**Using Sample Plans**

**These plans are just samples and will need to be altered to meet the facility’s needs and context.**

Some key items to consider include:

* The set up and operation of the facility’s systems (i.e. alarm systems, door assemblies, telecommunications, HVAC, etc.)
* The services and staff within the facility and their schedules
* The command structure used at the facility (e.g. who is in charge, who reports to whom, etc.)
* Guidance from first responders in the community
* Needs of the patients/residents at the facility
* The facility layout and operations
* Use of muster station, staff pools, rally points, etc.
* Other related plans/codes, e.g. Fire Plan Plan

The sample plan is a place to start, but the above consideration must be taken into account and the plan modified accordingly.

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| **Position/Team** | **Staff Assignments** | **Job Action Sheet Page** |
| Incident Commander | RN Supervisor/Charge Nurse | 6 |
| Front Desk Staff | Front Desk Staff | 7 |
| Facility Administrator | Facility Administrator or Designate | 8 |
| All Non Nursing Personnel | Staff of Housekeeping, Dietary, Lab, X-Ray, REHAB, Administration, Health Centre, Homecare/Public Health, Health Records | 9 |
| Maintenance Team | Maintenance Staff | 10 |
| General Nursing | All Nursing Staff assigned to inpatient units | 11 |
| Assembly Area Leader | As assigned by the Incident Commander | 12 |
| Muster Station Leaders | Senior Staff Position at Muster Station | 13 |

**Basic Code Green Response Information**

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| **Plan name** | * **“Code Green”** |
| **Plan purpose** | * To protect life, control the incident and protect property through a well-organized evacuation of all or part of facility |
| **Reason for activation** | * The need to evacuate all or part of the facility to an internal or external “Assembly Area” |
| **Position(s) authorized to activate the plan** | * Incident commander in consultation with First Responders and the Incident Command Team if appropriate |
| **Incident commander** | * RN Supervisor/Charge Nurse * **This role may be transferred or tasks designated as appropriate** |
| **Safety Message** | * If the weather is inclement, patients may not be moved directly to the outside holding area but will remain close to an exit as determined by the incident commander * **Do not put yourself or others in undo danger, leave unsafe areas even if not instructed to do so – including muster stations and assembly areas** * Remember to always walk on the right side of the corridor * Patients in imminent danger are moved immediately. * Move ambulatory patients first * Wheelchair patients to follow single file * People confined to bed are moved by 2 staff - remember proper lift procedures. Use chairs, blankets, etc. * During an evacuation patients who resist become “the least ambulatory” and will be moved last * If a patient wanders once evacuated, stay with other patients and assign someone from the staff pool to pursue if possible. * Follow instructions of First Responders with regard to facility entry * Look for potential hazards when evacuating (i.e. smoke, slick floors, ice on walkways, traffic etc.) and use shortest and safest route available. * When completing an evacuation or accounting for patients/staff during any code when a room has been searched and is confirmed vacant turn the red door tag to the up position to signify that the room is vacant to anyone searching the building after you * Designated external “Assembly Areas” are marked with signs * When the fire alarm is triggered all locked doors will unlock automatically and remain unlocked until both the alarm system and pull station are reset. |
| **Notification procedure** | * The incident commander (RN Supervisor/Charge Nurse) will determine:   + the type of evacuation   + the area(s) to be evacuated   + the area which is the highest priority for evacuation   + the designated area where patients are to be evacuated * Communication will be made by overhead page and walkie talkie |

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| **Deactivation** | * Deactivation of the plan will be determined by the incident commander * Deactivation of the plan will be communicated on the overhead paging system. | |
| **Operational areas** | **Operational purpose** | **Location** |
| Area to be evacuated first | * This area will be determined by the incident commander (RN Supervisor/Charge Nurse) based on the type of threat causing evacuation, the type of evacuation and the area in which the threat is |
| **Designated evacuation** | **Location** |
| Initial internal  Assembly Area | * The area will be determined at the time of the incident by the (RN Supervisor/Charge Nurse) and will be announced on the overhead paging system. |
| Initial external Assembly Area locations | * *-List as necessary-* |
| External short term shelter | * -List as necessary- |
| Muster Station | * Pre-designated areas where staff are to congregate during emergencies |
| **Types of evacuation** | Depending on the type and scope of the threat/emergency the following types of evacuation may be required:  **Urgent Evacuation:** *Removal of people from immediate danger*. Patients and other personnel in immediate danger will be evacuated from the area and assembled in a safe distance from the threat/emergency (often beyond the nearest fire door). | |
| **Partial Evacuation:** This will involve the evacuation of patients, and other personnel from a unit, wing, floor or combination of areas either to another part of the facility (alternative floor, wing or unit), or less commonly, out of the facility entirely. This type of evacuation could be horizontal (i.e. evacuation to a different area on the same floor), or vertical (i.e. evacuation to a different floor, normally a lower level). Ideally, in a partial evacuation patients and other personnel are moved to safe areas which separate them from areas under threat by fire and smoke doors/barriers.  ***Total Evacuation*:** This involves the evacuation of all patients and other personnel to the exterior of the building, preferably to predetermined assembly points away from potential threats. | |

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| **NOTE:** Depending on the threat/reason for evacuation, these types of evacuation may take place individually, or may represent stages where one type of evacuation leads to the next. I.e. start with an urgent evacuation, leading to a partial evacuation eventually moving to a total evacuation.  In an effort to save as many people as possible, the default priority for evacuation in any of these situations may be:   * Patients in immediate danger * Ambulatory patients * Patients on general care units requiring transport assistance * Patients on intensive care units |
| **EXTERNAL RESPONDING AGENCIES**  **Fire Department:**  **Response:**   * Will provide appropriate support depending on code or incident causing evacuation * Assist with evacuation * Can access transportation resources if necessary * May restrict access to the building * May call for further evacuation   **Required support:**  Will require information on cause and location of the incident   * Will require information on the type of evacuation being carried out * Will require information regarding external Assembly Area locations * May require assistance in coordination of transportation   **Police Department:**  **Response:**   * Will provide crowd control   **Required support:**   * May require a staff member to identify staff that have been called in and forgotten their facility identification   **Emergency Medical Services EMS:**  **Response:**   * Treat injured * Triage patients * Coordinate transport of patients   **Required support:**   * Will require information on cause and location of the incident * Will require information on injured/priority patients * Will require assistance with coordination of patient transport * May require additional transportation resources |

**Incident Commander Code Green Job Action Sheet**

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| **Position** | Incident Commander |
| **Position assignment** | RN Supervisor/Charge Nurse |
| **Tasks:**   * If not already completed announce **“Code Green”** using the overhead paging system including **(this can be delegated):**   + the type of evacuation.   + the area(s) to be evacuated.   + the area which is the highest priority for evacuation.   + the designated Assembly area where patients are to be evacuated to. * Incident commander will call 911 and fire dept will be dispatched. * Ensure you have master key and walkie talkies. * Appoint a RN to take charge on the inpatient unit and this RN to carry a walkie talkie. * Check in with other areas in the -***Sample Health Centre -*** via walkie talkie and request assistance as necessary * Proceed to the front desk & don Incident Commander vest * RN Supervisor/Charge Nurse will return to the Nursing Unit and obtain walkie talkie from RN. * Activate Staff fan out list as necessary * Co-ordinate Evacuation of areas under threat (e.g. unit, nursing unit, department) * Ensure all patients are evacuated appropriately - see safety message. * Ensure med carts, crash cart, and MARS are moved to the designated assembly area by staff, if safe to do so. * Ensure all rooms are CLEAR on the nursing unit (if safe to do so) and adjust RED tags to upright position. * Proceed to the identified Assembly Area. * Ensure Facility Administrator has been notified. * With the management team determine the next steps: * Possible reoccupation of the evacuated area. * Possible transport/discharge of patients. * Ensure incident report is completed and support reporter as necessary. | |

**Front Desk Staff Code Green Job Action Sheet**

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| **Position** | Front Desk Staff |
| **Reports to** | Incident Commander (RN Supervisor/Charge Nurse) |
| **Position assignment** | Front Desk Staff |
| **Tasks: Monday To Friday 8am-4pm**   * Upon request of the Incident Commander (RN Supervisor/Charge Nurse) overhead page as directed on initiation and completion of the event (Code Green + Type (partial/full) + Location), (“Code Green - All Clear”) Repeat overhead page 3 times on initiation and completion. * Call and notify Facility Administrator of the event if not already on the premises. * Place disaster box, megaphone and staff sign in sheet on the ledge of the desk. * Sign the staff sign in sheet. * Provide the First Responders with a master key and facility maps. * Continue to support the Incident Commander (RN Supervisor/Charge Nurse) as required. | |

**Facility Administrator Code Green Job Action Sheet**

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| **Position** | Facility Administrators |
| **Reports to** | Incident commander (RN Supervisor/Charge Nurse) |
| **Team assignment** | Facility Administrator or Designate |
| **Tasks:**  ***If in the building***   * Report to Incident Commander (RN Supervisor/Charge Nurse) * Take direction/assignments from the Incident Commander (RN Supervisor/Charge Nurse). This could include (but is not limited to):   + Taking over some or all Incident Command Duties   + Incident Assessment   + Assist with evacuation   + Assist with management of Assembly Area or External Shelter   + Acting as the facility spokesperson and working with Communications Officers * Ensure notification of -***Sample Health Centre -*** Management * Ensure Director(LTC) and Executive Directors are informed of the situation * Ensure an incident report is completed in PSMS   ***If not in the building***   * Once notified of the evacuation ensure the Director and Executive Director are informed of the situation * Report to the Hospital * Upon arrival report to and take direction/assignments from the Incident Commander (RN Supervisor/Charge Nurse). This could include (but is not limited to):   + Taking over some or all Incident Command Duties   + Incident Assessment   + Assist with evacuation   + Acting as the facility spokes person and working with Communications Officers   + Manage Assembly Areas and/or Evacuation Site * Ensure notification of -***Sample Health Centre -*** Management * Ensure an incident report is completed in PSMS | |

**All Non-Nursing Personnel Code Green Job Action Sheet**

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| **Team** | Staff of Housekeeping, Dietary, Lab, X-Ray, REHAB, Administration, Health Centre, Homecare/Public Health, Health Records |
| **Reports to** | RN Supervisor/Charge Nurse |
| **Tasks:**   * Ensure all Patients in your area, ambulatory outpatients/visitors are evacuated immediately. * All Staff check the Rooms in your area and if empty/clear put RED tags in upright position. * Report to your muster station, sign the staff sign in sheet and await direction. * If muster station area is unsafe evacuate to safe area (beyond nearest fire door or out of building) * Complete tasks as assigned at the muster station * Always return to the person who assigned you the task when completed. | |

**Maintenance Team Code Green Job Action Sheet**

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| **Team** | Maintenance |
| **Team leader** | Senior Maintenance Staff |
| **Reports to** | Incident Commander (RN Supervisor/Charge Nurse) |
| **Team assignments** | All Maintenance Staff |
| **Tasks:**   * Report immediately to Front Desk area and meet with Incident Commander * Shut down building systems as required * Clear Assembly areas as necessary. * Prepare vehicles for transportation if required (See **Appendix C).** * Assist with evacuation of patients as directed. * Transport stable patients if required. * Support First Responders. * Under direction of the Incident Commander lock all unlocked exit doors if/when the building is completely evacuated. | |

**General Nursing Code Green Job Action Sheet**

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| **Team** | All Nursing Staff of Inpatient Unit |
| **Team Leader** | RN or LP on Unit |
| **Team assignments** | All Nursing Staff of Inpatient Unit |
| **Tasks:**   * Report to Muster Station * When instructed, begin to evacuate patients/visitors from areas designated for evacuation (in the order described in the safety message) and bring along any necessary medical equipment, i.e. portable oxygen, IV’s, etc. * Take med carts, crash cart, and MARS are moved to the designated assembly area if safe to do so. * Ensure **every aspect** of each room is thoroughly checked (closets, bathrooms etc.) and confirmed empty before placing the red tag in the up position. * Ensure each patient brought to the designated Assembly Area is safe before returning to the nursing unit to assist other patients. * When the evacuation of designated areas is complete, remain at the designated Assembly Area. * Provide comfort and reassurance to the patients (blankets, oxygen, etc.). * Await further instructions from Incident Commander. * In consultation with the Assembly Area Leader, ensure all patients, staff and visitors are accounted for. | |

**Assembly Area Leader Code Green Job Action Sheet**

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| **Position** | Assembly Area Site Lead |
| **Reports to** | Incident Commander (RN Supervisor/Charge Nurse) |
| **Team assignments** | Assigned by Incident Commander |
| **Tasks:**   * Obtain walkie talkie from front desk and don the yellow vest from the disaster box. * Go directly to designated Assembly Area location as determined by the Incident Commander (RN Supervisor/Charge Nurse). * Remain in communication with other areas via walkie talkie. * Manage the Assembly Area. * Using patient census, account for patients as they arrive at the assembly area * Assign staff to assist with patients as appropriate. | |

**Muster Station Leaders Code Green Job Action Sheet**

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| **Position** | Muster Station Leaders |
| **Reports to** | Incident Commander (RN Supervisor/Charge Nurse) |
| **Team assignments (if applicable)** | Senior staff position at Muster Station |
| **Tasks:**   * Obtain walkie talkie and remain in communication with Incident Commander * Evacuate area if it becomes unsafe * Ensure all staff sign the staff sign in sheet and remain quiet for further instructions. * In communication with the Incident Commander, assign appropriate staff from muster station to assist designated areas as necessary.   As requested assist with evacuation by:   * Assign staff to hold evacuation doors open for those who are evacuating patients and equipment (two staff for each med cart if possible). * Appoint staff to tasks or duties as requested by the Incident Commander (RN Supervisor/Charge Nurse) **Appendix A.** * Appoint designated Assembly Area leader from Muster stations and give them walkie talkies if not code black. * Advise Incident Commander if it is believed that someone is unaccounted for. * Take staff sign in sheet to the external Assembly Area and ensure all patients, staff, volunteers and/or visitors present, are accounted for with assembly area leader. | |

Appendix A

POTENTIAL EVACUATION RESPONSE Staff Muster Station Leaders

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| TASK | ASSIGNED TO | COMPLETED | |
|  | | YES | NO |
| 1. Remain at front entrance if possible and safe to do so. Do not allow anyone in but the First Responders. |  |  |  |
| 1. Place Do Not Enter signage on all exterior doors. |  |  |  |
| 1. Assign staff to hold evacuation doors open for those who are evacuating patients and equipment (two staff for each med cart if possible). |  |  |  |
| 1. Bring wheelchairs from the front entrance to the Nursing Unit. |  |  |  |
| 1. Take blankets to the Nursing Unit from Laundry if possible and safe to do so. |  |  |  |
| 1. Take blankets to the evacuation area from the warmer located in the equipment storage room. |  |  |  |
| 1. Go to Nursing Unit to assist with evacuation. Take direction from the area lead. |  |  |  |
| 1. Remain with the media identified in the designated area. |  |  |  |
| 1. Have remaining staff go to Staff external Assembly Area and take direction from Site Leader. |  |  |  |
| 1. Other: |  |  |  |