

Long Term Care Emergency Management Plan

This plan has been established as per the requirements in section 90 of the Fixing Long-Term Care Act, 2021 and sections 268 to 271 of the Ontario Regulations.

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Accessibility of the Emergency Plan

This plan is made available to stakeholders in various ways:

- on the homes’ website; and
- provided upon request in alternative formats.

Training and Orientation

Bruyère Health ensures that staff, volunteers and students are educated on this emergency plan before they perform their responsibilities and annually (by calendar year) thereafter.

Partnerships and Engagement

In developing and updating this plan, Bruyère Health consults with entities that may be involved in or provide emergency services in the area where the home is located including, without being limited to, community agencies, health service providers as defined in the *Connecting Care Act, 2019*, partner

facilities and resources that will be involved in responding to the emergency, and keeps a record of these consultations.

Bruyère Health ensures that hazards and risks that may give rise to an emergency impacting the home are identified and assessed, whether the hazards and risks arise within the home or in the surrounding vicinity or community. An annual Enterprise Risk Assessment is completed by Bruyère Health, as well as participation with the Emergency Partners risk assessment. Bruyère Health is a member of Hospital Emergency Preparedness Committee of Ottawa (HEPCO).

Bruyère Health ensures that all applicable directives, orders, guidance, advice or recommendations issued by the Chief Medical Officer of Health, or a medical officer of health appointed under the Health Protection and Promotion Act are followed in the home. The medical officer of health or delegate will be invited to Bruyère Health Emergency Measures (EM) Committee meetings to meet the requirement of them being involved in any changes/development.

Bruyère Health consults with the Residents' Council and Family Council and debriefs with impacted residents and substitute decision makers, if any, after emergencies as needed.

Supplies and Resources

Resources, supplies, personal protection equipment and equipment vital for emergency responses are set aside and readily available at the home including, without being limited to, hand hygiene products and cleaning supplies. Bruyère Health has a process to ensure that the required resources, supplies, personal protection equipment and equipment have not expired.

Bruyère Health ensures that emergency plans provide for residents to have food, fluids, medications and all other supplies essential for the safety and well-being of the residents during an emergency.

Communications

In major emergency situations, Bruyère Health ensures frequent and ongoing communication with the relevant stakeholders, which could include residents, substitute decision makers, if any, staff, volunteers, students, caregivers, the Residents' Council and the Family Council. This communication is disseminated at the beginning of the emergency via email when appropriate, when there is a significant status change throughout the course of the emergency, and when the emergency is over. Email distribution lists are kept up to date by the administrative teams in the Long-Term Care Homes (LTCH).

Drills and Testing of the Plan

Bruyère Health will conduct the following drills and testing (see table below). If there is an actual emergency in a specified area during the time period, a test will not be required.

Testing the plan may include arrangements with the entities that may be involved in or provide emergency services in the area where the home is located including, without being limited to, the relevant community agencies, health service providers as defined in the *Connecting Care Act, 2019*, partner facilities and resources that will be involved in responding to the emergency.

Bruyère Health will keep a written record of the testing of the emergency plans and planned evacuation and of the changes made to improve the plans. These plans are kept within the emergency measures department.

Frequency of testing	Type of emergency
Annually	Loss of essential services (code grey), fires (code red), situations involving a missing resident (code yellow), medical emergencies (code blue), violent outbursts (code white), gas leaks (code brown), natural disasters (code orange), extreme weather events (code orange), boil water advisories (code grey) and outbreaks of a communicable disease, outbreaks of a disease of public health significance, epidemics and pandemics
Every 3 years	Code black, code silver, code purple
Every 3 years	Planned evacuation exercise (code green)

Recovery and Debrief

Bruyère Health shall ensure that a debrief and recovery process is followed after emergencies. As applicable, residents, their substitute decision makers, if any, staff, volunteers, and students will be debriefed after the emergency.

The home will establish how to resume normal operations in the home and will support those in the home who experienced distress during the emergency.

Safe Evacuation Locations

Given that Bruyère Health Health consists of four sites (Bruyère Health Health Saint-Vincent Hospital, Bruyère Health Health Elisabeth-Bruyère Health Hospital, Bruyère Health Health Greystone Transitional Care and Bruyère Health Health Village), residents from the LTC homes could be evacuated to another site (or another part of a site) as needed. In addition, the Mother house of the Sisters of Charity could be used in emergencies. Transportation for residents could be provided by the City of Ottawa through the HEPCO group in addition to transportation companies and the bus located at the Bruyère Health Village that Saint-Louis Long-Term Care has access to.

Evaluation

This emergency plan is evaluated and updated:

- (a) annually (each calendar year), including the updating of all emergency contact information of the entities b) within 30 days of the emergency being declared over if modifications to the plan are required, after each instance that an emergency plan is activated. In these instances, the entities involved in the emergency response are provided an opportunity to offer feedback.

Definitions

Emergency: Urgent or pressing situation or condition presenting an imminent threat to property, environment or the health or well-being of residents and others attending the home that requires immediate action to ensure the safety of persons in the home.

Attestation

Annually, the home will prepare an attestation of compliance with this legislation which will be co-signed by both the Administrator and the Director for Emergency Management for Bruyère Health.

This LTC emergency plan includes the procedures for dealing with emergencies:

- i. outbreaks of a communicable disease, outbreaks of a disease of public health significance, epidemics and pandemics,
- ii. fires, (code red – could also lead to code green, code orange internal, code grey, code brown, etc.)
- iii. community disasters, (code orange internal and external)
- iv. violent outbursts, (code white)
- v. bomb threats, (code black - could also lead to code green)
- vi. medical emergencies, (code blue)
- vii. chemical spills, (code brown)
- viii. situations involving a missing resident, (code yellow)
- ix. loss of one or more essential services, (code grey – could also lead to code orange internal, code green)
- x. gas leaks, (code brown – could also lead to code green, code orange internal)
- xi. natural disasters and extreme weather events, (code orange external)
- xii. boil water advisories, (code grey)
- xiii. floods (code orange internal and external – could also lead to code brown)
- xiiii. evacuation (code green)

Should you wish to have access to any of these emergency plans, please contact us at sld-ltc@bruyere.org.