

Emergency Response Plan

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Introduction

The purpose of Perley Health's All Hazards Emergency Response Plan (ERP) is to establish a basic emergency preparedness program to provide timely, integrated, and coordinated response to the wide range of natural and man-made disasters that may disrupt normal operations and require a pre-planned response.

The reason for this approach is to:

- Provide maximum safety and protection from injury and illness for residents, visitors, and staff.
- Provide care promptly and efficiently to all individuals requiring medical attention in an emergency.
- Provide a logical and flexible chain of command to enable maximum use of resources.
- Maintain and restore essential services as quickly as possible following an emergency incident or disaster.
- Protect Perley Health property, facilities, and equipment.
- Satisfy all applicable regulatory and accreditation requirements.

Policy

It is the intent of Perley Health to adequately prepare, mitigate, respond and recover from a natural or man-made disaster or other emergency. This will be done in a manner that protects the health, well-being and safety of residents, visitors, and staff, and that is coordinated with the local community-wide response to a large-scale disaster.

Perley Health will work in close coordination with the local health department and other local emergency officials, agencies and health care providers to ensure a coordinated community-wide response to disasters.

Scope

Within the context of this ERP, a disaster is any emergency event which exceeds or threatens to exceed Perley Health's normal operational capabilities.

This ERP describes the policies, procedures and practices Perley Health will follow to mitigate, prepare for, respond to, and recover from the effects of emergencies.

This plan applies to the Perley Health long-term care home, and covers all employees, contractors and volunteers.

Perley Health's Emergency Response Plan has been prepared to address the following regulatory/legislative requirements and industry standards:

- Emergency Management and Civil Protection Act, 1990
- Fixing Long-Term Care Act, 2021 and Regulation 246/22
- Health Protection and Promotion Act, 1990
- Occupational Health and Safety Act, 1990
- Fire Protection and Prevention Act, 1997
- Accreditation Canada standards

Site Description

Facility Location

Site	Location
Street Address	1750 Russell Road, Ottawa Ontario K1G5Z6
Legal Description	1750 Russell Road

Facility Construction

Site	Description
Number of floors	2
Date of initial construction	1995
Building materials of initial construction	Cement and steel structure.
List of addition(s) to facility	94-unit apartment building
Date(s) of addition(s) to facility	2013

Facility Resident Care Areas

Resident Care	Services provided:	Number of beds:	
First floor	Long term Care, SBSU, Day Program, Pub, Interprofessional Clinic, Dental Clinic, Pharmacy, Physiotherapy, Gift Shop, Hearing Services, Cafeteria, Volunteer Services, IT Services	225 Beds	
Second floor	Long Term Care, Neurology Clinic, Administration, Barber and Hairdresser, Occupational Therapy, Sacred Space, Creative Arts Studio, Games Room, Laundry, Housekeeping, Support Services Offices	225 Beds	

Facility Utilities

Utility	Description	
Natural gas	Valve location(s); Facility Plant Outside Main Valve – Main shut off valve is located in Mechanical Room #1 – entrance vestibule across from Property Services workshop - Perley Centre Block 1 st floor. Uses: Boilers, Kitchen Equipment Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate.	
Propane	Location(s): Perley courtyards, Holding cage at loading Dock Uses: BBQs Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate, Provider -	
Electrical	Capacity: 2 Banks, 3000KVA/5000KVA Location of disconnect: Main Electrical Rooms Perley 1 st Floor Facility Plant Main Disconnect Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate	
Water	Source: Pump House [facility grounds at main entrance] Shut-off valves: pump house and facility (see pages 43-50 of fire plan) Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate.	
Alternative water source	Source: Redundant System Access: Service Tunnel Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate.	
Medical gases	Type(s) / volume(s): oxygen Location(s): O2E, G2N, R2S, and resident rooms [up to date list at main reception and in Emergency Measures Folder] Provider/Site Lead: VitalAire 613-741-0202	
Back-up generator(s)	Type (s): Mitsubishi Locations(s): facility Plant Generator Room Area(s) powered: Full Complex Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate.	
Fuel stores	Type(s) / volume(s): 15,000 L Location(s): tank outside garage door Perley Centre – above ground – Day tank inside generator room Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate.	

Boiler	Type: 2 Fulton Steam Boilers/4 Diedetric Hot Water Boiler Location: Boiler Room, Perley Centre First floor Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate
Air conditioning unit	Type: Carrier Chiller/Trane Absorption Unit Location: Boiler Room – Roof top units centre block roof Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry, BMW or delegate.
Mechanical room(s)	Location: Facility wide - refer to the floor plans attached.
Elevator(s)	Location(s): Facility wide Type / capacity: Hydraulic 4500 lbs Provider/Site Lead: Kone. Site lead is Manager, Property Services/ Materials Management/ Laundry. TSSA number 1-877-682-8772

Facility Services

Service	Description	
IT systems	Internet: Bell/Allstream Patient records: Finance Office/Admissions Office [Perley Centre 2 nd Floor/Point Click Care [web-based application], physical charts in dictation rooms [one per unit], Computrition for dietary. Provider: Davidson Violette and Associates Inc. (DVAI) Site lead: Manager, Informatics and Informatics	
Phone system	Location: Perley Centre First Floor boiler room Type: PBX Provider/Site Lead: Bell Canada	
Shipping/receiving	Location: Perley Centre First Floor Description: Four Bay Loading Dock Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry; Materials Management/ Laundry Supervisor	

Food services	Locations: Dining areas: Ottawa and Rideau Buildings have 1 per unit, and the Gatineau Building has 2 per unit on the first floor and 1 per unit on the second floor for a total of 14 dining rooms with serveries actively operating for daily meal service. Kitchen: Perley Centre First Floor Food Storage: Perley Centre First Floor Refrigeration: Perley Centre First Floor Provider/Site Lead: Manager, Food & Nutrition/Housekeeping	
Laundry	Location: Perley Centre second floor Equipment: Commercial Washers and Dryers Provider/Site Lead: Manager, Property Services/ Materials Management/ Laundry; Materials Management/ Laundry Supervisor	
Pharmacy	Location: Perley Centre First Floor Provider/Site Lead: CareRx	
Housekeeping – chemical storage	Location(s): Perley Centre Second Floor Housekeeping Department. Housekeeping Closets on each unit, [refer to the floor plans], MSDS binder location [first aid stations R2S, G2N, O2E] Materials Management Details: Industrial chemicals Refer to MSDS sheets in the Housekeeping area. Provider/Site Lead: Manager, Food & Nutrition/Housekeeping	
Resident transportation	On site: Perley Bus External resources: Para Transpo, Priority Transfer Alternative service providers: City of Ottawa Charter Services. Refer to Appendix I for contact information and fees.	

Facility Emergency Supplies

F	Location	Access: Key Location
1	Materials Management	Main Reception
2	Mezzanine [Perley Centre, 2 nd floor]	Main Reception
3	First Aid Station [G2N, R2S, O2E]	N/A

Floor Plans

Please see Appendix A for attached floor plans.

Mitigation

Mitigation is a key component of an emergency management program as it aims to lessen the effects of a potential disaster. Mitigation activities can occur both before and following a disaster.

Perley Health will undertake risk assessment and hazard mitigation activities to minimize the severity and impact of potential emergencies by identifying potential hazards that may affect the organization's operations.

Hazard Identification and Risk Assessment

Perley Health will conduct a Hazard Identification and Risk Assessment (HIRA) analysis every 4 years to identify and evaluate hazards to the organization. Findings from the HIRA analysis will inform mitigation strategies and enhancements/adjustments to Perley Health's emergency response plan. This work is coordinated by the Emergency Measures Committee (EMC).

The most recent HIRA was completed in the fall of 2021. Emergency Management Ontario's HIRA Program Methodology Guidelines (2019) was used in developing Perley Health's HIRA process. This process included the following key steps:

- 1. Hazard identification: All hazards included in the Hazard Identification Report (2019), published by Emergency Management Ontario, were adopted for the risk assessment exercise
- 2. Risk Assessment: A risk assessment was completed, ranking the likelihood and impact of each potential hazard. In evaluating the likelihood, the EMC considered data on "previous incidents" within Ontario included in the report. In evaluating the impact, the EMC ranked along 3 domains – people, property/critical infrastructure and service continuity. Key assumptions were identified, notably, existing mitigating factors in place to minimize impact, or current gaps that could increase negative impact.
- 3. Next Steps: A total risk hazard index score was generated, flagging the hazards from low to high risk. Any areas ranked "high risk" were further discussed to understand drivers of risk, and plan for further mitigation, where possible.

The following table highlights the areas that were assessed as **HIGH RISK** (total risk scores of 30 or higher) and outlines potential opportunities to further enhance Perley Health's preparedness. See Appendix C for complete HIRA results.

Hazard	Total Risk Score	Rationale	Opportunities
Tornado	60 Impact 12 Likelihood 5	Potential for major property damage if Perley Health receives a direct hit. This would have impact on both residents/staff within the facility. However,	Refresh Staff Redeployme nt Plan to align with current operational needs and staffing complement. Continue to build

Hazard	Total Risk Score	Rationale	Opportunities
		physical layout/design is a mitigating measure.Perley Health is 	awareness of evacuation procedures, including testing. Continue to collaborate with external evacuation sites to outline evacuation requirements.
Land subsidence (sinkhole)	40 Impact 10 Likelihood 4	If located in close proximity or on Perley Health property- services could be significantly impacted. If under a part of the facility - can collapse. However, physical layout/design is a mitigating	Continue to build awareness of evacuation procedures, including testing. Continue to collaborate with external evacuation sites to outline evacuation requirements.

Hazard	Total Risk Score	Rationale	Opportunities
Building /structural collapse	36 Impact 12 Likelihood 3	measure. Perley Health is technically 3 separate buildings that can operate independently. This gives the facility the ability to evacuate internally before requiring external evacuation. If occurs on- site, potential for significant impact on people from a harm perspective. Potential for significant impacts on all domains if this occurs at Perley Health. However, physical layout/design is a mitigating measure. Perley Health is technically 3 separate buildings that can operate independently. This gives the facility the ability to evacuate internally before requiring external evacuation.	Continue to build awareness of evacuation procedures, including testing. Continue to collaborate with external evacuation sites to outline evacuation requirements.
Epidemic/ pandemic	36 Impact 9 Likelihood	Significant people/services impact - largely	Refresh Staff Redeployme nt Plan to

Hazard	Total Risk Score	Rationale	Opportunities
		not being able to come into work (either because actually sick, or restricted entry due to Ministry guidance). The Staff Redeployment Plan has been used during the COVID-19 pandemic to assist in redeploying staff to critical activities/functio ns. Response largely directed by Ministry and Public Health. Incident Command Structure in place to help guide decision making (risk- based	current operational needs and staffing complement.
Extreme winter weather event	35 Impact 7 Likelihood 5	decisions). Significant impacts for staff – if significant road closures, childcare needs if kids remain at home etc. Property damage impacts can include downed power lines, trees, etc. Mitigations in place include 72-hr generator for all critical services if emergency results in power	Refresh Staff Redeployme nt Plan to align with current operational needs and staffing complement.

Hazard	Total Risk Score	Rationale	Opportunities
		outage (main kitchen, O2, call bell phones, A/C), contingency menu. A Staff Redeployment Plan exists to assist with movement of staff, but is outdated.	
Aviation emergency	30 Impact 10 Likelihood 3	We are in close proximity to the Ottawa Airport (likely underneath a flight path). Impact will depend on how close the incident takes place.	
Missing resident	30 Impact 5 Likelihood 6	Impact on services and people depends on how long the search takes place.	Continue to build awareness of Code Yellow procedures, including testing.

Preparedness

Preparedness activities build organization capacity to manage the effects of emergencies.

Perley Health has developed a comprehensive approach to emergency preparedness, outlined further in this Emergency Response Plan. This includes:

- Detailed plans and operational procedures to effectively respond to emergencies;
- Annual (and ad hoc) training for staff and volunteers on emergency response procedures;
- Annual drills and exercises with revision to associated plans and procedures if needed;
- Stockpile of key supply items and resources;
- Contingency plans to access additional supplies as required;
- Relationships / agreements with key external resources to assist in the event of an emergency as required.

Education and Testing

Perley Health tests the emergency plans related to the loss of essential services, fires, situations involving a missing resident, medical emergencies, violent outbursts, gas leaks, natural disasters, extreme weather events, boil water advisories, infectious diseases

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(including outbreaks, pandemics), and floods on an annual basis. All other emergency plans are tested at least once every three years, including arrangements with community agencies, partner facilities and resources that would be involved in responding to an emergency e.g.: planned evacuation.

Debriefs are conducted with staff following each test and a written record of the testing of the emergency plans and of the changes made to improve the plans are kept and communicated to staff.

Staff, volunteers and students are trained on emergency plans before performing their duties, and at least once annually.

Incident Management System

During an emergency at Perley Health, the Incident Management System (IMS) will be used as a framework for command, control and coordination of emergency operations. The IMS provides a way of coordinating staff and resources toward safely responding, controlling, and mitigating an emergency incident. IMS is an organized response management structure used by local governments, agencies, and provincial ministries that applies key principals and goals in a standardized way.

The basic principles of IMS include:

- Appointment of an Incident Commander who has overall responsibility for the facility's response
- All functions remain with the Incident Commander until delegated to other positions
- A pre-defined, clear reporting channel (chain of command) is to be followed in order to maintain a manageable span of control (no more than 5-7 direct reports)
- A common language for all Command Staff and Section Chief positions is used, which allows for greater interoperability between partner agencies
- Pre-defined responsibilities are based on response role or function
- Management by objectives incidents are best managed when issues are identified and prioritized. Achievable management objectives are then developed and detailed strategies and tactics for implementation are identified. Strategies should be SMART (specific, measurable, action-oriented, realistic and time-specific)

Incident Management System (IMS) Functions

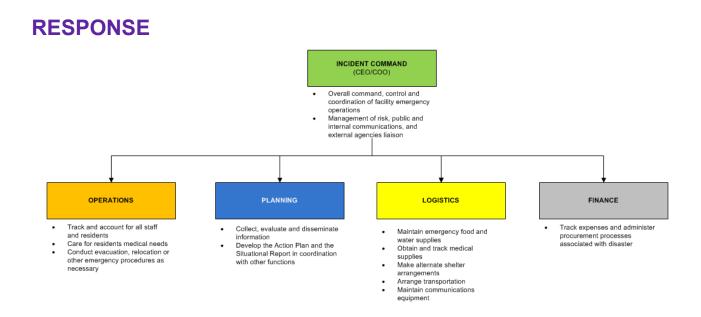
The IMS is organized into 5 key functions as described below:

Function	Role
Incident Command (Green)	Responsible for overall command, control and coordination of site emergency operations, including public information/media relations, agency liaison and
Operations (Orange)	Responsible for providing a communications link with the site or units and coordinating operations in support of the emergency response.
Planning (Blue)	Responsible for collecting, evaluating, and disseminating information within the ICP, developing the Action Plan, and the Situational Report in coordination with other functions; and maintaining all ICP documentation.
Logistics (Yellow)	Responsible for ensuring that the ICP is operational; and providing staff, services, equipment and supplies to fulfill any approved resource requests.
Finance & Admin (Grey)	Responsible for all aspects of financial management including cost tracking, financial reporting, administering procurement contracts, and overseeing the procurement

Incident Command

Responsibilities of the Incident Commander include:

- Exercise overall management responsibility for the facility emergency operations, including establishing priorities for efforts
- Ensure all actions are accomplished within priorities established
- Liaise with Senior Management
- Determine if Command Post activation is required and establish appropriate staffing level for the Command Post, and monitor effectiveness of the response
- Ensure interagency coordination is accomplished effectively
- Assure employee safety and risk management principles / procedures are applied for all activities
- Direct appropriate emergency public and internal information actions using the best methods of dissemination to ensure effective communication with staff, residents, volunteers, families, the public and other key stakeholders
- Ensure risk management principles and procedures are applied to all ICP activities in consultation with the Safety and Risk Management Officer



Levels of Response and Coordination

Incidents in the community are managed daily by first responders – police, fire and ambulance. Emergency calls are prioritized based on the severity of the incident and the availability of resources. In a larger scale event, local authorities may also activate Emergency Operations Centres (EOCs) or mobilize staff to coordinate the community response. During these major emergencies, the local authority, together with first responders, will assess and prioritize community needs, allocate resources and respond based on the determined priorities. In a major emergency that causes major disruption to transportation networks or infrastructure, outside assistance or community resources may not be immediately available. High demand for limited resources and nature of the emergency itself means that facilities should be self-sufficient and manage impacts at the site level as much as possible, and look to internal leadership for site support where necessary.

Site Response

The majority of incidents are managed at the site level and are the responsibility of the facility. Perley Health will use the following priorities as a guide in its disaster response:

- Provide for the safety and well-being of residents, staff and visitors
- Contain hazards that could pose a threat to people in the facility
- Provide care for injured individuals
- Protect critical infrastructure, facilities, vital records and other data
- Restore essential services/utilities
- Support the overall community response
- Provide critical information to the public
- Resume the normal delivery of care as soon as practicable

Alert, Warning and Notification

Disasters can occur both with and without warning. Upon receipt of an alert from credible source(s), the Chief Executive Officer/delegate of Perley Health will:

• Notify key leaders and discuss if the Incident Command Centre needs to be

activated

- Activate the Incident Command Center
- Review relevant emergency plans and consider possible actions.

Depending on the nature of the warning and potential impact of the emergency, the Incident Command Center may decide to:

- Evacuate all or part of the facility
- Suspend certain activities/operations
- Ensure essential equipment is secured, computer files backed-up and essential records stored off-site
- Implement other measures as appropriate to reduce risk to facility, residents, staff and visitors
- Notify local emergency services and community partners, community members, staff

Response Activation and Initial Actions

This plan may be activated in response to events occurring within Perley Health or external to it.

Any staff member who observes an incident or condition which could result in an emergency condition should report it immediately, and initiate emergency response actions consistent with the emergency response procedures. See APPENDIX D – EMERGENCY CODES for specific response procedures.

Incident Command Centre

The Incident Command Centre (ICC) is a centralized location for Perley Health Command staff to convene to coordinate activities, resources and the flow of information. After the immediate life safety response (i.e. evacuation due to a fire) the ICC should be activated to manage the ongoing activities in a sustained response.

The ICC should support and coordinate activities relating to:

- Policy direction and support
- Information management (collection, evaluation and display)
- Establishment of priorities
- Resource management
- Communications (internal and external)

The primary and alternate locations of the command post are:

- 1. Food and Nutrition Meeting Room
- 2. Boardroom
- 3. Rideau 1 North Conference Room

The following staff, or the most senior staff on site at the time of an incident, has the authority to activate the ICC:

- CEO
- COO
- CFO

To set up the ICC:

- 1. Ensure Incident Commander is appointed; determine which location to use.
- 2. Use the PA system to announce "Command Centre, Location" 3 times. If after hours, use the administrator recall list.
- 3. Ensure staff and Site Manager / Admin on Call have communication with ICC.
- 4. Incident Commander appoints supporting staff (Section Chiefs) as needed.

- 5. Gather materials and stationery as needed: request scribe.
- Begin assessment and action planning identify priority actions, delegate to appropriate leads, set SMART objectives to meet priority actions for next operational period.
- 7. Share response plan with staff, Site Manager or Administrator on Call (and partner agencies if on-site).

Proper implementation of an IMS begins with identifying the incident management team. There are several positions identified in this team, but since the IMS is flexible and scalable only specific positions will need to be activated during a given emergency or incident. What follows is a full chart depicting the various positions at Perley Health. Once ICC is activated, the chart with the active positions can be displayed in the Command Centre.

In order to allow for transfer of command, three or more staff are identified for each role. The table below identifies these candidates/roles:

INCIDENT MANAGEMENT POSITION	PERLEY HEALTH POSITION
Incident Commander	CEO, COO, CFO or admin on call
Public Information Officer	Director of Communications, Communications Specialist, CEO/COO
Medical Technical Specialist	As needed based on incident
Liaison Officer	COO, Director of Nursing
Safety Officer	Employee Health Coordinator, Manager Infection Prevention and Control, Manager of Resident Care, Director of Support Services, CEO, COO.
Operations Section Chief	Director of Support Services, CFO, COO
Logistics Section Chief	Director of Support Services, Manager of Property Services/Materials Management/Laundry
Planning Section Chief	Director of Nursing, Director of HR, Director Quality and Interprofessional Care
Finance Administration Section Chief	CFO, CEO, COO, Director of HR.

Incident Command Forms

To support the Incident Command Centre activities, ICP forms as well as job action sheets are provided for command staff. These forms can be found at the following location: \\nas\company\Emergency Preparedness Plan\IMS.

Action Plans

The Action Plan is developed by the ICC and establishes the priorities and objectives of the response.

Action plans are developed for a specified time period which may range from a few hours to several days.

The action plans should be sufficiently detailed to guide the response. Refer to Incident

Command Forms.

All actions, decisions, and expenses will be documented. This will protect against stress memory loss and provides needed documentation for disaster reimbursement after the emergency.

Site Support

In the event that the response cannot be adequately managed by the facility, emergency support can be provided on site by the City of Ottawa's Emergency Operations Centre (EOC). They EOC is able to provide support to the facility or site in the following areas:

- Logistics resource acquisition, transportation and staffing
- Hazmat Support
- Structural Integrity
- Fire

Staff Call Back Procedure

The Emergency Staff Recall and Alternates list includes contact information for the organization's leadership structure. This list can be accessed in the admin-on-Call folder (accessible to all leaders that participate in the Admin-on-call role).

The Employee Contact List holds staff contact information including their general proximity to Perley Health. Depending on the emergency and condition of major transportation routes, contact staff within the boundaries of the City of Ottawa first. This report can be accessed through the QHR system – please see **APPENDIX H** for instructions on how to run the report (section - Employee Home Contact Information).

The employee directory is updated by the Support Services Coordinator on an as needed basis. The directory can be found electronically (\\nas\company\Forms\Employee Telephone List).

Communications Response Plan

The Public Information Officer, under the direction of the Incident Commander, is responsible for coordinating effective communications in the event of an emergency. This includes ensuring the Emergency Communications team is launched, assignments are organized, the situation is assessed and communications approaches and strategies are developed and executed. Key responsibilities and activities are outlined below.

Situation Alert, Emergency Communications Team and Spokesperson

Immediately following an incident, the Incident Commander (or designate) will contact the Public Information Officer (or designate) and provide a situation report.

The Incident Commander (or designate) and the Public Information Officer (or designate) will launch an Emergency Communications Team that meets the agreed-upon needs and scope of work. Typical members include:

- Director of Communications
- Communications Specialist
- Director, Senior Living Portfolio & Community Programs
- Chief Executive Officer
- Chief Operating Officer

When establishing the Emergency Communications Team:

- Plan to staff the team to meet the needs and duration of incident through the resolution and reporting. This includes consideration of the number of hours per day and days per week that the team is required to operate
- Identify key personnel to support the Emergency Communications team including subject matter experts and coordinate their schedules to confirm availability throughout duration of the incident
- Assign team member(s) to activate media and Internet monitoring
- Immediately identify all other organizations/entities directly involved in the incident and obtain their contact information

The Emergency Communications Team will consult with the Incident Commander/senior management to identify a spokesperson.

A check-in schedule will be established between the Incident Commander and Emergency Communications Team to ensure timely updates and exchange of information.

Message Preparation and Frequency

The Emergency Communications team will develop a communications strategy, messages, fact sheet(s) and list of anticipated Questions and Answers for review by the Incident Commander/senior management. In preparation of internal and external communications, the Emergency Communications team will consider the following process:

- Determine audience
- Gather facts
- Describe process for data collection and investigation
- Detail Perley Health actions and response
- Describe actions of other agencies/organizations/entities and provide contact information for those directly involved
- Explain what public should be doing in connection to the incident
- Provide direction to obtain additional and up-to-date information

Message frequency and content will be determined by the Emergency Communications Team in consultation with the Incident Commander. Communications will begin as soon as practicable after the onset of the emergency (goal within 30 min – 1 hour) and will continue at frequent intervals providing updates to all stakeholders until after the emergency is declared over.

Message Delivery

The Emergency Communications Team will determine a location to host media conferences (if appropriate) and confirm that technical needs are met including microphone, speakers, slide presentation and all other considerations. The team will coordinate communications with the media, guide the Perley Health spokesperson, manage the spokesperson's schedule and availability of resident experts and assist in the delivery of approved messages.

The Emergency Communications Team will provide information updates to directly related agencies/organizations/entities including time lines, expectations of media coverage and summary of relevant Internet communications. To identify and connect with the appropriate audience, the Emergency Communications Team may refer to the master list of all external contacts (media/stakeholders/partners/vendors) which includes the name of the organization, contact individual, phone number and email address (see Appendix H).

The Emergency Communications Team, or appointed spokesperson, will communicate with all internal and external parties including partners, stakeholders (including government Page 20 of 53

agencies and community associations as applicable) and vendors. This role may involve government reporting as required.

The Incident Commander will ensure the Emergency Communication Team receives regular status reports on the situation through scheduled check-ins.

Internal and External Audiences and Communication Mechanisms

The Emergency Communications Team, or appointed spokesperson, is responsible for delivering internal and external messages during an emergency.

The internal audience, depending on the type of emergency, may include some or all of the following:

- Staff
- Volunteers
- Contractors
- Visitors
- Designated caregivers
- Clients
- Residents
- Individuals identified as Power of Attorney for residents
- Family of residents
- Board of Directors

The following mechanisms are available for internal communications. Please see Appendix J for instructions on how to access and use various communication tools.

- Public Address (PA) system
- Email to "all users", other email distribution lists
- Direct, in-person telephone calls
- Cliniconex (recorded phone alert)
- Communications boards throughout the facility
- Surge Learning home page
- External communication channels (such as website and social media) may also be used to reach internal audiences

The external audience, depending on the type of emergency, may include some or all of the following:

- Media
- General public
- Stakeholders
- Vendors
- Partner organizations such as educational institutions
- Other healthcare providers / organizations
- Government

A master list of external contacts is included in Appendix H.

The following mechanisms are available for external communications.

Please see Appendix J for instructions on how to access and use various communication tools.

- Website (including homepage banner)
- Media release, may include a fact sheet
- Email
- Recorded phone alert
- Social media including Twitter, Facebook, LinkedIn
- In-person phone calls
- Canada Post mail

Perley Health recognizes that a multi-level communications strategy may be required to reach all stakeholders, depending on the nature of the emergency. Alternate communication strategies may include:

- Establishing a staff telephone hotline to provide direction and answers. Communicate the hotline access through available channels.
- Using the staff fan-out contact list to communicate critical messages to staff at home.

Incident Resolution and Follow-Up

The Incident Commander/senior management will advise the Emergency Communications Team when the emergency is over. Messages will be prepared and delivered on the resolution of the emergency for internal and external parties including details on follow-up actions and timelines for reporting. Several communication channels could be used to announce the end of the incident ranging from a website announcement, direct phone calls and media release. The Emergency Communications Team will collaborate with Incident Commander/senior management to prepare and issue a post-event report to internal and external parties as required.

The Emergency Measures Committee will conduct a post-event review of all elements including a review of policies, messaging, staffing and interactions and may suggest revisions to the Communications Response Plan. The team will also conduct education activities (where applicable) to share post-incident review findings with staff, stakeholders and other relevant parties.

Pandemic Plan

Perley Health has developed a <u>Pandemic Plan</u> to ensure optimal provision of care and continuity of business operations in the event of a pandemic. Perley Health strives to minimize serious illness and death and the disruption of services and care.

Coordination is essential to share this burden and make the plan work. In the event of a pandemic, three main decision centres would manage Ottawa's response:

- The Ottawa Public Health Service Command Centre
- The City of Ottawa Emergency Operations Centre
- The Clinical Care Command Centre, with advice from a scientific advisory Committee

RECOVERY

Recovery actions begin almost concurrently with response activities and are directed at restoring essential services and resuming normal operations.

Depending on the emergency's impact on the organization, this phase may require a large amount of resources and time to complete.

This phase includes activities taken to assess, manage, and coordinate the recovery from an event as the situation returns to normal. These activities include:

- Deactivation of emergency response: The CEO or designate will call for deactivation of the emergency when the facility can return to normal or near normal operations and staffing.
- After Action Report: Post-event assessment of the emergency response will be conducted to determine the need for improvements.
- Establishment of an employee support system

Insurance

Perley Health will file claims with its insurance companies as appropriate. Perley Health has business interruption insurance coverage to operate for a period of 18 months and comprehensive general liability coverage that provides full replacement value on buildings and equipment.

Psychological Needs for Residents and Staff

Mental health needs of residents and staff are likely to continue during the recovery phase.

Perley Health recognizes that staff and their families are impacted by community-wide disasters and will assist staff in their recovery efforts to the extent possible.

Perley Health will continue to monitor for and respond to the mental health needs of staff and residents. Perley Health will leverage resources from its EAP provider and other local mental health professionals to coordinate staff and resident support if necessary.

Restoration of Services

Perley Health will take the following steps to restore services as rapidly as possible:

- If necessary, repair facility or relocate services to a new or temporary facility.
- Replace or repair damaged medical equipment.
- Expedite structural and licensing inspections required to re-open.
- Facilitate the return of staff to work.
- Replenish expended supplies and pharmaceuticals.
- Decontaminate equipment and facilities as required.
- Attend to the psychological needs of staff and community.

After-Action (Debrief) Report

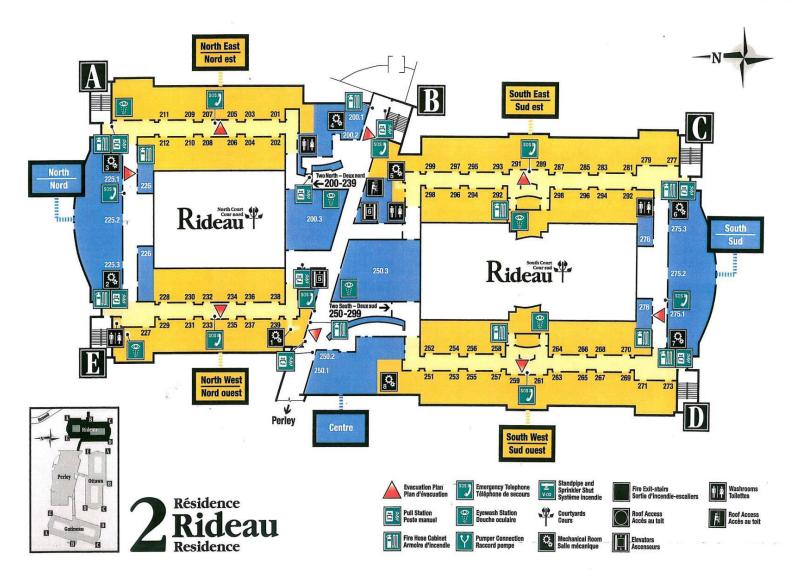
Perley Health will conduct after-action debriefings with staff and participate in local debriefings (as appropriate).

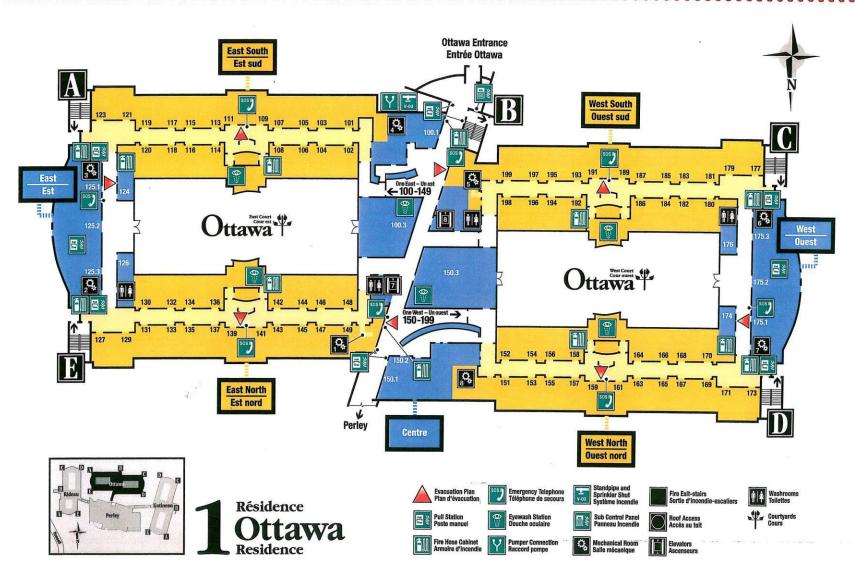
Perley Health will also produce an after-action report describing its activities and corrective action plans including recommendations for enhancing preparedness, response and recovery. This information will be communicated to relevant stakeholders.

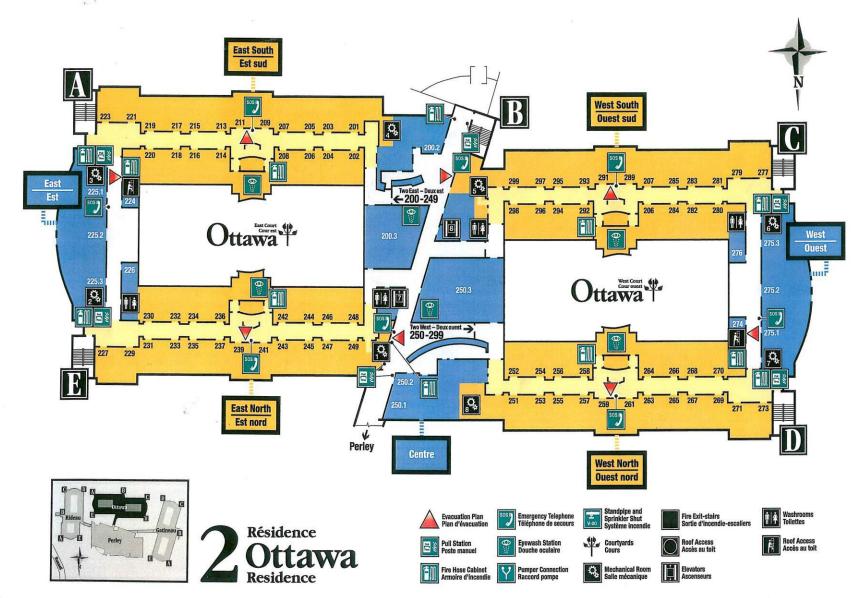
Perley Health will review this plan using the After-Action Report and will revise the plan as needed. This work will be completed within 30 days of the end of the emergency.

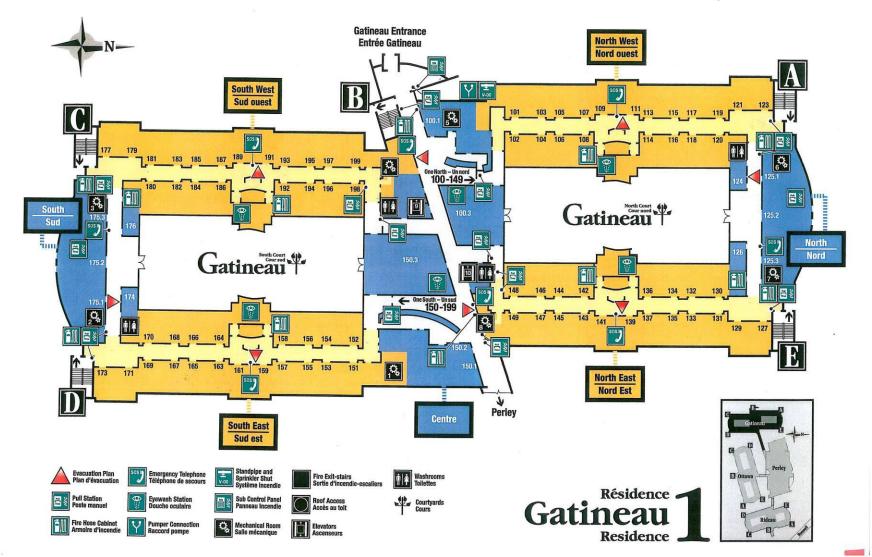
APPENDICES

APPENDIX A - FLOOR PLANS

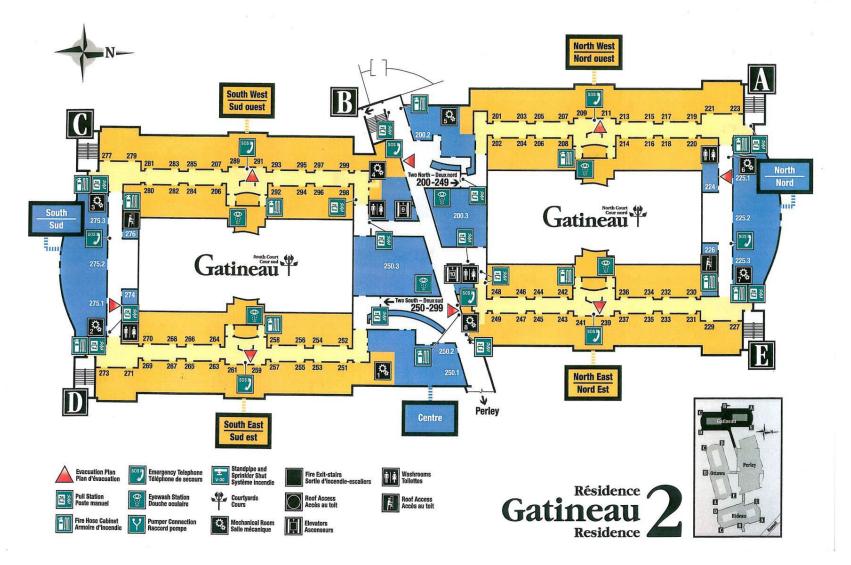


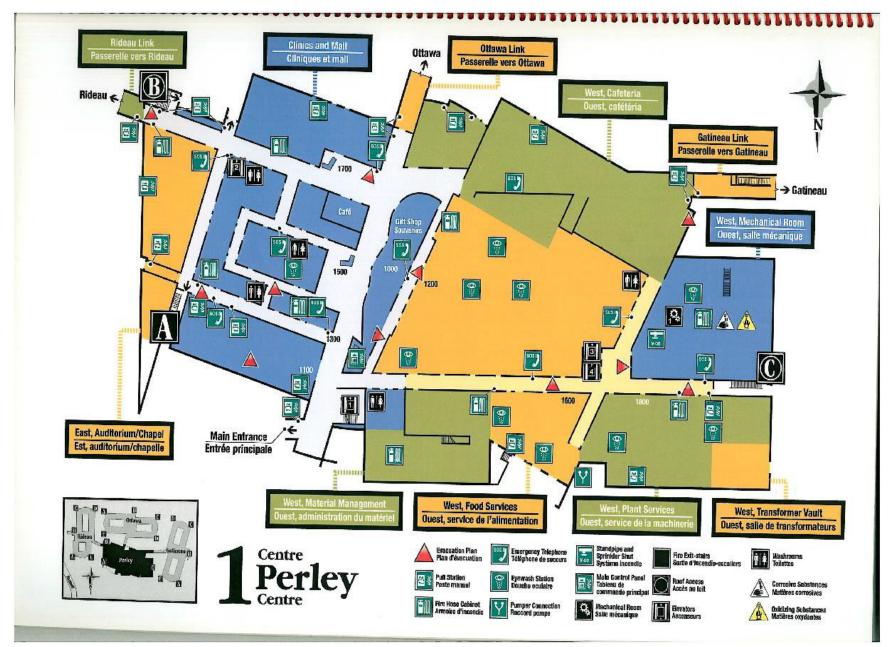




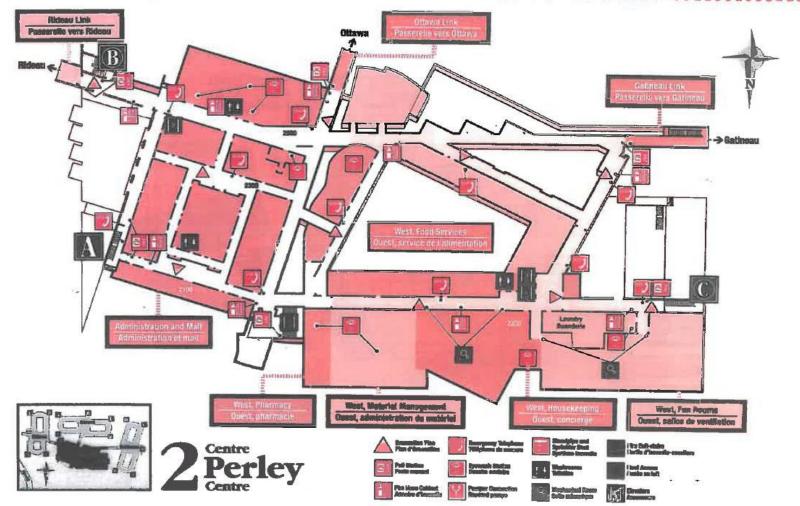


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APPENDIX B – HIRA RESULTS

#	Hazard Description	Impact - People	Impact - Property/ Critical Infrastructure	Impact - Service Continuity	Likelihood	Risk Hazard Index (TOTAL)	Assumptions - Impact	Assumptions - Likelihood (note: ratings based on Ontario data, not Ottawa specific). "significant events only"	Risk Elimination or Mitigation Measures
1	EXTERNAL HAZARDS	4	4	4	5	60	Potential for major property damage if Perley Health receives a direct hit. This would have impact on both residents/staff within the facility. Potential for impacts for staff in the community.		Layout/design of the facility is a mitigating measure - we are technically 3 separate buildings that could stand alone. Ability to conduct internal evacuation before needing external evacuation.
2	Land subsidence (sinkholes)	3	3	4	4	40	If located in close proximity or on the property- services will be hugely impacted. If under a building-can collapse. If occurs on-site, potential for signficant impact on people.	multiple events (2 in Ottawa in the 2010s)	Layout/design of the facility is a mitigating measure - we are technically 3 separate buildings that could stand alone. Ability to conduct internal evacuation before needing external evacuation.
3	Human health emergency - epidemic/pandemic	4	1	4	4	36	Significant people/services impact - largely driven by staff not being able to come into work (either because actually sick, or restricted entry due to Ministry guidance)	spanish flu, SARS, H1N1, COVID	Incident Command structure in place to guide response. Staff Redeployment Plan (BCP) has been developed and is available to assist in redploying staff to critical activities/functions.
4	Building/structural collapse	4	4	4	3	36	Huge impacts on all domains if this occurs at Perley Health.		Some mitigation due to layout/design of the facility - 3 separate buildings. Ability to conduct internal evacuation.
5	Severe winter weather event (snow, freezing rain, ice)	2	2	3	5		Staff - potential for road closures, childcare needs if kids remain at home. Property damage - downed power lines, trees, etc.	Almost an annnual occurrence	Generator for all services - main kitchen, O2, nurse call
6	Aviation Emergency	3	3	4	3	30	ive are in close proximity to the Ottawa Airport (likely underneath a flight path). Impact will depend on how close the incident takes place.		
7	Extreme Cold	2	1	2	5	25	Residents OK - Exterme Weather policy in place. Staff most affected - car breakdowns, transport issues.	Using publically accepted definition of extreme cold event	Contingencies in place for property.

8	Flood	2	1	2	5	25	residents/property OK - we are located far from water. Staff could be impacted - based on if they are personally impacted by flooting If air quality gets really bad	Riverine (river overflows) and (rain/snowmelt). No history of flooding issues at Perley Health. F - multiple events in Ontario in	Pond on property - water level maintained through drainage
9	Forest/wildland fire	2	1	2	5	25	could impact staff (community impact)	recent years (mostly Northern Ontario)	
10	Cyber Attack	2	2	2	4	24	Depends on the magnitude and type of attack, if individuals' privacy is affected then impact on people, if it disrupts IT services then critical infrastructure will be affected. If PCC/systems have to be shutdown then service continuity will be a concern.		
11	Chemical Release	3	2	2	3	21	uppending on location and type of chemical release, could have a huge effect on individulas if reaches them. Probably localized to property	Experienced internally (mustard gas).	
12	Earthquake (strong earthquake)	4	3	3	2	20	Based on where it hits, could cause major damage.	F - 3 recorded in last 200+ years. Ottawa identified as one of the metropolitan risk areas	Layout/design of the facility is a mitigating measure - we are technically 3 separate buildings that could stand alone. Ability to conduct internal evacuation before needing external evacuation.
13	Thunderstorm (lightning, hail, heavy rain, windstorm)	1	2	1	4	16	Damage from fallen trees. Downed power lines		Generator for a critical services - main kitchen, O2, call bell phones, A/C etc. Contingency menu
14	Extreme Heat	2	1	2	3	15	Residents OK - A/C, Extreme Weather policy in place to protect residents. Staff are at higher risk - if no access to A/C when not at work.	Using publically accepted definition of extreme heat event	A/C is hooked up to generator - if power outage, good for 72 hours.
15	Dam Failure	2	1	2	3	15	at work. Potential for impacting staff in the community if they live in an impacted area (small number of staff) Impact is dependant on	not locally	
16	Explosion/fire (external)	2	1	2	3	15	Impact is dependant on the location of the fire- might affect staffing.	no frequency data available	
17	Oil or Natural Gas Release	3	2	2	2	14	Will have an impact on individuals only if internally driven. External no effect on property/infrastructure.		

18	Space object crash (natural or man-made)	4	4	4	1	12	Depends on the likelihood of advance notice. If none- significant damage/impact.	only 1 incident recorded worldwide (Russia 2013)	
19	Rail Emergency	2	1	1	3	12	whereabouts of the event satff transportation could be affected. Property is not close enough to any railway lines for direct impact.	Collisions and derailments have occurred locally in the past.	
20	Terrorism/CBRNE	4	4	4	1	12	If occurs locally, impacts could be significant (physical/psychological)	no incidents reported in Ontario	
21	War/International Emergency	4	4	4	1	12	Impacts could be significant (physical/ psychological)	no data in report	
22	Fog	2	1	2	2	10	No impacts on property, but staff could be impacted (difficulty traveling to work)		
23	Humicane	2	1	2	2	10	Not close enough to water for this to be direct issue. Indirect for staff in the community - impacts on getting to work.	2 occurrences (Toronto, Southern Ont)	
24	Landslide	2	1	2	2	10	Potential impact for staff living within the immediate geographic area	2 instances in N Ont	
25	Drought/low water	1	1	1	3	9	Ability to supply domestic cold water from other parts of the building through an emergency supply line, redundant supply from city of Ottawa.	F - Has occurred frequently in last 100 years across Canada and within Ontario	In case of full loss- emergency su of bottled water in store room.
26	Drinking water emergency	1	1	1	2	6	on city of water supply through underground auto- check valce and piping. Can control water to each building and rerouting.		30 day emergency bottled drinking water supply. 30 day supply of wi if bathing. Impact mitigated fairly well.
27	Nuclear Emergency	1	1	1	2	6		chalk river decomissioned in 2018	
28	Marine Emergency	1	1	1	2	6	Not applicable		
29	Civil Disorder	1	1	1	2	6	Although we are in the capital city we have not had any incidents in the past so minimal impact.		
30	Electrical Outage (blackout)	2	1	2	1	5	Possible impact for staff in the community (in summer - extreme heat)		Generator for a critical services (7 hours) - main kitchen, O2, call bel phones, A/C etc. Contingency mer

—							OPH food recall, producers		
31	Food Emergency (e.g.	1	1	1	1	3	recalls. We are notified in		Contingency menus in place. Many
51	contamination of food supply)	1	1	1	1	3	advance.		mitigations externally (e.g. recalls)
32	Geomagnetic storm	1	1	1	1	3	advance.		Backup generator for power outage.
32	Geomagneuc storm	1	1	1	1	3	There is none close enough		backup generator for power outage.
33	Radiological Emergency					3	to our facility to cause an		
33	Radiological Emergency		- 1		- 1	5	impact.	no recorded incidents in Ontario	
		1	1	1	1		Nothing close enough to	no recorded incidents in Ontario	
34	Mine Emergency	1	1		1	3	have an impact	in Sudbury	
		1	1	1	1		Impact on services and	in Sudbury	
35						30	people depends on how		
							long the search takes		
	Mercian meridant (and a mellow)	-		2	~				
	Missing resident (code yellow)	2	1	2	6		place. Impacts will be dependent		
							on the type and duration		
							of incident. Some services		
36						24			
				_	_		will be affected if staff		
	Violent person (code silver)	3	2	3	3		hiding.		
							Depending on the nature		
37							of incident, the impact		
	Air quality (internal)	4	2	4	2		could be huge.	mustard gas incident internal	
							If significant and no water		
38						18	could be brought in even		
20						10	from external sources then		30 day back-up of water supply
	Loss of water supply (internal)	3	2	4	2		impact will be more.		(drinking). Wipes available for bathing
									Fire doors throughout the facility.
39						18			Design/layout of the facility - 3
39						18			separate buildings. Able to contain the
	Fire (code red)	2	2	2	3			2 fires in 25 years	fire
							If all went down, processes		
							in place to move residents		
40						12	in case of emergency but		
							services will be impacted		redundancy - 14 elevators on-site,
							as food cannot be moved	Never had all elevators down at	with 1 elevator per building on
	Loss of elevators (internal)	2	2	2	2		upstairs.	same time	generator.
							Some services could be		Code Grey policy - 72 hour generator
							affected, can damage		back-up, open windows in summer if
41							pipes in winters if lasts		weather permits, Preventative
	HVAC failure (internal)	2	1	2	2		long.		maintenance on system
							Services will be impacted		systems and back up in place,
42						10	as everything will have to		external system available to use as
1	IT failure (internal)	1	2	2	2		be done manually.	about 10 years ago	well.
							The intent of the		
							reciprocal agreement is		
43						6	such as to not have any	Has only happened once with few	
1	Influx of people (code orange)	1	1	1	2		services impacted.	people.	
44	and a people (code orange)				_		If happens would be		
							psychosocial impact,		Policy in place. Layout/design of
						5	services will be impacted		facility - ability to evacuate internally
							as staff might need to		before external evacuation required
	Bomb threat (code black)	2	1	2	1		evacuate.	Never had one on site	berore external evacuation required
	come and a load (code black)	-	-	-	•		ar activity	rere has one of dre	

APPENDIX C – EMERGENCY CODES Emergency Color Codes

Perley Health has adopted the following Emergency Code system, which is aligned with the Ontario Hospital Association's Emergency Code system. Detailed Policies and Procedures for each of the codes can be accessed electronically through PolicyMedical.

Code	Incident
Blue	MEDICAL EMERGENCY
Red	FIRE
Green	EVACUATION
Yellow	MISSING RESIDENT
Grey	Loss of Essential Services
White	RESPONSIVE RESIDENT
Black	BOMB THREAT
Brown	HAZARDOUS SPILL
Orange	COMMUNITY DISASTER
Silver	THREATENING Person

Additional Emergency Policies & Procedures

In addition to the Emergency Codes mentioned above, Perley Health also has policies and procedures that outline the facility's response to the following emergencies:

- Natural disasters and extreme weather events (see Natural Disasters and Extreme Weather Events Emergency Response P&P)
- Floods (see Natural Disasters and Extreme Weather Events Emergency Response P&P)
- Boil water advisories (embedded in Code Grey P&P)
- Gas leaks (embedded in Code Grey P&P)

APPENDIX D – BUSINESS CONTINUITY PROCEDURES

Staff Scheduling

In order to ensure that resident care needs are met, the facility has an LTC staffing plan that outlines daily staffing levels for PSWs, RPNs and RPNs across all shifts. This plan outlines the minimum staffing levels required, unless there are additional specific needs that must be met on a unit, such as one or more residents with changes in their condition requiring extra nursing care. This plan is available at the following location: \\nas\company\Attendance.

Those responsible for staffing must consider the acuity level of the units – if acuity is high, minimum staffing levels identified might not be appropriate, and staff would need to be assigned accordingly.

To achieve required staffing levels on each unit, the person(s) responsible for staffing is to pull from units with greater than minimum staffing levels. If pulling and redirecting staff will not achieve the required minimum staffing level, then overtime will be offered. If still unable to meet minimum staffing levels through overtime, the Staff Redeployment Plan will be leveraged.

Staffing Office

To ensure the staffing function can operate in the event of an emergency that negatively impacts QHR, the staffing function will:

- Print the DSA (Daily Staffing Analysis) for all 3 shifts
- Print the Staff Recall List every pay period
- Print the Staff Telephone List every pay period
- Print the Partner Sheets every pay period
- Print Availability Report for each occupation, every pay period

These documents will be retained in a binder in the staffing office.

In the event of an Emergency, the Director, Human Resources will meet with staffing office and nursing representatives to discuss and confirm any changes to normal activity and processes.

In the event the current location of the staffing office is inaccessible as a result of the emergency, the staffing office function will be relocated (either on site or from a remote location), and the staffing function will take place using portable laptops or alternate desktop computers, as the case may be. Any required software will be loaded as required by IT services.

In the event the land line telephones are inoperable, the After Hours Staffing Cell Phone will be used.

When the emergency has passed, the Director, Human Resources, and staffing office and nursing representatives will conduct a debrief, and confirm any changes to the Staffing Office Emergency Plan for the future.

Payroll

In the event of an emergency, normal payroll processes will proceed to the extent possible.

If QHR and/or electronic banking is compromised, the CFO will convene a team that includes

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representation from HR, Payroll, IT, and the Operating Groups (Nursing, Assisted Living, Support Services) to make and execute decisions to ensure an appropriate action plan, specific to the circumstances, is established.

In the event the Payroll Officer is not available to accomplish required tasks, the team will determine an appropriate alternative, which could include reassignment of duties under the supervision of the CFO, or obtaining assistance from qualified external suppliers.

The team will pursue the most appropriate of the following option(s):

- 1. Manually capturing schedule information for subsequent entry and generation of time cards once QHR is restored. If required, calculations can be performed manually. It is highly unlikely that the team would select this option.
- 2. Access Perley Health's last Bank Pay File and adjust as required. Reconciliation of over or under payments would take place at a later date. Any employee not receiving a pay cheque otherwise owed to them would be provided with a manual cheque, if requested, as soon as practicable.
- 3. Perley Health could consider a "pay by exception" based solely on the approved FTE for employee positions. As with the previous option, reconciliation would take place at a later date, and manual cheques could also be provided, if requested, as soon as practicable.
- 4. Submission of payroll to the bank will take place in consultation with the Scotiabank Business Support Centre in Toronto (1-888-855-1234), if required. Failure of bank processing capacity would be addressed in consultation with the Scotiabank Business Support Centre.
- 5. If there is a need to change current security profile and authorizations with the bank(s), any two of the three officers, (Chair, Treasurer and Secretary) will be required to execute this.
- 6. In the event access to the administrative offices is not possible, an alternative work location elsewhere, on or off site, could be established. QHR and Great Plains databases are backed up to cloud-based storage, and are available to support the establishment of alternative location(s). Access to a computer with required software can be accomplished, either through retrieval of the desktop box in the CFO's office, or by loading a new desktop box with required software (which takes approximately 3 hours).

When the emergency has passed, the team will conduct a debrief, and confirm any changes to the Payroll Emergency Plan for the future.

Information Technology and Information Management

Key Information Systems include:

- Point Click Care Electronic Health Record
- QHR Human Resources System
- Great Plains Financial

Davidson Violette and Associates Inc. (DVAI) provides information technology and systems support to Perley Health. The majority of important documents are stored electronically and are regularly backed up as part of the IT infrastructure. A smaller number of critical paper contracts and other documents are stored in a fire retardant safe in the Finance Office (2nd Floor Administrative Offices).

If IT infrastructure is not accessible due to total communications failure or blockage, or suffered catastrophic destruction (e.g. fire), then it is possible that key administrative and resident care processes would be affected. Perley Health's agreement with DVAI includes a Business IT Disaster Recovery System (BDR). All of Perley Health's Network Attached Storage (NAS) data is backed up to an external, "cloud" server and is available to Perley Health from any location for download and restoration. In addition, all non-NAS data related to a defined group of critical users is also included in the Backup Disaster Recovery.

Point Click Care is a web-based electronic health record. In the event the current computer hardware is damaged, or the facility is inaccessible as a result of the emergency, Point Click Care may be accessed from a remote location. It is also possible to print paper copies of the electronic health record. Refer to **APPENDIX E** for instructions on printing the Electronic Medication Administration Record (EMAR) should the Point Click Care system be unavailable.

In the event of an external internet failure Perley Health could revert to manual charting and documentation practices. Hard copies of resident charts are located in the dictation room on each unit. In the event of an evacuation registered staff would be responsible for bringing paper charts to the evacuation sites when possible.

Predicted Downtime

- Loss of Internet: up to 24 hours before restoration by external internet provider
- Loss of NAS: up to 24 hours before DVAI can create alternate means of accessing the
- Payroll, Accounting and Admissions systems
- Destruction of individual offices: individual user systems restored by DVAI within 24 hours, some specific functions (e.g. Payroll) restored within 2 hours

Supply Chain and Pharmacy

Perley Health relies on many suppliers for day-to-day operations and facility maintenance and repair. Master lists of key suppliers, their primary product/service and contact information are maintained for ease of access. Please see **APPENDIX F** for information on where to access the master lists.

Critical supplies include food, pharmaceuticals and medical supplies. To minimize the impacts of a major emergency, and to support staff in carrying out the response roles, Perley Health stores the following supplies to sustain all residents for the following number of days:

- drinking water three days;
- food supply seven days;
- medical supplies and incontinence products 30 days.

Personal protective equipment and cleaning supplies are stored for emergency use in Materials Management. If additional supplies or services are required please refer to the following lists: Contractor List and Supplier Contacts (see **Appendix F** for list locations).

Perley Health contracts its Pharmacy services to an external provider, CareRx. In the event of an emergency, CareRx has the capability to transfer their prescription and supply services from any of their locations to another to provide continuous supply. For more details please refer to CareRx's Disaster Procedure (policy #2-5), accessible at the following location: <u>https://tf.carerx.ca/ltcRepository/</u> (Username: per, Password: 175)

Facilities and Equipment

An inventory record of furniture, equipment and high-cost items is kept in the Facilities Office. Should a disaster occur, Perley Health will conduct a thorough damage assessment of the facility. Perley Health will contract with the appropriate individual / organization to conduct this assessment, dependent on the nature and extent of the damage. The Ottawa area has numerous restoration companies that can assist with the clean-up of the facility if needed. Refer to the Contractor List for contact information (see **Appendix F** for list location).

APPENDIX E – PRINTING PAPER MARS

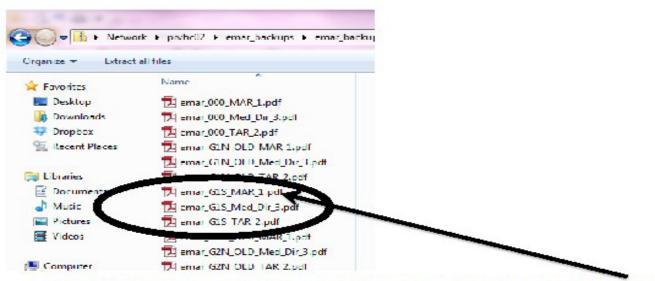
PRINTING PAPER MARS WHEN PCC OR eMAR IS DOWN



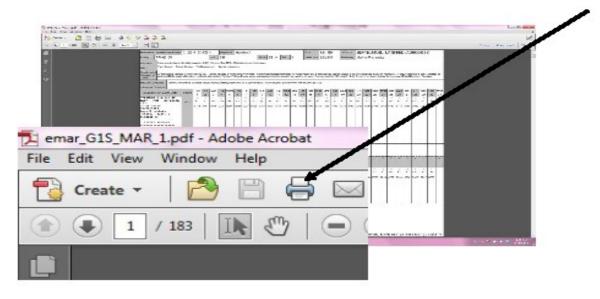
1. On the computer that is connected to the Digi pen find the icon on the desktop that is called eMAR backup

2. When you open the link you will see that the system backs up eMAR files hourly. Choose the most current "zip" file. The 2 most recent folders will contain your MARS one will be VET one will be Community (you can not tell from the Folder name which is which)

rganize 🛪 🛛 Burn	New folder		
Faults	Name	lyne	Date modified
🥅 Desklop	amar_backup.zip-20140610110000.zip	Compressed (zipped) Folder	10/06/2014 11:02 AM
🔒 Downloads	woar backup.zip-20140610104700.zip	Compressed (sipped) Folder	10/06/2014 10:49 /AM
😴 Dropkex	demor backup zip 2014-broth-coolarp	comp cace rapped i bac	13/98/2014 10:47 AM
🔄 Recent Places	🛃 emer_bøckup.zip-2014061010002.zip	Compressed (sipped) Folder	10/06/2014 10:02 AM
	🚹 ener_back op.zip-20140610090001 p	Commessed (sipped) Folder	10,006/2014 9:01 AM
🗃 tibraties	🛃 emer_backup.zip-20140610060002.zip	Compressed (apped) Folder	10/06/2014 8:01 AM
Documents	emar_backup.zip-20140610070002.zip	Compressed (dipped) Folder	10/06/2014 7:01 AM
🚽 Music	📕 emer backupterp 20140610060001.a.p	Compressed (apped) Folder	10/06/2014 6601 AM
Pictures	🔢 emor backup.ap 20140610050001.ap	Compressed (apped) Folder	10/06/2014 5:01 AM
Vicien:	Least back a sig 201051200007 - in	Commerce (Senard Enlar	STAR ODDA ADD AM



- 3. When you open the "zipped "file you will see individual PDF documents for each units MAR's, TAR's and Medical Directives. There may be more than one folder for your unit, <u>DO NOT</u> choose the one that says "old"
- 4. When you open your units PDF document you will be able to print the entire units MAR's



Appendix F - External Emergency Contact and Telephone Directory

Contractors/Service Providers Directory

List can be accessed at the following location: \\nas\company\Emergency Preparedness Plan\Contractor Contacts. This list is maintained by Support Services Department and is reviewed and updated on an annual basis.

Suppliers Directory

List can be accessed at the following location: \\nas\company\Emergency Preparedness Plan\Supplier Contacts. This list is maintained by Materials Management Department and is reviewed and updated on an annual basis.

Health Provider Organizations Directory

List can be accessed at the following location: \\nas\company\Emergency Preparedness Plan\Health Provider Organizations Contacts. This list is maintained by the Nursing Administration Department and is reviewed and updated on an annual basis.

Educational Partner Organizations Directory

List can be accessed at the following location: \\nas\company\Emergency Preparedness Plan\Educational Partner Organizations Contacts. This list is maintained by the Education Department and is reviewed and updated on an annual basis.

Appendix G - Transportation Contacts

List can be accessed at the following location: \\nas\company\Emergency Preparedness Plan\Transportation Contacts. This list is maintained by the Support Services Department and is reviewed and updated on an annual basis.

Appendix H – Communications Procedures

Public Address System

To broadcast a message over the PA system:

- 1. Pick up any phone connected to Perley Health telephone network
- 2. Dial 1-2
- 3. Wait for 2 rapid beeps
- 4. Dial 0-0
- 5. Wait for bell tones (~20 sec)
- 6. Repeat the announcement 3 times (e.g. Code Blue, Gatineau 1S; Code Blue Gatineau
- 1S; Code Blue, Gatineau 1S)
- 7. Ensure the message is audible in the PA system

Phone System

The Phone System can be used to send voicemails to all users within the facility.

Instructions for accessing the Perley Health phone system from inside and outside the facility can be located here: \\nas\company\Emergency Preparedness Plan\Communications Procedures

Employee Directory (Internal Telephone Extensions)

To access the **Employee Directory** (internal phone numbers)

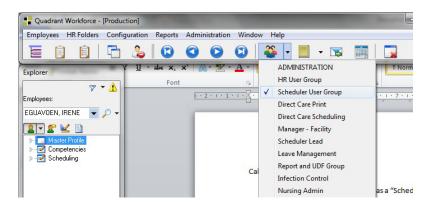
• The Employee Directory is located at the following location: \\nas\company\Forms\Employee Telephone List

Employee Home Contact Information (City and Telephone Numbers)

To access Employee Home Contact Information (addresses and phone numbers)

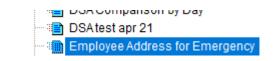
Employee home contact information can be accessed through QHR. Run report from QHR.

1. First ensure you are selected as a "Scheduler User Group" user in QHR. Go to 3 person icon and select Scheduler User Group as per diagram below



2. Click on Gold Book Icon "Reports" and click on Production and then Scheduling Reports.

Choose Employee Address for Emergency.



- 3. Click on Preview button
- 4. Click on Printer icon and chose Print report and click on Print to file. From the "TYPE:" choose excel from the drop-down list

		POIN	Airpages in rang	je v
Print to	File			
Type:	Text File		~	
Where:	Text File Report Emulation Text File PDF File HyperText Markup Language Rich Text Format		^	
	Microsoft Excel Workbook			Cancel
	Portable Network Graphics JPEG File Interchange Format		~	

5. And save. This will open it and save into Excel format for your use. Report includes Employee name, position, phone number, city and postal code.

Resident Families / POA / Emergency Contact List

To access family/POA contact information:

- Login to Point Click Care
- From Homepage, click on "Reports" tab
 - Click on "ADT/Profiles" under the Sub Modules (left-side of screen)
 - Scroll down list that appears until you see "Resident Contacts (Clinical – ADT/Profiles). Click hyperlink to access report set-up screen
 - Set-up report as follows:
 - Status Current
 - Contact Type All
 - Check box "Print Phone Numbers"
 - Check box "Print Email Addresses"
 - Select "Run Report" button in the top right-hand corner of the screen.

• Note that the report will need to be run twice, once for community residents and once for veteran residents. To select either the community or veteran resident population, select PRVHC – CU or PRVHC – VU in the banner on the top right of the screen.

Point Click Care

To post a standard message on the Point Click Care Homepage:

• The Point Click Care Facility Administrator(s) are able to post a standard alert message on the PCC landing page.

Perley Health Website

Updates to the website will be managed by the Emergency Communications Team. Instructions for updating the website are available at the following location: \\nas\company\Emergency Preparedness Plan\Communications Procedures

Media Release Recipients

Media release recipients to be determined in accordance with type / level of emergency. Sample recipients include:

Newspapers

- National
 - The Globe and Mail
 - The National Post
 - Canadian Press
 - o Toronto Star
- Regional/Local
 - Ottawa Citizen (50K circulation)

- Ottawa Sun (11K circulation)
- Metroland Media Community Newspapers (261K circulation) includes:
 - Ottawa South News
 - Nepean/Barrhaven News
 - Ottawa West News
 - Nepean
 - Kanata Kourier Standard
 - Stittsville News
 - West Carleton Review
 - Vistas
 - Riverview Park Review
 - Ottawa South

TV (national and local)

- CBC English
- Global CTV
- Rogers (local)

Radio (national and local) *Note that the top 5 stations cover 50% of the market

- CBC Radio 1 (Talk Radio)
- Hot 89.9
- 580 CFRA (Talk Radio)
- Country 94
- CHEZ 106
- Majic 100
- CBC Radio 2
- Live 88.5
- Kiss FM
- Jump
- AM 1310 (Talk Radio)

External Phone Message

To record a standard phone alert for inbound calls, see instructions at the following location: \\nas\company\Emergency Preparedness Plan\Communications Procedures

Social Media Channels

Updates to Perley Health's various social media channels (Twitter, Facebook, LinkedIn) will be managed by the Emergency Communications Team. Instructions for updating social media are available at the following location: \\nas\company\Emergency Preparedness Plan\Communications Procedures

Appendix I – Perley Health Fire Plan

Perley Health has developed a comprehensive Fire Safety Plan that has been reviewed and approved by the Ottawa Fire Department. This plan is accessible to staff and volunteers on PolicyMedical. Please contact Lorie Stuckless, Director of Support Services (<u>lstuckless@perleyhealth.ca</u>) to request a copy of the document.