

Distribution: Emergency Response Manual	Page: 1 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

1.0 INTRODUCTION

Purpose

Lakeland Long Term Care (LLTC) is a facility that was built as part of the West Parry Sound Health Centre (WPSHC). LLTC occupies 2 floors of the WPSHC and is home to 110 residents. LLTC's fire systems are controlled and maintained by the WPSHC. All LLTC staff and a WPSHC representative will respond to all facility wide alarms. WPSHC and LLTC staff will respond to all building wide alarms. The command centre for all facility alarms will be the front lobby of LLTC, which is located on the first floor. The fire department and other emergency personnel will enter through the main doors of the lobby.

LLTC was built to meet modern fire safety standards and has been designed to prevent or slow the progress of a fire. In addition, fire safety systems, such as sprinklers and fire alarms are installed to provide early warning of fire.

When the fire alarms sounds, it is a clear indication that a fire emergency exists. Each employee must complete the duties assigned to him/her. The Fire Warden may assign duties to other individuals responding to the alarm.

Each staff member should understand the basic principles of the Fire Safety Plan. Each staff member must know and understand the specific emergency duties assigned to them and be reviewed on a yearly basis.

Each home area is responsible for the staff and residents in their home area. This includes ensuring they understand their responsibilities during a fire.

All staff under the supervision of the Administrator and Plant Manager are responsible for the implementation of the Fire Safety Plan.

Fire Safety Planning is a requirement of the Ontario Fire Code. This Fire Safety Plan will serve to enhance the safety of residents and staff, as well as protection of the building, by providing:

- Quick and effective emergency procedures
- Methods to prevent the occurrence of fire
- Inspection and maintenance of fire safety systems and equipment



Distribution: Emergency Response Manual	Page: 2 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

A representative of LLTC will be a member of the WPSHC ERP Committee and participate in the annual review of this fire plan.

1.1 STAFF ON DUTY

DAY STAFF	NUMBER OF STAFF	SCHEDULED HOURS
Administrator	1	9:00am - 5:00pm
Director of Nursing and Personal Care	1	8:00am - 4:00pm
Nurse Manager	1	7:00am - 7:00pm
Registered Practical Nurse	4	7:00am - 3:00pm
RAI Coordinator	1	8:00am - 4:00pm
BSO Leader	1	8:00am - 4:00pm
BSO Co-Lead	1	8:00am to 4:00pm
BSO PSW	2	8:00am - 4:00pm
Personal Support Worker	12	7:00am - 3:00pm
Nursing Support Assistant	1	7:30 am - 3.30 pm
Nursing Administration Assistant	1	8:00am - 4:00pm
Business Coordinator	1	7:00am - 3:00pm
Social Services Worker	1	9:00am- 5:00pm
Housekeepers	4	8:00am - 2:30pm
Housekeeper	1	1:00pm-8:00pm
Dietary Aide	3	7:45am - 1:45pm
Dietary Aide	1	8:00am - 10:00am
Dietary Aide	1	11:45am - 6:15pm
Dietary Aide	3	3:45pm - 6:45pm
Program Manager	1	9:00am - 5:00pm



Distribution: Emergency Response Manual	Page: 3 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

Recreationist	2	9:00am - 5:00pm
Manager Support Services	1	9:00am - 5:00pm
Supervisor of Support Services	1	9:00am - 5:00pm
Restorative	1	6:00am - 2:00pm
EVENING STAFF		
Nurse Manager	1	7:00 pm - 7:00 am
Registered Practical Nurse	4	3:00 pm - 11:00 pm
Personal Support Worker	8	3:00 pm - 11:00 pm
	4	5:00 pm - 9:00 pm
Recreation Aide	1	12:00 pm - 8:00 pm
NIGHT STAFF		
Nurse Manager	1	7:00pm to 07:00am
Personal Support Worker	6	11:00 pm - 7:00am

1.2 GENERAL REQUIRMENTS

EXCERPTS FROM THE ONTARIO FIRE CODE:

ARTICLE 1.1.1.2

"Where tests, repairs or alterations are made to fire protection installation, including sprinkler and standpipe systems, procedure of notification shall be established, and the procedure shall include notifying the fire department and the building occupants where necessary for safety in the event of a fire emergency."

ARTICLE 1.1.2.1

- (1) "Excerpt as required in sentence (2), written records shall be kept of tests and corrective measures for two years after they are made, and the records shall be available upon request to the chief fire official."
- (2) "If the time interval between tests exceeds 2 years, the written records shall be kept for the period of the test interval plus one year."



Distribution: Emergency Response Manual	Page: 4 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

NOTE: The Fire Code contains specific requirements for maintaining records. The Fire Department recommends that in addition to those records specifically required by the Fire Code that records for <u>all maintenance procedures</u> should be kept.

The Ontario Fire Code sets out specific requirements for checking, inspecting and testing of fire safety equipment in existing buildings. There are also requirements for the maintenance of records. Whenever a defect or deficiency is discovered in any fire safety device, the property owner or his agent must take immediate corrective action. Every building is unique and will have different maintenance requirements.

The Ontario Fire Code or other documents referred to in the Fire Code must be consulted for a complete explanation of the procedures for properly maintaining fire safety systems and equipment.

PRIOR TO ANY ALTERATIONS, ADDITIONS OR CHANGES IN USE WITHIN THE BUILDING, THE FIRE PREVENTION OFFICE (WPSHC and LLTC Manager of Support Services) SHALL BE CONTACTED.



Distribution: Emergency Response Manual	Page: 5 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

1.3 REACT TO FIRE REACT to Fire

Remove Occupants

(safely from the danger area)

Enclose Area

(by shutting doors and windows)

Activate Alarm

(pull the fire alarm)

Call

(telephone extension 3333)

Try to Fight

(only if it is safe to do so)



Distribution: Emergency Response Manual	Page: 6 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

PULL Remove the lock pin

AIM Direct the discharge nozzle towards the fire

SQUEEZE Squeeze the discharge lever to release the contents

SWEEP Use 'side to side' motion as you move towards the fire



Distribution: Emergency Response Manual	Page: 7 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

1.4 FIRE SAFETY PROCEDURES - GENERAL

If you hear the fire alarm:

1st Stage - Intermittent Pulse

- 1. Return to your assigned work area immediately.
- 2. Listen for and follow instructions announced over the Emergency Voice Communication System.
- 3. Be prepared to carry out the duties assigned to you in the Fire Safety Plan.
- 4. Follow instructions given by the "Fire Warden"

If your area is the affected zone:

- 1. Try to locate the source of the alarm and begin to evacuate away from the source, beyond a set of fire separation doors.
- 2. If you discover a fire and the fire cannot be contained, or extinguished, **safely,** notify a supervisor or the Fire Warden immediately.

Temporary abridgement November 2nd, 2021 to December 31st

All actions described in the Policy "Code Red" remain in place with the following additional actions required by nursing staff on all units:

When the audible fire alarm tone is heard, and the zone strobe light comes on indicating an alarm in a room within that zone, immediately check the Simplex annunciator panel at the nurse station to identify which room is affected; do not wait for the overhead page. This is necessary because the overhead page system is disabled for 1 minute when the fire alarm audible tone is activated.

If your work area is not the affected zone:

- 1. Close all windows and doors in your area and stay alert for signs of smoke and fire.
- 2. Listen for instructions, from supervisors, or announced over the Emergency Voice Communication System.
- 3. Reassure residents and advise visitors to remain with residents.



Distribution: Emergency Response Manual	Page: 8 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca	Date of Original Issue: December 1, 2010
Soucie	
Issued by: Steve White	Date of Last Revision: August 7, 2019

2nd Stage - Rapid Pulse Tone:

1. Follow instructions given by the Fire Warden or as announced over the Emergency Voice Communication System.

Order of Evacuation (see Evacuation Procedure):

Upon discovering a fire, if evacuation is necessary the following is the order of evacuation:

- 1. Remove the residents from the immediate area of the fire zone
- 2. Remove all residents in that fire zone beyond the first set of fire doors.
- 3. All residents from the Resident Home Area will be moved across to the neighboring Resident Home Area.
- 4. Move all residents to the West Parry Sound Health Centre. In the event that a total evacuation is necessary, there will be a designated location.
- 5. All residents will be moved out of the building to the designated evacuation site for relocation to temporary placements until staff and residents can return to Lakeland.

General Rules:

- 1. Walk and remain calm. By remaining calm, you will reassure the residents.
- 2. Do not use telephone / P.A. system, except for emergencies.
- 3. Ensure window and fire separation doors are closed, if safe to do so.
- 4. Free corridors and doorways of obstacles.
- 5. In the event of a fire, judgment may be necessary, in deciding the most appropriate action. Select the action that achieves the greatest protection for the residents.

1.5 FIRE WARDEN DUTIES

Upon Hearing the Alarm:

1. The Fire Warden (Nurse Manager) will carry a handheld radio and a mobile phone, extension 1468. The Fire Warden, will wear an orange vest (vests can be found at the Information Stations and in the Nursing Office), and will be carrying the red lanyard with the evacuation key for the fire pull station.



Distribution: Emergency Response Manual	Page: 9 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

- **2.** On hearing a fire alarm, the Fire Warden will proceed to the nearest Fire Alarm Enunciator Panel to determine the location of the fire alarm.
 - a. Enunciator panels are located at each Information Centre.
 - b. Press the Fire Button to identify location.
- **3.** If the fire is not in Lakeland, go to the front entrance of Lakeland (LLTC) and meet the West Parry Sound Health Centre (WPSHC) Co-Fire Warden who is in contact with the WPSHC by a handheld radio.
 - a. The Fire Warden will communicate to staff via handheld radio (located in the LLTC Boardroom.)
 - b. Fire Warden will give an RPN (float PSW, night) on duty; the RPN (float PSW, night) will carry a handhelds radio to communicate with Fire Warden.
- **4. If the fire is in Lakeland,** go to the location of the alarm.
 - a. Ensure staff have evacuated residents away from the fire through the nearest fire doors.
 - b. Search for any signs of fire (smoke, flame, heat, odour, etc.).
 - c. Feel the temperature of doors and knob before opening. If the door or knob is hot to the touch, do not open it.
- **5.** Do not attempt to extinguish the fire unless you are sure you will be successful (i.e. garbage can fire).
- **6.** The Fire Warden will send Leadership staff or the Float PSW (night) with a handheld radio to the front entrance of LLTC to meet the WPSHC Co-Fire Warden.
- **7.** Communicate to the WPSHC Co-Fire Warden located at the front entrance of Lakeland what has been found and what has been done to secure the safety of the residents.
- **8.** Communicate to the RPN's on day and evening shift, give direction on how to proceed and wait arrival of the Fire Department.
- **9.** In the event of an actual fire, direct an RPN on day and evening shift or a PSW on the night shift to notify the Manager-On-Call.
- **10.** Upon arrival of the Fire Department, have available the Evacuation Key on the red lanyard and all other keys as required. Advise the Fire Department of any known trapped or endangered residents, who still require assistance in evacuating the building.
- **11.** When an emergency is over and upon direction of the Fire Officer In-Charge, the Health Centre staff will reset the main Fire Alarm Control Panel.
- **12.** Once the All Clear is announced three (3) times by WPSHC, complete a head count of all residents to ensure that all residents are accounted for.
- **13.** An "All Clear" does not mean that the magnetic (mag.) locks have been reset. Check all exit doors to ensure that all mag locks have been reset. Check the elevator to ensure that it has been reset.



Distribution: Emergency Response Manual	Page: 10 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

14. Complete the "Fire Alarm Report" and ensure that all staff on duty sign the attendance sheet.

NOTE: When the fire scene is within the doors of LLTC, the Fire Warden will be in charge of the fire scene until relieved by the Fire Department. When the fire is outside the LLTC doors, the Fire Warden will follow the direction of the WPSHC Co-Fire Warden and assist where possible.

If you hear a rapid pulse tone (ALARM)

- 1. Commence evacuation procedures in your area, as broadcasted over the Emergency Voice Communications System or as directed by LLTC's Administrator or the Fire Department.
- 2. Most evacuations will be horizontal, through the next set of fire doors away from the fire. Note that the sprinkler system will activate in the area where the fire is located.
- 3. If the fire is located at LLTC and a complete evacuation is needed, transport residents on the first floor through the front doors of LLTC and on the second floor through the double doors to the WPSHC and, if necessary, out the receiving area (turn to your left after going through the double doors).
- 4. In the event that the fire or smoke from the fire is blocking the front halls of Lakeland, evacuate towards the back stairwell exits. If a complete evacuation is required, first floor will evacuate through the stairwell exit. Second floor staff will be responsible to conduct a two-person carry of those residents who are not mobile down to the first floor level. More help will be available by the time a complete evacuation is called.

1.6 ADMINISTRATOR'S RESPONSIBILITIES

Role:

The Administrator will be responsible for the overall development and maintenance of an effective fire safety plan, in accordance with the requirements of the Ontario Fire Code.

Note: Since Lakeland Long Term Care (LLTC) is part of West Parry Sound Health Centre (WPSHC) all plans for fire safety will be developed in conjunction with the WPSHC.

Responsibilities:

1. Appoint and organize the designated supervisory staff to carry out duties as required in the Fire Safety Plan.



Distribution: Emergency Response Manual	Page: 11 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

- 2. Ensure Emergency Procedures are followed and reviewed annually, with the WPSHC Director of Support Services.
- 3. In consultation with the WPSHC Director of Support Services, establish a plan to inform all staff about the Fire Safety Plan and how to act in an emergency.
- 4. Arrange for external relocation centers and assess availability and supplies at these centers.
- 5. Ensure that staff of LLTC and WPSHC work together to ensure resident safety. Proper lines of communication are imperative to ensure maintenance of the Fire Safety Plan.
- 6. Ensure that the standards as outlined in the Fire Code and Ministry of Health Long Term Care are met.

1.7 WPSHC Manager of Plant Operations Responsibilities

Role:

The Manager of Plant Operations is an employee of West Parry Sound Health Centre (WPHSC) but has responsibilities to the safety of Lakeland Long Term Care (LLTC.)

Responsibilities:

- 1. Communicate regularly with the LLTC Administrator on results from testing and provide documentation as required for various inspections of LLTC.
- 2. Develop plans for testing of various sections of the Fire Safety Plan.
- 3. Coordinate the fire drills and testing of the emergency generator.
- 4. Communicate with and assist the Administrator with review and update of fire procedure for the building.
- 5. Review the Fire Safety Plan.
- 6. Conduct regularly scheduled fire drills.
- 7. Assist in controlling fire hazards within the building.
- 8. Maintenance of building facilities provided for the safety of occupants.
- 9. Assuring that fire safety maintenance duties, as required by the Ontario Fire Code are completed as scheduled and recorded.
- 10. Obtaining approval of the Chief Fire Official for any contemplated changes to the Fire Safety Plan.
- 11. Prepare and maintain schematic diagrams, acceptable to the Chief Fire Official, showing the type, location and operation of all building fire emergency systems is maintained.
- 12. Ensure that all exits are accessible.
- 13. Ensure all building vehicles are available in the event of an evacuation, if applicable.



Distribution: Emergency Response Manual	Page: 12 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

14. Establish and maintain required communications channels.

1.8 FIRE PROCEDURES - LEADERSHIP TEAM

Role:

The Lakeland Long Term Care (LLTC) Leadership Team is responsible for training and implementing the Fire Safety Plan at LLTC and for assisting in implementing the Fire Safety Plan in the building.

Responsibilities:

- 1. Are familiar with fire safety procedures.
- 2. Ensure training of staff to carry out his/her assigned duties during his/her absence from the building.
- 3. Participate in fire drills and evaluate performance as required.
- 4. Know the operation of fire protection equipment within LLTC.
- 5. Maintain an updated staff list at personal residence.
- 6. Call in staff as required using call out software (i.e., Staff Stat) and the fan out list.
- 7. Be familiar with relocation centers services and facilities.
 - a. Staging Area: Torrance Funeral Home Parking Lot
 - b. Evacuation Site: Belvedere Heights
- 8. Ensure a list is made of all staff on duty at time of an alarm.
- 9. Ensure all exits in their area are accessible (not locked, blocked nor obstructed)

Upon Hearing the Alarm:

Nurse Manager (Fire Warden)

1. The Nurse Manager will act as Fire Warden. (1.5 ERP-Red Fire Warden Duties)

The Director of Nursing and Personal Care (DON)

1. The DON assumes responsibility when the Administrator is absent.

All other Leadership team:



Distribution: Emergency Response Manual	Page: 13 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

- 1. The most senior manager assumes responsibility when the Administrator and DON are absent.
- 2. Leadership team will proceed to their assigned location.

Position	Location
Administrator	Main Lobby
Director of Nursing and Personal Care	Main Lobby
RAI Coordinator	Magnetawan (Level 1, Stairwell 5)
BSO Leader	Lake Rosseau
BSO Co-Lead	Snug Harbour/Georgian Bay (Level 2, Stairwell 5)
BSO PSW - Magnetawan and Lake Rosseau	Lake Rosseau (Level 1, Stairwell 4)
BSO PSW - Snug Harbour and Georgian Bay	Snug Harbour (Level 2, Stairwell 6)
Nursing Support Assistant	First Floor Hallway Doors (Service Elevators)
Nursing Administration Assistant	Georgian Bay (Level 2, Stairwell 3)
Business Coordinator	Main Lobby
Social Services Worker	Magnetawan (Level 1, Stairwell 6)
Program Manager	Second Floor Hallway Doors (Level 2, Stairwell 7)
Manager Support Services	Main Lobby
Supervisor of Support Services	Second Floor Hallway Doors (Service Elevators)
Restorative Coordinator	Georgian Bay (Level 2, Stairwell 4)

In the event that the above noted are not available, Fire Warden will assign available staff to high risk locations.

1.9 EMERGENCY PROCEDURES - RESIDENTS

Upon Discovery of smoke or fire:

- 1. Leave the fire area immediately.
- 2. Close the door behind you, if applicable.
- 3. Sound the alarm, at the nearest fire alarm manual pull station.
- 4. Proceed to the nearest Information Centre, or Reception, to provide details of the fire emergency.
- 5. Remain there and follow evacuation procedures given from the staff or broadcasted over the Emergency Voice Communication System.
- 6. DO NOT USE THE ELEVATORS

Upon Hearing the Fire Alarm When in Room:

1st Stage Alarm - Intermittent Signals



Distribution: Emergency Response Manual	Page: 14 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

- 1. Stay in your room. Make sure the door to the hallway is closed.
- 2. Close windows.
- 3. Remain calm.
- 4. Listen for and follow evacuation procedure broadcast over the Emergency Voice Communications Systems, or from staff.

2nd Stage Alarm - Continuous Signal

- 1. Leave your room and proceed to the nearest, safe stairwell.
- 2. Staff will assist you in vacating the area, and/or building.
- 3. Listen for and follow instructions broadcast over the Emergency Voice Communication System.

Upon Hearing the Fire Alarm When in Other Area of the Building:

1st Stage Alarm - Intermittent Signal

- 1. If you are in common areas: i.e. Lobby, Dining Rooms, Quiet Rooms, etc. stay where you are.
- 2. If you are in the hallway, in your home area, proceed directly to your room.
- 3. Await instructions, as broadcast over the Emergency Voice Communication System, or from staff.
- 4. Remain calm and follow instructions without hesitation.

These emergency measures will be communicated to residents at least once annually in the resident and family newsletter.

1.10 EMERGENCY PROCEDURES - VISITORS

Upon Discovery of a Fire:

- 1. Leave the fire area immediately. If in resident room, remove the resident with you.
- 2. Close door behind you.
- 3. Sound the alarm, at the nearest manual pull station.
- 4. Proceed to the nearest Information Centre, or Administration, to provide details of the fire emergency.
- 5. Follow evacuation procedures as directed by staff or as broadcast over the Emergency Voice Communication System.

6. DO NOT USE ELEVATORS



Distribution: Emergency Response Manual	Page: 15 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

Upon Hearing the Fire Alarm:

If Intermittent Signal:

- 1. Stay with the resident you are visiting until instructed to do otherwise.
- 2. Standby and prepare to leave the building.
- 3. Follow instructions given by staff.
- 4. Listen for and follow instructions broadcast over the Emergency Voice Communications Systems.

If Continuous Signal:

- 1. Follow instructions given by staff.
- 2. Listen for and follow instructions broadcast over the Emergency Voice Communications System.

REMAIN CALM

NOTE: Visitors are not allowed to enter or leave the building during the alarm.

These emergency measures will be communicated to residents at least once annually in the resident and family newsletter.

1.11 STAFF ORIENTATION AND TRAINING

Policy

All staff shall receive orientation and annual training in Fire Safety Procedures as detailed in the Fire Safety Plan. This training takes place through the SURGE learning training program.

Procedure:

- All staff shall review the fire safety procedures and fire plan during their orientation and on a yearly basis.
- All Nurse Managers will be trained as the "Fire Warden" to take control of a potential fire scene if needed.



Distribution: Emergency Response Manual	Page: 16 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

• All new employees will be required to complete the Fire Safety Plan course on SURGE Learning. In addition, new employees will be provided with additional training, by their supervisor, concerning specific duties assigned to them.

Mandatory Information

- Emergency fire and evacuation procedures.
- Location of Fire Alarm Enunciator Panels
- Location of Fire Alarm Control Panel (located in the West Parry Sound Health Centre)
- Location of Fire Alarm Pull Stations
- Location and use of portable fire extinguishers and fire blankets
- Location and use of telephone and paging system
- Location and operation of smoke/fire barrier doors
- Procedure during Fire Alarm
- Evacuation procedure and role

1.12 FIRE DRILLS

POLICY

Fire drills are conducted monthly and annually as per Fire Marshall Regulations.

PROCEDURE

The WPSHC Manager of Plant Operations schedules fire alarms in consultation with the Administrator.

The WPSHC Manager of Plant Operations, along with security, will coordinate any drills for a particular month and set the objective to be evaluated. Night shift fire drills will be silent.

Each Leadership Team member is assigned to a Resident Home Area or Central location to assess and observe the actions of the staff and residents during a drill. The Fire Warden (Nurse Manager) complete the Fire Drill reports after each drill.

1.13 FIRE PREVENTION

Policy

The most effective means available to protect our residents and staff against fire is the prevention of fires.



Distribution: Emergency Response Manual	Page: 17 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

Good fire prevention falls into three categories:

GOOD HOUSEKEEPING

GOOD MAINTENANCE

GOOD EMPLOYEE PARTICIPATION

Housekeeping

- Keep doors to stairwells closed at all times
- Keep stairwells, landings, hallway, passageways and exits (inside and outside) clear of any obstructions at all times
- Do not permit combustible materials to accumulate in quantities or in locations which will constitute a fire hazard
- Do not store materials of any kind in front of electrical panels

Maintenance

- Regular inspection and maintenance of mechanical and electrical equipment to minimize fire hazards
- Regular inspection and maintenance of fire alarm systems, sprinkler and standpipe system, and firefighting equipment to ensure proper functioning
- Keep access roadways, fire routes and fire pumper connections clear and accessible for Fire Department use

Employee Participation

- All employees and volunteers within Lakeland Long Term Care (LLTC) will be knowledgeable of the Fire Plan and their role in it
- Knowledge of location and use of firefighting equipment
- Participate in annual fire training programs
- Daily awareness and check of fire hazards within his/her work area
- Knowledge of steps to take in a fire emergency

1.14 STAFF FIRE PLAN

Policy



Distribution: Emergency Response Manual	Page: 18 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

All Lakeland Long Term Care (LLTC) staff must be aware of the effects a fire could have on the residents and the potential panic resulting from smoke. **EVERY EMPLOYEE** must accept the responsibility of fire prevention while performing their daily work activities.

Procedure

Every LLTC staff member must know:

- The general procedures of the Fire Plan
- The Fire Plan specific to their area and job routine
- Be familiar with the location and content of the ERP Manual
- The location of Fire Exits, Pull Stations and firefighting equipment in their work area
- Respond to all Fire Alarms and Disaster situations, carrying through with procedures for any emergency
- How to keep the residents calm and safe during any emergency
- Participate in ongoing training programs including:
 - o Evacuation techniques
 - o Fire Equipment training
 - o Silent Drills

1.15 FIRE SAFETY PROGRAM EDUCATION

Policy

To provide all new employees with a comprehensive introduction to the Lakeland Long Term Care Fire Safety Plan. The orientation program will be completed by the end of the probationary period.

Procedure

New employees will be given a tour of the home by their supervisor with special attention being given to fire safety devises. All new employees will be assigned Fire Safety education on SURGE Learning.

During their first shift, new staff will review the following:

- Location of ERP manual
- How to use/contents



Distribution: Emergency Response Manual	Page: 19 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

- Department/job specific duties in the event of a fire
- Location of enunciator panel and how to read the information given on the panels

New staff will also be oriented to:

Pull Stations

- Location of fire exits
- Location of fire pull stations. NOTE: All staff are trained on the difference between the alarm from the plastic cover (screamer) and the fire alarm.
- Location of enunciator panel

Fire Extinguishers

- Location and types
- Actual handling of extinguishers in their specific work area

NOTE: Staff will be trained annually how to use a fire extinguisher with the WPSHC staff.

1.16 FIRE EQUIPMENT INSPECTION STANDARDS

1.0 Policy

The fire equipment Inspection Standards has been developed and approved by the Local Fire Authorities to ensure that all fire protection and fighting equipment is properly maintained and inspected on a regular basis.

All standards meet the requirements of OFC 388/96. Maintaining and testing all fire equipment is the responsibility of WPSHC.

2.0 Procedure

2.1 Monthly:

- Fire extinguishers are checked and tags signed.
- Fire drills are completed for the night shift
- Fire door closures checked
- Nozzles on fire hose cabinets checked



Distribution: Emergency Response Manual	Page: 20 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

2.2 Semi Annually:

• Kitchen Hood Inspected (located in WPSHC)

2.3 Annually:

- Fire alarms tested and certified (external)
- Sprinkler system tested and certified (external)
- Kitchen Hoods Inspected (external) WPSHC
- Walk around tour with Representative from Fire Department (external)
- Staff In-service education on fire extinguishers (external)
- Hoses pulled out and re-racked
- Fire drills are completed as per Fire Marshall Regulations

2.4 Three Year:

Hoses hydrostatic testing (external)

2.5 Ten Year:

Fire extinguishers hydrostatic testing (external)

APPENDIX:

Appendix A (Mock Code Red Evaluation)

APPENDIX A: Mock Code Red Evaluation

Date completed:	Completed by:
Location Monitoring:	



Distribution: Emergency Response Manual	Page: 21 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca Soucie	Date of Original Issue: December 1, 2010
Issued by: Steve White	Date of Last Revision: August 7, 2019

Did staff follow the REACT procedure? (Remove occupants, Enclose area by closing windows and doors, Activate alarm, Call to report emergency, Try to fight the fire if possible). If no, what were the problem areas? Yes No
What were the challenges when moving residents?
Did arrival of the fire department present any challenges when moving residents?
What additional challenges did we face and how should they be resolved?
Recommendations:



Distribution: Emergency Response Manual	Page: 22 of 22
Section:	Policy Name: Code Red
Reviewed by: November 4, 2021 by Rebecca	Date of Original Issue: December 1, 2010
Soucie	
Issued by: Steve White	Date of Last Revision: August 7, 2019