Radiant Care

Peace Time Disaster & Emergency Safety Plan Response Manual

PEACE TIME DISASTER
& EMERGENCY SAFETY PLAN RESPONSE MANUAL

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SECTION 1

Manual Preface

PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL

PREFACE

GENERAL
This manual has been developed as a communication tool for staff. In it is emergency contact information as well as the various policies and plans that govern our organization's response in emergency situations.

FORMAT
By way of format, this manual includes a table of contents that will direct people to the policy or information being sought. Next, the body of the manual includes general information, emergency contact information, policies arranged by category and an emergency shelter plan. Finally, this manual includes the fire manuals for each building on site.

DISTRIBUTION & LOCATION
The Peace Time Disaster and Emergency Safety Plan Response Manual is accessible in electronic format to all staff through Systems 24-7 under Manuals. A slightly amended version of the manual is available to the public on the Radiant Care website. There is also a hard copy of the manual located in the Administration Office. There is a hard copy of each fire manual in the building it pertains to. The electronic version of the manual will take precedence if any discrepancies arise.

POLICY DEVELOPMENT, POLICY REVISIONS AND UPDATING MANUALS
New policies or existing policies may require development or revision depending on changes in our external environment, at the request of the Board of Directors or due to changes in the workplace. To ensure this manual remains contemporary, the following process shall be followed:

> New Policy - When a new policy is developed and approved, it will be uploaded to Systems 24-7 under the appropriate tab and an updated index will be uploaded to replace the existing index. A hard copy of the policy and updated index will be printed for the manual in the Administration office. The old index will be shredded. Documentation will be made in the "REVISION SCHEDULE" section noting the date of the change.
>
> Revision of Existing Policy - When a policy is revised and approved, the old version of the policy will be deleted from Systems 24-7 and the revised version will be uploaded under the appropriate tab to replace it. An updated index will be uploaded to replace the existing index. A hard copy of the policy and updated index will be printed for the manual in the Administration office. The old policy and index will be shredded. Documentation will be made in the "REVISION SCHEDULE" section noting the date of the change.

HANDLING OF THIS INFORMATION
The policies and forms within this manual are for the sole purpose of Radiant Care and its staff. Clarifications and interpretations of individual policies are to be directed to the staff's departmental supervisor or the Chief Executive Officer.

At no time shall anyone copy, remove or share the material within this manual with any party outside of this organization without the express written consent of the Chief Executive Officer. Failure to comply with this instruction will result in disciplinary action being taken, up to and including termination.

REVISION SCHEDULE

The table below details when a new policy has been added or when an existing policy has been reviewed and/or revised.

Policy Name	New	Reviewed	Revised	Date (MMM/YYYY)	Initial
Bomb Threat		x		SEP 2022	TS
Heat Wave		x		MAY 2024	FA
Air Exclusion			x	JUL 2024	RG
Emergency Evacuation Plan			x	JUL 2024	TS/RG/FA
Emergency Staffing			x	JUL 2024	FA
Fan Out System		x		JUL 2024	FA
Fire Safety Plan		x		JUL 2024	RG
Gas Leak		x		JUL 2024	RG
Heating System Failure		x		JUL 2024	RG
Loss of Water Supply - Planned & Unplanned			x	JUL 2024	FA/RG
Missing Resident/Tenant (Code Yellow)			x	JUL 2024	TS/FA
Pandemic Plan			x	JUL 2024	FA
Power Failure			x	JUL 2024	RG
Reception of Residents from Other Homes in Emergency		x		JUL 2024	TS
Telephone System Failure			x	JUL 2024	KC
Threat of Violence			x	JUL 2024	FA
Appendix 1 - Criminal Code		x		JUL 2024	FA
Appendix 2 - Responsibility of Caregiver			x	JUL 2024	FA
Appendix 3 - Documentation			x	JUL 2024	FA
Appendix 4 - Assault Support Plan			x	JUL 2024	FA
Appendix 5 - Distribution of Fire/Emergency Manual			x	JUL 2024	FA
Appendix 6 - Air Exclusion Checklist		x	x	JUL 2024	RG
Appendix 7 - Staff Nominal Roll		x		JUL 2024	FA
Appendix 8 - Resident Nominal Roll		x		JUL 2024	FA
Appendix 9 - Bomb Threat Checklist			x	JUL 2024	TS/FA
Appendix 10 - Code Yellow Checklist		x	x	JUL 2024	CR
Appendix 10.1 - PM Master Search Map		x		SEP 2024	RG

Policy Name	New	Reviewed	Revised	Date (MMM/YYYY)	Initial
Air Exclusion			x	SEP 2025	RG
Chemical Spills	x			SEP 2025	FA/RG
Emergency Staffing			x	SEP 2025	AC
Fan Out System		x		SEP 2025	CL
Fire Safety Plan			x	SEP 2025	RG/MC
Flooding	x			SEP 2025	FA/RG
Gas Leak			x	SEP 2025	RG
Heating System Failure		x		SEP 2025	RG
Power Failure			x	SEP 2025	RG
Reception of Residents from Other Homes in Emergency			x	SEP 2025	CL
Telephone System Failure		x		SEP 2025	ET
Threat of Violence			x	SEP 2025	CL
Heat Wave			x	OCT 2025	FA/RG/MC
Loss of Water Supply - Planned & Unplanned			x	OCT 2025	FA/RG
Bomb Threat			x	NOV 2025	FA/MC
Emergency Evacuation Plan			x	NOV 2025	FA/RG/MC
Medical Emergencies	x			NOV 2025	FA
Missing Resident/Tenant (Code Yellow)			x	NOV 2025	TS/FA/MC
Natural Disasters & Extreme Weather	x			NOV 2025	FA
Pandemic Plan				NOV 2025	
Appendix 1 - Criminal Code		x		NOV 2025	FA
Appendix 2 - Responsibility of Caregiver		x		NOV 2025	FA
Appendix 3 - Documentation		x		NOV 2025	FA
Appendix 4 - Assault Support Plan		x		NOV 2025	FA
Appendix 5 - Distribution of Fire/Emergency Manual		x		NOV 2025	FA
Appendix 6 - Air Exclusion Checklist		x		NOV 2025	FA
Appendix 7 - Staff Nominal Roll		x		NOV 2025	FA
Appendix 8 - Resident Nominal Roll		x		NOV 2025	FA
Appendix 9 - Bomb Threat Checklist		x		NOV 2025	FA
Appendix 10 - Code Yellow Checklist		x		NOV 2025	TS/FA
Appendix 10.1 - PM Master Search Map			x	NOV 2025	RG
Threat of Violence			x	FEB 2026	FA

Policy Name	New	Reviewed	Revised	Date (MMM/YYYY)	Initial
Threat of Violence (Code White)			x	FEB 2026	FA
Air Exclusion			x	JUN 2026	FA
Bomb Threat			x	JUN 2026	FA
Chemical Spills		x		JUN 2026	FA
Emergency Evacuation Plan			x	JUN 2026	FA/RG
Emergency Staffing			x	JUN 2026	FA
Fan Out System			x	JUN 2026	FA
Flooding		x		JUN 2026	FA
Gas Leak		x		JUN 2026	FA
Heat Wave		x		JUN 2026	FA
Heating System Failure		x		JUN 2026	FA
Loss of Water Supply - Planned & Unplanned			x	JUN 2026	FA
Fire Safety Plan			x	JUL 2026	FA/RG
Medical Emergencies		x		JUL 2026	FA
Missing Resident/Tenant (Code Yellow)		x		JUL 2026	FA
Natural Disasters & Extreme Weather		x		JUL 2026	FA
Power Failure			x	JUL 2026	FA
Reception of Residents from Other Homes in Emergency		x		JUL 2026	FA
Telephone System Failure		x		JUL 2026	FA

GLOSSARY OF TERMS

ABHR	Alcohol-Based Hand Rub
ADOC	Assistant Director of Care
ARIs	Acute Respiratory Infections
AV	Arborview
BV	Brookview Terrace Life Lease Units
CEO	Chief Executive Officer
COVID-19	Novel Coronavirus 2019
CV	Creekview Apartments
DOC	Director of Care
EG	Evergreen Apartments
FLTCA	Fixing Long-Term Care Act, 2021
GC	Garden Court Life Lease Units
GI	Gastrointestinal
HH	Hand Hygiene
HIV	Human Immunodeficiency virus
HR	Human Resources
HS	At bedtime
HVAC	Heating, Ventilation and Air Conditioning
IPAC	Infection Prevention and Control
JHSC	Joint Health and Safety Committee
LTCH	Long-Term Care Home
MAR	Medication Administration Record
MOLTC	Ministry of Long-Term Care
MV	Mapleview Apartments
NM	Nutrition Manager
NRPH	Niagara Region Public Health
NRPH	Niagara Region Public Health
OHaT	Ontario Health At Home
OMT	Outbreak Management Team
OV	Oakview Apartments
PAC	Personal Assignment Centre
PCRA	Point of Care Risk Assessment
PHOL	Public Health Ontario Laboratory
PPE	Personal Protective Equipment
PSW	Personal Support Worker
QIP	Quality Improvement Plan
RAPs	Resident Assessment Protocols
RC PM	Radiant Care Pleasant Manor
RC TM	Radiant Care Tabor Manor
RHA	Resident Home Area
RN	Registered Nurse
RPN	Registered Practical Nurse
RSV	Respiratory Syncytial Virus

SDM	Substitute Decision Maker
SL	Spruce Lane Wellness Suites
W/C	Wheelchair

DECLARING AN EMERGENCY

PREAMBLE

The Emergency/Evacuation plan was developed to provide direction to staff in the event of a number of emergency situations to ensure prompt action in order to minimize risks to residents, visitors, staff and volunteers.

The CEO has overall authority and responsibility for the development and implementation of the Emergency/Evacuation Plan. Supervisors have the responsibility to ensure department compliance and knowledge of policies and procedures of the Emergency/Evacuation Plan.

Functional authority rests with the employees who will implement the procedures in the event of an emergency.

The Senior Administrator Long-Term Care/delegate, with advice from the Fire, Police, Public Health, Ministry of Long-Term Care, etc. will determine which strategies and contingency plans of the Peace Time Disaster and Emergency Safety Plan Response Manual to implement.

Radiant Care has prepared a staff telephone fan out system; a copy is located in all departments as well as in the Peace Time Disaster and Emergency Safety Plan Response Manual.

The fan out system will be initiated by the Senior Administrator Long-Term Care/delegate. Prior to initiating the fan out system, the Senior Administrator Long-Term Care/delegate will decide on the reporting location, for example, directly to Radiant Care Pleasant Manor or Radiant Care Tabor Manor or Scott St. Church. The message must indicate an evacuation center is being set up and its location.

Whenever practical, the CEO/delegate will be notified. In instances where it is not practical, the Senior Administrator Long-Term Care/Delegate (Director of Care of home Charge Nurse) has the authority to implement any part of the Emergency Plan necessary.

All employees must be familiar with the policies and be able to operate procedures of the Emergency Plan.

All employees must respond appropriately in any emergency situation, including returning to their work area if on break or in the process of going home.

SECTION 2

Radiant Care Pleasant Manor
Emergency Contacts

RADIANT CARE PLEASANT MANOR
AUDIT OF HUMAN RESOURCES

PROPERTY OWNER	Radiant Care Pleasant Manor 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0 905-468-1111
CHIEF EXECUTIVE OFFICER	Tim Siemens 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
INTERIM SENIOR ADMINISTRATOR LONG-TERM CARE	Mike Dyck 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
DIRECTOR OF CARE	Natasha Persaud 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
MANAGER OF SUPPORT SERVICES	Karina Heizenreder 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
NUTRITION MANAGER	Oleksii Pavlikov 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
THERAPEUTIC RECREATION SUPERVISOR	Chelsea Bilton 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
INTERIM SPIRITUAL LIFE LEAD	Stephen Mason 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
DIRECTOR OF FINANCE	Eileen Tepsa 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
DIRECTOR OF HUMAN RESOURCES	Alaina Costea 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
MAINTENANCE MANAGER	Rick Green 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0
SUPPORTIVE HOUSING MANAGER	Megan Challice 31 Elden Street, P.O. Box 1651 Virgil, ON L0S 1T0

Updated: September 21, 2026

RADIANT CARE PLEASANT MANOR
ON-DUTY STAFF AUDIT

Day Staff	Number of Staff	Scheduled Hours
Senior Administrator Long-Term Care	1	8:00 am - 4:00 pm
Administrator Long-Term Care	1	8:00 am - 4:00 pm
Director of Care	1	8:00 am - 4:00 pm
Assistant Director of Care	1	8:00 am - 4:00 pm
Nursing Clerk	1	8:00 am - 4:00 pm
Registered Nurse	3	10:00 am - 6:00 pm
Registered Practical Nurse	6	7:00 am - 3:00 pm
Personal Support Workers - Long-Term Care	24	6:00 am - 2:00 pm
Maintenance Manager	1	8:00 am - 4:00 pm
Maintenance Lead	1	7:00 am - 3:00 pm
Maintenance Staff	3	7:00 am - 3:00 pm
Manager of Support Services	1	8:00 am - 4:00 pm
Nutrition Manager	1	8:00 am - 4:00 pm
Housekeepers	6	7:00 am - 3:00 pm
Laundry	2	7:00 am - 3:00 pm
Cook	1	6:00 am - 2:00 pm
Dietary Aide	6 1	6:30 am - 2:30 pm 9:00 am - 2:00 pm
Therapeutic Recreation Supervisor	1	8:00 am - 4:00 pm
Therapeutic Recreationist	5	8:00 am - 4:00 pm
Supportive Housing Manager	1	7:00 am - 3:00 pm
Supportive Housing Assistant	1	8:00 am - 4:00 pm
Personal Support Workers - Supportive Housing	6	7:00 am - 3:00 pm
Spiritual Life Lead	1	8:00 am - 4:00 pm
Chaplain	1	8:00 am - 4:00 pm
Administrative Receptionist	1	8:00 am - 4:00 pm

Afternoon Staff	Number of Staff	Scheduled Hours
Registered Nurse	2	3:00 pm - 11:00 pm
Registered Practical Nurse	5	3:00 pm - 11:00 pm
Cook	1	10:00 am - 6:00 pm
Dietary Aide	6	3:00 pm - 7:00 pm
Personal Support Workers - Long-Term Care	1 20 1	11:00 am - 7:00 pm (ActR) 2:00 pm - 10:00 pm 5:00 pm - 10:00 pm
Personal Support Workers - Supportive Housing	4	3:00 pm - 11:00 pm
Therapeutic Recreationist	1	11:00 am - 7:00 pm (4 days/week)

Night Staff	Number of Staff	Scheduled Hours
Registered Nurse	2	11:00 pm - 7:00 am
Registered Practica Nurse	1	11:00 pm - 7:00 am
Personal Support Workers - Long-Term Care	10	11:00 pm - 7:00 am
Personal Support Workers - Supportive Housing	3	11:00 pm - 7:00 am

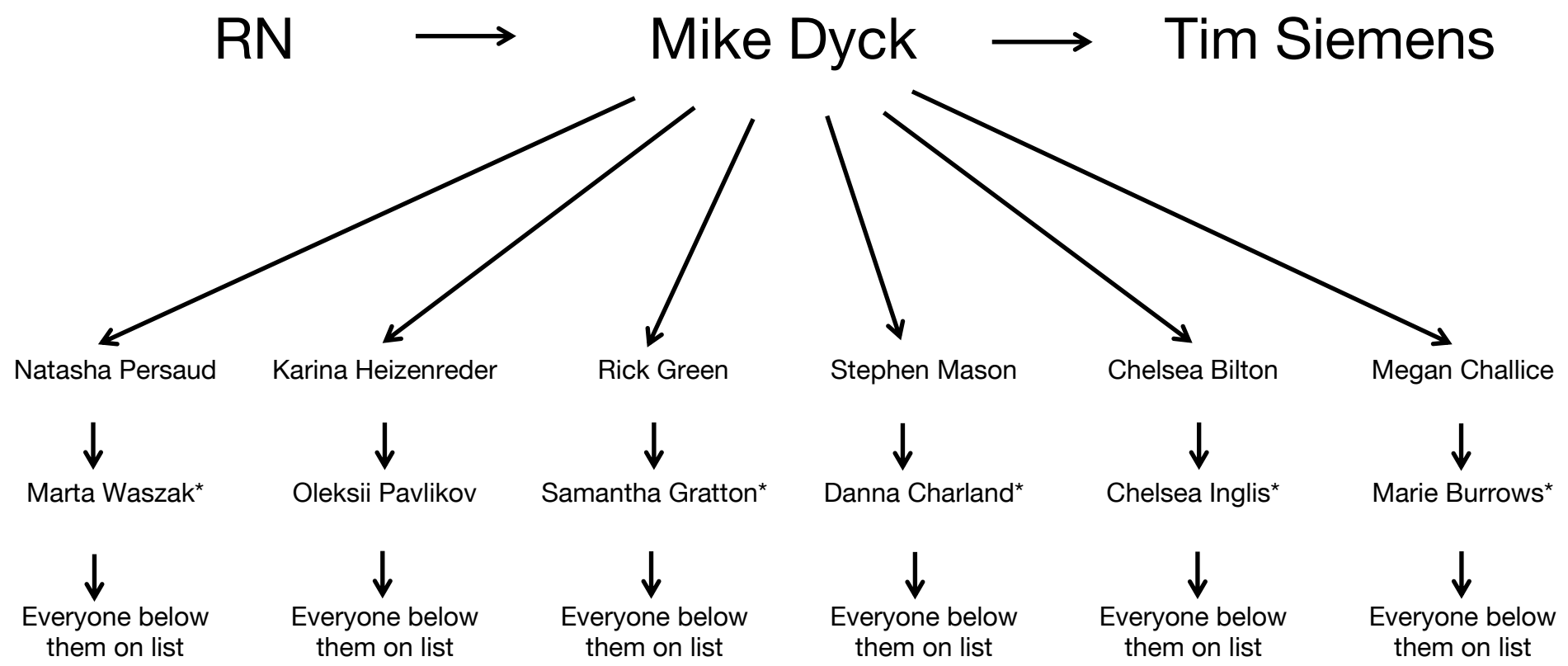
Radiant
Care
Pleasant
Manor

Fan Out List

The Fan Out List is available in the following locations:

1. E-mailed to all Supervisors and Callers
2. At the Nurses' Station
3. In Section 2 of the hard copy Peace Time Disaster & Emergency Safety Plan Response Manual located in the Administration Office

Radiant Care Pleasant Manor Fan Out System



Instructions

1. In an emergency, the RN on duty will call the Senior Administrator Long-Term Care.
2. The Senior Administrator Long-Term Care will call the CEO and decide if we need to enact the Fan Out System.
3. If yes, the Senior Administrator Long-Term Care will call Supervisors (first line of the list), then report to the home immediately.
4. Supervisors (first line) will each call the caller listed below them (on the second line), then report to the home immediately.
5. *Callers (second line) will consult the Fan Out List to call all staff below them on the list to request that they report to the home immediately. Once they have called all staff below them, then the caller will report to the home.

NOTE: *Everyone listed on this page should keep a copy of the Fan Out List with them at all times.*

Radiant
Care
Pleasant
Manor

Emergency Evacuation Resident List

The Emergency Evacuation Resident List is available in the following locations:

1. \\rcpm-dc01\Pleasant\Administration\DATA\MANUALS\DISASTER\MAJOR EMERGENCY EVACUATION LIST (electronic copy)

2. Section 2 of the Peace Time Disaster & Emergency Safety Plan Response Manual located in the Administration Office (hard copy)

3. Emergency Evacuation Binder located at the Nurses' Station (hard copy)

4. Long-Term Care (LTC) Fire Box located at the entrance of LTC building (hard copy)

Radiant Care Pleasant Manor

RADIANT CARE PLEASANT MANOR
EXTERNAL RESOURCE LIST

NAME	PHONE NUMBER
Emergency Fire/Police/Ambulance	**9-1-1**
Alectra (Hydro Utility)	905-684-8111
CareRx	905-631-9027
Coroner	905-685-5883
Evacuation Site	
▪ Niagara Long-Term Care Residence, NOTL	905-468-2111
Fire Department	905-684-4311
Hospitals	
▪ Niagara Health	905-378-4647
▪ Hotel Dieu Shaver	905-685-1381
Media	
▪ CKTB Newsroom	905-684-0480
▪ CHCH News	905-682-3546
▪ GIANT - FM 91.7	905-732-4433 (office hours) 905-732-6917 (after hours)
▪ CKTB 610 ▪ HTZ-FM 97.7 ▪ EZZROCK 105.7	905-684-6397
Ministry of Labour	1-877-202-0008
Ministry of Long-Term Care	
▪ Compliance & Inspections	905-546-8294 **OR** 1-800-461-7137
▪ Family Support & Action Line	1-866-434-0144
Niagara Region Public Health	
▪ Main line	1-800-263-7248
▪ Dr. Azim Kasmani, Medical Officer of Health and Commissioner of Public Health & Emergency Services	905-688-8248, ext. 7338
Police Department, St. Catharines	905-688-4111
Public Health Nurse	905-688-8248, ext. 7330
Staging Area	905-468-1111
▪ Creekview Link	
Water Delivery Service (H2Only)	905-938-9697

RADIANT CARE PLEASANT MANOR
EMERGENCY SUPPLIER CONTACTS

NURSING

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
ARJO	Nursing/medical equipment	David Baillargeon Sean Jenkins	CONFIDENTIAL See Business Continuity Plan to obtain this information
Behavioural Supports Ontario (BSO)	Support & training for managing responsive behaviours; provide social workers if needed	Tammy Byrne	
Cardinal Health Canada (formerly Futuremed)	Nursing supplies	Doug Widner	
CareRx (formerly Classic Care Pharmacy)	Medication	Robert Vukovich	
Hauser's Home Healthcare	Assistive devices	Whitney Brown	
KCI	Therapeutic mattresses	Erika Szilagyi	
TENA	Continence products	Paula Burns	

DIETARY / HOUSEKEEPING / LAUNDRY

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Agropur	Milk		CONFIDENTIAL See Business Continuity Plan to obtain this information
Canada Bread Company	Bread	Khalid Zafar	
Complete Purchasing		Nancy Walker	
Flexo	Chemicals, laundry & housekeeping supplies	J'neene Marchese	
Fruitful Juice Products	Juice supplier		
George Courey	Linens	Bill French	
H2Only	Delivery for drinking water service	Wilma Snippe	
Mother Parkers Coffee	Coffee machine supplier	Jeff Hadall	
Nella Cutlery	Knife sharpening	Adam	
Niagara Restaurant Supplies	Kitchen supplies and equipment	Margaret Boorsma	
Sanimax	Used oil		
SureFix	Robot Coupe Blixer repair	Dave Richards	
SYSCO Toronto	Food & food supplies	Jennifer Rossi	
Thermopatch	Clothing labels		

MAINTENANCE

SUPPLIER NAME	PRODUCT/ SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
All Green Irrigation	Outside sprinklers	Al	CONFIDENTIAL See Business Continuity Plan to obtain this information
Bath Fitters	Tub 2 Shower		
Britain Mechanical Group Ltd.	Diesel tanks		
Brooker Power	Auto doors	Rory	
CKB Plumbing & Contracting	Plumbing		
Canadian Door Doctor	Garage door		
Canadian Waste Handlers	Bin pickups (Creekview only)		
Castle Plumbing	Plumbing/HVAC	Craig	
Control Chem	Monthly contract - water treatment		
Complete Comfort Niagara	Heat pump to MV AC		
Direct Restaurant Service	Kitchen equipment & repair	David Lees	
Fire Department			
Fire Monitoring Company	Alarm		
Fire Safety Tech		Chris Paul	
First Klass Decorating	Painter	Tim	
Hamilton Audio Video	Door guards in the apartments		

SUPPLIER NAME	PRODUCT/ SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Harco	Commercial laundry equipment		
Johnson Controls / Tyco	Fire alarm system		CONFIDENTIAL See Business Continuity Plan to obtain this information
Kraun Electric Services	Electrical	Tom	
Lincoln Appliance	Appliance repair	Herb	
Modern Landfill Inc.	Garbage & recycling		
Niagara Contractors		Mike	
Niagara Generator	Generator		
Overhead Door	Garage door		
Pro	Pest control	Mike Heinen	
PEC Roofing	Roofing		
Peninsula Flooring	Flooring		
Penner Building Centre	Maintenance supplies		
Regional Doors	Garage doors		
Roto-Rooter	Plumbing 24/7		
Service Experts	Plumbing/heating		
ThyssenKrupp	Elevator		

HUMAN RESOURCES

SUPPLIER NAME	PRODUCT/SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Avanti	Payroll System	Maria Lundy, Account Manager	
Canada Life	RRSP	Lorri Davidson, Customer Service Specialist	
Dunk & Associates	Systems 24-7 - platform for online training & manuals	Nancy Dunk Tech support	CONFIDENTIAL See Business Continuity Plan to obtain this information
Groove Identification Solutions	Name tag printer & supplies including swipe cards	Debbie Ritter	
Manulife	Benefits	Kimberly Johnson Plan Member Helpline	
Synergy Benefits	Benefits	Wayne Farrow	
WSIB	Workplace Injuries		

UTILITIES (PRE-AUTHORIZED)

SUPPLIER NAME	PRODUCT/ SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Bell	Phone charges	Customer service	CONFIDENTIAL See Business Continuity Plan to obtain this information
Cogeco	TV and Internet services	Customer service/Billing Technical Support Justin DeGordick (technician)	
Enbridge	Natural gas		
NOTL Hydro	Hydro		
Rogers	iPhones & iPad charges		
Telus	Cell phone charges	Telus mobility service support	
Vaxxine	DSL business internet line		

ADMIN, IT & MISCELLANEOUS

SUPPLIER NAME	PRODUCT/ SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
AdvantAge Ontario	Annual membership		CONFIDENTIAL See Business Continuity Plan to obtain this information
Amber Same Day Delivery	For blue bag delivery between Pleasant Manor & Tabor Manor		
B4 Networks	Managed computer services and IT support		
Beatties	Office supplies & Canon copiers ▪ servicing ▪ meter usage	Sandy Bagshaw James Sajur	
Big Al's Aquarium	Aquarium Servicing		
HCH Lazerman	Printer toner	Tony	
Ontario Long-Term Care Association	Annual membership		
Pinders	Keys	DS	
PointClickCare (WesCom)	PCC software Medical packages		
Roddis Communications	Radiant Care website	David Roddis	
SystemMacs	Supply, install and repair of phone system	Leen	
Valumart	Food		

SECTION 3

Radiant Care Tabor Manor
Emergency Contacts

RADIANT CARE TABOR MANOR
AUDIT OF HUMAN RESOURCES

PROPERTY OWNER	Radiant Care Tabor Manor 1 Tabor Drive, St. Catharines, ON L2N 1V9 905-934-2548
CHIEF EXECUTIVE OFFICER	Tim Siemens 1 Tabor Drive, St. Catharines, ON L2N 1V9
INTERIM SENIOR ADMINISTRATOR LONG-TERM CARE	Mike Dyck 1 Tabor Drive, St. Catharines, ON L2N 1V9
DIRECTOR OF CARE	Maggie Walsh 1 Tabor Drive, St. Catharines, ON L2N 1V9
MANAGER OF SUPPORT SERVICES	Karina Heizenreder 1 Tabor Drive, St. Catharines, ON L2N 1V9
NUTRITION MANAGER	Clara Rigas 1 Tabor Drive, St. Catharines, ON L2N 1V9
THERAPEUTIC RECREATION SUPERVISOR	Norma Restivo 1 Tabor Drive, St. Catharines, ON L2N 1V9
LEAD CHAPLAIN	Jim Evans 1 Tabor Drive, St. Catharines, ON L2N 1V9
DIRECTOR OF FINANCE	Eileen Tepsa 1 Tabor Drive, St. Catharines, ON L2N 1V9
DIRECTOR OF HUMAN RESOURCES	Alaina Costea 1 Tabor Drive, St. Catharines, ON L2N 1V9
MAINTENANCE MANAGER	Rick Green 1 Tabor Drive, St. Catharines, ON L2N 1V9
SUPPORTIVE HOUSING MANAGER	Megan Challice 1 Tabor Drive, St. Catharines, ON L2N 1V9

Updated: September 28, 2026

RADIANT CARE TABOR MANOR
ON DUTY STAFF AUDIT

Day Staff - 6:00 am to 5:00 pm	Number of Staff	Scheduled Hours
Chief Executive Officer	1	8:00 am - 4:00 pm
Executive Assistant	1	8:00 am - 4:00 pm
Administrative Assistant	1	8:00 am - 4:00 pm
Housing and Capital Works Coordinator	1	8:00 am - 4:00 pm
Director of Finance	1	8:00 am - 4:00 pm
Assistant Director of Finance	1	8:30 am - 4:30 pm
Senior Financial Analyst	1	8:00 am - 4:00 pm
Junior Accountant - Accounts Payable	1	8:00 am - 4:00 pm
Junior Accountant - Accounts Receivable	1	8:30 am - 4:30 pm
Director of Human Resources	1	8:00 am - 4:00 pm
Manager of Human Resources	1	8:00 am - 4:00 pm
Human Resources Coordinators	2	8:00 am - 4:00 pm
Payroll Manager	1	8:00 am - 4:00 pm
Payroll Clerk	1	8:30 am - 4:30 pm
Volunteer Coordinator	1	8:00 am - 4:00 pm
Administrative Receptionist	1	8:00 am - 4:00 pm
Senior Administrator Long-Term Care	1	8:00 am - 4:00 pm
Administrator Long-Term Care	1	8:00 am - 4:00 pm
Director of Care	1	8:00 am - 4:00 pm
Assistant Director of Care	2 (part-time)	8:00 am - 4:00 pm
Nursing Clerk	1	8:00 am - 4:00 pm
Scheduling Clerk	1	8:00 am - 4:00 pm
Clinical Quality Coordinator	1	8:00 am - 4:00 pm
Assistant RAI Coordinator	.5	8:00 am - 4:00 pm
Infection Prevention and Control Lead	.75	8:00 am - 4:00 pm
Social Worker	.5	8:00 am - 4:00 pm
Registered Nurse - Long-Term Care	2	7:00 am - 3:00 pm
Registered Practical Nurse - Long-Term Care	5	7:00 am - 3:00 pm
Personal Support Workers - Long Term Care	23	6:00 am - 2:00 pm
Supportive Housing Manager	1	7:00 am - 3:00 pm
Supporting Housing Assistant	.5	8:00am – 4:00 pm
Personal Support Workers - Supportive Housing	5	7:00 am - 3:00 pm (4) 7:00 am - 11:00 am (1)
Maintenance Manager	1	8:00 am - 4:00 pm
Maintenance Staff	3	7:00 am - 3:00 pm
Manager of Support Services	1	8:00 am - 4:00 pm
Nutrition Manager	1	8:00 am - 4:00 pm
Cook	1	6:00 am – 2:00 pm
Dietary Aide	5	6:30 am - 2:30 pm
Housekeeper - Long-Term Care	5	7:00 am - 3:00 pm

Day Staff - 6:00 am to 5:00 pm	Number of Staff	Scheduled Hours
Housekeeper - Supportive Housing	1	9:00 am - 3:30 pm
Laundry - Long-Term Care	2	7:00 am - 3:00 pm
Lead Chaplain	1	8:00 am - 4:00 pm
Chaplain	1	8:00 am - 4:00 pm
Therapeutic Recreation Supervisor	1	8:00 am - 4:00 pm
Therapeutic Recreationist	4	8:00 am - 4:00 pm

Evening Staff - 11:00 am - 11:00 pm	Number of Staff	Scheduled Hours
Registered Nurse	2	3:00 pm - 11:00 pm
Registered Practical Nurse	5	3:00 pm - 11:00 pm
Personal Support Workers - Long Term Care	19	2:00 pm - 10:00 pm
Personal Support Workers - Supportive Housing	2	3:00 pm - 11:00 pm (1) 3:00 pm - 9:00 pm (1)
Cook	1	10:00 am - 6:00 pm
Dietary Aide	3 3	11:00 am - 7:00 pm 3:00 pm - 7:00 pm
Therapeutic Recreationist	1	11:00 am - 7:00 pm

Night Staff - 10:00 pm - 7:00 am	Number of Staff	Scheduled Hours
Registered Nurse - Long-Term Care	2	11:00 pm - 7:00 am
Registered Practical Nurse - Long-Term Care	1	11:00 pm - 7:00 am
Personal Support Workers - Long Term Care	8	10:00 pm - 6:00 am
Personal Support Workers - Supportive Housing	2	11:00 pm - 7:00 am

Radiant Care Tabor Manor

Updated July 2024

Fan Out List

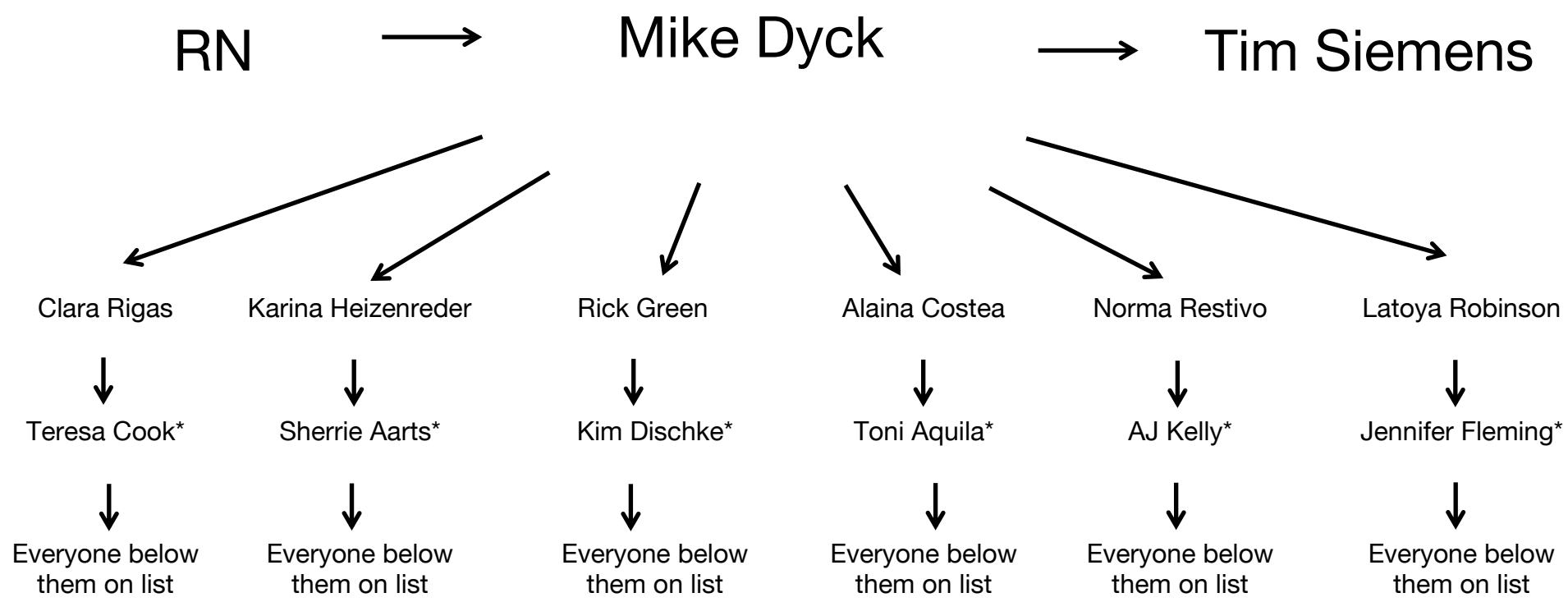
The Fan Out List is available in the following locations:

1. Emailed to all Supervisors and Callers

2. At the Nurses Station

3. In Section 3 of the hard copy Peace Time Disaster & Emergency Safety Plan Response Manual located in the Administration Office

Radiant Care Tabor Manor Fan Out System



Instructions

1. In an emergency, the RN on duty will call the Senior Administrator Long-Term Care.
2. The Senior Administrator Long-Term Care will call the CEO and decide if we need to enact the Fan Out System.
3. If yes, the Senior Administrator Long-Term Care will call Supervisors (first line of the list), then report to the home immediately.
4. Supervisors (first line) will each call the caller listed below them (on the second line), then report to the home immediately.
5. *Callers (second line) will consult the Fan Out List to call all staff below them on the list to request that they report to the home immediately. Once they have called all staff below them, then the caller will report to the home.

NOTE: *Everyone listed on this page should keep a copy of the Fan Out List with them at all times.*

Radiant Care Tabor Manor

Emergency Evacuation Resident List

The Emergency Evacuation Resident List is available in the following locations:

1. L:\MANUALS & PACKAGES\PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL\SECTION 3 - RC TM EMERGENCY CONTACTS\PART 3 - Emergency Evacuation (electronic copy)

2. Section 3 of the Peace Time Disaster and Emergency Safety Plan Response Manual located in the Administration Office (hard copy)

3. Emergency Evacuation Binder (red) located at the Nurses Station (hard copy)

4. Long-Term Care (LTC) Fire Box located at the entrance of LTC building (hard copy)

Radiant Care Tabor Manor

RADIANT CARE TABOR MANOR
EXTERNAL RESOURCE LIST

NAME	PHONE NUMBER
Emergency Fire/Police/Ambulance	**9-1-1**
Alectra (Hydro Utility)	905-684-8111
Ambulance Dispatch	1-800-263-5767
CareRx Pharmacy	905-631-9027
Coroner	905-685-5883
Evacuation Site	
▪ Heidehof Home for the Aged	905-935-3344
Fire Department, St. Catharines	905-684-4311 905-688-5601, ext. 4204
Hospitals	
▪ Niagara Health	905-378-4647
▪ Hotel Dieu Shaver	905-685-1381
Media	
▪ CKTB Newsroom	905-684-0480
▪ CHCH News	905-682-3546
▪ GIANT - FM 91.7	905-732-4433 (office hours) 905-732-6917 (after hours)
▪ CKTB 610 ▪ HTZ-FM 97.7 ▪ EZZROCK 105.7	905-684-6397
Ministry of Labour	1-877-202-0008
Ministry of Long-Term Care	
▪ Compliance & Inspections	905-546-8294 **OR** 1-800-461-7137
▪ Family Support & Action Line	1-866-434-0144
Niagara Region Public Health	
▪ Main line	1-800-263-7248
▪ Dr. Azim Kasmani, Medical Officer of Health & Commissioner of Public Health and Emergency Services	905-688-8248, ext. 7338
Police Department, St. Catharines	905-688-4111
Public Health Nurse	905-688-8248, ext. 7330
Staging Area ▪ Scott Street MB Church	905-937-6900
Water Delivery Service (H2Only)	905-938-9697

RADIANT CARE TABOR MANOR
EMERGENCY SUPPLIER CONTACTS

NURSING

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
ARJO	Nursing/medical equipment	David Baillargeon Sean Jenkins	CONFIDENTIAL See Business Continuity Plan to obtain this information
Behavioural Supports Ontario (BSO)	Support & training for managing responsive behaviours; provide social workers if needed	Tammy Byrne	
Cardinal Health Canada (formerly Futuremed)	Nursing supplies	Doug Widner	
CareRx (formerly Classic Care Pharmacy)	Medication	Robert Vukovich	
Hauser's Home Healthcare	Assistive Devices	Whitney Brown	
KCI	Therapeutic Mattresses	Erika Szilagyi	
TENA	Continence Products	Paula Burns	
Vital Aire Health Care	Oxygen	Diane Quaresma	

ENVIRONMENTAL SERVICES / NUTRITION SERVICES

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Action Restaurant	Equipment service		
Canada Bread Company	Bread	Khalid Zafar	CONFIDENTIAL See Business Continuity Plan to obtain this information
Canadian Springs	Delivery for drinking water service	Carolyn Woodham	
Complete Purchasing		Lindsey Baker	
Flexo	Oven hood cleaning, chemicals, laundry & housekeeping supplies	Anthony Marcantonio	
George Courey	Linen	Bill French	
H2O Only inc.	Delivery for drinking water service	Carolyn Woodham, Wilma Snippe	
HD Supply	Environmental	Nida	
Harco	Laundry equipment	Harco	
Hubert (Distributing) Canada	Kitchen supplies	(online through eCPS)	
Integrity Refrigeration Services	Walk-in freezers & fridges		
MIP Inc.	Environmental supplies	Karen Mikula	
Mother Parkers	Tea & coffee	Randy Billings	
Nella Cutlery	Knife sharpening		
Nestles Professional	Coffee & juice	Vikas Chhabra	

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Niagara Restaurant Supplies	Kitchen supplies & equipment	Margaret Boorsma	
PCS of Niagara	Carpet cleaning	Sara Krug	
RG Henderson	Kitchen equipment service		
Sure-Fix	Robot Coupe & Vita-Mix blender repair	Kelly Enair	
SYSCO Toronto	Food & food supplies	Jennifer Rossi	
Thermopatch	Labeling machine	Ben	

MAINTENANCE

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Bath Fitters	Tub 2 Shower		CONFIDENTIAL See Business Continuity Plan to obtain this information
Britain Mechanical Group Ltd.	Diesel tanks		
Brock Elevator Ltd.	Elevators - 1 Tabor		
Brooker Power	Auto doors	Rory	
Canadian Door Doctor	Garage door		
Castle Plumbing	Plumbing/HVAC	Craig	
Control Chem	Monthly contract - water treatment		
Complete Comfort Niagara	Heat pump to Long-Term Care		
Direct Restaurant Service	Large kitchen equipment repair	David Lees	
Enercare	Heating boilers & hot water at 1 Tabor; hot water at 3 Tabor & 5 Tabor		
Fire Department			
Fire Monitoring Company	Alarm monitoring		
First Klass Decorating	Painter	Tim	
Hamilton Audio Video	Door guards in the apartments		

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Harco	Commercial laundry equipment		
Home Hardware (Grantham)	Maintenance supplies & equipment		CONFIDENTIAL See Business Continuity Plan to obtain this information
Johnson Controls / Tyco	Fire alarm system		
Kraun Electric Services	Electrical		
KR Communications	Swipe card system, call bell system, wander guard system	Chris	
Lincoln Appliance	Appliance repair	Herb	
Modern Disposal Services	Garbage & recycling		
Niagara Contractors		Mike	
Niagara Generator	Generator		
Overhead Door	Garage door		
PEC Roofing	Roofing		
Peninsula Flooring	Flooring		
Pinders	Keys / locksets	Glen Pinder	
Pro	Pest control	Mike Heinen	
Regional Doors	Interior doors		
Roto-Rooter	Plumbing 24/7		
Service Experts	Plumbing/heating		
ThyssenKrupp	Elevator		

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Walker Environmental Group	Collection and recycling of grease interceptor waste	Customer Service	

HUMAN RESOURCES

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Avanti	Payroll System	Maria Lundy, Account Manager	CONFIDENTIAL See Business Continuity Plan to obtain this information
Canada Life	RRSP	Plan Administrator/ Advisor Dawn Side, Client Relations Manager Plan Member Helpline	
Dunk & Associates	Systems 24-7 - platform for online training & manuals	Nancy Dunk Tech support	
Groove Identification Solutions	Name tag printer & supplies, including swipe cards	Debbie Ritter	
Manulife	Benefits	Kimberly Johnson Plan Member Helpline	
Synergy Benefits	Benefits	Wayne Farrow	
WSIB	Workplace injuries		

UTILITIES (PRE-AUTHORIZED)

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
Alectra (Horizon)	Electricity		CONFIDENTIAL See Business Continuity Plan to obtain this information
Bell	Phone charges	Customer service	
City of St. Catharines	Water/wastewater - 325 Scott Street		
Cogeco	TV and internet services	Customer service/Billing Technical Support Justin DeGordick (technician)	
Enbridge	Natural gas		
Rogers	iPhones & iPad charges		
Sandpiper Energy Solutions	Water heater - 325 Scott Street		
St. Catharines Water	Pre-authorized monthly payment plan for water/wastewater		
Telus	Cell phone charges	Telus mobility service support	
Vaxxine	DSL business internet line		

ADMINISTRATION, IT & MISCELLANEOUS

SUPPLIER NAME	PRODUCT / SERVICE	CONTACT	PHONE / EMAIL / ACCOUNT NUMBER
AdvantAge Ontario	Annual membership fee	Sally Smith	CONFIDENTIAL See Business Continuity Plan to obtain this information
Amber Same Day Delivery	For blue bag delivery between Pleasant Manor & Tabor Manor		
B4 Networks	Managed computer services and IT support		
Beatties	Office supplies & Canon copiers ▪ servicing ▪ meter usage	Sandy Bagshaw James Sajur	
HCH Lazerman	Printer toner	Tony	
Ontario Long-Term Care Association	Annual membership fee		
Pinders	Keys	DS	
PointClickCare (WesCom)	PCC software Medical packages		
Purolator	Shipping	Customer service	
Roddis Communications	Radiant Care website	David Roddis	
SystemMacs	Supply, install and repair of phone system	Leen	

SECTION 4

Peace Time Disaster and Emergency Safety Plan Response

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	AIR EXCLUSION
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-01
APPROVAL:		DATE:	JANUARY 2011

GENERAL

External air can become contaminated by toxic gas usually as a result of a fire or spill. If a building that has a large amount of chemicals in it is on fire the smoke will be contaminated by the chemicals. Tanker trucks or train tanker cars carrying toxic chemicals can crash and leak the chemicals into the air.

Evacuation is one strategy to deal with this problem. Another is external air exclusion, which is where the entry of external contaminated air is restricted. The external air exclusion method is used particularly when the necessary time frame for an evacuation does not exist. In external air exclusion, you suspend any activity or system that allows external air to get in or internal air to get out. It is assumed that within five (5) minutes emergency response teams, fire, etc., would take charge of the situation and close streets to incoming traffic.

After-Hours Procedure

If Air Exclusion Disaster Plan is initiated after hours, the Charge Nurse is the Senior Administrator Long-Term Care's delegate and assumes the role of the Receptionist and the Maintenance Manager. Employees will be limited to those assigned to areas and the Personnel Assignment Centre will not exist. The Charge Nurse assigns roles of all employees. The Charge Nurse will shut down power in the home to disable air Intake by shutting off Main Disconnect.

IN THIS DISASTER SCENARIO, THE EMPLOYEE FAN OUT SYSTEM WILL NEVER BE INITIATED DUE TO HAZARD TO INCOMING EMPLOYEES.

PROCEDURE

RESPONSE IN LONG-TERM CARE

The Home will receive notification that a disaster has occurred and that Air Exclusion Disaster Plan needs to be initiated. This notification could be from a variety of sources including Medical Officer of Health, Fire Department, etc.

If the person receiving the notification is other than the Senior Administrator Long-Term Care/Delegate, they are to notify the Senior Administrator Long-Term Care immediately.

Radiant Care

Roles and Responsibilities

Senior Administrator Long-Term Care/Delegate

- Authorize any announcements or messages.
- Inform Management Team.
- Remain in Personnel Assignment Centre area for duration of incident.
- Receive notification from Senior Administrator Long-Term Care/Delegate to make the following announcement:
  Repeat three times
  "Attention all employees, residents and visitors. Air exclusion procedure in effect; please remain in the building and keep windows and doors closed at all times."
- At the direction of the Senior Administrator Long-Term Care/Delegate the following announcement may be made to update everyone:
  Repeat three times
  "Attention all employees, residents and visitors. The situation is under investigation and under control; please remain in your present location".
- Call 9-1-1 to advise them of the situation.
- Manage incoming calls and direct to Senior Administrator Long-Term Care/Delegate as required.
- Call Therapeutic Recreation Supervisor (Personnel Assignment Centre) of requests from Charge Nurses for additional staff from Personnel Assignment Centre.
- Announce all clear when directed to do so by Senior Administrator Long-Term Care/Delegate or Emergency Services:
  Repeat three times
  "All clear"

Maintenance Manager/Maintenance Person

- Shut down all heating, ventilation and air conditioning units in building.
- Ensure dampers in heating and ventilation units are closed.
- Complete Air Exclusion Checklist (Appendix 6) located in the Peace Time Disaster and Emergency Safety Plan Response Manual and submit to the Personnel Assignment Centre Coordinator for sign off.
- All maintenance staff to report to Personnel Assignment Centre for direction/assignment.

Charge Nurse

When Air Exclusion is announced:

- Call Therapeutic Recreation if additional staff are required from the Personnel Assignment Centre.
- Complete resident and employee nominal rolls and send runner to Personnel Assignment Centre to inform Coordinator that count is complete and area secure.
- There is no movement of residents unless directed by the emergency services/Senior Administrator Long-Term Care/Delegate.
- Return unit to pre–Air Exclusion down state.

Radiant Care

Therapeutic Recreation Supervisor

When Air Exclusion is announced, take cell phone.

- Assign one (1) housekeeping employee and two additional employees to inspect each resident room and ensure that windows are closed and that air cannot enter from outside **(see Housekeeping/Laundry Employees section below).**
- Obtain "No Exit" door signs and arm bands from administration office. They are located in the emergency box in the photocopy room.
- Report to Front Entrance (Personnel Assignment Centre).
- Have all employees reporting to Personnel Assignment Centre sign nominal roll.
- Turn completed nominal roll over to switchboard attendant.
- Assign orange arm bands to five (5) employees:
  - Direct two (2) employees to monitor Front Entrance Door of building; employees are to inform anyone outside to return immediately to the home. "No Exit" sign is placed on front entrance to building.
  - Assign employee to check exit doors to ensure that they are locked and place "No Exit" signs on inside of each locked door leading to the exterior. Report any unlocked doors immediately to the Charge Nurse of the area or Supervisor at Personnel Assignment Centre as applicable.
  - If residents outside require additional assistance, employees will return to Personnel Assignment Centre for assistance.
- Assign employees from the Personnel Assignment Centre as requested by Charge Nurses.
- Record and sign off that all assignments are complete using the Air Exclusion Checklist. Return areas to pre–Air Exclusion state.

Housekeeping/Laundry Employees

- Ensure all equipment in work area is turned off and that equipment in laundry rooms is turned off; e.g., dryer.
- Housekeeping employees/delegate to obtain labeled "Air Exclusion" kits from Front Office.
- One Housekeeping employee/delegate plus two additional employees are assigned by Charge Nurse to take contents of kit, check every room on the unit to ensure windows are closed and locked. Any windows that cannot be closed are to be sealed with duct tape.
- Report back to Charge Nurse when above tasks are complete.

Therapeutic Recreation Employees

- If a resident activity is in progress, advise all residents, family, volunteers of the situation and to remain where they are.
- Ensure that all residents names are submitted to the nominal roll at the Personnel Assignment Centre.
- If not involved in a resident activity, report to Personnel Assignment Centre.

All Employees

- Close all windows and turn off fans in immediate work area before reporting to Personnel Assignment Centre or Charge Nurse.

Radiant Care

RESPONSE IN SUPPORTIVE HOUSING

Roles and Responsibilities

CEO/Delegate

- Authorize any messages.
- Informs Management Team.
- Communicates with the Supportive Housing Manager/Delegate.

Maintenance Manager/Maintenance Person

- Shut down all heating, ventilation and air conditioning units in building.
- Ensure dampers in heating and ventilation units are closed.
- Complete Air Exclusion Checklist (Appendix A) located in the Peace Time Disaster and Emergency Safety Plan Response Manual and submit to the Personnel Assignment Centre Coordinator/Supportive Housing Manager for sign off.
- All maintenance employees to report to Supportive Housing Manager for direction/assignment.

Supportive Housing Manager/Team Leader

When Air Exclusion is announced:

- Assign Supportive Housing employees to inspect each tenant apartment and ensure that windows are closed and that air cannot enter from outside.
- Call receptionist if additional employees are required from Tabor Manor long-term care.
- Complete tenant and employee nominal rolls.
- There is no movement of tenants unless directed by the emergency services/ CEO/Delegate.
- Return unit to pre Air Exclusion down state.
- When Air Exclusion is announced, take cell phone.
- Obtain “no exit” door signs and arm bands from reception (located in the Aministration Office).
- Have all employees reporting to staging area sign nominal roll.
- Assign orange arm bands to two (2) employees:
    - Direct one (1) employee to monitor Front Entrance Door of building, and one (1) employee to inform anyone outside to return immediately to the home. “No Exit” sign is placed on front entrance to building.
    - Assign employee to check exit doors to ensure that they are locked and place “No Exit” signs on inside of each locked door leading to the exterior and report any unlocked doors immediately to the Supportive Housing Manager.
- Record and sign off that all assignments are complete using the Air Exclusion Checklist.
- Return areas to pre-Air Exclusion state.

Housekeeping/Maintenance Employees

- Ensure all equipment in work area is turned off and that equipment in laundry rooms is turned off; e.g., dryer.
- Two employees are assigned by Supportive Housing Manager to check every apartment to ensure windows are closed and locked.
- Report back to Supportive Housing Manager when above tasks are complete.

Radiant Care

All Employees

- Close all windows and turn off fans in immediate work area before reporting to staging area and Supportive Housing Manager.

CROSS REFERENCE

Appendix 6: Air Exclusion Checklist located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano
SEP 2025	'Facility' updated to 'home'	R. Green

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	R. Green		
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**BOMB THREAT**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-02
APPROVAL:		DATE:	JANUARY 2011

GENERAL

When the telephone call is received, prolong the conversation as long as possible and complete the Bomb Threat Checklist. Immediately inform the CEO/delegate and provide the completed checklist.

PROCEDURE

RESPONSE IN LONG-TERM CARE

Roles and Responsibilities

CEO/Delegate

- The CEO/Delegate will decide if the bomb threat should be taken seriously.
- **The decision to call an Evacuation is the CEO's responsibility.** The information gathered on the Bomb Threat Checklist and advice from the Police Department will form the basis for this decision.
- If the threat is deemed to be credible, there are two options:
    1. Remove the bomb from the people (search).
    2. Remove the people from the bomb (evacuate).

  Rarely is there time and people to do both.
- If the information indicates enough time for an evacuation, then this option should be chosen. The fire alarm and Paging System may be used if desired.
- Re-occupation after evacuation can only be ordered by the CEO/Delegate. Normally a search will be conducted before re-occupation.
- If an explosion occurs, the Police will investigate. The CEO/Delegate, with advice from Police and Fire Department and in consultation with the Maintenance Manager, will decide on complete or partial re-occupation of the building.
- If the CEO/Delegate orders a search, the Director of Care/Delegate will:
    1. Coordinate the search with assistance from Maintenance Manager/Delegate.
    2. Communicate findings and progress of the search to the CEO/Delegate.

Charge Nurse

- Select a multidisciplinary team appropriate to the affected unit (employees from all departments).
- Instruct team members in procedure.

Search Team

- Systematically search all rooms and areas on affected unit, remembering to:
  - **Look** under and behind all furniture without moving it.
  - **Never** move suspicious objects or packages.
  - **Search** each room or area completely before moving onto the next.
  - **Suspect** what you do not know.
- Completely search all parts of residents' rooms including closets.
- Search all rooms even those that are locked.
- In non-resident areas, include the following in your search:

Washrooms
- waste containers
- towel and sanitary napkin dispensers
- flush tanks
- under tanks
- light fixtures
- lockers
- cabinets
- ledges and flat surfaces, false ceilings

Halls
- waste containers
- fire hose cabinets
- fire extinguishers
- windowsills
- false ceilings
- closets
- water cooler
- behind and under furniture and cushions
- light fixtures
- electrical panels

Office Areas
- on and under desks
- stationary cupboard
- light fixture
- windowsills
- bookcases
- filing cabinets
- all briefcases and parcels

Maintenance Areas - Basement, Electrical, HVAC, etc.
- in and behind all machinery
- all locker and storage spaces
- drawers
- light fixtures
- electrical panels
- drains
- light wells
- pipes and ductwork - in and on

Outside Areas
- receiving area
- windows
- sewers
- doors
- shrubbery, all ledges
- machinery, ductwork and drains on roof
- garbage cans
- planters

Employees
- If search is ordered by the CEO/Delegate:
  - Employees report to Charge Nurse on their unit and follow their direction.
  - Assist with search team if requested to do so by Charge Nurse.
  - Employees in common areas report to Personnel Assignment Centre.
- If evacuation ordered by CEO/Delegate, follow procedures in Evacuation Plan.

Communications
- The CEO/Delegate will authorize any announcement or messages. The Fire System Phone may be used if desired or cell phone/walkie talkie.
  - If a search is ordered, the announcement will be:
    "Contingency Plan now in effect. All Employees report to Charge Nurse at the Nurses' Station".
  - If all or part of the Evacuation Plan is to be implemented, the announcement will be:
    "Evacuation Plan now in effect. Please standby."

RESPONSE IN SUPPORTIVE HOUSING

Roles and Responsibilities

Supportive Housing Manager
- Select a multidisciplinary team appropriate to the involved unit (employees from all departments).
- Instruct team members in procedure.

The Search Team
- Systematically search all apartments and common areas in affected building, remembering to:
  - **Look** under and behind all furniture without moving it.
  - **Never** move suspicious objects or packages.
  - **Search** each apartment or area completely before moving onto the next.
  - **Suspec**t what you do not know.
- Completely search all parts of tenants' apartments including closets.
- Search all rooms even those that are locked.
- In common areas, include the following in your search:

Washrooms
- waste containers
- towel and sanitary napkin dispensers
- flush tanks
- under tanks
- light fixtures
- lockers
- cabinets
- ledges and flat surfaces, false ceilings

Maintenance Areas - Basement, Electrical, HVAC, etc.
- in and behind all machinery
- all locker and storage spaces, drawers
- light fixtures
- electrical panels
- drains
- light wells
- pipes and ductwork - in and on

Halls
- waste containers
- fire hose cabinets
- fire extinguishers
- windowsills
- false ceilings
- closets
- water cooler
- behind and under furniture and cushions
- light fixtures
- electrical panels

Office Areas
- on and under desks
- stationary cupboard
- light fixture
- windowsills
- bookcases
- filing cabinets
- all briefcases and parcels

Outside Areas
- receiving area
- windows
- sewers
- doors
- shrubbery, all ledges
- machinery, ductwork and drains on roof
- garbage cans
- planters

Radiant Care

Employees

- If search is ordered by the CEO/Delegate:
  - Employees report to Supportive Housing Manager/delegate and follow their direction.
  - Assist with search team if requested to do so.
- If evacuation ordered by CEO/delegate, follow procedures in Evacuation Plan.

Communications

The CEO/delegate will authorize any messages. The cell phone or walkie talkie will be used to communicate.

CROSS REFERENCE

Appendix 9: Bomb Threat Checklist
PT-P-03: Emergency Evacuation Plan Policy
Both located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting; paging system updated to 'fire system phone'; 'his/her' updated to 'their'	F. Akano
NOV 2025	Minor updates to Search Team sections for both Long-Term Care and Supportive Housing	F. Akano, M. Challice

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	T. Siemens, F. Akano		
NOV 2025	F. Akano, R. Green, M. Challice		
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	CHEMICAL SPILLS
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-17
APPROVAL:		DATE:	SEPTEMBER 2025

POLICY

A long-term care home's Chemical Spill policy involves immediate personal safety, alerting appropriate staff, isolating the area, and assessing the spill's nature and extent using Safety Data Sheets (SDS). The response team will then don proper personal protective equipment (PPE) and use the correct spill kit to contain and clean up the material, following established decontamination and disposal procedures.

PROCEDURE

1. Ensure Personal Safety
   - Evacuate: Immediately leave the contaminated area and move to a safe location.
   - Seek First Aid: If you or others are exposed, remove contaminated clothing and use emergency showers or eyewash stations.
   - Do Not Re-Enter: Do not go back into the area until cleared by emergency services or occupational health.

2. Alert and Assess
   - Notify Supervisor: Inform the charge nurse or Administrator Long-Term Care of the spill location, type of chemical, and any injuries.
   - Identify the Chemical: Consult the SDS for the spilled chemical to understand its hazards and proper handling.
   - Call Emergency Services: If the spill is large, an immediate threat, or beyond your control, call 911.

3. Isolate the Area
   - Restrict Entry: Prevent other residents, visitors, and non-essential staff from entering the affected area.
   - Ventilate (if safe): If the spill is not an external air exclusion emergency, open windows and doors to ventilate the area, but be mindful of spreading vapors.

4. Contain and Clean Up
   - Don PPE: Only trained personnel with appropriate PPE (e.g., gloves, face shield) should attempt cleanup.
   - Use Spill Kit: Retrieve the appropriate spill kit and use its materials to contain the spill, working from the periphery inward.
   - Control the Source: If possible and safe, stop the source of the leak to prevent further spread.

- Decontaminate: After cleanup, wash the affected area with soap and water to remove any residue.

5. Report and Dispose
   - Document: Complete an incident report detailing the spill and the response taken.
   - Proper Disposal: Place all contaminated cleanup materials into a labeled, leak-proof container and treat them as hazardous waste.
   - Follow Instructions: Contact the appropriate environmental services or maintenance personnel for proper disposal.

6. Training
   - All Environmental Services and PSWs must complete mandatory chemical spill kit module upon hire.

REFERENCE

Workplace Hazardous Materials Information System (WHMIS), https://www.canada.ca/en/health-canada/services/environmental-workplace-health/occupational-health-safety/workplace-hazardous-materials-information-system.html

CROSS REFERENCE

4-P-09: RC PSW/HCS Orientation Checklist
4-F-14: RC Environmental Services Orientation Checklist
5-P-38: Workplace Hazardous Materials Information Systems (WHMIS)
8-P-20: Personal Protective Equipment

REVISIONS

Date	Changes	Requested By

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**EMERGENCY EVACUATION PLAN**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-03
APPROVAL:		DATE:	JANUARY 2011

PRINCIPLES

An evacuation will be ordered in the event of a situation where the safety of the building occupants is threatened. Situations may include:

- fire
- bomb threat
- gas leak (no use of radios/walkie talkies, phones, paging system or fire alarm)
- structural damage
- environmental problems - power failure, loss of heat, water disruption
- chemical spills/hazardous materials

Please refer to the individual policies located in our Peace Time Disaster and Emergency Safety Plan Response Manual for more information on responding to the above situations.

PROCEDURE

RESPONSE IN LONG-TERM CARE

Roles and Responsibilities

CEO/Senior Administrator Long-Term Care/Delegate

- Delegate will normally be Director of Care.
- Proceed to Personnel Assignment Centre.
- Contact 9-1-1 and notify them of the emergency. They will dispatch the appropriate emergency services (fire department, ambulance, police).
- Assess the situation, consulting with the Maintenance Manager/delegate and Fire and/or Police Department if on the scene.

Prepare for Evacuation

- If the immediate safety of building occupants is threatened, order an evacuation and initiate Fan Out System. The Fan Out List has been sent to all supervisors and callers on the list and is located in the Peace Time Disaster and Emergency Safety Plan Response Manual in the Administration Office and at the nurses' station
- Decide if Fire System Phone may be used (not in bomb threat or gas leak).
- Decide if fire alarm system may be used (not in bomb threat or gas leak).

- Determine the extent of the evacuation area, including the number of wings and the order of wings to be evacuated; no evacuation should start without the instruction of the CEO/delegate.
    - Authorize any announcements or messages to the floors.
- Notify the Director of Care/delegate.
- Announce “ALL CLEAR” when appropriate.

Charge Nurse

- Charge nurse (if Personnel Assignment Centre not present) assigns one employee to coordinate the resident staging area. Staging area locations are identified below.

Prepare for Evacuation

- Place white I.D. bracelets on all residents if possible. If not, send I.D. bracelets and nominal roles with exiting employees to staging area.
- Pack up charts, medications and MAR’s.
- Clear the hallways.
- WAIT for specific order to evacuate.
- Announce **“**ALL CLEAR” when appropriate.

Call Pharmacy to Stand By

- Gather all residents in appropriate location.
- Ensure all rooms have been checked.
- Complete Resident Nominal Roll and determine location of any missing residents.

Maintenance Manager/Delegate (if present)

- Proceed to the area immediately.
- Consult with the CEO/delegate on the seriousness and duration of the situation
- Attempt to control or eliminate the source of the problem (i.e., vent area of gas leak and shut off main gas valve).
- Contact appropriate outside resources on authorization of CEO/delegate to resolve problem.

Therapeutic Recreation Supervisor/Delegate

- When page to prepare for evacuation is announced, take emergency cell phone and report to the Personnel Assignment Centre area; if front entrance area is unsafe, then proceed to the nurses’ station for same; ensure lobby and front entrance of location is clear for Emergency Response Personnel.
- Set up Personnel Assignment Centre.
- Assign four (4) employees to affected wing to assist with resident movement.
- Assign one (1) employee to the front entrance doors to keep residents and visitors from entering the building and notify reception of any vehicles in fire lane.
- Assign additional employees as requested.
- When “ALL CLEAR” is announced, complete Staff Nominal Roll and submit to the CEO/delegate.

Reception

- Unless affected by the disaster situation, the receptionist will remain in the area and become the communication centre.
- If affected by the disaster situation, receptionist proceeds to Therapeutic Recreation Office.

All Employees

- All employees off of their assigned area when the evacuation page is announced report to the charge nurse immediately.
- All employees not assigned to a specific area, including supervisors, should report to the Personnel Assignment Centre:
    - Primary Personnel Assignment Centre - Front Entrance (TM = 7 Tabor Drive; PM = 31 Elden Street)
    - Back Up Personnel Assignment Centre - nurses' station

Communications

- Once the CEO/delegate has determined if the Fire System Phone may be used, they will authorize the following announcement or message:

  Repeat 3 times:

  "PREPARE FOR EVACUATION" _____ ("state location")
  "ALL OTHER HOME AREAS, PLEASE STANDBY"

  Repeat 3 times:

  "EVACUATION PLAN NOW IN EFFECT FOR" _____ ("state location")
  "ALL OTHER HOME AREAS, PLEASE STANDBY"

- Persons in authority will wear arm bands.
- Cell Phones/walkie talkies will be used by key people.
- The CEO/delegate will notify the Director of Care.
- The CEO will handle all communication with the media.
- To facilitate this, a Media Centre will be set up at the Staging Area.

Staging Area

- Staging Areas:
    - For Pleasant Manor, the staging area is the Creekview Link and the evacuation location is Niagara Long-Term Care Residence.
    - For Tabor Manor, the staging area is Scott St. Church and the evacuation location is Heidehof.
    - The emergency and after hour numbers for contacts at this site are on the Outside Resource List in the Peace Time Disaster and Emergency Safety Plan Response Manual.
- Staging area staff obtain nominal rolls and white I.D. bracelets from arriving employees.
- Ensures that each resident has an I.D. bracelet.
- Records name, room number and destination of residents being transported.
- Send employees with evacuated residents to remain with them.
- Send for additional blankets to wrap residents as required.

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General Resident Evacuation Guidelines

- Do not evacuate without an order from the CEO/delegate or Fire Department.
- Residents should be moved from the affected area first and then placed on the inside wall of the corridor, not in doorways.
- Do not use mechanical lifts; transfer bed-ridden residents to wheelchairs where possible for transport.
- Residents who can walk should be assisted by an employee.
- Non-ambulatory residents are to be evacuated using wheelchairs.

Relocation of Residents

- Residents will initially be evacuated to the staging area.
- If evacuation is going to be for longer than a few hours, residents need to be relocated. CEO/delegate will give order.
    - Families will be contacted to see if the resident can be cared for by them; see home-specific Major Emergency Evacuation List located in a binder in the long-term care home and in the Peace Time Disaster and Emergency Safety Plan Response Manual.
    - Residents who have been assessed by Medical/Nursing employee as requiring medical attention will be transferred to hospital.
    - The remainder of residents will be relocated to the evacuation location:
        - Pleasant Manor: Niagara Long-Term Care Residence
        - Tabor Manor: Heidehof
- The CEO/delegate will appoint someone to coordinate the relocation of residents.
- The Resident Nominal Roll will be kept of each transferred resident and forwarded to the Director of Care/delegate.
- The Director of Care/delegate will work with the charge nurse to assign employees to accompany residents transferred to other long-term care homes.
- The pharmacist will supply medication for residents sent home with families and those transferred to other long-term care homes.
- In the event of a prolonged evacuation of part of or the entire home, the CEO/delegate will contact the Ministry of Long-Term Care and Ontario Health at Home (OHaT) to arrange temporary relocation.

Re-Occupation of Residents

- The Home can only be re-occupied on the authority of the CEO/delegate after consultation with the Fire and Police Departments, Maintenance Manager/Maintenance Person, and any required outside consultants (i.e. engineers).
- The Director of Care/delegate will coordinate the return of residents and staff. The following protocol will be used:
    - return from hospitals
    - return from other long-term care homes
    - return from families
- The Medical Director will perform medical evaluations of returning residents as soon as possible.
- Staffing for the first 48 hours will be increased to assist with re-adjustment.

Radiant Care

RESPONSE IN SUPPORTIVE HOUSING

Roles and Responsibilities

CEO/Delegate

- Delegate will normally be Supportive Housing Manager.
- Contact 9-1-1 and notify them of the emergency; they will dispatch the appropriate emergency services (fire department, ambulance, police).
- Assess the situation consulting with the Maintenance Manager/delegate and Fire and/or Police Department if on the scene.

Prepare for Evacuation

  - If the immediate safety of building occupants is threatened, order an evacuation and initiate Fan Out System; the Fan Out List has been sent to all supervisors and callers on the list and is located in the Peace Time Disaster and Emergency Safety Plan Response Manual in the Administration Office; contact Tenant Council Chair to initiate tenant volunteers.
  - Decide if fire alarm system may be used (not in bomb threat or gas leak).
  - Determine the extent of the evacuation area, including the number of floors and the order of floors to be evacuated; no evacuation should start without the instruction of the CEO/delegate.
  - Authorize any messages to the tenants.
  - Notify the Supportive Housing Manager.
  - Communicate 'ALL CLEAR' when appropriate.

Supportive Housing Manager/Delegate

- Supportive Housing Manager/delegate assigns employees to coordinate the tenant staging area(s); if nature of the emergency dictates, Police or Fire Department will direct where staging areas are to be located.
- Gather all tenants in appropriate location.
- Ensure all apartments on the affected floors have been checked.
- Complete tenant Nominal Roll and identify any missing tenants.

Prepare for Evacuation

  - Clear the hallways.
  - WAIT for specific order to evacuate.
  - Assist tenants to staging area.
  - Remind tenants to bring all medications.

Maintenance Manager/Delegate (if present)

- Proceed to the area immediately.
- Consult with the CEO/delegate on the seriousness and duration of the situation
- Attempt to control or eliminate the source of the problem (i.e., vent area of gas leak and shut off main gas valve).
- Contact appropriate outside resources on authorization of CEO/delegate to resolve problem.

Supportive Housing Team Leader

- When order to evacuate is given, take cell phone and report to the affected area.
- Ensure lobby and front entrance of location is clear for Emergency Response Personnel.
- Assign employees to affected floor to assist with tenant movement.
- Assign one (1) tenant to the front entrance doors to keep tenants and visitors from entering the building and notify reception of any vehicles in fire lane.
- Assign additional employees as requested.
- When “ALL CLEAR” is announced complete Staff Nominal Roll and submit to the CEO/delegate.

All Employees

- All employees off of their assigned area when the order to evacuate is given report to the Supportive Housing Manager immediately.

General Tenant Evacuation Guidelines

- Do not evacuate without an order from the CEO/delegate or Fire Department.
- The evacuation location is in an unaffected apartment building:
    - Pleasant Manor: Either Arborview, Creekview or Oakview
    - Tabor Manor: Either Evergreen, Mapleview or Spruce Lane
- Tenants should be moved from the affected area first and assisted to the staging area.
- There is a Tenant Evacuation Checklist in each firebox that indicates tenant names, locations and modes of evacuation.

Relocation of Tenants

- Tenants will be assisted to the staging area.
- If evacuation is going to be for longer than a few hours, tenants need to be relocated. CEO/delegate will give order.
    - Tenants requiring personal support will be assisted to contact their SDM for personal care for assistance with relocation.
    - Hospitality rooms in unaffected building will be used for tenants needing personal support.
- A transfer log will be kept of each Supportive Housing client transferred.
- The Supportive Housing Manager will assign employees to provide support for Supportive Housing clients needing assistance in the community.
- In the event of a prolonged evacuation of part of or the entire building, the CEO/delegate will contact Ontario Health at Home (OHaT) with a plan to provide personal support to Supportive Housing clients while they are in the community.

Re-Occupation of Tenants

- The building can only be re-occupied on the authority of the CEO/delegate after consultation with the Fire and Police Departments, Maintenance Manager/delegate, and any required outside consultants (i.e., engineers).
- The Supportive Housing Manager/delegate will coordinate the return of tenants and employees.

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REFERENCE

Ministry of Long-Term Care
https://www.ontario.ca/page/ministry-long-term-care

Ontario Health at Home (OHaT)
https://ontariohealthathome.ca/

CROSS REFERENCE

- PT-P-01: Air Exclusion*
- PT-P-02: Bomb Threat*
- PT-P-05: Fan Out System*
- PT-P-06: Fire Safety Plan*
- PT-P-07: Gas Leak*
- PT-P-08: Heating System Failure*
- PT-P-10: Power Failure*
- PT-P-13: Loss of Water - Planned and Unplanned*
- Fan Out List*
- External Resource List*
- Major Emergency Evacuation List (Residents) located in a binder in the LTC Home as well as the Peace Time Disaster and Emergency Safety Plan Response Manual
- Tenant Evacuation Checklist located in the Fire Box at the main entrance of each building

*Located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting; paging system updated to 'fire system phone'; location of Primary Personnel Assignment Centre added; 'his/her' updated to 'their'; 'Hamilton Niagara Haldimand Brant Local Health Integrated Network' updated to 'Ontario Health at Home (OHaT)'	F. Akano
NOV 2025	Maintenance Supervisor updated to Maintenance Manager; facility updated to home; Reference section added	F. Akano
JUN 2026	Change of address and staging area for 31 Elden Street	F. Akano

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REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	T. Siemens, F. Akano, R. Green		
NOV 2025	F. Akano, R. Green, M. Challice		
JUN 2026	F. Akano, R. Green		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**EMERGENCY STAFFING**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-04
APPROVAL:		DATE:	AUGUST 2022

SCOPE

This policy applies to all sites and programs at Radiant Care.

PURPOSE

To ensure continuity of care and services at all times, including during emergencies or staffing shortages.

POLICY

Some of the strategies Radiant Care has implemented to ensure staffing coverage in the event of an emergency or staffing shortage are:

- Fan Out System (please refer to Fan Out System and Fan Out Lists located in the Peace Time Disaster and Emergency Safety Plan Response Manual).
- Trained our shared services staff on how to assist with regular duties; i.e., delivering meals to residents, portering, folding linens, stocking PPE, delivering meal/laundry carts, etc. as needed.
- Agreements with Agencies to assist in emergencies, as well as access to a list of Agencies that can assist in emergencies as provided by the OHaH or Ontario Health.
- Registered for the Ontario Workforce Matching Portal to help recruit for our workforce.
- Student placements with local colleges including an agreement that we can offer RPNs and PSWs temporary positions if they are successful in placement, with a full offer of employment dependent on completing their program.

REFERENCE

Ontario Health at Home (OHaH)
https://ontariohealthathome.ca/

Ontario Workforce Matching Portal
https://www.oha.com/Bulletins/Apr%2007%20900am%20-%20FAQ%20Deloitte%20Ontario%20Health%20Workforce%20Matching%20Portal.pdf

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CROSS REFERENCE

- Fan Out System located in the Peace Time Disaster and Emergency Safety Plan Response Manual
- Fan Out Lists located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding and reformatting	F. Akano
SEP 2025	Reference section added	A. Costea
JUN 2026	Minor wording changes to Policy	F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUL 2024	F. Akano		
SEP 2025	A. Costea		
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	FAN OUT SYSTEM
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-05
APPROVAL:		DATE:	JANUARY 2011

POLICY

The Fan Out System will be initiated by the CEO/Delegate, when needed, to efficiently contact employees to request their presence at the home to respond to an emergency.

Fan Out Lists will be updated on a monthly basis or sooner if changes warrant this. Upon update, the Fan Out List is sent to all supervisors and callers on the list and is located in the Peace Time Disaster and Emergency Safety Plan Response Manual in the Administration Office and at the Nurses' station. All supervisors and callers should keep a copy of the Fan Out List with them at all times.

PROCEDURE

FAN OUT SYSTEM

1. In an emergency, Charge Nurse will call Senior Administrator Long-Term Care.
2. Senior Administrator Long-Term Care will call CEO and decide if we need to enact Fan Out System.
3. If yes, Senior Administrator Long-Term Care will call Supervisors (first line of list), then report to the home immediately.
4. Supervisors (first line) will each call the caller listed below them (on second line), then report to the home immediately.
5. *Callers (second line) will consult the Fan Out List to call all employees below them on the list to request that they report to the home/reporting location immediately. Once they have called all employees below them, the caller will report to the home/reporting location.

Fan Out List of tenant volunteers to be initiated by notifying Tenant Council Chair.

REPORTING LOCATION

Prior to initiating the Fan Out System, the CEO/Delegate will decide on the reporting location:

Long-Term Care

Pleasant Manor

- The long-term care home
- Staging area: Creekview Link
- Evacuation site: Niagara Long-Term Care Residence

Radiant Care

Tabor Manor
- The long-term care home
- Staging area: Scott Street Church
- Evacuation site: Heidehof

Housing

Pleasant Manor
- Arborview
- Creekview
- Oakview

Tabor Manor
- Evergreen
- Mapleview
- Spruce Lane

CROSS REFERENCE

- Fan Out List located in the Peace Time Disaster and Emergency Safety Plan Response Manual, at Nurses' station, in email of Supervisors & Callers

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	C. Loewen		
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**FIRE SAFETY PLAN**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-06
APPROVAL:		DATE:	JANUARY 2011

PURPOSE

This policy is a general response for fire. For more detail, please refer to the Fire Safety Plan for each building, located in the Fire Box at the main entrance of each building and in Sections 8 and 9 of the Peace Time Disaster and Emergency Safety Plan Response Manual.

POLICY

All fire alarms shall be responded to as a genuine emergency. All employees must respond appropriately in any emergency situation, including returning to their work area if on break or in the process of going home. All Radiant Care employees shall be oriented to the contents of the Fire Safety Plan upon hire, on an annual basis and as revisions occur.

The CEO has overall authority for the development and implementation of the Fire Safety Plan as well as ensuring its annual revision. The CEO is responsible for the development and implementation of fire safety policy and procedures in all departments.

The Fire Department shall assume all firefighting activities upon their arrival and advise the CEO/Delegate on any necessary action regarding evacuation.

Fire Prevention is the Key

Fire Safety is everyone's responsibility. Be alert to the following:

- Avoid accumulation of rubbish. Keep doorways, corridors, stairwells and fire doors free of obstructions at all times.
- Never jam open a fire door.
- Immediately report to your supervisor any defects in mechanical or electrical equipment.
- Do not use unauthorized electrical equipment.
- Keep stairwell and storage doors closed at all times.
- Know the location of fire alarm boxes and fire exits.
- Know the location and operation of firefighting equipment (extinguishers).
- Report any smell of smoke, natural gas, or fuel to the Maintenance Manager immediately.
- Ensure proper signage for resident/tenant rooms with oxygen present and ensure an up-to-date list available for firefighters.

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Shift times for the purpose of the Fire Safety Plan are:

LTC Charge Nurse

Days	7:00 am - 3:00 pm
Evenings	3:00 pm - 11:00 pm
Nights	11:00 pm - 7:00 am

Nursing Department

Days	6:00 am - 2:00 pm
Evenings	2:00 pm - 10:00 pm
Nights	10:00 pm - 6:00 am

Supportive Housing Department

Days	7:00 am - 3:00 pm
Evenings	3:00 pm - 11:00 pm
Nights	11:00 pm - 7:00 am

Administration

Monday to Friday	8:30 am - 4:00 pm

PROCEDURE

RESPONSE IN LONG-TERM CARE

General

- The charge nurse is the Fire Warden for the entire site and shall be responsible until the arrival of the Fire Department. All employees shall respond to the fire alarm and have assigned fire duty responsibilities.
- Mechanical lifts are not to be used during a fire alert.
- Mechanical door openers automatically release when fire alarm is activated.
- Enunciator panels and floor plans are located in the main entrance and at the nurse's station.
- Follow the **"REACT"** rule in every fire alert situation:
  - R - Remove yourself and other people in immediate danger, if safe to do so. Calmly notify others around you.
  - E - Ensure doors are closed as you leave the fire area if it is safe to do so (do not lock).
  - A - Activate the fire alarm system at the nearest fire alarm pull station.
  - C - Call the Fire Department (dial 9-1-1) from a safe location.
  - T - Take other appropriate action, such as notifying staff and moving occupants to safe areas. Listen for instructions broadcast over Fire System Phone or from the Fire Warden.
- In all cases of actual fire, begin fighting the fire if reasonable or possible, to extinguish or prevent spread.

- All fire extinguishers at Radiant Care are ABC multi-purpose or K (kitchen) and can be used on any type of fire. Stand 6 to 8 feet away from the fire and:
    - Pull the pin
    - Squeeze lever with short burst to test extinguisher
    - Aim low at the base of the fire
    - Squeeze the lever
    - Sweeping motion from side to side
- Personnel Assignment Centre (PAC) locations:
    - Radiant Care Pleasant Manor
        - Primary PAC - Nurses' Station
        - Back up PAC – Great Room
    - Radiant Care Tabor Manor
        - Primary PAC - Great Room
        - Back up PAC - Nurses' Station

FIRE ALERT - Stage 1

When Fire Bells begin ringing intermittently:

- Charge nurse checks enunciator panel for location of fire and pages on the Fire System Phone (day shift only)
    - To page the alert - **(1)** Press speaker phone button, **(2)** press 9-1-1 on phone, **(3)** lift handset - proceed with announcement:

      Repeat 3 times:
      "Code RED – [Location from enunciator panel]"
      As well as indicating wing (e.g., North, South and West.)

- Charge Nurse dials 9-1-1 to report Fire Alert. Ensures someone is assigned to the front doors to meet and direct Fire Department.
- Charge Nurse reports to the location of fire and assists employees.
- Charge Nurse assigns tasks to employees.
- Move resident from the room involved in Fire Alert and the room(s) on either side and directly across from the affected room. Proceed to move *all* residents from the other rooms in the affected corridor and ensure the area is completely vacated.
- Ensure that in each room, all equipment has been shut off and that all doors and windows have been closed (but not locked).
- Residents who are in bed and require mechanical lift for transfer are to be left in bed during Stage 1 Alert, unless in danger from fire or smoke. An employee must be posted within view of the resident door(s).
- Ensure that all equipment and carts are removed from hallways.
- Continue Fire Alert activities until "All Clear" announcement is made.
- When directed to do so by the Fire Department, Charge Nurse announces the 'ALL CLEAR' on the Fire System Phone to cancel Fire Alert:

  Repeat 3 times:
  "Fire Alert All Clear"

- After “ALL CLEAR” announced, charge nurse completes Nominal Roll and Fire Alarm Response Report and submits to the Maintenance Manager/maintenance person for follow up.
- If the Fire Alert is a genuine fire emergency, charge nurse notifies Senior Administrator Long-Term Care/delegate and Director of Care/delegate.
- Charge nurse acts as liaison with Fire Department.
- Charge nurse assumes responsibility of all employees on duty.

Charge Nurse - RN/RPN

- Send employees to location of fire.
- Remove residents from affected area to next fire zone adjacent to affected area.

Therapeutic Recreation Supervisor/Delegate (8:30 am - 4:30 pm, Monday to Saturday)

- When Fire Alert sounds report to the Personnel Assignment Centre.
- Ensure lobby and front entrance are clear for Fire Department and set up Personnel Assignment Centre (PAC).
- Assign two (2) employees to affected area to assist with resident movement.
- Assign one (1) employee to the front entrance doors to keep residents and visitors from entering the building and notify reception of any vehicles in fire lane. Also, notify employees outside the building of the Fire Alert and instruct them to go to the Command Centre.

Maintenance Manager/Maintenance Person (if present)

- Proceed to the area of the fire.
- Fight the fire until relieved by the Fire Department or until no longer safe to do so.
- When Fire Services indicates “all clear”, Maintenance resets alarm, completes Fire Alert Report and submits to CEO/Delegate. Files Staff Nominal Roll.

All Employees

- All employees off of their assigned area when Fire Alert sounds, report back to the charge nurse immediately.
- All employees not assigned to a specific area, including managers, report to the Personnel Assignment Centre.
- All employees responding to the fire area, report to the charge nurse and follow directions.

Director Of Care/Delegate (if present)

- Proceed to the area of the fire.
- Monitor activities and ensure fire procedures are followed.

Senior Administrator Long-Term Care/Delegate

- Proceed to reception to assist Fire Department.

FIRE ALERT - Stage 2

When Fire Bells begin ringing continuously: (Stage 2 Alarm will activate automatically)

CEO/Delegate
(Delegate will be, in order of availability: Senior Administrator Long-Term Care, Director of Care, Charge Nurse)

- Consults with Fire Department to determine if evacuation will be necessary.

Charge Nurse

- When order to evacuate is received from CEO/Delegate or in obviously escalating situation, makes the evacuation announcement overhead:

  Repeat 3 times:
  "Fire Alert Stage 2 - [location] - Evacuation"

- Directs area to be evacuated.
- Gives the order to activate Fan Out if needed.
- Notifies Evacuation Site. See Emergency Evacuation Plan located in the Peace Time Disaster and Emergency Safety Plan Response Manual for evacuation sites and details.
- Sends a registered employee to the staging area (see below).
- After hours, if no Personnel Assignment Centre present, sends all available employees to affected area.
- Media releases provided only by CEO.
- Charge Nurse obtains white I.D. bracelets from photocopy office. Place white I.D. bracelets on all residents if time and situation allows. Otherwise send I.D. bracelets and Nominal Roll Forms to the staging area with exiting employees.
- Packs up resident charts, medications and MAR books for transportation out of the unit.
- Waits for specific order from CEO/delegate/Fire Department if Personnel Assignment Centre in effect, call Therapeutic Recreation Supervisor to request more staff if needed.
- Assign staff to evacuate with residents and stay with them at evacuation site.

Maintenance Manager/Maintenance Person (if present)

- Consult with CEO/delegate/Fire Department the need to go to Stage 2 Alert.
- Fight the fire until relieved by the Fire Department or until no longer safe to do so.
- Stay with Firefighters to assist as necessary and/or assist with resident evacuation as directed.

Therapeutic Recreation Supervisor/Delegate

- Record and assign new employees as they arrive to PAC.

Staging Areas

- Staging Areas:
  - Radiant Care Pleasant Manor
    - Creekview Link
  - Radiant Care Tabor Manor
    - Scott Street Church
- Therapeutic Recreation Supervisor (if PAC present) or charge nurse (if no PAC) assigns two employees to coordinate the resident staging area(s).

- Staging area employees:
  - Obtain nominal rolls and white I.D. bracelets from arriving staff/residents.
  - Ensure that each resident has an I.D. bracelet.
  - Record name of residents being transported.
  - Send staff with evacuating residents.
  - Send for additional blankets to wrap residents as required.

RESPONSE IN SUPPORTIVE HOUSING

- The Supportive Housing Team Leader shall be responsible until the arrival of the Fire Department. All Supportive Housing employees shall respond to fire alarm and have assigned fire duty responsibilities.
- Mechanical lifts are not to be used during a Fire Alert.
- Magnetic door openers automatically release when fire alarm is activated.
- Enunciator Panels and Evacuation Lists:
  - At Radiant Care Pleasant Manor:
    - Arborview has one enunciator panel located at the front entrance of the Administration Office area. Oakview enunciator panel is located at the front entrance of the Administration Office. Creekview has one enunciator panel located in the front entrance. Supportive Housing enunciator panel is located in the Supportive Housing office.
    - The Fire Box at the entrance of each building has a copy of the building floor plans and evacuation lists.
  - At Radiant Care Tabor Manor:
    - Mapleview has two enunciator panels: one is located in the mail room, the second in the basement. Evergreen enunciator panel is located at the front entrance. Spruce Lane has two enunciator panels, with one located by the entrance and one at the Supportive Housing desk.
    - The Fire Box at the entrance of each building has a copy of the building floor plans and evacuation lists.
- Follow the **"REACT"** rule in every fire alert situation:
  - R - Remove yourself and other people in immediate danger, if safe to do so. Calmly notify others around you.
  - E - Ensure doors are closed as you leave the fire area if it is safe to do so (do not lock).
  - A - Activate the fire alarm system at the nearest fire alarm pull station.
  - C - Call the Fire Department (dial 9-1-1) from a safe location.
  - T - Take other appropriate action, such as notifying staff and moving occupants to safe areas. Listen for instructions broadcast over Fire System Phone or from the Fire Warden.
- In all cases of actual fire, begin fighting the fire if reasonable or possible to extinguish or prevent spread.
- All fire extinguishers at Radiant Care are ABC multi-purpose or K (kitchen) and can be used on any type of fire. Stand 6 to 8 feet away from the fire and:
  - Pull the pin
  - Squeeze lever with short burst to test extinguisher
  - Aim low at the base of the fire
  - Squeeze the lever
  - Sweeping motion from side to side

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FIRE ALERT

When Fire Bells begin ringing:

- Supportive Housing Team Leader checks enunciator panel for location of fire.
- Team Leader calls 9-1-1 to report Fire Alert.
- Team Leader then meets Fire Department at entrance of affected building and provides information on the location of the alarm and provides a list of tenants needing assistance with evacuation. The tenant evacuation list is found in the Fire Box at the main entrance of each building.
- Team Leader notifies other Supportive Housing staff to assist.
- Team Leader calls Supportive Housing Manager if after hours.
- All Supportive Housing employees take direction from fire department when they arrive.
- Fire Department will decide if evacuation is necessary.

Supportive Housing Team Leader

- Meet fire department at entrance of building.
- Notify other Supportive Housing staff on duty.
- Notify Supportive Housing Manager if after hours.
- No tenant evacuation until instructed by Fire Department.

Supportive Housing Manager/Delegate (8:00 am - 4:00 pm, Monday to Friday)

- When Fire Alert sounds, report to the front entrance to meet the fire department.
- Notify CEO/delegate and Maintenance Manager.
- Ensure fire manual is readily available with list of tenants needing assistance with evacuation.
- Team leads assigns Supportive Housing employees to affected area to assist with tenant movement.

Maintenance Manager (if present)

- Proceed to the area of the Fire Alert
- Fight the fire until relieved by the Fire Department or until no longer safe to do so.
- When Fire Services indicates “all clear”, Maintenance resets alarm, completes Fire Alert Report and submits to CEO/delegate. Files Staff Nominal Roll. RN resets panel.

All Supportive Housing Employees

- All employees off of their assigned area when Fire Alert sounds; report back to the Supportive Housing/Team Leader immediately.
- All employees responding to the fire area, report to the Supportive Housing/Team Leader and follow direction.

Staging Areas

- If nature of the emergency dictates, Police or Fire Department will direct where staging areas are to be located (in an unaffected building).

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CROSS REFERENCE

- PT-P-03: Emergency Evacuation Plan Policy located Section 4 of the Peace Time Disaster and Emergency Safety Plan Response Manual
- Fire Safety Plan for each building, located in the Fire Box at the main entrance of each building and in Sections 8 & 9 of the Peace Time Disaster and Emergency Safety Plan Response Manual.
- Resident Emergency Evacuation List located in the Fire Box at the main entrance of the long-term care building and at the nurses' station
- Tenant Evacuation Checklist located in the Fire Box at the main entrance of each building

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting; 'telephone paging system and overhead paging system' updated to 'Fire System Phone'	F. Akano
SEP 2025	Correction to sections for Fire Safety Plan under Purpose; minor updates to Response in Supportive Housing section; minor formatting updates	R. Green; M. Challice
JUL 2026	Minor update to location to Personal Assignment Center location	R. Green, F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	R. Green, M. Challice		
JUL 2026	F. Akano, R. Green		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**FLOODING**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-16
APPROVAL:		DATE:	SEPTEMBER 2025

PURPOSE

This policy is in place to protect the safety of residents, tenants, staff, and visitors in response to imminent or current flooding in the building and/or on the property or surrounding area.

GENERAL

Hazard Analysis

- Floods include the inflow of water due to surface or storm water, rising water, storm surge, the release of water from natural or man-made boundaries, and sewer backup resulting from any of the foregoing.
- Flooding conditions may impact available evacuation routes and limit the accessibility of the property for emergency services.

Warnings

- Be aware of the risk of electrocution. Do not touch electrical equipment if it is wet or submerged or if you are standing in water.
- Avoid wading in floodwater that could contain dangerous debris, contamination or be electrically charged by submerged power lines or electrical equipment.

Weather Alerts

Environment Canada issues rainfall warnings including:

- Short Duration Rainfall (Heavy Downpour) Warning: When 50mm or more of rain is expected within one hour.
- Long Duration Rainfall Warning in the Summer: When 50mm or more of rain is expected within 24 hours, or when 75mm or more of rain is expected within 48 hours.
- Long Duration Rainfall Warning in the Winter: When 25mm or more of rain is expected within 24 hours.

What To Watch For

- Water pooling around storm drains.
- Large volumes of water running down streets or hills.
- Water entering the building through doors or windows.

PROCEDURE

Any person who receives communication that flooding is expected or occurring, or who observes flooding, will inform the Senior Administrator Long-Term Care/delegate, who will inform the CEO/delegate immediately.

Refer to Emergency Evacuation Plan Flowchart (Appendix A) for an overview of the required process.

The CEO will assess the risk and severity of the event as per information below, and as applicable:

1. Notify the Senior Administrator Long-Term Care/Maintenance staff on-call to help assess the flooding.

2. Assign a staff member to tune into the weather radio/station for updates on severe weather watches/warnings and flooding reports from local municipalities or other authorities.

3. If flooding is not being reported by media or authorities, call the Town of Niagara-on-the-Lake (Pleasant Manor) or the City of St. Catharines (Tabor Manor) to report the flooding.

4. If property is being affected by flooding, advise staff, residents, tenants, and visitors by announcing or designating staff to announce "*Flood Alert"* (x3) over PA system. If necessary, call 911 for assistance from emergency services.

5. Direct staff to have emergency supplies readily accessible (radio, batteries, flashlights, blankets, etc.) and be prepared for concurrent emergencies including but not limited to electrical power failure, total loss of heating system, total loss of cooling system, or boil water advisories, as well as the potential of an imminent emergency evacuation.

6. If deemed necessary by the CEO/Senior Administrator Long-Term Care/Maintenance Manager, or local authorities, follow procedures outlined in the Emergency Evacuation Plan. Flooding conditions may change rapidly, and evacuations should be initiated proactively or as directed by emergency services. Evacuation procedures may require modifications at the discretion of the CEO/Senior Administrator Long-Term Care/Maintenance Manager if floors, entrances, parking lots, or roads are inaccessible or unsafe.

7. If an evacuation is not possible or if advised by emergency services to shelter in place, direct staff to move residents and themselves to the higher areas of the home using 'close door and tag' procedures as appropriate.

The maintenance staff on-call will:

1. Monitor flooding conditions on the property and in the building as conditions may change rapidly.

2. Move critical equipment to higher floors/areas of the home.

3. Disconnect power to equipment that can't be moved from flood areas or areas at risk of flooding. Keep a list of disconnections so that equipment can be inspected and re-connected when normal operations resume.

4. Monitor gas service and gas appliances as Enbridge Gas representatives will shut off natural gas supply in flood affected area when necessary and when gas meters can be safely accessed.
5. If safe to do so, protect the property by clearing storm drains of debris and as possible, redirecting water away from building entrances.

After a flood, the Senior Administrator Long-Term Care/Maintenance Manager will:

1. Instruct maintenance staff to survey the home, equipment, and property for damage.

2. Instruct staff to stay away from damaged areas unless assistance has been specifically requested by emergency services.

3. Contact restoration company to begin drying efforts immediately.

4. Instruct the Senior Administrator Long-Term Care/Maintenance Manager to contact Enbridge to request restoration or inspection of gas service as necessary.

5. Once flood water has receded, flood water is no longer limiting operations, and the building and property have been deemed safe by Senior Administrator Long-Term Care/Maintenance Manager or appropriate authorities, announce over the PA system "All Clear" x3.

6. If an evacuation was ordered, follow procedures outlined in the Emergency Evacuation Plan.

REFERENCE

Environment Canada
https://weather.gc.ca/

CROSS REFERENCE

PT-P-03: Emergency Evacuation Plan
PT-P-07: Gas Leak
PT-P-10: Loss of Water Supply - Planned and Unplanned
All located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By

Radiant Care

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUN 2026	F. Akano		

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APPENDIX A

Emergency Evacuation Plan

CEO/Senior Administrator Long-Term Care/Delegate

- Delegate is usually the Director of Care.
- **Notify** Personnel Assignment Centre.
- **Call 9-1-1** to dispatch emergency services.
- **Assess situation** with Maintenance Supervisor/Delegate and on-scene Fire/Police.

- If **occupant safety is threatened**, order an evacuation and activate the **Fan Out System** (list in Peace Time Disaster Plan, Admin Office, Nurse's Station).
- **Determine** if Fire System Phone or fire alarm can be used (not during bomb threat or gas leak).
- **Define evacuation area**, wings, and order; start only with CEO/Delegate approval.
- **Authorize** announcements/messages.
- **Announce** "ALL CLEAR" when safe.

Reception

- **Unless affected** by the disaster situation, the receptionist will remain in the area and become the **communication centre**.
- **If affected, relocate** to Therapeutic Recreation Office.

Charge Nurse

- **Assign staff** to coordinate resident staging area if Personnel Assignment Centre is absent.

Prepare for Evacuation

- Place **white ID bracelets** on residents or send bracelets and Nominal Rolls with staff.
- **Pack** charts, medications, and MARs.
- **Clear** hallways and wait for evacuation order.

Call Pharmacy to Stand By

- **Gather residents** in staging area and **check all rooms**.
- **Complete** Resident Nominal Roll and **locate** any missing residents.

Maintenance Manager/Delegate

- **Proceed** to the area immediately.
- **Consult** CEO/Delegate on severity and duration.
- Attempt to **control/eliminate** the problem (e.g., vent area, shut off main gas valve).
- **Contact** outside resources with CEO/Delegate approval.

An **evacuation** will be ordered in the event of a situation where the **safety** of the building occupants is **threatened**

Therapeutic Recreation Supervisor

- On evacuation page, **take emergency phone** and report to the Personnel Assignment Centre (or Nurses Station if unsafe); keep lobby/front entrance clear.
- **Set up** the Personnel Assignment Centre.
- **Assign 4** staff to the affected wing for **resident movement**.
- **Assign 1** staff to the front entrance to **control access** and notify reception of vehicles in fire lane.
- Assign additional staff as needed.
- **After** "ALL CLEAR," complete Staff Nominal Roll and submit to CEO/Delegate.

All Employees

- All employees off of their assigned area when the evacuation page is announced **report to the Charge Nurse** immediately.
- Employees without specific assignments, including supervisors, report to the **Personnel Assignment Centre**:
  - Primary: Front Entrance (TM is 7 Tabor Dr; PM is Heritage Place, Four Mile Creek Rd)
  - Backup: Nurse's Station

Staging Area

- **Pleasant Manor:** Creekview Link to Niagara Long-Term Care Residence
- **Tabor Manor:** Scott St. Church to Heidehof
- Emergency/after-hours **contacts** are listed in the Outside Resource List (Peace Time Disaster Plan).
- **Staff at the staging area:**
  - Collect Nominal Rolls and white ID bracelets from arriving employees.
  - Ensure all residents have ID bracelets.
  - Record the resident's name, room, and destination.
  - Assign staff to stay with evacuated residents.
  - Request additional blankets as needed.

Communication

- Once **CEO/Delegate approves** use of the Fire System Phone, the CEO/Delegate makes the following **announcements:**
  - **Repeat 3 times:**
    - "PREPARE FOR EVACUATION – [state location]"
    - "ALL OTHER HOME AREAS, PLEASE STANDBY"
  - **Repeat 3 times:**
    - "EVACUATION PLAN NOW IN EFFECT FOR – [state location]"
    - "ALL OTHER HOME AREAS, PLEASE STANDBY"
- Persons in **authority** wear **armbands.**
- **Key personnel** use cell **phones/walkie-talkies.**
- CEO/Delegate notifies Director of Care.
- **CEO** manages all **media communications.**
- A **Media Centre** is set up at the **Staging Area.**

General Resident Evacuation Guidelines

- **Evacuate** only with CEO/Delegate or Fire Department **order**.
- **Move** residents from affected area first; place along inside corridor walls.
- **Transfer** bed-ridden residents to wheelchairs; **no mechanical lifts**.
- **Assist** walking residents
- **Use wheelchairs** for non-ambulatory residents.

Relocation of Residents

- Initially **evacuate residents** to the staging area.
- For **prolonged evacuation**, CEO/Delegate orders relocation:
  - Contact families for care (see Major Emergency Evacuation List).
  - Residents needing medical attention go to the hospital.
  - Others **evacuation locations**:
    - Pleasant Manor to Niagara LTC
    - Tabor Manor to Heidehof.
- CEO/Delegate appoints a coordinator for relocation.
- Director of Care/Delegate and Charge Nurse **assign staff** to accompany residents.
- Pharmacist **provides medications** for residents sent home or transferred.
- For **extended evacuations**, CEO/Delegate contacts Ministry of LTC and Ontario Health at Home (OHaH).

Re-Occupation of Residents

- **CEO/Delegate** authorizes return after consulting Fire/Police, Maintenance, and any required consultants.
- Director of Care **coordinates** resident and staff **return** in order: hospitals, other LTC homes, families.
- Medical Director **evaluates** returning residents promptly.
- **Staffing increased** for first 48 hours to support re-adjustment.

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MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**GAS LEAK**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-07
APPROVAL:		DATE:	JANUARY 2011

PROCEDURE

An employee who notices or suspects a gas leak should:

- Notify Maintenance Manager/Maintenance Person immediately.
- If employee is operating gas fired equipment, they should immediately shut off all gas operated equipment and all accessible shut off valves in their work area.
- The Maintenance Manager/Maintenance Person will call 9-1-1 and notify the CEO (use cell phone **OUTSIDE**).

Roles and Responsibilities

CEO/Delegate

The CEO/Delegate, after consultation with the Maintenance Manager/Maintenance Person, will decide if safety precautions will be sufficient or if evacuation is necessary.

Remember: Escaping natural gas rises; therefore, first and second resident home areas are vulnerable. If ordering "safety precautions" or an evacuation, instructions should include:

- Shut off all gas operated equipment.
- Shut off all accessible gas valves.
- Do **not** shut off or turn on lights or operate electrical equipment.
- Do **not** use Fire System Phone or fire alarm system.
- Where necessary, contact outside resources to resolve problem.
- Do **not** use telephones.
- Do **not** do anything that may cause a spark.
- Stand by for further instructions.

Maintenance Manager/Maintenance Person

- Proceed to area of suspected gas leak.
- Consult with CEO/Delegate on severity of situation.
- Shut down main gas supply.
- Vent immediate area of leak.
- Shut down elevators.
- Upon direction of the CEO/Delegate, contact appropriate outside services by cellular phone **OUTSIDE.**

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Communications

- Do not use Fire System Phone.
- Do not use internal telephones or cell phones inside.
- The CEO/Delegate will authorize messages to affected areas, by use of runners
- Messages should include:
    - Gas Leak Contingency Plan in effect.
    - Gas leak safety precaution instructions.
    - If an Emergency Evacuation has been ordered and through which exit.

CROSS REFERENCE

PT-P-03: Emergency Evacuation Plan Policy located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting; paging system updated to 'Fire System Phone'	F. Akano
SEP 2025	'Floor' updated to 'resident home area'	R. Green

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	R. Green		
JUN 2026	F. Akano		

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MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**HEAT WAVE**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-09
APPROVAL:		DATE:	JANUARY 2011

POLICY

Inside temperature of 32° C or higher for an extended period of time (36 hours) can be hazardous to residents. Temperatures of 35° C or higher for 36 hours may necessitate an evacuation, especially of high-risk residents.

PROCEDURE

Roles and Responsibilities

CEO/Delegate

- After being notified of building temperatures of 32° C for a period of 36 hours, will order heat wave contingencies to be put in place.
- After being notified of building temperatures of 35° C for a period of 36 hours or a temperature of 36.7° C for 6 hours, may order an evacuation.
- Authorizes any announcements or messages.
- May request more frequent monitoring of temperatures.

Maintenance Manager/Maintenance Person

- Will notify the CEO/delegate if temperature is 32° C for a period of 36 hours, if temperature is 35° C for a period of 36 hours, or if temperature is 36.7° C for a period of 6 hours.
- Shut off unnecessary heat-generating equipment.

Communications

- Any announcements or messages are authorized by the CEO/delegate.

RESPONSE IN LONG-TERM CARE

Roles and Responsibilities

Nursing

Promote cooling:

- Use fans, open internal doors.
- Close windows and drapes and turn off lights.
- Increase fluid intake.
- Provide residents with water or juice.

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Ensure residents are dressed properly:

- Clothing should be light in weight and colour, loose fitting and preferably made of cotton.
- Hats should be worn outside.
- Residents who dress themselves should be checked for overdressing.
- Monitor and record body temperature of all residents considered high-risk once per shift. Re-check elevated temperatures every four hours.
- Leave frail residents in bed and avoid/minimize excessive physical activity as directed by charge nurse.
- Limit whirlpool and tub baths. Give bed baths with cool water as directed by charge nurse.
- Discourage residents from going outside except to shady areas.
- For residents with elevated temperatures or other symptoms of heat-related illnesses, refer to Nursing Procedure in Prevention and Management of Heat-Related Illness for Residents Policy located in the Nursing Manual.

Food Services

- Nutrition Manager will order cold supper choices during a heat wave.
- Provide additional fluids to all units; water and fruit or vegetable juices are preferable.
- Offer ice water in common areas and at meals.
- Ensure adequate supply of ice is available.
- Provide jellied juices for residents who resist fluid intake.
- Assist in serving drinks.
- Assist nursing with residents as required.

Therapeutic Recreation

- Therapeutic Recreation Supervisor will review programs with Director of Care/delegate and cancel if necessary.
- For outside programs, keep residents out of direct sunlight. Ensure residents wear hats and sunscreen, and that clothing is light in weight and colour and is loose fitting.
- Avoid excessive physical activity especially in the sun and during the hottest part of the day.
- Assist with serving drinks to residents.

All Employees

- Assist with serving drinks to residents.
- Assist charge nurse with communication to resident's next-of-kin as requested.
- If evacuation is ordered by CEO/delegate, follow procedures.

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RESPONSE IN SUPPORTIVE HOUSING

Roles and Responsibilities

Supportive Housing Employees

Promote cooling:

- Use fans, open internal doors.
- Close drapes and turn off lights.
- Increase fluid intake.
- Provide tenants with water or juice.

Appropriate dress:

- Clothing should be light in weight and colour, loose fitting and preferably made of cotton.
- Hats should be worn outside.
- Leave frail tenants in apartments and avoid/minimize excessive physical activity.
- Discourage tenants from going outside except to shady areas.

All Employees

- If evacuation is ordered by CEO/delegate, follow procedures.

CROSS REFERENCE

- PT-P-03: Emergency Evacuation Plan Policy located in the Peace Time Disaster and Emergency Safety Plan Response Manual
- 5-P-42: Prevention and Management of Heat-Related Illness for Employees Policy located in the Health and Safety Manual
- 9-P-64: Prevention and Management of Heat-Related Illness for Residents Policy located in the Nursing Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano
OCT 2025	Minor update to Supportive Housing Roles and Responsibilities section; Cross Reference section updated	R. Green; M. Challice

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REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
MAY 2024	F. Akano		
SEP 2025	F. Akano, R. Green, M. Challice		
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**HEATING SYSTEM FAILURE**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-08
APPROVAL:		DATE:	JANUARY 2011

GENERAL

The implications of a heating system failure are greatly affected by the weather. The length of time before such a failure threatens the comfort and safety of residents will vary greatly.

The weather, the time of day and the probable duration of the problem must all be weighed in the CEO/Delegate's decision whether contingencies will be sufficient or if a precautionary evacuation is necessary.

PROCEDURE

Roles and Responsibilities

CEO/Delegate

- If necessary, orders evacuation.
- Consults with Maintenance Manager/Maintenance Person on the severity and probable duration of the problem.
- Orders contingencies be put in place.
- Authorizes any announcements or messages.

Maintenance Manager/Maintenance Person

- Investigates nature, severity and probable duration of the problem.
- Contacts the appropriate contractor.
- Keeps CEO/Delegate informed of progress on problem resolution.

RESPONSE IN LONG-TERM CARE

Roles and Responsibilities

Employees

- Provide residents with extra bedding and clothing.
- Encourage residents to drink hot fluids.
- Provide minimal personal care.
- Provide assistance to nursing as required. If evacuation is ordered, follow procedures.

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Communications

- Any announcements or messages are authorized by the CEO/Delegate.
- Instructions should include which contingencies to put in place
- Announcement or message:

  "Heating System Contingency Plan now in effect. Report to Charge Nurse for specific instructions."

RESPONSE IN SUPPORTIVE HOUSING

Employees

- Encourage tenants to drink hot fluids.
- Provide minimal personal care.
- If evacuation is ordered, follow procedures.

Communications

- Any announcements or messages are authorized by the CEO/Delegate.
- Instructions should include which contingencies to put in place.
- Announcement or message:

  "Heating System Contingency Plan now in effect. Report to Charge Nurse for specific instructions."

CROSS REFERENCE

PT-P-03: Emergency Evacuation Plan Policy located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	R. Green		
JUN 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**LOSS OF WATER SUPPLY - PLANNED & UNPLANNED**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-10
APPROVAL:		DATE:	JUNE 2024

SCOPE

For all staff members involved in initiating, preparing and concluding a disruption in water services within Radiant Care long-term care homes.

PURPOSE

To ensure safety and continued provision of services for all residents within Radiant Care, long-term care homes (LTCH) are required to have plans associated with a planned and unplanned disruption of water services as part of an emergency response plan. At minimum, a baseline plan should be created to remain compliant with health and safety codes, acts and regulations according to both the Ministry of Long-Term Care (MOLTC) and Niagara Region Public Health (NRPH).

POLICY

If Radiant Care experiences a loss, interruption and/or contamination of water services, the procedures outlined in this policy are to be followed to limit disruption in critical services for residents and staff. Radiant Care shall ensure the policy is updated annually and must always include at minimum the following:

- Contingency plan for both planned and unplanned disruptions.
- Communication protocol both internal and external.
- Interdisciplinary integration.
- Roles and responsibilities.
- Initial and conclusion meetings including debriefing.
- Contingency plans associated with full or partial campus disruptions.
- Documentation required for compliance and inspections with the MOLTC and NRPH.

DEFINITIONS

Emergency Response Plan: Specifies procedures for handling sudden or unexpected situations.

Potable Water: Water that is safe to drink. Water is safe to drink when it meets the health-based guidelines set out in Health Canada's document.

Planned Shut Down: Time specifically scheduled to address equipment performance, hardware/software upgrades, home maintenance, tool breaks, inspections and other necessary upkeep.

Resident Homes Area (RHA): formerly referred to as 'floor'.

Unplanned Shut Down: Any unforeseen event that could have not been controlled ahead of time. This can include a watermain break and/or water contamination.

Water Contamination: Occurs when substances pollute the water and make it unusable for cooking, drinking and other uses. Contamination can occur from agriculture, industrial chemicals, overflowing sewers and more.

PROCEDURES

Full Campus Disruption vs. Specific Campus Contingency Plans

Contingency plans must be in place for planned and/or unplanned water loss scenarios. Due to the size of Radiant Care's campuses at both homes, Radiant Care must include within the emergency plan which part of the campus is affected by the disruption and whether the other areas can be used as part of the contingency plan to allow for certain services to be ongoing, i.e., retrieving potable water from Supportive Housing, completing certain food preparation activities within an alternative kitchen.

Creation of an Organizational Plan for Planned and Unplanned Disruptions

Planned

In the event that a planned disruption of water supply occurs, use of the Emergency Response Plan is critical to ensure that all necessary services are maintained for residents and staff as much as possible with minimal disruption.

Planned disruptions of water supply may occur due to preventative maintenance requirements, and must follow the following steps prior to the disruption occurring:

1. **Senior Leadership and the Project Lead** must be informed of the specifics of the project. Any disruption that will severely impact the day-to-day routines of residents should not be completed during the day, unless necessary. Any contingency plans must be shared with the CEO for approval.

2. **Action Plan Meeting**
   The Project Lead and/or Senior Leadership must call for an interdisciplinary team action plan meeting that must include all supervisors, the IPAC Lead, and additional resource staff.
   - A review of the Emergency Plan Policy for Water Loss must be conducted.
   - All departments are responsible for discussing how the disruption will affect their services.
   - Determine who will be the Chief Warden and Area Warden.
   - Ensure all supervisors and managers are on site during the planned disruption.

- Discuss the threshold for the project should the timeline unexpectantly be elongated and where the potential for evacuation of the LTCH may be required. If there is potential for this, senior leadership must have a contingency plan prepared as back-up for such event.

3. **The Planned Water Disruption Checklist** (see Appendix A) must be completed during this meeting to determine any gaps and assist with creating an action plan.

4. **Notification/Reporting to NRPH and MOLTC**
   - A notification must be sent to NRPH, at minimum a week before the project. NRPH will provide a checklist to assist with additional planning to ensure compliance with public health standards. Upon receipt and review, NRPH will approve or deny the plan. Radiant Care will act accordingly based on the decision of review.
   - The action plan and notification must be sent to the MOLTC for authorization of the project, at minimum a week before the project is expected to be completed.

5. **Communication to Residents and Families**
   A memo must be sent to all in advance, and must describe the following:
   - Type of disruption.
   - Estimated length of disruption.
   - What will be disrupted.
   - Plan of action to ensure all critical services are maintained.
   - That reporting has been completed to MOLTC and NRPH.

6. **Communication to Staff**
   A memo will be drafted by the Senior Administrator Long-Term Care to send to employees in advance of the disruption. This memo must include:
   - Type of disruption.
   - Estimated length of disruption.
   - What services will be disrupted.
   - A summary of the action plan, and how staff are affected.
   - A summary of the duties and responsibilities for staff during the disruption.
   - Inform that MOLTC and NRPH have been notified and are aware of the disruption.

7. **Implementation of Action Plan (see Roles and Responsibilities below)**
   - Implementation of the action plan will take place as per the timeline set out within the planned document.
   - Communication must be ongoing to all supervisors and staff involved during the entire disruption.
   - Communication to NRPH and the MOLTC must occur if the project timeline must be extended.

8. **Concluding Disruption**
   - Call NRPH to inform that the project has been concluded and water services have been restored. However, note that no services may be reinstated without authorization from NRPH; e.g., food preparation.
   - Project Lead and/or Senior Leadership must call a debrief meeting with all who were directly involved in the project.

Unplanned

In the event that there is an unexpected event for water disruption whether it be a watermain break, a flood and/or water contamination, Radiant Care shall ensure that a contingency plan is followed and manipulated in order to prevent prolonged disruption, prevent infections due to water contamination and/or prevent complete ceasing of all critical services for residents within the affected LTCH.

An unplanned disruption of water supply must follow the steps below as soon as the disruption occurs:

1. Charge RN will immediately notify the Maintenance Manager of the water loss and/or potential water contamination concern. The charge RN will then call to notify the Director of Care (DOC).
2. The DOC will contact the Senior Administrator Long-Term Care who will then contact the CEO.
3. The Fan Out List will be initialized.
4. Once given the go ahead, the charge RN must announce "Code Grey, (location) is experiencing a loss of water" three (3) times over the intercom.
5. The unplanned contingency plan must be immediately implemented.
6. The Maintenance Manager must immediately contact the water supply provider to arrange for alternative water services and follow the basic contingency plan until action plan is approved by CEO such as:
   - Bottled water for drinking.
   - Hand stations with jugs of water for Hand Hygiene at placed on each RHA and in the basement.
   - Jugs of water in a dispenser for kitchen and food preparation (if entire campus is affected). All food preparation must cease immediately if there is access to safe water is not available.
   - Jugs to designated toilets for flushing.
   - Provide stockpile of disposable commode bags.

   #### City Water Disruption/External Disruption (e.g., city watermain break)

   - External water source company must be called to provide an external water source that may be able to connect to Radiant Care water supply.
   - Plumbing vendor must be contacted for urgent service if the loss is caused by the home or there is no water for at least two (2) hours. They may provide an emergency supply hook-up that must be a NRPH approved water supply vendor.

   #### Internal Disruption (e.g., burst pipe, flood, etc.)

   - Internal water disruption cannot be replaced via a tanker truck; therefore, external water company is to bring water to fill the 100-gallon water tanks in storage. These tanks are to be placed at an available location where water is accessible.

7. Action Plan Meeting
   The Project Lead and/or senior leadership must call for an interdisciplinary team action plan meeting immediately that must include all supervisors, the IPAC Lead and additional resource staff.
   - A review of the Loss of Water Supply - Planned & Unplanned policy must be conducted.

- All departments are responsible for discussing how the disruption will affect their services.
- Determine who will be the Chief Warden and Area Warden.
- Ensure all supervisors and managers are on site during the planned disruption.
- Discuss the threshold timeline for the disruption. If the disruption occurs for an unknown excessive amount of time, the potential for evacuation of the LTCH may be required. If there is potential for this, Senior Leadership must have a contingency plan prepared as back-up for such an event.

8. Unplanned Water Disruption Checklist (see Appendix B) must be completed during this meeting to assist with creating an Organizational Action Plan.

9. Notification/Reporting to MOLTC and NRPH
   - Reporting to the MOLTC immediately is required through a Critical Incident System Report.
   - Reporting to a NRPH representative immediately to assist with any planning that may be required. An NRPH Inspector may arrive onsite to assist with ensuring a contingency plan is set out and compliant with appropriate standards and acts. Management must follow the direction and recommendations set out by the authorizing entities for any additional tasks to be performed, i.e., pending use of water systems until testing has been completed.

10. Departments to Action
    - All departments are to action based on the water disruption; see Roles and Responsibilities for various tasks that may be required.

11. Implementation of Active IPAC Monitoring
    Infection Prevention and Control monitoring must be initiated for any unplanned water disruption due to contamination of water.
    - A list of residents who may have been affected by the water contamination must be taken.
    - If disruption is a home-wide concern, all residents must undergo heightened surveillance for any illness.
    - IPAC Lead will communicate with the NRPH Nurse to discuss any further actions that may be required.

12. Communication to Residents and Families
    A memo must be sent as soon as possible by the Senior Administrator Long-Term Care and must describe the following:
    - Type of disruption.
    - Estimated length of disruption.
    - What is disrupted.
    - Plan of action to ensure all critical services are maintained.
    - That reporting has been completed to MOLTC and NRPH.

13. Communication to Staff
    A memo must be sent out as soon as possible by the Senior Administrator Long-Term Care and must include:
    - Type of disruption.
    - Estimated length of disruption.
    - What services are disrupted.
    - A summary of the action plan, and how staff are affected.
    - A summary of the duties and responsibilities for staff during the disruption.
    - Confirmation that the MOLTC and the NRPH have been notified and are aware of the disruption.

14. Implementation of Action Plan (see Roles and Responsibilities below)
    - Communication must be ongoing to all supervisors and staff involved during the entire disruption.
    - Communication to NRPH and the MOLTC must occur if the disruption timeline is longer than expected.
    - Communication from the contractor should only occur between the Maintenance Manager or Project Lead. The Project Lead will then disseminate the information to the Chief Warden.

15. Concluding Disruption
    - Once the disruption is complete, no services may be reinstated without authorization from NRPH; e.g., food preparation.
    - Project Lead and/or Senior Leadership must call a debrief meeting with all who were directly involved in the project.

Water Contamination

In the unlikely event that a concern with water contamination has been declared, safety protocol to follow are similar to that of an unplanned event. In addition to the steps noted above, Management is required to complete the following:

1. Notify Maintenance Manager to, if possible, close off the water valve to the home.
2. Immediately notify NRPH, the Niagara Region Water Distribution Centre as well as MOLTC re the concern for water contamination.
3. Signage must be posted at all points of water to discontinue use.
4. Immediately put into action the Unplanned Water Loss Contingency Plan and wait for further directions from the appropriate authorities.
5. Immediately deploy safe drinking water supplies to all areas of the home.
6. Implement heightened surveillance monitoring for residents and staff affected by the potential water contamination for any signs of infections. Initiate Line List if required.

Inspections

It is possible that the NRPH unit will arrive on site to complete an inspection to ensure all items within the emergency plan have been properly set out. This can occur during a planned and/or unplanned water disruption.

The MOLTC may also complete an inspection post conclusion of the disruption to ensure that the emergency plan was appropriately followed. It is important to have a copy of the Emergency Response Plan to provide to either inspector.

Staff Roles and Responsibilities

LTCHs are run by various departments. When a water supply disruption occurs, the day-to-day critical services for residents and staff may be affected and therefore, an interdisciplinary team approach is required to limit the effects of such disruptions.

The table below describes the various departments and roles that may be affected by the disruption and the protocols and tasks to create an appropriate Organizational Emergency Response Action Plan.

Position	Responsibilities
CEO / Delegate	• Consult with Senior Administrator Long-Term Care and Maintenance Manager on type, severity and probable duration of the problem • Discuss alternative schedules to prevent disruption during the day (if possible) • Authorize contingencies to be put in place prior to initiation • Authorize any announcements and/or memos
Chief Warden	• Put on Chief Warden emergency armband • Announce the activation of a Water Loss (Code Grey) 3 times • Initiate protocol for urgent maintenance if required • Initiate protocol for Fan Out system if required • Implement an Emergency Operations Centre (EOC) for easy communication and access to the Chief Warden; the Chief Warden is to remain at this location as much as possible • Review the checklists at the time of the emergency response activation to ensure everything is in place • Assign staff to duties as described in the Required Actions Checklist as required • Assign Area Wardens to their areas **If relocation to another home is required,** relocation of residents will be authorized by the home's administrator and emergency crews. **Activate the Organizational Emergency Response Action Plan.** **Upon Conclusion of Emergency Plan** • Announce "all clear Code Grey" three times • Assign staff to turn on and flush the water lines throughout the home, if required • Ensure proper notification to required personnel that the emergency is over • Collect emergency supplies • Audit remaining bottled water inventory and notify Nutrition Managers to reorder, if required • Debrief with staff and residents, if required

Position	Responsibilities
Area Warden	• Return to assigned location • Wear the Area Warden emergency armband • Report to the Chief Warden at the EOC if safe to leave residents • Follow instructions from the Chief Warden • Assist staff, supervisor and residents
Senior Administrator Long-Term Care	• Consult with the CEO and Maintenance Manager on type, severity and probable duration of the problem • Discuss alternative schedules to ensure disruption is not during day hours • Ensure the Emergency Response Plan has been sent and approved to MOLTC and NRPH • Schedule an Emergency Response Plan meeting with all interdisciplinary team members • Ensure a notice is posted at the entrance of the LTCH and on each resident home area that is affected • Determine how many washrooms should be closed to prevent additional water usage • Ensure a Certified Food Handler is on site • Assist with carrying out duties of Chief Warden • Assume the role of Chief Warden if required • Determine the threshold of timeline for when an evacuation of residents may be required
Maintenance Manager / Supervisor	• Consult with the Water Supply Division of either the Town of Niagara-on-the-Lake (Radiant Care Pleasant Manor) or the City of St. Catharines (Radiant Care Tabor Manor) • If disruption occurs during hours of 0700-2000, arrange for alternative water supply • Arrange delivery of bottled water for drinking • Arrange appropriate hand wash stations throughout the affected home • Arrange alternative water supply of potable water for food preparation • Inform the Fire Chief of disruptions to fire systems and contingency plan in place for ongoing fire safety • Shut off internal water zones to protect various systems • In the event of complete failure, portable boilers and water heaters need to be shut down • Boilers (heating) can be used; the system must be monitored to ensure minimum pressure is maintained or it must be shut down (5 lbs per RHA) • Must be in attendance at the home with the disruption • Assist with determining alternative water reservoirs to ensure toilets are still able to be used; e.g., filling bathtubs with water, including a bucket, removing the top lid of the toilet

Position	Responsibilities
DOC	• Assist with determining appropriate contingency plans with staff if required • Assist with determining alternative ways to complete critical services for residents for the time being • Assist with ensuring staff are compliant with protocols in place • Assist to act as the liaison to communicate any updates to staff and residents • Assist with alternatives to toilet use if needed; e.g., commode, p bags, etc. • Bathing is temporarily paused and rescheduled; bed baths are to be completed using hygienic wipes • Assume the role of Area Warden if required
IPAC Lead	• Must assist with completing with completing the Disruption Checklists to ensure compliance with IPAC remains for all departments • Determine appropriate Hand Hygiene stations • Determine appropriate Hand Hygiene stations for food handling and hand washing • Determine whether additional Personal Protective Equipment (PPE) is required • Ensure compliance with protocols are ongoing • Communicate with NRPH if required • Assist with ensuring additional cleaning requirements are completed by Environmental Services staff • Monitor for GI symptoms and possible outbreak occurrence • Assist with audits
Nutrition Manager	• Create a plan for alternative meal preparation Determine new menu if required o If no running cold and warm water is present, food preparation must not occur o If entire campus is not affected, alternative food preparation location and/or ordering from an outside source may be required • Ensure disposable dishware and utensils are used during the disruption • Ensure dishwasher (manual or mechanical) is not used • Ensure proper food temperatures are kept until food is served • Ensure appropriate hand washing stations include soap, warm water and disposable paper towels

Position	Responsibilities

Nutrition Manager - cont'd	• Activate contingency plan for Environmental Services Department
	  ○ Increased cleaning to prevent GI infections
	  ○ High-Touch cleaning
	  ○ Food-grade safe disinfectants for tables
	  ○ Fill basins with water proper to shut off (planned) to allow for ongoing cleaning of floors etc.
	  ○ Implement the emergency services plan log (different from regular log)
	• Activate contingency plan for Laundry Department
	  ○ Have laundry completed earlier in the day until water is shut off
	  ○ Have laundry staff increase their ratio for the next day when water is returned to prevent delay in laundry services
	• Assume role of Area Warden is required
	• Acquire additional stock of towels and linen from storage

Therapeutic Recreation Supervisor	• Cancel any activities that involve food preparation • Ensure residents are completing appropriate Hand Hygiene protocols • Increasing disinfection of activity areas • Assume role of Area Warden if required

Stockpile Supplies Required

Radiant Care must ensure that there is always an adequate amount of stockpile supplies on site, and that the stockpile is replenished after an emergency response event. It is the Senior Leadership's responsibility to ensure that there is enough supplies stockpiled for at least three (3) days. The following are required items to be stockpile at minimum:

- Water storage tanks
- Hand washing stations
- Water bottles for drinking must be on the premises
- Potable water for food preparation using a hands-free dispenser
- PPE

Summary of Main Services Affected

Fire Safety Sprinklers

- Fire Safety Contingency Plan must be initiated.

Hygiene Facilities i.e. Bathroom and Shower/Bathrooms

- Must have hot and cold running water for washbasins and reasonable personal hygiene supplies and equipment, including soap and disposable towels as per O. Reg. 67-93, s. 28.
- If bathtubs and showers are not accessible, bed-bath must be completed using moistened towelettes.
- Disposable commode bags must be used; staff are not to toilet a resident using a toilet with no accessible water.

Hand Hygiene Alternatives

- Must include moistened towelettes and alcohol-based hand rub stations for staff and residents.
- For food preparation and handling, a water dispenser with warm water must be accessible or food preparation and handling will have to be ceased.

Food Preparation and Handling

- No food preparation and handling must occur until appropriate authorization as been given by NRPH.
- Proper hand wash stations must be accessible and must include warm soap and water and disposable paper towels.
- Food preparation may be relocated or ordered from outside sources.
- Disposable utensils and dinnerware must be used for all meals and snacks.

Laundry Services and Soiled Linen

- Staff are to ensure they are removing as best as they can, any bulk soilage from resident clothing and linen using a disposable garbage bag and clothes.
- Laundry staff are to ensure they wear appropriate PPE as linen and resident clothing may be more soiled than usual without the use of the hopper for rinsing.
- Laundry staff may be required to complete additional laundry services the following day.

Environmental Services

- Housekeeping must be provided with additional jugs of water to ensure washing of floors and cleaning and disinfecting practices remain.
- Housekeeping must increase their cleaning frequency during times of water disruption.

Evacuation Protocol

If water disruption will be ongoing for an undisclosed period, and/or for a length of time that will disrupt the day-to-day critical services required within the LTCHs, an evacuation of residents may be required. This decision will be made by the Senior Administrator Long-Term Care and the CEO. Please see the *Emergency Evacuation Plan Policy* within the Peace Time Disaster and Emergency Safety Plan Response Manual.

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REFERENCES

Ministry of Long-Term Care,
https://www.ontario.ca/page/ministry-long-term-care

https://ltchomes.net/LTCHPORTAL/Content/LTC%20Emergency%20Preparedness%20Manual.pdf

Niagara Region Public Health,
https://www.niagararegion.ca/health/

Government of Canada,
https://www.canada.ca/en/health-canada/services/food-nutrition/legislation-guidelines/acts-regulations/canada-food-drugs.html

https://laws-lois.justice.gc.ca/eng/regulations/sor-86-304/page-13.html

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano
OCT 2025	Ministry of Health (MOH) updated to Ministry of Long-Term Care (MOLTC); Assistant Chief Warden updated to Area Warden; Reference section updated	F. Akano, R. Green
JUN 2026	Remove reference to Hopper	F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUL 2024	F. Akano, R. Green		
OCT 2025	F. Akano, R. Green		
JUN 2026	F. Akano		

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APPENDIX A

Planned Water Disruption Checklist

This checklist must be completed during the preliminary stages of a planned water disruption project. All members of the interdisciplinary team must work together to complete this checklist in advance.

Project Information

Date & Time of Disruption:	**Location/Home:**	**Project Lead:**
Chief Warden:	**Area Chief Warden:**	**Departments/Services Disrupted:**

Item	Staff Involved	Description	Completed? Y or N
Preliminary Project Meeting	☐CEO ☐Senior Administrator LTC ☐Maintenance Manager	▪ Primary discussion on project: need for project, date and time of project, what is involved, severity and probably duration of the problem. ▪ CEO and Senior Administrator LTC to draft communication memo for residents and families to notify of water disruption. ▪ Project Lead, Chief Warden and Area Warden must be identified during this meeting.	
Early Reporting to MOLTC and NRPH	☐Senior Administrator LTC ☐Maintenance Manager ☐IPAC Lead	▪ Senior Administrator LTC will inform MOLTC of planned disruption, with the intent to provide an organizational emergency response plan. ▪ Maintenance Manager to contact City of St. Catharines (Tabor Manor) or Town of Niagara-on-the-Lake (Pleasant Manor) Water Distribution Centre if planned project will affect city main lines. ▪ IPAC Lead will inform NRPH at least 7 days in advance. NRPH will provide documents for recommendations on what is required to remain complaint. IPAC Lead will forward all documents to interdisciplinary team ahead of meeting.	
Policy Review & Interdisciplinary Meeting Call	☐Senior Administrator LTC ☐Maintenance Manager / Supervisor / Project Lead	**Senior Administrator LTC** ▪ Call for an interdisciplinary meeting no less than 8 days prior to planned disruption. ▪ Review current Emergency Response Policies.	
Planning Stage & Department Specific Tasks	☐Senior Administrator LTC ☐Maintenance Manager / Supervisor / Project Lead ☐DOC ☐IPAC Lead ☐Therapeutic Recreation Supervisor ☐Nutrition Manager	Complete Emergency Preparedness Checklist to assist with determining continency plans for specific project. **Senior Administrator LTC** ▪ Ensure all departmental supervisors are on site during time of the project. ▪ Gather all information during meeting and take any recommendations from NRPH into account to create an organizational response plan based on all contingencies for services involved. Organizational response plan must be approved by CEO and sent to MOLTC as soon as possible. ▪ Must wait for approval of the plan by the MOLTC prior to allowing project to start. ▪ Work with DOC to draft memo detailing contingency plans and notice of disruption to all staff within affected home.	

		Maintenance Manager / Supervisor / Project Lead ▪ Maintenance to notify Fire Marshall of any water disruptions and initiate the fire watch contingency plan. ▪ Inform interdisciplinary team members re locations of required supplies. ▪ Notify external water contractor if delivery will be required that day for potable water. ▪ Create plan for water storage for toilet usage/flushing. ▪ Create plan to include hand wash stations on each RHA and in basement for both hot and cold water access to prevent disruption in food preparation and handling. ▪ Ensure bathtubs are filled prior to the water disruption. ▪ Provide stack waterproof container to gather water for toilet usage ONLY. ▪ Notify Nutrition Manager and IPAC Lead of hand wash station locations. ▪ Notify staff that no communication should occur directly with contractor. The Project Lead will be the only staff in regular communication with contractor and will provide updates to the Chief Warden who will disseminate the information appropriately. ▪ Immediately notify Senior Administrator LTC if the length of disruption may surpass the original estimated time frame, as an evacuation preparedness plan may be required if services are disrupted for an unacceptable and/or unknown length of time. **DOC** ▪ Assist Senior Administrator LTC with creating memo for distributed to staff. ▪ Plan day to conduct notification huddles to staff on each RHA that will be affected: o Huddles must include time and date of planned disruption, estimated length of disruption, what services will be affected, the contingency plans in place, communication that has occurred and answers to any follow-up questions from staff. o Inform staff that Hand Hygiene protocols must be strictly adhered to. o Inform staff that they must continue to assist residents with Hand Hygiene protocols. ▪ Ensure all RHAs are well stocked with PPE. ▪ Ensure all RHAs are well stocked with disposable commode bags. ▪ Complete audits with IPAC Lead to ensure PPE usage, Hand Hygiene protocols and other infection prevention and control practices are in place and staff are compliant. **IPAC Lead** ▪ Must assist with organizational planning for all departments due to importance of infection prevention and control. ▪ Once informed of general information for disruption, IPAC Lead will contact NRPH no later than 7 days prior to project start date to inform of disruption and request authorization form. ▪ Once authorization form has been provided and all recommendations required for compliance, the IPAC Lead will disseminate information to Senior Administrator LTC to update/create organizational plan to be provided to NRPH. ▪ The organization must receive approval for project by NRPH prior to starting project. ▪ IPAC Lead will communicate any changes to project to NRPH if they occur. ▪ If inspection occurs, IPAC Lead will ensure organizational plan and authorization plan from NRPH is available for reference. ▪ IPAC Lead will communicate with NRPH once project has been completed. No use of water for services can occur until NRPH provides authorization to restart services. ▪ Complete required IPAC audits.	

		Nutrition Manager
		▪ Determine what services will be affected; e.g., food preparation, food handling.
		▪ Determine appropriate supplies needed to ensure access to potable water (warm and cold).
		  o Use of portable hand washing stations, warming drink dispensers with a no-hold nozzle, access to safe potable water that is drinkable and compliant with standards for food preparation and handling.
		▪ Work closely with maintenance to ensure there is necessary stock of drinking water for all meals and snacks; bottled water should be in gross stock.
		▪ Review menu for that day and make necessary changes.
		▪ Disposable dishware and utensils must be used as dishwasher will not be functioning.
		▪ Ensure appropriate stock of disposable items are available. If not, complete order for delivery prior to project date.
		▪ Ensure all food preparation has ceased if potable warm and cold water is not available during disruption.
		Environmental Services
		▪ Cleaning and disinfecting schedule should be increased to minimum two (2) times per day.
		  o A new cleaning and disinfecting sign-off sheet should be posted in janitorial rooms to reflect the increase in cleaning frequency.
		▪ Water should be accessible for cleaning supplies; e.g., washing floors.
		Laundry Services
		▪ Additional linen and towels should be pulled from stock as laundry services will be unavailable for duration of disruption.
		▪ Laundry staff should either create a plan for increased laundry services the day before and/or after disruption to ensure there is no large delay in replenishing laundered items.
		Therapeutic Recreation Supervisor
		▪ Must cease any activities that require food preparation for duration of disruption.
		▪ Must have therapeutic staff assist with Hand Hygiene protocols for residents pre and post activities.	

Inspections	☐IPAC Lead ☐Nutrition Manager ☐NRPH ☐MOLTC	On some occasions, NRPH inspection may take place during disruption or MOLTC after disruption. ▪ NRPH may complete an inspection during disruption to ensure that organizational action plan that was set out is being followed while also ensuring health and safety of residents is maintained. ▪ The MOLTC may complete an inspection post-project to ensure that action plan set out was followed. **For Inspections** IPAC Lead and Nutrition Manager should have the following documents on hand (may be required by inspector): ▪ Copy of completed Emergency Preparedness Checklist. ▪ Copy of organizational plan. ▪ Copy of Meeting Minutes for planning the disruption. ▪ Policies and Procedures associated with a planned disruption.	
Concluding Project / Restoring Regular Services	☐Senior Administrator LTC ☐Project Lead ☐NRPH ☐IPAC Lead ☐DOC ☐Nutrition Manager	▪ Once the project is concluded, NRPH must be notified that water disruption has ended and that both warm and cold water has been restored. Chief Warden to be notified who will then notify DOC, Nutrition Manager and IPAC Lead. ▪ NRPH must provide authorization to restore any services that may have been ceased (e.g., food preparation and handling). ▪ DOC will notify front-line staff of any services that are restored once authorization is received. ▪ Maintenance and delegated staff to flush all water lines at sinks and bathtubs for a minimum of 20 seconds before use. ▪ Nutrition Manager to notify staff and implement restoring of services based on contingency plan and accessibility to staff and time.	

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Post Project Debrief Section	☐Senior Administrator LTC	Senior Administrator LTC will call for an interdisciplinary meeting for all involved in planned disruption. The following will be discussed at minimum: ▪ Summary of the disruption. ▪ What went well. ▪ What needs improvement. ▪ Any amendments required to policies. ▪ Any inspections that occurred.	

Additional Comments:

Checklist Completed Date: _____

Checklist Complete By: _____

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APPENDIX B

Unplanned Water Disruption Checklist - Unexpected Water Loss Disruption / Water Contamination

This checklist must be used once an unplanned water disruption has occurred to assist with implementing the emergency response plan as quickly and efficiently as possible.

A) Unexpected Water Loss Disruption

Immediate Steps	Description	Task Completed	
		Time	Initial
1.	Charge RN to immediately notify Maintenance Manager of unexpected water loss and/or contamination.		
2.	Charge RN to call Senior Administrator LTC.		
3.	Senior Administrator LTC will initiate Fan Out List to be utilized.		
4.	Maintenance Manager will provide temporary guidance, if required, to Charge RN. Maintenance will then assess issue and contact city water supply and/or contracted services for immediate repair.		
5.	When authorized, during the hours of 700-2000, Charge RN to announce "*Code Grey* x 3" and type of disruption. During evening hours, Charge RN to call each RHA and request an inter-unit meeting to inform staff of current disruption.		
6.	Charge RN to post an approved notice at entrance of RHA and home affected.		

Immediate Interdisciplinary Duties and Responsibilities - Unexpected Water Loss Disruption			
Initiating & Creating Contingency Plan	**Staff Involved**	**Description**	**Completed Y or N**
Preliminary Meeting	☐CEO ☐Senior Administrator LTC ☐Maintenance Manager	▪ CEO, Senior Administrator LTC and Maintenance Manager to meet to determine cause of unexpected disruption and any timelines given for repair. ▪ CEO and Senior Administrator LTC to draft communication memo for residents and families to notify of water disruption, if required. ▪ Project Lead, Chief Warden and Area Warden must be identified during this meeting.	
Early Reporting to MOLTC and NRPH	☐Senior Administrator LTC ☐Maintenance Manager ☐IPAC Lead	▪ Once Organizational Emergency Response Plan is completed, Senior Administrator LTC will inform MOLTC immediately of disruption. ▪ Maintenance Manager to contact City of St. Catharines (Tabor Manor) or Town of Niagara-on-the-Lake (Pleasant Manor) Water Distribution Centre. ▪ IPAC Lead will inform NRPH as soon as Senior Administrator LTC has provided approval. IPAC Lead will forward any necessary documentation requested by NRPH when available; i.e., Organizational Emergency Response Plan.	
Policy Review & Interdisciplinary Meeting Call	☐Senior Administrator LTC ☐Maintenance Manager / Supervisor / Project Lead	**Senior Administrator LTC** ▪ Call for interdisciplinary meeting immediately to complete Emergency Preparedness Checklist and to draft Organizational Emergency Response Plan. ▪ Review current Emergency Response policies.	

Contingency Plan Planning Stage & Department Specific Tasks	☐Senior Administrator LTC ☐Maintenance Manager / Supervisor / Project Lead ☐DOC ☐IPAC Lead ☐Therapeutic Recreation Supervisor ☐Nutrition Manager	**Senior Administrator LTC** ▪ Ensure all departmental supervisors are on site during the disruption. ▪ Gather all information during meeting and take any recommendations from NRPH into account to create an organizational response plan based on all contingencies for services involved. Organization response plan must be approved by CEO and sent to MOLTC as soon as possible. **Maintenance Manager / Supervisor / Project Lead** ▪ Inform interdisciplinary team members re locations of required supplies. ▪ Notify external water contractor if delivery will be required that day for potable water. o Erect 100-gallon holding tanks outside to be filled by external contractor. ▪ Create plan for water storage for toilet usage/flushing. ▪ Create plan to include hand wash stations on each RHA and in basement for both hot and cold water access to prevent disruption in food preparation and handling. ▪ Ensure bathtubs are filled prior to water disruption. ▪ Provide stack waterproof container to gather water for toilet usage ONLY. ▪ Notify Nutrition Manager and IPAC Lead re hand wash station locations. ▪ Notify staff that no communication should occur directly with contractor. The Project Lead will be the only staff in regular communication with contractor and will provide updates to Chief Warden who will disseminate information appropriately. ▪ Immediately notify Senior Administrator LTC if length of disruption may surpass original estimated time frame, as an evacuation preparedness plan may be required if services are disrupted for an unacceptable and/or unknown length of time. ▪ Work with DOC to draft memo detailing contingency plans and notice of disruption to all staff within affected home. **DOC** ▪ Assist Senior Administrator LTC with creating memo for distribution to staff. ▪ Conduct immediate notification huddles to staff on each RHA that will be affected: o Huddles must include estimated length of disruption, what services will be affected, contingency plans in place, communication that has occurred and answers to any follow up questions from staff. o Inform staff that Hand Hygiene protocols must be strictly adhered to. o Inform staff that they must continue to assist residents with Hand Hygiene protocols. ▪ Ensure all RHAs are well stocked with PPE. ▪ Ensure all RHAs are well stocked with disposable commode bags. ▪ Complete audits with IPAC Lead to ensure PPE usage, Hand Hygiene protocols and other infection prevention and control practices are in place and staff are compliant. **IPAC Lead** ▪ Assist with organizational planning to ensure Infection Prevention and Control measures are implemented for all departments. ▪ Communicate with NRPH if any changes to timeline of repairs occur and once repairs or services have been reinstated. ▪ If inspection occurs, ensure organizational plan and authorization plan from NRPH is available for reference. ▪ Complete required IPAC audits. **Nutrition Manager** ▪ Determine which services will be affected; e.g., food preparation, food handling. ▪ Determine appropriate supplies needed to ensure access to potable water (warm and cold). o Use of portable hand washing stations, warming drink dispensers with a no-hold nozzle, access to safe potable water that is drinkable and compliant with standards for food preparation and handling. ▪ Work closely with maintenance to ensure there is necessary stock of drinking water for all meals and snacks, i.e. bottled water should be in gross stock. ▪ Review menu for that day and make necessary changes. ▪ Disposable dishware and utensils must be used as dishwasher will not be functioning. o Ensure appropriate stock of disposable items are available. If not, an “911” order should be placed immediately. ▪ Ensure all food preparation has ceased if potable warm and cold water are not available during the disruption.	

		Environmental Services ▪ Cleaning and disinfecting schedule should be increased to minimum two (2) times per day. ○ A new cleaning and disinfecting sign-off sheet should be posted in janitorial rooms to reflect increase in cleaning frequency. ▪ Water should be accessible for cleaning supplies; e.g., washing floors **Laundry Services** ▪ Additional linen and towels should be pulled from stock as laundry services will be unavailable for duration of disruption. ▪ Laundry staff should either create a plan for increased laundry services day before and/or after disruption to ensure there is no large delay in replenishing laundered items. **Therapeutic Recreation Supervisor** ▪ Must cease any activities that require food preparation for duration of the disruption. ▪ Must have therapeutic staff assist with Hand Hygiene protocols for residents pre and post activities.	
Inspections	☐IPAC Lead ☐Nutrition Manager ☐NRPH ☐MOLTC	On some occasions, NRPH inspection may take place during disruption or MOLTC after disruption. ▪ NRPH may complete an inspection during disruption to ensure that organizational action plan that was set out is being followed while also ensuring health and safety of residents is maintained. ▪ MOLTC may complete an inspection post-project to ensure that action plan set out was followed. **For Inspections** IPAC Lead and Nutrition Manager should have the following documents on hand (may be required by inspector): ▪ A copy of the completed Emergency Preparedness Checklist. ▪ A copy of the organizational plan. ▪ A copy of the Meeting Minutes for planning the disruption. ▪ Policies and Procedures associated with a planned disruption.	
Concluding the Project / Restoring Regular Services	☐Senior Administrator LTC ☐Project Lead ☐NRPH ☐IPAC Lead ☐DOC ☐Nutrition Manager	Once the project is concluded, NRPH must be notified that water disruption has ended and that both warm and cold water has been restored. Chief Warden to be notified who will then notify DOC, Nutrition Manager and IPAC Lead. ▪ NRPH must provide authorization to restore any services that may have been ceased (e.g., food preparation and handling). ▪ DOC will notify front-line staff of any services that are restored once authorization is received. ▪ Maintenance and delegated staff to flush all water lines at sinks and bathtubs for a minimum of 20 seconds before use. ▪ Nutrition Manager to notify staff and implement restoring of services based on contingency plan and accessibility to staff and time.	
Post Project Debrief Section	☐Senior Administrator LTC	Senior Administrator LTC will call for a debrief interdisciplinary meeting for all involved in planned disruption. The following will be discussed at minimum: ▪ Summary of the disruption. ▪ What went well. ▪ What needs improvement. ▪ Any amendments required to policies. ▪ Any inspections that occurred.	

Radiant Care

B) Unexpected Water Contamination

Immediate Steps	Description	Task Completed	
		Time	Initial
1.	Charge RN to immediately notify the Maintenance Manager of unexpected water contamination.		
2.	Maintenance Manager, Senior Administrator LTC and DOC to inform staff to post signage on all sinks "Do Not Use - Possible Contaminated Water".		
3.	Charge RN to call Senior Administrator LTC following DOC.		
4.	Fan Out List will be started to notify all required individuals.		
5.	Maintenance Manager will provide temporary guidance, if required, to Charge RN. Maintenance will then assess issue and contact city water supply and/or contracted services for immediate repair.		
6.	When authorized, during the hours of 700-2000, Charge RN to announce "*Code Grey* x 3" and type of disruption. During evening hours, Charge RN to call each RHA and request an inter-unit meeting to inform staff of current disruption.		
7.	Charge RN to post an approved notice on entrance of RHA and home affected		
8.	Charge RN to initiate immediate Heightened Surveillance Tasks for all residents in PCC to monitor for any signs and symptoms related to possible consumption of contaminated water; i.e. gastrointestinal pain, bloating, nausea, vomiting, diarrhea.		
9.	Charge RN to initiate a line list for any residents experiencing signs and symptoms associated with possible infection due to consumption of contaminated water.		
10.	IPAC Lead or delegate to gather samples of contaminated water using appropriate PPE and sterile urine cups. Label and place into locked office until NRPH determines whether testing is necessary.		

Immediate Interdisciplinary Duties and Responsibilities - Water Contamination			
Initiating & Creating Contingency Plan	**Staff Involved**	**Description**	**Completed Y or N**
Preliminary Meeting	☐CEO ☐Senior Administrator LTC ☐Maintenance Manager	▪ CEO, Senior Administrator LTC and Maintenance Manager to meet to determine cause of the unexpected disruption and any timelines they were given for repair ▪ CEO and Senior Administrator LTC to draft communication memo for residents and families to notify of water disruption, if required. ▪ Project Lead, Chief Warden and Area Warden must be identified during this meeting.	
Early Reporting to MOLTC and NRPH	☐Senior Administrator LTC ☐Maintenance Manager ☐IPAC Lead	▪ Maintenance Manager to immediately contact City of St. Catharines (Tabor Manor) or Town of Niagara-on-the-Lake (Pleasant Manor) Water Distribution Centre. ▪ Maintenance Manager to determine possible location of water contamination (i.e., in-house, or external). ▪ Senior Administrator LTC will inform MOLTC immediately of disruption due to water contamination and possible cause of water contamination, if known. ▪ Prepare Emergency Response Plan once interdisciplinary team meeting has concluded. ▪ Send Emergency Response Plan to MOLTC for review. ▪ IPAC Lead will inform NRPH as soon as Senior Administrator LTC has provided approval. IPAC Lead will forward any necessary documentation requested by NRPH when available (e.g., Organizational Emergency Response Plan). ▪ IPAC Lead will bring all information and recommendations from NRPH to interdisciplinary meeting to assist with planning of contingency plan.	
Policy Review & Interdisciplinary Meeting Call	☐Senior Administrator LTC ☐Maintenance Manager / Supervisor / Project Lead	**Senior Administrator LTC** ▪ Call for an interdisciplinary meeting immediately to complete Emergency Preparedness Checklist and to draft Organizational Emergency Response Plan ▪ Review current Emergency Response policies.	

Contingency Plan Planning Stage & Department Specific Tasks	☐Senior Administrator LTC ☐Maintenance Manager / Supervisor / Project Lead ☐DOC ☐IPAC Lead ☐Therapeutic Recreation Supervisor ☐Nutrition Manager	**Senior Administrator LTC** ▪ Ensure all departmental supervisors are on site during the disruption. ▪ Gather all information during meeting and take any recommendations from NRPH into account to create organizational response plan based on all contingencies for services involved. Organization response plan must be approved by CEO and sent to MOLTC as soon as possible. ▪ Work with DOC to draft memo detailing contingency plans and notice of disruption to all staff within affected home. **Maintenance Manager / Supervisor / Project Lead** ▪ Inform interdisciplinary team members re locations of required supplies. ▪ Notify external water contractor if delivery will be required that day for potable water. o Erect 100-gallon holding tanks outside to be filled by external contractor. ▪ Determine whether all internal water sources must be flushed and drained to remove contaminated water. ▪ Create plan for water storage for toilet usage/flushing. ▪ Create plan to include hand wash stations on each RHA and in basement for both hot and cold water access to prevent disruption in food preparation and handling. ▪ Provide stack waterproof container to gather water for toilet usage ONLY. ▪ Notify Nutrition Manager and IPAC Lead re hand wash station locations. ▪ Notify staff that no communication should occur directly with contractor. The Project Lead will be only staff in regular communication with contractor and will provide updates to Chief Warden who will disseminate information appropriately. ▪ Immediately notify Senior Administrator LTC if length of disruption may surpass original estimated time frame, as an evacuation preparedness plan may be required if services are disrupted for an unacceptable and/or unknown length of time. **DOC** ▪ Assist Senior Administrator LTC with creating memo for distribution to staff. ▪ Ensure staff only use potable water that has been assigned for use. ▪ Conduct immediate notification huddles to staff on each RHA that will be affected: o Huddles must include estimated length of disruption, what services will be affected, contingency plans in place, communication that has occurred and answers to any follow-up questions from staff. o Inform staff that Hand Hygiene protocols must be strictly adhered to. o Inform staff that they must continue to assist residents with Hand Hygiene protocols. ▪ Ensure all RHAs are well stocked with PPE. ▪ Ensure all RHAs are well stocked with disposable commode bags. ▪ Complete audits with IPAC Lead to ensure PPE usage, Hand Hygiene protocols and other infection prevention and control practices are in place and staff are compliant. **IPAC Lead** ▪ Assist with organizational planning to ensure Infection Prevention and Control measures are implemented for all departments. ▪ Gather samples of water from required sources, label and keep in locked office until NRPH determines need for testing. ▪ Communicate with NRPH if any changes to timeline of repairs occur and once repairs or services have been reinstated. ▪ If an inspection occurs, ensure organizational plan and authorization plan from NRPH is available for reference. ▪ Complete necessary audits for IPAC.

		Nutrition Manager
		▪ Determine if any food that has been prepped or drinks that have been prepared with possible contaminated water has been set aside, samples of each taken, and then disposed of immediately.
		  o Detailed notes should be taken to determine what was made, how it was made, when a sample was taken and when food and beverages were discarded.
		▪ Determine which services will be affected; e.g., food preparation, food handling.
		▪ Ensure staff are aware not to use contaminated water sources for cleaning.
		▪ Determine appropriate supplies needed to ensure access to potable water (warm and cold).
		  o Use of portable hand washing stations, warming drink dispensers with a no-hold nozzle, access to safe potable water that is drinkable and compliant with standards for food preparation and handling.
		▪ Work closely with maintenance to ensure there is necessary stock of drinking water for all meals and snacks, i.e. bottled water should be in gross stock.
		▪ Review menu for that day and make necessary changes.
		▪ Disposable dishware and utensils must be used as dishwasher will not be functioning.
		  o Ensure appropriate stock of disposable items are available. If not, an "911" order should be placed immediately.
		▪ Ensure all food preparation has ceased if potable warm and cold water are not available during disruption.
		▪ Ensure all sinks and wash areas are cleaned and disinfected using clean, safe water and appropriate food-grade safe disinfectant prior to new food preparation initialized.
		▪ Ensure all beverage containers that could have been used with contaminated water have been set aside to be cleaned appropriate using high heat and disinfectants.
		Environmental Services
		▪ Cleaning and disinfecting schedule should be increased to minimum two (2) times per day.
		  o A new cleaning and disinfecting sign-off sheet should be posted in janitorial rooms to reflect the increase in cleaning frequency.
		▪ Water should be accessible for cleaning supplies; e.g., washing the floors.
		Laundry Services
		▪ Additional linen and towels should be pulled from stock as laundry services will be unavailable for duration of disruption.
		▪ Laundry staff should either create a plan for increased laundry services day before and/or after disruption to ensure there is no large delay in replenishing laundered items.
		▪ Staff to quickly identify whether any linen, clothing or towels have been washed with contaminated water; pending NRPH recommendations, may require re-washing.
		Therapeutic Recreation Supervisor
		▪ Must cease any activities that require food preparation for duration of disruption.
		▪ Must have therapeutic staff assist with Hand Hygiene protocols for residents pre and post activities.
		▪ Determine whether any activities have been conducted using contaminated water.	

Inspections	☐IPAC Lead ☐Nutrition Manager ☐NRPH ☐MOLTC	On some occasions, an inspection may take place during disruption NRPH or after the disruption by MOLTC. ▪ NRPH may complete an inspection during disruption to ensure that organizational action plan that was set out is being followed, while also ensuring health and safety of residents is maintained. ▪ MOLTC may complete an inspection post-project to ensure that action plan set out was followed. **For Inspections** IPAC Lead and Nutrition Manager should have on hand the following documents (if required by the inspector): ▪ A copy of the completed Emergency Preparedness Checklist. ▪ A copy of the organizational plan. ▪ A copy of the Meeting Minutes for planning the disruption. ▪ Policies and Procedures associated with a planned disruption.	

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Concluding the Project / Restoring Regular Services	☐Senior Administrator LTC ☐Project Lead ☐NRPH ☐IPAC Lead ☐DOC ☐Nutrition Manager	Once the water contaminated has ended, NRPH must be notified. Chief Warden to be notified who will then notify DOC, Nutrition Manager and IPAC Lead. • NRPH must provide authorization to restore any services that may have been ceased; e.g., food preparation and handling. • Possible samples of water may be required pending NRPH requests. • DOC will notify front-line staff of any services that are restored once authorization is received. • Maintenance and delegated staff to flush all water lines at sinks and bathtubs for a minimum of 20 seconds before use. • Nutrition Manager to notify staff and implement restoring of services based on contingency plan and accessibility to staff and time.	
Post Project Debrief Section	☐Senior Administrator LTC	Senior Administrator LTC will call for an immediate interdisciplinary debrief meeting for all involved in planned disruption. The following will be discussed at minimum: • Summary of the disruption. • What went well. • What needs improvement. • Any amendments required to policies. • Any inspections that occurred.	

Additional Comments:

Checklist Completed Date: _____

Checklist Complete By: _____

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**MEDICAL EMERGENCIES**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-19
APPROVAL:		DATE:	NOVEMBER 2025

PURPOSE

To manage medical emergencies affecting any individual(s) onsite at Radiant Care.

POLICY

Radiant Care shall ensure that a coordinated plan is in place to respond to and manage medical emergencies occurring with residents, staff, or visitors to:

- Alert individuals within the long-term care home to an acute medical emergency; and,
- To provide an organized system of response when dealing with a medical emergency when more support is required.

DEFINITION

Medical Emergency: Defined as an event requiring an urgent response such as a sudden injury, acute illness, choking, chest pain, shortness of breath, arrested breathing, or an acute altered level of consciousness where more assistance may be needed.

PROCEDURE

Medical Emergency

Upon discovering a medical emergency, staff will shout to nearby team members “Code Blue” and as applicable pull call bell and phone Director of Care/charge nurse. The charge nurse will:

1. Respond to the site.
2. Direct a team member to call 911 for an ambulance and notify Substitute Decision Maker (SDM).
3. Direct appropriate resuscitation procedures until arrival of paramedics.
4. In the event of a cardiac arrest or other sudden medical emergency for someone other than a resident, basic CPR principles will be applied.
5. For residents, confirm DNR order/status to find out if resident requires CPR or not.
6. Continue resuscitation procedures or comfort measures as applicable until arrival of 911.

The charge nurse/designate will:

1. Complete transfer forms (as applicable) and give to Emergency Medical Services (EMS).

2. Notify SDM of resident's transfer to hospital.

3. Ensure all resuscitation equipment is replenished and cleaned following the emergency.

All team members will keep nearby residents and visitors away from the scene and help maintain calm.

Management of a Choking Resident

Residents who experiencing choking will be treated as a medical emergency and a Code Blue emergency response will be initiated. The registered staff/designate will:

1. Assess the situation to determine if the resident is able to breathe and look for signs that the resident is suffering from total airway obstruction. These signs include the resident being unable to make any sounds above a wheeze, the face turning blue, and hands clutching the throat in the universal symbol for choking.

2. If the resident is not able to speak, cough, or breathe, or is making high-pitched noise, immediately begin care for choking.

3. Registered staff will perform abdominal thrusts to clear airway. If the resident becomes unconscious, call 911.

4. If CPR is required as per resident's care plan, ensure that the resident is lying on a hard surface to enable ease when doing CPR.

5. Continue providing emergency care until EMS arrives on scene.

6. Notify SDM, medical director, and Director of Care of the incident and actions taken.

7. Post Choking Incident: Following a choking event, the nurse or designate will:
   (a) If the resident expels the object, continue to monitor resident's vital signs Q shift x48hrs after the choking episode, watching the residents for symptoms of aspiration pneumonia.
   (b) Conduct chest assessment Q shift with vital signs checks x48hrs.
   (c) Investigate and report any new complaints of breathing difficulties, pain, new or unusual cough, discomfort.
   (d) Contact Dietitian via referral entered in PCC.
   (e) Identify if any other referrals or consultations may be required, i.e. PT/OT, physician, Speech & Language Pathologist.
   (f) Review and update the resident's care plan to ensure risks are identified and based on resident individualized care needs.
   (g) Document incident in the risk management tab of the resident electronic health record.
   The PSW will Immediately report any signs of chewing or swallowing difficulties during snack, meal times, and when consuming any other food or fluids to the nurse.

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8. The Director of Care/designate will:
   (a) Complete a complete a critical incident report as per provincial health authority requirements for transfers to hospital.
   (b) Obtain proof of current CPR certification from nursing team upon hire and recertification as per provincial requirements thereafter.
   (c) Ensure team members received training on medical emergency procedures including how to respond to choking incidents.

REFERENCE

Fixing Long-Term Care Act, 2021,
https://www.ontario.ca/laws/statute/21f39

Ministry of Labour, Immigration, Training and Skills Development,
https://www.ontario.ca/page/ministry-labour-immigration-training-skills-development

CROSS REFERENCE

9-P-03: Advance Directives and Level of Care
9-P-09: Care Plan
9-P-37: Mandatory and Critical Incident Reporting
9-P-70: Resident Death Notification

REVISIONS

Date	Changes	Requested By

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUL 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	MISSING RESIDENT/TENANT (CODE YELLOW)
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-11
APPROVAL:		DATE:	JANUARY 2011

PROCEDURE

Although numerous measures are in place to prevent residents from eloping from the home, the potential still exists for a resident to go missing. The following is the procedure to locate a resident/tenant as quickly as possible.

RESPONSE IN LONG-TERM CARE

Roles and Responsibilities

Registered Staff

- When a resident is suspected missing, check the sign-out binder located at the nurses' station for each resident home area to see if they were signed out.
- Form search teams of employees and search the home area. Begin a systematic search of each room. Start at the far end of each corridor and work towards the center. Search all rooms including bathrooms, tub-room, utility rooms, living/dining areas, kitchen and storage areas.
- Registered staff is to remain at the nurses' station to monitor corridors.
- Perform a visual check of outside seating areas.
- Once all wings have been checked thoroughly, assign staff team to check the basement, including non-resident areas, offices and corridors.
- If resident is not located call Supportive Housing cell phone and ask for assistance with search of apartment and wellness suite buildings.
- Phone the family to enquire if the resident is visiting them. If not, inform them the resident is missing.
- Obtain Code Yellow (Missing Resident) Checklist from nurses' station.
- Inform the Director of Care/delegate. Director of Care/delegate announces Code Yellow over the paging system.
- Make four (4) copies of resident picture obtained from MAR for the search team and provide written copy of who last saw the resident, when, where and what the resident is wearing with the copy of the photo.
- When Code Yellow is resolved, document and submit an incident report and Code Yellow Checklist to Director of Care/delegate.

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Director of Care/Delegate

- Director of Care/delegate announces Code Yellow:

  "CODE YELLOW, NAME OF RESIDENT"
  (repeat three times)

- Obtain a Code Yellow package from the emergency manual. This will include checklist and maps of the building.
- If the resident is still missing after all internal areas are searched, then Director of Care/delegate to announce Stage II Code Yellow - search of outside grounds:

  "CODE YELLOW STAGE II SEARCH OF OUTSIDE GROUNDS"
  (repeat three times)

- Two teams of two staff to be assigned by Director of Care/delegate. Staff to exit building by the front door and walk around the building checking all parking lot areas. Report findings to Director of Care/delegate.
- Notify CEO/delegate.
- Contact Niagara Regional Police giving the name of the resident, a description, including when and where last seen and what the resident was wearing. Have picture and maps of building and grounds available for the Police to refer to and use upon their arrival. Police will notify local hospitals, etc. Contact information will be located in the External Resource List located in the Peace Time Disaster and Emergency Safety Plan Response Manual.
- Notify the Ministry of Long-Term Care (MOLTC) and complete Critical Incident report (online).
- Activate "Fan Out System" if required.
- Consult with emergency services to decide when to halt home search activity.
- Notify Medical Director.
- At any time during the search process, when the resident is located or when the home search has been discontinued (based on direction from CEO/delegate, charge nurse or Police) announce Code Yellow resolved:

  "CODE YELLOW RESOLVED"
  (repeat three times)

All Employees

- When Code Yellow announced, all nursing staff return to their assigned work area.
- All other employees report to their assigned areas (e.g., laundry services report to laundry area, food services to the main kitchen area).
- Employees in common areas report to the Personnel Assignment Centre for direction. charge nurse to assign duties, staff to monitor front lobby and exit doors. Staff to use walkie talkies for communicating.

Housekeeping/Laundry Staff

- Systematically search laundry areas.
- Report finding to charge nurse. After hours charge nurse to assign staff to check these areas.

Food Services Staff

- Form search teams to search the kitchen, corridor outside the kitchen, area between the kitchen and delivery areas and elevator.
- Ensure all rooms, including locked rooms, are checked.
- Send one staff to each of the stairways to check the whole stair area - up and down stairs.
- Send remaining staff to help the nursing staff.
- Report findings to charge Nurse. After hours charge nurse to assign staff to check above areas.

RESPONSE IN SUPPORTIVE HOUSING

Roles and Responsibilities

Supportive Housing Manager/Team Leader

- When a tenant is suspected missing, call tenant's apartment and if no answer, go to their apartment and search thoroughly.
- Begin a systematic search of common areas. Search all rooms including bathrooms, tub rooms, utility rooms, kitchen, and storage areas.
- Search the long-term care (LTC) home, especially common areas where programs may be happening.
- Make copies of admission record with photo from Point Click Care (PCC).
- Tell LTC staff that you are looking for a tenant (take client admission record with you to show photo).
- Notify Supportive Housing Manager.
- Perform a visual check of outside areas.
- If tenant is still not found, determine who saw the tenant last, when and where, and what the tenant was wearing.
- Phone the family to enquire if the tenant is visiting them. If not, inform them the tenant may be missing.
- With permission of family, call 911 giving the name of the tenant, a description, including when and where last seen and what the tenant was wearing. Police will notify local hospitals, etc.
- Consult with emergency services to decide when to halt facility search activity.
- At any time during the search process, when the tenant is located or when the building search has been discontinued. Communicate with all involved.
- Notify CEO/delegate.
- Complete tenant incident form.

CROSS REFERENCE

- Appendix 10: Code Yellow (Missing Resident) Checklist
- Fan Out List
- Fan Out System

All located in the Peace Time Disaster and Emergency Safety Plan Response Manual

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REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & Reformatting	F. Akano
NOV 2025	Minor revisions to LTC Registered Staff Roles and Responsibilities section; significant updates to Response in Supportive Housing section; facility updated to home	F. Akano, M. Challice

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	T. Siemens, F. Akano		
NOV 2025	F. Akano, M. Challice		
JUL 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**NATURAL DISASTERS & EXTREME WEATHER**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-18
APPROVAL:		DATE:	NOVEMBER 2025

PURPOSE

This policy is in place to protect the safety of residents, tenants, staff, and visitors in response to natural disasters and extreme weather.

POLICY

Unexpected, unusual, unseasonal or severe weather that has the potential to be life threatening. Media announcements or communication from Regional Emergency Management or senior management will advise of weather watches, advisories and warnings. This allows time for preparation to safeguard against personal injury, loss of life and property damage. Severe storms include:

- Heavy rain
- Freezing rain/hail
- Ice/snowstorms
- Earthquakes
- Tornadoes
- Hurricanes
- Floods

DEFINITIONS

Emergency Alerts: created and sent by authorized emergency management organizations, such as police departments, Environment and Climate Change Canada, and provincial and territorial bodies. They will give advance warning of extreme weather when possible.

Extreme Weather: events are occurrences of unusually severe weather or climate conditions that can cause devastating impacts on long-term care homes (LTCH) and surrounding communities. Weather-related extreme events are often short-lived and include heat or cold waves, winter storm warnings, wind, tornadoes and floods. Tornadoes and floods also have the capacity to be classified as natural disasters.

Natural Disaster: A natural occurrence, such as a flood, winter storm/blizzard, tornado, windstorm, or other event which threatens the public peace, health and safety of the people and/or damages and destroys public and private property.

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PROCEDURE

All Staff

If a severe weather condition occurs:

- Stay calm and do not run outdoors.
- Move residents to a safer place such as the corridor or an inside room away from the outer walls/windows of the building.
- Keep away from windows to avoid flying glass. Close windows, blinds and curtains.
- Take shelter under tables, beds, desks or other objects that will offer protection against flying glass and debris. Protect face and head with arms.
- Stay under cover until the severe weather condition has subsided.
- Identify persons with injuries and provide medical assistance as appropriate.

Chief Executive Officer/Senior Administrator Long-Term Care/Delegate

- If the event occurs after hours, the charge nurse will act as the delegate.
- Liaise with the Senior Administrator Long-Term Care/delegate and Regional Emergency Management.
- Monitor radio or television stations for further updates.
- Announce “severe weather event” 3 times.
- Regularly keep staff informed.
- Initiate evacuation if directed; evacuation may be required if the building is determined to be unsafe or there is danger to the occupants. Refer to Emergency Evacuation Plan policy.
- If necessary, arrange resident transportation to alternate health care facilities.
- When the situation is resolved, announce “all clear”.
- Evaluate any damage and plan for remediation.
- Conduct a debrief session.

Charge Nurse

Upon receiving information that a severe weather condition is imminent:

- Notify the CEO/delegate.
- Notify non-essential personnel and volunteers per internal procedures.
- Ensure residents and staff stay indoors if necessary.
- If the building is affected by a severe weather condition:
    - Along with staff on-site, identify persons with injuries and provide medical assistance. Call 9-1-1 if a medical emergency.
    - Check exit stairwells to ensure they are safe and available to use in the event of a building evacuation.

Communications

- Any announcements or messages must be authorized by the CEO/delegate.

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CROSS REFERENCE

PT-P-03: Emergency Evacuation Plan
PT-P-06: Fire Safety Plan
PT-P-09: Heat Wave
PT-P-16: Flooding
Located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUL 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**POWER FAILURE**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-12
APPROVAL:		DATE:	JANUARY 2011

POLICY

In the event of a power failure, the auxiliary generator will operate red electrical, orange outlets located in the hallways of each wing of the long-term care home. The fire alarm has a 24-hour battery backup. The emergency lights will function for 30 minutes to 2½ hours.

PROCEDURE

RESPONSE IN LONG-TERM CARE

Roles and Responsibilities

CEO/Delegate

- Order contingencies or evacuation based on time of day, time of year and probable duration.
- Consult with Maintenance Manager on probable duration of the outage.
- Authorizes any announcements or messages.

Maintenance Manager/Maintenance Person

- Monitor the diesel levels and determine hours of use left in tanks for emergency power.
- Sump pumps affected must be monitored and supplied with power when needed.
- Ensure proper operation of auxiliary generator.
- Contact Alectra Utilities for information on probable duration of the outage.
- Determine need and availability of additional generators.
- Keep CEO/Delegate informed about the situation.

Nutrition Manager

- Contact food supplier(s) to develop suitable response.
- In extended power failure, arrange for daily delivery of perishable food items.
- In order to avoid spoilage of food, there shall be plans to place perishable foods on a functioning piece of equipment quickly to avoid hazardous temperatures from occurring.

Food Services

- Prepare alternate meal of juice or milk, sandwich platters, available desserts.
- Use disposable dishes.

Radiant Care

Communications

- Any announcements or messages are authorized by the CEO/Delegate.
- Announcement or message:

"Power Failure Contingency Plan now in effect until (TIME). Report to Charge Nurse for specific instructions."

Supplies Repository

- All power outage supplies will be located in the Custodian room across from Nurses' Station.

RESPONSE IN SUPPORTIVE HOUSING

Roles and Responsibilities

CEO/Delegate

- Consult with Maintenance Manager on probable duration of the outage.
- Order contingencies or evacuation based on time of day, time of year and probable duration.
- Authorizes any announcements or messages.

Maintenance Manager/Maintenance Person

- Contact Fire Alarm monitoring company (FMC) to inform of power outage.
- Contact Alectra Utilities for information on probable duration of the outage.
- Determine need and availability of generators.
- Keep CEO/Delegate informed about the situation.
- When power is restored, the following pumps need to be checked to ensure they are functioning:
    - Air makeup pump
    - Heat pump
    - Circulating water pump

Communications

- Any announcements or messages are authorized by the CEO/Delegate.
- Initiate Tenant volunteers for assistance with communication.

CROSS REFERENCE

PT-P-03: Emergency Evacuation Plan Policy located in the Peace Time Disaster and Emergency Safety Plan Response Manual

10-P-02: Dietary Emergency Plans

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REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano
SEP 2025	Updated propane to diesel on under Procedures	R. Green
JUL 2026	Updated Nutrition Manager responsibilities and added cross reference	F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	R. Green, M. Challice		
JUL 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**RECEPTION OF RESIDENTS FROM OTHER HOMES IN EMERGENCY**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-13
APPROVAL:		DATE:	JANUARY 2011

POLICY

Reciprocal agreements between long-term care homes exist to temporarily accept residents who had to be evacuated from their own home (see Niagara Long-Term Care Facilities Collaborative Emergency Shelter Plan located in the Peace Time Disaster and Emergency Safety Plan Response Manual). These are short-term relocations and usually staff from the home will be assigned to the relocated residents.

Getting the residents settled as quickly as possible is the object of these procedures.

PROCEDURE

Roles and Responsibilities

CEO/Delegate

- Receive call from evacuating home.
- Notify Director of Care/Delegate.
- Determine if additional staff from various departments are required and will initiate their call-in by contacting department supervisors.

Director Of Care/Delegate

- Set up reception at the main entrance.
- Retrieve reception plan from Main Office.
- When evacuees arrive, record:
    - Resident name and number
    - Location assigned in home
    - Medications and records received
    - Method of transportation (ambulance, bus)
    - Preliminary assessment to identify any pre-existing conditions or in-transit relapses that require prompt medical or nursing intervention
    - Any food allergies, dietary requirements, etc.

Charge Nurse

- Get evacuee settled as soon as possible.
- Orient staff from other home.
- Assist as necessary.

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Communications

- Instructions on specific requirements to various departments will be sent by CEO/Delegate through department supervisors

CROSS REFERENCE

Niagara Long-Term Care Facilities Collaborative Emergency Shelter Plan located in the Peace Time Disaster and Emergency Safety Plan Response Manual

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding & reformatting	F. Akano
SEP 2025	'Facility' updated to 'home'	C. Loewen

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	C. Loewen		
JUL 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**TELEPHONE SYSTEM FAILURE**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-14
APPROVAL:		DATE:	JANUARY 2011

BACKGROUND

The telephone system is comprised of two subsystems: an internal and external system. The internal system requires power to operate. The battery backup will normally operate the phones in long-term care for up to three hours in the case of a power failure. The internal phone system will only fail if, for some reason, the power to it is cut or there is a problem with the system itself.

In the event of an internal telephone system failure:

- Cell phones can be used for external communication.
- The Fire System Phone in long-term care and cell phones can be used internally.
- In an emergency, a resident or tenant's telephone may be used if not connected to the system.

The external system is comprised of the lines for incoming and outgoing calls. A failure of the external system is usually caused by the line being cut or a major problem at the switching centre.

PROCEDURE

RESPONSE IN LONG-TERM CARE

Internal Telephone System

Maintenance Manager/Maintenance Person

- Assess situation and consult with charge nurse.
- Contact appropriate contractor.
- Inform CEO/delegate of situation and probable duration of situation.
- Keep CEO/delegate informed of progress.
- Inform Director of Finance and/or Assistant Director of Finance.

External Telephone System

Maintenance Manager/Maintenance Person

- Inform charge nurse.
- Inform CEO/delegate of situation.
- Inform Director of Finance and/or Assistant Director of Finance.

Radiant Care

Charge Nurse

- Use cell phone to call Maintenance Manager/maintenance person for report on situation.
- Inform nursing staff:
    - External communication has been cut.
    - Set up cellular phone including cellular phone list (speed dial numbers will not work).

RESPONSE IN SUPPORTIVE HOUSING

Internal Telephone System

Maintenance Manager/Maintenance Person

- Assess situation and consult with Supportive Housing Manager.
- Contact appropriate contractor.
- Inform CEO/delegate of situation and probable duration of situation.
- Keep CEO/delegate informed of progress.
- Inform Director of Finance and/or Assistant Director of Finance.

External Telephone System

Maintenance Manager

- Inform Supportive Housing Manager/delegate.
- Inform CEO/delegate of situation.
- Inform Director of Finance and/or Assistant Director of Finance.

Supportive Housing Manager

- Use cell phone and call Maintenance Manager for report on situation.
- Inform Supportive Housing staff:
    - External communication has been cut.

Supportive Housing Staff

- Notify all clients using a medical alarm service of the telephone system failure.
- During a telephone system failure, clients needing medical alarm service will need a safety check every two hours.

REVISIONS

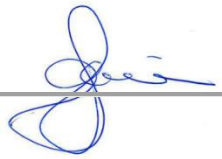
Date	Changes	Requested By
SEP 2024	Rebranding & reformatting; 'paging system' updated to 'Fire Safety Phone'	F. Akano
NOV 2025	Minor updates to procedures for Supportive Housing Manager under External Telephone System section	M. Challice

Radiant Care

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	E. Tepsa, M. Challice		
JUL 2026	F. Akano		

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	THREAT OF VIOLENCE (CODE WHITE)
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-15
APPROVAL:		DATE:	JANUARY 2011

POLICY

Radiant Care is committed to providing a safe environment for employees, residents, tenants, volunteers, students, and visitors. Any threat of violence, whether verbal, physical, written, electronic or implied, must be taken seriously and addressed immediately.

An employee who is subjected to a threat of violence needs to take actions to protect themselves and residents/tenants. A threat may come from a resident, tenant or from “others”, including but not limited to other employees, visitors, family members, contractors, or members of the public.

A threat of violence includes behaviour that may reasonably be expected to cause physical injury, intimidation, or fear, including escalating aggression, possession of a weapon, or attempts to gain unauthorized access.

Tailgating for the purpose of this policy refers to an unauthorized person following an employee into a secure area, often by sneaking in behind them.

The threat of a violent situation is one that requires the on-site senior staff (CEO, Senior Administrator Long-Term Care, Administrator Long-Term Care, Director of Care, Supportive Housing Manager) to take immediate action. Once assistance has been sent to the area and the police contacted if threat is from “others” or when required to protect safety of individuals within the home. The CEO/delegate must be notified as soon as possible, if not already informed.

Radiant Care maintains a zero-tolerance approach to workplace violence and encourages the prompt reporting of threats, suspicious behaviour, and near-miss incidents without fear of reprisal.

PROCEDURE

Scope of Threats

This procedure applies to threats or acts of violence involving:

- Residents or tenants (including responsive behaviours)
- Employees
- Visitors and family members
- Contractors or service providers
- Members of the public or intruders

Threats from a Resident or Tenant

- Follow Radiant Care Responsive Behaviours policy regarding prevention and management of aggressive behaviour.
- Use de-escalation techniques and personal safety strategies as trained.
- Utilize a buddy system when providing care or responding to residents or tenants with known or escalating behaviours.
- If these measures prove to be insufficient, actions to obtain assistance to protect yourself and the other residents/tenants should be undertaken. If unable to contain a threat from a resident/tenant:
    - Pull nurse call bell (if available);
    - Call for help from co-workers; or,
    - Use the whistle.
- Remove yourself and other residents or tenants from the area if it can be done safely.
- Notify the Supervisor/Manager as soon as possible.
- Initiate a Code White Repeat 3 times: "Code White - [Location from enunciator panel]" as well as indicating Resident Home Area/Building (e.g., RHA 1, RHA 2, Mapleview, Arborview) when a behaviour poses an immediate risk, refer to the Code White - Response Flow Chart (see Appendix A).

Personal Safety and Buddy System

Radiant Care supports the use of a buddy system to enhance safety, particularly:

- During high-risk care activities.
- When working alone or after hours.
- When responding to known aggressive behaviour.
- When an employee feels unsafe for any reason.

Employees should trust their instincts and remove themselves from unsafe situations when necessary.

Threats from "Others"

- If the threat is posed from someone other than a resident/tenant,
    - Immediately notify the Director of Care / Supportive Housing Manager / delegate.
    - The Director of Care / Supportive Housing Manager / delegate will contact police as required.
- In the interim, employees should:
    - Call for help from co-workers.
    - Maintain a safe distance and position near exits.
    - Avoid confrontation.
    - Remove residents/tenants from the area if safe to do so.
- The Director of Care / Supportive Housing Manager / delegate will inform the CEO/delegate.
- Initiate Code White when there is immediate risk.

Assisting Coworkers in a Threatening Situation

When you get a call to provide assistance during a threatening situation:

- Enter the area cautiously; you don't want to surprise the person.

- Assess the situation to determine if residents/tenants and staff can be removed from the dangerous area.
- Support de-escalation where appropriate
- Calmly and quietly remove residents/tenants from danger area.
- Follow directions of senior staff and Code White responders

Reporting Suspicious Behaviour

Employees must promptly report:

- Threats of violence
- Suspicious or escalating behaviour
- Unauthorized individuals on site
- Tailgating or access control breaches
- Any violent incident or near-miss Reports are to be made to leadership and documented according to Radiant Care reporting processes.

If there is an immediate safety concern, employees should contact their direct supervisor or delegate.

Access Control and Tailgating Prevention

- Employees must not allow unknown individuals to follow them through secured doors.
- Restricted areas are to remain secured at all times.
- Any access control concerns must be reported immediately.
- Employees are not expected to challenge unsafe situations alone.

Code White Response Guidelines

This section outlines responsibilities during a Code White to ensure a coordinated, safe, and effective response.

Code White Leader (Charge Nurse or Team Lead)

The Code White Leader directs and coordinates the Code White response.
Responsibilities include:

- Leading the response and determining the plan of action.
- Receiving a handover from the first responder, if applicable.
- Assigning roles and briefing responders.
- Ensuring removal of items that could be used as weapons, where possible.
- Identifying exit strategies and safe staff positioning.
- Ensuring required PPE, equipment, medications, restraints, and space are available and ready.
- Call physician or nurse practitioner for orders as required.
- Communicating with and requesting police assistance when required.
- Leading the post-Code White debrief.
- Ensuring documentation, investigation participation, and follow-up.
- Ensuring behaviour care plans and violence risk flags are updated.

Code White De-escalation Leader

The De-escalation Leader is responsible for communication and behavioural de-escalation.

Responsibilities include:

- Using approved de-escalation techniques (e.g., GPA).
- Acting as the sole communicator with the violent person.
- Providing calm direction and support.
- Remaining with the violent person until the Code White is complete.
- Assuming another responder role if required.
- Administering medications as ordered (Registered staff only).
- Replaced by someone else if they become the direct subject of violence.

Code White Back-Up De-escalation Responder

Responsibilities include:

- Following direction of the Code White Leader.
- Supporting the De-escalation Leader using safe positioning.
- Removing the De-escalation Leader from direct contact if risk escalates.

Worker in the Incident Area

Responsibilities include:

- Initiating a Code White if not already called.
- Following the direction of the Code White Leader.
- Assisting with crowd control and removal of residents or tenants and bystanders.
- Restricting access and removing hazards were safe.
- Participating in debriefs, investigations, and supports.
- Documenting behaviours, triggers, and safety measures if required.
- Returning to duties or supporting residents/tenants when not assigned a role.

Supervisor / Manager

Supervisors are responsible for worker safety and Code White oversight.
Responsibilities include:

- Taking all reasonable precautions to protect workers.
- Informing workers of known or potential violence risks.
- Ensuring training, written procedures, and access to safety response devices.
- Leading or participating in debriefs and investigations.
- Communicating investigation outcomes and prevention measures.
- Supporting workers' physical and psychological health.

Employer (Radiant Care)

Radiant Care is responsible for:

- Sustaining Code White policies, procedures, training, and infrastructure.
- Ensuring supervisor's competency and legislative compliance.
- Reviewing incidents and implementing corrective actions.
- Reviewing policies and risk assessments at least annually.
- Supporting workers' psychosocial needs.
- Supporting workers who choose to report violence to police.

For more information on workplace violence, please refer to the Workplace Violence and Harassment Prevention Policy and Program located in the Administration Manual.

Radiant Care

CROSS REFERENCE

1-P-26: Workplace Violence and Harassment Prevention Policy and Program
9-P-74: Responsive Behaviours

REVISIONS

Date	Changes	Requested By
SEP 2024	Rebranding and reformatting; Senior Administrator updated to Senior Administrator Long-Term Care; Operations Manual updated to Administration Manual	F. Akano
SEP 2025	Administrator Long-Term Care added to list of on-site staff in Policy section	C. Loewen
FEB 2026	Significant updates to Policy and Procedure sections; Appendix A added; Cross-Reference section updated	F. Akano

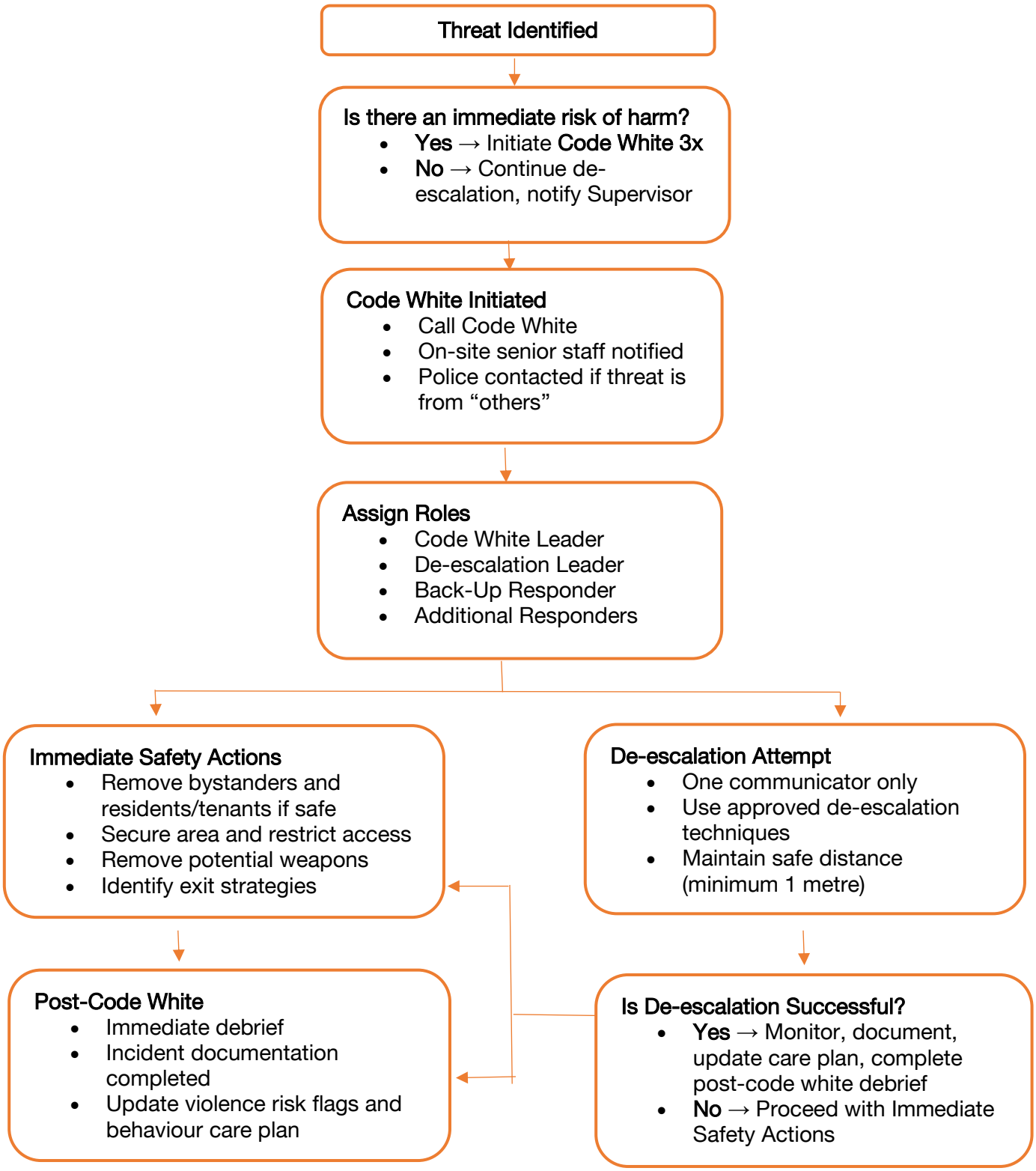
REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
SEP 2022	F. Akano		
JUL 2024	F. Akano		
SEP 2025	C. Loewen		
FEB 2026	F. Akano		

Radiant Care

Appendix A

Code White - Response Flow Chart



APPENDICES

APPENDIX 1

Criminal Code

265 (1) A person commits an assault when:

a. Without the consent of another person, he/she applies force intentionally to that other person, directly or indirectly.
b. He/she attempts or threatens, by act or gesture, to apply force to another person, if he/she has, or causes that other person to believe upon reasonable grounds present ability to affect his/her purpose.
c. While openly wearing or carrying a weapon or imitation thereof, he/she accosts or impedes another person or begs.

2) This section applies to all forms of assault, including a sexual assault with a weapon, threats to a third party or causing bodily harm and aggravated sexual assault.

3) For the purposes of this section, no consent is obtained where the complainant submits or does not resist by reason of:

a) the application of force to the complainant or to a person other than the complainant,
b) Threats or the fear of the application of force of the complainant or to a person other than the complainant,
c) fraud; or,
d) the exercise of authority.

The Criminal Code of Canada defines the types of Assault under Section 265:

I. Common Assault (i.e., push, shove, slap)

II. Assault with a weapon causing bodily harm (i.e., carries, uses or threatens to use weapon or imitation. Injury or bodily harm must be more than transient or trifling in nature).

III. Aggravated Assault (i.e., wounds, maims, disfigures, endangers life of the complainant).

APPENDIX 2

Responsibility of Agency Staff

1. When a client is disruptive, belligerent, aggressive, abusive or resistant to care, and/or behaviour is detrimental to their well-being or the well-being of others, home personnel directly involved with the client must attempt to determine the reasons for the action and with the client and/or significant others, develop a plan of care. The agency staff must complete an assessment which must include a review of the client's behaviour with their physician.

2. Depending on the situation, the agency staff should suspend care temporarily when the client is abusive (verbally or physically) and/or resistant and uncooperative.

3. The agency staff will report any signs and/or symptoms of anxiety and/or aggressive to their supervisor (delegate) immediately as they appear.

4. The Supervisor/delegate will review the agency staff's observations and plan of action and give direction and support to the agency staff

5. When a client has been identified as aggressive or violent, a notation will be made on the client's care plan.

APPENDIX 3

Documentation

1. All incidents/occurrences of aggressive client behaviour shall be documented fully by:

    - Agency staff who has been abused/assaulted
    - Any other witnesses
    - Staff having knowledge of abuse/assault
    - Supervisor (or delegate)

2. Documentation must include:

    - What happened (be exact)
    - Where it happened
    - When it happened
    - Who was involved
    - Why it happened (if precipitating cause known)

3. Documentation must be copied to:

    - Director of Care/Supportive Housing Manager
    - Senior Administrator Long-Term Care
    - Chief Executive Officer

APPENDIX 4

Assault Support Plan

1. The employee who suffers an assault must notify the Director of Care/Delegate as quickly as possible after the assault has occurred.

2. The Director of Care/Delegate will arrange for treatment (if required) and support for the assaulted employee.

3. The Director of Care/Delegate, will gather names, addresses and telephone numbers of all persons who witnessed the assault, including that of the perpetrator, plus their date of birth.

4. The decision to notify police and lay an assault charge will be made by the affected employee, following discussion with the Director of Care/Delegate.

5. The police may be contacted by the Director of Care/Delegate and advised of the circumstances, but the affected employee lays the charge against the perpetrator.

6. The affected employee must complete the Employee Incident Report detailing what happened, who was involved and why it happened (if the precipitating cause is known).

7. The assaulted employee and employee who witnessed the incident may be asked to testify to circumstances in court.

APPENDIX 5

Distribution of Peace Time Disaster & Emergency Safety Plan Response Manual

1. Administration Office - 1 Tabor Drive
2. Systems 24-7 (electronic) - accessible to all staff

APPENDIX 6

Radiant Care
Air Exclusion Checklist

DATE: _____

Location	Person Responsible	Count Completed & Area Secured	Name of Person Reporting
Resident Rooms	Maintenance		
Common Areas	Maintenance		
Kitchen	Maintenance		
Laundry	Maintenance		

_____ _____

Signature of Personnel Assignment Centre Coordinator

Date

This checklist applies to both Radiant Care Pleasant Manor and Radiant Care Tabor Manor

APPENDIX 7

Staff Nominal Roll

NAME	

APPENDIX 8

Resident Nominal Roll

NAME	ACCOUNTED FOR

APPENDIX 9
Bomb Threat Check List

If you receive a bomb threat, do the following: remain calm and courteous, and obtain as much information as possible.

Telephone Number of Caller Identified: _____

Date and Time Call Received: _____

CALLER'S IDENTITY

Male Female Race (specify) _____ Age (approx.) _____

Accent _____ Speech Impediments _____

TIME AND ORIGIN OF THE CALL

Local Long Distance Booth Internet Cell Phone
FAX Email

ASK

Where is the bomb located? _____

e.g. What part of the building is it in? Is it in a resident area? _____

Floor _____ Room_____

When will it explode? _____

What does it look like? _____

VOICE CHARACTERISTICS

Loud Soft Fast Slow High Pitched Deep District Distorted

SPEECH: Raspy Pleasant Stutter Nasal Intoxicated Familiar Slurred

LANGUAGE SPOKEN/GRAMMAR

English Other (specify) _____

English with accent _____

Excellent Good Fair Poor Foul

MANNER		BACKGROUND	
Calm	Angry	Office machines	Voices
Rational	Irrational	Street	Airplanes
Coherent	Incoherent	Factory Machines	Trains
Deliberate	Emotional	Party Atmosphere	
Righteous	Laughing	Other (specify)	
		Mixed _____	

Other: _____

APPENDIX 10
CODE YELLOW (MISSING RESIDENT) CHECKLIST

Resident: _____

Date & Time: _____

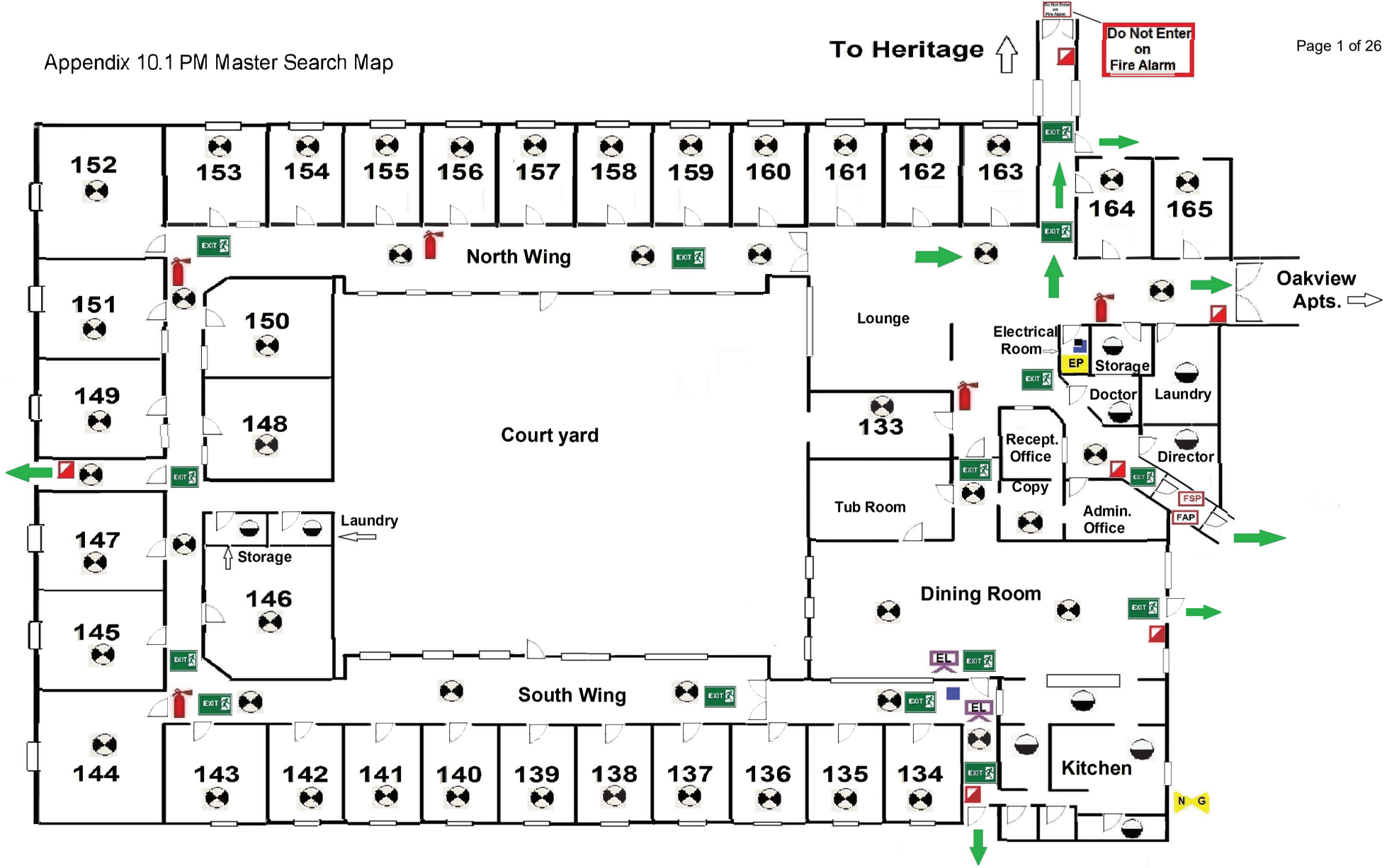
No.	Checklist	Nurse Initial
1.	**Registered Nurse (RN) -** when a resident suspected missing: • If Director of Care (DOC) is on site, inform right away • Check the sign-out binder and/or if reception open, call to inquire if the resident has been seen recently or has gone out with family/friends If the resident is still NOT found, determine who saw the resident last, when and where, and what the resident was wearing. • Call the SDM/family/significant other to inquire if the resident is visiting them. If not, inform them the resident is missing.	

2.	If the resident has not been seen or gone out, the RN/delegate will announce **"Code Yellow, Resident name" 3 times** over the Fire System Phone.
	• All nursing employees will remain on the unit and search the entire unit.
	• Dietary employees will:
	  ○ Search the kitchen area/elevator and delivery area
	  ○ Send one employee to check the stairways
	  ○ Remaining staff will report to Great Room and wait for direction from RN
	• All other employees will report to their assigned areas; e.g., laundry. Employees in common areas will report to either the:
	  ○ Nurses Station (at Radiant Care Pleasant Manor)
	  ○ Great Room (at Radiant Care Tabor Manor)
	  and will monitor front lobby and exit doors
	• RN/delegate will form search teams of employees. These teams will complete a systematic search of each room, starting at the far end of each hallway and work toward the center of the home. **Remind teams to search ALL rooms including bathrooms, tub rooms, utility rooms, closets, dining areas, etc.**
	• **All staff will report findings to the RN/delegate.**
	• **After hours, the RN in charge will also assign employees to:**
	  ○ Search laundry areas
	  ○ Search the kitchen, corridor outside the kitchen and the area between the kitchen and delivery areas and elevator	

3.	Once search has been completed and all employees have reported to the RN, assign a team to check the basement, including non-resident	

No.	Checklist	Nurse Initial
	areas, offices, corridors and outside seating areas.	
4.	If resident is NOT located, call Supportive Housing and ask for assistance with a search of other buildings: • Radiant Care Pleasant Manor cell #: 289-241-2360 • Radiant Care Tabor Manor cell #: 289-241-9256 Provide resident photo for Supportive Housing employees and ask them to **report their findings to RN/delegate after the search is completed.** • **If the Director of Care is not on site or is off, notify at this time.**	
6.	***After all internal areas are searched and the resident is still missing,*** the RN/delegate will announce **"Code Yellow**, **Name of the Resident, Stage 2" 3 times** over the Fire System Phone. • Make four (4) copies of the resident's picture (EMAR or resident chart) for the search team and also provide them with a written copy of who saw the resident last, when, where and what the resident is wearing. • Create two (2) teams of two (2) employees. Mark the Master Search Map **(PM = Appendix 10.1; TM = Appendix 10.2)** with names of the searchers assigned. The employee teams will exit the building by the front door and walk around the building, checking all parking lot areas. Employees will report findings to the RN/delegate.	
7.	**If the resident is still NOT found, the DOC/delegate will:** • **Notify the Senior Administrator Long-Term Care/delegate, who will then notify Chief Executive Officer.** • **Notify the Police** and provide the name of the resident, a description including when and where last seen and what the resident was wearing. Have pictures and maps of the building and grounds available for the police to refer to and use upon their arrival. • **Activate "Fan Out Emergency" if required.** • **Notify the Medical Director for medical emergencies only.** *DOC/delegate will consult with Police/emergency services when to halt facility search.*	
8	At any time during the search process, when the resident is located or when the Home search has been discontinued (based on direction from Senior Administrator Long-Term Care/delegate, DOC/delegate or Police), **RN/delegate will announce "Code Yellow resolved" 3 times** over the Fire System Phone.	

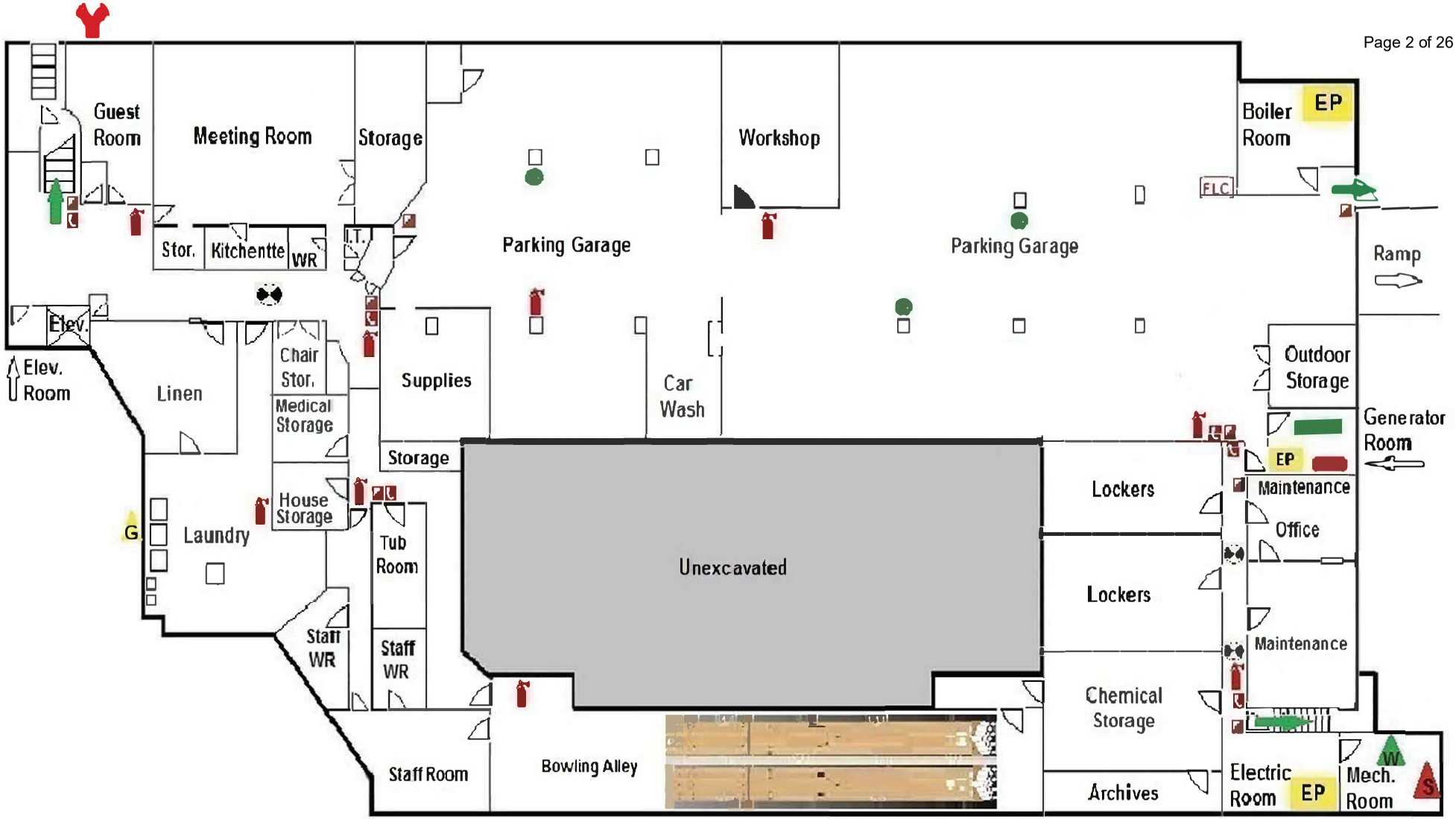
When the Code Yellow is resolved, the RN in charge will document, complete incident report in risk management and this checklist, and provide them to the DOC.



15 ELDEN ST. ARBOURVIEW APTS. MAIN FLOOR PLAN NOVEMBER 2018 NTS

- Smoke Detector
- Heat Detector
- Fire Pull Station
- FAP Fire Alarm Panel
- EP Electrical Panel
- Fire Extinguisher
- FSP Fire Safety Plan Box
- Fire Dept. Connection
- Exit Signage
- Exit
- Attic Access
- N G Naural Gas Valve
- EL Emergency Lighting Unit

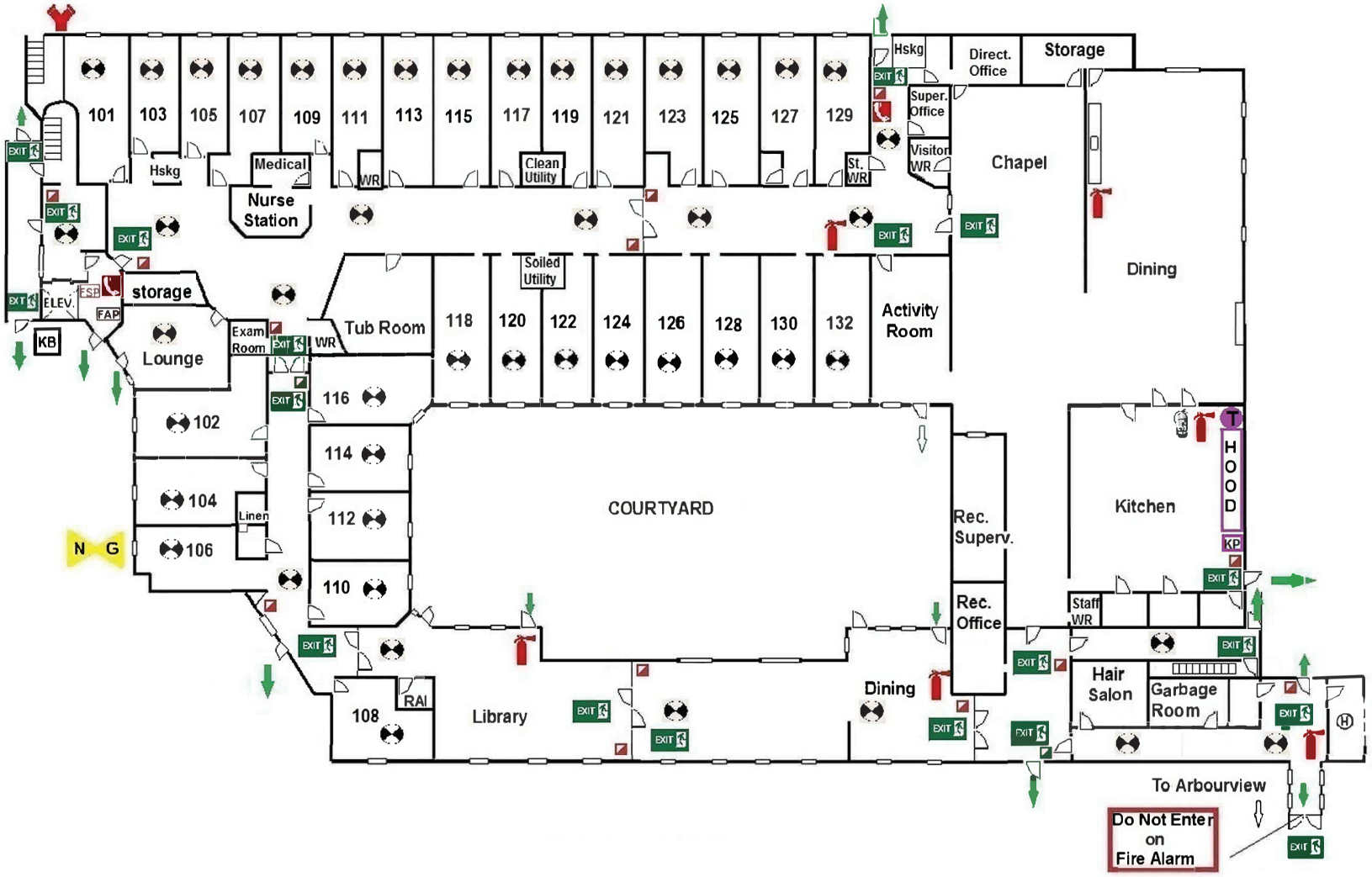
Trillium Fire Protection
906-684-0196
mpdagnew@gmail.com



1743 FOUR MILE CREEK RD. HERITAGE PLACE BASEMENT FLOOR PLAN N NOVEMBER 2018 NTS

- Smoke Detector
- Heat Detector
- Fire Alarm Pull
- Carbon Monoxide Alarm
- Fire Dept. Connection
- EP Electricl Panel
- Portable Fire Extinguisher
- N G Natural Gas Valve
- Exit
- Diesel Fuel Tank
- Water Valve/Meter
- Sprinkler Valves
- Generator

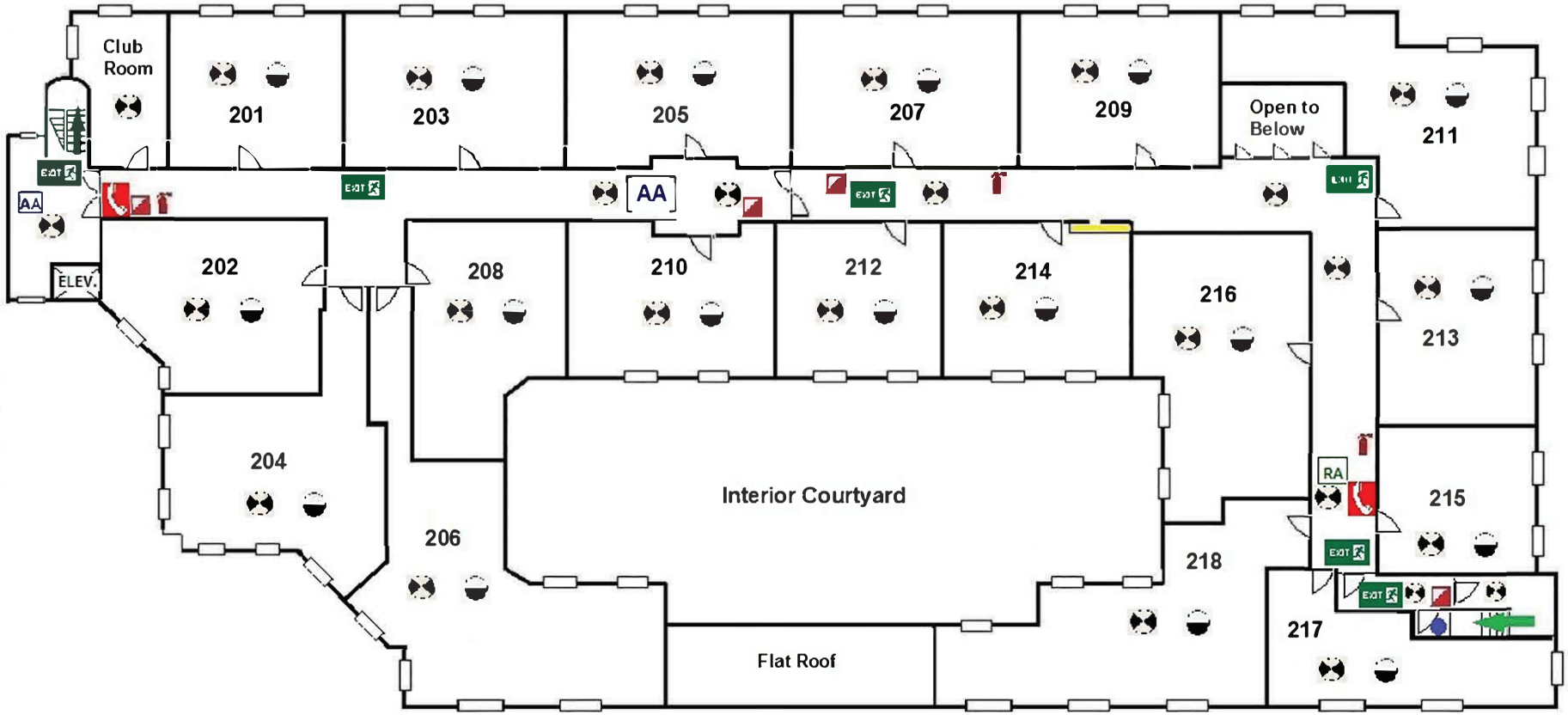
Trillium Fire Protection
905-684-0196
mpdagnew@gmail.com



1743 FOUR MILE CREEK RD. | HERITAGE PLACE | MAIN FLOOR PLAN | NOVEMBER 2018 | NTS

Smoke Detector	Wet Chemical Tank	N G Natural Gas Valve	
Fire Alarm Pull	XP Kitchen Pull Station	KB Key Box	
Portable Fire Extinguisher	"K" Extinguisher	Exit	
		Fire Dept. Connection	

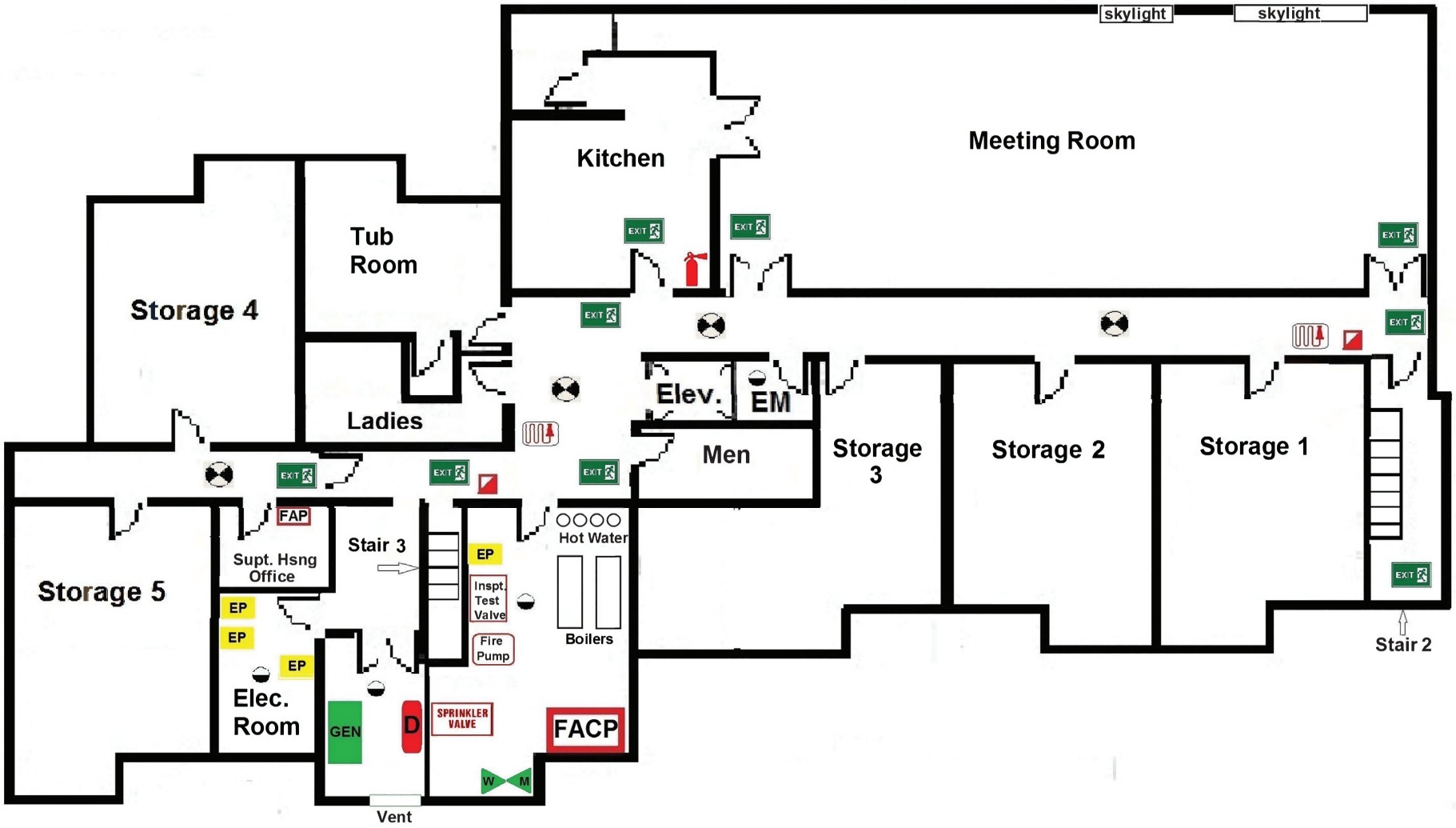
Trillium Fire Protection
905-684-0196
mpdagnew@gmail.com



1743 FOUR MILE CREEK RD. BROOKVIEW APTS. 2nd FLOOR N NOVEMBER 2018 NTS

Smoke Detector	Garbage Chute	Exit Sign	Attic Access
Heat Detector	Electricl Panel	Exit	Roof Access
Fire Alarm Pull	Portable Fire Extinguisher	Firefighter Telephone	

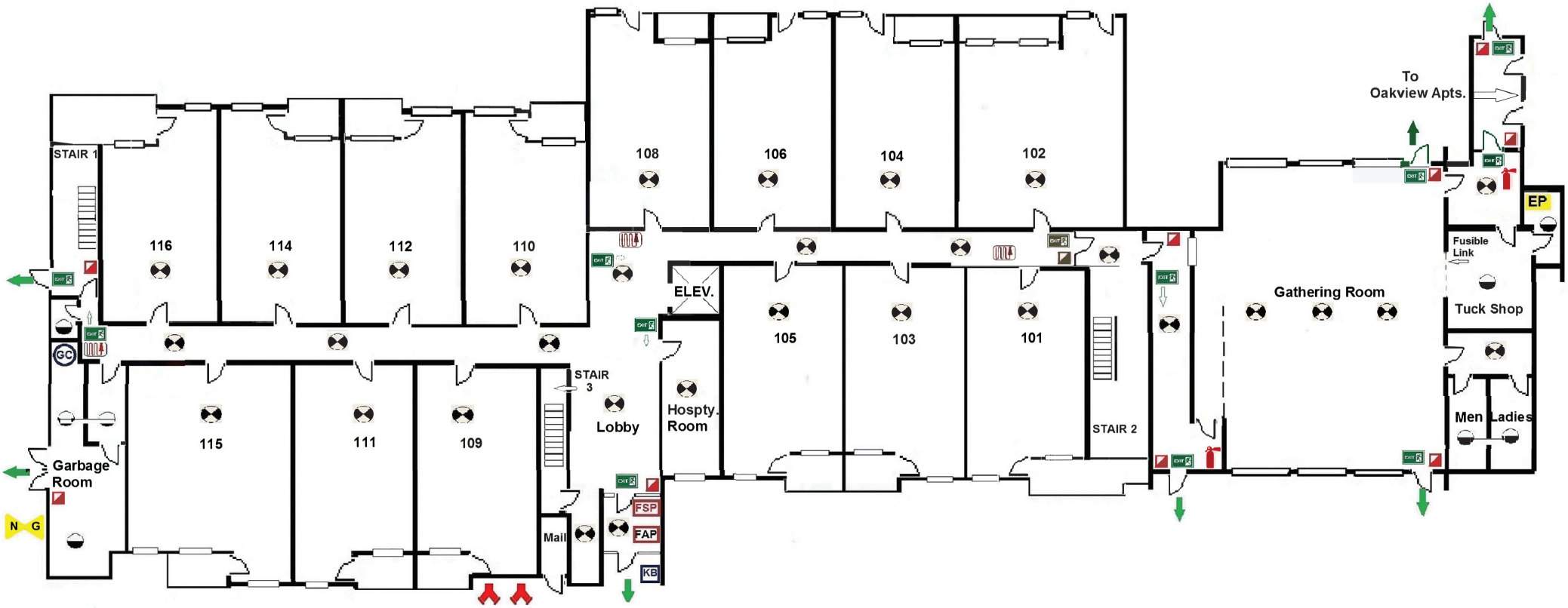
Trillium Fire Protection
905-684-0196
mpdagnew@gmail.com



1 PLEASANT LANE CREEKVIEW APARTMENTS — BASEMENT FLOOR PLAN — NOVEMBER 2018 — NTS

Smoke Detector	Fire Hose Cabinet with Extinguisher	Exit Signage
Heat Detector	EP Electrical Panel	Exit
Fire Pull Station	Water Meter/Valve	GEN Generator
FACP Fire Alarm Control Panel	Portable Fire Extinguisher	D Diesel Fuel Tank - 935 L.

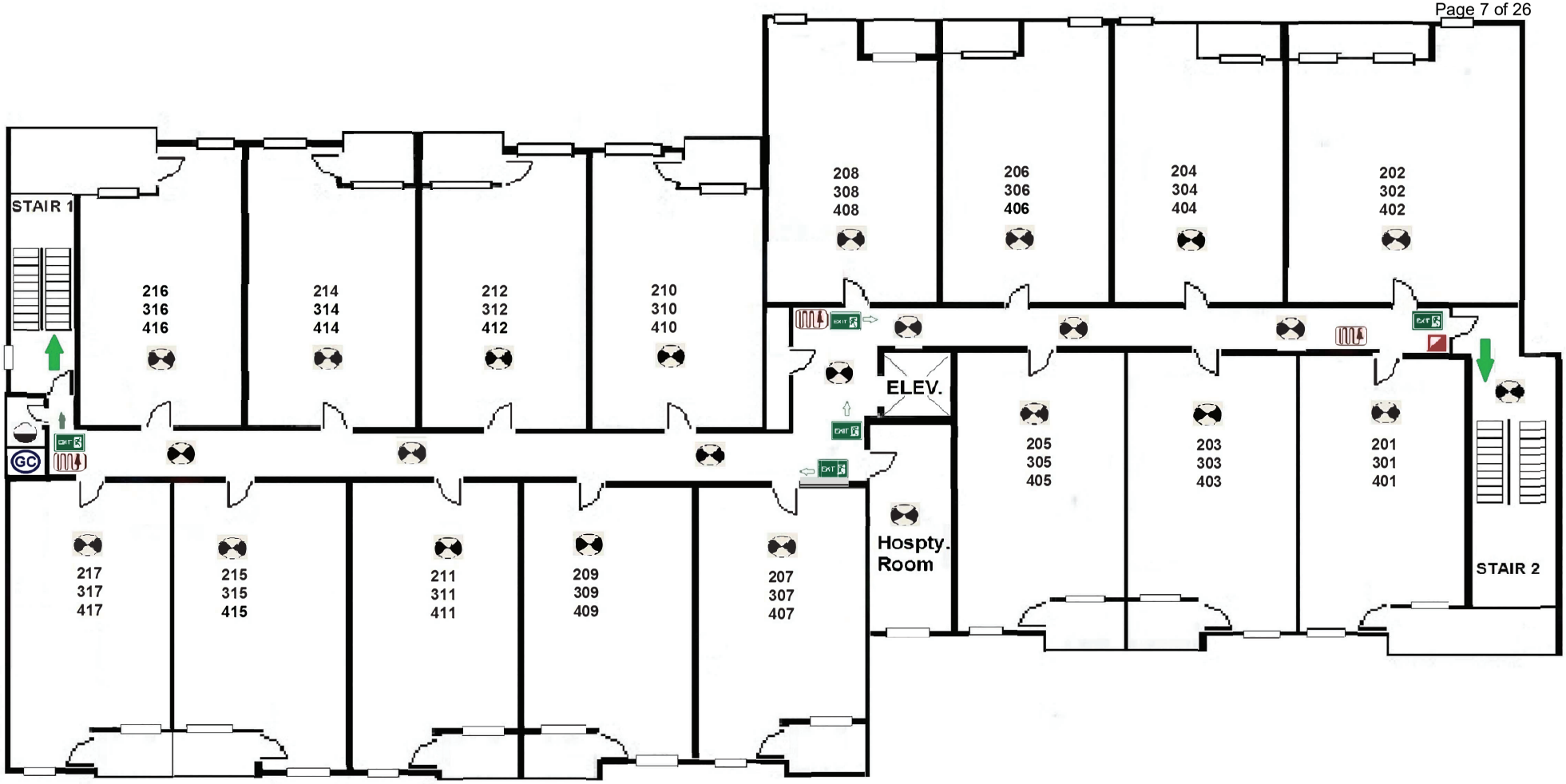
Trillium Fire Protection
905-684-0196
mpdagnew@gmail.com



1 PLEASANT LANE CREEKVIEW APARTMENTS GROUND FLOOR PLAN N NOVEMBER 2018 NTS

Smoke Detector	Fire Hose Cabinet with Fire Extinguisher	Fire Dept. Connection		
Heat Detector	EL Emergency Lighting Unit	EP Electrical Panel	N G Naural Gas Valve	
Fire Pull Station	Fire Extinguisher	EXIT Exit Signage	GC Garbage Chute	
FAP Fire Alarm Panel	FSP Fire Safety Plan Box	Exit		

Trillium Fire Protection
905-684-0196
mpdagnew@gmail.com



1 PLEASANT LANE CREEKVIEW APARTMENTS FLOORS 2 THRU 4 NOVEMBER 2018 NTS

Smoke Detector

Fire Hose Cabinet with Fire Extinguisher

Fire Pull Station

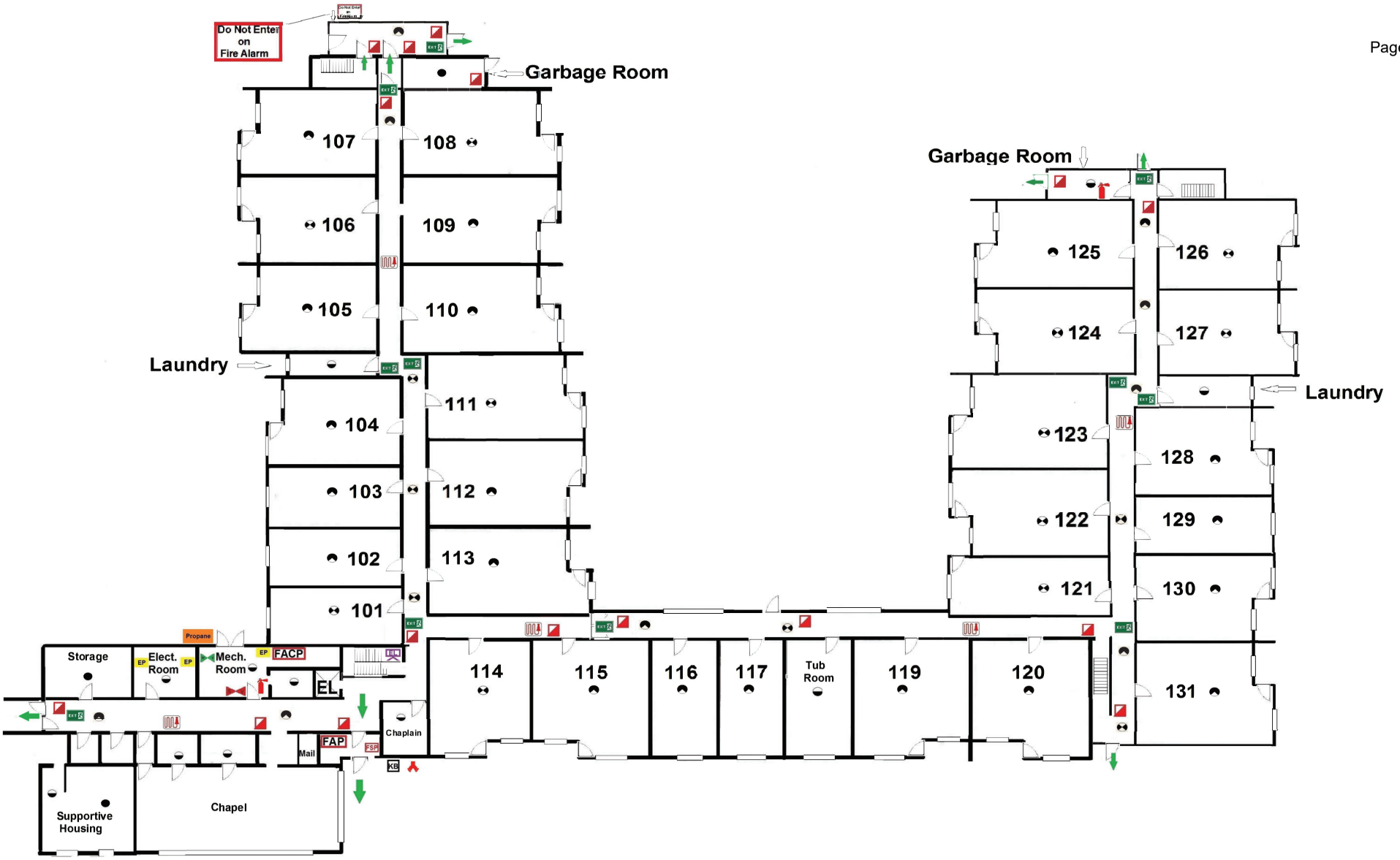
Exit Signage

Garbage Chute

Emergency Lighting Unit

Exit

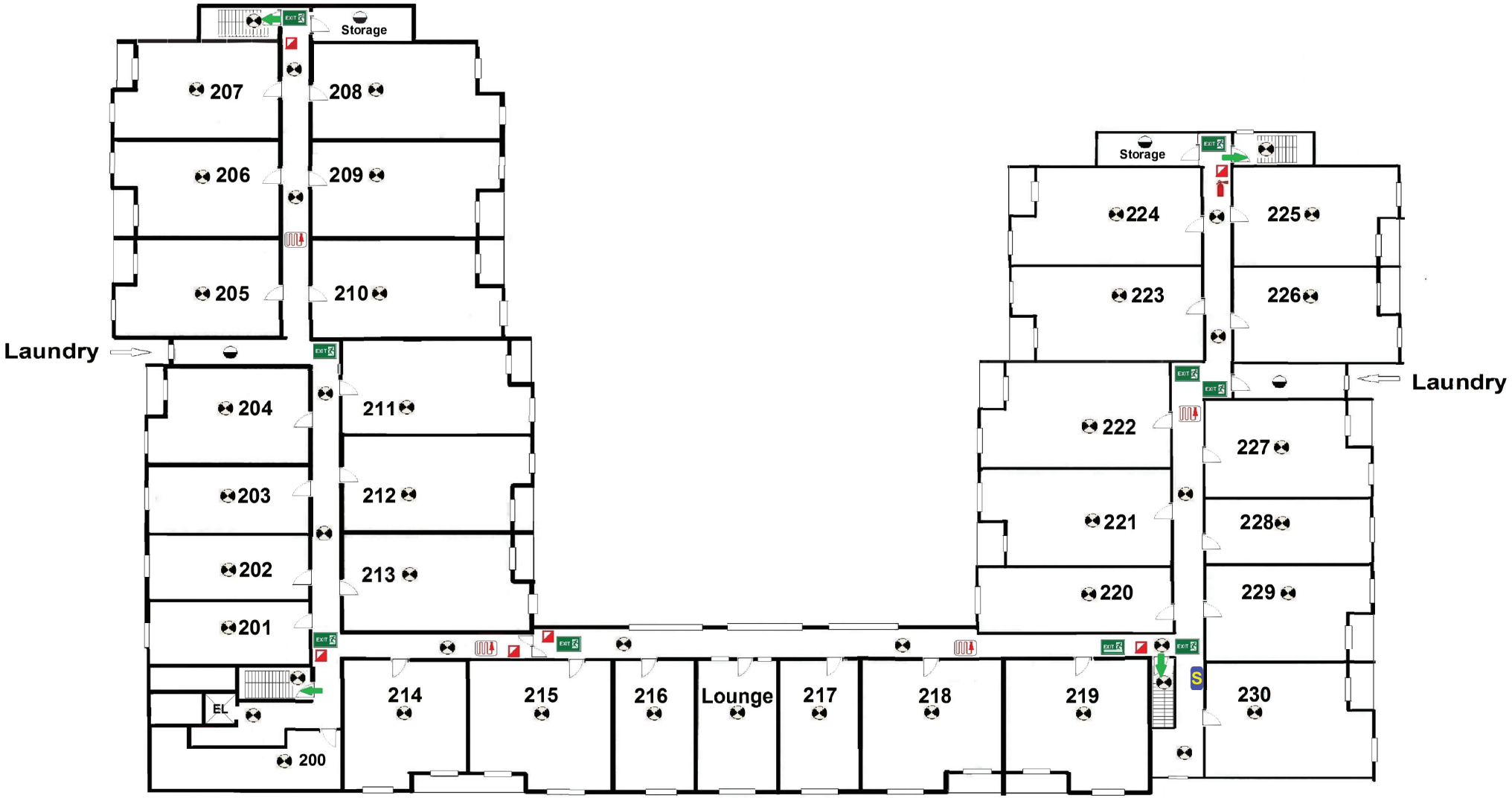
Trillium Fire Protection
905-684-0196
mpdagnew@gmail.com



17 ELDEN ST. | OAKVIEW APTS | MAIN FLOOR PLAN | FEBRUARY 2019 rev.1 | NTS

- Smoke Detector
- Heat Detector
- Fire Pull Station
- FAP — Fire Alarm Panel
- Fire Hose Cabinet with Fire Extinguisher
- FACP — Fire Alarm Control Panel
- Fire Extinguisher
- FSP — Fire Safety Plan Box
- Fire Dept. Connection
- EP — Electrical Panel
- EXIT — Exit Signage
- Exit
- W V — Water Valve/Meter
- S V — Sprinkler Valve
- Propane — Propane Storage
- EL — Emergency Lighting Unit

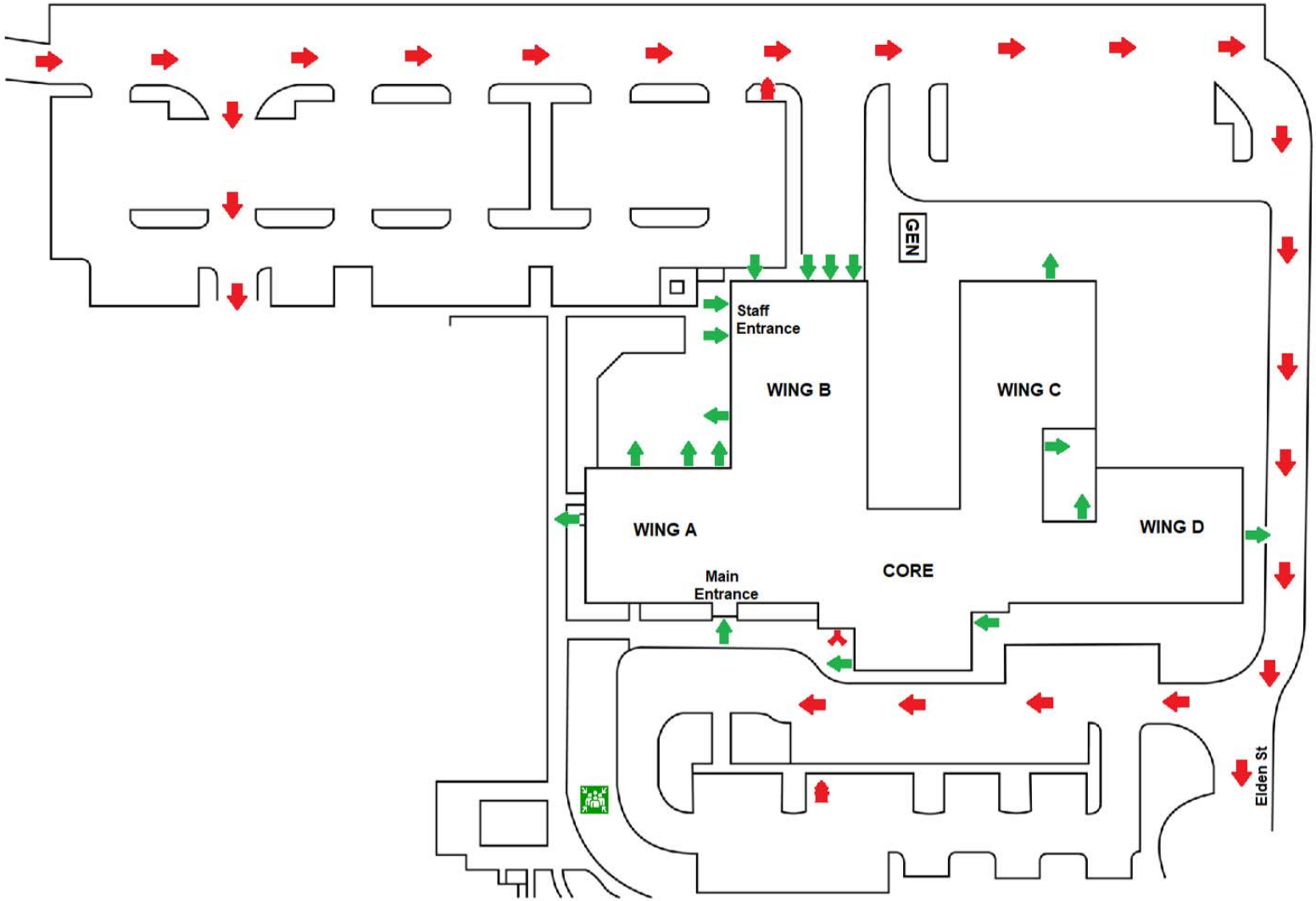
Trillium Fire Protection
906-684-0196
mpdagnew@gmail.com



17 ELDEN ST. | OAKVIEW APTS | SECOND FLOOR PLAN | N | NOVEMBER 2018 | NTS

- Smoke Detector
- Heat Detector
- Fire Pull Station
- Fire Hose Cabinet with Fire Extinguisher
- Fire Extinguisher
- Stryker Chair
- Exit Signage
- Exit

Trillium Fire Protection
906-684-0196
mpdagnew@gmail.com



Assembly Area

Exit

Gas Shutoff

Fire Route

Fire Hydrant

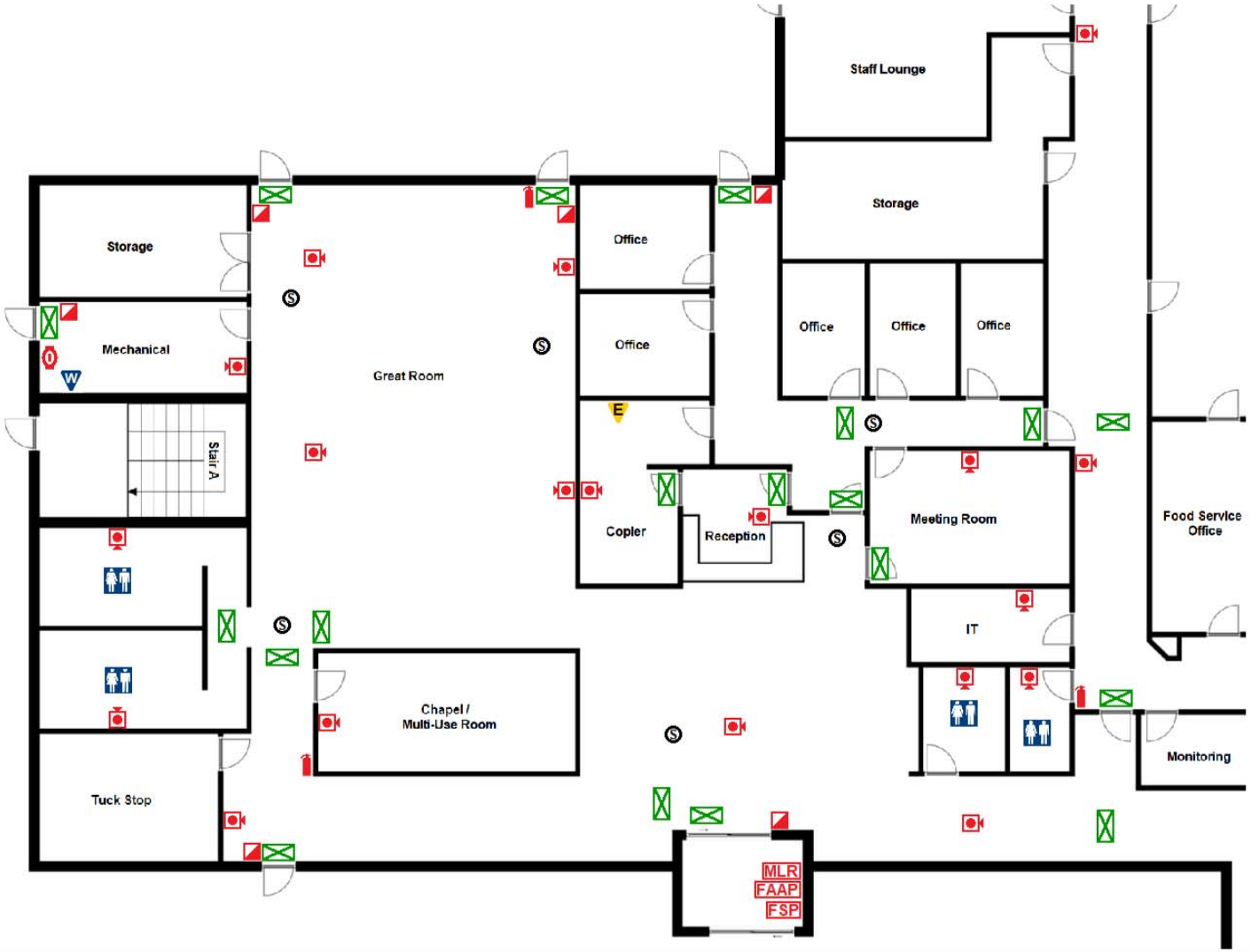
Fire Department
Connection

N

Fire Safety Drawing
Site Plan

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



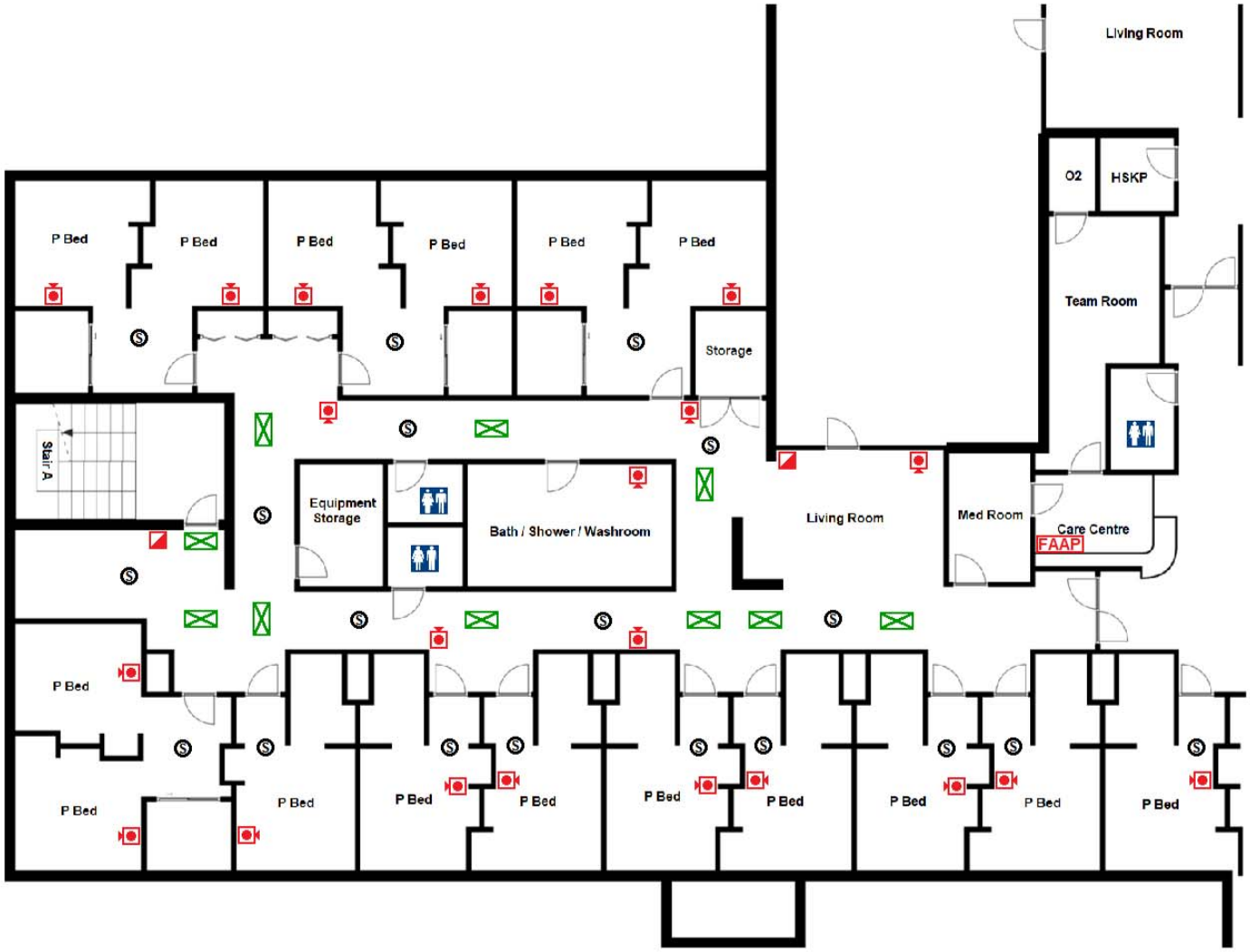
Exit Sign	G	Gas Shutoff		Horn/Strobe	KB	Key Box
Emergency Lighting	E	Electrical Panel		Fire Extinguisher	FSP	Fire Safety Plan
Washrooms	S	Smoke Detector		Pull Station		Roof Access
Water Shutoff	H	Heat Detector	FACP	Fire Alarm Control Panel		Sprinkler Valves
	MLR	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel		Fire Department Connection

N

Fire Safety Drawing
Wing A (1st Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



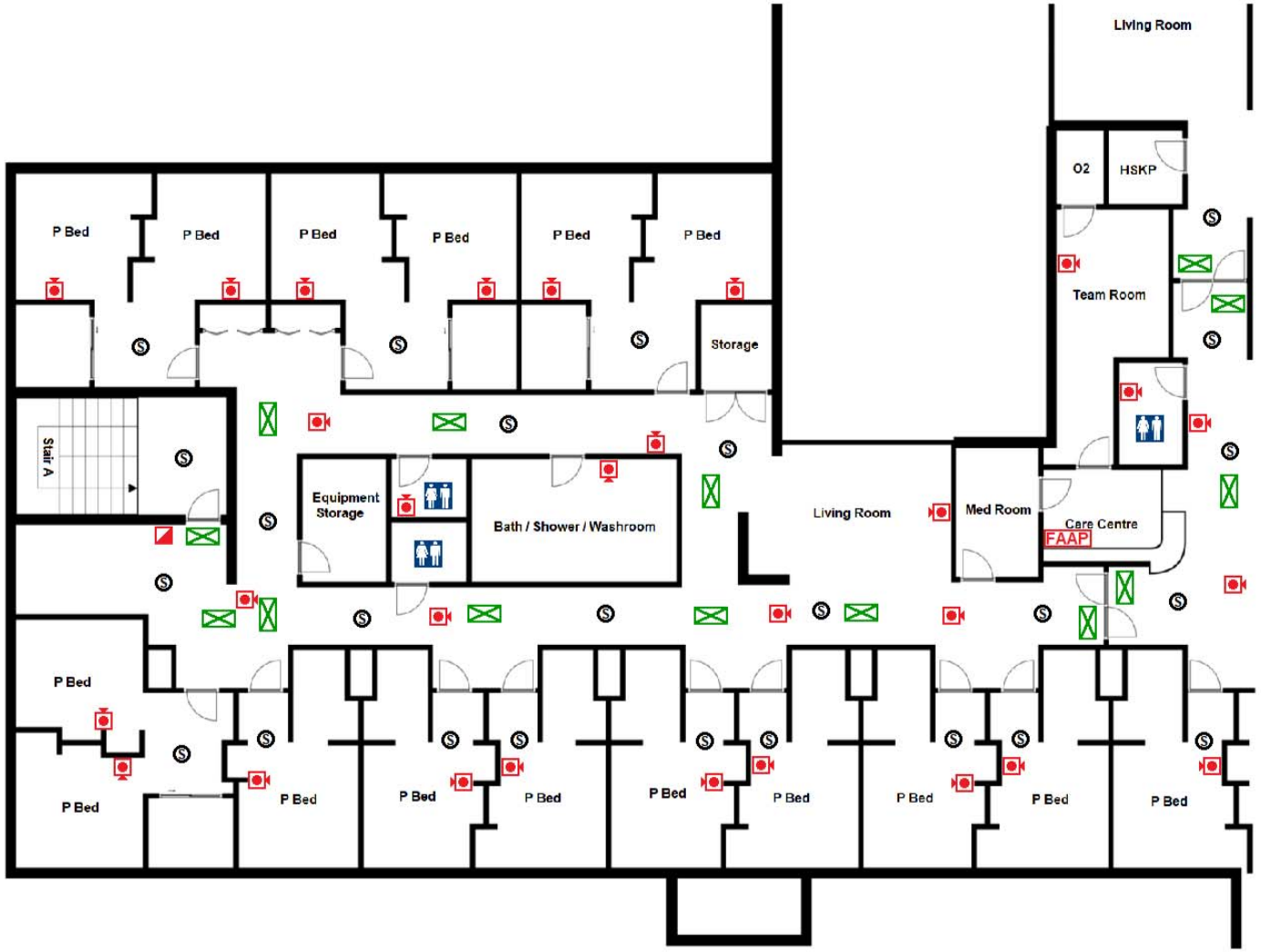
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Wing A (2nd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Wing A (3rd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



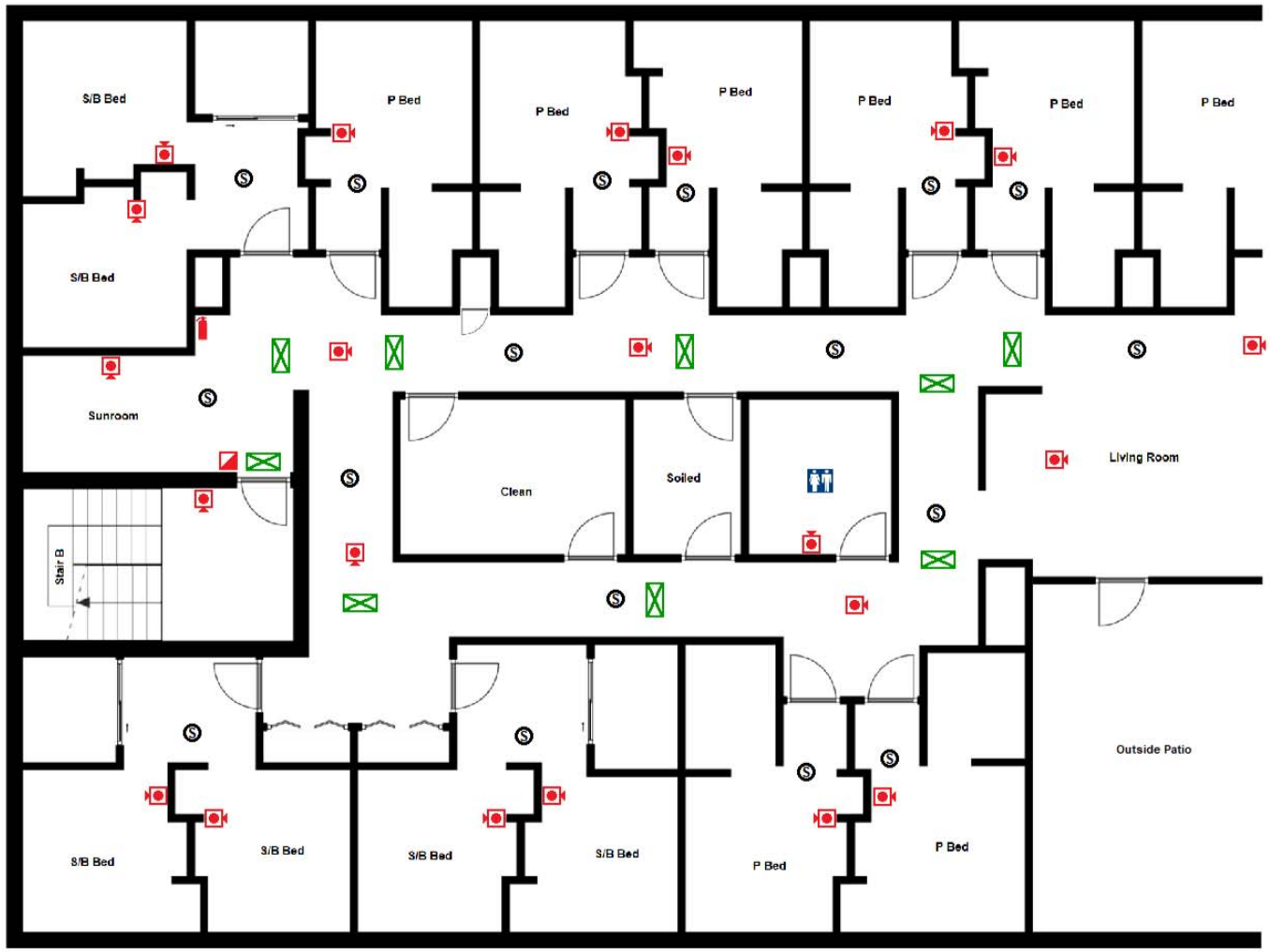
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	FACP	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Wing B (1st Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



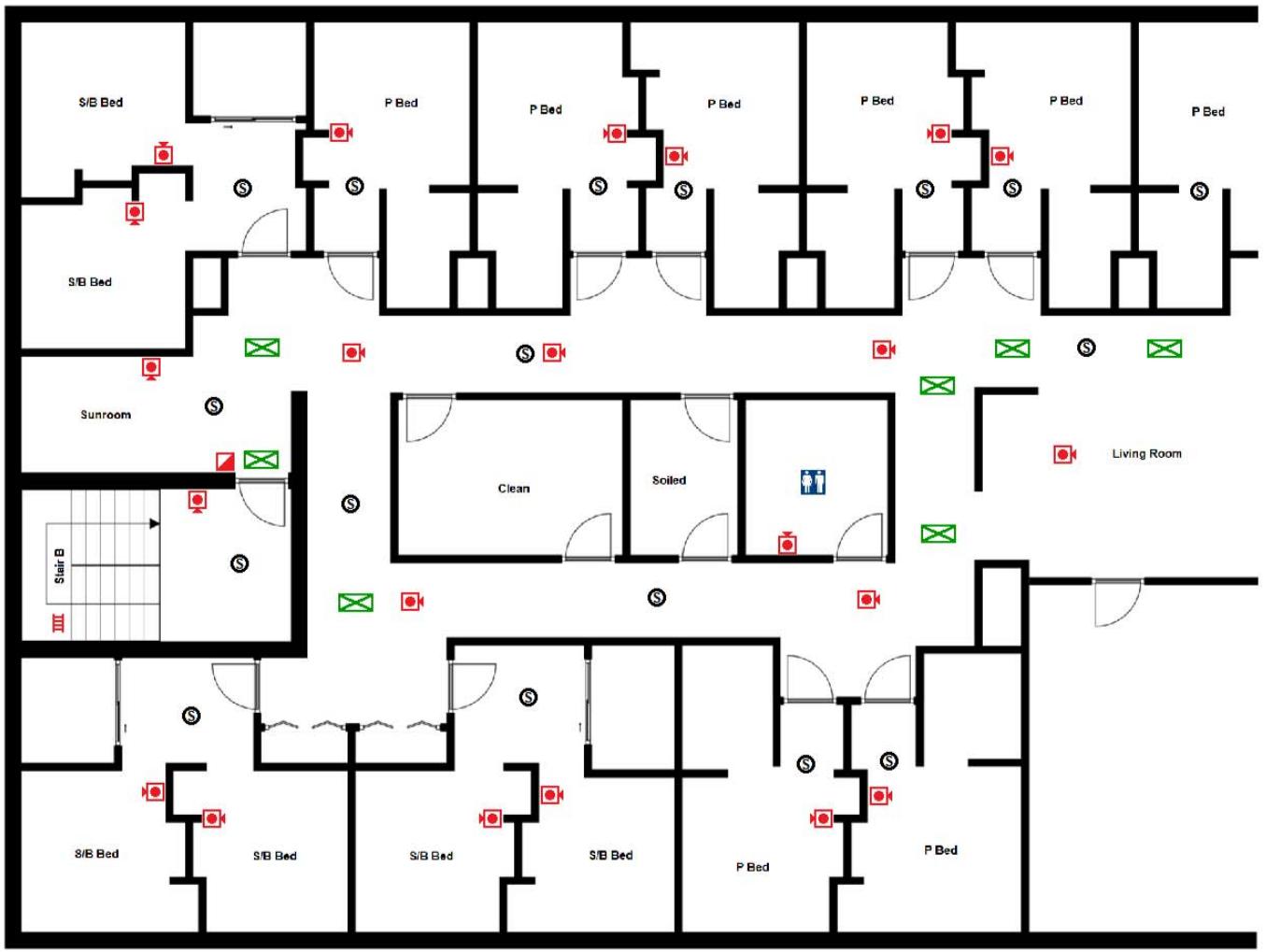
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Wing B (2nd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



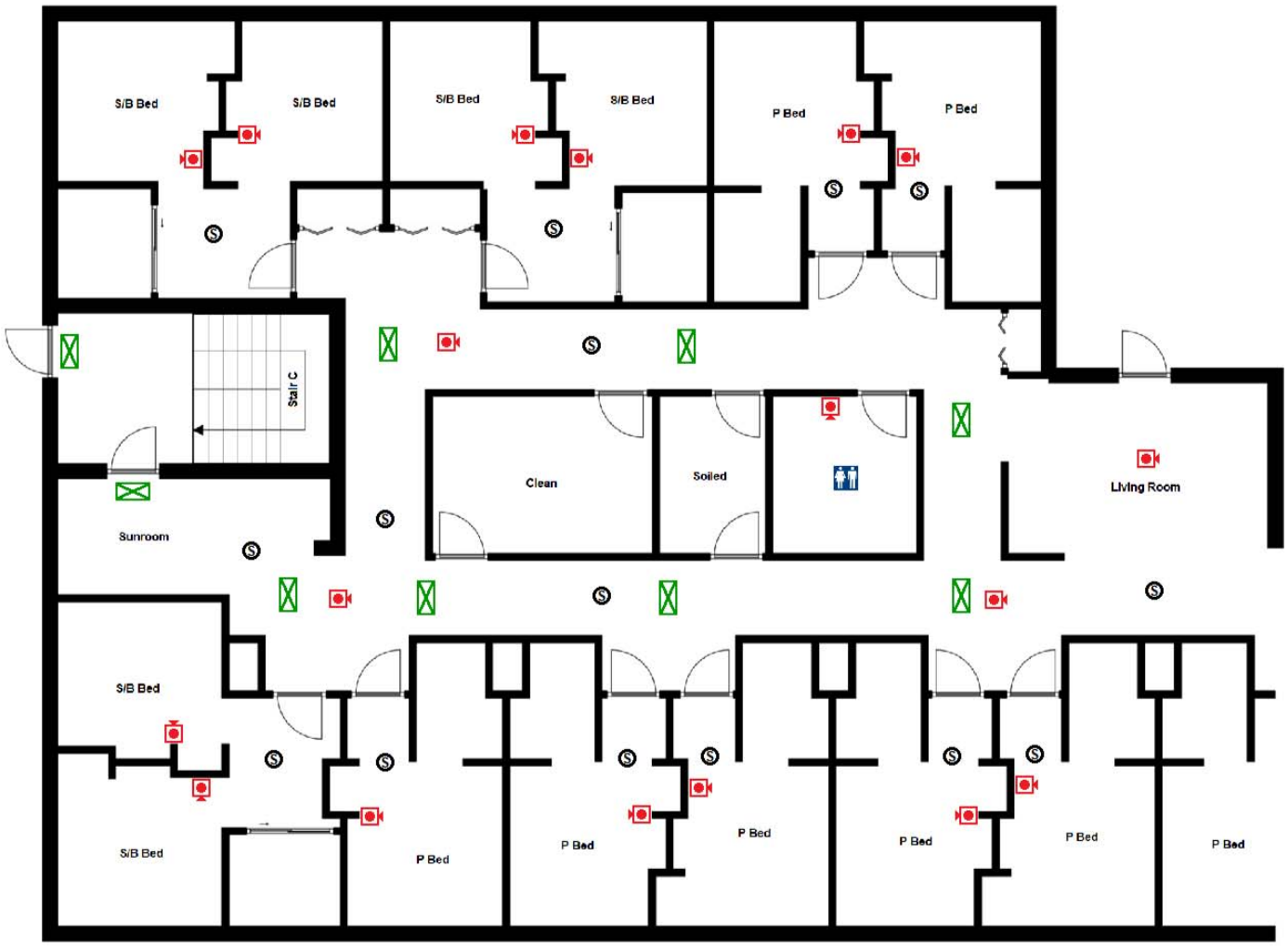
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Wing B (3rd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



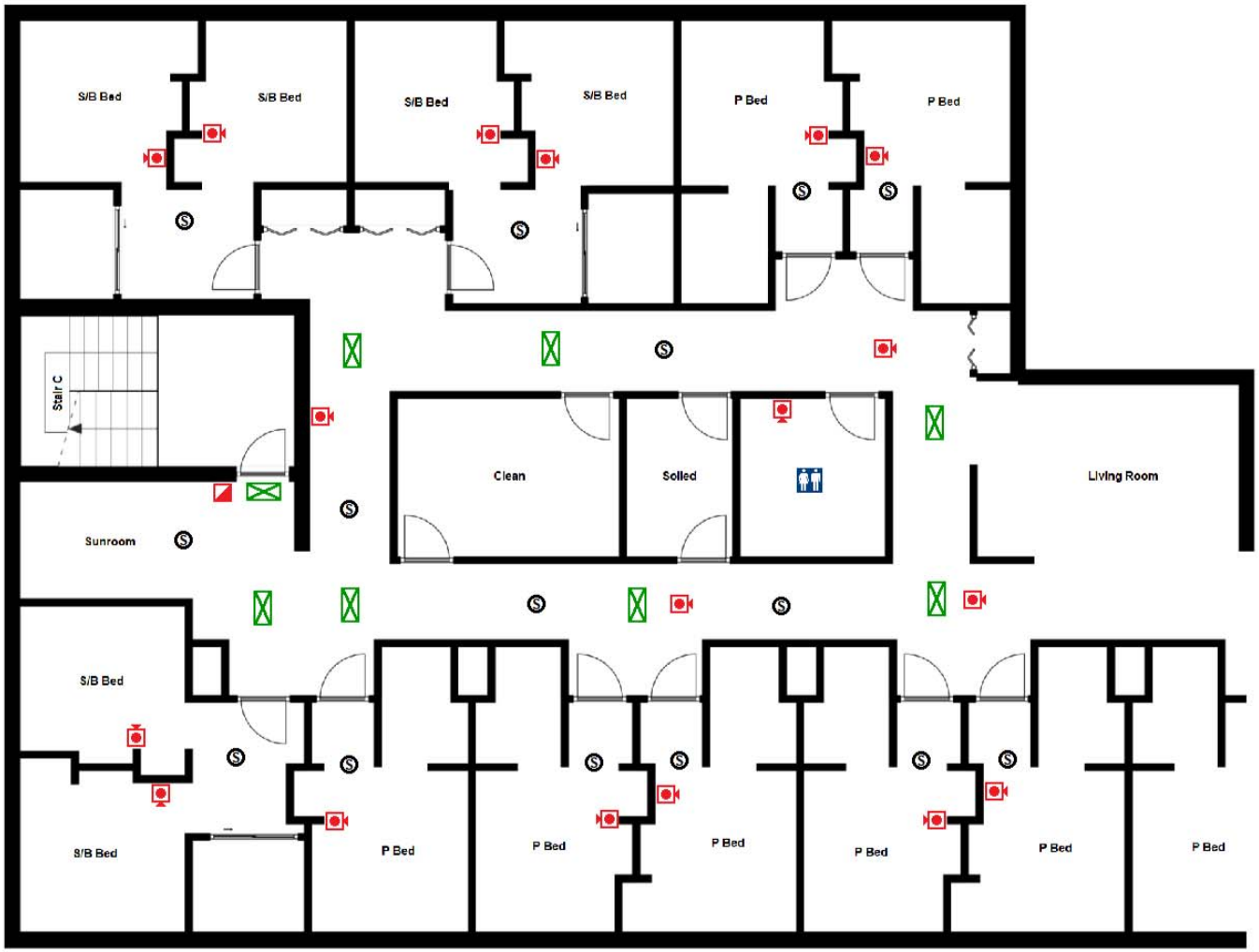
Exit Sign	G	Gas Shutoff		Horn/Strobe	KB	Key Box
Emergency Lighting	E	Electrical Panel		Fire Extinguisher	FSP	Fire Safety Plan
Washrooms	S	Smoke Detector		Pull Station		Roof Access
Water Shutoff	H	Heat Detector	FACP	Fire Alarm Control Panel		Sprinkler Valves
	MLR	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel		Fire Department Connection

N

Fire Safety Drawing
Wing C (1st Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



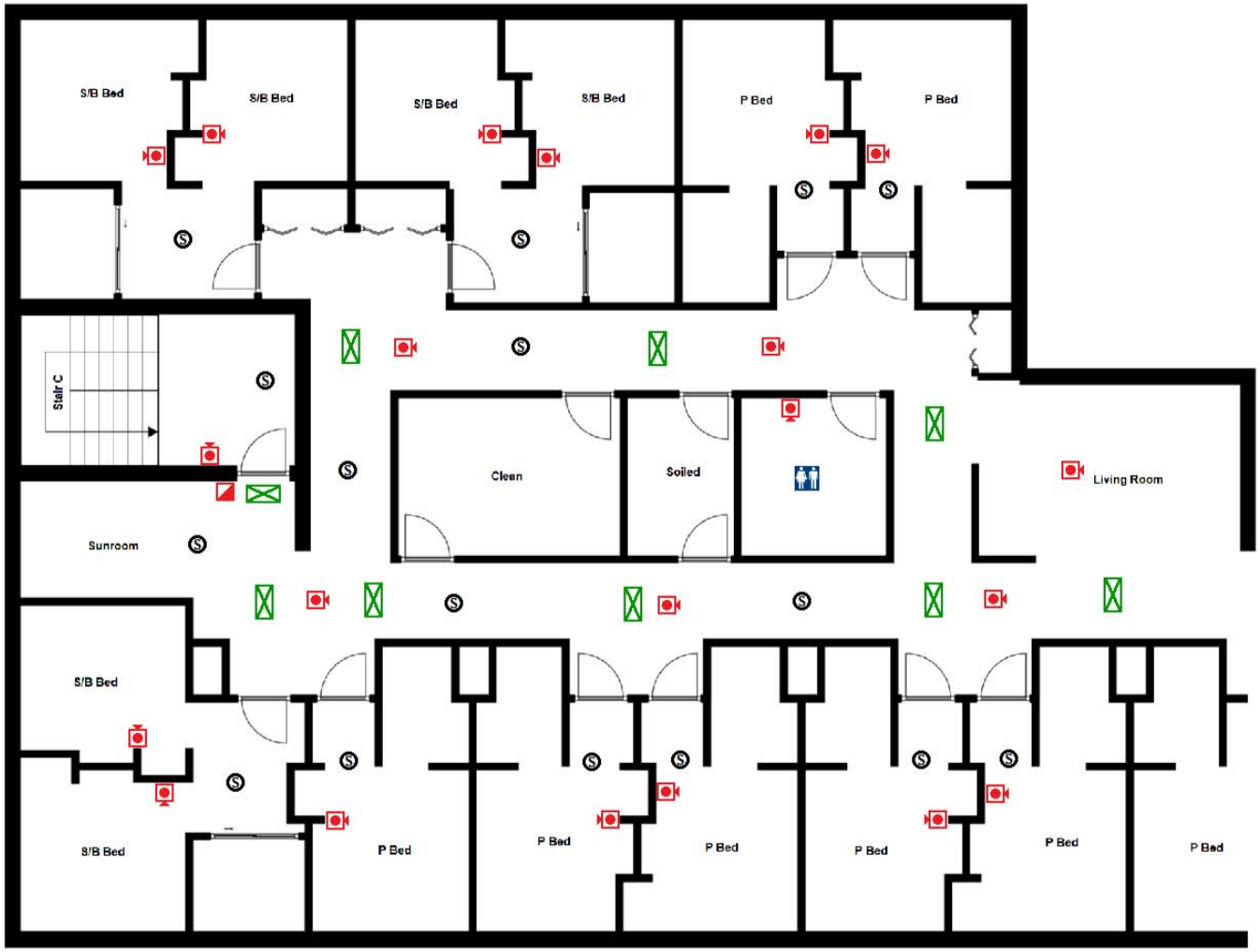
Exit Sign	G	Gas Shutoff		Horn/Strobe	KB	Key Box
Emergency Lighting	E	Electrical Panel		Fire Extinguisher	FSP	Fire Safety Plan
	S	Smoke Detector		Pull Station		Roof Access
Washrooms	H	Heat Detector	FACP	Fire Alarm Control Panel		Sprinkler Valves
Water Shutoff	MLR	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel		Fire Department Connection

N

Fire Safety Drawing
Wing C (2nd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



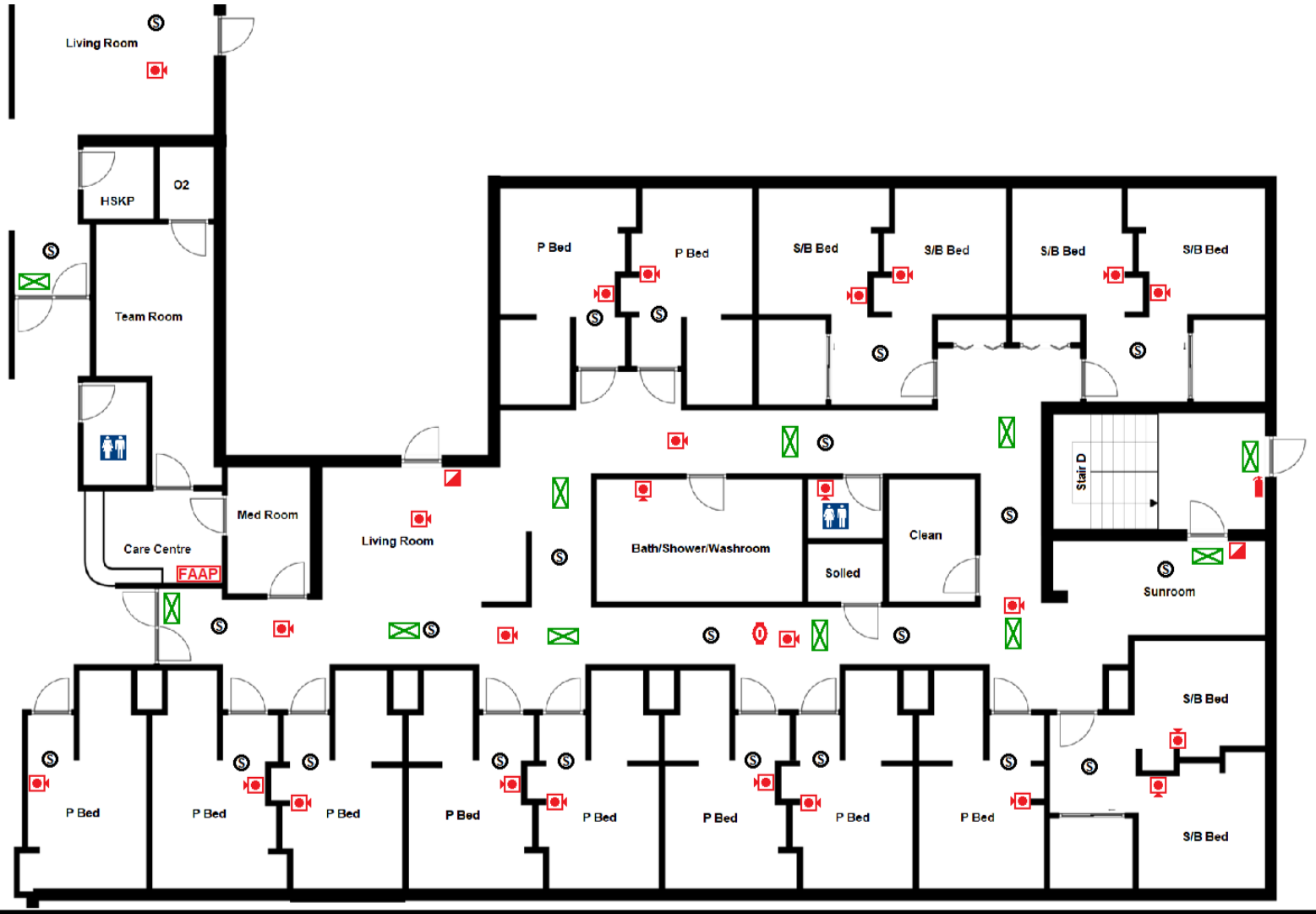
Exit Sign	G	Gas Shutoff		Horn/Strobe	KB	Key Box
Emergency Lighting	E	Electrical Panel		Fire Extinguisher	FSP	Fire Safety Plan
	S	Smoke Detector		Pull Station		Roof Access
Washrooms	H	Heat Detector	FACP	Fire Alarm Control Panel		Sprinkler Valves
Water Shutoff	MLR	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel		Fire Department Connection

N

Fire Safety Drawing
Wing C (3rd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



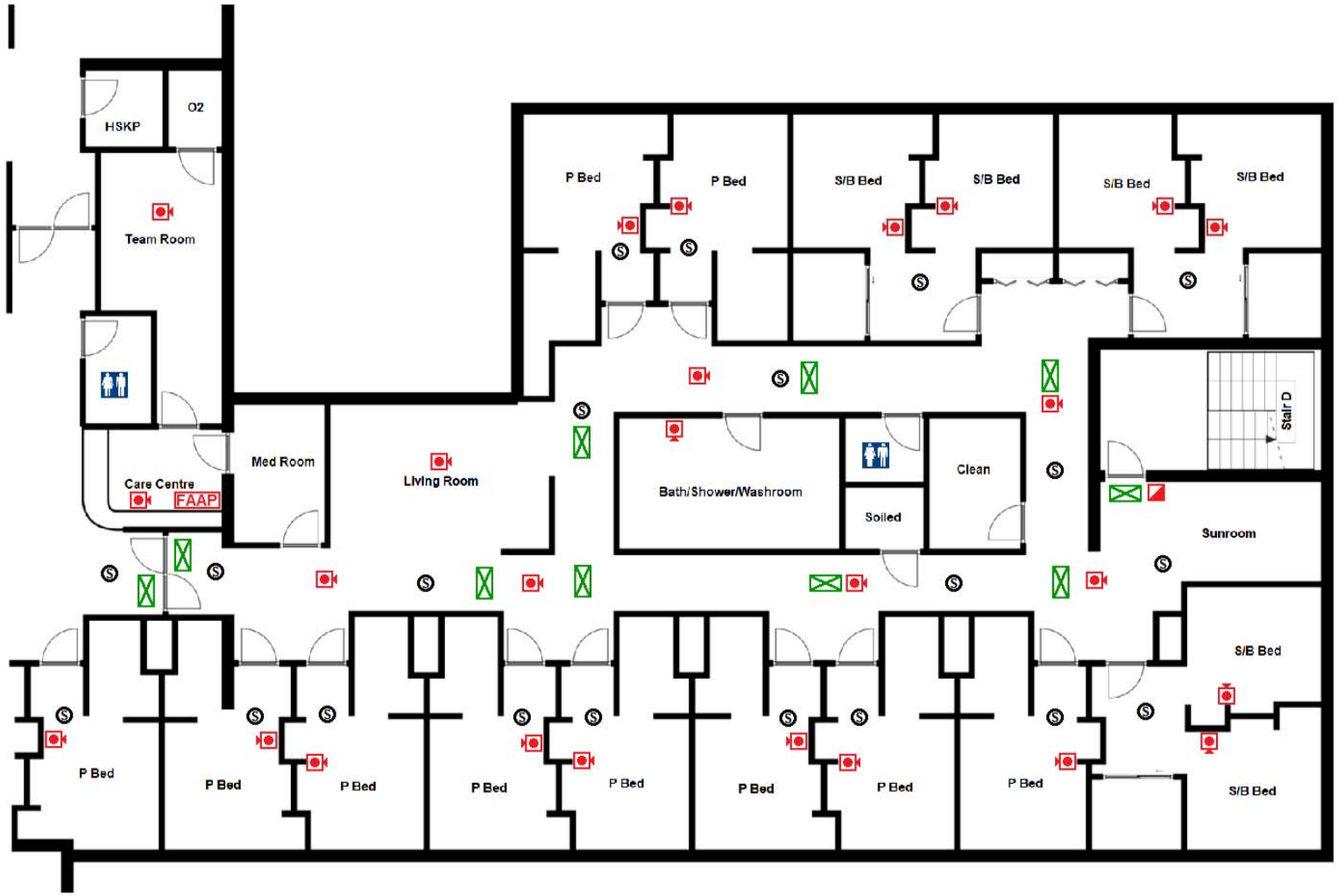
Exit Sign	G	Gas Shutoff		Horn/Strobe	KB	Key Box
Emergency Lighting	E	Electrical Panel		Fire Extinguisher	FSP	Fire Safety Plan
	S	Smoke Detector		Pull Station		Roof Access
Washrooms	H	Heat Detector	FACP	Fire Alarm Control Panel		Sprinkler Valves
Water Shutoff	MLR	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel		Fire Department Connection

N

Fire Safety Drawing
Wing D (1st Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



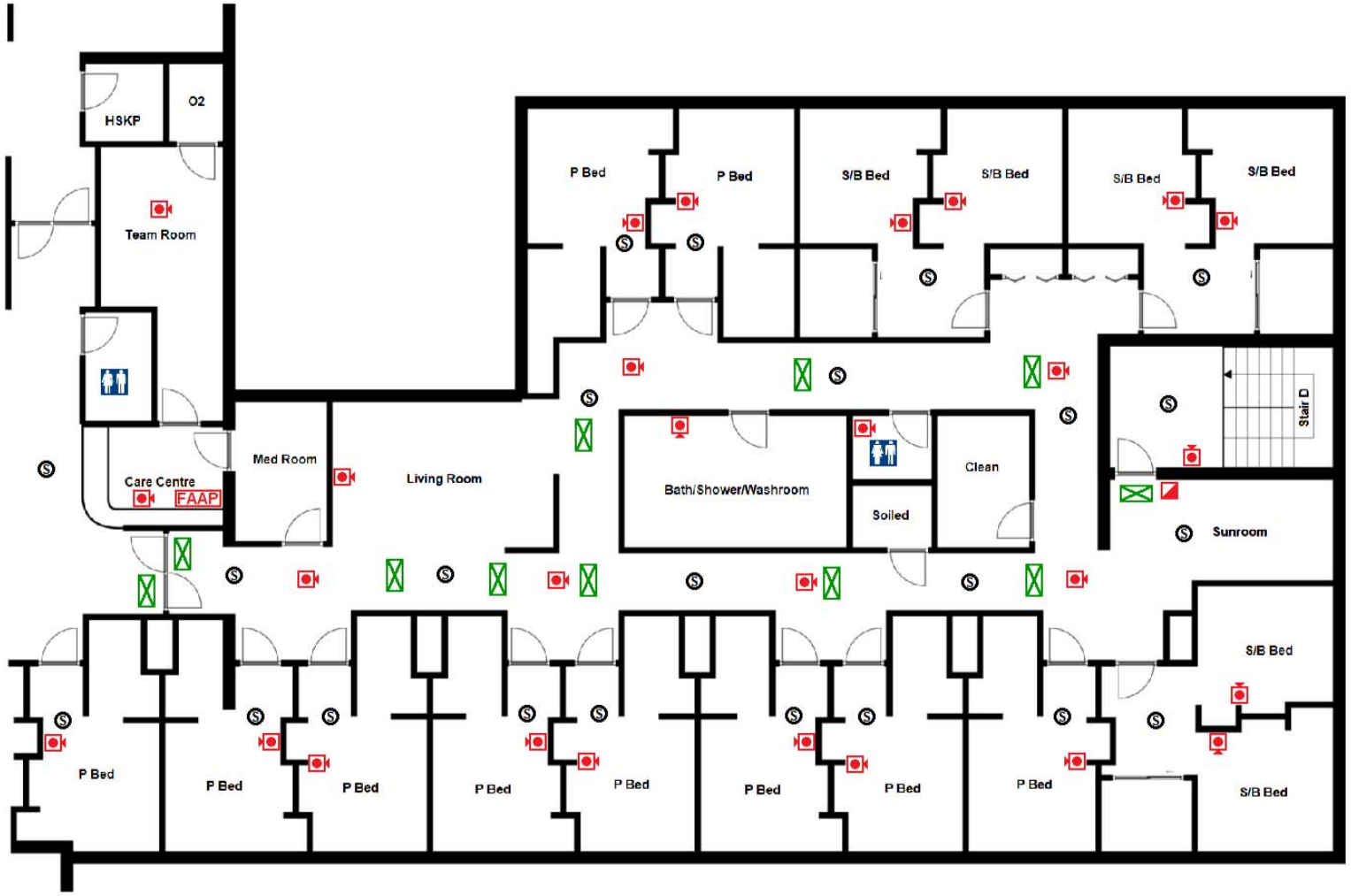
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Wing D (2nd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



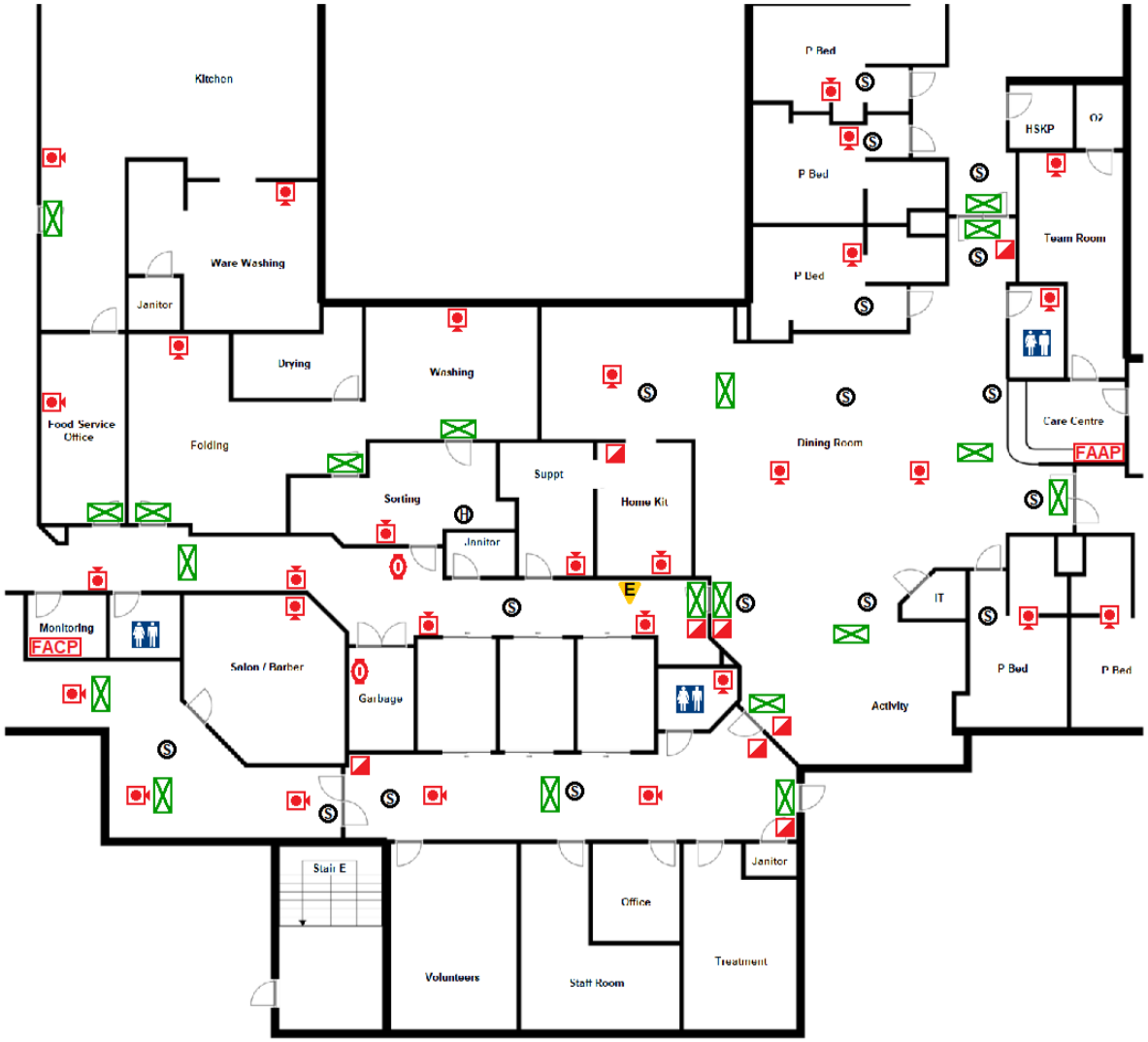
Exit Sign	G	Gas Shutoff		Horn/Strobe	KB	Key Box
Emergency Lighting	E	Electrical Panel		Fire Extinguisher	FSP	Fire Safety Plan
	S	Smoke Detector		Pull Station		Roof Access
Washrooms	H	Heat Detector	FACP	Fire Alarm Control Panel		Sprinkler Valves
W Water Shutoff	MLR	Mag Lock Reset	FAAP	Fire Alarm Annunciator Panel		Fire Department Connection

N

Fire Safety Drawing
Wing D (3rd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



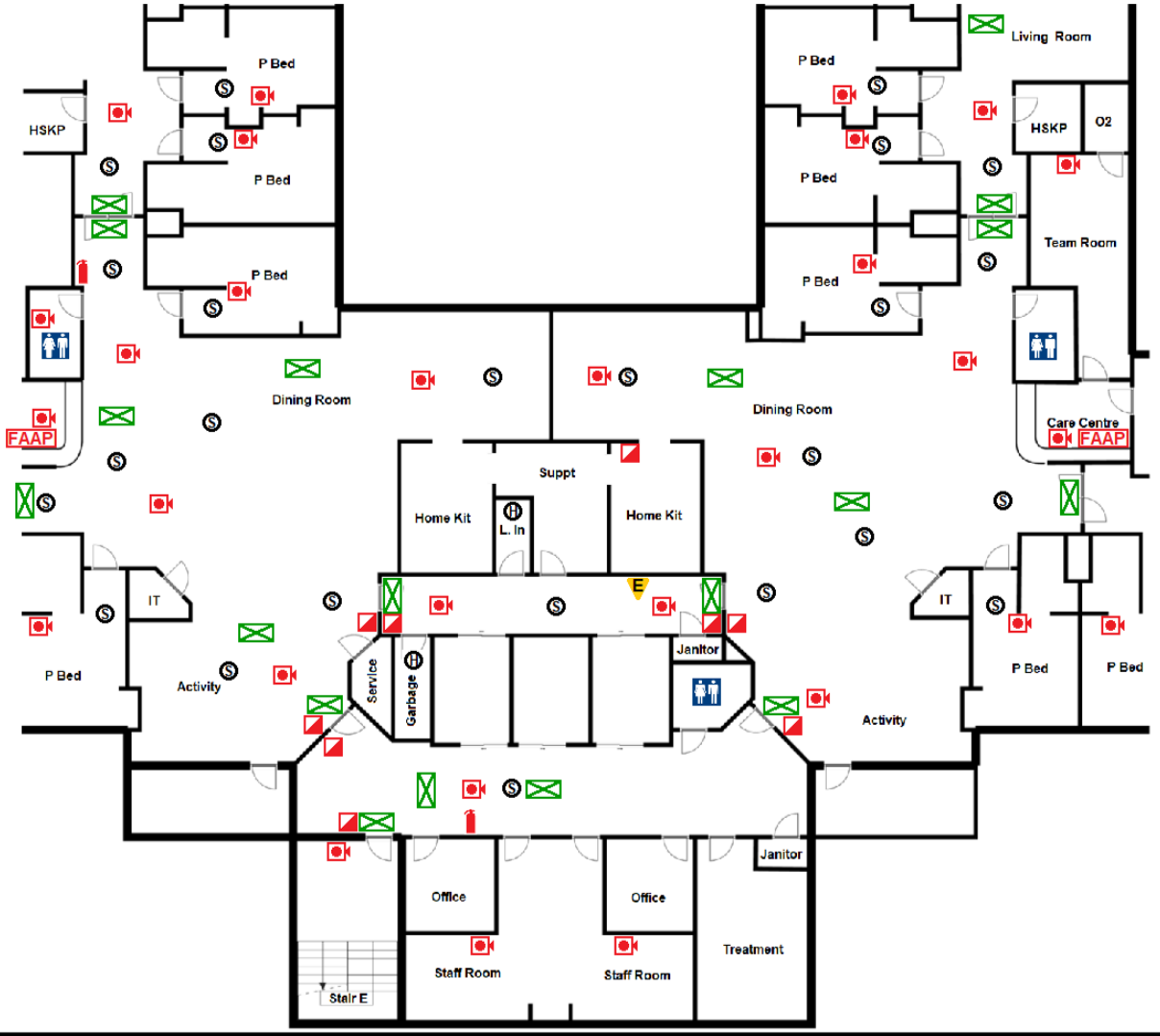
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Smoke Detector	Pull Station	Roof Access
Water Shutoff	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Core (1st Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



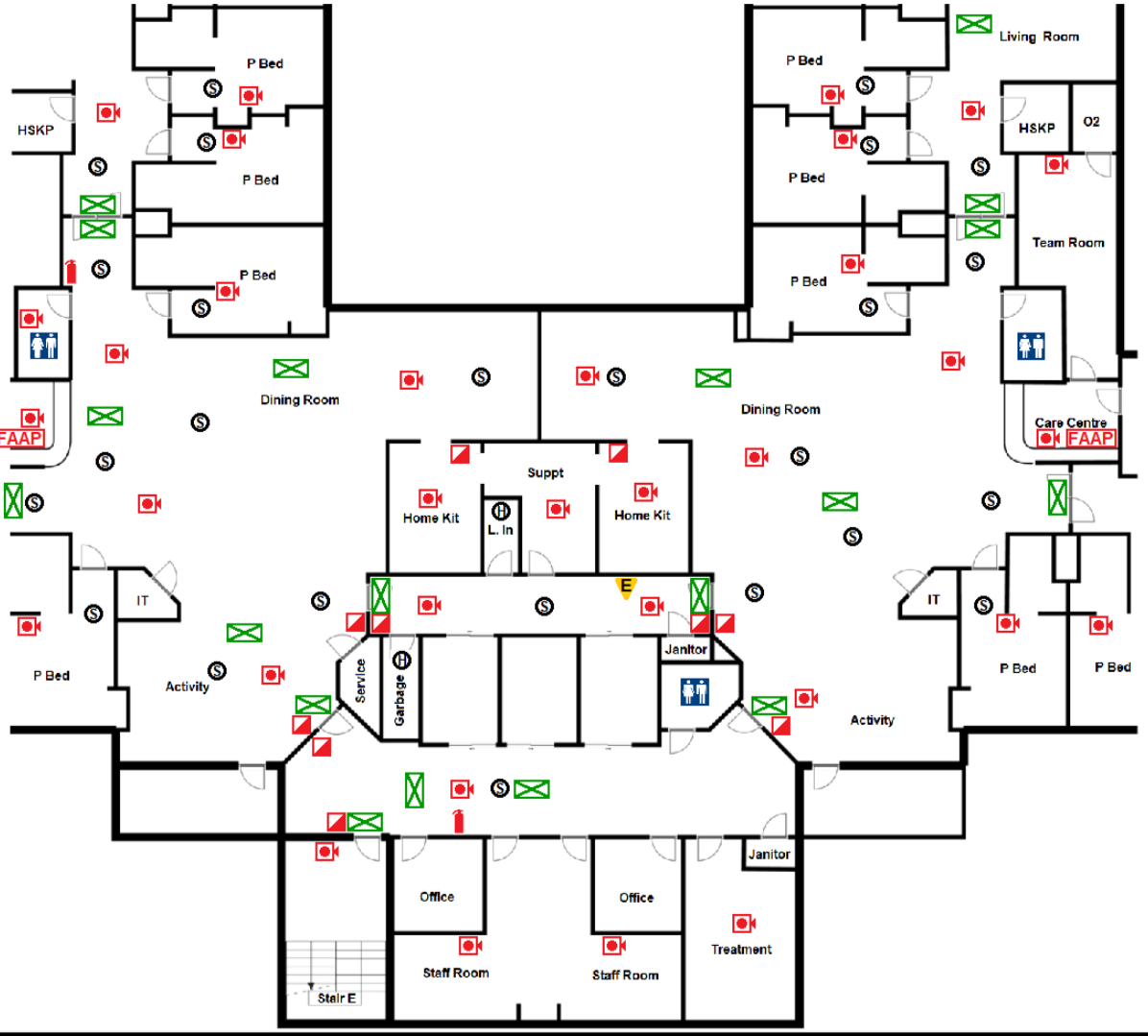
Exit Sign
Emergency Lighting
Washrooms
Water Shutoff
Gas Shutoff
Electrical Panel
Smoke Detector
Heat Detector
MLR Mag Lock Reset
Horn/Strobe
Fire Extinguisher
Pull Station
FACP Fire Alarm Control Panel
FAAP Fire Alarm Annunciator Panel
KB Key Box
FSP Fire Safety Plan
Roof Access
Sprinkler Valves
Fire Department Connection

N

Fire Safety Drawing
Core (2nd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



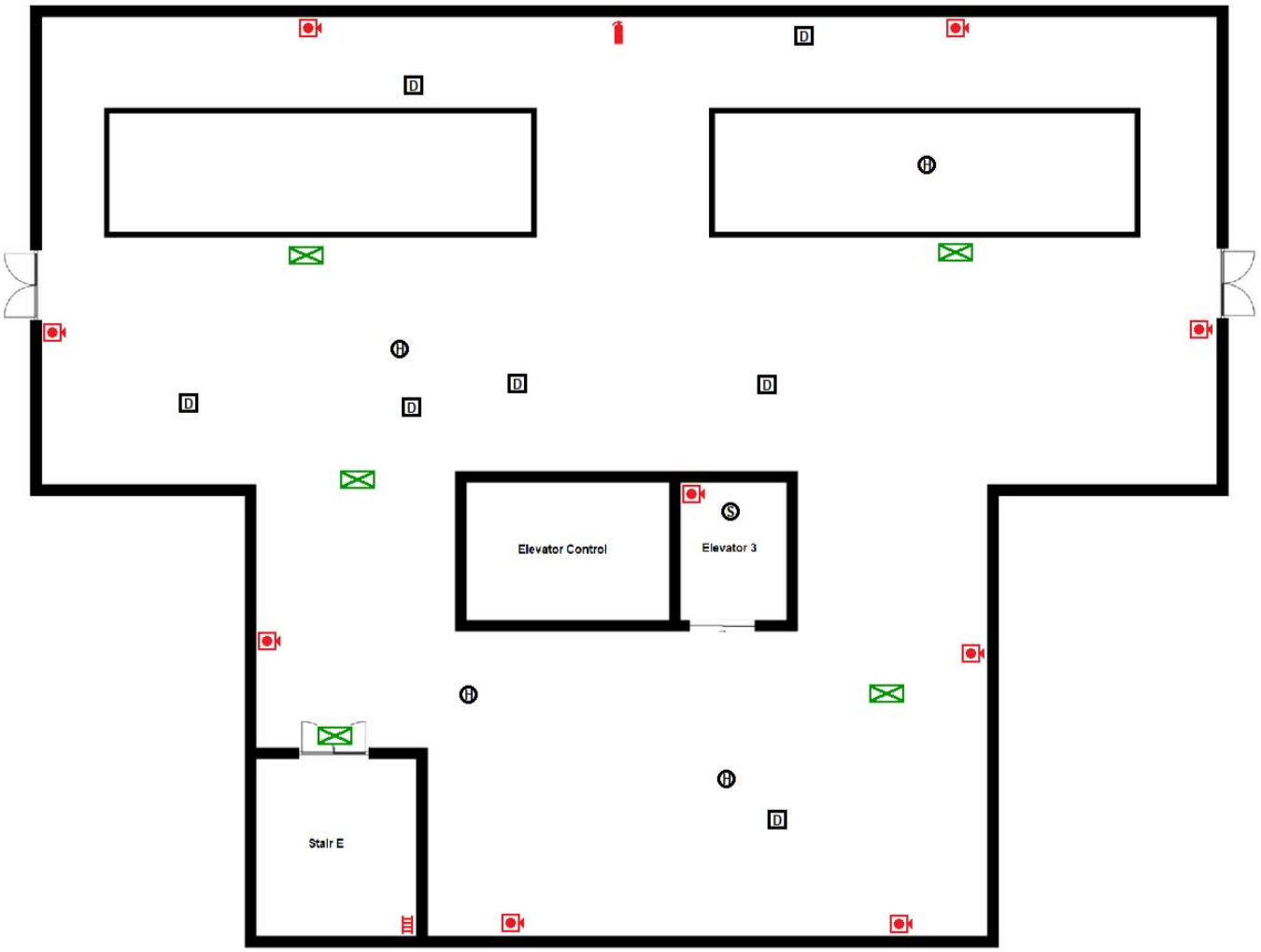
Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
	Smoke Detector	Pull Station	Roof Access
Washrooms	Heat Detector	Fire Alarm Control Panel	Sprinkler Valves
Water Shutoff	Mag Lock Reset	Fire Alarm Annunciator Panel	Fire Department Connection

N

Fire Safety Drawing
Core (3rd Floor)

31 Elden St
Virgil, ON L0S 1T0

NOT TO SCALE



Exit Sign	Gas Shutoff	Horn/Strobe	Key Box
Emergency Lighting	Electrical Panel	Fire Extinguisher	Fire Safety Plan
Washrooms	Duck Detector	Pull Station	Roof Access
Water Shutoff	Smoke Detector	Fire Alarm Control Panel	Sprinkler Valves
	Heat Detector	Fire Alarm Annunciator Panel	Fire Department Connection

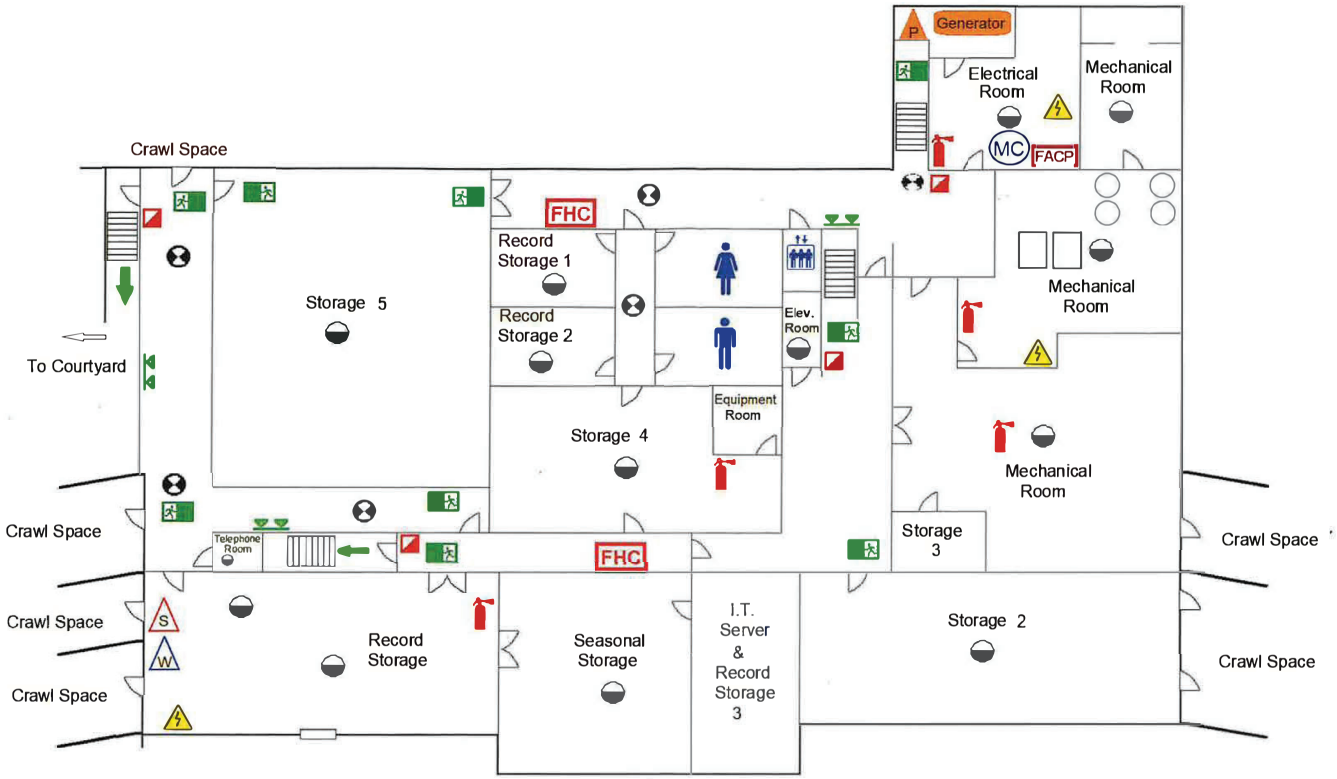
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Fire Safety Drawing
Penthouse

31 Elden St
Virgil, ON L0S 1T0

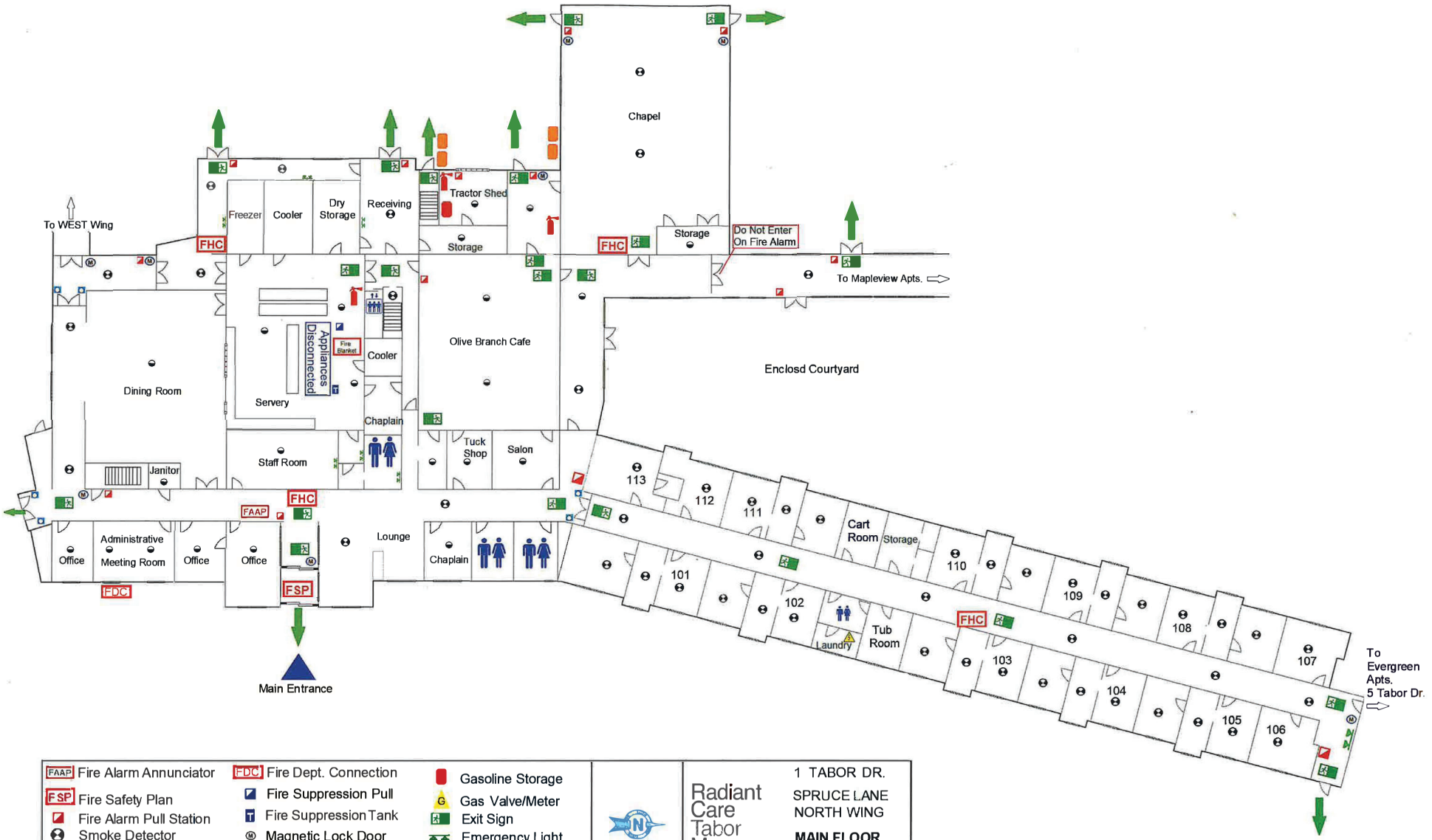
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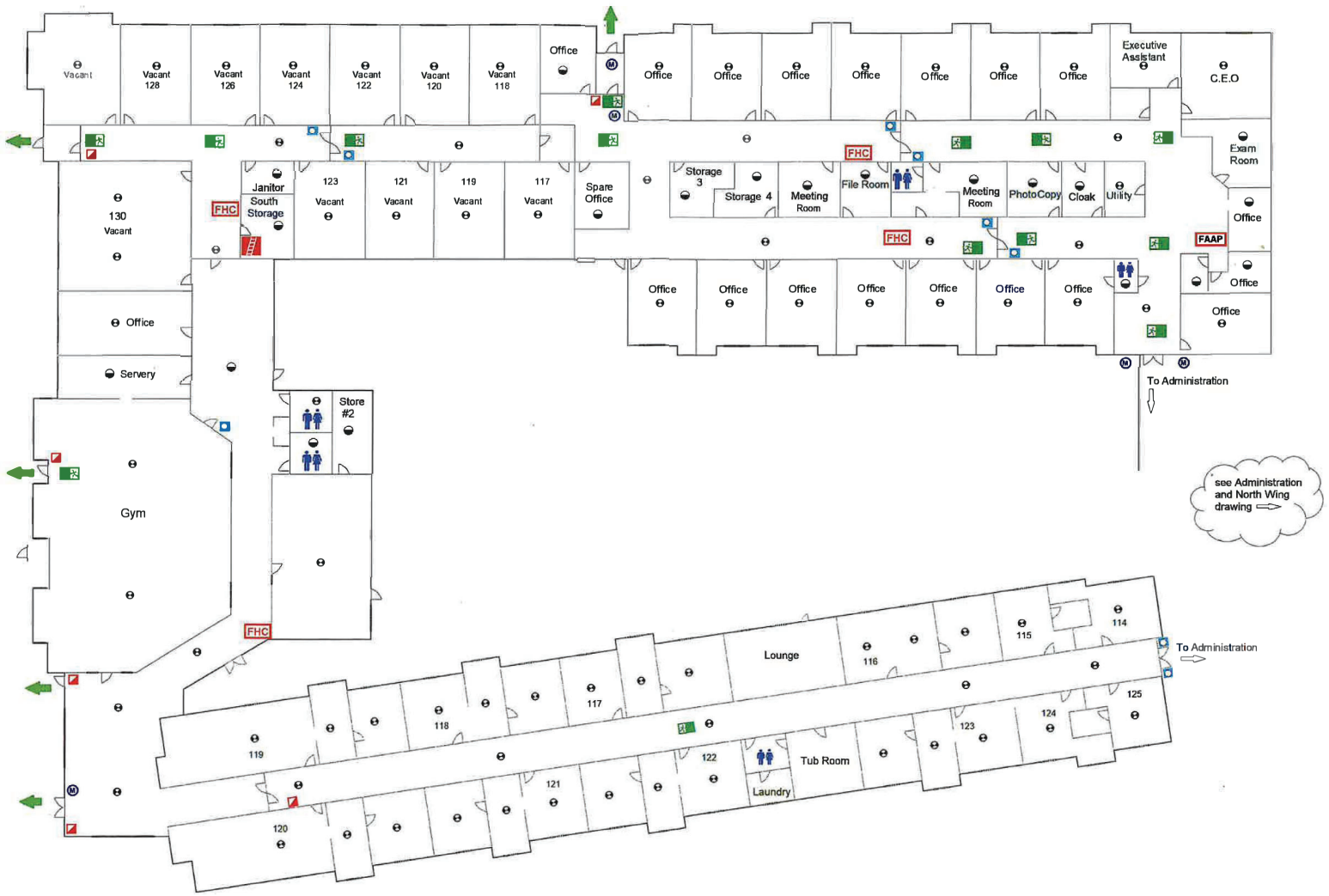
Appendix 10.2 TM Master Search Map

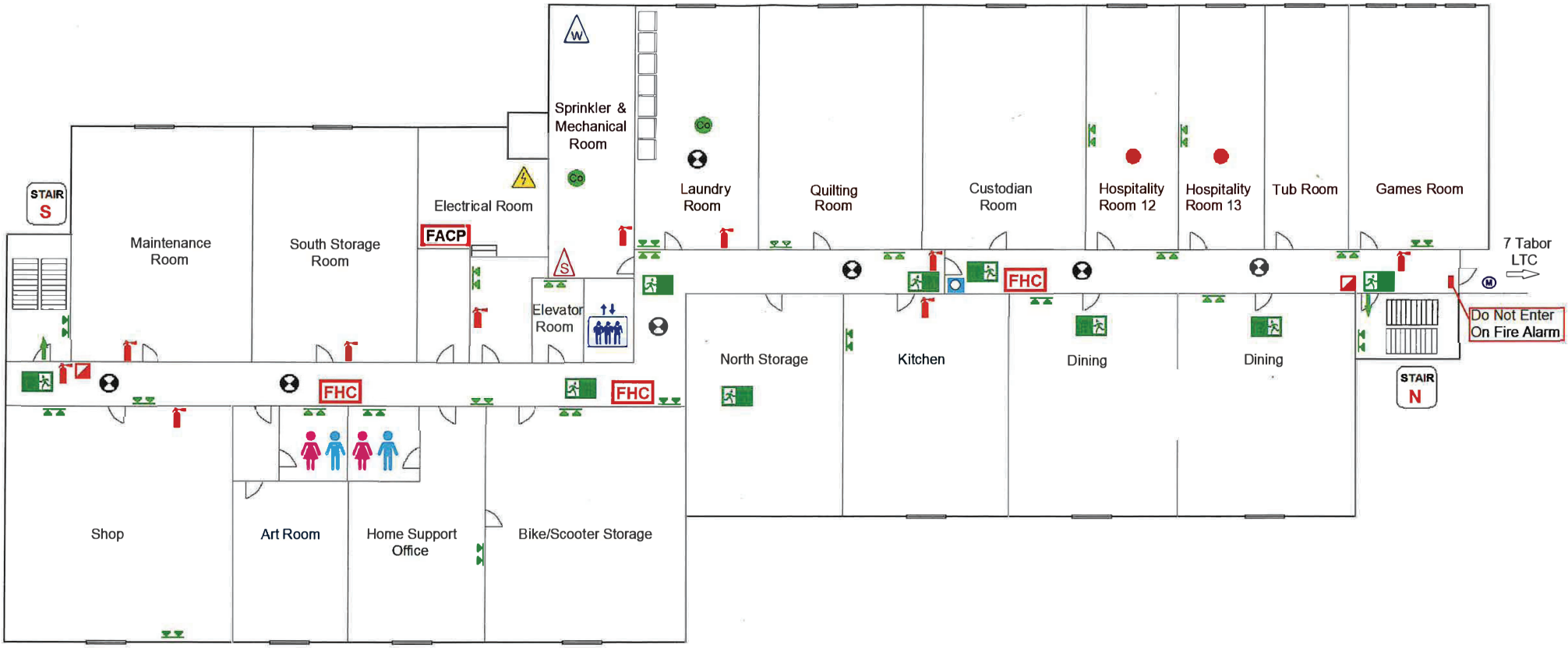


Radiant Care Tabor Manor

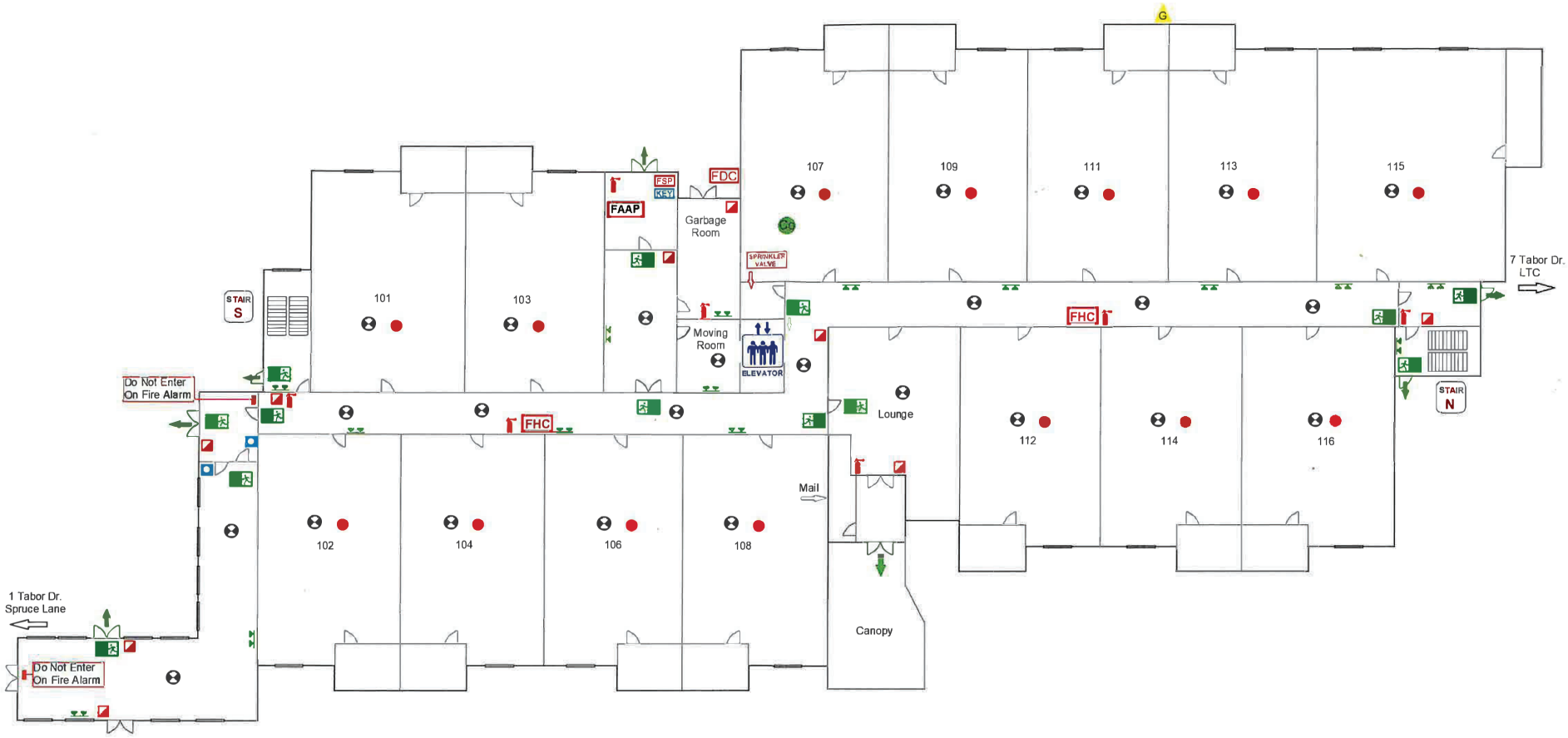
FACP Fire Alarm Annunciator	Heat Detector	MC Mag -Lock Control	N	Radiant Care Tabor Manor
FSP Fire Safety Plan	Sprinkler Valves	Exit Sign		1 TABOR DR. SPRUCE LANE
Fire Alarm Pull Station	Water Valve/Meter	Emergency Light		**BASEMENT FLOOR**
Smoke Detector	Propane Valve	Electrical Panel		Rev.May 2023
FHC Fire Hose Cabinet		Exit		NTS
Fire Extinguisher				


To WEST Wing
Freezer
Cooler
Dry Storage
Receiving
Tractor Shed
Storage
Chapel
Storage
Do Not Enter On Fire Alarm
To Mapleview Apts.
Olive Branch Cafe
Cooler
Appliances Disconnected
Fire Blanket
Servery
Dining Room
Chaplain
Enclosd Courtyard
Tuck Shop
Salon
Staff Room
Janitor
Lounge
Chaplain
Office
Administrative
Meeting Room
Office
Office
Main Entrance
113
112
111
Cart Room
Storage
110
109
108
107
101
102
Laundry
Tub Room
103
104
105
106
To Evergreen Apts. 5 Tabor Dr.
FAAP Fire Alarm Annunciator
FSP Fire Safety Plan
Fire Alarm Pull Station
Smoke Detector
FHC Fire Hose Cabinet
Fire Extinguisher
FDC Fire Dept. Connection
Fire Suppression Pull
Fire Suppression Tank
Magnetic Lock Door
Door Hold-Open Device
Propane Tanks & Storage
Gasoline Storage
Gas Valve/Meter
Exit Sign
Emergency Light
Electrical Panel
Exit
Radiant Care Tabor Manor
1 TABOR DR.
SPRUCE LANE
NORTH WING
MAIN FLOOR
Rev.May 2023
NTS


Vacant
Vacant 128
Vacant 126
Vacant 124
Vacant 122
Vacant 120
Vacant 118
Office
Office
Office
Office
Office
Office
Office
Office
Executive Assistant
C.E.O
Exam Room
Office
Janitor
South Storage
123 Vacant
121 Vacant
119 Vacant
117 Vacant
Spare Office
Storage 3
Storage 4
Meeting Room
File Room
Meeting Room
PhotoCopy
Cloak
Utility
FHC
FAAP
130 Vacant
Office
Servery
Office
Office
Office
Office
Office
Office
Office
Office
Office
Office
To Administration
Store #2
Gym
see Administration and North Wing drawing
Lounge
114
115
116
117
118
119
120
121
122
123
124
125
Tub Room
Laundry
To Administration
FAAP Fire Alarm Annunciator
FSP Fire Safety Plan
Fire Alarm Pull Station
Smoke Detector
FHC Fire Hose Cabinet
Fire Extinguisher
FDC Fire Dept. Connection
Fire Suppression Pull
Fire Suppression Tank
Magnetic Lock Door
Door Hold-Open Device
Propane Tanks & Storage
Gasoline Storage
G Gas Valve/Meter
Exit Sign
Emergency Light
Electrical Panel
Exit
Radiant Care Tabor Manor
1 TABOR DR.
SPRUCE LANE
SOUTH WING
MAIN FLOOR
Rev.May 2023
NTS



FACP Fire Alarm Annunciator	FDC Fire Dept. Connection	Water Valve/Meter		3 TABOR DR.	
Fire Alarm Pull Station	Smoke Alarm	Magnetic Lock Door		Radiant Care Tabor Manor	MAPLEVIEW APTS.
Smoke Detector	Co Alarm	Exit Sign	N		**BASEMENT**
FHC Fire Hose Cabinet	Sprinkler Valve	Emergency Light			March 2023
Fire Extinguisher	Door Hold-Open Device	Electrical Panel			NTS
		Exit			



FAAP Fire Alarm Annunciator	Fire Extinguisher	Smoke Alarm	
FSP Fire Safety Plan	FDC Fire Dept. Connection	G Gas Valve/Meter	
Fire Alarm Pull Station	CO Co Alarm	Exit Sign	
Smoke Detector	Door Hold-Open Device	Emergency Light	
FHC Fire Hose Cabinet		Exit	

Radiant Care Tabor Manor

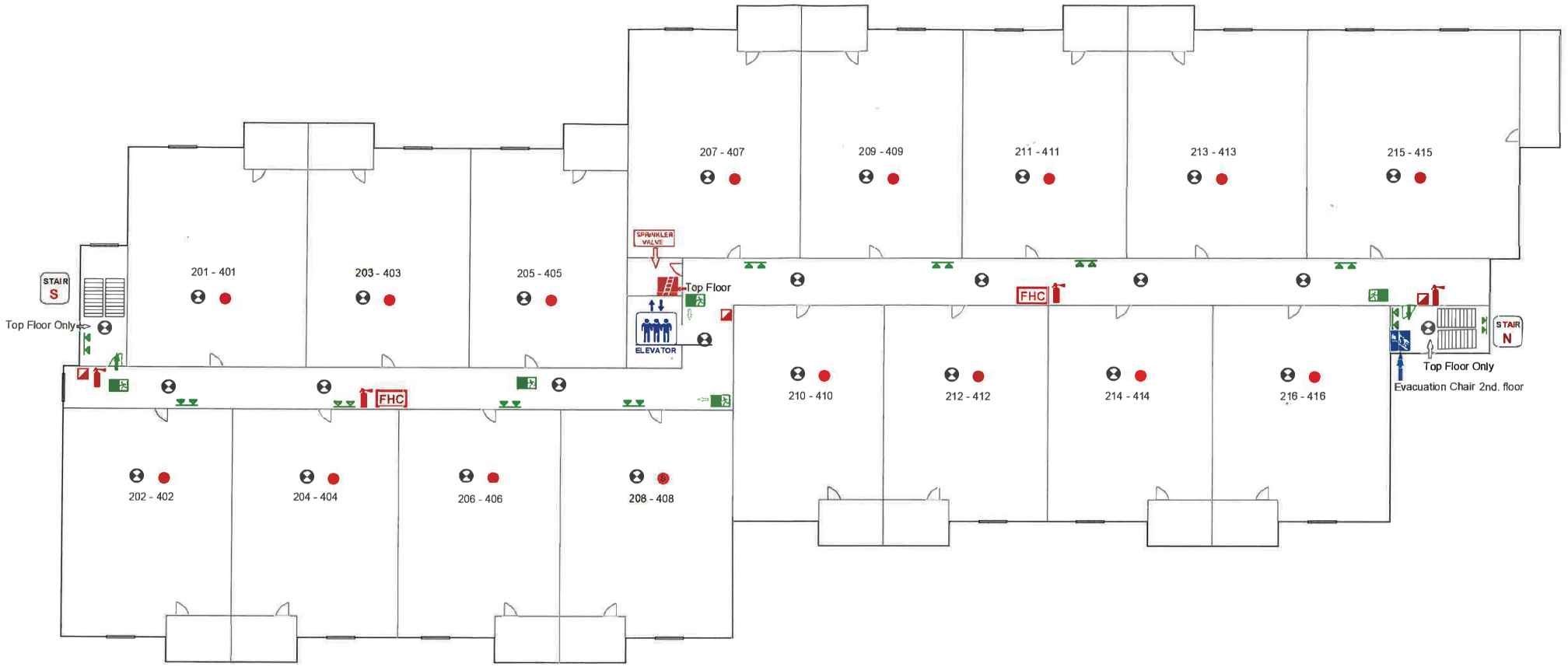
3 TABOR DR.

MAPLEVIEW APTS.

FIRST FLOOR

March 2023

NTS



Fire Alarm Pull Station	Fire Extinguisher	Exit Sign
Smoke Detector	Smoke Alarm	Emergency Light
FHC Fire Hose Cabinet	Roof Access	Exit

Radiant Care Tabor Manor

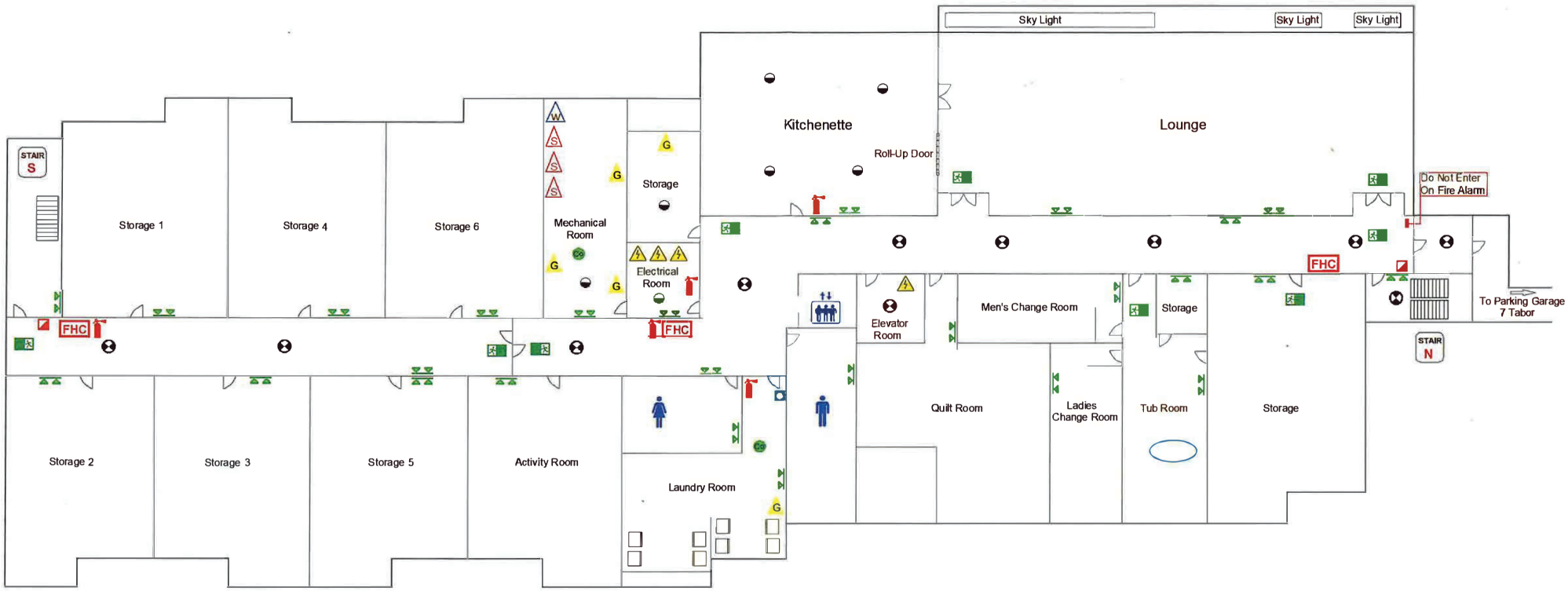
3 TABOR DR.

MAPLEVIEW APTS.

FLOORS 2 - 4

March 2023

NTS



Door Hold-Open Device

Fire Alarm Pull Station	Heat Detector	Gas Valve/Meter	
Smoke Detector	Co Alarm	Exit Sign	
Fire Extinguisher	Sprinkler Valve	Emergency Light	
FHC Fire Hose Cabinet	Water Valve/Meter	Electrical Panel	
		Exit	

Radiant Care Tabor Manor

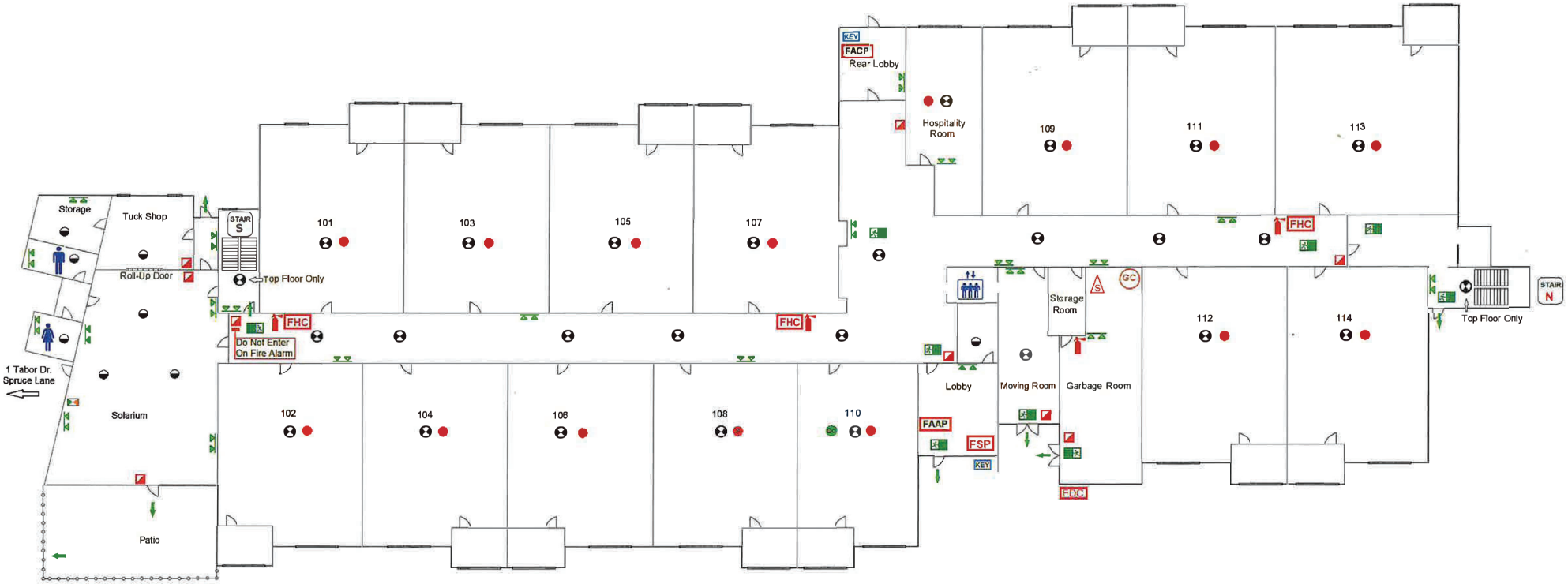
5 TABOR DR.

EVERGREEN APTS.

BASEMENT

October 2023

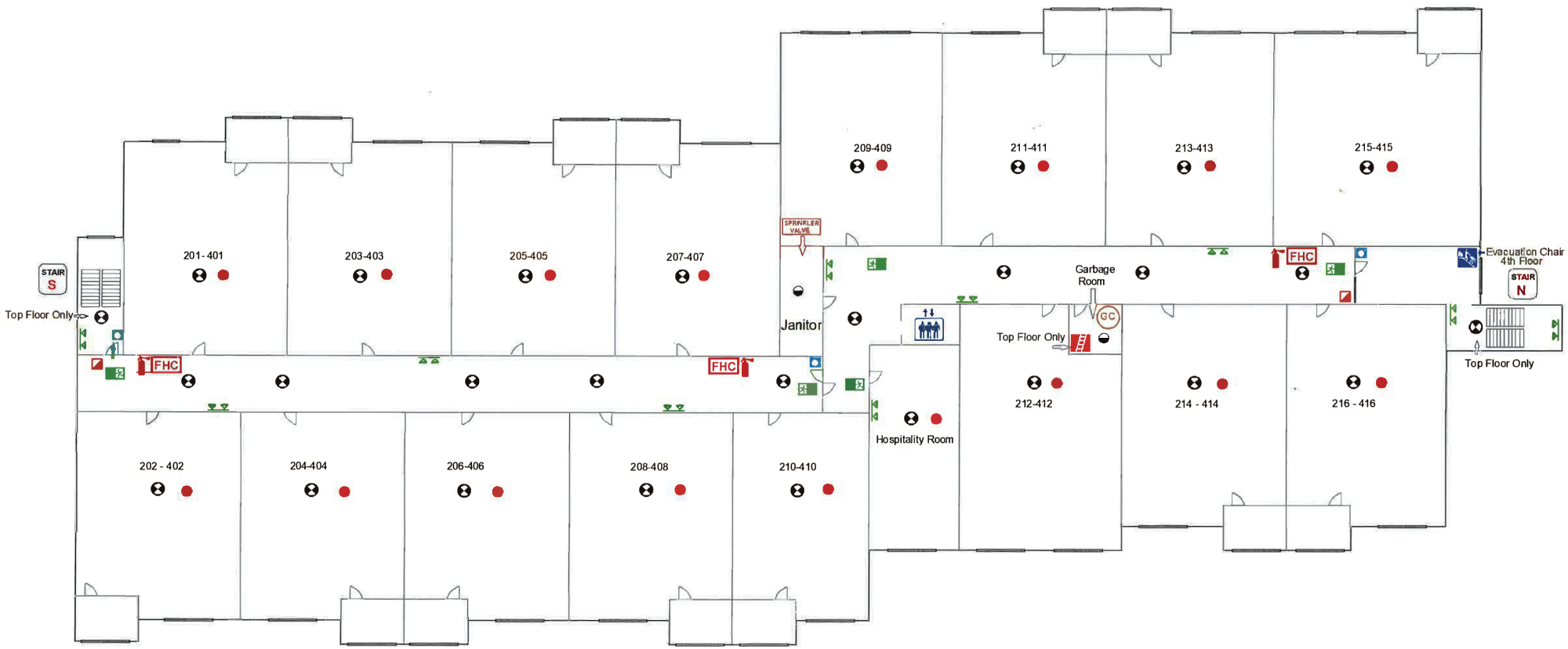
NTS



FACP Fire Alarm Control Panel	FDC Fire Dept. Connection	Sprinkler Valve	
FAAP Fire Alarm Annunciator	Smoke Detector	Gas Valve/Meter	
FSP Fire Safety Plan	Heat Detector	Exit Sign	
Fire Alarm Pull Station	Smoke Alarm	Emergency Light	
FHC Fire Hose Cabinet	Door Hold-Open Device	GC Garbage Chute	
Fire Extinguisher	Duct-Smoke Detector	Electrical Panel	
	Co Alarm	Exit	

Radiant Care Tabor Manor

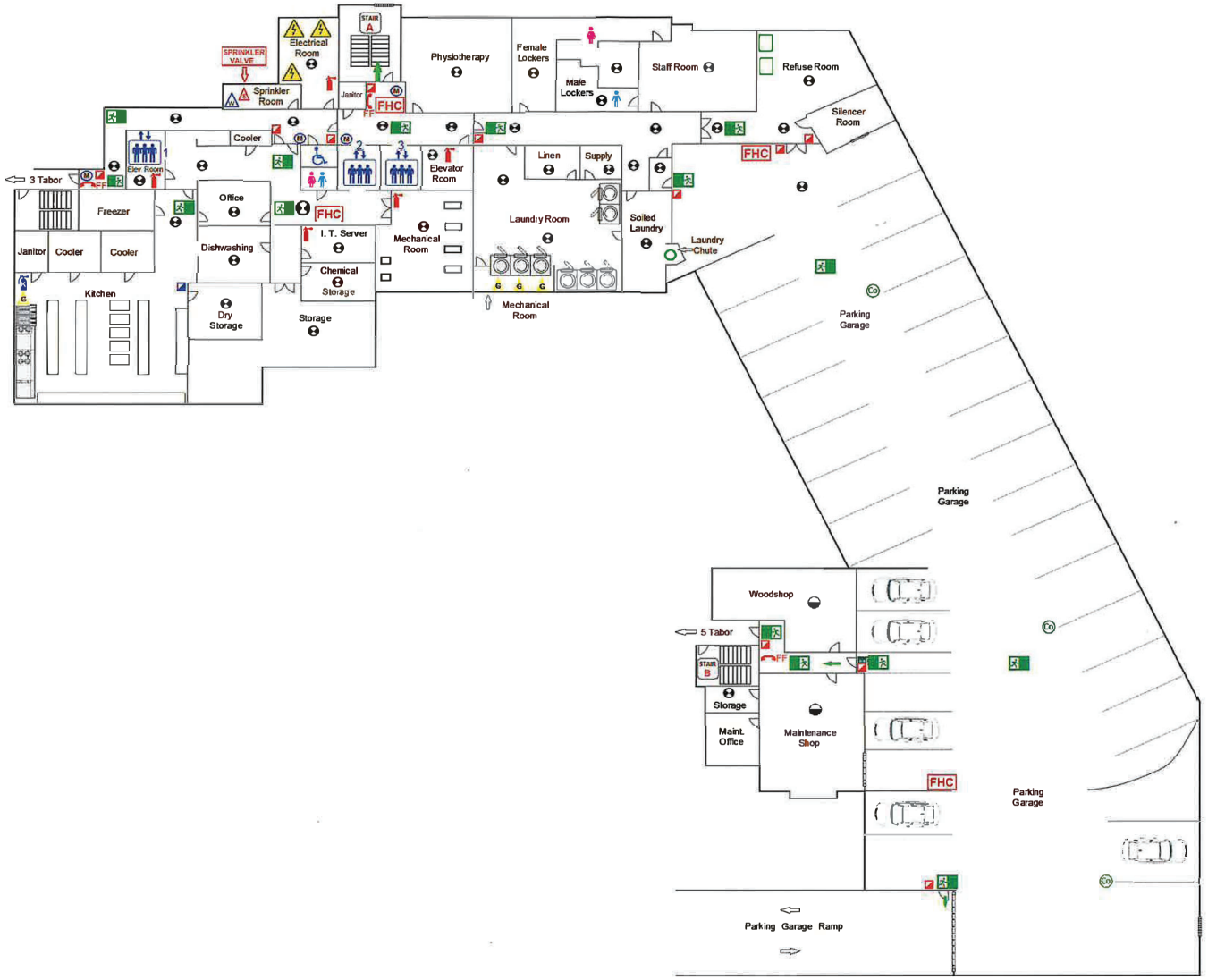
5 TABOR DR.
EVERGREEN APTS.
FIRST FLOOR
October 2023
NTS



Fire Alarm Pull Station	Smoke Alarm	Exit Sign
Smoke Detector	Heat Detector	Emergency Light
Fire Extinguisher	Door Hold-Open Device	Exit
FHC Fire Hose Cabinet	Roof Access	GC Garbage Chute

Radiant Care Tabor Manor

5 TABOR DR.
EVERGREEN APTS.
FLOORS 2 - 4
October 2023
NTS



FAAP Fire Alarm Annunciator
Fire Alarm Pull Station
Smoke Detector
FHC Fire Hose Cabinet
Fire Extinguisher
Exhaust Vent

Kitchen Fire Pull Stn.
Magnetic Lock Door
Door Hold-Open Device
Heat Detector
FF FireFighter Telephone
G Gas Valve/Meter

Water Valve/Meter
Sprinkler Valve
Exit Sign
Emergency Light
Electrical Panel
Exit

N

Radiant Care Tabor Manor

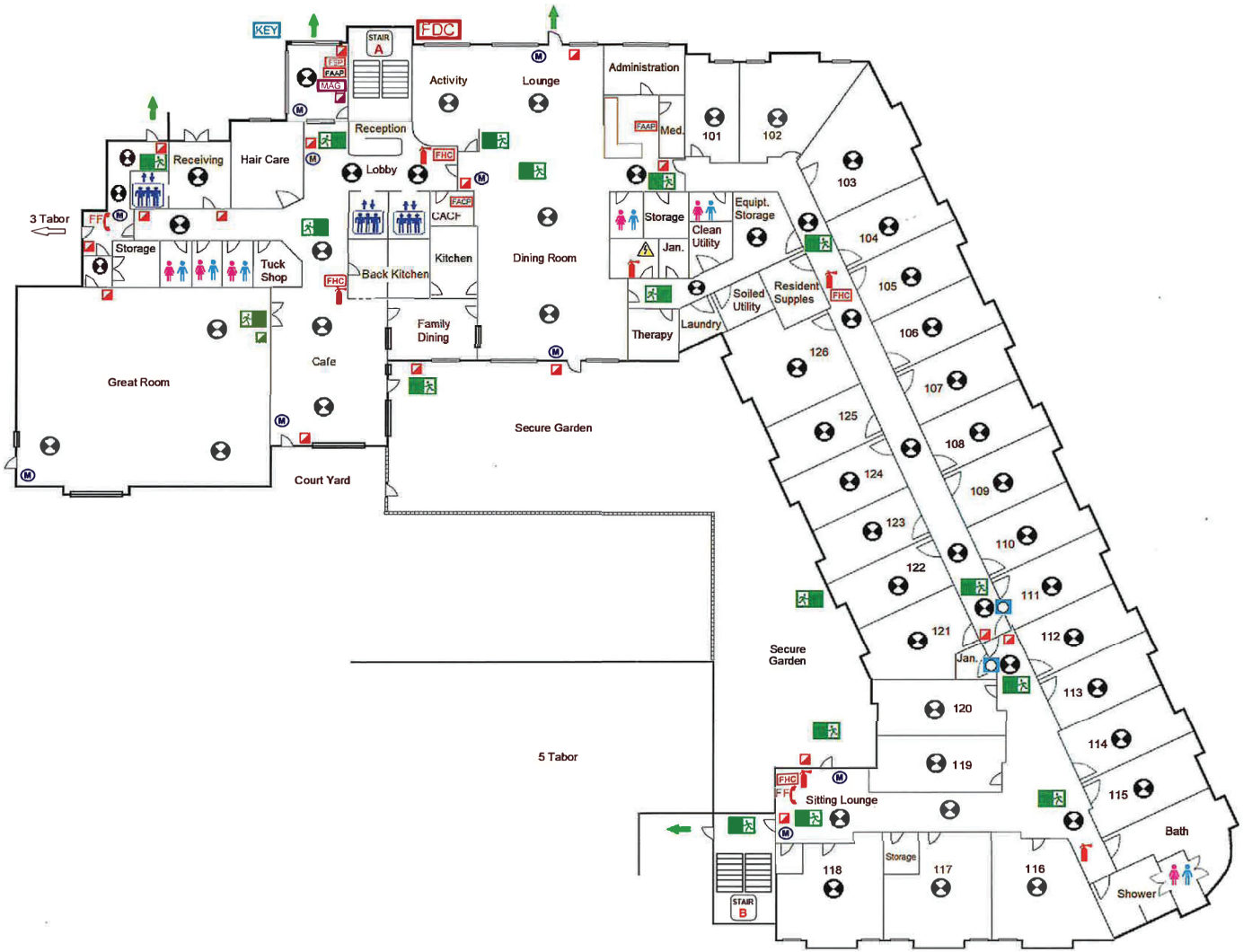
7 TABOR DR.

LONGTERM CARE

BASEMENT & PARKING GARAGE

November 2023

NTS



FACP Fire Alarm Control Panel	FDC Fire Dept. Connection	FF FireFighter Telephone	
FAAP Fire Alarm Annunciator	Fire Extinguisher	Exit Sign	
FSP Fire Safety Plan	MAG Mag Lock Control	Emergency Light	
Fire Alarm Pull Station	Magnetic Lock Door	Electrical Panel	
Smoke Detector	Door Hold-Open Device	Exit	
FHC Fire Hose Cabinet	Heat Detector		

Radiant Care Tabor Manor

7 TABOR DR.

LONGTERM CARE

FIRST FLOOR

November 2023

NTS



FAAP Fire Alarm Annunciator	Fire Extinguisher	FF FireFighter Telephone	
Fire Alarm Pull Station	Magnetic Lock Door	Exit Sign	
Smoke Detector	Door Hold-Open Device	Emergency Light	
FHC Fire Hose Cabinet	Heat Detector	Electrical Panel	
	Laundry Chute	Exit	

N

Radiant Care Tabor Manor

7 TABOR DR.

LONGTERM CARE

SECOND FLOOR

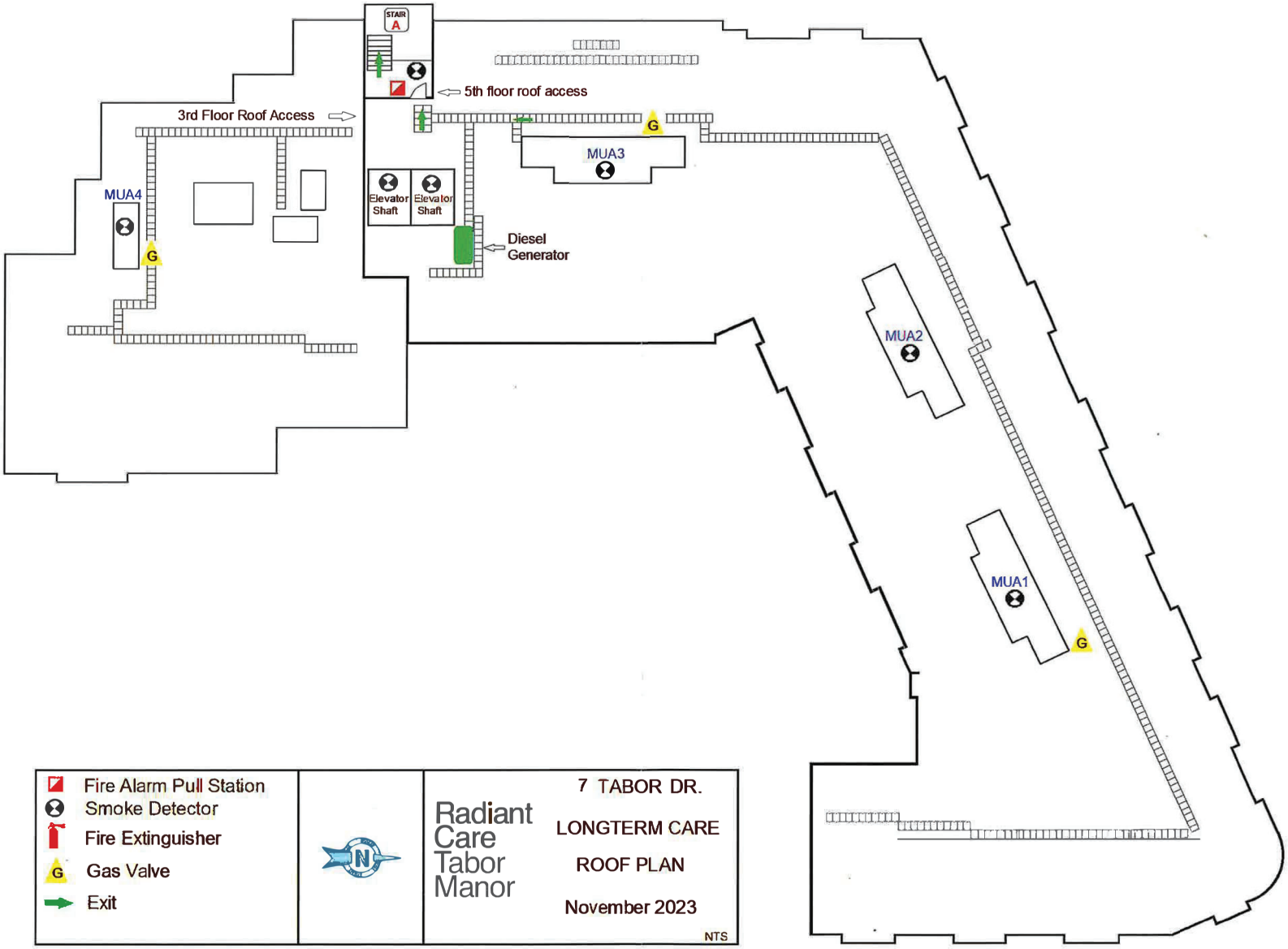
November 2023

NTS



FAAP Fire Alarm Annunciator	Magnetic Lock Door	Exit Sign	7 TABOR DR.
Fire Alarm Pull Station	Door Hold-Open Device	Emergency Light	LONGTERM CARE
Smoke Detector	Firefighter Telephone	Electrical Panel	**3rd. & 4th FLOOR**
FHC Fire Hose Cabinet	Laundry Chute	Exit	November 2023
Fire Extinguisher			NTS

Radiant Care Tabor Manor


STAIR A
5th floor roof access
3rd Floor Roof Access
G
MUA3
MUA4
Elevator Shaft
Elevator Shaft
Diesel Generator
G
MUA2
MUA1
G
Fire Alarm Pull Station
Smoke Detector
Fire Extinguisher
G Gas Valve
Exit
N
Radiant Care Tabor Manor
7 TABOR DR.
LONGTERM CARE
ROOF PLAN
November 2023
NTS

SECTION 5

Niagara Long-Term Care Facilities
Collaborative Emergency Shelter Plan

Niagara Long-Term Care Home Collaborative Emergency Shelter Plan

Expiration: December 31, 2026

Last Update: June 23, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

It is expected that the facility asking for shelter will provide the appropriate ratio of staff to accompany their residents to the emergency shelter.

Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Albright Manor**
Address	5050 Hillside Drive Lincoln, ON L3J 2A7
Telephone Number	905-563-8252
Fax Number	905-563-5223
Person Completing Form	Joanne Cartmer
E-mail	jcartmer@albrightcentre.ca

# of square feet of shelter available	900
# of residents you could accommodate	25
Can you provide food for those you're sheltering?	yes
Can you provide beds with mattresses?	no
Can you provide bathrooms?	Public bathrooms

Emergency Contact Name (Primary)	Kirk Mino
Position	Building Manager
Primary Telephone Number	905-563-8252 extension 130
Alternate Telephone Number	905-774-4601

Secondary Contact Name	Saad Akhter
Position	Chief Executive Officer
Primary Telephone Number	905-563-8252 extension 128
Alternate Telephone Number	647-564-4925

Other Pertinent Information: n/a

Date Received: June 9, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**D.H. Rapelje Lodge**
Address	277 Plymouth Rd. Welland, ON, L3B 6E3
Telephone Number	905 714-7428
Fax Number	905 714-7423
Person Completing Form	Emily Sforza
E-mail	Emily.Sfora@niagararegion.ca

# of square feet of shelter available	600
# of residents you could accommodate	8
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Mattresses yes - 8
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Emily Sforza
Position	Administrator
Primary Telephone Number	905 714-7428 X. 4201
Alternate Telephone Number	289 969-0546
After Hours – Standby Manager	**289 968-1679**

Secondary Contact Name	Nora Sheppard
Position	DRC
Primary Telephone Number	905 714-7428 X 4230
Alternate Telephone Number	

Other Pertinent Information: n/a

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Deer Park Villa**
Address	150 Central Ave Grimsby ON L3M 4Z3
Telephone Number	905-945-4164
Fax Number	905-945-1239
Person Completing Form	Ada DiFlavio
E-mail	Ada.diflavio@niagararegion.ca

# of square feet of shelter available	800 square feet
# of residents you could accommodate	4
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Ada DiFlavio
Position	Administrator
Primary Telephone Number	905-401-8176 (cell)
Alternate Telephone Number	

Secondary Contact Name	Karlene Petrucci
Position	Director of Resident Care
Primary Telephone Number	289-969-4811
Alternate Telephone Number	

Other Pertinent Information: n/a

Date Received: June 9, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Extendicare St. Catharines**
Address	283 Pelham Road St. Catharines ON
Telephone Number	905-688-3311
Fax Number	905-688-5774
Person Completing Form	Helen VanDyk
E-mail	Helen.Vandyk@extendicare.com

# of square feet of shelter available	Approx. 1,000 square feet in activity lounge and Gardenview Room on main floor
# of residents you could accommodate	2
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	No / Mattresses (2)
Can you provide bathrooms?	2

Emergency Contact Name (Primary)	Helen Vandyk
Position	Executive Director
Primary Telephone Number	905-688-3311 ext. 112
Alternate Telephone Number	289-228-6792

Secondary Contact Name	Kathleen Boisvert
Position	Support Services Manager
Primary Telephone Number	905-688-3311 ext. 133 (w)
Alternate Telephone Number	905-650-3627

Other Pertinent Information: n/a

Date Received: June 10, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Garden City Manor**
Address	168 Scott Street St. Catharines ON
Telephone Number	905-934-3321
Fax Number	905-934-9011
Person Completing Form	Lisa Burton
E-mail	lburton@southbridgecare.com

# of square feet of shelter available	
# of residents you could accommodate	25
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	No
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Lisa Burton
Position	Executive Director
Primary Telephone Number	905-934-3321 ext. 202
Alternate Telephone Number	289-407-9256

Secondary Contact Name	Jay Kostoff
Position	Director of Care
Primary Telephone Number	905-934-3321 ext. 203
Alternate Telephone Number	289-241-8630

Other Pertinent Information: n/a

Date Received: June 16, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Gilmore Lodge**
Address	60 King Street Fort Erie, ON L2A 0G6
Telephone Number	289-320-8239
Fax Number	905-991-0044
Person Completing Form	Sandhya Marock
E-mail	Sandhya.Marock@niagararegion.ca

# of square feet of shelter available	2,000
# of residents you could accommodate	10
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes (10 beds and 10 mattresses)
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Debbie Marks
Position	Administrator
Primary Telephone Number	289-320-8239 ext. 8303
Alternate Telephone Number	289-241-0798

Secondary Contact Name	On-Call Manager
Position	Varies
Primary Telephone Number	On-Call Manager Phone: 289-929-0592
Alternate Telephone Number	

Other Pertinent Information: n/a

Date Received: June 2, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Heidehof**
Address	600 Lake Street St. Catharines
Telephone Number	905-935-3344
Fax Number	905-935-0081
Person Completing Form	Elena Caddis
E-mail	ecaddis@heidehof.com

# of square feet of shelter available	
# of residents you could accommodate	3
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Elena Caddis
Position	CEO
Primary Telephone Number	905-932-1216 (cell)
Alternate Telephone Number	

Secondary Contact Name	Liz Klassen
Position	DOC
Primary Telephone Number	905-988-3106
Alternate Telephone Number	

Other Pertinent Information:
- We do have an auditorium that could shelter up to 100 residents for a few hours

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Maple Park Lodge**
Address	6 Hagey Ave. Fort Erie ON L2A 1W3
Telephone Number	905-994-8330
Fax Number	905-994-8628
Person Completing Form	Sandeep Kaur (Bassan)
E-mail	sbassan@conmhedhealth.com

# of square feet of shelter available	700 Approx.
# of residents you could accommodate	10
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	No
Can you provide bathrooms?	2

Emergency Contact Name (Primary)	Sandeep Kaur (Bassan)
Position	Administrator
Primary Telephone Number	*Please use email – checked frequently*
Alternate Telephone Number	Email – sbassan@conmhedhealth.com

Secondary Contact Name	Rita Vasquez
Position	Director Of Care
Primary Telephone Number	
Alternate Telephone Number	Email – rvasquez@conmedhealth.com

Other Pertinent Information: n/a

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Millennium Trail Manor**
Address	6861 Oakwood Drive Niagara Falls ON L2S 2X4
Telephone Number	905-356-5005
Fax Number	905-356-6806
Person Completing Form	Holly Rogers
E-mail	hrogers@conmedhealth.com

# of square feet of shelter available	200
# of residents you could accommodate	3
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Holly Rogers
Position	Administrator
Primary Telephone Number	905-356-5005 x. 202
Alternate Telephone Number	289-686-1590

Secondary Contact Name	Liyara Thomas
Position	DOC
Primary Telephone Number	905-356-5005 x.204
Alternate Telephone Number	226-201-1966

Other Pertinent Information: n/a

Date Received: May 29, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Niagara Health Welland Site ECU and ILTC**
Address	65 Third St Welland L3B 4W6
Telephone Number	905-378-4647 Ext. 33506 Charge Nurse
Fax Number	905-714-7630
Person Completing Form	Kerry Abbott
E-mail	kerry.abbott@niagarahealth.on.ca

# of square feet of shelter available	200 square feet
# of residents you could accommodate	15
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	5 mattresses
Can you provide bathrooms?	Communal bathrooms-shared with residents

Emergency Contact Name (Primary)	Kerry Abbott
Position	Administrator
Primary Telephone Number	905-378-4647 ext. 33501
Alternate Telephone Number	905-321-3609

Secondary Contact Name	Shirley Fleming
Position	Director of Care
Primary Telephone Number	905-378-4647 ext. 33503
Alternate Telephone Number	905-928-9400

Other Pertinent Information: n/a

Date Received: May 29, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Niagara Long Term Care Residence**
Address	120 Wellington Street Niagara-on-the-Lake, ON
Telephone Number	905-468-2111
Fax Number	905-468-4463
Person Completing Form	Chris Poos
E-mail	Chris.poos@niagaraltc.ca

# of square feet of shelter available	1,100 square feet
# of residents you could accommodate	2
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	No
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Chris Poos
Position	Executive Director
Primary Telephone Number	905-468-2111 ext 224
Alternate Telephone Number	905-351-2433

Secondary Contact Name	Rebecca McGarr
Position	Director of Care
Primary Telephone Number	905-468-2111 ext 214
Alternate Telephone Number	

Other Pertinent Information: n/a

Date Received: June 17, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Northland Pointe**
Address	2 Fielden Ave Port Colborne, ON L3K 6G4
Telephone Number	905-835-9335
Fax Number	905-835-6518
Person Completing Form	Gail Gill
E-mail	gail.gill@niagararegion.ca

# of square feet of shelter available	
# of residents you could accommodate	10
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	2 communal

Emergency Contact Name (Primary)	Gail Gill – gail.gill@niagararegion.ca
Position	Administrator
Primary Telephone Number	905-835-9335 ext. 4701
Alternate Telephone Number	Manager On Call – 289-968-2449

Secondary Contact Name	Ashley Baker – ashley.baker@niagararegion.ca
Position	Director of Resident Care
Primary Telephone Number	905-835-9335 ext. 4730
Alternate Telephone Number	Manager On Call – 289-968-2449

Other Pertinent Information: n/a

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

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Facility Name	**Oakwood Park Lodge**
Address	
Telephone Number	
Fax Number	
Person Completing Form	Stephen Moran – Administrator
E-mail	smoran@conmedhealth.com

# of square feet of shelter available	
# of residents you could accommodate	
Can you provide food for those you're sheltering?	
Can you provide beds with mattresses?	
Can you provide bathrooms?	

Emergency Contact Name (Primary)	
Position	
Primary Telephone Number	
Alternate Telephone Number	

Secondary Contact Name	
Position	
Primary Telephone Number	
Alternate Telephone Number	

Other Pertinent Information: **Oakwood is not able to participate at this time as they are under construction and do not have the capacity to take anyone in. However, they will participate again once the new facility is complete in early 2026.**

Date Received: June 16, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Radiant Care Pleasant Manor**
Address	15 Elden Street, P.O. Box 500 Virgil, ON L0S 1T0
Telephone Number	905-468-1111
Fax Number	905-468-4384
Person Completing Form	Tim Siemens
E-mail	tims@radiantcare.net

# of square feet of shelter available	1,400 sq. ft.
# of residents you could accommodate	15
Can you provide food for those you're sheltering?	yes
Can you provide beds with mattresses?	no; mattresses only
Can you provide bathrooms?	1 WC accessible + 1 regular

Emergency Contact Name (Primary)	Tim Siemens
Position	Chief Executive Officer
Primary Telephone Number	905-327-8601
Alternate Telephone Number	905-468-1111, ext. 1052

Secondary Contact Name	Fola Akano
Position	Senior Administrator Long-Term Care
Primary Telephone Number	289-668-8934
Alternate Telephone Number	905-468-1111, ext. 1054

Other Pertinent Information: n/a

Date Received: June 10, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Radiant Care Tabor Manor**
Address	7 Tabor Drive St. Catharines, ON L2N 1V9
Telephone Number	905-934-2548
Fax Number	905-934-6467
Person Completing Form	Tim Siemens
E-mail	tims@radiantcare.net

# of square feet of shelter available	3,000 sq. ft.
# of residents you could accommodate	30
Can you provide food for those you're sheltering?	yes
Can you provide beds with mattresses?	no; mattresses only
Can you provide bathrooms?	3 WC accessible

Emergency Contact Name (Primary)	Tim Siemens
Position	Chief Executive Officer
Primary Telephone Number	905-327-8601
Alternate Telephone Number	905-934-2548, ext. 1052

Secondary Contact Name	Fola Akano
Position	Senior Administrator Long-Term Care
Primary Telephone Number	289-668-8934
Alternate Telephone Number	905-934-2548, ext. 1054

Other Pertinent Information: n/a

Date Received: June 10, 2025

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Royal Rose Place**
Address	635 Prince Charles Dr. North Welland
Telephone Number	289-480-0400
Fax Number	289-480-0399
Person Completing Form	Michelle Johnson
E-mail	Michelle.johnson@jarlette.com

# of square feet of shelter available	2,000 square feet
# of residents you could accommodate	10
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Mattresses x 4
Can you provide bathrooms?	2

Emergency Contact Name (Primary)	Michelle Johnson
Position	Executive Director
Primary Telephone Number	289-480-0400 ext. 111
Alternate Telephone Number	905-380-9357

Secondary Contact Name	Jenna Wade
Position	Director of Care
Primary Telephone Number	289-480-0400 ext. 112
Alternate Telephone Number	289-690-1516

Other Pertinent Information:
- Currently do not have beds – may need to outsource

Date Received: June 13, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
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Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Shalom Manor**
Address	12 Barlette Ave Grimsby ON
Telephone Number	905-945-9631
Fax Number	905-945-1211
Person Completing Form	Karen Edge
E-mail	kedge@shalommanor.ca

# of square feet of shelter available	2,800
# of residents you could accommodate	15
Can you provide food for those you're sheltering?	Yes, while supplies last
Can you provide beds with mattresses?	No
Can you provide bathrooms?	4 private, 2 public

Emergency Contact Name (Primary)	Karen Edge
Position	Administrator & Interim CEO
Primary Telephone Number	905-945-9631 ext. 1112
Alternate Telephone Number	Maintenance On Call: 905-932-9631

Secondary Contact Name	Wilma Ipema
Position	Manager of Environmental Services
Primary Telephone Number	905-945-9631 ext. 1158
Alternate Telephone Number	Maintenance On Call: 905-932-9631

Other Pertinent Information:
- Beds & mattresses would need to be arranged by the Red Cross or other provider

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**The Meadows of Dorchester**
Address	6623 Kalar Road Niagara Falls ON
Telephone Number	905-357-1911
Fax Number	905-356-2199
Person Completing Form	Tracy Tait
E-mail	tracey.tait@niagararegion.ca

# of square feet of shelter available	400
# of residents you could accommodate	8 (no call bell)
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	4

Emergency Contact Name (Primary)	Tracey Tait
Position	Administrator
Primary Telephone Number	289-968-2812 (Manager Stand-By Cell)
Alternate Telephone Number	

Secondary Contact Name	Holly Mitchell
Position	Director of Resident Care
Primary Telephone Number	289-968-2812 (Manager Stand-By Cell)
Alternate Telephone Number	

Other Pertinent Information: n/a

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**The Salvation Army – R. H. Lawson Eventide Home**
Address	5050 Jepson Street Niagara Falls, ON L2E 1K5
Telephone Number	905-356-1221
Fax Number	905-356-9609
Person Completing Form	Jessica Radon, Executive Director
E-mail	Jessica.Radon@salvationarmy.ca

# of square feet of shelter available	Three locations: -Palliative Care Room (so long as not occupied) **220.5** sq Ft. – 2 residents -Conference Room **588.5** sq Ft. – up to 4 res. -Chapel **930** sq Ft. – up to 6 residents
# of residents you could accommodate	8
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Some – yes
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Jessica Radon
Position	Executive Director
Primary Telephone Number	905-359-8767
Alternate Telephone Number	905-719-0474

Secondary Contact Name	Greg Blonski
Position	Director of Environmental Services
Primary Telephone Number	905-356-1221 ext. 245

Other Pertinent Information: The home would be able to accommodate a maximum of 8 residents in three areas. Beds and mattresses may be available depending on circumstances.

Date Received: June 3, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**United Mennonite Home**
Address	4024 Twenty Thirds St. Vineland L0R 2C0
Telephone Number	905-562-7385 ex 5006
Fax Number	905-562-3711
Person Completing Form	Robert Millar
E-mail	millar@umh.ca

# of square feet of shelter available	1400
# of residents you could accommodate	8
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	No
Can you provide bathrooms?	Yes Communal

Emergency Contact Name (Primary)	Robert Millar
Position	Director of maintenance and Capital Works
Primary Telephone Number	905-562-7385 ext 5006
Alternate Telephone Number	905-651-1456

Secondary Contact Name	Kelly Chuckry
Position	Chief Nursing Officer
Primary Telephone Number	905-562-7385 ext 5002
Alternate Telephone Number	N/A

Other Pertinent Information: n/a

Date Received: June 23, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**Valley Park Lodge**
Address	6400 Valley Way Niagara Falls
Telephone Number	905-358-3277
Fax Number	
Person Completing Form	Cindy Harbridge
E-mail	charbridge@conmedhealth.com

# of square feet of shelter available	200
# of residents you could accommodate	2
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes - 2
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Cindy Harbridge
Position	Administrator
Primary Telephone Number	905-358-3277
Alternate Telephone Number	904-409-5602 cell

Secondary Contact Name	Cindy Vetrone
Position	Assistant Administrator
Primary Telephone Number	905-358-3277
Alternate Telephone Number	905-931-1165

Other Pertinent Information: n/a

Date Received: May 28, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
Expiration: December 31, 2026

To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Each LTC Home will complete the following information with as much detail as possible, and the submissions will be compiled into one document with an expiration date. A copy will be provided to all participating facilities. It is the responsibility of each Administrator to ensure their information is up-to-date and notify when updates are required.

Facility Name	**West Park Health Centre**
Address	103 Pelham Rd. St. Catharines, ON
Telephone Number	905-688-1031
Fax Number	905-688-4495
Person Completing Form	Kaitlyn Pearson
E-mail	kpearson@southbridgecare.com

# of square feet of shelter available	300
# of residents you could accommodate	4
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	Yes

Emergency Contact Name (Primary)	Kaitlyn Pearson
Position	Executive Director
Primary Telephone Number	416-436-5049
Alternate Telephone Number	905-788-5248

Secondary Contact Name	Megha Chellappan Nair
Position	Director of Care
Primary Telephone Number	905-688-1031 ext 202
Alternate Telephone Number	

Other Pertinent Information: n/a

Date Received: June 16, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
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To provide a summary of resources available and contact information for Niagara Area LTC homes in the event that any LTC home is in need of emergency shelter for its residents.

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Facility Name	**Linhaven**
Address	403 Ontario Street St Catharines Ontario – L2N1L5
Telephone Number	905-934-3386
Fax Number	905-934-6975
Person Completing Form	Sandhya Marock
E-mail	Sandhya.Marock@niagararegion.ca

# of square feet of shelter available	1000
# of residents you could accommodate	8
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	Communal

Emergency Contact Name (Primary)	Denise Murphy
Position	Administrator
Primary Telephone Number	905-934-3386 Ext. 4101
Alternate Telephone Number	289-969-2917 Cell

Secondary Contact Name	Ashley Anderson
Position	Director Resident Care
Primary Telephone Number	905-934-3386 Ext. 4130
Alternate Telephone Number	905-246-5730

Other Pertinent Information: n/a

Date Received: June 16, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

Niagara Long Term Care Facilities
Collaborative Emergency Shelter Plan Agreement
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Facility Name	**Woodlands of Sunset**
Address	920 Pelham Street Welland, Ontario
Telephone Number	905-892-3845
Fax Number	905-892-5882
Person Completing Form	Sandhya Marock
E-mail	Sandhya.Marock@niagararegion.ca

# of square feet of shelter available	200
# of residents you could accommodate	4
Can you provide food for those you're sheltering?	Yes
Can you provide beds with mattresses?	Yes
Can you provide bathrooms?	Yes (2)

Emergency Contact Name (Primary)	Agnes Gagno
Position	Administrator
Primary Telephone Number	905-892-3845 Ext. 4501
Alternate Telephone Number	905-321-8930

Secondary Contact Name	Nazia Ahmad
Position	Director of Resident Care
Primary Telephone Number	905-892-3845 Ext. 4530
Alternate Telephone Number	289-407-0596

Other Pertinent Information: n/a

Date Received: June 16, 2025

Please email Karen Edge with any changes: kedge@shalommanor.ca

SECTION 6

Outbreak Management

Radiant Care

Outbreak Management Policies

Outbreak Management policies are available in the following locations:

1. In Section 2 of the hard copy Infection Prevention and Control Manual located in Long-Term Care

2. Electronic copies are on Systems 24-7 in Section 2 of the Infection Prevention and Control Manual

SECTION 7

Pandemic Response

Radiant Care

MANUAL:	PEACE TIME DISASTER AND EMERGENCY SAFETY PLAN RESPONSE MANUAL	SUBJECT:	**PANDEMIC PLAN**
DISTRIBUTION:	ALL DEPARTMENTS	NUMBER:	PT-P-16
APPROVAL:		DATE:	SEPTEMBER 2013

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SECTION 1
BEFORE PANDEMIC ACTIVITY IN THE HOME OR COMMUNITY

1.0 INTRODUCTION

1.1 RESPIRATORY & GASTROINTESTINAL INFECTIONS

Respiratory infection outbreaks occur in long-term care homes (LTCHs) throughout the year but are more common from the fall to early spring. Respiratory tract infections are the most diagnosed infections in LTC residents. In Ontario, based on data from Public Health Ontario Laboratory (PHOL), the most common respiratory viruses causing respiratory infection outbreaks are influenza A and B, enterovirus, rhinovirus, coronavirus, RSV, parainfluenza, metapneumovirus and Novel Coronavirus (COVID-19). Occasionally, not only one, but two or more infectious agents are identified in an outbreak.

LTCH residents are predisposed to Acute Respiratory Infections (ARIs) due to age, chronic illnesses that weaken their immune system, and may have chronic lung or neurological diseases that impair their ability to clear secretions from their lungs and airways. However, residents are also at risk because many viral and bacterial respiratory pathogens are easily transmitted in an institutional environment (congregate living). Early detection, together with the timely implementation of outbreak control measures that are carefully adhered to, can effectively minimize transmission of infection, thereby preventing or more quickly bringing an outbreak under control (MOHLTC, 2018).

Gastrointestinal illnesses outbreaks occur within LTCHs with similar transmissibility as respiratory illness. Due to the congregate living nature of LTCH the best way to prevent such outbreaks is early detected, implementation of outbreak measures and surveillance. In LTCHs, gastroenteritis is more commonly caused by food bourne illness from contaminated food or water and/or from such viruses as Norovirus, rotavirus, adenovirus and bacteria causing illness such as C. difficile and parasites to name a few. The transmission of these pathogens occur from person-to-person, foodborne, waterborne, fecal-oral route and/or droplet contact of the vomitus of the infected person. Gastrointestinal illness and outbreaks can lead to severe illness and even death due to the possibility of complications arising from the symptoms and difficulty in clearing the infection in such a vulnerable population.

By preventing the consumption of contaminated food/water and by donning and doffing appropriate PPE when completing care, as well as best hand hygiene practices are the best way in preventing transmission and acquiring illness due to GI pathogenic organisms.

1.2 PANDEMIC

A pandemic is a worldwide outbreak of a disease. It happens when a new infectious pathogen emerges among people, spreads and causes disease worldwide. Pandemics tend to happen every few decades. Past pandemics have led to high levels of illness, death, social disruption, and economic loss.

A pandemic is different from a seasonal disease in several ways (see Table 1). During a pandemic, there will be more people needing care and fewer health care and essential services workers available to work. Existing respiratory outbreak and emergency plans should be reviewed to ensure they take into account the potential impact of a pandemic.

Table 1: A Comparison of a Pandemic and Seasonal Influenza

Pandemic	Seasonal Influenza
Caused by a new strain of virus that can spread easily from person to person.	Caused by an unknown circulating strain of influenza A virus.
Can occur at any time of year.	Usually occurs during flu season, between November and April.
May strike in multiple waves, several months apart. Each wave may last two to three months or more.	Peaks for a few months during the winter and then declines.
Could take at least 4 to 5 months after the pandemic strain is identified to develop a vaccine.	Annual vaccines are available and will provide some protection against circulating strains.
Could infect 70%+ of the population.	Infects 10% to 20% of the population yearly.
Most people will have little or no immunity to the new virus, so there will be more serious illness and a greater number of deaths.	A portion of the population will have some immunity, either because of previous exposure or immunization with the annual flu vaccine. Most people will not become seriously ill, and fewer will die.
Could affect anyone, including health care providers and their families, severely disrupting the health care system.	Affects mainly the very young and very old, and people who are immunocompromised; does not usually affect the health care system's ability to provide care.

A pandemic occurs when all four of the following occur:

1. A new infectious organism (virus, bacteria, parasite) is detected
2. Transmission happens easily
3. The new virus causes serious clinical illness and death
4. The population has little or no immunity to the virus

Preventative and/or treatment options such as anti-viral and/or antibiotic drugs (and vaccine when it becomes available) will be distributed to groups of people in order of priority, which is set by the province based on the epidemiology of the strain. As a result of lack of vaccines and preventative and/or treatment medications, traditional infection prevention and control practices will be the main line of defense.

If Ontario experiences a pandemic, residents and tenants living at Radiant Care are at increased risk due to their age, underlying medical conditions, exposure to significant numbers of staff and visitors, and close living conditions. The infectious organism can be introduced by staff and visitors and can spread rapidly. It is estimated that as many as 70% of staff and residents in a Long-Term Care home may become infected during a pandemic.

Health care workers have an ethical duty to provide care and respond to suffering. The spread of the infectious organism in health care settings can be prevented and controlled through the consistent use of best practices in surveillance and infection prevention and control. If these practices are used consistently, health care workers will be protected while caring for patients who are infected.

Radiant Care already has infection prevention and control programs to prevent and manage respiratory infection outbreaks and has emergency and disaster plans; however, heightened surveillance will be the primary activity at Radiant Care as long as any pandemic activity remains outside the community. Once the pandemic has reached the community, the local Public Health unit will take the lead role and Radiant Care will prepare to activate its plan.

1.3 DEFINITIONS

Antibiotic: medication that inhibits the growth of or destroys specific bacteria.

Antiviral: medication used to treat and prevent severity of respiratory infections.

Community: geographic location of the Long-Term Care Home within the boundaries of our health units and other homes that fall into our geographical area.

COVID-19: COVID-19 is an illness caused by the SARS-CoV-2 virus. It was first identified in late 2019 and declared a global pandemic by the World Health Organization on March 11, 2020. (Public Health Ontario, 2022).

COVID-19 symptoms include:

- Any one or more of:
  - fever or chills
  - cough
  - shortness of breath
  - decreased or loss of taste or smell
- Any two or more of:
  - runny nose or nasal congestion
  - headache
  - extreme fatigue
  - sore throat
  - muscle aches or joint pain
  - gastrointestinal symptoms (such as vomiting or diarrhea)

Fever-Related Illness: fever greater than 37.8 degrees Celsius (according to Public Health).

Hand Hygiene: process of removing soil or microorganisms from hands, involving the use of soap and water or alcohol-based hand rubs that contain 70-90% alcohol.

High-Risk Groups: adults and children with chronic cardiac or pulmonary disorders. Residents of nursing homes or other chronic care facilities. People 65 years of age or older. Adults and children with chronic medical conditions such as diabetes mellitus and other metabolic diseases, cancer, immunodeficiency (including HIV infection), immunosuppression (including that of transplant recipients), renal disease, anemia and hemoglobinopathy.

Infectious Organism: pathogenic bacteria, viruses, parasites or fungi that can cause an infection from direct or indirect contact.

Influenza: contagious respiratory illness in humans that occurs every year. An annual vaccine is available.

Influenza-Like Illness: acute onset of respiratory illness with fever and cough and with one or more of the following: sore throat, arthalgia (joint pain), myalgia (muscle aches and pains) or prostration (extreme weakness). In patients over 65, fever may not be prominent.

Investigation or Outbreak Number: assigned by the local Public Health unit.

IPAC: Infection Prevention and Control.

MOLTC: Ministry of Long-Term Care.

Nasopharyngeal Swab: preferred method to check for cause of respiratory infection. A sample is taken using a sterile swab and medium. The swab is then inserted through the nostril, to the pharynx, where the health care provider will then gently twirl the swab to collect material from the mucous membrane.

Outbreak: the occurrence of more cases of a communicable disease than expected in a given area or among a specific group of people over a particular period of time, sometimes referred to as a "cluster." Functionally, there is no difference between an outbreak and a cluster, since both need to be investigated and controlled. An outbreak is officially declared by the local Public Health unit based on the case definition of the illness.

Pandemic: an epidemic occurring worldwide, or over a very wide area, crossing international boundaries and usually affecting a large number of people. (Last JM, 2001)

Personal Protective Equipment (PPE): used by healthcare workers to provide a barrier that will prevent potential exposure to infectious microorganisms.

Resident: anyone residing in a Long-Term Care home at Radiant Care.

Routine Practices: interventions implemented to reduce the risk of transmission of microorganisms from patient to patient, patient to health care worker and health care worker to patient. Includes hand hygiene, use of personal protective equipment and cleaning and disinfecting.

Staff: individuals employed by Radiant Care, regardless of their position or employment status (full-time, part-time and casual). Individuals who work in the home through contracted services are not considered staff.

Surveillance: the ongoing, systematic collection, analysis, interpretation and dissemination of data as the core activity of the infection prevention and control (IPAC) program. The purpose of surveillance is to identify infections and to monitor adherence to recommended IPAC practices in order to reduce infections and prevent the spread of pathogens among residents, tenants, staff and visitors.

Tenant: anyone residing in apartments, wellness suites or life lease units at Radiant Care.

WHO: World Health Organization.

2.0 PURPOSE, POLICY & GOALS

2.1 PURPOSE
To minimize the number of people infected with the infectious organism, the severity of illness, the number of deaths and the amount of socio-economic disruption. To ensure resident care and services are managed.

2.2 POLICY
Radiant Care will effectively handle a pandemic by best anticipating continued operations of the organization in the event of a pandemic. This policy will become effective when a pandemic is declared.

In the event of a pandemic, Radiant Care will adhere to all guidelines outlined in the policy. The Senior Administrator Long-Term Care or designate will ensure that the policy is communicated to all staff. This policy is to be reviewed annually.

2.3 GOALS
1. To prepare for a potential pandemic by developing practical and efficient plans to minimize the extent of morbidity and mortality.
2. To monitor for the presence of the pandemic strain in the home by maintaining diligent infection control surveillance.
3. To monitor for the presence of the pandemic strain within the community.
4. To be prepared to assemble staff, supplies, and equipment quickly and efficiently in an attempt to contain the pandemic virus.
5. To minimize the impact of a pandemic on Radiant Care residents, tenants and staff.
6. To communicate effectively with residents, tenants, their families and staff to meet their need for information through transparent communication plans.
7. To maintain an effective working relationship with the Niagara Public Health department to ensure clear, concise communication and to have access to ongoing infection control advice.

3.0 OUTBREAK MANAGEMENT TEAM

3.1 MEMBERSHIP - For emergency Pandemic strain
The Outbreak Management Team (OMT) consists of the following positions:
- Senior Administrator Long-Term Care
- Administrator Long-Term Care
- Director of Care (DOC)
- Manager of Support Services
- Nutrition Manager
- Maintenance Manager
- Therapeutic Recreation (TR) Supervisor
- Supportive Housing (SH) Manager
- IPAC Lead
- Medical Director
- Pharmacy Consultant
- Niagara Region Public Health Unit Representative

3.2 ROLES & RESPONSIBILITIES

The following roles and responsibilities are assigned to specific members:

- Chairperson
  - The Senior Administrator Long-Term Care is responsible for coordinating team meetings and delegating tasks.
- Outbreak Coordinator/IPAC Lead or Delegate
  - Is responsible for ensuring all OMT decisions are carried out, and coordinates all activities required to investigate and manage the outbreak.
- Media Spokesperson
  - The CEO is responsible for providing information to the media, always ensuring privacy legislation is upheld. All media requests will be directed to the CEO.

4.0 COMMUNICATIONS

4.1 DIRECTION

Media communications will be directed through the office of the CEO.

All other communications (residents, tenants, staff, families, etc.) will be directed through the office of the CEO, in consultation with the Senior Administrator Long-Term Care and Director(s) of Care (DOCs).

When a pandemic is declared:

1. A memo is sent, via email, to all residents, tenants, families and staff to inform them that a pandemic had been declared and any necessary information they need to know.
2. A memo is sent, via email, to all residents, tenants, families and staff when significant changes or updates occur.
3. A memo is sent, via email, to all residents, tenants, families and staff to inform them when the pandemic is over.

When an outbreak is declared:

1. Nursing staff, DOC, ADOC, Clinical Quality Coordinator and delegates make initial outbreak calls to families of affected residents.
2. A memo is sent to all residents, tenants, families, and staff to inform them of the outbreak.
3. The Radiant Care website is updated to indicate that an outbreak has been declared and the location of the outbreak.
4. Nurses make daily calls to families of affected residents throughout the outbreak.
5. A memo is sent to all residents, tenants, families and staff when significant changes or updates occur.
6. A memo is sent to all residents, tenants, families and staff to inform them when the outbreak is over.

4.2 MODES OF COMMUNICATION

- The primary mode of communication with supervisors and office support staff is email and/or phone call.

- The primary modes of communication with front line staff are written memos/signage posted above the hand scanners and/or announcements at team huddles. The secondary mode of communication is through emails. Outbreak memos are sent by email.
- The primary mode of communication with residents and tenants is written memos. The secondary mode is announcements at mealtimes, where applicable. Monthly newsletters will also be a way to communicate non-urgent messages.
- The primary mode of communication with families for general communications is email, where available. The primary mode of communication with families for resident-specific matters is phone for those directly affected.
- The primary mode of communication for staff is to complete in-person huddles on each unit and print and post the memo on each unit for review. The secondary mode of communication is that staff will also receive a staff specific memo via email.
- The primary mode of communication with visitors is signage posted in the home.
- The Radiant Care website and Radiant Care social media accounts are primary modes of communication with the broader community and are a resource for families, residents, tenants and staff.

4.3 PUBLIC HEALTH UNIT

The Medical Officer of Health or designate is responsible for disseminating information about pandemic activity in the community. The local Public Health unit will provide advice and direction to health care organizations at the local level throughout a pandemic and will be responsible for coordinating the distribution of antivirals and vaccines when available. The Niagara Region Public Health Nurse assigned to the LTCH will determine and declare the initiation of an outbreak and will declare the discontinuation of an outbreak.

Radiant Care will follow direction from the local Public Health unit once a pandemic has been declared.

Public Health Unit Contact

Niagara Region Public Health Unit
905-688-3762 or 1-800-263-7248
Fax: 905-682-3901
Emergency after-hours (limited services): 905-984-3690

5.0 PANDEMIC ACTIVITY IN THE AREA

The Ontario Health Plan on Pandemic Planning has provided a response to pandemic activity. There are 3 stages which include:

- **Stage 1** includes no pandemic activity in the
  a. country, province or community;
  b. community;
- **Stage 2** includes pandemic activity in the community; and
- **Stage 3** includes pandemic activity in the home.

STAGE 1A: NO PANDEMIC ACTIVITY IN THE COUNTRY, PROVINCE OR COMMUNITY

If a pandemic has been declared elsewhere in the world, but there is no pandemic activity in the country, province or community, staff can use a more passive screening approach which includes:

- Allowing family members and visitors to self-screen.
- Looking for pandemic related illness in residents while providing routine daily care or activities.
- Staff should report pandemic related illness to their supervisor. Supervisor will report this information to the DOC.
- Residents with pandemic related illness should be line listed and the form should be forwarded to the DOC daily. See Appendix A for line list template. Any suspected outbreak should be reported to the DOC immediately.

STAGE 1B: PANDEMIC ACTIVITY IN THE COUNTRY/PROVINCE, BUT NO PANDEMIC ACTIVITY IN THE COMMUNITY

Surveillance will include:

- Passive screening as identified above
- Nursing staff will actively seek out signs or symptoms in residents by:
    - Conducting unit rounds.
    - Reviewing unit reports, which will provide information on elevated temperatures and/or other identified symptoms.
    - Reviewing staff communication books.
    - Reviewing medical and/or nursing progress notes on the residents' charts, reviewing pharmacy antibiotic utilization records.
    - Reviewing laboratory reports and asking staff for verbal reports based on their clinical observations.
    - Ensuring documentation is complete within Point Click Care.
- The IPAC lead or designate will review the results of surveillance data for any signs of the pandemic strain.
- The IPAC lead will continue to use the normal reporting procedures to report to the local Public Health unit.
- The IPAC lead will closely monitor community infection rates.
- The IPAC lead will ensure up to date access and follow up to new Guidelines and Recommendations from MOLTCH and NRPH.

Management staff will make the following preparations:

- DOC and Nutrition Manager will order resident supplies and food to cover a 1-3 month period.
- DOC will review current information or guidelines from relevant agencies (e.g. WHO, Public Health, etc.) and recommend changes for Radiant Care's Pandemic Plan as required.
- Supervisors will survey staff for skill levels and commitment to assist Radiant Care during a pandemic.
- Radiant Care will notify residents and tenants through memo and also send to residents' Substitute Decision Maker (SDM) by email.
- Volunteer Coordinator will coordinate volunteer services during pandemic outbreak, if applicable.

- Senior Administrator Long-Term Care or delegate will review, and update if necessary, the Pandemic Communications Plan (see 4.0).
- Discuss all stock levels from all departments i.e. food, medications, PPE etc.

STAGE 2: PANDEMIC ACTIVITY IN THE COMMUNITY
See section 2.

STAGE 3: PANDEMIC ACTIVITY IN THE HOME
See section 3.

STAGE 4: AFTER PANDEMIC ACTIVITY IN THE HOME OR COMMUNITY
See section 4.

SECTION 2
DURING PANDEMIC ACTIVITY IN THE COMMUNITY

The local Public Health unit will notify the home if the pandemic has spread into the area. The home will:

- Immediately call a meeting of the Outbreak Management Team (OMT) to disseminate known information on the pandemic at that point in time and to initiate the Pandemic Plan. Upon activation, alerts will be made via the formal communication vehicles established to residents, tenants, staff, volunteers, and families (see **4.0 Communications** above).
- Activate the Pandemic Plan and Emergency Response Plan, if appropriate. See stage 3 guidelines
- Maintain active surveillance using outbreak-reporting forms provided by local Public Health units.
- As Ministry directives change, DOC and TR Supervisor will notify contracted service providers and community organizations who volunteer in the home of the changes that affect them:
    - Big Al's Aquarium
    - BSO
    - Churches & spiritual care providers
    - Dental Hygiene Team
    - Hairdresser
    - Hauser's Home Healthcare
    - Music Therapists
    - NOTL Palliative Care services volunteers
    - Occupational Therapist
    - Psychogeriatric Resource Consultant, Alzheimer Society
    - Radiant Care Fitness & Wellness Centre
    - Royal Canadian Legion Outreach Visitor
    - St. John's Ambulance Pet Therapy
    - Therapy Tails
    - YES Rehab

6.0 INFECTION PREVENTION & CONTROL MEASURES

6.1 PRECAUTIONS

Staff must follow routine precautions as well as any additional precautions necessary for the identified illness. Please refer to Routine Practices & Additional Precautions Policy located in the Infection Prevention and Control Manual.

6.2 HAND HYGIENE

To protect our residents, tenants, staff and visitors, Radiant Care promotes hand hygiene practices during all care activities and when working in all locations within the homes. All employees and service providers working in the homes are responsible for following hand hygiene policies and procedures. Please refer to Hand Hygiene Policy located in the Infection Prevention and Control Manual.

6.3 PERSONAL PROTECTIVE EQUIPMENT (PPE)

PPE Conservation and Allocation During Pandemic

Personal protective equipment (PPE) must be used at Radiant Care as outlined in this policy and/or other pandemic-related policies, with the intention of keeping employees and those we serve safe, while also preserving and managing the supply of PPE so it can be prioritized for use by front-line/direct care workers.

The IPAC lead and management team to ensure completed Burn Rates calculations are ongoing for all PPE stock to ensure adequate supply is accessibly within Radiant Care LTCHs. Radiant Care is to use the PPE Portal for all additional PPE usage as per MOHLTC. Please refer to the Outbreak Management Policy located in the Infection Prevention and Control Manual.

6.4 PHYSICAL DISTANCING

Avoiding/minimizing close contact is a primary way to prevent the spread of illness. All visitors must maintain a two-metre distance or specific distance from all residents other than the one they are visiting, all other caregivers, staff and visitors during their visit.

7.0 ENVIRONMENTAL CLEANING & CLEANING OF EQUIPMENT

Enhanced environmental cleaning may be required by increasing the frequency of cleaning and the use of specific cleaning solutions that can eradicate the specific infectious organism. Please refer to the Environmental Services Manual, the IPAC Program Policy and the Nutrition Services Manual for further reference.

8.0 SURVEILLANCE

Surveillance is an essential component of an effective infection prevention and control program, especially in Long-Term Care due to the highly vulnerable population and the potential for infection to spread very quickly from the community into the Long-Term Care environment. Surveillance facilitates early identification of a potential outbreak and implementation of control measures to protect both residents and staff. The IPAC Lead or designate is responsible for surveillance of residents, tenants, staff, volunteers, family members, and visitors, as well as outbreak management activities. Surveillance for febrile respiratory illness is already included in the routine infection control program. Surveillance may include the following:

8.1 RESIDENT & TENANT SURVEILLANCE

Continuous home surveillance is ongoing to establish baseline numbers of infections throughout the year. Increased numbers of infections may indicate a seasonal outbreak or the arrival of a pandemic strain. Surveillance program includes:

- Screening of all new admissions for symptoms of the pandemic strain.
- Continuous assessment of residents for symptoms of the pandemic strain.

Staff have been instructed on the signs and symptoms of the pandemic strain. Registered Staff are responsible for contacting Public Health should an outbreak be suspected after hours or on weekends. The IPAC Lead and DOC are also informed of suspected outbreaks outside of regular hours. Outbreak protocol will be followed based on Public Health recommendations.

8.2 SCREENING STATIONS

Select entrances will be identified as the only entrances allowed to be used during the pandemic and a screening station will be set up at identified entrances as required.

Public Health will provide guidelines on who is allowed into the home during a pandemic. Anyone entering the home must enter through designated entrances. Residents and tenants do not need to be screened upon entry but everyone else must be screened prior to entering any building on site, as residents and tenants are automatically placed under Heightened Surveillance for symptom monitoring if the pandemic strain is in the community or within the LTCH.

Deliveries for residents and tenants may be left at the screening stations to be delivered by staff. Alternate delivery arrangements must be made with other service providers, where possible, to limit the number of people entering the home.

8.3 STAFF & VOLUNTEER SURVEILLANCE

All staff and volunteers are made aware of early signs and symptoms of respiratory illness. Staff and volunteers will be screened prior to entering the home each day, using screening guidelines provided by Public Health and/or Ministry of Long-Term Care.

Anyone found to be symptomatic will be sent home immediately and is responsible to call their supervisor to report symptoms and receive further direction. If staff or volunteers experience symptoms at any time during the pandemic, they must stay home and report their symptoms to their supervisor. Their supervisor will direct them on any required follow up, such as calling Public Health for testing and/or speaking with the IPAC lead.

Staff or volunteers who have a close family member (living in the same home) that has the pandemic virus are responsible to call their supervisor, who will provide direction as per Public Health.

Supervisors will inform the DOC(S) or designate of staff or volunteers who are absent from the home with respiratory illness. The DOC(S) or designate will then inform the IPAC lead. Depending on NRPH recommendations, the DOC(S) or designate and IPAC lead will discuss return-to-work protocol at that time.

The home will report respiratory illness in staff or volunteers to Public Health following the guidelines outlined by Public Health. Occupationally-acquired infections are reported to the Joint Health & Safety Committee (JHSC), the Ministry of Labour (MOL) and to WSIB within 72 hours.

Please refer to Outbreak Management Policy for further information.

8.4 FAMILY MEMBER & VISITOR SURVEILLANCE

Radiant Care will follow instructions from Public Health on whether or not family members and visitors are allowed in the home during a pandemic.

If family members and visitors are allowed, they will be screened and tested prior to entering the home each day according to current Public Health and Ministry of Long-Term Care guidance. Anyone found to be symptomatic or infected will be sent home immediately. Information about infections will be reported to Public Health.

Please refer to the Outbreak Management Policy in the Infection Prevention and Control Manual and on the Radiant Care website.

9.0 IMPLEMENT CONTROL MEASURES FOR RESIDENTS & TENANTS

9.1 RESIDENT ADMISSION & RE-ADMISSION

If there is pandemic activity in the community, but not in the home, all new admissions should be screened using the appropriate screening tool provided by NRPH.

9.2 SECURING NECESSARY SUPPLIES TO PROVIDE MEDICAL CARE IN THE HOME

Once pandemic activity is announced by Public Health, pharmacy must be contacted to secure stockpiling of antibiotics, inhalers, nebulizer medications, and narcotics in the Emergency Drug Box located in the medication room. Other medications and supplies (e.g., oxygen tank refills and tubings) must be acquired if needed.

9.3 MANAGING RESIDENT DEATHS DURING PANDEMIC

Any changes to regular practices regarding the management of corpses and autopsy requirements during a pandemic would require the authorization of the Chief Medical Examiner or coroner. Any deaths may be tended to be based on new guidelines from MOLTCH and the NRPH.

9.4 TENANTS

Community client assessments will be conducted by telephone to reduce opportunity for exposure. Assessments will focus on identifying essential needs and corresponding LHIN services. Home visiting by contracted service providers will continue to be the primary method of delivering client services during a pandemic.

SECTION 3
DURING PANDEMIC ACTIVITY IN THE HOME (OUTBREAK)

When an outbreak of the pandemic strain is suspected or confirmed in the home, Radiant Care will take the following steps:

10.0 IDENTIFY SUSPECTED OR CONFIRMED OUTBREAK

The case definition for the outbreak will be defined by Public Health.

11.0 NOTIFY PUBLIC HEALTH OF A SUSPECTED OR CONFIRMED OUTBREAK

The DOC will notify Public Health of the suspected or confirmed outbreak

- 905-688-3762 or 1-800-263-7248
- Fax: 905-682-3901
- Emergency after-hours (4:30pm onward - limited services): 905-984-3690
  Note: Public Health is responsible for declaring an outbreak.

The DOC(S), IPAC Lead or designate will:

a) Submit the outbreak reporting forms to Public Health by fax and/or electronic reporting method.
b) Report the initial control measures that have been instituted.
c) Request an Investigation or Outbreak Number and record it on all laboratory submission forms.
d) Determine, in consultation with the local Public Health Unit, if and/or which residents should be tested.
e) Include the resident's name, the name of the home and the Investigation Number with all specimens.
f) Notify the Senior Administrator Long-Term Care, who will notify the CEO, who will notify the Director of Finance and the Board of Directors.
g) Notify the Human Resources Manager.
h) The DOC(S) will notify the Ministry of Long-Term Care via completing a Critical Incident and continue to activate the plan.
i) Call a meeting of the OMT.

For Radiant Care's responsibilities in declaring an outbreak, please refer to the Outbreak Management Policy located in the Infection Prevention and Control Manual.

12.0 OUTBREAK MANAGEMENT TEAM MEETING & INITIAL RESPONSE

Upon declaration of a pandemic outbreak within the home, the OMT will meet to:

a) Inform OMT of outbreak and ensure all members of the team have a common understanding of the situation.
b) In consultation with Public Health, review the provided working case definition that will be used to identify residents or staff with infection caused by the pandemic strain.
    - Note: The case definition developed for residents may be different from that developed for staff. Residents who meet this case definition will be considered a case.

c) Review control measures necessary to prevent spread of infection.
    - The DOC(S), IPAC Lead or designate will ensure that the agreed upon control measures are in place and enforced, and for modifying control measures depending on the epidemiology of the pandemic strain.
d) Identify and confirm appropriate signage/information to be posted in the home and which locations are most appropriate.
e) Ensure that all staff are completing diligent Point of Care Risk Assessments (PCRA) on all residents, no matter the precautions.
f) Review the Emergency Staffing policy, located in the Peace Time Disaster and Emergency Safety Plan Response Manual, as well as the Control and Support Measures for Staff (see 14.0 of this policy), and be ready to implement if needed.
g) Ensure PPE is available and used appropriately.
h) Notify appropriate individuals:
    - Staff
    - Volunteers
    - Powers of Attorney (POA) of all residents in the home
    - Life Labs
    - Pharmacy
    - Staffing agencies
    - Attending Physician(s), other health care professionals
i) Determine and implement the home's pandemic communication plan.
j) Discuss with Medical Director their plan for either, preventative, empirical or radical treatments.
k) Discuss education sessions that are required for staff.
l) Clarify the role of Public Health and confirm how and when daily communications will take place between the home and the local Public Health unit.
m) Discuss how often the outbreak management team will meet and set the next meeting date.

13.0 IMPLEMENT CONTROL MEASURES FOR RESIDENTS

13.1 RESIDENT ROOM RESTRICTION

Any resident that develops symptoms will be placed on additional precautions based on the transmissibility of the infectious organism, in their room and tested for the pandemic strain, and the family/substitute decision maker will be informed.

Signage will be placed on the resident's door advising precautionary measures that are required. Staff will advise visitors about any restrictions and instruct them in the proper use of personal protective equipment if required.

13.2 RESIDENT HOME AREA RESTRICTION

Cohort residents to their home area, preventing contact with residents in other home areas. Staff are cohorted to the affected home area. Staff break rooms will be created in either the activity room or a location within the resident home area that does not affect the daily activities of the resident. Staff should not be working on more than one unit, preferably staff should be stationed on the affected floor for the duration of the outbreak.

13.3 RESIDENT ADMISSION & RE-ADMISSION

If there is an active case of pandemic illness in the home, admissions and re-admissions are generally not permitted. Factors to guide the decision include:

- The status of the pandemic.
- The resident's health needs and the advice of the resident's attending physician.
- Staffing levels.
- Access to antivirals.
- The home's ability to provide appropriate accommodation and care services that require certain expertise (e.g., peritoneal dialysis, tube feeding, etc.).
- Informed consent provided by the resident or their substitute decision maker.
- Niagara Region Public Health provide advise based on latest guidelines.

13.4 RESIDENT MEDICAL APPOINTMENTS

If there is local pandemic activity or an active case of pandemic illness in the home, non-essential appointments should be postponed. Essential appointments are those that must be attended for the care and protection of a resident's health (e.g., dialysis). Registered Staff must notify the appointment location of the outbreak and must allow them to make the decision based on whether they can receive the resident or not prior to sending the resident for their appointment.

13.5 RESIDENT TRANSFERS TO HOSPITAL

The Registered staff will use the following procedures unless informed otherwise:

- If the home is transferring a resident to hospital while there is an active case of pandemic illness in the home, the home will advise the receiving hospital and the patient transport service.
- The hospital staff will be provided with the relevant details of the person being transferred to ensure control measures are in place when the resident arrives at the hospital.

13.6 RESIDENT ACTIVITIES/RECREATION

Previously scheduled events such as celebrations, outings and large group events must be cancelled.

13.7 ESSENTIAL SERVICES

The following services MUST be maintained to provide care and protect residents:

- Heating/cooling/hydro: In the event of service disruption, Radiant Care has access to a backup generator to provide emergency power for 4-5 days. A field company (Gales) is contracted to re-fill the tank as needed.
    - Please refer to the Power Failure and Heating System Failure policies, located in the Peace Time Disaster and Emergency Safety Plan Response Manual.
    - Staff can use battery-powered devices for entertainment and communication purposes. The use of battery-powered lighting can provide sufficient lighting in areas where staff are working and preparing food or washing utensils and pots. Managers or charge nurse will have access to these supplies.
    - Make use of lighting during the daytime hours via opening curtains and internal doors.
    - Limit the areas that need to be lit as much as possible by congregating asymptomatic residents and staff in central areas on the units.

  - If the temperature is cold, layer clothing on residents for maximum warmth and encourage them to wear coats, caps, and gloves. Serve warm beverages frequently.
  - Drain pipes to prevent freezing
  - For measures to take during hot weather, please refer to Prevention and Management of Heat-Related Illness for Residents policy.
  - Menus can be curtailed to include barbecue dishes to conserve hydro. Thermos containers can be used to keep fluids hot after they have been heated.
- Food service: The home maintains a 1-week supply of shelf-stable food items. Please refer to Appendix B for a 3-day emergency menu.
- Running water: The home has a stockpile of wipes for environmental cleaning. Staff will need to procure moistened wipes for resident care. Radiant Care must have a contract with an external water distribution company for potable water. Radiant Care will have access to hand washing stations that must be in use for any food handling or preparation. For more information on how to deal with water shortages, please refer to Water Disruption or Contamination Policy, located in the Peace Time Disaster and Emergency Safety Plan Response Manual.
- Prescription medications: CareRX Pharmacy will implement their business continuity plan to minimize the impact of disruption on clients.
- Lab services: Life Labs will work with Radiant Care under direction of the Ministry of Long-Term Care. Registered staff will work closely with in-house physicians to determine essential lab work required.
- Oxygen concentrators: Vital Aire will work with Radiant Care under direction of national, provincial, or municipal pandemic planning committees.
- Cleaning supplies: The home maintains a month's supply of cleaning products. Extra cleaning supplies can be obtained from Flexo. Monitoring and distribution of the supplies will be done by the Nutrition Manager.
- Medical supplies & PPE: Nursing has a month's supply on hand. Monitoring and distribution of the supplies will be done by the DOC or designate.
- Garbage disposal: In the event of service disruption, Waste Management will provide on-call service. For contact information, please refer to Emergency Supplier Contact List, located in the Peace Time Disaster and Emergency Safety Plan Response Manual
- Elevator service: In the event of service disruption, elevator service provider will be contacted. In the event that all elevators are down, staff will use stairs to deliver items to floors. Staff are encouraged to stockpile items on floors such as non-perishable items if a total elevator shut down occurs.

14.0 IMPLEMENT CONTROL AND SUPPORT MEASURES FOR STAFF & VOLUNTEERS

14.1 ESSENTIAL STAFFING PLAN

To safely manage the care of residents and the operation of the home, key positions must be filled. Given an anticipated high infection rate among staff and increase in absenteeism due to caregiver obligations, regular staffing patterns are expected to change and provision of care will likely be seriously affected.

To safely and effectively provide care to residents, regular duties, areas of assignment and staff deployment may not follow existing patterns. The following positions must be secured with alternate coverage identified in case those identified become unavailable.

Communications Officer/Media Spokesperson
1. CEO
2. Senior Administrator Long-Term Care

Infection Prevention & Control Practitioner/Outbreak Coordinator
1. DOC
2. IPAC Lead
3. ADOC
4. Senior Administrator Long-Term Care

Shared Services Lead
1. Director of Finance
2. Assistant Director of Finance
3. Director of Human Resources

Administration Office Coverage
1. Administrative Receptionist
2. Administrative Support Person (call in)
3. Supportive Housing Assistant
4. Administrative Assistant
5. Junior Accountant - Accounts Receivable (at TM)

All Department Heads
1. Manager/Supervisor from another department

All Staff from All Departments
1. Trained direct care staff to take on more responsibilities within their scope of practice.
2. Cross-train front line staff in non-direct care roles to provide direct care:
    - Feeding residents
    - Toileting, transferring (including mechanical lifts)
    - Obtaining vital signs
    - Basic housekeeping skills
    - Basic food preparation and inventory control
3. Cross-train administrative staff to do front line non-direct care roles (e.g., housekeeping, laundry, etc.).

Staff Shortages

1. Radiant Care will seek to increase the available workforce using the following resources and strategies:
    - Access staff from external agencies.
    - Extend working hours.
    - Call retired staff back to work.
    - Access other staffing resources made available by Public Health or the government.
2. Vacation requests may be cancelled.
3. Radiant Care will cross-train staff as outlined in 14.1.

4. Family members could be trained to help with care and daily living activities (e.g., providing a bed bath and assisting with feeding and toileting).
5. Staff may bring a sleeping bag/comforter to work along with a change of clothes in the event they are unable to leave.

NOTE: Although individuals may be trained, they will not work in these capacities, replace staff or assist staff during non-pandemic times as that would be a violation of current collective agreements.

14.2 IDEAL MINIMUM STAFFING PLAN

A minimum number of staff will be required at all times as suggested in the following tables. Please see Appendix C for Continuity of Operations Plan & Appendix D for Cross-Training Curriculum.

Nursing

Pleasant Manor

Position	Essential # Required			Task Priority
	Days	Afternoon	Nights	
RNs	1	1	1	• Screen/assess the ill • Dispense essential medications • Wound care as necessary • Hourly rounds • Assist where able • Keep PPE available but secure
RPNs	4	4	1	• Screen/assess the ill • Dispense essential medications • Wound care as necessary • Hourly rounds • Assist where able • Keep PPE available but secure
PSWs or HCAs	15	12	8	• Afternoon: 1 (11am-7pm); 20 (2pm-10pm); 1 (5pm-10pm) • Minimal direct care of residents (toilet, hygiene, up in room/hallway) • Feed in hallways while supervising others (no portering)
Volunteers/ Students/ Trained staff	0	0	0	• Screening staff & residents for illness • Serving food at meals • Feeding/supervising in hallway • Helping residents sanitize • Put away/bring up supplies/deliveries for Nursing • Screening staff at entrance • Answering phone at Nurses station (evenings, weekends) • Rounds - safety checks

				• Snack delivery - outside doors • Supply inventory • Clerical - putting charts together for admissions

Tabor Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
RNs	1	1	1	• Screen/assess the ill • Dispense essential medications • Wound care as necessary • Hourly rounds • Assist where able • Keep PPE available but secure
RPNs	3	3	1	
PSWs or HCAs	12	10	6	• Minimal direct care of residents (toilet, hygiene, up in room/hallway) • Feed in hallways while supervising others (no portering)
Volunteers/ Students/ Trained staff	1	2	0	• Screening staff & residents for illness • Serving food at meals • Feeding/supervising in hallway • Helping residents sanitize • Put away/bring up supplies/deliveries for Nursing • Screening staff at entrance • Answering phone a Nurses station (evenings, weekends) • Rounds - safety checks • Snack delivery - outside doors • Supply inventory • Clerical - putting charts together for admissions

Dietary

Pleasant Manor

Position	Essential # Required			Task Priority
	Days	Afternoon	Nights	
Dietary Aides	3 7:30am - 7:30pm	0	0	• Provision of food and hydration to residents, ensure food items available in each area, assist with nourishments • Preparing trays and clearing breakfast, lunch and supper

Cooks	1 6:30am - 6:30pm	0	0	• Prepare breakfast, lunch, and supper (1 choice) using more heat & serve items vs. homemade
Volunteers/ Students/ Trained staff	0	0	0	• Serving, plating, delivering meals • Feeding residents • Wash pots and dishes • Put away orders • Kitchen clean up (evenings only)

Tabor Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
Dietary Aides	2 7:30am - 7:30pm	0	0	• Provision of food and hydration to residents, ensure food items available in each area, assist with nourishments • Preparing trays and clearing breakfast, lunch, and supper
Cooks	1 6:30am - 6:30pm	0	0	• Prepare breakfast, lunch, and supper (1 choice) using more heat & serve items vs. homemade
Volunteers/ Students/ Trained staff	2 7:30am - 7:30pm	0	0	• Serving, plating, delivering meals • Feeding residents • Wash pots and dishes • Put away orders • Kitchen clean up (evenings only)

Housekeeping/Laundry

Pleasant Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
Housekeepers	2 7am - 3pm	0	0	• Focus on washrooms and horizontal surfaces • Regular cleaning of resident areas may be designated to trained non-essential staff or others
Laundry Aides	3 6am - 2pm	0	0	• Towels, essential bedding, essential clothing
Volunteers/ Students/ Trained staff	0	0	0	• Sanitizing high-touch surfaces, resident washrooms • Vacuuming, mopping • Emptying garbage • Refilling soap dispensers

				• Folding/hanging clean laundry • Delivering clothing cart to floor

Tabor Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
Housekeepers	2 7am - 3pm	0	0	• Focus on washrooms and horizontal surfaces • Regular cleaning of resident areas may be designated to trained non-essential staff or others • Essential cleaning in 1, 3, 5 Tabor Drive (e.g. dining room)
Laundry Aides	1 7am - 3pm	0	0	• Towels, essential bedding, essential clothing
Volunteers/ Students/ Trained staff	2	0	0	• Sanitizing high-touch surfaces, resident washrooms • Vacuuming, mopping • Emptying garbages • Refilling soap dispensers • Folding/hanging clean laundry • Delivering clothing cart to floor

Supportive Housing

Pleasant Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
PSWs	6 7am - 3pm	4 3pm - 11pm	3 11pm - 7am	• Medication reminders and all indicated treatments • Direct care of clients • Essential cleaning of bathrooms, kitchen • Serving meals/tray delivery • Essential laundry
Volunteers/ Students/ Trained staff	0	0	0	• Building fire watch (to reduce number of PSWs required or free up staff to do baths) • Medication reminders • Essential housekeeping • Laundry and linen changes, bed-making • Work assignments • Meal delivery/service • Safety checks • Garbage collection

				• Answering phone

Tabor Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
PSWs	3 7am - 3pm	3 (only 2 required from 7:00 – 11:00 if Screeners can cover building for fire response) 3pm - 11pm	3 (only 2 required if Screeners can cover building for fire response) 11pm - 7am	• Medication reminders and all indicated treatments • Direct care of clients • Essential cleaning of bathrooms, kitchen • Serving meals/tray delivery • Essential laundry
Volunteers/ Students/ Trained staff	0	0	0	• Building fire watch (to reduce number of PSWs required or free up staff to do baths) • Medication reminders • Essential housekeeping • Laundry and linen changes, bed-making • Work assignments • Meal delivery/service • Safety checks • Garbage collection • Answering phone

Therapeutic Recreation

Pleasant Manor

Position	Essential # Required			Task Priority
	Days	Afternoon	Nights	
Therapeutic Recreationist	2	0	0	• One-on-one activities (if possible) • Connect residents with loved ones through technology (if possible) • Assist with care of residents, cleaning, dietary needs, etc. as needed

Tabor Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
Therapeutic Recreationist	2	0	0	• One-on-one activities (if possible) • Connect residents with loved ones through technology (if possible) • Assist with care of residents, cleaning, dietary needs, etc. as needed

Maintenance

Pleasant Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
Maintenance Staff	1 5 hours between 7am - 9am	0	0	• 1 hour (morning) garbage collection • 1 hour for fire/maintenance rounds • + on call for emergencies
Volunteers/ Trained staff	0	0	0	• All necessary daily maintenance routine duties, garbage, rounds, weather-related issues

Tabor Manor

Position	Essential # Required			Task Priority
	Days	Evenings	Nights	
Maintenance Staff	1 5 hours between 7am - 10am & 1pm - 3pm	0	0	• 3 hours (morning) for morning garbage collection & take out bins, and fire/maintenance rounds • 2 hours (afternoon) for garbage collection & bring in bins • + on call for emergencies
Volunteers/ Trained staff	0	0	0	• All necessary daily maintenance routine duties, garbage, rounds, weather-related issues

Human Resources & Payroll

Position	Essential # Required			Task Priority
	Weekdays	Evenings	Nights	
HR Director or Coordinator	1 8am - 4pm	0	0	• Essential recruitment • Employee Incident follow up • WSIB, MOL requirements
Payroll Staff	2	0	0	• 8am-4pm

				• Processing payroll

Finance

Position	Essential # Required			Task Priority
	Weekdays	Evenings	Nights	
Director of Finance	1 8am - 4pm	0	0	• Signing officer
Junior Accountant – Accounts Payable	1 8am - 4pm	0	0	• Accounts payable
Junior Accountant – Accounts Receivable	1 8am - 4pm	0	0	• Accounts receivable

Administration

Position	Essential # Required			Task Priority
	Weekdays	Evenings	Nights	
Receptionist	2 8:30am - 4:00pm			• 1 per site • Administration Office coverage - answering phones, receiving anyone entering home
Scheduler/ Nursing Clerk	2			• 1 per site
Admissions/ Volunteer Coordinator	1			• Schedule & oversee temporary workers • Admissions

All other administrative staff will assist with care of residents, cleaning, dietary, etc. as needed.

14.3 DEPLOYING STAFF

Upon arrival to the home, all staff are to report to their usual workstation. All essential and non-essential staff should report to the home for even if their position is characterized as non-essential.

Job priority/deployment of staff will be established by Supervisor/Charge Nurse and staff will be deployed to essential positions as needed.

To safely and effectively provide care to residents, regular duties, areas of assignment and staff deployment may not follow existing patterns.

14.4 COHORTING OF STAFF & VOLUNTEERS

To protect staff, volunteers and residents, movement between floors/resident home areas should be minimized, especially if some units are unaffected. The ability of the home to cohort staff will depend on the number of staff and volunteers available to work. These measures may

not be required if staff are taking prescribed antivirals and using appropriate infection prevention and control practices.

14.5 WORK RESTRICTIONS OR EXCLUDING STAFF FROM WORKING

Staff who are Ill or Symptomatic

Ideally, staff with symptoms of the pandemic strain should be away from work until they are fully recovered. The length of time ill workers should be away will be determined by Public Heath and the IPAC team.

However, if Radiant Care does not have enough people to provide safe care, Radiant Care, in collaboration with Public Health, may allow staff to return to work before they are fully recovered. If this is necessary, staff who are symptomatic should be restricted to non-direct care or to working with residents with symptoms and/or a positive result for the infectious organism, with appropriate PPE. They should not be deployed to care for high risk, medically fragile residents.

During a seasonal influenza outbreak, unimmunized staff who are not taking antivirals are not allowed to work. During a pandemic, this measure will not apply until a vaccine has been developed or until there is an adequate supply of antivirals available. If there is an adequate supply of antivirals, Radiant Care may restrict staff who are not taking antivirals and establish some mechanism to require proof that staff are taking prescribed antivirals. Staff will not be allowed to work and will not be paid if they choose not to get an available vaccine or take available antivirals. If issues arise regarding compliance with work exclusions, they should be discussed with the Outbreak Management Team.

Staff & Volunteers Who Work at Other Facilities

In the event that Radiant Care does not have pandemic activity, staff, volunteers and students who work at other homes or sites where there is pandemic activity will be restricted from working at Radiant Care unless they have proof of taking effective antivirals.

If the pandemic strain is widely circulating in the community and affecting many homes, hospitals and facilities, there may be few, if any, restrictions on staff and volunteers working at other sites. Radiant Care will follow the direction of Public Health and the Ministry of Long-Term Care.

14.6 SUPPORT MEASURES FOR STAFF AND VOLUNTEERS

- For staff and volunteers who are available to work for prolonged periods or who are unable to return to their homes due to transportation issues, Radiant Care will accommodate these individuals in hospitality rooms, as space permits.
- Certain rooms within the home may be designated for staff use during this time, for additional staff room space or for sleeping quarters:
    - Pleasant Manor: Heritage Place Meeting Room, Creekview Meeting Room
    - Tabor Manor: Great Room, 7 Tabor Basement Physiotherapy room
- Shower facilities are available in the following locations:
    - Pleasant Manor: Hospitality Rooms
    - Tabor Manor: Hospitality Rooms, 7 Tabor Drive staff room
- The washers and dryers in Creekview, Mapleview and Evergreen may be used.
- Food and hydration will be made available.

- Additional support measures to be implemented as required. Staff should contact their manager if experiencing difficulties.

15.0 IMPLEMENT CONTROL MEASURES FOR FAMILY MEMBERS & OTHER VISITORS

15.1 NOTIFYING FAMILY MEMBERS & VISITORS

Residents' family members will be notified of pandemic activity in the community or home via memo (email), if an email address has been provided. A notice will also be posted on the Radiant Care website. These notices will include visitation information.

The IPAC lead will ensure that signs indicating pandemic activity in the community or home are posted at all entrances to the home. Screeners will advise visitors of visiting restrictions, if applicable, and of the potential risk of introducing the pandemic strain of illness into the home or acquiring the illness while at the home.

15.2 VISITOR RESTRICTIONS

During regular outbreaks, visitors are encouraged to postpone visits whenever possible. During a pandemic outbreak, essential caregivers may come in to assist with care, but general visitors may be disallowed entirely. Public Health will advise.

During outbreak, visitors are asked to visit only one resident and exit the home immediately after the visit.

Signage and hand hygiene stations at the entrance provide instruction to:

- Clean hands upon entering, before visiting, and before leaving.
- Use personal protective equipment as instructed by staff.
- Self-screen for symptoms of respiratory illness (fever, new cough, new shortness of breath).
- Not enter if they have any symptoms determined relevant to the pandemic strain.

Any visitor restrictions should be discussed and reviewed by the Outbreak Management Team and take into account visitor access to vaccination and antivirals. Contact the Infection Control Nurse or designate if there are any special circumstances not covered in this policy.

15.3 VISITING RESIDENTS WHO ARE ILL

Staff will post notices on the doors of all residents who are ill, advising visitors to check at the nurse's station before entering the room. This will also be mentioned within the memo as part of the communication plan. Registered Staff will advise the visitor about any restrictions and instruct the visitor in the proper use of PPE.

Ill residents are to be visited in their room only. Visitors should not visit with other residents.

15.4 COMMUNAL & OTHER ACTIVITIES

Visits by outside groups (entertainers, churches, schools, community groups, etc.) shall not be permitted while there is pandemic activity in the home or community, unless otherwise directed by Public Health or the Ministry of Long-Term Care.

16.0 DISTRIBUTION & ADMINISTRATION OF ANTIVIRALS AND VACCINES

During a pandemic, the province will be responsible for coordinating the distribution of antivirals and vaccines across the province. The local Public Health unit will be responsible for coordinating the distribution of antivirals and vaccines among health care organizations at the regional level.

The IPAC lead or designate will be responsible for receiving, storing, and tracking the use of antivirals and vaccines. All treatment medications and vaccines will be stored within a locked management office (DOC, ADOC) within the main vaccine fridge and will be distributed and signed off by the IPAC team or designate. In case of a power failure, the vaccines can be moved to a secure emergency power source until the issue is corrected.

Registered Staff on the individual nursing units will be responsible for obtaining consent from residents or their substitute decision makers (SDM) for treatment with antivirals and/or immunization during a pandemic (if this information was not already provided on admission).

Registered Staff to document if the resident is not able to take the antiviral or vaccine and to monitor antivirals by residents and report to the Infection Control Nurse.

In collaboration with the Medical Director, the direction of Public Health and governing agencies, Radiant Care will follow such direction for administration of therapeutic medications and vaccine administration. Radiant Care shall ensure that a medical directive has been created and approved prior to any administration of new therapeutic medications within LTCHs.

17.0 ETHICAL CONSIDERATIONS DURING A PANDEMIC

Individual Liberty vs. Protection of Public from Harm

During a pandemic, it may be necessary to restrict the freedom of one or more persons to protect the public from serious harm. It is important to weigh the benefits of protection from harm against the loss of freedom (such as isolation precautions). All involved need to be aware of the medical and ethical reasons for the measures put in place, the benefits of compliance, and the consequences of non-compliance. Radiant Care will make every decision while using the Ethical Framework policy.

Proportionality

Radiant Care will use the least restrictive measures possible when limiting or restricting freedoms to not exceed the minimum requirements needed to address the actual level of risk present.

Privacy

Individuals have the right to privacy. Radiant Care will limit the disclosure of health information to only that which is required to meet legitimate public health needs.

Equity

Radiant Care will strive to preserve as much equity as possible between the needs of the ill residents and the residents who need care for other diseases. When identifying residents and staff who have priority access to antivirals, vaccines, or other treatment, Radiant Care will ensure that everyone is aware of the criteria used to make these decisions, as well as the impact of these decisions on Radiant Care.

Duty to Provide Care

Healthcare workers (HCWs) have an ethical duty to provide care. During a pandemic, health care demands may overwhelm both the worker and the workplace, resulting in challenges related to resources, professional practice, liability, and safe work environments. HCWs may have to weigh their duty of care against personal and/or family health needs. As a support to staff, Radiant Care will strive to:

- Ensure that appropriate supports are in place (resources, supplies, equipment, PPE).
- Provide support for staff to fulfill their personal/family responsibilities.
- Establish a policy to deal with staff concerns and work exemptions.

Trust

Radiant Care will continue to communicate openly and honestly with staff, residents, tenants, families, and other organizations to ensure decision making processes are ethical and clear.

Solidarity

Clear cut communication and teamwork to share information and manage health care delivery is essential among community, health care facilities, Public Health units, and government.

Stewardship

Radiant Care will be entrusted with control over limited resources (antivirals, vaccines, PPE, equipment, staff). Radiant Care will determine how resources will be allocated, in consultation with the Medical Director and Public Health and directives from the Ministry of Long-Term Care.

SECTION 4
AFTER PANDEMIC ACTIVITY IN THE HOME OR COMMUNITY

18.0 DECLARING THE OUTBREAK OVER

The length of time from the onset of symptoms of the last case until the outbreak is declared over will be defined by Public Health. The local Public Health unit will be responsible for declaring the outbreak over and for notifying the Ministry of Health, Ministry of Long-Term Care, Ministry of Labour and other organizations in the community.

For Radiant Care's responsibilities at the end of outbreak, please refer to the Outbreak Management Policy located in the Infection Prevention and Control Manual.

19.0 INVESTIGATION OF THE OUTBREAK

When the outbreak is declared over, an outbreak investigation file should be established, containing any documentation specific to the investigation and management of the outbreak

The IPAC lead or designate, in collaboration with Public Health, will complete the outbreak line list and submit to Public Health. The IPAC Lead at the home will keep copies of all forms on file.

For further information on outbreak investigations, please refer to the Outbreak Management Policy located in the Infection Prevention and Control Manual.

20.0 REVIEW THE PANDEMIC OUTBREAK

When a pandemic outbreak in the home is over, Radiant Care will endeavour to debrief the course and management of the pandemic outbreak with the local Public Health unit and front-line staff to identify what was handled well and what could be improved.

21.0 REFERENCES

- Appendix 1: Case Definitions and Disease Specific Information. Disease: Gastroenteritis Outbreaks in Institutions and Public Hospitals.
- Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings. Ministry of Health. April 2014.
- Ontario Health Plan for an Influenza Pandemic. Chapter 19 – Long-Term Care Homes, September 2006.
- Ministry of Health Emergency Management plans and strategies. June 2024.
- Outbreak Preparedness, Prevention and Management in Congregate Living Settings. January 2024.
- Pandemic Planning: A guide for HR professionals. Why your organization's HR team should assume the lead role in pandemic planning, 2006.

COVID-19 Reference Documents

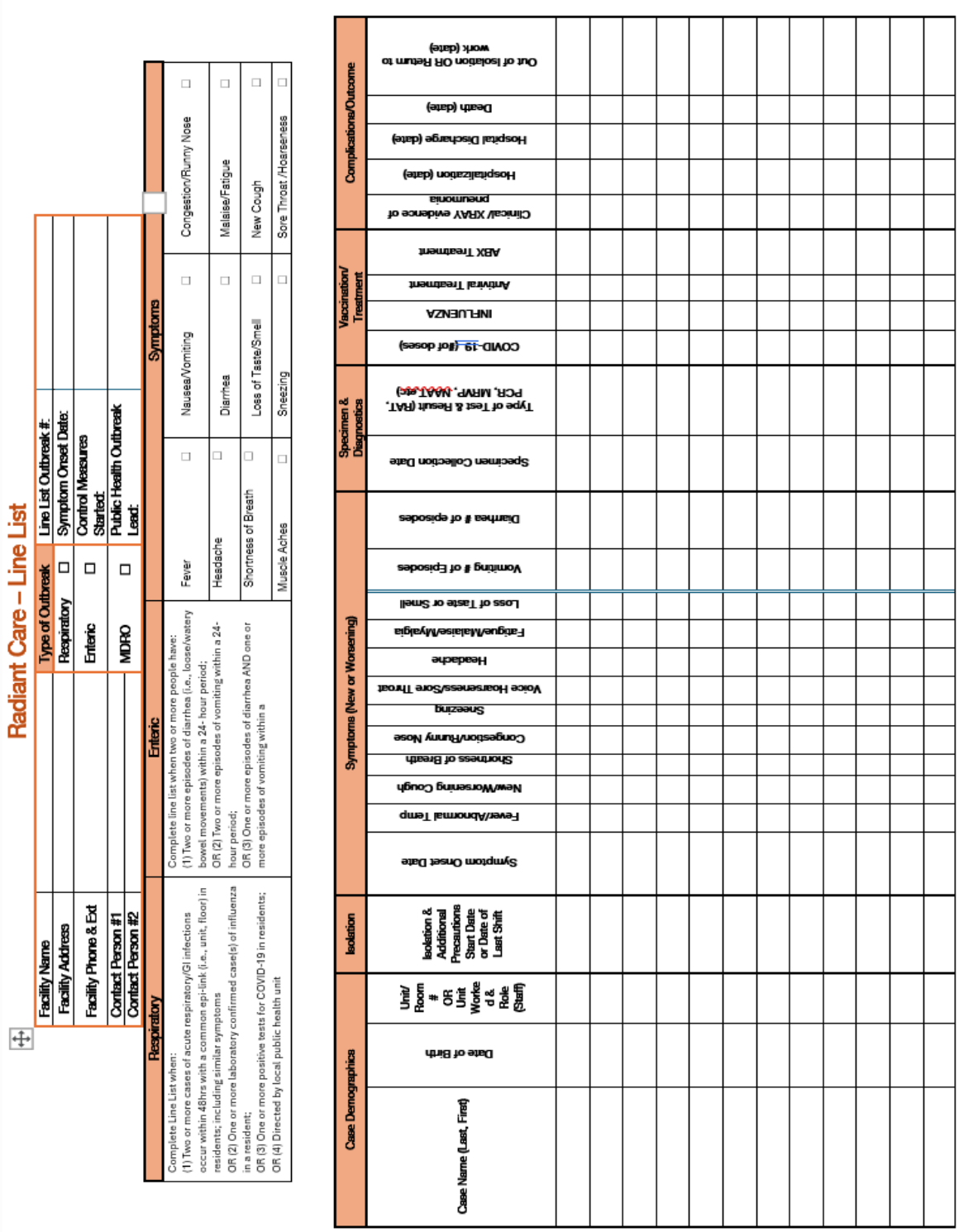
- Recommendations for Outbreak Prevention and Control in Institutions and Congregate Living Settings (ontario.ca)

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22.0 CROSS-REFERENCE

- Radiant Care Business Continuity Plan
- Radiant Care Infection Prevention and Control Manual
- Radiant Care Peace Time Disaster and Emergency Safety Plan Response Manual

APPENDIX A: LINE LISTING FORM



Radiant Care – Line List

		Type of Outbreak		Line List Outbreak #:	
Facility Name		Respiratory	☐	Symptom Onset Date:	
Facility Address		Enteric	☐	Control Measures Started:	
Facility Phone & Ext		MDRO	☐	Public Health Outbreak Lead:	
Contact Person #1					
Contact Person #2					

Respiratory	Enteric	Symptoms					
Complete Line List when: (1) Two or more cases of acute respiratory/GI infections occur within 48hrs with a common epi-link (i.e., unit, floor) in residents; including similar symptoms OR (2) One or more laboratory confirmed case(s) of influenza in a resident; OR (3) One or more positive tests for COVID-19 in residents; OR (4) Directed by local public health unit	Complete line list when two or more people have: (1) Two or more episodes of diarrhea (i.e., loose/watery bowel movements) within a 24- hour period; OR (2) Two or more episodes of vomiting within a 24-hour period; OR (3) One or more episodes of diarrhea AND one or more episodes of vomiting within a	Fever	☐	Nausea/Vomiting	☐	Congestion/Runny Nose	☐
		Headache	☐	Diarrhea	☐	Malaise/Fatigue	☐
		Shortness of Breath	☐	Loss of Taste/Smell	☐	New Cough	☐
		Muscle Aches	☐	Sneezing	☐	Sore Throat /Hoarseness	☐

Case Demographics		Isolation	Symptoms (New or Worsening)												Specimen & Diagnostics		Vaccination/ Treatment				Complications/Outcome				
Case Name (Last, First)	Date of Birth	Unit/ Room # OR Unit Worked & Role (Staff)	Isolation & Additional Precautions Start Date or Date of Last Shift	Symptom Onset Date	Fever/Abnormal Temp	New/Worsening Cough	Shortness of Breath	Congestion/Runny Nose	Sneezing	Voice Hoarseness/Sore Throat	Headache	Fatigue/Malaise/Myalgia	Loss of Taste or Smell	Vomiting # of Episodes	Diarrhea # of episodes	Specimen Collection Date	Type of Test & Result (RAT, PCR, MIRVP, NAAT etc)	COVID-19 (# of doses)	INFLUENZA	Antiviral Treatment	ABX Treatment	Clinical/ XRAY evidence of pneumonia	Hospitalization (date)	Hospital Discharge (date)	Death (date)	Out of Isolation OR Return to work (date)

Radiant Care

APPENDIX B: EMERGENCY MENU

RC Tabor Manor Emergency Menu & Locations of Items
Menu initiated if we had no cooks or were down to only 1 Dietary Aide in the kitchen, or we have no Dietary staff and must use non-Dietary staff to prepare food for the residents.

Day 1 - Time	Meals	Time	Nourishments
Breakfast	• Assorted Cold Cereal (cream of wheat available for pureed) • Assorted Jam / Peanut Butter • Whole Wheat Buttered Toast	**AM**	• Juice, Diet Juice, Water
Lunch	• Chicken Stew with Zucchini, Cheese Biscuit & Butter Patty • Powdered Donuts or Crushed Pineapple	**PM**	• Juice, Diet Juice, Water • 2 Bite Brownies (pudding available for pureed)
Dinner	• Cream of Broccoli Soup & Crackers • Meatloaf with Mashed Potatoes & Sliced Carrots	**HS**	• Juice, Diet Juice, Water • Tuna Salad Sandwich (yogurt available for pureed)

DAY 1 - Location	Items	Amount of Each Item
7 Tabor - Fridge (2nd - closer to cook's area)	• Yogurt • Butter Patty • Tuna Salad Spread (HS nourishment)	• 2 cases of vanilla • 1 case • 1 pail
7 Tabor - by NM's office and elevators	• Applesauce • Crushed Pineapple • Saltine Crackers • Peaches (cups – regular and pureed)	• 1 case (6 cans) • 1 case (6 cans) • 1 case (to be split up between floors) • 5 cases of cups, 1 case of pureed (48 cups)
1 Tabor - Freezer	• Chicken Stew • Zucchini • Cheese Biscuit • Powdered Donuts • Cream of Broccoli Soup • Meatloaf • Mashed Potatoes • Sliced Carrots • Vanilla Mini Cupcakes • 2-bite Brownies (PM nourishment)	• 1 case • 1 case • 3 cases • 1 case • 2 cases • 4 cases • 1 case • 1 case • 1 case • 1 case

*Thaw "tray purees" and "pureed vegetables" from 1 Tabor Freezer (use for all 3 days)

Please note: all serveries have cold cereals, packaged cream of wheat, juices and diet juices

Day 2 - Time	Meals	Time	Nourishments
Breakfast	• Assorted Cold Cereal (cream of wheat available for pureed) • Assorted Yogurt with Banana • Assorted Jam / Peanut Butter • Whole Wheat Buttered Toast	**AM**	• Juice, • Diet Juice, • Water
Lunch	• Omelet with Mashed Potatoes & Peas • Lemon Tart or Fruit Cocktail	**PM**	• Juice, Diet Juice, Water • Strawberry Wafers (pudding available for pureed)
Dinner	• Vegetable Soup & Crackers • Macaroni & Cheese with Broccoli • Jell-O Cup or Mandarin Oranges	**HS**	• Juice, Diet Juice, Water • Egg Salad Sandwich (yogurt available for pureed)

Day 2 - Location	Items	Amount Of Each Item
7 Tabor - Fridge (2nd - closer to cook's area)	• Yogurt • Bananas • Egg Salad Spread (HS nourishment)	• 2 cases peach • 1 case • 1 pail
7 Tabor - by NM's office and elevators	• Banana cups (for pureed) • Fruit cocktail (canned and tropical fruit pureed cups) • Saltine Crackers Jell-O Cups • Mandarin Oranges (cups and pureed cups) • Strawberry Wafers (PM nourishment)	• 1 case (48 cups) • 4 cases of cups, 1 case of pureed • 1 case (used on day 1) • 3 cases • 4 cases of cups, 1 case of pureed • 1 case
1 Tabor - Freezer	• Omelets • Mashed Potatoes • Peas • Mini Lemon Tart • Vegetable Soup • Macaroni & Cheese • Broccoli	• 2 cases • 1 case • 1 case • 2 cases • 1 case • 2 cases • 1 case

Day 3 - Time	Meals	Time	Nourishments
Breakfast	• Assorted Cold Cereal (cream of wheat available for pureed) • Assorted Yogurt with Pears • Assorted Jam / Peanut Butter • Whole Wheat Buttered Toast	**AM**	• Juice, • Diet Juice, • Water
Lunch	• Turkey Pot Pie with Mashed Potatoes & Squash • Butterscotch Pudding or Apricots	**PM**	• Juice, Diet Juice, Water • 2 Bite Cinnamon Rolls (pudding available for pureed)
Dinner	• Cream of Celery Soup & Crackers • Meat Lasagna with Turnips • Ice Cream Cup or Tropical Fruit Salad	**HS**	• Juice, Diet Juice, Water • Salmon Salad Sandwich (yogurt available for pureed)

Day 3 - Location	Items	Amount Of Each Item
7 Tabor - Fridge (2nd - closer to cook's area)	• Yogurt • Salmon Salad Spread (HS nourishment)	• 2 cases of strawberry • 1 pail
7 Tabor - by NM's office and elevators	• Pears (canned and pureed cups) • Butterscotch Pudding Cups • Apricots (canned and banana cups for pureed) • Tropical Fruit Salad (canned and pureed cups)	• 1 case (6 cans), 1 case of pureed cups (48) • 2 cases • 1 case of cans, 1 case of pureed cups • 1 case of cans, 1 case of pureed cups
1 Tabor - Freezer	• Turkey Pot Pies • Mashed Potatoes • Squash • Cream of Celery Soup • Meat Lasagna • Turnips • Ice Cream Cups 2-bite Cinnamon Rolls (PM nourishment)	• 2 cases • 1 case • 1 case • 1 case • 3 cases • 1 case • Total of 16 boxes [2 cases per flavor - vanilla, chocolate, butterscotch, strawberry • 1 case

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APPENDIX C: CONTINUITY OF OPERATIONS PLAN

SEE SEPARATE DOCUMENT

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APPENDIX D: CROSS-TRAINING CURRICULUM

SEE SEPARATE DOCUMENT

Radiant Care

REVISIONS

Date	Changes	Requested By
APR 2020		F. Akano
NOV 2022		F. Akano
JUL 2024	Updated Infection Prevention Manual to Infection Prevention and Control Manual; corrected 'Routine Precautions & Additional Precautions Policy' to 'Routine Practices and Additional Precautions Policy'; updated 'Dietary Manual' to 'Nutrition Services Manual'	F. Akano
NOV 2025	Reference to Director of Clinical Services (DOCS) and Clinical Resources Lead removed; added Administrator Long-Term Care and Manager of Support Services to section 3.1; Human Resources Manager updated to Director of Human Resources; staffing levels updated for Pleasant Manor in 14.2	F. Akano
JUL 2026	Minor changes to staffing levels for PSWs and cooks	F. Akano

REVIEW

Review Date	Reviewed By	Review Date	Reviewed By
JUN 2015	C. Loewen		
JUL 2024	F. Akano		
NOV 2025	F. Akano		
JUL 2026	F. Akano		

APPENDIX C: CONTINUITY OF OPERATIONS PLAN

DIETARY 1
HOUSEKEEPING/LAUNDRY 3
MAINTENANCE 6
NURSING 7
SUPPORTIVE HOUSING 11
THERAPEUTIC RECREATION 12
HUMAN RESOURCES & PAYROLL 14

DIETARY

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Pleasant Manor

- 1 Cook and 3 Dietary Aide daily - each working a 12-hour shift
  - Cook 6:30am - 6:30pm
  - Dietary Aide 6:30 am - 6:30pm

Tabor Manor

- 1 Cook, 2 Dietary Aides daily - each working a 12-hour shift
  - Cook 6:30am - 6:30pm
  - Dietary Aides 7:30am - 7:30pm

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Pleasant Manor

- Initiate the pandemic menu (ready to serve foods, heat & serve foods).
- Offer only 1 choice, move to a staggered meal service - 2 seatings. If only 3 dietary aides, 1 serves one dining room the other two serve 2 dining rooms using 2 seating times. Any and all available staff to help deliver the plates and help feed.
- Paper and disposable products are used where possible. Apartment meal delivery is stopped. Apartment tenants must come to the central dining room if they want meals.

Tabor Manor

- Initiate the pandemic menu (ready to serve foods, heat & serve foods).
- Offer only 1 choice, move to a staggered meal service - 2 seatings. If only 2 dietary aides, each one serves 2 dining rooms using 2 seating times. Any and all available staff to help deliver the plates and help feed.
- Paper and disposable products are used where possible. Apartment meal delivery is stopped. Apartment tenants must come to the central dining room if they want meals.

Pinch Points

In any given shift/day within the department, the "pinch points" for which extra supports and human resources might be needed are:

Pleasant Manor & Tabor Manor

- Extra support is needed at point of service - all staff could assist in serving, plating and delivering meals, maintaining food safety standards.
- Extra support could be used in the main kitchen to put away food deliveries, wash dishes and prepare, heat and serve foods.

Redeployment for Direct Support

In a worst-case scenario where we are in full isolation, operating with minimal staff thresholds, and our focus is solely on directly supporting LTC residents and housing tenants, the tasks of the departmental supervisor and staff that could be temporarily postponed or paused are:

Pleasant Manor

- Manager of Support Services : RAPS, interviewing & reference checks, QHRnet approvals, care conference meetings, return to work meetings, other meetings, QIPs; staff discipline, projects, updates/changes in CCIM/HRIS & payroll changes, catering.
- Nutrition Manager: RAPS, audits, catering, meetings, shift replacements.
- Cooks: Preparing a full menu that has 2 choices, cleaning kitchen equipment.
- Diet Aides: Floor washing, restocking servery, putting away non-perishable food orders.

Tabor Manor

- Manager of Support Services : RAPS, interviewing & reference checks, QHRnet approvals, care conference meetings, return to work meetings, other meetings, QIPs; staff discipline, projects, updates/changes in CCIM/HRIS & payroll changes, catering.
- Nutrition Manager: RAPS, audits, catering, meetings, shift replacements.
- Cooks: Preparing a full menu that has 2 choices, cleaning kitchen equipment.
- Diet Aides: Floor washing, restocking servery, putting away non-perishable food orders.

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Pleasant Manor

- Nutrition Manager can assist with urgent needs.
- Some Dietary staff can be freed up to help with urgent needs.

Tabor Manor

- Nutrition Manager can assist with urgent needs.
- Some Dietary staff can be freed up to help with urgent needs.

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Pleasant Manor

- Manager of Support Services: QHRnet requests can be approved by Payroll or HR, Interviewing and reference checking can be done by HR, CCIM/HRIS changes can be done by Scheduler/Nursing Clerk, new hire orientations can be done by HR.
- Nutrition Manager: Food orders, chemical orders, paper products orders can be phoned in remotely by anyone; audits and shift replacements can be done by anyone.

- Cooks: All Cook tasks could be done by a Dietary Aide, particularly cooking heat and serve foods, doing inventory, putting away deliveries.
- Dietary Aides: All Dietary Aide tasks could be done by anyone, particularly setting up dining room, plating food, doing dishes, restocking serveries.

Tabor Manor

- Manager of Support Services: QHRnet requests can be approved by Payroll or HR, Interviewing and reference checking can be done by HR, CCIM/HRIS changes can be done by Scheduler/Nursing Clerk, new hire orientations can be done by HR.
- Nutrition Manager: Food orders, chemical orders, paper products orders can be phoned in remotely by anyone; audits and shift replacements can be done by anyone.
- Cooks: All Cook tasks could be done by a Dietary Aide, particularly cooking heat and serve foods, doing inventory, putting away deliveries.
- Dietary Aides: All Dietary Aide tasks could be done by anyone, particularly setting up dining room, plating food, doing dishes, restocking serveries.

Please see Appendix D for daily routines within the department that could be trained and carried out by other "non-credentialled" staff.

Resources

The resources a person who typically doesn't work in this department would need, (e.g., uniform(s), footwear, equipment, etc.), in order to be successful in their temporary support role, are:

Pleasant Manor & Tabor Manor

- Scrubs (or just plain clean clothing in a pinch), non-slip closed toe running shoes.
- Hairnet will be provided by the home.

HOUSEKEEPING/LAUNDRY

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Pleasant Manor

- 3 Housekeeper and 2 Laundry Aide daily - each working a 7.5 hour shift
    - Housekeeper 7am - 3pm
    - Laundry Aide 6am - 2pm

Tabor Manor

- 2 Housekeepers (one for LTC, one for apartments), 1 Laundry Aide daily - each working a 7.5 hour shift
    - Housekeepers & Laundry Aide 7am - 3pm

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Pleasant Manor

- Reduce the amount of laundry being washed - ill residents are put into johnny gowns or disposable gowns to reduce the amount of clothing to be washed.
- Switch to paper - disposable clothing protectors, and disposable wash cloths; longer turnaround of delivery of clothing carts.

- Any available staff help to deliver clothing carts and put clean clothes away; reduce deep cleans that are done in a day or postpone deep cleans.
- If down - 2 housekeepers - the remaining one can do basic tasks for each floor .
- If no housekeeper's then the dietary aides sweep and mop dining room floors
- Maintenance picks up garbage from each floor, PSWs help empty garbage's from the resident rooms; use any available staff to help clean where needed.

Tabor Manor

- Reduce the amount of laundry being washed - ill residents are put into johnny gowns or disposable gowns to reduce the amount of clothing to be washed.
- Switch to paper - disposable clothing protectors, and disposable wash cloths; longer turnaround of delivery of clothing carts.
- Any available staff help to deliver clothing carts and put clean clothes away; reduce deep cleans that are done in a day or postpone deep cleans.
- If down - 1 housekeepers - the remaining one can do basic tasks for each floor.
- If no housekeeper's then the dietary aides sweep and mop dining room floors
- Maintenance picks up garbage from each floor, PSWs help empty garbage's from the resident rooms; use any available staff to help clean where needed.

Pinch Points

In any given shift/day within the department, the "pinch points" for which extra supports and human resources might be needed are:

Pleasant Manor & Tabor Manor

- Extra support is needed for sanitizing high touch areas.
- Extra support could be used to fold and/or deliver clean laundry/clothing, empty garbage, sanitize high touch areas and refill soap and sanitizer dispensers.

Redeployment for Direct Support

In a worst-case scenario where we are in full isolation, operating with minimal staff thresholds and our focus is solely on directly supporting LTC residents and housing tenants, the tasks of the departmental supervisor and staff that could be temporarily postponed or paused are:

Pleasant Manor

- Manager of Support Services: RAPS, interviewing & reference checks, QHRnet approvals, care conference meetings, return to work meetings, other meetings, QIPs; staff discipline, projects, updates/changes in CCIM/HRIS & payroll changes, catering.
- Nutrition Manager: RAPS, audits, meetings, shift replacements.
- Laundry Aides: Folding, labeling.
- Housekeeping: Deep cleans, dusting, window cleaning, floor washing, sweeping, vacuuming, carpet cleaning.

Tabor Manor

- Manager of Support Services: RAPS, interviewing & reference checks, QHRnet approvals, care conference meetings, return to work meetings, other meetings, QIPs; staff discipline, projects, updates/changes in CCIM/HRIS & payroll changes, catering.
- Nutrition Manager: RAPS, audits, meetings, shift replacements.
- Laundry Aides: Folding, labeling.
- Housekeeping: Deep cleans, dusting, window cleaning, floor washing, sweeping, vacuuming, carpet cleaning.

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Pleasant Manor

- Manager of Support Services and Nutrition Manager can assist with urgent needs.
- Some Housekeeping and Laundry staff can be freed up to help with urgent needs.

Tabor Manor

- Manager of Support Services and Nutrition Manager can assist with urgent needs.
- Some Housekeeping and Laundry staff can be freed up to help with urgent needs.

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Pleasant Manor

- Manager of Support Services QHRnet requests can be approved by Payroll or HR, interviewing and reference checking can be done by HR, CCIM/HRIS changes can be done by Scheduler/Nursing Clerk, new hire orientations can be done by HR.
- Nutrition Manager: Food orders, chemical orders, paper products orders can be phoned in remotely by anyone; audits and shift replacements can be done by anyone.
- Laundry Aides: All laundry tasks could be done by anyone, particularly washing & folding laundry, labeling, laundry delivery.
- Housekeeping: All housekeeping tasks could be done by anyone, particularly emptying garbage, sanitizing high touch surfaces, sweeping/mopping/vacuuming floors, cleaning resident rooms.

Tabor Manor

- Manager of Support Services QHRnet requests can be approved by Payroll or HR, interviewing and reference checking can be done by HR, CCIM/HRIS changes can be done by Scheduler/Nursing Clerk, new hire orientations can be done by HR.
- Nutrition Manager: Food orders, chemical orders, paper products orders can be phoned in remotely by anyone; audits and shift replacements can be done by anyone.
- Laundry Aides: All laundry tasks could be done by anyone, particularly washing & folding laundry, labeling, laundry delivery.
- Housekeeping: All housekeeping tasks could be done by anyone, particularly emptying garbage, sanitizing high touch surfaces, sweeping/mopping/vacuuming floors, cleaning resident rooms.

Please see Appendix D for daily routines within the department that could be trained and carried out by other “non-credentialled” staff.

Resources

The resources a person who typically doesn’t work in this department would need, (e.g., uniform(s), footwear, equipment, etc.), in order to be successful in their temporary support role, are:

Pleasant Manor & Tabor Manor

- Scrubs (or just plain clean clothing in a pinch), non-slip running shoes.
- Cleaning equipment and supplies will be provided by the home.

MAINTENANCE

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Tabor Manor

- 1 Staff ~ 5 hours per day plus available on call. The 5 hours would have to be split 3 hours in the morning and 2 hours in the afternoon.

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Tabor Manor

- 5 hours split
  - 3 hours in the morning
  - 2 hours in the afternoon

7am start - collect the garbage, black bin cart outside of the garbage room in the parking garage. Go to 4th floor and exchange the full bin with the empty bin, in the garbage room in the storage hallway on each floor. At the same time on each floor the rounds need to be completed, check all fire exit lights, exits, lighting and heating/cooling. On 1st floor the receiving door needs to be unlocked.

8am - take the necessary bins out on the property. Monday morning the recycling bin from LTC needs to go out at 7am. Tuesday the garbage bin from Evergreen needs to come down to the garbage room in LTC in order to get the garbage completed for the morning, before garbage gets started. After the garbage is completed on Tuesday morning all 3 garbage bins need to go out to the garbage pad with the tractor. There is no bin pick up during the day on Wednesday and Thursday. The garbage bins from LTC will need to go out to the pad on Friday.

9am - rounds will need to be completed in 1,3,5 Tabor checking exit lights, fire exits, heating/cooling, lighting, leaks, general maintenance concerns. Complete any orders that are needed immediately.

10am - be on call until 1pm.

1pm - bring the bins in that need to be brought in.

2pm - complete the garbage in LTC.

3pm - be on call for emergencies until the following morning. We would require someone on-call all hours for emergencies. Emergency call lists available for contingency plan available to all.

Pinch Points

In any given shift/day within the department, the “pinch points” for which extra supports and human resources might be needed are:

Tabor Manor

- Pinch points could happen at any time in maintenance depending on any upcoming emergency, such as heating issues, plumbing issues, power failures, fire alarms, weather issues and refurbishing apartments and rooms.
- Garbage needs to be taken out of LTC twice a day.

Redeployment for Direct Support

In a worst-case scenario where we are in full isolation, operating with minimal staff thresholds, and our focus is solely on directly supporting LTC residents and housing tenants, the tasks of the departmental supervisor and staff that could be temporarily postponed or paused are:

Tabor Manor

- We could forgo the refurbishments of rooms in LTC if there were no admissions.

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Tabor Manor

- A minimum of one person is required to do routine duties. If fully staffed, 2 members of the team can be freed up to help where needed (unless an emergency arises).

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Tabor Manor

- All necessary daily maintenance routine duties, garbage, rounds, and weather-related issues.
- Step-by-step job detail would be provided by Maintenance Manager.

Resources

The resources a person who typically doesn't work in this department would need (e.g., uniform(s), footwear, equipment, etc.), in order to be successful in their temporary support role, are:

Tabor Manor

- Steel toed boots, work clothes (jeans and plain t-shirt).
- An extra set of keys would need to be made for doing the morning rounds.

NURSING

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Pleasant Manor	Tabor Manor
• Days = 1 RN, 4 RPN, 15 PSWs • Evenings = 1 RN, 4 RPN, 13 PSWs • Nights = 1 RN, 2RPN and 7 PSW • DOC/ADOC – to provide coverage if no Registered Nurse onsite	• Day = 1 RN, 3 RPNs, 12 PSWs • Evening = 1 RN, 3 RPNs, 12 PSWs • Night = 1 RN (for 1st & 2nd floors), 1 RPN (for 3rd & 4th floors), 5 PSWs (1 per floor + 1 float) • DOC/ADOC – to provide coverage if no Registered Nurse onsite

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Pleasant Manor	Nursing	PSWs
Days	• Screen/Assess sick	• Minimal care - toilet/hygiene/up in room

Pleasant Manor	Nursing	PSWs
	• Medications/essential (deprescribe) • Assist where able • Wounds as necessary/ • Hourly rounds • Keep PPE available BUT SECURE	• W/C residents sit in hallway/or in room • If sleeping, do not get them up (adding therapeutic mattresses) for comfort • Feed - in hallways - SUPERVISING OTHERS • NO BATHS • NO PORTERING
Evenings	• Screen/Assess sick • Medications/essential (deprescribe) • Assist where able • Wounds as necessary • Hourly rounds Keep PPE available BUT SECURE • Air temperature check	• Minimal care - toilet/hygiene/up in room • W/C residents sit in hallway/or in room • If sleeping - do not get them up • Feed - in hallways - SUPERVISING OTHERS • NO BATHS • NO PORTERING
Nights	• Screen/Assess sick • Medications/essential • Hourly rounds • Air temperature check	• Minimal care - toilet/hygiene • W/C residents sit in hallway/or in room (get up if awake)

	DOCS/ADOC
Pleasant Manor	• No meetings (quick updates only) • Infection control informal audits • No committee meetings • Screening • Help from room to room • Supervise feeding • Assist with medications - crucial • Complete audits

Tabor Manor	Nursing	PSWs
Days	• Screen/Assess sick • Medications/essential (deprescribe) • Assist where able • Wounds as necessary/ • Hourly rounds • Keep PPE available BUT SECURE	• Minimal care – toilet/hygiene/up in room • W/C residents sit in hallway/or in room • If sleeping, do not get them up (adding therapeutic mattresses) for comfort • Feed - in hallways - SUPERVISING OTHERS • NO BATHS • NO PORTERING
Evenings	• Screen/Assess sick • Medications/essential (deprescribe) • Assist where able • Wounds as necessary • Hourly rounds • Keep PPE available BUT SECURE	• Minimal care - toilet/hygiene/up in room • W/C residents sit in hallway/or in room • If sleeping - do not get them up • Feed - in hallways - SUPERVISING OTHERS • NO BATHS • NO PORTERING

Nights	• Screen/Assess sick • Medications/essential • Hourly rounds	• Minimal care - toilet/hygiene • W/C residents sit in hallway/or in room (get up if awake)

Tabor Manor	**DOCS/ADOC**
	• No meetings (quick updates only) • Infection control informal audits • No committee meetings • Advance planning - continue to anticipate supply needs • Implement: emergency medical directives (to be discussed with Physicians) • Assist on unit where able • Hourly rounds • Provide direction - PPE for other departments • Be the voice of infection control • Screening • Help from room to room • Supervise feeding • Assist with medications - crucial • Assess sick residents
	IPAC Lead
	• Complete audits • Be the voice of IPAC • Assist other with tasks

Pinch Points

In any given shift/day within the department, the "pinch points" for which extra supports, and human resources might be needed are:

Long-Term Care Home	Pleasant Manor	Tabor Manor
Days	• Assisting to serve food at meals • Helping residents sanitize • Feeding/supervising in hallway • Supplies/deliveries for nursing - need to be put away • Screening staff at the door • Answering phones at nursing station (evenings, weekends) • Rounds – safety checks • Snack delivery (outside doors)	• Screening • Assisting to serve food at meals • Helping residents sanitize • Feeding/supervising in hallway • Supplies/deliveries for nursing - need to be put away • Screening staff at the door • Answering phones at nursing station (evenings, weekends) • Rounds - safety checks • Snack delivery (outside doors)
Evening	• Assisting to serve food at meals • Helping residents sanitize • Feeding/supervising in hallway • Screening staff at the door • Answering phones at nursing station (evenings, weekends) • Rounds - safety checks • Snack delivery (outside doors)	• Screening • Assisting to serve food at meals • Helping residents sanitize • Feeding/supervising in hallway • Screening staff at the door • Answering phones at nursing station (evenings, weekends) • Rounds – safety checks • Snack delivery (outside doors)

Nights	• Hourly rounds • Bring up supplies from storage	• Hourly rounds • Bring up supplies from storage

Redeployment for Direct Support

In a worst-case scenario where we are in full isolation, operating with minimal staff thresholds, and our focus is solely on directly supporting LTC residents and housing tenants, the tasks of the departmental supervisor and staff that could be temporarily postponed or paused are:

Pleasant Manor & Tabor Manor

- Interviews - someone from HR could do this.
- Many small/time consuming things - most regulatory requirements (committees/audits).
- CCIM - can't make all the tile adjustments; someone will have to 'fix' and keep up with it (Scheduler or Payroll could do this).

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Pleasant Manor & Tabor Manor

- Nursing/PSWs not likely available to be freed up (except those on modified duties).
- Staff on modified duties could help with screening, answering phones, feeding, operating the transfer lift, assisting residents with grooming if able.

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Pleasant Manor & Tabor Manor

- See "Pinch Points" section above.
- Clerical - putting charts together for admissions LTC/ACTR.
- Feeding - teach (see Appendix D).
- Screening - teach (accuracy is important).
- Changing linens, straightening beds - teach.
- Supply inventory - teach.
- Calling family members for "scripted" general update.
- Connect with residents - social visit, reassurance, friendship.
- Vital signs (nursing students) - give them PCC access (those working as PSWs).
- Hire general duty Health Care Assistants or Nursing students - assign specific tasks.

Please see Appendix D for a brief training curriculum on feeding.

Resources

The resources a person who typically doesn't work in this department would need, (e.g., uniform(s), footwear, equipment, etc.), in order to be successful in their temporary support role, are:

Pleasant Manor & Tabor Manor

- Scrubs (or just plain clean clothing in a pinch) – pockets are helpful, non-slip running shoes
- No jewelry

SUPPORTIVE HOUSING

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Pleasant Manor

- 4 staff on days - if no baths provided.
- 3 staff on evenings - if no baths provided.
- Night shift could function with 2 staff, but would not meet fire orders.

Master schedule

- Re-divide work assignments.
- Reduce non-essential services (such as regular housekeeping services).

Tabor Manor

- 3 staff per shift as per fire orders – if no baths provided.
- Evening shift could function with 2 staff from 7pm - 11pm, but would not meet fire orders.
- Night shift could function with 2 staff, but would not meet fire orders.

Master schedule

- Re-divide work assignments.
- Reduce non-essential services (such as regular housekeeping services).

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Pleasant Manor

- 4 staff on days - if no baths provided.
- 3 staff on evenings - if no baths provided.
- Night shift could function with 2 staff but would not meet fire orders.
- Re-divide work assignments.
- Reduce non-essential services (such as regular housekeeping services).

Tabor Manor

- 3 staff per shift as per fire orders.
- Evening shift could function with 2 staff from 7pm-11pm but would not meet fire orders.
- Night shift could function with 2 staff but would not meet fire orders.
- With only 3 staff on days, we would not be able to provide baths.
- Re-divide work assignments.
- Reduce non-essential services (such as regular housekeeping services).

Pinch Points

In any given shift/day within the department, the “pinch points” for which extra supports and human resources might be needed are:

Pleasant Manor & Tabor Manor

- AM & HS Care, followed by meal times are the busiest times.
- Building coverage to allow baths to happen (fire coverage).

Redeployment for Direct Support

In a worst-case scenario where we are in full isolation, operating with minimal staff thresholds, and our focus is solely on directly supporting LTC residents and housing tenants, the tasks of the departmental supervisor and staff that could be temporarily postponed or paused are:

Pleasant Manor	Tabor Manor
• Doctor's clinic • Interviewing/orienting • Departmental meetings	• Doctor's clinic • Interviewing/orienting • Departmental meetings

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Pleasant Manor

- All PSWs Supportive Housing provide direct care.
- If Assistant Coordinator is a trained PSW, s/he could be re-deployed on the floor.

Tabor Manor

- All PSWs Supportive Housing provide direct care.

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Pleasant Manor & Tabor Manor

- Medication reminders
- Essential housekeeping
- Laundry and linen changes, bed making
- Work Assignments
- Meal delivery/service
- Safety checks
- Building fire watch
- Garbage collection
- Answering phone

Please see Appendix D for a brief cross-training curriculum for roles and tasks within the department that could be trained and carried out by other "non-credentialled" staff.

Resources

The resources a person who typically doesn't work in this department would need, (e.g., uniform(s), footwear, equipment, etc.), in order to be successful in their temporary support role, are:

Pleasant Manor & Tabor Manor

- Scrubs (or just plain clean clothing in a pinch) – pockets are helpful, non-slip running shoes.

THERAPEUTIC RECREATION

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Pleasant Manor
- Minimum of 3 staff per day. Will be flexible scheduling where need is most.
- Can change to longer shifts (12 hours if needed).
- Can split the start/end times of TR staff as needed.

Tabor Manor
- Minimum of 2 staff per day. Will be flexible scheduling where need is most.
- Can change to longer shifts (12 hours if needed).
- Can split the start/end times of TR staff as needed.

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Pleasant Manor
- If we were to continue operation of activities, they would be done one-to-one, small group activities.
- If activities cannot be done, staff would be assisting with care of residents, cleaning, dietary needs etc.

Tabor Manor
- With no outbreak: would provide 1:1 social contact for residents in rooms/hallways.
- Check-ins on floor to assess/determine where highest needs.
- Pre-planned activities for room delivery - try to eliminate responsive behaviour when rec staff not available.
- With an outbreak: will eliminate unnecessary staff responsibilities (no more programming - reassigning rec staff to highest area of need).
- Assigning floor(s) for check-ins, assessing for needs.

Pinch Points

In any given shift/day within the department, the “pinch points” for which extra supports and human resources might be needed are:

Pleasant Manor
- Assistance for responsive behaviour related to isolation - assist nursing to relieve demand on staff
- Friendly visiting for loneliness, depression etc.

Tabor Manor
- Assistance for responsive behaviour related to isolation - assist nursing to relieve demand on staff
- Friendly visiting for loneliness, depression, etc.
- When in outbreak: Floor assigning for check-in, support to highest needs.

Redeployment for Direct Support

In a worst-case scenario where we are in full isolation, operating with minimal staff thresholds, and our focus is solely on directly supporting LTC residents and housing tenants, the tasks of the departmental supervisor and staff that could be temporarily postponed or paused are:

Pleasant Manor & Tabor Manor
- All programs, especially group programs - Instead focus on one-to-one support for residents and tenants and support for other departments in completing necessary care/tasks.

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Pleasant Manor & Tabor Manor

- All Therapeutic Recreation staff.
- Therapeutic Recreation staff are lift and transfer trained so they can provide assistance as second person to PSW/Nursing staff.

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Pleasant Manor & Tabor Manor

- All programs and regular Therapeutic Recreation responsibilities.
- Therapeutic Recreation staff could set up activities in resident rooms or prepare individualized baskets of activities for each resident that staff could give to residents.

Please see Appendix D for a brief cross-training curriculum for roles and tasks within each department that could be trained and carried out by other "non-credentialled" staff.

Resources

The resources a person who typically doesn't work in this department would need, (e.g., uniform(s), footwear, equipment, etc.), in order to be successful in their temporary support role, are:

Pleasant Manor & Tabor Manor

- Access to Therapeutic Recreation laptop or iPad to connect with families if needed.
- Regular clothing.

HUMAN RESOURCES & PAYROLL

Minimum Staffing Thresholds

In a worst-case scenario, the absolute minimum staffing thresholds needed to operate the department are:

Radiant Care

- Two Payroll Staff
- Human Resource Coordinator x2
- Receptionist X2
- Director of Human Resources
- Assistant Director of Finance
- Junior Accountant - A/R
- Director of Finance
- Senior Accountant
- Junior Accountant - A/P

Continuity of Operations

In a worst-case scenario, operating at minimum staffing thresholds, the best, strongest contingency plan to ensure continuity of operations of/for the department is:

Radiant Care

The primary objectives of this department **are payroll processing, accounts receivable and accounts payable**. The assumption is that recruiting stops or is minimal and we are accessing agency staff and students. This will also impact financial statements and promissory notes.

- Shared Services staff have been equipped with corporate laptops with a VPN connection so they can access the server from home.
- Four staff members are trained to do payroll.
- In addition to Junior Accountant - Accounts Payable, two staff are trained to do part of the AP process, and there is a manual.

- In addition to Junior Accountant - Accounts Receivable, one staff is trained to do part of the AR process.

Pinch Points

In any given shift/day within the department, the “pinch points” for which extra supports and human resources might be needed are:

Radiant Care

- Pinch points would occur between HR, Reception and AP depending on where we are short. The receptionist assists with AP and AR back up as well as reception.

Redeployment for Direct Support

The following roles within this department can be freed up to support residents and tenants directly, should they be called upon to do so:

Radiant Care

- HR Coordinators
- Junior Accountant
- Senior Accountant (FT)
- Director of Finance (FT)
- HR & Payroll Coordinator
- Accounts Receivable (PT)

Cross-Training Curriculum for Tasks that Non-Credentialed Staff Can Do

Tasks associated with credentialled roles that could be carried out by non-credentialled staff are:

Radiant Care

- For the most part, we should not bring anyone in to perform roles if we do not have staff to oversee.

APPENDIX D: CROSS-TRAINING CURRICULUM

NURSING - FEEDING RESIDENTS

Feeding In an Outbreak / Crisis

- You may be asked to feed a resident in the dining room, hallway or in their room.
- You may have to wear gloves, a gown and/or a mask while feeding.
- You may be asked to feed a resident who is on a minced or a pureed texture.
- You may be asked to feed the main course plus the dessert.

Some things to note:

You may be asked to feed a resident who has dysphagia.
Dysphagia is defined by having a *difficulty* to drink, to eat or to swallow.

Causes of Dysphagia

Physiological:

- Stroke
- Diverticulitis
- Parkinson's disease, Multiple Sclerosis
- Dementia
- GERD
- Normal process of aging

Physical:

- Bad posture - client or helper
- Poor/limited dentition
- Poor oral hygiene
- Mouth pain (i.e., ulcers, tooth decay)

Symptoms of Dysphagia

Most common symptoms

- Food residue after swallowing
- Multiple swallows
- Cough (during/after swallowing), choking
- Pocketing
- Repetitive pneumonias
- Meal refusals

Coughing Reflex

One of the most common symptoms of choking is a cough. However, the body uses a physical mechanism to help clear the irritant, to remove the food "from the wrong hole". With age, there is less force therefore the reflex is less strong, even absent at times. Causing the choking risk to be higher for those individuals.

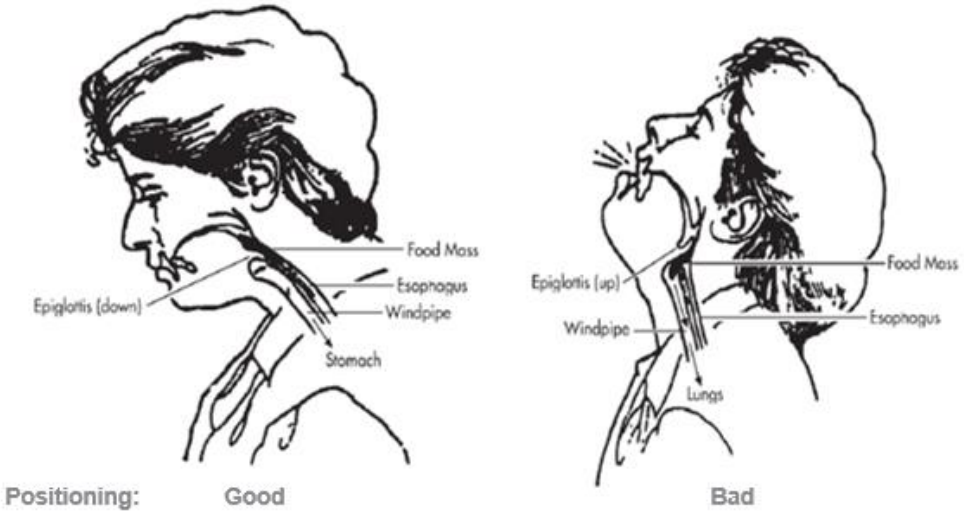
Silent Aspiration

This can be scary for not only you but the resident also. If you notice their eyes watering, they are wincing or their face is going red - immediately stop feeding and get a nurse.

When feeding:

- It is important to remain calm when feeding.
- Use a soft tone of voice; no shouting or yelling across the table.
- Cell-phones are prohibited.
- Outside food and drinks are prohibited while feeding.
- Stay with the resident throughout the entire meal service.
- Talk with the resident and not your co-workers.
- Be present and observe the resident for any signs of distress.
- Do not stand and feed.

Why Can't I Stand while Assisting?



Steps for Assisting at Meals

1. If applicable, tie long hair back.
2. Wash hands with soap and water.
3. If required, don the PPE (i.e., gloves, mask, gown).
4. Grab a green stool and approach Resident face-to-face.
5. Introduce yourself and explain why you are there; i.e., I'm here to *help* you with your breakfast, lunch or dinner.
6. Ensure Resident is sitting at 90 degrees, upright; if not, ask a PSW for assistance.
7. Place a clothing protector on the resident (non-disposable may be required).
8. Before offering any food - offer Resident a drink.
9. Offer/feed the protein first, then the starch/vegetable.
10. Ensure the resident has swallowed before offering/feeding the next spoonful of food.
11. Offer a couple bites of food and alternate with a drink.
12. Do not stir all the food together.
13. Promote independence by encouraging the Resident to do what they can (i.e., holding a piece of sandwich, holding fluid cup, putting food on fork).
14. Feed main course first, then dessert.
15. When finished, dispose of clothing protector and all items of meal tray in the garbage (if disposables were used).
16. Remove PPE and throw in the garbage; wash hands with soap & water.

Updated July 9, 2024

Feeding 101

Feeding:

1. Complete Hand Hygiene Protocol for yourself and then for your resident.
2. Make sure resident has dentures in (clean and rinsed).
3. Make sure resident has their glasses on.
4. Help set up the tray, open containers, put milk/sugar in coffee, straw in drink for the independent eater.
5. Watch the resident swallow first bites of food and drink.

Help residents who cannot eat independently:

1. Watch resident swallow first bites of food and drink.
2. Make sure they are in a comfortable position - sitting upright.
3. Provide fluids at the beginning of the meal (do not give all fluids before food).
4. Pace feeding to avoid fatigue.
5. Interact during the feed - talk to the resident.
6. Encourage self-feeding.
7. Allow resident to chew and swallow, two swallows between bites.
8. Chin should be down, neck should not be tilted back.
9. Place small amount of food on the spoon.
10. Encourage resident to chew and swallow.
11. Do not mix different textures, alternate liquid and bites of food.
12. Observe for signs of (pocketing food) - holding food in cheek without swallowing it
13. Make sure to keep track of what was eaten and what the resident had to drink (1/2 meal, full cup of coffee).

Appendix D: SUPPORTIVE HOUSING - Best Practices - Pandemic Plan

KITCHEN - Environmental Services - Housekeeping		
In wellness suites, wash dishes	Wipe down sink and counter; polish/dry taps	Wipe stove including dials
Wipe front and inside of microwave	Assess the cupboards and wipe down if needed	Wipe high touch areas like light switch, fridge handle, etc.
Wipe dining room table	Remove garbage if client preference	Specific clients may need help with cleaning out fridge – but will be indicated on care plan
GENERAL CLEAN – Environmental Services - Housekeeping		
If not in Outbreak - Vacuum all floors (working your way out towards the door), moving small items such as dining room chairs so you can get under the table		
Mop all floors (working your way out towards the door)		
BATHROOMS – Environmental Services - Housekeeping		
Clean mirror, sink and countertop	Wipe high touch areas including light switch, grab bars, etc.	Clean shower/tub, visually assess how high up to clean the walls, polish faucet, drain, etc. (if shower used by client, rinse, dust or wipe down)
Soak cloth with disinfectant and clean entire bathroom; clean toilet (including base) last		

WHAT WE DO NOT OFFER DURING PANDEMIC/CRISIS - Environmental Services - Housekeeping			
Dusting	Dishes	Windows	Cleaning inside oven
Cleaning inside fridge, defrosting fridge	Cleaning out pantries or closets	Wiping baseboards	Moving heavy furniture
Cleaning of balcony or patio	Pet care	Cleaning of light fixtures, changing light bulbs	Cleaning of balcony or patio

Best Practices - Environmental Services - LAUNDRY

LAUNDRY - Environmental Services		
Proper Personal Protective Equipment (PPE) to be used; proper body mechanics to be used	Locate and collect soiled laundry in apartment including towels, etc.	Gather client's personal necessities (e.g., detergent, softener, hangers; soaps/softeners; may be kept in storage)
Check pockets for Kleenex, hearing aids, money, valuables, etc.	Separate laundry - whites from darks (or as per client preference)	Follow instructions for washing machine and load laundry (following client's preference as located in Night binder)
Do **not** wash clients' laundry together; use name tag to distinguish each client's laundry	Make sure water temperature and the dryer temps are not too hot	Remove laundry from dryer as soon as possible, to avoid wrinkles, and return to client.
BEN LINEN CHANGE - Environmental Services		
• Change bed sheets, if require		• Put on fresh linens and make beds
EMPLOYER RAGS/TOWELS – Environmental Services		
• Wash rags/towels etc. used by Supportive Housing program according to schedule/necessity		

Best Practices - MEAL SERVICE/DELIVERY

SERVING - ARBORVIEW DINNING ROOM		
Mealtimes: 0800, Noon & 5:00 PM	Serving drinks, handing out meals	Clearing and cleaning tables
Reminding or escorting tenants from Arborview to table		
DELIVERING MEALS - ALL BUILDINGS		
Mealtimes: 0800, Noon & 5:00 PM	Picking up meal cart in Arborview dining room and going to as assigned (all buildings)	Delivering meals as labeled (each tray tells you which apartment)

ADDITIONAL BEST PRACTICES

Work Assignments

- Printing work assignments daily.
- Filling in assignments with specific duties/tenants as per day of schedule.

Customer Service Best Practices

- Knock, introduce yourself and the reason for your visit. Ensure you are wearing your name tag. Be friendly.
- Ensure that you are punctual and prepared.
- If client prefers their own products, you can use.
- Be observant - put in maintenance requests for items such as ants, leaky taps, burned out bulbs, etc.
- Be respectful of their belongings and accept responsibility immediately if you damage anything.
- Leave the front door the way you found it - locked/unlocked.

Safety Checks

- Knock first (or ring doorbell), wait for reply, knock again then enter, announcing yourself (except in the night, do not knock first).
- Ask tenant if everything is alright.
- If tenant is sleeping, check to see if he/she is breathing.
- Check environment; make sure water is not running from faucets or toilets; kettles and stoves/ovens are off.
- Leave door as you found it – locked/unlocked.

Building Fire Watch

- Responding to fire alarm, following direction of team lead/Fire Warden.

Garbage Collection

- Collect garbage from Arborview units.

Answering Phone

- Answering the Supportive Housing phone line - fielding and answering questions, directing staff as necessary.

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - COOK

6:30 AM - 2:30 PM COOK 1	
6:30 AM	Sign in • Read communication book; wash hands • Take temperatures for fridges and freezer • Plug in Hot Carts • Turn on ovens, steamer, steam table, kettle • Start cooking breakfast – complete by 8:00 am pick up • Fill pot sink & turn on dishwasher
6:45 AM	• Prepare porridge & eggs • Prep breakfast items
7:45 AM	• Have AV breakfast ready in cart
8:00 AM	• Make toast
8:25 AM	• Deliver Act/R. Serve
8:45 AM	• Serve main dining room • Wash pots and pans
9:15 AM	BREAK
9:30 AM	• Continue prepping lunch – NOT vegetables
10:00 AM	• Prep mashed potatoes • Continue cooking • Turn steamtables on
10:45 AM	• Prepare mince & pureed meats
11:00 AM	BREAK
11:40 AM	• Fill AV cart and HP steamtable with lunch items
12:10 PM	Delivery and serve lunch
12:30 PM	Serve in main dining room
12:45 PM	Wash pots and pans
1:15 PM	BREAK
1:30 PM	Pull freezer items & prep for next day; help dinner cook
2:30 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - COOK

10:30 AM - 6:30 PM COOK 2	
10:30 AM	Sign in • Read communication book; wash hands • Take temperatures for fridges and freezer • Plug in Hot Carts • Turn on ovens, steamer, steam table, kettle • Start cooking breakfast - complete by 8:00 am pick up • Fill pot sink & turn on dishwasher
11:00 AM	• Whip potatoes & clean equipment • Cook lunch vegetables
11:45 AM	• Take black thermal cart with food to AV kitchen • Place food in steamtable • Record temperatures
12:00 PM	BREAK
12:30 PM	• Return cart from AV to HP kitchen • Wash pots & pans • Write supper menu on board
1:00 PM	• Prep supper sandwich's & dessert
3:00 PM	BREAK
3:30 PM	• Continue supper prep • Turn on steamtables and steamer
4:15 PM	• Puree & mince dinner Items
4:45 PM	• Have Thermal cart ready
5:00 PM	• Load & transport portable steamtable for Act/R dining area • Serve
5:20 PM	• Return to main dining room and serve
5:45 PM	• Wash pots & pans • Clean cook's area • Record fridge & freezer temperatures
6:30 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES – DIETARY AID

7 AM - 3 PM Dietary Aide DA1	
7:00 AM	Sign in • Wash hands; read communication books • Listen to phone messages • Write menu board whenever possible
7:05 AM	• Turn on dishwasher, steamtable, coffee maker & toaster • Pour juices for breakfast • Make 3 pots of coffee & 1 tea
7:20 AM	• Put juices, creamers, butters, cereal & bananas on tables & trays
7:40 AM	• Make toast • Pour coffee and tea for trays & residents • Pick up cart at HP
8:00 AM	• Serve breakfast
8:25 AM	• Make coffee cart ready for hallway (creamers, sugar & cups)
8:45 AM	• Clear dining room, wash dishes & re-set tables • Refill condiments & jams • Pull breads =1 rye, 1 pumpernickel, 3 brown, white & brown buns=18)
9:30 AM	• Pour lunch juices • Wash breakfast trays
10:15 AM	BREAK
10:45 AM	• Prepare lunch trays • Restock kitchen
11:00 AM	• Get dessert from HP kitchen
11:15 AM	• Prepare bread, put out butters & creamers, make tea & coffee
11:30 AM	• Put out juices
11:45 AM	• Serve drinks
12:00 PM	• Serve lunch
12:45 PM	BREAK
1:15 PM	• Wash dishes • Collect creamers & butters from tables & refill
2:15 PM	• Reset tables with A3 Aide
2:40 PM	• Return cart to HP kitchen and take out garbage • Send tablecloths & dirty rags to laundry
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES – DIETARY AID

11 AM - 7 PM Dietary Aide DA2	
11:00 AM	Sign in • Wash hands; read communication books • Prep & distribute desserts and salads; organize meal trays • Collect meal change sheets
11:45 AM	• Serve tea & coffee to residents • 2 small teapots w boiling water
12:00 PM	• Help DA1 with plating meal • Serve 2nd cup coffee & tea
12:30 PM	BREAK
12:45 PM	• Clear dining room • Change tablecloths • Reset & stock sugar bowls and condiment bowls
2:00 PM	• Prepare and put out snack cart
2:30 PM	• Go to HP kitchen for restocking fridge • Clean & refill snack cart
3:00 PM	• Wash kitchen floors, tidy storeroom, juice machine
3:15 PM	BREAK
3:45 PM	• Prepare supper & breakfast trays • Pour juices • Prepare desserts
4:00 PM	• Turn on steam table & make 1 tea & 3 coffee • Make 2 more coffee after 1st round
4:15 PM	• Clean lounge coffee cart
4:30 PM	• Put out juices & desserts on tables
4:45 PM	• Serve tea and coffee
5:00 PM	• Plate dinner for residents • Return cart to HP kitchen • Record temperatures • Mark attendance • Clean steamtable
5:30 PM	BREAK
5:45 PM	• Record attendance. • Clear dining room, wash dishes & reset tables • Bring clothing protectors to Supportive Housing • Restock butter, cream, sugar etc., cups, bowls, napkins etc.; put jam on tables
6:50 PM	• Turn off lights and fans • Lock kitchen and take out garbage
7:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

3 PM - 8 PM Dietary Aid DA3	
3:00 PM	Sign in • Read communication book • Complete daily cleaning task • Do chemical order (Thursday) • Wash kitchen floor
3:30 PM	• Clean & re-stock snack cart
4:10 PM	• Prepare supper juices & put in fridge • Turn on coffee warmers
4:30 PM	• Make coffee & tea for supper • (1 coffee, 1 tea, 1 carafe hot water-Act/R) • (2 coffee, 1 tea-HP Dining Room)
4:40 PM	• Put cutlery & creamers on tables
4:50 PM	• Bring food cart to AV Kitchen
5:00 PM	• Pour juices & set cutlery in the A/R dining area
5:10 PM	• Pour juices & serve tea & coffee in Main Dining Room
5:20 PM	• Write food orders from residents using sample plates
5:30 PM	• Help the cook serve supper
5:50 PM	• Serve dessert (3 trays)
6:00 PM	BREAK
6:15 PM	• Clear & re-set tables in the A/R dining room
6:30 PM	• Clear tables in the Main Dining Room
6:50 PM	• Wash dishes
7:00 PM	• Prep snack cart • Begin making 1 coffee & 2 hot water for HS Snack Cart
7:20 PM	• Put dishes away & set Main Dining Room tables • Roll cutlery (14 sets of small spoons) • Put jam bowls on tables
7:35 PM	• Take out garbage
7:55 PM	• Turn out lights & lock all kitchen doors
8:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

7 AM - 3 PM Dietary Aide DA4	
7:00 AM	Sign in • Clean & re-stock snack cart • Make AM & PM snack cart juices • Plate lunch dessert and store in fridge
7:30 AM	• Begin making tea & coffee for breakfast • Pour juices for Main Dining Room breakfast & put in fridge
7:50 AM	• Put cutlery, butters & creamers on tables in Main Dining Room
8:00 AM	• Prepare Act/R Cart for breakfast with juices, milk & cutlery
8:15 AM	• Bring Act/R Cart to dining room and put cutlery on tables
8:45 AM	• Serve breakfast with the cook
9:15 AM	BREAK
9:30 AM	• Wash dishes • Clear & re-set A/R dining room • Clear Main Dining Room
10:15 AM	• Make coffee & tea for AM snack cart
11:00 AM	BREAK
11:30 AM	• Clean & stock • Prepare lunch drinks-2 coffee, 1 tea-main dining room
12:00 AM	• Set A/R dining room • 1 coffee, 1 tea-Act/R dining room
12:30 PM	• Serve lunch in main dining room
1:15 PM	BREAK
1:30 PM	• Clear, wash dishes and reset both dining rooms • Roll cutlery • Prepare snack cart • Make Drinks & Nourishments for next day
2:15 PM	• Put out snack cart in dining room
2:50 PM	• Take out garbage, cardboard
3:00 PM	Sign Out

*Extra job: Clean sugar caddies every Friday

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 1 Monday	
7:00 AM	Sign in • Clean Act/R dining room • Wash hallway, exercise area and library floor • Clean link hallway • Clean public areas • Vacuum TV/chapel area
7:30 AM	• Clean resident rooms when available
9:30 AM	BREAK
10:00 AM	• Go to Creekview • Check guest room & meeting room status • Clean checked out rooms • Start laundry • Clean front entrance, first floor, vacuum and handrails • Clean garbage room and entrance there
12:00 PM	• Go to HP • Finish cleaning Resident rooms • Vacuum hallway • Clean tub room
1:00 PM	BREAK
1:30 PM	• Clean tub HP & Act/R dining rooms • Clean family lounge, nurses' station, front entrance, public washrooms & any public area that has not been done • Wipe chairs and handrails
3:00 PM	Sign Out
7 AM - 3 PM Housekeeping 2 Monday	
7:00 AM	Sign in • Hair Salon • Wash floor, chapel and both dining rooms • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	BREAK
12:30 PM	• Clean front entrance, office, hallway • Clean lounge
1:30 PM	• AV dining room • Supportive Housing offices • Laundry • Chapel • Elevator • Washrooms
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 2 Tuesday	
7:00 AM	Sign in • Hair Salon • Wash floor, chapel and both dining rooms • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	BREAK
12:30 PM	• Clean front entrance, office, hallway • Clean lounge
1:30 PM	• AV dining room • Supportive Housing offices • Laundry • Chapel • Elevator • Washrooms
3:00 PM	Sign Out

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 2 Wednesday	
7:00 AM	Sign in • Wash chapel and both dining room floors • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	BREAK
12:30 PM	• Clean front entrance, office, hallway • Clean lounge
1:00 PM	• Entrances - including windows
1:30 PM	• Arborview hallway & dining room • Washrooms
2:00 PM	• Second Floor Oakview • Laundry rooms • Garbage rooms • Common rooms • Railings
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 2 Thursday	
7:00 AM	Sign in • Wash floor, chapel and both dining rooms • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	BREAK
12:30 PM	• Clean front entrance, office, hallway • Clean lounge
1:30 PM	• Arborview hallway & dining room & chairs • Washrooms
2:30 PM	• Garbage rooms • Fill in chemical order and drop off
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 1 Friday	
7:00 AM	Sign in • Clean Act/R dining room • Wash hallway, exercise area and library floor • Clean link hallway • Clean public areas
7:30 AM	• Clean resident rooms when available
9:30 AM	BREAK
10:00 AM	• Go to Creekview • Check guest room & meeting room status • Clean checked out rooms • Start laundry • Clean stairwells, wash handrails, glass and wash floors
12:00 PM	• Go to HP • Finish cleaning Resident rooms • Wash Act/R hallway • Clean tub room
1:00 PM	BREAK
1:30 PM	• Clean tub HP & Act/R dining rooms • Clean family lounge, nurses' station, front entrance, public washrooms & any public area that has not been done • Wipe chairs and handrails
3:00 PM	Sign Out
7 AM - 3 PM Housekeeping 2 Friday	
7:00 AM	Sign in • Wash floor, chapel and both dining rooms • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	BREAK
12:30 PM	• Clean front entrance, office, hallway • Clean lounge
1:30 PM	• Arborview hallway & dining room • Washrooms
2:00 PM	• Supportive Housing & offices • Laundry rooms • Garbage rooms • Common rooms
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 1 Saturday	
7:00 AM	Sign in • Clean Act/R dining room • Wash hallway, exercise area and library floor • Clean link hallway • Clean public areas
7:30 AM	• Clean resident rooms when available
9:30 AM	BREAK
10:00 AM	• Go to Creekview • Check guest room & meeting room status • Clean checked out rooms - start laundry • Clean basement, wash handrails, vacuum and bathrooms • Clean elevator
12:00 PM	• Go to HP • Finish cleaning Resident rooms • Wash Act/R hallway • Clean tub room
1:00 PM	BREAK
1:30 PM	• Clean tub HP & Act/R dining rooms • Clean family lounge, nurses' station, front entrance, public washrooms & any public area that has not been done • Wipe chairs and handrails
3:00 PM	Sign Out
7 AM - 3 PM Housekeeping 2 Saturday	
7:00 AM	Sign in • Wash floor, chapel and both dining rooms • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	• Clean front entrance, office, hallway • OV Entrance (by chapel)
12:30 PM	BREAK
1:30 PM	• Second floor AV – vacuum, laundry rooms
2:00 PM	• All common rooms • Washrooms
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeping 2 Sunday	
7:00 AM	Sign in • Wash floor, chapel and both dining rooms • Clean visitor and staff bathroom • Clean resident rooms
10:00 AM	BREAK
10:30 AM	• Continue cleaning resident rooms • Both dining rooms
12:00 PM	BREAK
12:30 PM	• Clean front entrance, office, hallway • Clean lounge
1:00 PM	• All entrances - including windows
1:30 PM	• AV dining room • Hallways
2:00 PM	• All common rooms • Washrooms • Garbages
3:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - LAUNDRY

6 AM - 2 PM Laundry Monday	
6:00 AM	Sign in • Check guest list reservations • Check Labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in a small barrel washer (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start housekeeping rags and mopheads in small barrel washer (card for micro-fiber, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging
10:00 AM	BREAK
10:30 AM	• Vacuum meeting room, clean bathrooms and guest room if used • Continue folding - leave bin of aprons/towels for resident folding
12:10 PM	• Deliver personals, collect empty white hangers from residents' closets
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Turn off machines
2:00 PM	Sign Out

DAILY ROUTINES - LAUNDRY

6 AM - 2 PM Laundry Tuesday	
6:00 AM	Sign in • Check guest list reservations • Check Labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in a small barrel washer (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start housekeeping rags and mopheads in small barrel washer (card for micro-fiber, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging
10:00 AM	BREAK
10:30 AM	• Clean bathrooms, elevator and guest room if used • Continue folding - LEAVE bin of aprons/towels for resident folding
10:45 AM	• Vacuum Brookview hall and club room
11:15 AM	• Deliver personals, collect empty white hangers from residents' closets
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Use central vac to clean out lint traps • Turn off machines
2:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - LAUNDRY

6 AM - 2 PM Laundry Wednesday	
6:00 AM	Sign in • Check guest list reservations • Check Labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in a small barrel washer. (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start housekeeping rags and mopheads in small barrel washer (card for micro-fiber, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging
10:00 AM	BREAK
10:30 AM	• Clean staff room, elevator, parking garage entrance to basement; check bowling alley • Continue folding - LEAVE bin of aprons/towels for resident folding
12:00 PM	• Deliver personals, collect empty white hangers from residents' closets
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Turn off machines
2:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES - LAUNDRY

6 AM - 2 PM Laundry Thursday	
6:00 AM	Sign in • Check guest list reservations • Take CV key for Sawatsky apt.#414 cleaning every other Thursday; use Hsk cart on 2nd floor; fill in invoice (black binder) and give to Destiny • Take inventory and put in chemical orders poke outside HP kitchen door; check labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in small barrel washer (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Clean bathroom • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start Hsk rags and mopheads in small barrel washer (card for micro-fibre, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging
10:00 AM	BREAK
10:30 AM	• Continue folding - LEAVE bin of aprons/towels for resident folding
12:10 PM	• Deliver personals, collect empty white hangers from residents' closets
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Use central vac to clean out lint traps • Turn off machines
2:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES – LAUNDRY

6 AM - 2 PM Laundry Friday	
6:00 AM	Sign in • Check guest list reservations • Check Labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in small barrel washer (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start Hsk rags and mopheads in small barrel washer (card for micro-fibre, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging
10:00 AM	BREAK
10:30 AM	• Continue folding - LEAVE bin of aprons/towels for resident folding
12:10 PM	• Deliver personals, collect empty white hangers from residents' closets
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Turn off machines
2:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES – LAUNDRY

6 AM - 2 PM Laundry Saturday	
6:00 AM	Sign in • Check guest list reservations • Check Labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in small barrel washer (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start Hsk rags and mopheads in small barrel washer (card for micro-fibre, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging
10:00 AM	BREAK
10:30 AM	• Week 1: Bathrooms, staff room, laundry hallway, parking garage, BV entrance • Week 2: Bathrooms, staff room, BV Garbage room & hallway
12:10 PM	• Deliver personals, collect empty white hangers from residents' closets
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Use central vac to clean lint traps • Wash floor • Turn off machines
2:00 PM	Sign Out

APPENDIX D
RADIANT CARE PLEASANT MANOR SERVICES - ROUTINES

DAILY ROUTINES – LAUNDRY

6 AM - 2 PM Laundry Sunday	
6:00 AM	Sign in • Check guest list reservations • Check Labelling hamper and label clothing • Sort blue, white, red and brown bags into dirty grey bins • Start load of apron in small barrel washer (card for bibs & pads, program 1); turn to start, press hot water and on button (50-minute cycle) • Clean staff room • Start tablecloths in one small washer and rags in the other • Start linens, towels and soaker pads in large barrel washer (program 4) • Transfer all wash to dryers • Start personal laundry (program 2) • Start Hsk rags and mopheads in small barrel washer (card for micro-fibre, program 1) 45-minute cycle • Start C.C. bags in small washers • Fold
7:50 AM	• Deliver aprons, kitchen bags with 12 mopheads • Refill linen mesh bags • Deliver any housekeeping mopheads
8:00 AM	• Keep on folding and hanging - LEAVE bin of aprons/towels for resident folding
10:00 AM	BREAK
10:30 AM	• Week 1: Elevator, railings, staircase, guest room (if booked), BV railings, glass, club room • Week 2: BV entrance/HP entrance, mailboxes, trash, floors, and glass • Continue folding
12:10 PM	• Deliver personals, C.C. white bags
1:00 PM	BREAK
1:30 PM	• Clean out lint trap, wash folding table, Lysol grey bins • Empty garbage's, bring to silver trailer behind orange tractor in parking garage • Wash floor
1:40 PM	• Deliver all linen (pm cart) • Stock all bath towels in tub room • Turn off machines
2:00 PM	Sign Out

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

6 AM - 2 PM Early FT Dietary Aide - E5		
6:00 AM	Sign in • Sign in. Wash hands. Read communication books • Start dishwasher and fill sinks in dish room. Record temperature. • Read menu. Pull lunch desserts from fridge and portion, mince & puree	• Prepare desserts for apartment trays – portion in tulip dish, cover and place in fridge. See sheets by cooks' station for Mapleview & Evergreen • Wash blenders. Do own dishes & clean work area
7:00 AM	• Prepare cart to bring to kitchen: breakfast fruit, lunch dessert, stock, and go to 1 Tabor • Turn on steam table, toaster, dishwasher • Take fridge & freezer temperatures	• Prepare juice cart • Portion desserts and put in fridge for lunch • Roll cutlery • Prepare dirty dish cart and place in dining room. Check dining room for dirty trays
7: 30 AM	• Make toast • Prepare 2 carafes of hot water & 1 tea	• Roll breakfast cutlery
8:00 AM	• Pick up cart for breakfast • Place food in steam table	• Take and record food temperatures • Make 2 carafes of coffee
8:30 AM	• Serve breakfast	
9:00 AM	• Throw out extra food in pail • Turn off steam table. **When cooled, drain** • Bring food pail and dishes to main kitchen. Clean cart	
9:15 AM	BREAK	
9:45 AM	• Clean tables and sanitize all surfaces • Wash dishes	• Roll cutlery for lunch. Reset tables • Prepare drink cart
10:45 AM	BREAK	
11:15 AM	• Turn on steam table • Set-up tables for lunch • Set-up dirty dish cart for lunch	• Prepare tea and coffee for service. • Pick up cart for lunch from 7 Tabor
11:30 AM	• Place food in steam table	• Take and record food temperatures
11:45 AM	• Take orders OR serve juice and coffee	
12:00 PM	• Serve lunch. Serve desserts once lunch plates are removed from the table. While serving desserts, take orders for next day's lunch. Place filled sheet on hot cart, to bring back at 7 Tabor	
1:00 PM	• Throw out extra food in pail • Turn off steam table. **When cooled, drain** • Clean tables and sanitize all surfaces	• Wash dishes • Reset tables for dinner
1:30 PM	• Empty and clean dishwasher • To bring at 7 Tabor: dirty laundry bag; food pail; dishes. Clean cart	• Double bag garbage and bring to dumpster • Bring Mapleview cart to 7 Tabor kitchen
2:00 PM	Sign Out	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

11 AM - 7 PM Late FT Dietary Aide - L6		
11:00 AM	Sign in • Sign in. Read communication books. Wash hands. • Prepare regular, minced and pureed salads for supper • Prepare regular, minced and pureed fruit for supper	• Prepare regular, minced and pureed fruit for next day breakfast • Make jugs of thickened fluids for next day *Monday & Thursdays: Complete all labelled drinks
1:00 PM	BREAK	
1:30 PM	• Portion desserts for all floors for dinner including minced and pureed	• Clean and sanitize your work area
3:30 PM	BREAK	
4:00 PM	• Go to 1 Tabor and bring any required stock • Turn on steam table, and dishwasher • Set up dirty dish cart • Set up dining room • Prepare juice & coffee carts & give to PSWs.	
4:45 PM	• Get food from main kitchen. Place it in steam table • Take and record food temperatures	
5:00 PM	• Serve supper. Serve desserts once dinner plates are removed from the table. While serving desserts, take orders for next day's supper. Place filled sheet on hot cart, to bring back at 7 Tabor	
6:00 PM	• Clear steam table. Clean appropriately • Clear tables. Wash pots • Sanitize dining room tables and servery counters • Record dish washer temperatures • Empty dishwasher, clean and turn off. Clean and sanitize 2 compartment sink by lifting strainer • Prepare cart breakfast juice • Roll cutlery for breakfast	• Sweep and mop servery floor area • Prepare soiled utility cart in the dining room area for soiled cups, glasses etc. • Check for stock if anything required write down • Bring cart with clean dishes, stock list to main kitchen. Bring any laundry that needs to be done bring to the laundry room • Pick up Mapleview (MV) cart from basement and bring to main kitchen
7:00 PM	Sign Out	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

11 AM - 7 PM Dietary Aide - L1		
11:00 AM	**Sign in** • Sign In. Read communication book. Wash hands.	• Check PM/HS weekly snack list. • Prepare HS nourishment (regular, minced and puree) for that day.

12:30 PM	• Prepare all nourishment labels for all floors including yogurts and prunes.
	  ○ For the yogurt: use the divided yogurt (in clear plastic containers) as needed (refer to yellow sheet in nourishment label binder, for the Residents on a pureed diet); use lactose-free for designated Residents
	  ○ Ensure there are trays of divided yogurt in the fridge for the next L1 shift
	• Stock nourishment cart.	

1:30 PM	**BREAK**	

2:00 PM	• Make Juices for the floors.
	• <u>On delivery days (Mondays, Thursdays)</u>: put away fridge items; help PRC/cook put away freezer items.
		• Prepare PM nourishment (regular, minced, puree) for the next day.
		  ○ **<u>Please note:</u>** Ensure that the cookie is suitable for minced. If not, provide a softer cookie for minced and label
		  ○ **<u>Please note:</u>** On Wednesdays, for cake and coffee, please put all types of cake (i.e. angel food cake, chocolate, carrot) on a plate *do not leave in the plastic container

2:45 PM	• Load up carts for 1st and 2nd (for L2) to take to the floors. • <u>On Sundays, Tuesdays and Thursdays:</u> Bring dialysis bag to 2nd floor (before 3pm) <u>On Mondays, Wednesdays and Fridays:</u> Bring dialysis bag to 1st floor (before 3pm)	
3:30 PM	**BREAK**	
4:00 PM	• Go to servery, bring juice key and any stock that is required. • Turn on steam table, overhead heat lamp and dish washer. • Set tables/fold clothing protectors if needed.	• Record fridges temperatures. • Set up plates/soup bowls/serving utensils. • Portion out desserts. • Check the communication book for daily updates.
4:30 PM	• Go to the main kitchen to get the food cart & any other supplies needed.	
4:45 PM	• Give juice and coffee cart to PSW's. • Put food in the steam table.	• Record food temperatures. • Take residents food orders
5:00 PM	• Serve supper. Serve desserts once dinner plates are removed from the table.	
5:30 PM	• Clear steam table/**scrape out inserts with spatula** and place in hot cart. • Put laundry down laundry chute.	• Go to main kitchen. Bring down dirty pots. Discard left over food. If no PRC, do own pots and & bag left over food. • Take and record food temperatures

11 AM - 7 PM Dietary Aide - L1 (cont'd)		
6:00 PM	• Go to servery; continue washing dishes & clear any tables that have not been done. • Record dish washer temperature. • Empty dishwasher, clean and turn off. Clean and sanitize 2 compartment sink by lifting strainer. • Leave soiled utility cart in the dining room area for soiled cups, glasses etc. from residents room. • Drain and sanitize steam table. • Sanitize dining room tables and servery counters.	• Prepare cart for H.S. nourishment: variety of juices, milk/chocolate milk, ice water, one bucket of ice, labelled nourishments and sandwiches. • Roll cutlery for breakfast. • Ensure all Taps are shut off and sign tap off sheet. • Spot sweep and mop servery floor area. • Remove garbage • Check for stock if anything required, write down and post in main kitchen so early aide can bring it up. Turn off juice machine and lock up. Bring juice key to the kitchen.
7:00 PM	**Sign Out**	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

3:30 PM - 7:30 PM PT Dietary Aide - L2		
3:30 PM	**Sign In** • Read communication book. Wash hands. • Prepare work area for L1, on 1st floor servery. • Go to 2nd floor servery, bring juice key and any stock that is required.	• Turn on steam table, overhead heat lamp and dish washer. • Clean dishes from PM nourishments. Set up dirty dish cart. • Prepare desserts.
4:20 PM	• Set up dining room. • **Prepare tea and coffee for service.** Prepare rest of cart. • Prepare juice cart: orange juice, cranberry, apple, peach, milk, chocolate milk, straws, lids, glasses for supper and H.S. snack.	
4:30 PM	• Give juice and coffee cart to PSW's	
4:45 PM	• Get food from main kitchen • Put in steam table in you server	• Take and record food temperatures
5:00 PM	• Serve supper. Serve desserts once dinner plates are removed from the table.	
5:30 PM	• Clear steam table/**scrape out inserts with spatula** and place in hot cart • Put laundry down laundry chute **by 6:30pm**	• Start washing cutleries and plates through the dish washer. • Go to main kitchen discard left over food.
6:00 PM	BREAK	
6:15 PM	• Go to servery, continue with cleaning dishes. Be sure to close servery doors. • Sanitize dining room tables and servery counters. • Record dishwasher temperatures. • Empty dishwasher, clean and turn off. Clean and sanitize 2 compartment sink by lifting strainer. • Spot sweep and mop servery floor area. • Prepare cart for H.S. nourishment: variety of juices, milk/chocolate milk, ice water, one bucket of ice, labelled nourishments and sandwiches. • Leave soiled utility cart in the dining room area for soiled cups, glasses etc from residents' room.	
7:15 PM	• Roll cutlery for breakfast. • Check for stock if anything required write down and post in main kitchen so early aide can bring it up. Turn off juice machine and lock up. Bring juice key to the kitchen	
7:30 PM	SIGN OUT	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

3:30 PM - 7:30 PM PT Dietary Aide - L3		
3:30 PM	Sign In *Monday & Thursdays: Put away dry goods with L4 shift. Tuesday, Wednesday, Friday, Saturday & Sundays: Complete labelled drinks (1st and 2nd floor) with L4	
4:10 PM	• Go to servery, bring juice key and any stock that is required. • Turn on steam table, overhead heat lamp and dish washer.	• Clean dishes from PM nourishments. Set up dirty dish cart. • Prepare desserts.
4:30 PM	• Set up dining room. • **Prepare tea and coffee for service.** Prepare rest of cart.	• Prepare juice cart: orange juice, cranberry, apple, peach, milk, chocolate milk, straws, lids, glasses for supper.
4:45 PM	• Get food from main kitchen. Put in steam table. • Take and record food temperatures	
5:00 PM	• Serve supper. Serve desserts once dinner plates are removed from the table.	
5:30 PM	• Clear steam table/**scrape out inserts with spatula** and place in hot cart • Put laundry down laundry chute **by 6:30pm**	• Start washing cutleries and plates through the dish washer. • Go to main kitchen discard left over food.
6:00 PM	BREAK	
6:15 PM	• Go to servery, continue with cleaning dishes. Be sure to close servery doors. • Sanitize dining room tables and servery counters. • Record dishwasher temperatures. • Empty dishwasher, clean and turn off. Clean and sanitize 2 compartment sink by lifting strainer. • Spot sweep and mop servery floor area. • Prepare cart for H.S. nourishment: variety of juices, milk/chocolate milk, ice water, one bucket of ice, labelled nourishments and sandwiches. • Leave soiled utility cart in the dining room area for soiled cups, glasses etc from residents' room.	
7:15 PM	• Roll cutlery for breakfast. • Check for stock if anything required write down and post in main kitchen so early aide can bring it up. Turn off juice machine and lock up. Bring juice key to the kitchen	
7:30 PM	SIGN OUT	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DIETARY AID

3:30 PM - 7:30 PM PT Dietary Aide - L4		
3:30 PM	Sign In *Monday & Thursdays: Put away dry goods with L3 shift. Tuesday, Wednesday, Fridays, Saturday & Sundays: Complete labelled drinks (split labels equally) with L3.	
4:10 PM	• Go to servery, bring juice key and any stock that is required. • Turn on steam table, overhead heat lamp and dish washer.	• Clean dishes from PM nourishments. Set up dirty dish cart. • Prepare desserts.
4:30 PM	• Set up dining room. • **Prepare tea and coffee for service.** Prepare rest of cart.	• Prepare juice cart: orange juice, cranberry, apple, peach, milk, chocolate milk, straws, lids, glasses for supper and H.S. snack.
4:45 PM	• Get food from main kitchen. • Put in steam table in your servery.	• Take and record food temperatures.
5:00 PM	• Serve supper. Serve desserts once dinner plates are removed from the table.	
5:30 PM	• Clear steam table/**scrape out inserts with spatula** and place in hot cart • Put laundry down laundry chute **by 6:30pm**	• Start washing cutleries and plates through the dish washer. • Go to main kitchen discard left over food.
6:00 PM	BREAK	
6:15 PM	• Go to servery, continue with cleaning dishes. Be sure to close servery doors. • Sanitize dining room tables and servery counters. • Record dishwasher temperatures. • Empty dishwasher, clean and turn off. Clean and sanitize 2 compartment sink by lifting strainer. • Spot sweep and mop servery floor area. • Prepare cart for H.S. nourishment: variety of juices, milk/chocolate milk, ice water, one bucket of ice, labelled nourishments and sandwiches. • Leave soiled utility cart in the dining room area for soiled cups, glasses etc from residents' room.	
7:15 PM	• Roll cutlery for breakfast. • Check for stock if anything required write down and post in main kitchen so early aide can bring it up. Turn off juice machine and lock up. Bring juice key to the kitchen	
7:30 PM	SIGN OUT	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - COOK

6 AM - 2 PM Early Cook		
6:00 AM	Sign in • Sign In. Read communication book. Wash hands • Take temperatures for fridges and freezer • Plug in Hot Carts	• Turn on ovens, steamer, steam table, kettle • Start cooking breakfast – complete by 8:00 a.m. pick up
9:00 AM	• For mashed/boiled potatoes, put in steamer • Prepare lunch meats	• Pan out vegetables for late cook • If on menu: make rice; prepare beets
10:30 AM	BREAK	
11:00 AM	• Follow prep & pull sheets • Ensure carts are ready for pick-up at 11:30 a.m.	• Prepare trays for the apartments • Bring cart to Evergreen (while late cook brings to Mapleview)
12:00 PM	BREAK	
12:30 PM	• Complete all tasks regarding baked/cooked items. Pull /prep for next day's menu. Clean and sanitize equipment used.	
2:00 PM	Sign Out	
10 AM - 6 PM Late Cook		
10:00 AM	• Sign In • Read communication book. Wash hands. 5 min huddle with Early Cook. • Put veg in steamer	• Make the potatoes and or pasta • Mince/Puree • Record temperatures
11:00 AM	• Start the soup for supper • Prepare sandwiches	• Mince/Puree • Bring food cart to Mapleview
12:30 PM	BREAK	
1:00 PM	• Begin second choice • Cook hot vegetables (if applicable) • Puree soup/ thicken/mince/puree.	• Record food temperatures • Place food in carts
2:30 PM	BREAK	
3:30 PM	• Prepare items for the home support trays. Prep/pull for next day • Record food temperatures. • Refill oatmeal, flour, sugar, oil. Deliver MV and EV supper carts.	• Sanitize all work areas & equipment. Sweep floor. Wipe out microwave. • Record final temperatures of fridge & freezers.
6:00 PM	Sign Out	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - DISHWASHER

11 AM - 7 PM FT P.R.C. (Dishwasher)		
11:00 AM	Sign in • Sign in. • Read communication book. Wash hands. • Record dishwasher temperature. • Clean and fill 3 sinks • Fill sanitizing red bucket	• Scrub pots in soaker sink and organize to put through dishwasher • Continue to scrub while dishwasher is cycling. Put dishes away • Check garbage & recycling in kitchen, empty as required • On delivery days (Mon & Thurs), put away freezer stock items
1:30 PM	BREAK	
2:00 PM	• Get cart from Evergreen (EG) (solarium) • Resume washing pots and pans	• Take out garbage
3:30 PM	• Clean fridge shelves and floors	• Clean and wash out garbage and recycling bins in the pressure washer area
4:30 PM	• Bring EG/MV carts to Supportive Housing • Sweep and mop kitchen floors (including dry storeroom). Put wet floor signs up. • Take garbage and recycling to garbage room.	• Deep clean dish machine • Once a week, use the floor machine on the kitchen/dish room floor. Alternate sections of the floor and alternate a Tuesday one week, Friday the next week.
5:00 PM	BREAK	
5:30 PM	• Record dishwasher temperatures • Continue washing and put away all dishes	• Check and empty all garbage • Sweep and mop dish-room floor (put up wet floor signs).
6:30 PM	• Empty and clean dishwasher filters • Clean garburator, run through dishwasher. • Put away garbage and dirty cloths	• Check chemicals and fill if necessary • Deep clean dish machine • Flush floor grate in dishwashing room *WEEKLY: clean floor grate
6:45 PM	• Pick up meal carts from MV/EG.	• Turn dishwasher off, wipe down & sanitize all work areas
7:00 PM	Sign Out	

WEEKLY P.R.C. DUTIES - see next page

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

Weekly P.R.C. Duties (Monday & Thursday - Delivery Day**)

MONDAY**	TUESDAY	WEDNESDAY	THURSDAY **	FRIDAY	SATURDAY	SUNDAY
• Put away freezer goods • -Empty bread racks from kitchen and put in main hallway	• Organize dry storage room • Receive and put away remainder of delivery • Wash kitchen floor using the floor machine	• Sweep and mop kitchen fridge and floors • Put removable shelves from fridge in the dishwasher	• Put away freezer goods • Empty Break Racks • Clean Floor Grate	• Organize bread order, if needed • Wash kitchen floor using the floor machine	• Do general cleaning as required	• Clean and organize walk in freezer • Wet mop floor in freezer • Pull out vegetables for following day (lunch & dinner) and leave on different cart

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - ENVIRONMENTAL SERVICES

7 AM - 3 PM Laundry Aide A		
7:00 AM	Sign in • Read communication book. Wash hands. • Obtain gloves to use for sorting. Sort and start any laundry that has come down. • Load clothing protectors in big washer. • Put kitchen towels in small washer	• Sort laundry: separate dark personals; white personals can go with sheets and towels • Start load of towels/sheets/soaker pads in large washer. • Prep cart for later delivery • Empty dryers when they stop and reload • Fold sheets, blue gowns, personal nightwear and socks
9:00 AM	BREAK	
9:30 AM	• Deliver one linen cart by 11:00 am.	• Deliver one clothing cart by 11:30 am.
12:00 PM	BREAK	
12:30 PM	• Continue with laundry duties • Start washing clothing protectors, kitchen towels, and any laundry that was dropped • Work on labelling clothing if required.	• Fold clothing protectors, kitchen towels, and deliver • Start any laundry that has been dropped
1:00 PM	• Deliver linen cart • Clean laundry room	• On Fridays – bring the lost & found cart to the Great Room (if required) • On Sundays – bring the lost & found cart back to the laundry room.
3:00 AM	Sign Out	
7 AM - 3 PM Laundry Aide B		
7:00 AM	Sign in • Read communication book. Wash hands. • Put day-of clothing in large washer. • Sort dirty laundry and fill machines. • Empty washers and dryers as they stop & re-load.	• Fold clothing protectors and deliver. • Fold kitchen laundry and deliver. • Ensure that two floors of hanging are complete by 10 a.m.
9:30 AM	BREAK	
10:00 AM	• Continue folding and hanging clothes. • Fold the remaining linens. • Empty machines and load dryer when stopped	• Deliver 1 linen cart to the floor at 11:00 am. • Deliver 1 clothing cart (if ready).
12:30 PM	BREAK	

1:00 PM	• Deliver 2nd clothing cart if ready.
	• Complete the remaining laundry from the afternoon drop
	  • Continue with folding any kitchen laundry / deliver.
	  • Wipe down all machines & all touch surfaces, handles, tables using of water + Patriot 15 and microfiber cloth
		• Wednesday & Sunday: Wash plastic filter behind Washer #1
		• Wash floors twice a week (minimum once with floor machine)
		• Take out garbage & recycling
		• Clean dryer lint underneath machines (big and small dryers).

3:00 PM	Sign Out	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeper H1		
7:00 AM	Sign in • Read communication book. Wash hands. • Stock cleaning cart • Sweep & wash dining room floor. Empty garbages. • Wash floor in entrance area, vacuum carpets. During the winter season, use floor machine daily to remove salt. • Dust behind the lobby benches, including vents and window sills • Clean and disinfect all 3 public washrooms, empty garbages, wash floors.	• Clean and disinfect Café area & Great Room (if needed) and empty garbages. • Check receiving room and clean as needed. • Wipe glass door and receiving area. • Wipe windows/doors as needed. • When needed, clean private dining room. • Clean and disinfect family lounge and spot vacuum, when necessary. Empty garbage/recycling. • Clean and disinfect staff washrooms and empty garbage. • Sanitize activation area. Wash floor. Empty garbage. • Clean elevator doors & inside elevators with water and blue microfiber.
9:00 AM	BREAK	
9:30 AM	• Clean and disinfect nursing station & med room and empty garbage. • Sweep dining room and spot wash • Continue full cleans (refer to schedule)	• Full Clean Schedule ○ Monday: 101-105 ○ Tuesday: 106-110 ○ Wednesday: 111-115 ○ Thursday: 116-120 ○ Friday: 121-126 • Touch Clean Schedule (sweep floor, and wash when necessary, disinfect toilet and sink) ○ Monday: 106-126 ○ Tuesday: 101-105, 111-126 ○ Wednesday: 101-110, 116-126 ○ Thursday: 101-115, 121-126 ○ Friday: 101-120
12:00 PM	BREAK	
12:30 PM	• Sweep and wash dining room floor. Clean walls, windows and baseboards in dining room • Clean utility rooms and hallway • Check laundry chute and clean when necessary • Check therapy room and clean when necessary • Empty garbage and recycling • If private dining room was used and there were no issues, sign orange slip (found on bulletin board in basement)	• Clean resident supply room • Double check the 3 public washrooms to see if sink/toilets need cleaning again. Clean and disinfect tub room • Clean and disinfect hand rails • Check cleanliness of elevators and entrance • Spot clean seating area by stairway B • Check all washrooms and clean when necessary • Check storage rooms and clean when necessary
3:00 PM	Sign Out	

ADDITIONAL ROUTINE CLEANING SCHEDULES - H1

A) **Carpet Vacuuming /Floor Machine Schedule**
- **Wednesday & Sunday**: vacuum entire floor
- **Monday**: use floor machine in dining room & front entrance/café area

B) **Tuck Shop Cleaning Schedule**
- Every **Monday** between 10:00 – 10:30am – wash floor, wipe down counter, coffee machine, etc.
- Empty garbage

C) **Hair Salon Cleaning Schedule**
- Every **Sunday, Wednesday & Friday** - clean and disinfect hair salon, wash floor and empty garbage

D) **Activation Area Cleaning Schedule**
- Every **Friday** wash floor as baking is done on Thursdays

E) **Saturday or Sunday**
- Put away stock on shelves
- Stock residents' bathrooms with Kleenex and toilet paper if needed

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

7 AM - 3 PM Laundry Aide B		
7:00 AM	Sign in • Read communication book. Wash hands. • Put day-of clothing in large washer. • Sort dirty laundry and fill machines. • Empty washers and dryers as they stop & re-load.	• Fold clothing protectors and deliver. • Fold kitchen laundry and deliver. • Ensure that two floors of hanging are complete by 10 a.m.
9:30 AM	BREAK	
10:00 AM	• Continue folding and hanging clothes. • Fold the remaining linens. • Empty machines and load dryer when stopped	• Deliver 1 linen cart to the floor at 11:00 am. • Deliver 1 clothing cart (if ready).
12:30 PM	BREAK	
1:00 PM	• Deliver 2nd clothing cart if ready. • Complete the remaining laundry from the afternoon drop • Continue with folding any kitchen laundry / deliver. • Wipe down all machines & all touch surfaces, handles, tables using of water + Patriot 15 and microfiber cloth	• Wednesday & Sunday: Wash plastic filter behind Washer #1 • Wash floors twice a week (minimum once with floor machine) • Take out garbage & recycling • Clean dryer lint underneath machines (big and small dryers).
3:00 AM	Sign Out	

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES – HOUSEKEEPING

7 AM - 3 PM Housekeeper H2		
7:00 AM	Sign in • Read communication book. Wash hands. • Stock cleaning cart • Stock cleaning cart • Sweep & wash floor in dining room. Empty garbage. • Clean and disinfect family lounge and spot vacuum, when necessary • Clean and disinfect nursing station & med room and empty garbage • Clean and disinfect public and staff washrooms and empty garbage • Clean elevator doors with water and blue microfiber • Clean meeting room, when needed	• Full Clean Schedule ○ Monday: 201-205 ○ Tuesday: 206-210 ○ Wednesday: 211-215 ○ Thursday: 216-220 ○ Friday: 221-226 • Touch Clean Schedule (sweep floor, and wash, when necessary, disinfect toilet and sink, collect garbage) ○ Monday: 206-226 ○ Tuesday: 201-205, 211-226 ○ Wednesday: 201-210, 216-226 ○ Thursday: 201-215, 221-226 ○ Friday: 201-220
9:00 AM	BREAK	
9:30 AM	• Sweep and wash dining room floor • Continue full cleans • Check cleanliness of elevators and entrance • Spot clean seating area by stairway B • Check all washrooms and clean when necessary	• Check storage rooms and clean when necessary • Office cleaning schedule ○ Monday: Director, DOC ○ Tuesday: Therapeutic Recreation Supervisor ○ Wednesday: ADOC, Scheduling Clerk ○ Thursday: Clinical Quality Coordinator ○ Friday: Maintenance Supervisor & Nutrition Manager • Clean and disinfect tub room • Clean and disinfect hand rails
12:00 PM	BREAK	
12:30 PM	12:30 p.m. • Sweep and wash dining room floor. Clean walls, windows and baseboards in dining room • Clean utility rooms and hallway • Check laundry chute and clean when necessary • Check therapy room and clean when necessary	• Clean resident supply room • Sanitize activation area & empty garbage. • Empty garbage and recycling
3:00 PM	Sign Out	

ADDITIONAL ROUTINE CLEANING SCHEDULES – H2

Carpet Vacuuming Schedule:

- **Saturday**: vacuum entire floor
- **Sunday**: use floor machine in dining room

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - HOUSEKEEPING

7 AM - 3 PM Housekeeper H3		
7:00 AM	Sign in • Read communication book. Wash hands. • Sweep & wash dining room floor. Empty garbage. • Clean and disinfect family lounge and vacuum, when necessary. • Sanitize activation area. Wash floor. Empty garbage. • Clean elevator doors with water and blue microfiber	• Clean and disinfect public and staff washrooms and empty garbage. • Stair cleaning schedule ○ Monday: basement A & B ○ Tuesday: 1st floor A & B ○ Wednesday: 2nd floor A & B ○ Thursday: 3rd floor A & B ○ Friday: 4th floor A & B ○ Saturday & Sunday: check both stairwells and clean handrails
9:00 AM	BREAK	
10:00 AM	• Clean and disinfect nursing station & med room and empty garbage • Continue cleaning rooms (see schedule). • Full Clean Schedule ○ Monday: 301-305 ○ Tuesday: 306-310 ○ Wednesday: 311-315 ○ Thursday: 316-320 ○ Friday: 321-326	• Touch Clean Schedule (sweep floor, and wash when necessary, disinfect toilet and sink, collect garbage) ○ Monday: 306-326 ○ Tuesday: 301-305, 311-326 ○ Wednesday: 301-310, 316-326 ○ Thursday: 301-315, 321-326 ○ Friday: 301-320
12:30 PM	BREAK	
1:00 PM	• Sweep and wash dining room floor. Empty garbage's. • Continue full cleans • Clean and disinfect tub room • Clean and disinfect hand rails • Check cleanliness of elevators and entrance • Spot clean seating area by stairway B • Check all washrooms and clean when necessary • Check storage rooms and clean when necessary	• Clean utility rooms and hallway • Check laundry chute and clean when necessary • Check therapy room and clean when necessary • Clean resident supply room • Clean staff room & washrooms. Sweep and mop floors • Empty garbage and recycling • Re-stock cleaning cart for next shift
3:00 PM	Sign Out	

ADDITIONAL ROUTINE CLEANING SCHEDULES – H3

Carpet Vacuuming Schedule:

- **Saturday:** vacuum entire floor
- **Sunday:** use floor machine in dining room

Kitchen Floor Cleaning Schedule:

- **Tuesday**: clean kitchen floor using the floor machine (afternoon)
- **Thursday:** clean kitchen floor using the floor machine (afternoon)

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES – HOUSEKEEPING

7 AM - 3 PM Housekeeper H4		
7:00 AM	Sign in • Read communication book. Wash hands. • Sweep and wash dining room floor. Empty garbages. • Clean elevator doors with water and blue microfiber. • Sanitize activation area. Wash floor. Empty garbage. • Clean and disinfect family lounge and spot vacuum, when necessary	• Clean and disinfect nursing station & med room and empty garbage • Clean and disinfect public and staff washrooms and empty garbage • Clean and disinfect all areas of basement: hallways & washrooms, physiotherapy room, ramp to apartments, hall by kitchen, staff room & washrooms.
8:30 AM	• Full Clean Schedule ○ Monday: 401-405 ○ Tuesday: 406-410 ○ Wednesday: 411-415 ○ Thursday: 416-420 ○ Friday: 421-426	• Touch Clean Schedule (sweep floor, and wash when necessary, disinfect toilet and sink) ○ Monday: 406-426 ○ Tuesday: 401-405, 411-426 ○ Wednesday: 401-410, 416-426 ○ Thursday: 401-415, 421-426 ○ Friday: 401-420
9:30 AM	BREAK	
10:00 AM	• Sweep dining room and spot wash • Continue full cleans (see schedule). • Clean and disinfect tub room • Clean and disinfect hand rails	• Check cleanliness of elevators and entrance • Spot clean seating area by stairway B • Check all washrooms and clean when necessary • Check storage rooms and clean when necessary
12:30 PM	BREAK	
1:00 PM	• Sweep and wash dining room floor. Clean walls, windows and baseboards in dining room • Clean utility rooms and hallway • Check laundry chute and clean when necessary	• Check therapy room and clean when necessary • Clean resident supply room • Stock cleaning cart • Empty garbage and recycling
3:00 PM	Sign Out	

ADDITIONAL ROUTINE CLEANING SCHEDULES – H4

Carpet Vacuuming / Floor Machine Schedule:

- **Saturday:** 11:00 am - vacuum entire floor.
- Use the floor machine in dining room.

APPENDIX D
RADIANT CARE TABOR MANOR SERVICES - ROUTINES

DAILY ROUTINES - FT HL

10 AM - 4:30 PM FT HL		
10:00 AM	Sign in • Clean SH office and washroom; empty garbage, recycling, shredder; sweep floor • Monday & Friday: mop floor • Clean scheduled office, cited above • Clean washroom across from CEO's office • Empty garbage and recycling from photocopy room; sweep floor	• Sweep dining room • *On Mondays, clean training room • *If Foot Care Clinic occurred on weekend, clean Dr's Office *On Saturdays, clean spa rooms and washrooms; clean Chapel, sweep and mop floors
11:00 AM	• Clean front office • Check board room, clean as needed (Ask Reception, at the front office, for the key) • Clean lobby outside of main office & main office	• Clean Olive Branch Café, tuck shop • *On Wednesdays and Fridays, clean the kitchenette (next to the Chapel) • Clean public washrooms • Put cart & wet floor signs away
Between 11-11:30 a.m., if any call bells go off, let SH staff know as they are on break		
11:30 AM	BREAK	
12:00 PM	• Restock cart, refill bucket with fresh water • Take garbage & recycling to garbage bins outside • Clean tub rooms, washrooms, washer & dryer beside tub rooms. Clean glass in shower • Bring the hairdresser's towels to the laundry room in the basement *code for back door: 2345*	• *On Mondays and Fridays, mop the chapel • Check washrooms by the Fitness Centre, and clean as needed • *On Sundays, vacuum Lead Chaplain's office and empty garbage
1:00 PM	• Clean dining room: wipe down chairs; sweep & mop; empty garbage; wipe wall beside kitchen door • Clean staff room*code 1254* and washrooms. Wipe tables and counter, empty garbage & recycling. Wash microwaves, garbage bins & clean washrooms (If empty, sweep and mop floors)	• Get cart from kitchen beside the Chapel and bring 3 water bottles from staff room at 7 Tabor into 1 Tabor • Bring dirty rags to the laundry room, and bring clean rags, if available • Fold rags and restock cart • Put cart & wet floor signs away
2:15 PM	BREAK	
2:30 PM	• Vacuum carpets • Clean hair salon • Clean windows, dust furniture, wipe handrails • Bring hair salon towels back from laundry	• *On Tuesdays, Thursdays and Sundays, clean Fitness Centre – empty garbage & check the 4 dispensers that hold the certainty wipes. • *On Tuesdays and Thursdays (3:30-4:30pm): clean Olive Branch Café

	• Clean intercom station in front entrance • *On Mondays and Fridays, vacuum front office, outside of public washrooms & towards Mapleview • Clean hallway beside SH Coordinator's office. Inspect washroom and clean if necessary	• Clean cart and stock for next day. Put away all wet floor signs
4:30 PM	**Sign Out**	

ADDITIONAL ROUTINE CLEANING SCHEDULES – FT HL

Weekly cleaning schedule for offices *mop each floor and empty garbage*:

- **Monday:** CEO, Executive Assistant, Director of Communications (Dir. Of Comm. has bathroom in her office – clean Monday & Friday), Assistant RAI coordinator
- **Tuesday** (week 1) & **Thursday** (week 2): Accounting Clerk, Financial Analyst, Payroll clerk
- **Wednesday:** Payroll Coordinator, HR Coordinator and meeting room (ask for key – across from his office), Lead Chaplain
- **Friday:** HR Manager, Director of Finance, SH Coordinator, Dr's Office, Chaplain

If you are unable to get into an office on a specific day, please complete the next day's office

SECTION 8

Radiant Care Pleasant Manor
Fire Safety Plans

Radiant
Care
Pleasant
Manor

Fire Safety Plans

Fire Safety Plans for each building are available in the following locations:

1. Original hard copy is in the Fire Box at the main entrance of each building

2. Electronic copies are on Systems 24-7 in Section 8 of the Peace Time Disaster & Emergency Safety Plan Response Manual

SECTION 9

Radiant Care Tabor Manor
Fire Safety Plans

Radiant
Care
Tabor
Manor

Fire Safety Plans

Fire Safety Plans for each building are available in the following locations:

1. Original hard copy is in the Fire Box at the main entrance of each building

2. Electronic copies are on Systems 24-7 in Section 9 of the Peace Time Disaster & Emergency Safety Plan Response Manual