What are the details of the event? What task was being performed?			
When?	Day and time the event of occurred?			
Where?	What area of service was impacted? What Service site? What equipment/vehicle was being used?			
Why did it happen? Establishing causal factors.	What sequence of events leads to the problem? Ask the “5” Why’s.			
Identify Root Cause.	What is the real reason the event occurred?			

b) Root Cause Analysis ACTION PLAN

Findings Identified	Risk Reduction Strategies	Expected Implementation Date	Person Responsible	Measures of Effectiveness
	Action Item #1			
	Action Item #2			
	Action Item #3			

Submitted by: _____