

LAPOINTE-FISHER NURSING HOME LIMITED



MANUAL: <i>HEALTH & SAFETY</i>	HOME SPECIFIC NAME: <input checked="" type="radio"/> Fairfield Park <input type="radio"/> Brouillette Manor <input type="radio"/> LaPointe-Fisher Nursing Home <input type="radio"/> Corporate
TITLE: <i>CODE RED – FIRE PLAN</i>	SECTION: EMERGENCY PREPAREDNESS
	PAGES: 7

EFFECTIVE DATE: May 2000

REVISED: MAY 2016, JUNE 2022

POLICY:

The home shall have a fire emergency plan in the event of a fire. The emergency code denoting this situation shall be “Code Red”.

DEFINITIONS:

Plan Leader – This person is in charge of the evacuation and should be either the Administrator or a person delegated by the Administrator. In the absence of the Administrator or delegate, the Director of Care/Nursing will be the Plan Leader. In the absence of either of these individuals, the most senior RN on duty will be the Plan Leader. The Plan leader shall wear an orange vest throughout the evacuation so that they can be easily identified.

Fire Zones – Areas of the home that have a cement wall separating them, as well as a higher graded fire door. These cement walls are located at the entrance into each residential home area (where you pass through the double doors to enter the home area). The home is separated into 4 fire zones:

1. blue home area (residential area)
2. green home area (residential area)
3. courtyard home area (residential area)
4. remaining areas (central part of the home).

Stage 1 – A slow / intermittent alarm shall be heard and flashing white lights observed to identify the potential need for an emergency plan to be activated. This occurs when a fire pull station has been triggered or the emergency panel triggered due to a smoke detector or another potential emergency,

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Stage 2 – A very intense, fast/ intermittent alarm shall be heard and flashing white lights observed to identify the need for a full evacuation out of the home. This occurs when the Plan Leader and/or Fire Department feel a full evacuation is required, and have inserted an emergency key into a pull station and switched it to stage 2.

PROCEDURES:

TRAINING & EDUCATION

Staff shall be trained on this plan upon hire and provided with refresher education annually thereafter.

Residents and/or their legal representative will be advised, on admission, that the current version of the emergency plans are available on the Home's website and a copy of such plans can be made available upon request.

TESTING

This plan shall be tested through monthly fire drills.

ACTIVATION

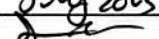
(A) DISCOVERING A FIRE

- R** – Remove persons in immediate danger if possible.
- E** – Ensure the door(s) is closed to confine the fire & smoke
- A** – Activate the fire alarm using the nearest pull station (closest exit).
- C** – Call fire department / Charge Nurse will phone 911.
- T** – Try to extinguish the fire or concentrate on further evacuation.

(B) HEARING A (STAGE 1) FIRE ALARM

1. The following staff shall immediately go to the emergency panel to identify the location of the fire. For instance, it may have been triggered by a smoke detector as opposed to a fire pull station. The trigger and location can be seen by looking into the window of the panel and reading the screen.

- ✓ Management (if applicable)
- ✓ RN / RPN
- ✓ Restorative (if applicable)
- ✓ Senior PSW in each home area

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2. All other staff shall turn off any appliances in use, put equipment away to keep halls clear (i.e. housekeeping & laundry carts in utility rooms) and listen for an announcement identifying the emergency and its' location. The pilots on the stove do not need to be turned off for the purpose of a fire drill.
3. Whoever gets to the emergency panel first shall either make an announcement or direct someone close to the paging system to make the following announcement and repeat it 3 times:
 - ✓ Code Red
 - ✓ Fire Pull Station OR Smoke Detector (source of trigger)
 - ✓ Location (i.e. green wing, room 180)
4. Staff shall do as follows:

Senior RN

The Senior RN will call 911, don the emergency vest to indicate Plan Leader, and delegate someone to stand at the front entrance to stop people from entering/leaving, gather the emergency supplies from the dispensary and head to the fire zone immediately. The emergency supplies include:

- ✓ key to fire pull station to switch alarm to full evacuation (Code Green), if needed
- ✓ key to emergency panel to silence/reset alarms
- ✓ key to emergency box if fire department requires information
- ✓ screw driver / glass rod to reset a fire pull station

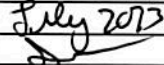
Other Registered Nursing Staff

With the exception of one registered staff on the Westside, all others will head to the fire zone. This registered staff shall gather the Disaster Bag, Narcotic binder & portable phones, place them on a treatment cart & wheel these supplies to the back entrance, in preparation for a complete evacuation. This Nurse shall also gather the Narcotic Binder from courtyard, if it is safe to do so. If it is not safe to place these supplies at the back entrance, the Nurse will place them at the front entrance. Following this, head to the fire zone to assist with the evacuation.

Exception (NIGHT SHIFT): The RPN shall immediately go to the fire zone and assist with the evacuation. Once this is complete, the above supplies can be gathered, if it is safe to do so.

Restorative, PSWs, Other Non-Registered Nursing Staff

Restorative Staff & the most senior PSW from each home area shall immediately proceed to the fire zone and assist with evacuation. Those assigned to and

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working in the fire zone shall remain in the fire zone and assist with the evacuation.

Remaining staff assigned to and working in a home area outside of the fire zone, shall remain in their assigned areas and ensure residents remain safe. Begin to prepare for an evacuation of that area, in the event it is needed by doing the following:

- ✓ Closing all windows & doors
- ✓ Clearing corridors
- ✓ Keeping residents calm
- ✓ Preparing for evacuation
- ✓ Ensuring fire doors to area are closed
- ✓ If designated to do so, proceeding to fire area & assisting with evacuation

Exception (NIGHT SHIFT): Where there is more than one non-registered nursing staff assigned to assist in a home area, the most senior shall immediately proceed to the fire zone and assist with the evacuation. Those assigned to and working in the fire zone shall remain in the fire zone and assist with the evacuation.

7-3B Food Service Worker (if applicable)

Advise staff in laundry room of location of fire and then proceed to fire zone and assist with evacuation.

Cook (if applicable)

Proceed to courtyard & monitor the two doors to the kitchen to ensure no one enters the kitchen unobserved. As well, monitor the courtyard entrance to ensure no one leaves the home area unobserved or no one who is unauthorized enters. If it is not safe to do this, proceed to fire zone and assist with evacuation.


Management Staff (if applicable)

The Administrator or Director of Care/Nursing shall assume the role of Plan Leader from the senior RN. All other managers will proceed to the fire zone and assist with the evacuation.

All other Staff (if applicable)

Proceed to fire zone and assist with evacuation.

5. Enter the fire zone using the "buddy" system. Buddies do not need to remain together during the evacuation; however they need to be aware that each has entered the fire zone to ensure everyone is accounted for if a headcount is required.

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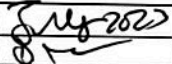
6. The first to enter the fire zone shall remove a fire extinguisher from the wall and bring it with them to the fire, in the event it is needed.
7. Staff shall evacuate residents in the order below, lifting the magnetic evacuation flag to the vacant position once the room is evacuated (if applicable). When evacuating a resident's room, staff shall check the closet and washroom to make sure they are vacant. If a door is closed in the immediate fire area, staff shall:
 - ✓ Feel door to see if it is hot
 - ✓ If door is hot to touch, do not open
 - ✓ If door is not hot, open slowly until you find out extent of fire.
 - ✓ Enter room for rescue only

IMMEDIATE FIRE AREA/ROOM: Evacuate residents in immediate danger (room fire is in) into the corridor and close the resident's room door (if applicable) tightly. Nursing staff will transfer residents who require a mechanical lift; however you can assist by portering the residents out of the fire zone while the nursing staff continue to assist residents who require mechanical lifts.

ADJACENT & ACROSS FROM FIRE AREA/ROOM: Evacuate residents immediately adjacent & across from the fire area. While nursing staff are completing transfers, you can be portering residents out of the fire zone and providing direction and reassurance to them.

REMAINING AREA/ROOMS: Continue moving away from the immediate fire area in a triangular fashion, evacuating residents to the nearest safe zone until they are all evacuated from the fire.

8. Once all residents/staff have been evacuated from the fire zone, the Plan Leader shall do a quick check to ensure all evacuation tags have been flipped up, indicating the evacuation is complete.
9. Everyone shall wait for further instructions from the Plan Leader or the fire department. For example, the fire department may determine that an evacuation to a further fire zone is needed. In this case, the same steps would be followed, starting with those residents closest to the fire.
10. If it safe to do so, the Business/Office Manager proactively, in the event a complete evacuation will be needed, shall gather the two-way radios in the front office, as well as staff schedules from each department (if managers have not grabbed them already) and bring to the back entrance (or more suitable location if this happens to be the fire area). In the absence of the Business/Office Manager, the Activation Manager shall assume this duty.

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11. The fire alarm may be silenced by the Plan Leader, in collaboration with the Fire Department; however this does not mean it is safe to return yet.
12. Upon confirmation from the Fire Department that it is safe to re-enter the fire zone, the Plan Leader/Delegate will reset/silence the fire pull station (if it has been pulled) and silence/reset the alarm at the emergency panel, if it has not been done so already. Note: If the alarm triggered by a fire pull station, the pull station must be reset before the emergency panel.
13. Once the alarm is silenced and the emergency panel reset, the Plan Leader/Delegate will make the following announcement over the external paging system and repeat it slowly 3 times:

"ATTENTION EVERYONE, ALL CLEAR"
14. After hearing this announcement, all staff shall assist residents and visitors to return to where they were, before the evacuation. Staff shall return to their work stations, putting all equipment back where it was before the emergency plan was activated. If applicable, the cook will relight the pilots on the stove. Maintenance may assist with this task if necessary.

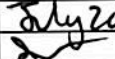
EVACUATION

If an evacuation of the Home is necessary, this will be identified by the Plan Leader/or Emergency Service (i.e. Fire Department). Refer to emergency procedure for "Code Green – Evacuation".

REPORTING

- ✓ Complete & submit Critical Incident/Mandatory Report
- ✓ It may be necessary to complete some individual reports, depending on injuries & circumstances:
 - Situation involving resident – complete Resident Incident Report
 - Situation involving staff – complete Staff Incident Report
 - Situation involving volunteer or visitor – complete Occurrence Report

COMMUNICATION

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The Home shall communicate to residents, substitute decision-makers, if any, staff, volunteers, students, caregivers, the Residents' Council and the Family Council, if any, on the emergency in the home

- ✓ at the beginning of the emergency,
- ✓ when there is a significant change throughout the course of the emergency
- ✓ when the emergency is declared over

RECOVERY

1. A debrief is provided for residents, substitute decision-makers, staff, volunteers and students involved in the emergency.
2. The Administrator or delegate will ensure resumption of regular operations of the home takes place (i.e. coordinate with managers, service providers and support workers to ensure all essential services are in place)
3. Coordination with Social Services to meet with residents, families and staff who may have experienced distress during the emergency, to offer support and resources.

EVALUATION

The emergency plan shall be evaluated annually and updated, if needed. If the plan has been activated, it shall be evaluated within 30 days of the emergency being declared over and updated, if needed.

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