

**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: March 2014

Supersedes: September  
2012

Manual: Fire and Disaster

Section: 2.1

Facility: Park Lane Terrace

Subject: Code Red

**Policy**

**Code Red** will be used for the following:

- a) To alert all occupants when a fire is discovered.
- b) When conducting FIRE DRILLS.
- c) When there is a suspicious event that may lead to a fire (i.e. smoke, smell of something burning).

**Procedure**

1. **IF YOU DISCOVER A FIRE/SMOKE:**

- R** - Remove residents from immediate area;  
**E** - Ensure windows and doors are closed; in immediate area  
**A** - Activate Alarm  
**C** - Call the Fire Department / 9-1-1-( Heritage Court charge nurse)  
**T** - Try to extinguish fire (**if safe to do so.**)

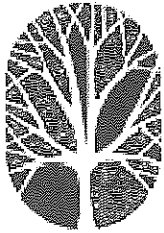
Order of REACT may change depending on the situation.

2. **IF YOU HEAR THE ALARM:**

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.



# PARK LANE TERRACE

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At the Fire Area:

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. Maximum of 4 staff members will be permitted to enter the fire zone - 2 staff members to act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

Communicators: are not to enter the immediate fire area,  
They are responsible for communication between the searchers and monitor.

Searchers: investigate for the specific location of the fire and communicate back to the monitor through the communicators whether the fire is confirmed or cancelled.

Monitor: This is usually the person in charge of the unit. (to wear safety vest to designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out of the fire area. (staff, residents, etc.)

If insufficient staff to have both communicators and searchers – the first pair of staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.  
**Do not block corridor areas.**
8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities **only** after the ‘all clear’ is announced.
10. The initiating department is to complete emergency procedure report and submit to the Administration Office.

# Park Lane Terrace Emergency Procedures Report

Supervisor from unit/department initiated drill/emergency to complete this form.

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Type of Emergency:	
Location of Emergency:	
Reason for Emergency:	
Person Discovering Emergency:	
Person Initiating Emergency Procedure:	
Did staff react promptly? (comment below)	
Were any residents injured during the emergency? (comment below)	
External Emergency Resources Contacted	
Administrator or Designate notified by: (Do not call for false alarms or drills.)	
Comments or Suggestions:	
Recommendations for Improvement:	
Name of Person and Unit Completing Report: _____	
Health & Safety Committee Review: _____	

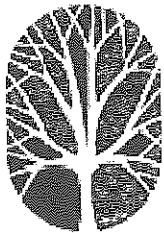
## Park Lane Terrace Emergency Procedures Report

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# PARK LANE TERRACE

## Long Term Care Facility

### Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire Drills

Approved by: Administrator

Effective Date: Feb. 2014

Supersedes: May 2010

Manual: Fire and Disaster

Section: 2.2

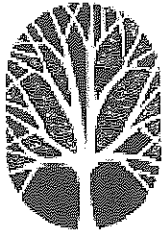
## **FIRE DRILLS**

Fire drills are an integral part of the fire safety program. It is our policy that:

1. All staff must participate in fire drills when scheduled to do so.
2. A record of attendance will be maintained as part of the In-service Record. Participation records will be kept in the Administrator's copy of the Fire and Disaster Manual.
3. Fire drills will be held monthly on each shift under the direction of the person in charge, followed by a debriefing by person in charge.
4. A Fire Drill Report must be completed at the conclusion of each drill and be used to assess employee's knowledge of the fire procedures.
5. Each Fire Drill Report will be reviewed by the Administrator. Feedback will be provided to staff regarding any required improvements.
6. The Fire Drill Report will be retained on file for review by the Health and Safety Committee.
7. There will be at least one in-service session annually. Attendance is mandatory for all staff. This session will include extinguisher instruction.
8. The monitoring service must be notified prior to the start and at the conclusion of each Fire Drill.

## **Procedure**

1. **Call monitoring company and have Park Lane Terrace taken off line. Code and contact name are required. Dispatch: 519-442-4405.**
2. Once the alarm is activated the charge nurse on Heritage Court will check the fire enunciator panel to determine the location of the fire. This person will announce "Code Red" and the location 3 times.



# PARK LANE TERRACE

## Long Term Care Facility

### Policy and Procedure

Facility: Park Lane Terrace
Subject: Fire Drills

Approved by: Administrator
Effective Date: Feb. 2014
Supersedes: May 2010
Manual: Fire and Disaster
Section: 2.2

3. It is the responsibility of the Charge Staff to direct other staff. i.e. Instruct staff to stay with residents in secured areas away from the fire.
4. The Heritage Court Charge nurse will attend the enunciator panel and open it with the small gold key. She will then use the long silver key and insert it in the top of the panel turning it to the right – press the “acknowledge alarm” button, then the “alarm silence” button.  
NOTE: the “alarm silence” button will not be effective within the first minute of the alarm sounding.
5. Reset the pull station, notify the Heritage Court Charge Nurse and she will go back to the panel, using the long silver key, she will press “alarm reset”.
6. Lock the enunciator panel.
7. The Heritage Court Charge Nurse will reset the mag lock door system with the appropriate key at the reset box located behind the nurse’s station.
8. Announce “Code Red, All Clear” three times.
9. Call the monitoring company to be put back on line.
10. A short critique of the Fire Drill will be completed.
11. Staff participating in the Fire Drill will sign the back of the Fire Drill Evaluation or an attendance sheet which will be attached to the Evaluation form and submitted to the Administration Office.

**FIRE DRILL EVALUATION**

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

Staff Conducting Drill: \_\_\_\_\_

Staff Member Discovering Fire: \_\_\_\_\_

Pull Station Used: \_\_\_\_\_

Evacuation of: Immediate Area \_\_\_\_\_

Horizontal \_\_\_\_\_

Vertical \_\_\_\_\_

None \_\_\_\_\_

Extinguishers brought to the scene: Yes  No

- Proper type of extinguisher: Yes  No

Zone Separation Doors closed properly: Yes  No

Equipment, doors, windows secured: Yes  No

All staff responded promptly and properly: Yes  No

Power source used for alarm activation: Main  Generator

All alarm components worked properly: Yes  No

Debriefing discussion with staff (what went well, areas for improvement)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

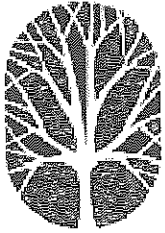
REVIEWED BY:

Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

H&S Committee \_\_\_\_\_ Date: \_\_\_\_\_

Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# PARK LANE TERRACE

## Long Term Care Facility

### Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administrator
Subject: Fire Alarm Initiation Devices	Effective Date: Feb. 2014
	Supersedes: May 2010
	Manual: Fire and Disaster
	Section: 2.3

### Fire Alarm Initiation Devices

#### Fire Alarm Initiation Devices

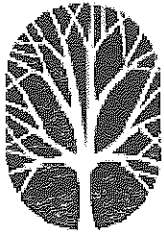
- Heat detectors:
  - Located in all utility rooms, tub rooms, staff and public washrooms, administration offices, kitchen, dining rooms, generator room, electrical room, medication rooms, nurses work rooms, dishwashing area.
- Smoke detectors
  - Located in all common areas, lounges, halls, resident rooms
- Pull stations
  - Located by all exit doors and zone separation doors
- Sprinkler system
  - Located in all rooms, corridors in basement, Grand River Court, Sunrise Court, Twin River Court. Sprinklers are activated at approximately 180 degrees.

Any of the above items, whether manual or automatic, will activate the fire alarm bells.

The Home is equipped with a 2 stage "Simplex" alarm system. Initially, a slower pulsing bell will be heard upon activation of the system. If an evacuation of the Home becomes necessary, the senior person in charge and/or the fire department will go to any pull station and key the alarm to a faster pulsing evacuation mode by using the designated key.

The alarm heard in the 2002 addition will sound like a sharp horn.





**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Pull Station Covers

Approved by: Administrator

Effective Date: February  
2013

Supersedes: Feb. 2010

Manual: Fire and Disaster

Section: 2.4

Pull Station Covers

There are pull station covers in place over the pull stations in all areas of the Home occupied by residents.

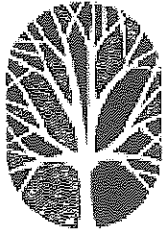
These are in place to prevent residents from sound a false alarm at the pull stations.

If these acrylic covers are raised, a loud horn will sound, alerting staff that someone is tampering with a pull station.

The alarm sound from the covers has nothing to do with a fire alarm. The pull station must still be activated in order for fire protection systems to be activated.

To reset the pull station cover:

1. Quickly replace the acrylic cover over the pull station – alarm will silence once in place.



**PARK LANE TERRACE**  
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Approved by: Administrator

Effective Date: Feb. 2014

Supersedes: May 2010

Manual: Fire and Disaster

Section: 2.6

Facility: Park Lane Terrace

Subject: Activation of Alarm Procedure

Activation of Alarm Procedure

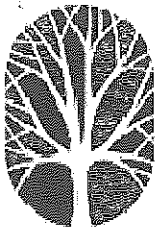
**1<sup>st</sup> STAGE ALERT SYSTEM**

In a first stage alert, one of the following has been activated:

1. a pull station
2. a smoke or heat detector
3. the sprinkler system

**2<sup>nd</sup> STAGE ALERT SYSTEM**

This is activated by a charge nurse or the fire department by putting the system into an evacuation mode. This can be done by inserting the long silver key into any pull station and turning it.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Loss of Electricity – Generator

Approved by: Administrator

Effective Date: Dec 2018

Supercedes: March 2016

Manual: Emergency  
Planning

Section: 2.6

**Generator Back Up**

- In the event of total loss of power, contact the **Brant County Power at 519-442-2215** to report the loss of power.
- All fire protection equipment and essential services are maintained by the generator, which starts automatically within seconds of the power going off. This is a natural gas fueled generator and will operate indefinitely until power is restored, with no need of refuelling.
- Our home has both RED and GREY generator powered outlets throughout.
- Each home unit has an Emergency Kit at the nurses station equipped with extension cords and flash lights. In the event of power loss the “essential” equipment is prioritized and would be plugged into a red or grey outlet. To assist any oxygen machines, med carts, freezers, computers etc
- If loss of power occurs during the winter, **heating is gas-fired boilers will remain functional on the generator.** If loss of power occurs in the summer, **air conditioner will not operate.**



GRAND  
WIN

STORAGE 1092 225A 208/120 3/4 CUTLER HAMMER PRL1

NO. LOAD DESCRIPTION # A # LOAD DESCRIPTION # A WATTS NO.

NO.	A	#	LOAD DESCRIPTION	#	A	WATTS	NO.
1	1500	20	1 SERVRY REFRIGERATOR	A	20	1500	2
3	200	15	1 RECEPT NURSES STATION	B	15	200	4
5	200	15	1 RECEPT MEDS	C	15	200	6
7	200	15	1 RECEPT MEDS	A	15	200	8
9	100	15	1 RECEPT TREATMENT	B	15	100	10
11	300	15	1 RECEPT LOUNGE, DINING	C	15	300	12
13	200	15	1 RECEPT CORRIDOR	A	15	200	14
15	1200	15	1 WHIRLPOOL TUB	B	15	1200	16
17	100	15	1 NURSE CALL CONTROLLER	C	15	100	18
19	500	15	1 SERVRY UC FRIDGE	A	15	500	20
21	200	15	1 RECEPT CONV BACK BOARD	B			22
23	200	15	1 RECEPT QUIET LOUNGE	C	15	200	24
25	500	15	1 MEDS FRIDGE	A	15	500	26
27	800	15	1 HW HEATING CONTROL TRMTR	B			28
29				C			30
31				A			32
33	---	15	1 SPARE	B			34
35	---	15	1 SPARE	C			36
37	---	15	1 SPARE	A			38
39	---	15	1 SPARE	B			40
41	---	15	1 SPARE	C			42

NOTES:  
\*1. OPTIONS ISOLATED GND KIT  
\*2. BUS MTD TVSS

TOTAL LOAD 11.2KW LOCATION JAN 10/07 MAINS 225A VOLTAGE 208/120 #/WIRE 3/4 TYPE CUTLER HAMMER PRL1 MTC. FLUSH MAIN BREAKER N/A

MAIN KITCHEN

STORAGE 2073 225A 208/120 3/4 CUTLER HAMMER PRL1

NO. LOAD DESCRIPTION # A # LOAD DESCRIPTION # A WATTS NO.

NO.	A	#	LOAD DESCRIPTION	#	A	WATTS	NO.
1	1200	20	1 SERVRY THW DR FRIDGE	A	20	1500	2
3	500	15	1 UNDER COUNTER FREEZER	B	15	500	4
5	300	15	1 RECEPT DINING	C	15	300	6
7	400	20	1 LTC KITCHEN	A	20	400	8
9	200	15	1 HW HEATING CONTROL TRMTR	B	15	200	10
11				C	30	4800	12
13				A	30		14
15				B	15	200	16
17				C	15		18
19				A	15	2800	20
21				B	15		22
23				C			24
25				A			26
27				B			28
29				C			30
31				A			32
33	---	15	1 SPARE	B			34
35	---	15	1 SPARE	C			36
37	---	15	1 SPARE	A			38
39	---	15	1 SPARE	B			40
41	---	15	1 SPARE	C			42

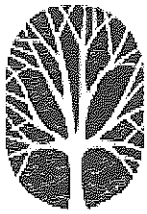
NOTES:  
\*1. BREAKER SHALL BE GFC TYPE WITH 30mA TRIP.  
\*2.

TOTAL LOAD 12.6KW LOCATION JAN 12/07 MAINS 225A VOLTAGE 208/120 #/WIRE 3/4 TYPE CUTLER HAMMER PRL1 MTC. FLUSH MAIN BREAKER N/A

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**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator *[Signature]*

Effective Date: Dec 2018

Manual: Environmental

Section: Maintenance  
Policy Number: 2.6  
Page:

Facility: Park Lane Terrace

Subject: Generator Maintenance

### **GENERATOR CHECKS**

The maintenance department is responsible for maintaining the generator along with T&T Power Group

Weekly maintenance check is performed. Checking all exhaust air screens to ensure that they are clean and free of debris.

Monthly check done, referred to as "under load". During this time there will be a 12 second power interruption. Chubb will be called by Director to be taken off line. The staff must be aware that during this time that we are off line and the mag locks are not working. To ensure all residents are safe from closing doors.

The maintenance staff will go to the main generator power panel, located in the mechanical room in the basement. Turn the generator over to "TEST SELECTOR". **STEP AWAY FROM THE PANEL.** Source 2 light will then light up indicating that we are now on full generator. Then the generator checks will be done, checking engine oil and coolant levels. Oil should be between 40 - 65 psi. Generator temperature should be under 200 (around 180 in the summer and 158 in the winter) documenting all on Monthly Generator Form.


The generator is to run for 10 to 15 minutes, during this time; all power is off and on the generator.

Once the generator test is complete turn the switch back to AUTO from test selector on the panel. **STEP AWAY FROM THE PANEL.** Once we are back up and off the generator, reset the fire panel at the main fire panel in the mechanical room. Press "Supervisor Acknowledge"

When the test is completed the charge nurse then must reset the mag locks with the "reset box" located at the nurses' station on the west wing (this resets the mag locks for the entire building). Followed up by a page asking all staff to reset their mag lock. The Director will call Chubb to request that we be put back on line. The director will make an overhead page that we are back on our fire monitoring system.

Yearly the generator will be tested when TSSA is in the home to do our yearly Emergency Power test.



	<b>APANS</b>		<b>Approved by:</b> Administrator
	<b>HEALTH SERVICES</b>		<b>Effective Date:</b> Dec 2018
	<b>POLICY &amp; PROCEDURE</b>		<b>Supersedes:</b>
<b>Home:</b> Park Lane Terrace		<b>Manual:</b> Emergency Planning	
<b>Subject:</b> Interruption in Service/Elevator breakdown/entrapment		<b>Section:</b>	Page 1 of 1

In the event that the elevator is malfunctioning or completely out of service; please post a sign on the upper level (Twin River Court) and at the Main Level (across from the Family Dining Room) to ensure Staff, Residents and Visitors are aware.

Notify the Main Office and they will contact the Elevator Repair Company. If it is after hours and the office is closed; please call the On Call Manager – 226-208-6092

If the on call Manager is unavailable contact Thyssen Krupp (elevator company)  
@ 1-800-343-5103.

Ensure all Residents, Staff and Visitors are accounted for.

If the situation involves entrapment and the Estimated Response Time for the Thyssen Krupp service rep is greater than 15 minutes call 911 stating a medical emergency.

Try to reassure the persons involved, remain calm, help is on the way.

The elevator will be tested yearly with TSSA and T&T Power Group for the mandatory Emergency Power Test.



# PARK LANE TERRACE

295 Grand River Street, North, Paris, ON N3L 2N9

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October 10, 2018

## Important Notice to All Staff

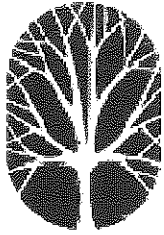
Recently we had a situation where following a generator test some of the mag locks did not reset resulting in the exterior doors not being secured for a lengthy period of time.

During such circumstances I would like to stress that the fire code must be upheld at all times. There will not be circumstances where it is permissible to block or barricade any doors or windows as this is a violation of the fire code.

If the RN is in need of assistance she can take the following measures to assist with containing the emergency. This may include observing emergency exits for potential resident elopement:

1. Utilize dietary, housekeeping, laundry and recreation staff to secure the doors. This may include extending their shift till the emergency is averted.
2. Call the on call manager to problem solve the matter and determine together if the Manager will be required to come on site to assist with coordinating the plan and attaining staff to attend to the emergency.
3. Utilize the external partnership through Pinkerton security to be on site to assist with managing the situation.

Please be prepared to discuss incidents as they arise during regular staff meetings to help communicate with each other on lessons learned and leading practices that will help each other.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Smoking Policy

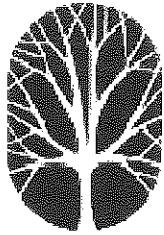
Approved by: Administrator
Effective Date: October 2011
Supersedes:
Manual : Fire and Disaster
Section:
Policy Number: 2.7
Page:

**SMOKING POLICY**

*Preamble:*

Smoking and the careless use of smoking materials is the cause of many fires in all types of occupancies. The consequence of fire in long-term care homes is even more significant because most residents require direct assistance to evacuate the building. This is evidenced by statistics that show that most fire deaths in long-term care facilities over the last 20 years resulted from residents using smoking materials.

Park Lane Terrace is a smoke free environment. No one is allowed to smoke inside the home. Therefore, for those few long term care residents who were admitted to the home prior to the approval of this revised policy, will be expected to smoke only in the designated smoking area and follow the guidelines of the smoking policy. This policy has been developed with information established from the Tobacco Control Act (1994), the "Smoke Free Ontario Act (bill 164 which takes effect May 31, 2006) and the Office of the Ontario Fire Marshal.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Smoking Policy

Approved by: Administrator
Effective Date: October 2011
Supersedes:
Manual : Fire and Disaster
Section:
Policy Number: 2.7
Page:

**Purpose:**

To provide clear direction regarding the home's smoking policy.

To ensure a safe environment for all residents, especially those who still smoke.

To ensure the home complies with the Smoke Free Ontario Act which bans smoking in all public places and all enclosed workplaces.

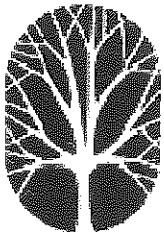
**Policy:**

•All residents who smoke shall have a smoking assessment completed. This shall be reviewed quarterly to determine any change in the smoking risk of the resident. If the smoking assessment reveals that the resident is unsafe, they must be accompanied by a family member or a responsible person while in the designated area.

•Smoking materials (cigarettes, matches, disposable lighters) will be securely stored by the staff

(in the medication room) and given to the resident when needed.

•Smoking will take place in the designated smoking area only. This is located outside in the court yard off of Cobblestone Court. This area must be (9) meters away from the doorway so as not to be in violation of the smoking by-law.

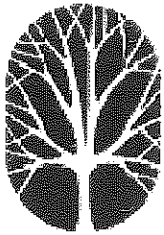


**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Smoking Policy

Approved by: Administrator
Effective Date: October 2011
Supersedes:
Manual : Fire and Disaster
Section:
Policy Number: 2.7
Page:

- All residents who smoke must be given a fire retardant smoking apron to wear while smoking.
- The practice of wearing smoking aprons will be applied to all residents, regardless of their capabilities, to ensure a consistent application for smoking.
- Supervision of the smoker must be considered. Residents attended by visitors may use smoking areas when written permission is granted by staff. (*Visitor must sign the designated form when taking a resident out for a cigarette.*)
- All operation of lighters and matches to light tobacco products will be done under direct supervision unless stated otherwise in the smoking assessment.
- All visitors, staff and residents will be advised of the smoking policy.
- Blankets and cushions will be restricted to residents when they are out smoking.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Smoking Policy

Approved by: Administrator

Effective Date: October 2011

Supersedes:

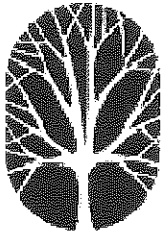
Manual : Fire and Disaster

Section:

Policy Number: 2.7

Page:

- Residents who are on oxygen, will not be permitted in the designated smoking area. Oxygen signs will be posted on all rooms of residents using oxygen.
- The designated smoking area must be kept clean. All cigarette butts must be placed in the appropriate container and extinguished properly.
- Residents who smoke, will receive a copy of the smoking policy.
- Staff will be aware of the location of a fire blanket for use in an emergency. (*located in the cupboard beside the exit door to the court yard*). They will also be knowledgeable with the "STOP-DROP-ROLL" procedure using the fire blanket.
- Staff will be observant of any risks to the resident smoking such as burn holes in their clothing, discarded smoker's materials in non-smoking areas, the presence of smoke odor in non-smoking areas. Staff will report any of these to the charge nurse. Written documentation should be kept of all incidents where the smoking policy has been breached. When a resident is identified to have breached the smoking policy and procedures, precautionary instruction should be incorporated into the resident's care plan.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: October 2011

Supersedes:

Manual : Fire and Disaster

Section:

Policy Number: 2.7

Page:

Facility: Park Lane Terrace

Subject: Smoking Policy

**In the event that a resident or visitor contravenes the home's smoking policy, staff should take the following action:**

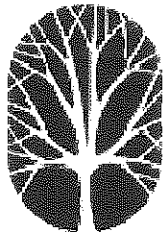
**Resident:**

- require resident to immediately extinguish smoking materials
- take control of the smoking materials
- provide a reminder to the resident of the smoking policy and procedures
- record the incident in the residents chart
- issue a letter to the family or substitute decision maker, notifying them of the incident and the home's smoking policy (discretion may be used for a first occurrence).

**Visitor:**

- provide the visitor with a copy of the smoking policy for the home
- require the visitor to cease smoking and/or leave the premises
- document incident and report it to the Administrator
- document incident in the file of resident associated with the visitor

**Under the new Smoke Free Ontario Act, the local health unit will be enforcing the new legislation. They may attend the facility to inspect for compliance. Anyone (staff, residents, visitors) found smoking in any area other than the designated smoking area may be fined. The facility may also be subject to a fine.**



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: October 2011

Supersedes:

Manual : Fire and Disaster

Section:

Policy Number: 2.7

Page:

Facility: Park Lane Terrace

Subject: Smoking Policy

**Staff Training:**

All staff will be knowledgeable of the home's smoking policy. It will be located in the Fire & Disaster Manual. The policy will be part of orientation of all new staff.

**Accountability:**

The Administrator is responsible to ensure policy compliance.





## SMOKING CONTRACT

Between

Park Lane Terrace

and

---

I am aware that Park Lane Terrace is a non-smoking home. I have read and understand the smoking policy. I have been instructed as to the location of the designated smoking area outside the home.

I agree to abide by the following rules:

1. I will get my cigarettes and lighter from the nurse each time I require them. I will not keep my cigarettes or lighter in my room or on my person at any time. I will return them to the nurse's station for safe keeping after their use.
2. I will only smoke in the designated smoking areas outside the home.

A violation of any of the smoking rules may result in the following:

1. A visit from someone in the Administrative Office of the Fire Department.
2. Smoking privileges may be revoked.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
Resident / Family

\_\_\_\_\_  
Date

## Park Lane Terrace Smoking Assessment

Resident: \_\_\_\_\_ Initial Assessment Date: \_\_\_\_\_

How much do you smoke? \_\_\_\_\_

When do you usually smoke? \_\_\_\_\_

Does the resident have cognitive loss? \_\_\_\_\_

MMSE score: \_\_\_\_\_

Does the resident have a history of inappropriate smoking (i.e. burn marks on body, burn holes in clothing or wheelchair, reports of unsafe smoking)?

YES  NO

Are there any physical limitations which have implications on the resident's ability to smoke. (i.e. arthritis, paralysis, sight deficit)?

YES  NO  If yes, specify:

\_\_\_\_\_  
\_\_\_\_\_

Does the resident use assistive devices that may alter his/her ability to smoke? (i.e. splints, neck collar).

YES  NO  If yes, specify.

\_\_\_\_\_  
\_\_\_\_\_

Does the resident have a history of falling asleep while seated?

YES  NO

Does the resident take any medication that could impact on his / her ability to smoke safely?

YES  NO

**Observe the resident while smoking a cigarette. Did the resident complete the following tasks safely and independently? If no, comment by writing the resident's action in the space provided. Indicate whether the cause is related to physical, cognitive, perceptual or behavioural issues.**

Obtain cigarettes and lighter?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Get to the designated smoke area?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Obtain and use a smoking apron?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Light cigarette?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Hold cigarette securely?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Put out cigarette?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Dispose of ashes in ashtray/bucket	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Return smoking supplies for safe storage? YES  NO   
Able to call for help? YES  NO

Additional comments:

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**Ask the resident the following questions:**

1. Tell me where you are permitted to smoke.

Response appropriate? YES  NO

2. What would happen if you smoked near an oxygen source?

Response appropriate? YES  NO

3. What would you do if there was an emergency in the designated smoking area?

Response appropriate? YES  NO

-----  
Considering the above, is the resident safe to smoke?

YES  NO

If yes, does the family support the resident smoking and contribute to purchases?

YES  NO

Does the plan of care have all necessary information documented to ensure safe smoking?

YES  NO

If no, add the needed interventions / actions/ information.

If the resident is unsafe, family/ resident problem solving meeting held.

YES  NO

Completed by: \_\_\_\_\_

Date: \_\_\_\_\_

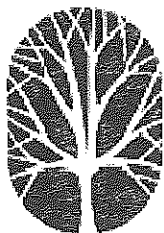
Quarterly Review Dates:


**PARK LANE TERRACE  
SMOKING AUDIT**

Date: \_\_\_\_\_

Completed by: \_\_\_\_\_  
Resident: \_\_\_\_\_

CRITERIA	YES	NO	COMMENT
1. Smoking assessment done on resident and is reviewed quarterly.			
2. Safety concerns re: smoking are on NCP.			
3. Smoking contract signed by family/resident.			
4. Smoking apron is available and used.			
5. Smoking materials are kept secure by staff.			
6. Cigarette butt container available. There is a separate container for garbage.			
7. There is access to a fire blanket near the designated smoking area.			
8. There are signs posted for designated smoking area.			



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire System Reset Procedure

Approved by: Administrator

Effective Date: Feb. 2014

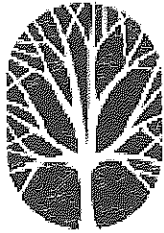
Supersedes: February 2011

Manual: Fire and Disaster

Section: 2.8

**Fire System Reset Procedure**

1. Use the small gold key marked "Simplex" to open the enunciator panel located between the doors on Heritage Court. Use the long silver key and place in the key slot at the top of the panel and turn it to the right. Now press the "acknowledge alarm" then "alarm silence button".  
(This alarm silence cannot be used in the first minute of the alarm.)
2. Reset pull station, replace rod if broken.
3. Reset panel on Heritage Court. Use the slender silver key turn it to the right and press "**Alarm Reset**" button, but only do this once permission is given by Fire Department.  
(*Fire Department will not attend if it is a drill and we are off line*)
4. Reset the mag lock for the entire building by using the small circular key in the reset box at the nurse's station on Heritage Court. Check one of the doors to be sure it is locked.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Mag Log Reset Procedure

Approved by: Administrator
Effective Date: Feb. 2014
Supersedes: Oct. 2011
Manual: Fire and Disaster
Section: 2.11

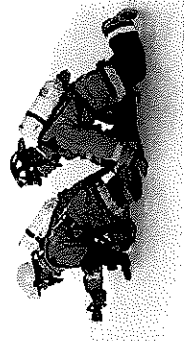
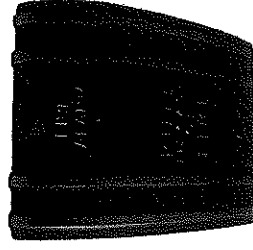
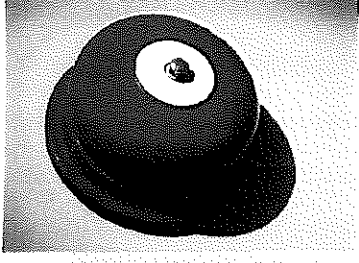
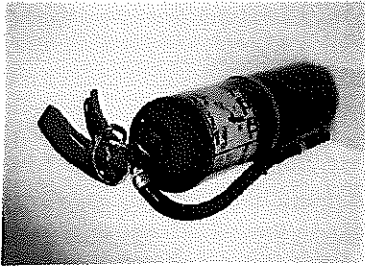
**MAG LOCK RESET PROCEDURE**

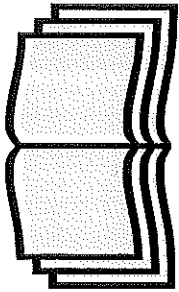
Reset the Mag Lock System for the entire building y using the small circular silver key

Place this key in the rest box located behind the heritage Court nurse's station.

Check one of the doors to ensure the system has been reset.

# Fire Safety For Registered Staff And Management

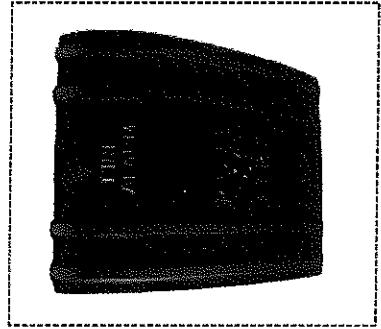




# Notifying Chub Edwards Fire Monitoring System

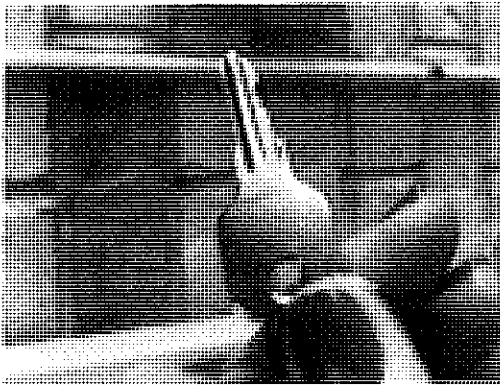


Refer to phone book or notice on Bulletin board in Workroom.  
Call 1-800-387-0771 Ask to have our monitoring off line and give a time frame ( 1 hour)  
Give system # 926613 Pass # 442275  
When your drill is finished be sure to call them back and have our system put back on line again.

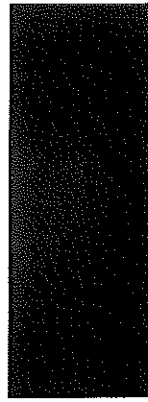




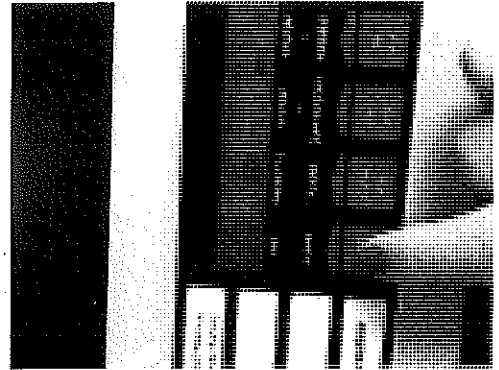
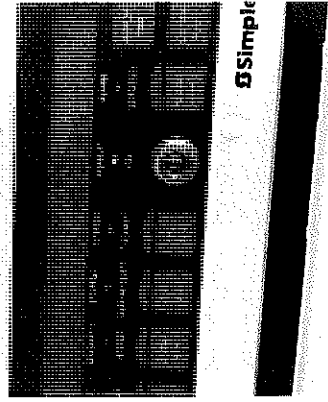
# Enunciator Panel (Fire Panel) Acknowledge and Re-set Procedure



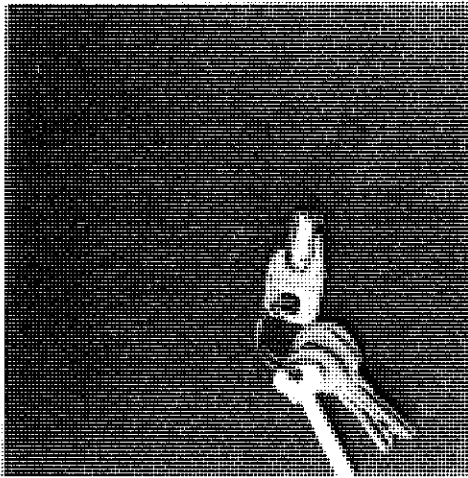
FIRE PANEL  
KEY {INSERT  
IN DOOR}



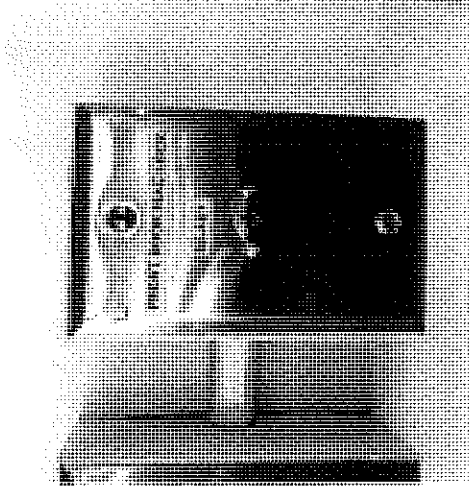
READ PANEL TO SEE WHERE  
ALARM WAS PULLED



MAG LOCK RE-SET

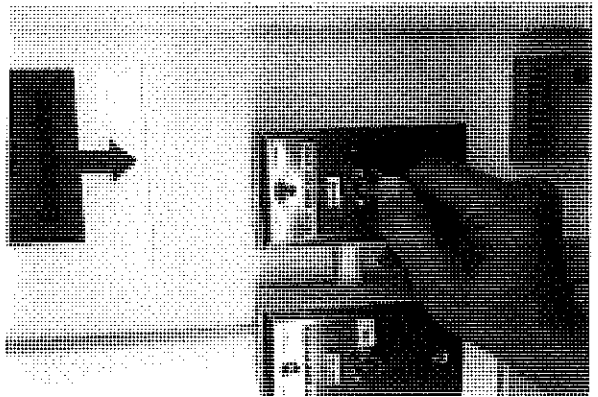


This is the key for the Mag Lock



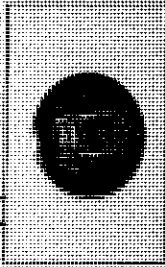
Mag locks need to be re-set.  
Box by Med Room door on  
Heritage

Turn to right-all key pads  
at Exit Doors will need to  
be re-set as well (please  
make an announcement)



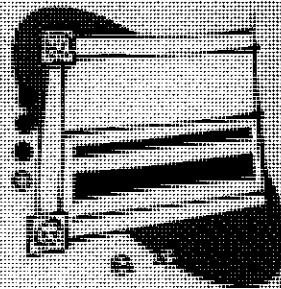
**\*Note that if the alarm is set off for any other reason other than for a fire drill the system..... can not be reset until authorized by the fire department.**

Sprinkler System controls and standpipe location: in the basement opposite the elevator  
The key is hanging at the top of the door frame.

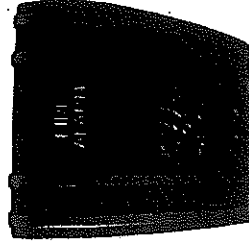
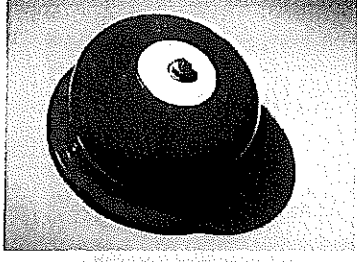
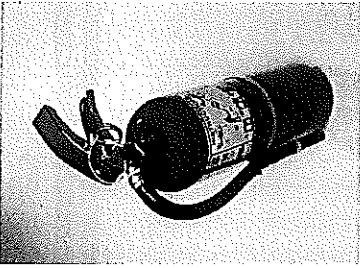


Master key will be in an envelope in a locked box on Heritage Court.  
Kept in an envelope sealed and sign across where it is sealed when finished with it.  
Each envelope is numbered—use them in order.

In the event of an alarm the elevator IS NOT TO BE USED until authorized differently by the fire department.  
Always ensure a staff member is assigned to the elevator to ensure no staff, resident or visitors enter and try to use it.

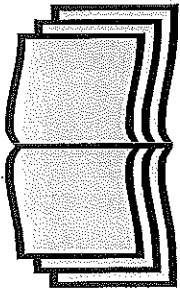


# Fire Safety For Registered Staff And Management

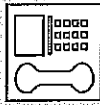


## Conducting a Fire Drill

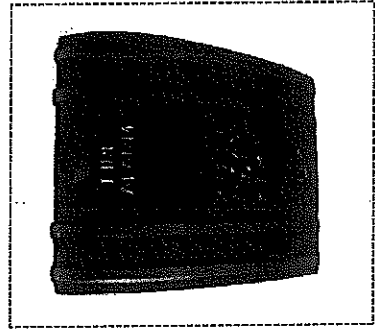
- Notify the alarm system company to go off line (see slide #3)
- Place the Orange cone /fire sign for staff to find  
or pull the pull station once offline
- Check enunciator panel to see location of fire (Heritage Charge Nurse)
- Announce CODE RED \_\_\_\_ X3 (The fire location)
- Instruct staff to respond to area of fire and clear the zone
- Reset the pull station and let Heritage Charge Nurse know to reset fire panel
- Reset Mag Locks
- Announce to staff to reset key pads on all exit doors
- Call all clear once key pads are reset
- Have discussion of fire type and any concerns
- Fill out staff signature sheets and Emergency Report



# Notifying Chub Edwards Fire Monitoring System



Refer to phone book or notice on Bulletin board in Workroom.  
Call 1-800-387-0771 Ask to have our monitoring off line and give a time frame ( 1 hour)  
Give system # 9266613 Pass # 442275  
When your drill is finished be sure to call them back and have our system put back on line again.





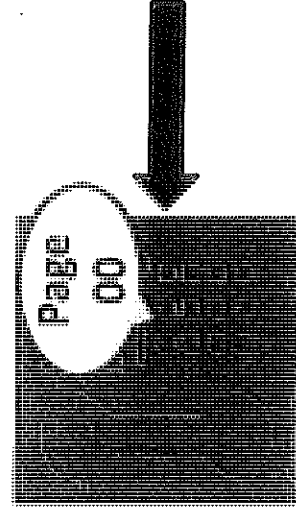
## Heritage Court

Refer to the enunciator panel for exact location of the fire  
Page to the entire building the location of the fire.

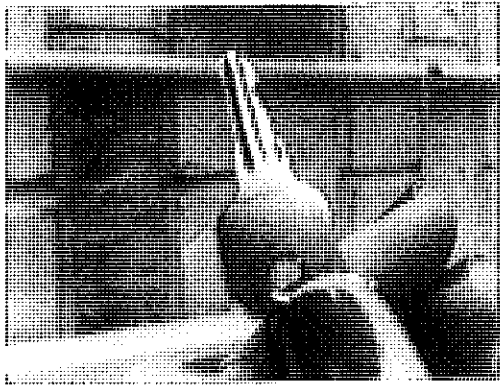
Using Code Red in \_\_\_\_ X3



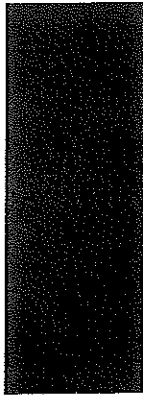
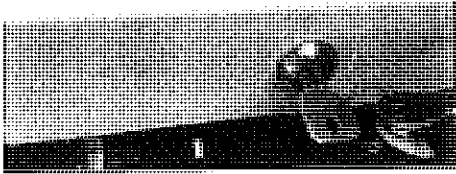
How to use the paging system



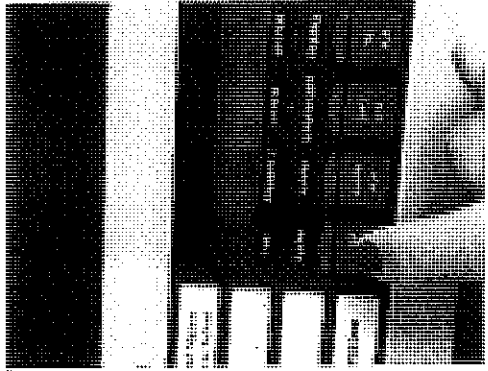
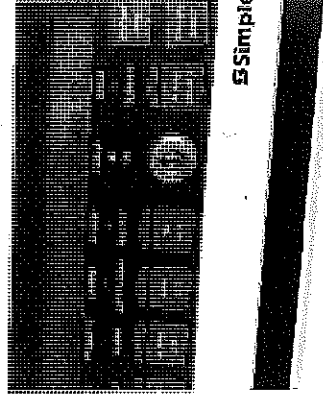
# Enunciator Panel (Fire Panel) Acknowledge and Re-set Procedure



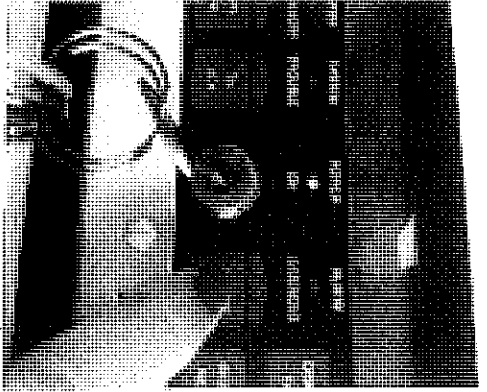
FIRE PANEL  
KEY {INSERT  
IN DOOR}



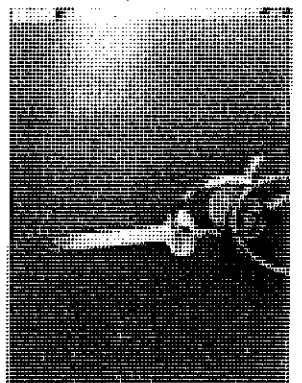
READ PANEL TO SEE WHERE  
ALARM WAS PULLED







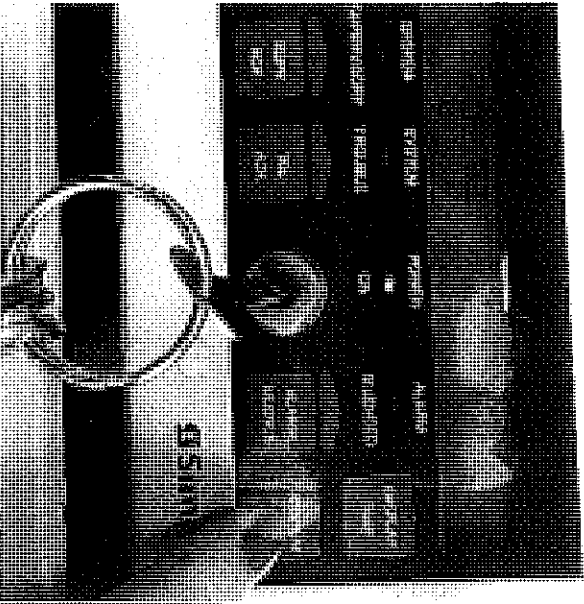
PUT LONG SILVER KEY IN SLOT; TURN TO THE RIGHT AND PRESS ALARM SILENCE AFTER BELLS HAVE BEEN RINGING FOR 1 MIN. THIS SILENCES THE ALARM



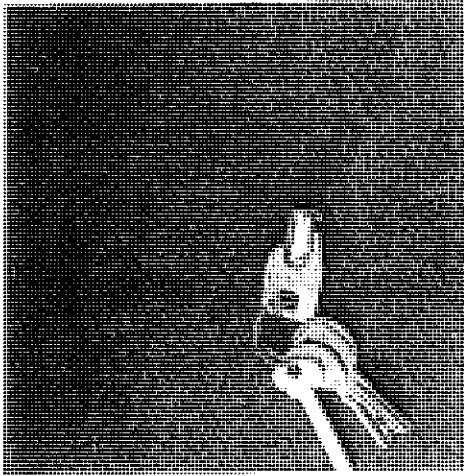
ENUNCIATOR (FIRE PANEL) RE-SET

ONCE THE PULL STATION IS RE-SET (if one was pulled)

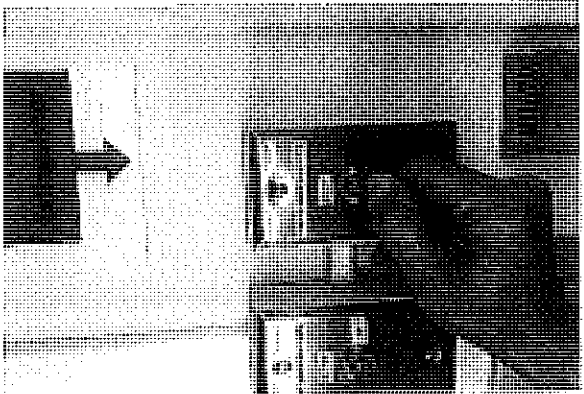
*Same procedure, turn silver key to the right, press system re-set. It will buzz and tell the system to re-set and system normal if done correctly.*



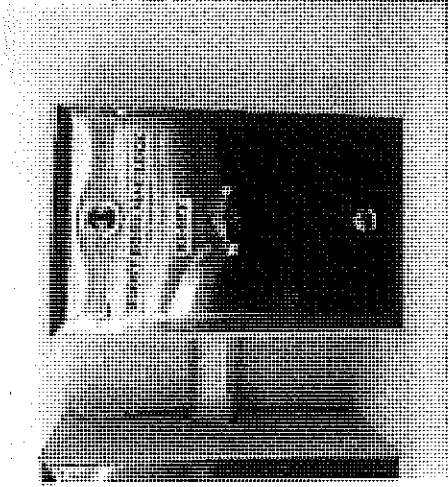
MAG LOCK RE-SET



This is the Key for the Mag Lock



Turn to right-all key pads at Exit Doors will need to be re-set as well (please make an announcement)



Mag locks need to be re-set. Box by Med Room door on Heritage

## Fan Out List

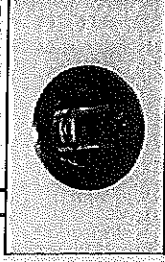
The Park Lane Terrace staff fan out list (one call) - will be utilized  
In the event of a facility disaster or emergency requiring  
Additional human resources ie: Fire, flood, weather, external disaster.

In case of emergency charge nurse to call  
Administrator to inform.

The administrator will then give instructions to Initiate the fan out list.

**\*Note that if the alarm is set off for any other reason other than for a fire drill the system..... can not be reset until authorized by the fire department.**

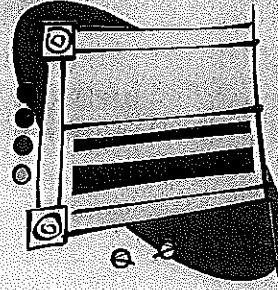
Sprinkler System controls and standpipe location: in the basement opposite the elevator The key is hanging at the top of the door frame.

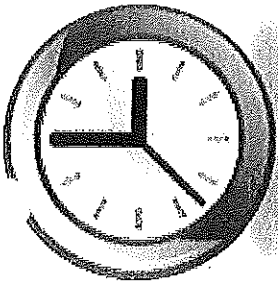


Master key will be in an envelope in a locked box on Heritage Court. Kept in an envelop sealed and sign across where it is sealed when finished with it. Each envelope is numbered –use them in order.

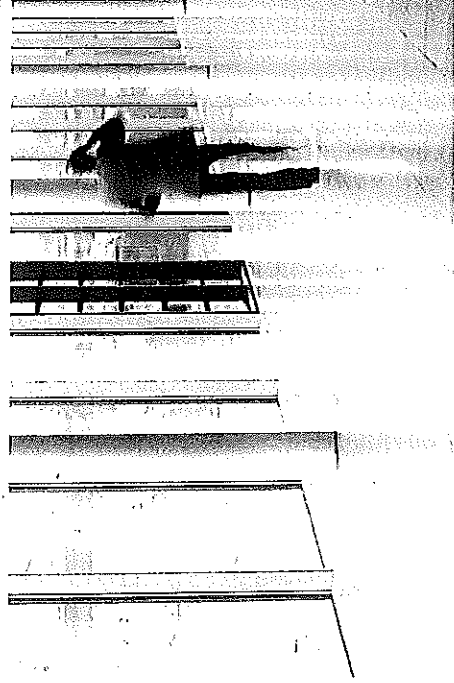
In the event of an alarm the elevator IS NOT TO BE USED until authorized differently by the fire department.

Always ensure a staff member is assigned to the elevator to ensure no staff ,resident or Visitors enter and try to use it.





**During any time of temporary shut down of the fire protection .....announce home is not monitored staff To take extra precautions and it is the responsibility of the Charge Nurse on each shift and each unit to ensure that rounds of the building are made every half hour until the system is restored.**





**When assigned a drill**

**Please do your drill on the**

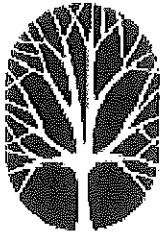
**Unit in which you work in the  
time frame specified.**

**Your drill will be initiated on your next shift  
by H&S team for you to conduct if not.**

**It is important for all staff**

**to experience the procedure.**

**Fire Drills are mandatory on all Shifts!**



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: October 2011

Supersedes: February 2011

Manual: Fire and Disaster

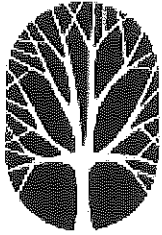
Section: 2.8

Facility: Park Lane Terrace

Subject: Fire System Reset Procedure

### Fire System Reset Procedure

1. Use the small gold key marked "Simplex" to open the enunciator panel located between the doors on Heritage Court. Use the long silver key and place in the key slot at the top of the panel and turn it to the right. Now press the "acknowledge alarm" then "alarm silence button".  
(This alarm silence cannot be used in the first minute of the alarm.)
2. Reset pull station, replace rod if broken.
3. Reset panel on Heritage Court. Use the slender silver key turn it to the right and press "**Alarm Reset**" button, but only do this once permission is given by Fire Department.  
*(Fire Department will not attend if it is a drill and we are off line)*
4. Reset the mag lock for the entire building by using the small circular key in the reset box at the nurse's station on Heritage Court. Check one of the doors to be sure it is locked.



**PARK LANE TERRACE**  
 Long Term Care Facility  
 Policy and Procedure

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2013

Manual: Fire and Disaster

Section: 3.0

Facility: Park Lane Terrace

Subject: Staff Procedures

Charge Nurse (Heritage Court)

**Fire Procedures- Charge Nurse (HERITAGE COURT)**

**Treat each alarm as a "FIRE"**

South Hall  
 Charge  
 Nurse if (2)  
 Staff are  
 available

The Heritage Court South Hall Charge Nurse is the first step to proper communication/direction to the Fire Department and Staff members.

- Refer to the enunciator panel for exact location of the fire. Enunciator panel is located between the front doors on Heritage Court.

North Hall  
 Charge  
 Nurse if (2)  
 Staff are  
 available

- Page to the entire building the location of the fire.
- Using **Code Red** in ie. (Heritage Court, room 142), 3 times slowly and clearly.
  - Call 911
- Greet the Fire Department at the Front Door.

- **In case of Evacuation; fan out list is located in the med room; in the binder labelled fan out list.**

**Access to locked areas:**

- Master key is in an envelope in **the grey locked box on Heritage Court; in med room, labelled MASTER KEY.**
- Return envelope- sealed and sign across where it is sealed when finished with it.
  - Each envelope will numbered –use them in order.

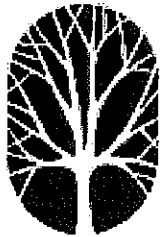
**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;  
**E** Ensure windows and doors are closed; in immediate area  
**A** Activate Alarm  
**C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)  
**T** Try to extinguish fire (if safe to do so.)

Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**





**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2013

Manual: Fire and Disaster

Section: 3.0

Facility: Park Lane Terrace

Subject: Staff Procedures

Charge Nurse (Heritage Court)

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. 2 staff members will act as communicators and 2 to act as searchers.

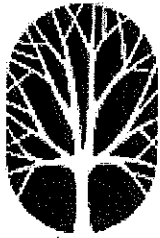
Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back to the monitor through the communicators whether the fire is confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of staff members may act as both communicators and searchers.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

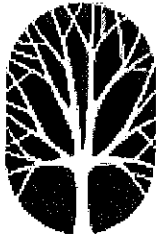
Facility: Park Lane Terrace
Subject: Staff Procedures Charge Nurse (Heritage Court)

Approved by: Administrator
Effective Date: May 2014
Supersedes: January 2013
Manual: Fire and Disaster
Section: 3.0

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities only after the 'all clear' is announced.
10. The initiating department is to complete emergency procedure report and submit to the Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Staff Procedures- Charge Nurse All Units

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

Section: 3.0.5

**Fire Procedures- Charge Nurse (All Units)**

**Treat each alarm as a "FIRE"**

- When the fire is located on your unit- Charge Nurse is to act as the monitor and to remain outside 'The Fire Zone.' The monitor puts on the **ORANGE Vest located in the Disaster Box.**
- **Staff will assist with the evacuation of the Residents under the direction of the Charge Nurse (monitor) until the fire department arrives.**
- During the emergency all responding staff may not be required in the fire area, these staff members may be assigned outside the fire area.

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (if safe to do so.)

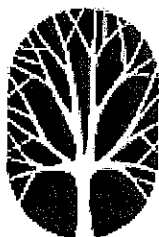
Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

Section: 3.0.5

Facility: Park Lane Terrace

Subject: Staff Procedures—Charge Nurse All Units

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.

6. 2 staff members will act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the  
searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
to the monitor through the communicators whether the fire is  
confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out  
of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of  
staff members may act as both communicators and searchers.

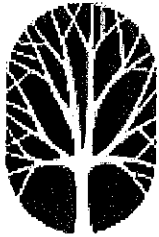
7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.

9. Resume normal duties/activities only after the 'all clear' is announced.

10. The initiating department is to complete emergency procedure report and submit to the  
Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

Section: 3.1

Facility: Park Lane Terrace

Subject: Staff Procedures  
Nursing (PSW's)

**Fire Procedures- Nursing (PSW's)**

**Treat each alarm as a "FIRE"**

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (if safe to do so.)

Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

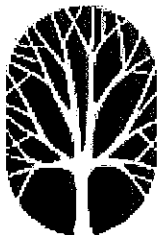
1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. 2 staff members will act as communicators and 2 to act as searchers.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Staff Procedures  
Nursing (PSW's)

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

Section: 3.1

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the  
searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
to the monitor through the communicators whether the fire is  
confirmed or cancelled.

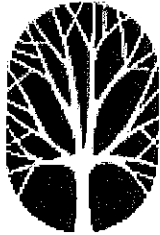
**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out  
of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of  
staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities only after the 'all clear' is announced.
10. The initiating department is to complete emergency procedure report and submit to the  
Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire for Activity/Rehabilitation/Pastoral Services

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

Section: 3.2

**Fire Procedure for Activation/ Rehabilitation and Pastoral Services**

Treat each alarm as a "**Fire**"

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (if safe to do so.)

Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

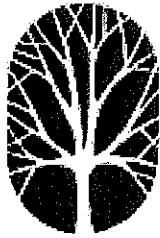
1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administrator
Subject: Fire for Activity/Rehabilitation/Pastoral Services	Effective Date: May 2014
	Supersedes: January 2014
	Manual: Fire and Disaster
	Section: 3.2

6. 2 staff members will act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back to the monitor through the communicators whether the fire is confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out of the fire area; (staff, residents, etc.)

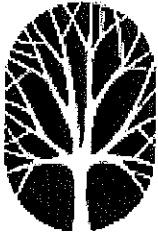
If insufficient staff to have both communicators and searchers; the first pair of staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities only after the 'all clear' is announced.
10. The initiating department is to complete emergency procedure report and submit to the Administration Office.





**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Fire Procedure Environmental Staff

Approved by: Administrator
Effective Date: May 2014
Supercedes: January 2014
Manual: Fire & Disaster
Section:3.3

**Fire Procedure for Environmental Staff**

**Treat each alarm as a "FIRE"**

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (**if safe to do so.**)

Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

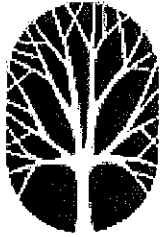
1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. 2 staff members will act as communicators and 2 to act as searchers.



**PARK LANE TERRACE**  
 Long Term Care Facility  
 Policy and Procedure

Facility: Park Lane Terrace
Subject: Fire Procedure Environmental Staff

Approved by: Administrator
Effective Date: May 2014
Supercedes: January 2014
Manual: Fire & Disaster
Section:3.3

Staff sent into the fire area must

be in pairs.

**Communicators:** are not to enter the immediate fire area,  
 They are responsible for communication between the  
 searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
 to the monitor through the communicators whether the fire is  
 confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
 designate as person in charge of the fire)  
 This person is responsible for control and documentation of all activity into and out  
 of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of  
 staff members may act as both communicators and searchers.

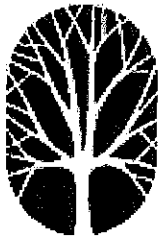
7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.

9. Resume normal duties/activities only after the 'all clear' is announced.

10. The initiating department is to complete emergency procedure report and submit to the  
 Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administrator
Subject: Fire Procedure Dietary Staff	Effective Date: May 2014
	Supercedes: January 2014
	Manual: Fire and Disaster
	Section: 3.4

**Fire Procedure for Dietary Staff**

Treat each alarm as a "**FIRE**"

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (**if safe to do so.**)

Order of REACT may change depending on the situation.

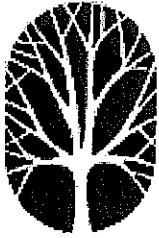
- o Shut off all fans and cooking equipment if safe to do so.
  - o Evacuate all personnel from the kitchen closing all kitchen doors as you exit.
- The RANGE HOOD EXTINGUISHER will activate automatically should a fire occur and the extinguishing agent will be released onto the cooking surface. The RANGE HOOD EXTINGUISHER may also be operated manually. Activate the RANGE HOOD EXTINGUISHER if safe to do so. -in the event that the hood extinguisher needs to be activated manually there is pull - pin located by the exit into the main corridor, by pulling the pin, the hood extinguisher will be activated and the fire alarm will sound.

**IF YOU HEAR THE ALARM:**

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire Procedure  
Dietary Staff

Approved by: Administrator

Effective Date: May 2014

Supercedes: January 2014

Manual: Fire and Disaster

Section: 3.4

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.

6. 2 staff members will act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the  
searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
to the monitor through the communicators whether the fire is  
confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out  
of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of  
staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.

9. Resume normal duties/activities only after the 'all clear' is announced.

10. The initiating department is to complete emergency procedure report and submit to the  
Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Staff Procedure  
Hairdresser

Approved by: Administrator

Effective Date: May 2014

Supercedes: January 2014

Manual: Fire and Disaster

Section: 3.5

**Fire Procedure - Hairdresser**

**Treat all fire alarms as a "Fire"**

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (**if safe to do so.**)

Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

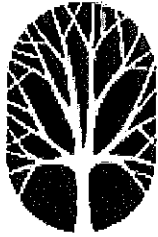
1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. 2 staff members will act as communicators and 2 to act as searchers.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Staff Procedure Hairdresser

Approved by: Administrator
Effective Date: May 2014
Supercedes: January 2014
Manual: Fire and Disaster
Section: 3.5

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the  
searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
to the monitor through the communicators whether the fire is  
confirmed or cancelled.

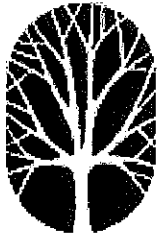
**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out  
of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of  
staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities only after the 'all clear' is announced.
10. The initiating department is to complete emergency procedure report and submit to the  
Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire Procedure  
Maintenance

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

Section: 3.6

**Fire Procedure- Maintenance**

**Treat each alarm as a "FIRE"**

**(A) IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (**if safe to do so.**)

Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

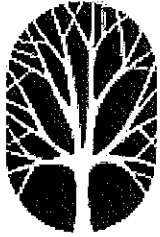
1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. 2 staff members will act as communicators and 2 to act as searchers.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Fire Procedure Maintenance

Approved by: Administrator
Effective Date: May 2014
Supersedes: January 2014
Manual: Fire and Disaster
Section: 3.6

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the  
searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
to the monitor through the communicators whether the fire is  
confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out  
of the fire area; (staff, residents, etc.)

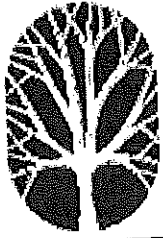
If insufficient staff to have both communicators and searchers; the first pair of  
staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities only after the 'all clear' is announced.
10. The initiating department is to complete emergency procedure report and submit to the  
Administration Office.





**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire Procedure

Visitors

Approved by: Administrator

Effective Date: May 2014

Supersedes: January 2014

Manual: Fire and Disaster

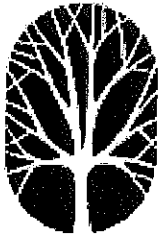
Section: 3.7

**Fire Procedure- Visitors and Volunteers**

**Treat each alarm as a "FIRE"**

***If the Fire Alarm Sounds:***

- **Visitors and volunteers are to remain with their resident in the room or the area of the facility in which they are visiting or volunteering.**
- **Await further instructions from Charge Nurse or Fire Department**



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administration
	Effective Date: January 2014
	Supersedes: April 2013
	Manual: Fire and Disaster
Subject: Fire Procedure- Administration Staff	Section: 3.8

**Fire Procedure For Administration Staff**

Treat each alarm as a "**FIRE**"

**PLANNED MEETING PLACE FOR OFFICE STAFF IS IN THE HERITAGE COURT ACTIVITY ROOM, IF SAFE TO DO SO.** If not safe, the alternate location is to exit the office into the main lobby.

- Terminate unnecessary phone calls by saying "we are in an emergency procedure, please call back later".

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;  
**E** Ensure windows and doors are closed; in immediate area  
**A** Activate Alarm  
**C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)  
**T** Try to extinguish fire (**if safe to do so.**)

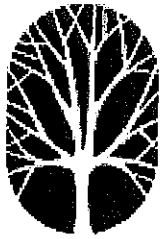
Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administration
Subject: Fire Procedure- Administration Staff	Effective Date: January 2014
	Supersedes: April 2013
	Manual: Fire and Disaster
	Section: 3.8

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.

6. 2 staff members will act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back to the monitor through the communicators whether the fire is confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of staff members may act as both communicators and searchers.

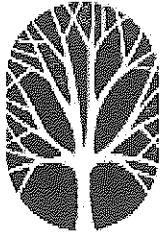
7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.

9. Resume normal duties/activities only after the 'all clear' is announced.

10. The initiating department is to complete emergency procedure report and submit to the Administration Office.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire Procedure  
Dietary Staff

Approved by: Administrator

Effective Date: January 2014

Supercedes: April 2013

Manual: Fire and Disaster

Section: 3.4

**Fire Procedure for Dietary Staff**

Treat each alarm as a "**FIRE**"

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (**if safe to do so.**)

Order of REACT may change depending on the situation.

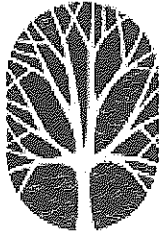
- o Shut off all fans and cooking equipment if safe to do so.
  - o Evacuate all personnel from the kitchen closing all kitchen doors as you exit.
- The RANGE HOOD EXTINGUISHER will activate automatically should a fire occur and the extinguishing agent will be released onto the cooking surface. The RANGE HOOD EXTINGUISHER may also be operated manually. Activate the RANGE HOOD EXTINGUISHER if safe to do so. -in the event that the hood extinguisher needs to be activated manually there is pull - pin located by the exit into the main corridor, by pulling the pin, the hood extinguisher will be activated and the fire alarm will sound.

**IF YOU HEAR THE ALARM:**

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace

Subject: Fire Procedure  
Dietary Staff

Approved by: Administrator

Effective Date: January 2014

Supercedes: April 2013

Manual: Fire and Disaster

Section: 3.4

**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.
6. Maximum of 4 staff members will be permitted to enter the fire zone - 2 staff members to act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the  
searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back  
to the monitor through the communicators whether the fire is  
confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to  
designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out  
of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of  
staff members may act as both communicators and searchers.

7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.
9. Resume normal duties/activities only after the 'all clear' is announced.
10. The initiating department is to complete emergency procedure report and submit to the  
Administration Office.

# Fire Extinguishers

## Introduction

Fire extinguishers are designed to put out or control small fires. A small fire, if not checked immediately, will soon spread out of control. In fact, most big fires start out as small ones. It is important, therefore, that you equip your workplace with the proper fire extinguishers as part of your fire protection plan. It's also the law.

For a fire extinguisher to be effective, the following conditions must be met:

- ▶ the extinguisher must be right for the type of fire;
- ▶ it must be located where it can be easily reached;
- ▶ it must be in good working order;
- ▶ the fire must be discovered while it is still small;
- ▶ the person using the extinguisher must be trained to use it properly.

This guideline discusses fire extinguishing methods, types of extinguishers and their proper selection, location, identification, maintenance and use. It also covers employee training and outlines the legal requirements for extinguishers in workplaces.

## Fire Extinguishing Methods

Fires can be extinguished in one or four ways:

1. By cooling: Water is used to cool the burning material below the temperature at which it starts to burn.
2. By smothering: Carbon dioxide (CO<sub>2</sub>) or foaming agents are used to smother the burning material so that air is excluded.
3. By removing the fuel: This is usually very difficult to do. An example is turning off a fuel line.
4. By disrupting the chemical chain reaction or interrupting the flame: Dry chemicals or halon are used to do this.

## Types of Extinguishers

To help in choosing the proper extinguisher, fires are classed A, B, C, or D, according to the type of fuel (e.g., paper, grease, oil) that is involved in the fire. Extinguishers are available for use on one or more classes of fire, depending on the extinguishing agent they contain (e.g., water, chemicals). Figure 1, on the next page, will help you to match types of extinguishers to different classes of fire.

Some extinguishers are suitable for one class of fire only; others can fight two or even three classes of fire. However, no extinguisher will fight all four classes of fire. Figure 2 gives examples of specific types of fire extinguishers, how they work, and the class(es) of fire on which they can be used.

**Figure 1: Matching Classes of Fire and Types of Extinguishers**

Fuel Sources	Class of Fire	Type of Extinguisher (Extinguishing Agent)
Ordinary combustibles (e.g., trash, wood, paper, cloth)	A	Water; chemical foam; dry chemical <sup>1</sup>
Flammable liquids (e.g., oils, grease, tar, gasoline, paints, thinners)	B	Carbon dioxide (CO <sub>2</sub> ); halon <sup>2</sup> ; dry chemical; aqueous film forming foam (AFFF)
Electricity (e.g., live electrical equipment)	C	CO <sub>2</sub> ; halon; dry chemical
Combustible metals (e.g., magnesium, titanium)	D	Dry powder (suitable for the specific combustible metal involved)

1. Dry chemicals, CO<sub>2</sub> and halon can be used on Class A fires, but may not be effective on their own. They need to be supplemented with water.
2. Halon extinguishers are no longer made, but some may still be in use. Dangerous gases are formed when halon is used to put out fires. Wear proper respiratory equipment, particularly in enclosed spaces. After use, do not allow anyone to enter the area until it has been well ventilated.

**Figure 2: Specific Types of Fire Extinguishers and their Uses**

<b>Water</b>	<ul style="list-style-type: none"> <li>▶ Pressurized, pump type</li> <li>▶ Cools fire</li> <li>▶ Use on Class A fires</li> <li>▶ <b>Do not use on B or C fires</b></li> </ul>
<b>Multi Purpose Dry Chemical</b>	<ul style="list-style-type: none"> <li>▶ Stored pressure type</li> <li>▶ Smothers fire with layer of powder</li> <li>▶ Use on Class A, B and C fires</li> </ul>
<b>Chemical Foam</b>	<ul style="list-style-type: none"> <li>▶ Aqueous film forming foam (AFFF) type</li> <li>▶ Smothers fire with foam</li> <li>▶ Use on Class A and B fires</li> </ul>
<b>Compressed Gas</b>	<ul style="list-style-type: none"> <li>▶ Halon, CO<sub>2</sub> types</li> <li>▶ Smothers fire with gas</li> <li>▶ Use on Class B and C fires</li> </ul>

### Selection

Using the wrong extinguisher to fight a fire can have serious results. For example, if a water-based extinguisher is used on a flammable liquid fire (Class B fire), the fire may flare up, spread, and cause personal injury to the user and others. If a water-based extinguisher is used to fight a fire in or near electrical equipment (Class C fire), the user could suffer an electric shock.

Follow these steps in selecting extinguishers for your workplace:

1. Conduct an assessment to identify your fire hazards and determine the type of extinguishers needed. The extinguishers you select must match the classes of fire most likely to occur. Remember to check your material safety data sheets to identify materials that could catch fire. The section on fire fighting measures give information on the type of extinguishing agent needed to put out a fire involving the material.

2. Determine the size of potential fires in each area and how fast they could spread. Extinguishers for Class A and Class B fires are rated for the size of fire they can handle. This rating appears on the label and is expressed as a number from 1 to 40 for Class A fires and 1 to 640 for Class B fires.

The higher the number, the larger the fire the extinguisher can put out. However, the higher the rating, the heavier the extinguisher. Extinguishers rated 2A:10B:C are suitable for home or office fires.

Extinguishers for Class C fires depend upon such factors as the size of the electrical equipment, how it is constructed, whether it is enclosed, and the nature of the other combustible materials in the area.

Agents for Class D fires should be carefully selected based on information in the material safety data sheet and the manufacturer's recommendations. The amount of agent needed depends on the surface area of the metal, and its shape and form.

Consult the Ontario Fire Code or your local fire department to determine the number of fire extinguishers you need for your workplace.

3. Consider other factors that affect selection:

- ▶ Possible health and safety hazards from chemical reactions between the extinguishing agent and the burning materials, or when using certain types of extinguishers in unventilated areas. Extinguishers with long-range nozzles, for example, are available for use in confined spaces or other hazardous areas.
- ▶ Atmospheric conditions in areas where extinguishers are located. Extreme cold, for example, could make water-based extinguishers ineffective. Where there may be corrosive fumes, select fire extinguishers that can resist corrosion, or provide protection against corrosion.
- ▶ Physical abilities of the user. The size and weight of extinguishers should match the physical abilities of those who have to use them. Extinguishers shouldn't be too heavy for employees to handle.

4. Make sure that your extinguishers:

- ▶ are approved by a recognized laboratory (replaced or new extinguishers must be approved by the Underwriter's Laboratories of Canada or ULC, and labelled as such);
- ▶ do not contain carbon tetrachloride, methyl bromide, or other toxic vaporizing liquids.

5. Do a reassessment whenever you make changes in your workplace, e.g., when you change a work process or the materials you are using.

## Location

No matter how carefully they are selected, fire extinguishers won't be of any use if they can't be reached in an emergency. Locate extinguishers where they can be readily reached for use while a fire is still small. However, don't locate them where they could be a hazard to employees, or where they could get damaged.



If not equipped with wheels, ensure that portable extinguishers weighing more than 18 kilograms (kg) or 39 pounds (lbs.) are installed so that the top is not more than 1.1 meters (m) or 3.6 feet (ft.) above the floor. Those weighing 18 kg or less must not be more than 1.5m (5 ft.) above the floor.

Here are some general pointers for where to locate extinguishers in your workplace. Locate them:

- ▶ so that they are visible, along with their operating instructions and identification marks;
- ▶ where they can be easily reached (i.e., they must not be blocked by machines or materials);
- ▶ in or near corridors or aisles leading to exits – however, they must not block aisles;
- ▶ close to potential fire hazards, but not so close that they could be damaged or cut off by a fire;
- ▶ where they will not expose people using them to undue risk, e.g., using a halon extinguisher in an unventilated area;
- ▶ where they will not be damaged by moving trucks, cranes or other work activities, or corroded by chemical processes;
- ▶ so that they are protected against the elements (if stored outdoors).

### In special areas

Where highly combustible material is stored in small rooms or enclosed spaces:

- ▶ locate the extinguisher outside of the room (this will force the potential user to exit the room and then decide whether to re-enter it to fight the fire).

For service rooms that contain electrical equipment:

- ▶ locate extinguishers in or near the room.

On vehicles or in areas where extinguishers are subject to jarring or vibration:

- ▶ mount extinguishers on brackets designed to withstand vibration.

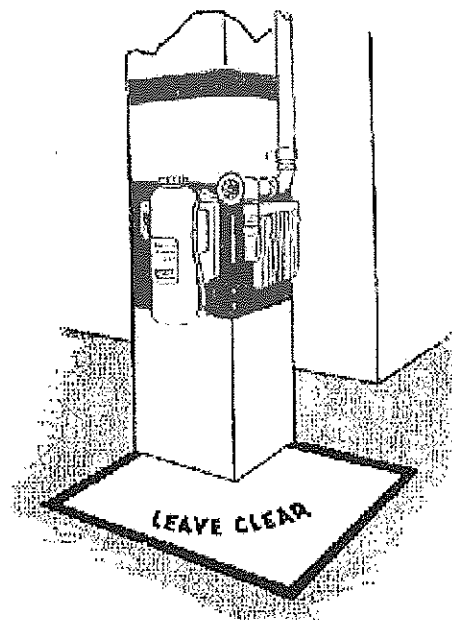
Post signs to show the locations of fire extinguishers, particularly in large floor areas where they could be easily blocked from view. The signs should be large enough to be seen clearly from a distance. Figure 3 gives an example of a fire extinguisher sign.

**Figure 3: A Fire Extinguisher Sign**



Identify walls or columns on which extinguishers are mounted with a red band. The band should be about 2.4 to 3m (8 to 10 ft.) above the extinguisher. The background on which the extinguisher is mounted should also be painted red. See Figure 4.

**Figure 4: Wall-Mounted Extinguisher**



## Identification





Manufacturers place markings on extinguishers to indicate the class or classes of fire for which they are suitable. To make identification easier in an emergency, consider applying class ratings to wall panels near extinguishers. These markings should be easy to see from a distance of 4.6m (15 ft.).

One marking system uses letters, symbols and colours (see Figure 5).

Another marking system uses pictures which show both the uses and non-uses of the extinguisher. This marking system is illustrated in Figure 6. Pictures give more information, but employees will need training to be able to recognize and understand them.

Note that with both marking systems, the use of colour is optional.

**Figure 5: Symbol and Colour Marking on Extinguishers**

Symbol	Description
<p>Ordinary Combustibles</p> 	<p>Extinguishers for Class A fires are identified by a triangle containing the letter "A". If coloured, the triangle is green.</p>
<p>Flammable Liquids</p> 	<p>Extinguishers for Class B fires are identified by a square containing the letter "B". If coloured, the square is red.</p>
<p>Electrical Equipment</p> 	<p>Extinguishers for Class C fires are identified by a circle containing the letter "C". If coloured, the circle is blue.</p>
<p>Combustible Metals</p> 	<p>Extinguishers for Class D fires are identified by a star containing the letter "D". If coloured, the star is yellow.</p>

**Figure 6: Picture Markings Showing Suitability according to Class of Fire**

Note regarding colours (if used):

- ▶ Background for "YES" symbols is blue.
- ▶ Background for "NO" symbols with slash mark ("NO") is black.

### For Class A fires

A Trash, Wood, Paper    B Liquids, Grease    C Electrical



### For Class A, B fires

A Trash, Wood, Paper    B Liquids, Grease    C Electrical



### For Class B, C fires

A Trash, Wood, Paper    B Liquids, Grease    C Electrical



### For Class A, B, C fires

A Trash, Wood, Paper    B Liquids, Grease    C Electrical



## Maintenance

Extinguishers must be properly maintained to ensure that they will work when needed, and that they are safe to use. A carbon dioxide extinguisher, for example, can build up a high static charge if it is used when there is a breakdown of the insulation around the discharge horn. This can cause electric shock.

Adequate maintenance of extinguishers consists of regular inspections, recharging as needed, and a complete annual checkup and servicing. Records must be kept of all maintenance work carried out, including inspections.

Testing and servicing is usually carried out by a service agency. If employees in your company look after testing and servicing, they must be trained and fully qualified to do so.

## Inspections

Fire extinguishers must be inspected at least once a month, and more often where needed. Inspections are visual checks to determine that:

- ▶ The extinguisher is well supported:
  - hangers are fastened solidly.
- ▶ It is accessible:
  - can be easily reached;
  - location signs are clear;
  - class markings are clear;
  - operating instructions are clear.
- ▶ It is in working condition:
  - discharge opening is clear;
  - is fully charged;
  - has not been tampered with;
  - is not damaged;
  - hydrostatic testing has been done.
- ▶ The ring pin is in place.
- ▶ The seal is intact.

## Recharging

Recharge spent extinguishers immediately and return them to their locations. Follow manufacturer's instructions for recharging.

## Servicing

Completely examine each extinguisher at least once a year, and whenever your monthly inspections indicate that this may be needed.

Replace defective parts and extinguishers, recharge extinguisher as needed, and ensure that hydrostatic tests are carried out according to the manufacturer's instructions.

Extinguishers that contain Halon 1211 or 1301 must be serviced according to the requirements of O. Reg. 413/94 under Halon Fire Extinguishing Equipment, of the Environmental Protection Act.

Set up a maintenance schedule for extinguishers so that they are not all out of service at the same time.

## Record Keeping

Attach a durable tag to each extinguisher that shows:

- ▶ dates of monthly inspections, recharging, and servicing;
- ▶ name of servicing agency;
- ▶ signature of person who performed the service.

Maintain a permanent record for each fire extinguisher that shows:

- ▶ serial number and type of extinguisher;
- ▶ location of extinguisher;
- ▶ inspection date;
- ▶ description of maintenance work or hydrostatic tests carried out;
- ▶ date of next inspection;
- ▶ date of scheduled annual servicing;
- ▶ inspector's comments;
- ▶ inspector's signature.

## Extinguisher Use

As soon as a fire is discovered:

- ▶ Sound the alarm and start to evacuate.
- ▶ Call the fire department.

These are important steps for everyone's safety, even if you feel the fire can be brought under control by using an extinguisher.

### Tips for safe extinguisher use:

- ▶ Test that the extinguisher works before you approach the fire.
- ▶ Protect yourself at all times.
- ▶ Take care. Speed is essential but it is more important to be cautious.
- ▶ Keep your back to the exit at all times and stand 2 to 2.4m (6 to 8 ft.) away from the fire.
- ▶ Follow the 4-step P-A-S-S procedure:
  1. Pull the pin (release the lock latch or press the punch lever).
  2. Aim the nozzle at the base of the fire.
  3. Squeeze or press the trigger.
  4. Sweep the extinguisher from side to side.

If the fire does not go out immediately or the extinguisher appears to be getting empty, leave the area at once. Back out with the lever squeezed and the nozzle pointed at your feet. This will help protect you until you are out of the area.

## Employee Training

All employees who may be required to use fire extinguishers should receive training. Training should cover:

- ▶ extinguisher locations;
- ▶ classes of fire most likely to break out in your workplace and the proper extinguishers to use;
- ▶ markings on extinguishers;

- ▶ when and how to use extinguishers;
- ▶ importance of sounding the alarm;
- ▶ health and safety hazards;
- ▶ personal protective equipment.

Use lectures and demonstrations, and give employees plenty of opportunity to practice using extinguishers. Consider having them practice on extinguishers that need recharging. With increased confidence, employees are more likely to respond effectively to fire emergencies.

Make sure employees are aware of the operating instructions posted by extinguishers. Provide retraining as needed.

## What the Law Says

### Occupational Health and Safety Act

Section 123 of the Regulation for Industrial Establishments (R.R.O. 851/90) specifies that the requirements of the Fire Code respecting fire extinguishers apply at industrial establishments.

### Ontario Fire Code (Ontario Regulation 388/97)

Section 6.2 contains requirements with respect to fire extinguishers:

- ▶ 6.2.1 – General;
- ▶ 6.2.2 – Classification;
- ▶ 6.2.3 – Selection requirements;
- ▶ 6.2.4 – Installation requirements;  
Clause 6.2.4.1.(1) specifies that portable extinguishers shall be installed in every building;
- ▶ 6.2.5 – Grading of hazards;
- ▶ 6.2.6 – Distribution;
- ▶ 6.2.7 – Inspection, testing and maintenance

The following subsections contain requirements for extinguishers in specific locations:

- ▶ 3.2.1.5 – Woodworking operations;
- ▶ 3.4.2.6 – Fuel-fired industrial trucks;
- ▶ 3.4.3.4 – Charging installations for battery-powered industrial trucks;
- ▶ 5.14.5.6 – Spray painting operations;
- ▶ 5.17.33 – Welding or cutting operations.

### **Environmental Protection Act**

O. Reg. 413/94 respecting Halon Fire Extinguishing Equipment.

### **Resources**

For more information, consult the following:

- ▶ National Fire Protection Association (NFPA). Fire Protection Handbook, 2003 Edition
- ▶ NFPA, National Fire Code 10 – standard for “Portable Fire Extinguishers.”, 2002 (Next Revision Cycle starts in 2005)
- ▶ Suppliers’ material safety data sheets for the hazardous materials used in you workplace

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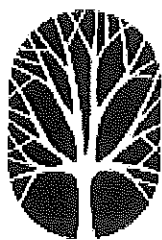
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Revised: March 2006

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# PARK LANE TERRACE

## Long Term Care Facility

### Policy and Procedure

Facility: Park Lane Terrace
Subject: Evacuation - Code Green

Approved by: Administrator	
Effective Date: May 2015	
Supercedes: April 2014	
Manual : Emergency Planning	
Section:	Page: 1 of 2

### EVACUATION

- Evacuation may become necessary due to fire, excessive smoke, natural gas leaks, bomb threats, floods, etc.
- **If an evacuation is not related to a fire a Code Green will be paged over the intercom system and all staff are to respond immediately as directed.**
- For small confined and controlled fires, horizontal evacuation of residents and staff from the affected area to beyond the nearest fire separation door is conducted.
- Fire separation doors when closed can allow up to 1 1/2 hours of time before the fire breaks through
- A decision for total/partial evacuation is made by the charge nurse if fire fighters are not yet on the scene or by the senior fire fighter on the scene. **Ensure this is paged over the intercom to alert all staff equally.**
- Decision is made in conjunction with the Administrator/DOC if time permits.

### **HORIZONTAL EVACUATION**

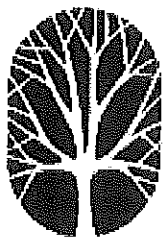
This is the removal of residents and staff to a different section of the building on the same floor away from the disaster area and separated from that area by fire separation doors.

#### **In a horizontal evacuation:**

- Move those in immediate danger horizontally through cross corridor smoke barrier doors from one fire zone to a safe area.
- Remove occupants first from the fire origin and then those next to and opposite, below and above the fire origin.
- Continue the evacuation by removing ambulatory residents, residents in Wheelchairs and then bedridden/non-mobile and resistive residents.

### **VERTICAL EVACUATION**

- Those in immediate danger should be removed down and away from the fire, never go above the fire.
- Do not use the elevator unless instructed by the fire department
- Evacuation of those below grade (basement) should move up and away from the fire.



**PARK LANE TERRACE**  
 Long Term Care Facility  
 Policy and Procedure

Approved by: Administrator

Effective Date: May 2015

Supercedes: April 2014

Manual : Fire and Disaster

Section:  
3.19

Page: 2 of 2

Facility: Park Lane Terrace

Subject: Evacuation - Code Green

**COMPLETE EVACUATION**

- Every occupant of the home is to be removed to the exterior of the building.
- The fire alarm is put into second stage, first use the GOLD KEY to remove the pull station cover, then **(using the long silver key - turn until alarm rings with a rapid bell tone.) The long silver key can also be used in the enunciator panel.** Evacuate ambulatory residents, followed by wheelchair residents, immobile residents and finally those with behaviors or who are resisting assistance.


**Charge Nurse Duties:**

- If time permits; the Charge Nurses will take Residents Charts and Med Carts to the Safe Meeting Location. If the elevator is deemed unusable-Twin River would {if time permits} use pillow cases to transport the charts. Medications could be removed from the Med Cart and placed in the plastic tote used for storing electrical cords for safe transporting.

Sequence of Evacuation

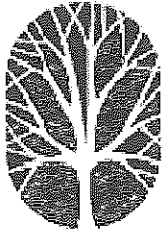
1. Room of origin
2. Rooms next to and opposite room of origin and rooms above.
3. Continue evacuation, evacuating easiest people first.

4c	4b	4a	3	2	3
		Elevator			

4c	4b	4a	2	1 	2
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Please refer to the evacuation chair policy in the Fire Manual





**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administrator
	Effective Date: Feb. 2014
	Supercedes: March 2009
	Manual: Fire and Disaster
Subject: Emergency Lifts and Carries	Section: 3.19.2

There are many techniques that can be used to move ambulatory and non-ambulatory persons in an emergency.

Recognize resident limitations and personal limitations:

Staff must recognize their personal limitations and abilities when preparing to move a resident using an evacuation technique. It is important to recognize if a resident is too heavy to be moved by one rescuer.

Moving Residents in Beds:

Sometimes residents may be moved in their beds. However, moving a number of residents in this manner may delay evacuation because beds take up considerable room. Evacuation routes can become congested or blocked, hampering evacuation efforts. Beds in corridors can also interfere with firefighting operations.

Use Other Evacuation Aids When Available:

Wheelchairs and geri-chairs can be used to help evacuate people who walk slowly. These chairs help speed up the evacuation and reduce the person's risk of falling. Move resident to a safe location; assist them out of the chair, then return to evacuate others if necessary.

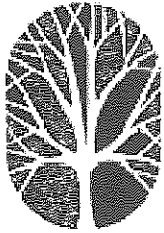
**Evacuation Techniques**

Side-by-side (Semi Ambulatory)

1. Rescuer stands beside the resident, reaches around the back of the resident and grasps his/her opposite wrist, placing that arm on the resident's midsection.
2. Rescuer grasps resident's other wrist and brings it to rest on the rescuer's midsection.
3. Rescuer snugs the patient close and walks to a safe area.

Bear Hug (semi – ambulatory)

1. Rescuer stands behind the resident and places their arms under the resident's armpits. (The rescuer's hips and head should be kept off to one side to protect themselves from a kick or head butt)
2. Rescuer grasps the resident's left and right wrists, crossing the arms in front.
3. Rescuer can gently prod the patient's legs in front to walk to a safe area.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Approved by: Administrator

Effective Date: Feb. 2014

Supercedes: March 2009

Manual: Fire and Disaster

Section: 3.19.2

Facility: Park Lane Terrace

Subject: Emergency Lifts and Carries

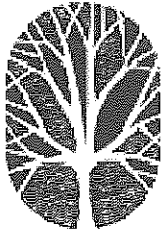
**Cradle Drop (Non Ambulatory)**

1. Make sure the bed is stationary and will not move.
2. Place a blanket or sheet on the floor, partly under the bed and past the head of the resident. (a sheet can be better on carpeted areas as it slides more easily.)
3. The rescuer kneels beside the bed on the knee of the leg and bend the hip and knee of the leg closest to the resident's head.
4. The rescuer places their arms under resident's hips and legs and draw them to the edge of the bed by leaning back to draw the resident over.
5. The rescuer then places the arm closest to the resident's head, under the resident's neck and shoulders and draw them to the edge of the bed by leaning back to draw the resident over.
6. The rescuer then places their arm furthest from the resident's head across the top of the resident's legs. The rescuer then rocks back and slides the resident off the bed by drawing the resident's legs off the bed first and cradling the resident's trunk and head as they slide off the bed into their lap.
7. The rescuer controls the descent of the resident to the floor. It is important to stress that staff control the descent, do not resist it.
8. Fold the blanket or sheet around the resident and draw the the resident head first to a safe area. (a pillow may be placed on the sheet/blanket below the resident's head to provide protection.)

If speed is essential, use this technique without a blanket or sheet and drag the resident to a safe area.

**Swing Carry (Non Ambulatory – requires two rescuers)**

1. First rescuer raises the resident to a sitting position on the bed.
2. Second rescuer rotates the resident's legs 90° from the side of the bed and lowers them off the side of the bed.
3. One rescuer sits on each side of the resident and if able, the resident's arms are placed on the shoulders of the rescuers. If the resident has shoulder pain or instability the arm(s), can be folded across their lap.
4. The rescuers place their arms around the resident and one rescuer must maintain control of the resident at all times to prevent the resident from falling to the floor.
5. The rescuers pass their other hand under the resident's knees and again the strongest rescuer grasps the wrist/forearm of the other rescuer.
6. Rescuers lift the resident in unison and remove to a safe area.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administrator
Subject: Emergency Lifts and Carries	Effective Date: Feb. 2014
	Supercedes: March 2009
	Manual: Fire and Disaster
	Section: 3.19.2

**Extremity Carry (Non-Ambulatory, requires two rescuers)**

1. One rescuer grasps the resident's legs in the vicinity of the knees. If possible, the rescuer should be positioned between the resident's legs. This should not be attempted if resident has fractured hip or total hip replacement.
2. The other rescuer places their arms under the resident's arms and clasps the opposite wrists of the resident. (both rescuers facing the same direction.)
3. Both rescuers holding the resident firmly on the order to "raise", lift the resident in unison and move the resident to a safe area.

**Blanket Pull (from floor)**


If a person (resident/staff) is found lying on the floor, take a sheet or blanket. Kneel beside the person and holding them by the shoulder and hip, roll the person towards you and place the sheet or blanket under their body making sure it comes up above their head. If they were lying face down, then roll them over so they are now lying on their back on the sheet/ blanket.

If the person was initially lying on back, roll them so you can draw the sheet/ blanket under their body so they are completely on blanket/ sheet. Grasp the sheet at the end closest to the door and pull the person on the sheet/ blanket from the room to an area of relative safety.

**Blanket Carry**

If the resident is in bed, remove covers (4 rescuers are required). Tallest/ strongest rescuers should go to the resident's trunk/ head, shorter/ weaker rescuers to the hips/ legs. Roll the bed sheet in around the resident's head, waist, hips and calves from each side. On command 1,2,3, lift, the resident on the sheet and carry them off the foot of the bed and remove from the room.

If you cannot carry all the way to safe area, lower blanket to floor and drag resident on the floor.

	<b>APANS</b>	<b>Approved by:</b> Administrator	
	<b>HEALTH SERVICES</b>	<b>Effective Date: May 2013</b>	
	<b>POLICY &amp; PROCEDURE</b>	<b>Supersedes:</b>	
<b>Home:</b> Park Lane Terrace	<b>Manual:</b> Fire and Disaster		
<b>Subject:</b> Evacuation Chair	<b>Section:</b>	Page 1 of 2	

### **Safe Use of the Evacuation Chair**

**Purpose:**

To ensure staff have a safe mechanism in place to safely transport residents on the second floor in the event of a fire or other emergency situation.

The storage location of this chair is the workroom on Twin River court.

**Procedure:**

1. Remove the unit from the wall mount. Remove the storage cover.
2. Pull out the rear wheels until they lock. Push the seat forward. Pull the adjustable pins to open position. Pull the handle up and return the adjustable pins to closed position. (you will hear the pins lock)
3. Assist the resident into the seat and lock seat belt. There are 2 small wheels on the back which can also be locked for safety.
4. In a safe area, tip the chair forward onto the front stop bar and push the rear wheels forward until they fold into the frame. Tilt the chair back slightly and push the chair to the top of the stairs.
5. At the top step, tilt the chair back slightly more and push the chair forward over stairs. Have a second staff person assist by being beside the resident on the chair to offer reassurance.
6. Descend the stairs at a safe and controllable pace while pushing vertically down to allow the track to keep contact with the stairs. (\*\*ensure you are holding the brake mechanism in place as this will disengage the brake and allow the roller bar to glide down the stairs.)
7. When reaching the bottom of the stairs, allow the track to rest on the last 2 steps with the front wheels on the floor. Change your hand position in order to gently lift the chair forward onto the steps. Pull out the rear wheels and proceed to a safe place.
8. Offer reassurance to the resident and transfer the resident to an appropriate chair or other seating available.
9. Repeat procedure for next resident.
10. When use is no longer required, place chair back into the storage position and replace in the work room on Twin river court.

Staff are to follow the above steps as recommended by the manufacturer.  
The weight capacity for this chair is 350 pounds.

Staff will be trained on the safe use of this annually.

**Accountability:**

Administrator; Health and Safety team.



**APANS  
HEALTH SERVICES  
POLICY & PROCEDURE**

**Approved by:** Administrator

**Effective Date:** May 2013

**Supersedes:**

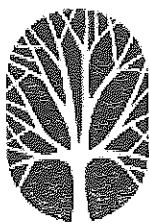
**Home:** Park Lane Terrace

**Manual:** Fire and Disaster

**Subject:** Evacuation Chair

**Section:**

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**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace	Approved by: Administration
Subject: Fire Procedure- Administration Staff	Effective Date: June 2014
	Supersedes: January 2014
	Manual: Fire and Disaster
	Section: 3.8

**Fire Procedure For Administration Staff**

Treat each alarm as a "**FIRE**"

**PLANNED MEETING PLACE FOR OFFICE STAFF IS IN THE HERITAGE COURT ACTIVITY ROOM, IF SAFE TO DO SO.** If not safe, the alternate location is to exit the office into the main lobby.

- Terminate unnecessary phone calls by saying "we are in an emergency procedure, please call back later".

**IF YOU DISCOVER A FIRE/SMOKE:**

- R** Remove residents from immediate area;
- E** Ensure windows and doors are closed; in immediate area
- A** Activate Alarm
- C** Call the Fire Department / 9-1-1-(Heritage Court charge nurse)
- T** Try to extinguish fire (**if safe to do so.**)

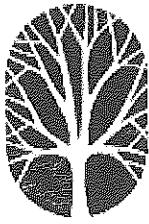
Order of REACT may change depending on the situation.

**IF YOU HEAR THE ALARM:**

1. Listen for fire location to be announced.
2. If you are not in your assigned area you must return to your area.

**DO NOT USE ELEVATORS. DO NOT ENTER FIRE ZONE DIRECTLY FROM STAIRWELL.**

3. Follow instruction given by your charge nurse in your assigned area.
4. Evacuation procedures are to be initiated immediately for rooms directly above, beside or below the fire location.



**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Fire Procedure- Administration Staff

Approved by: Administration
Effective Date: June 2014
Supersedes: January 2014
Manual: Fire and Disaster
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**AT THE FIRE AREA:**

5. One staff member (Charge Nurse) will be designated to act as monitor outside the fire zone. This person is responsible for contact with the communicators and for recording all activity into and out of the fire zone.

6. 2 staff members will act as communicators and 2 to act as searchers.

Staff sent into the fire area must be in pairs.

**Communicators:** are not to enter the immediate fire area,  
They are responsible for communication between the searchers and monitor.

**Searchers:** investigate for the specific location of the fire and communicate back to the monitor through the communicators whether the fire is confirmed or cancelled.

**Monitor:** This is usually the person in charge of the unit; (wears the safety vest to designate as person in charge of the fire)  
This person is responsible for control and documentation of all activity into and out of the fire area; (staff, residents, etc.)

If insufficient staff to have both communicators and searchers; the first pair of staff members may act as both communicators and searchers.


7. Advise residents and visitors to remain where they are until directed by staff.

**Do not block corridor areas.**

8. Be prepared to assist with horizontal evacuation if so directed.

9. Resume normal duties/activities only after the 'all clear' is announced.

10. The initiating department is to complete emergency procedure report and submit to the Administration Office.

	<b>APANS</b>	<b>Approved by:</b> Administrator	
	<b>HEALTH SERVICES</b>	<b>Effective Date:</b> May 2013	
	<b>POLICY &amp; PROCEDURE</b>	<b>Supersedes:</b>	
<b>Home:</b> Park Lane Terrace	<b>Manual:</b> Fire and Disaster		
<b>Subject:</b> Evacuation Chair	<b>Section:</b>	Page 1 of 2	

### Safe Use of the Evacuation Chair

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9. Repeat procedure for next resident.
10. When use is no longer required, place chair back into the storage position and replace in the work room on Twin river court.

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The weight capacity for this chair is 350 pounds.

Staff will be trained on the safe use of this annually.

**Accountability:**

Administrator; Health and Safety team.





**APANS**  
**HEALTH SERVICES**  
**POLICY & PROCEDURE**

**Approved by:** Administrator

**Effective Date:** May 2013

**Supersedes:**

**Home:** Park Lane Terrace

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**Subject:** Evacuation Chair

**Section:**

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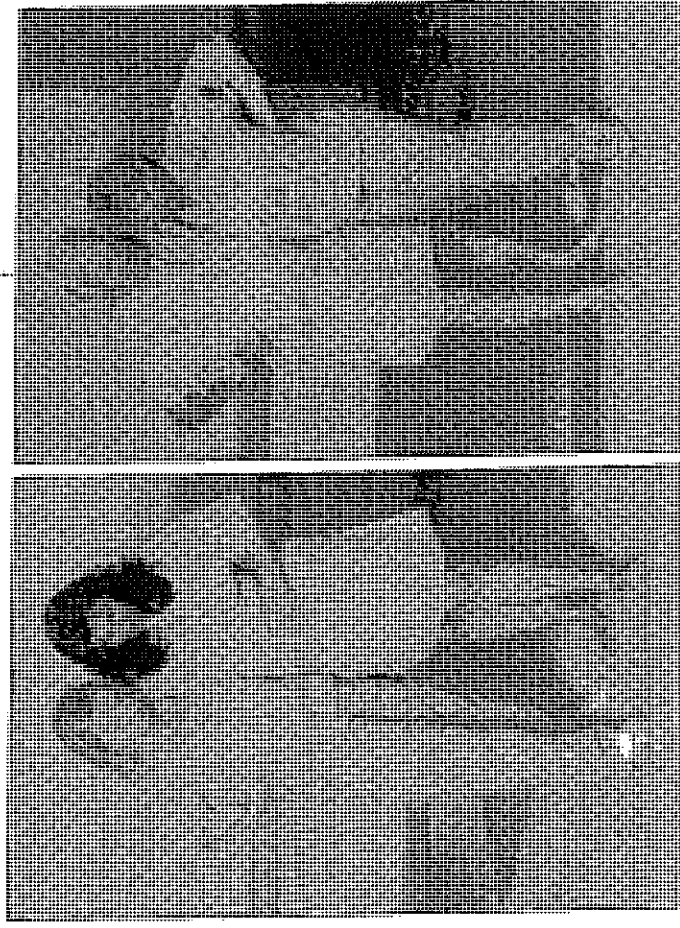
**Assess the person's  
limitations**

**Recognize personal  
limitations**



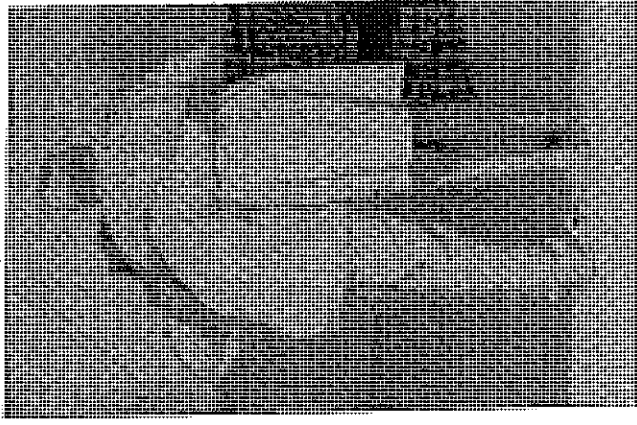
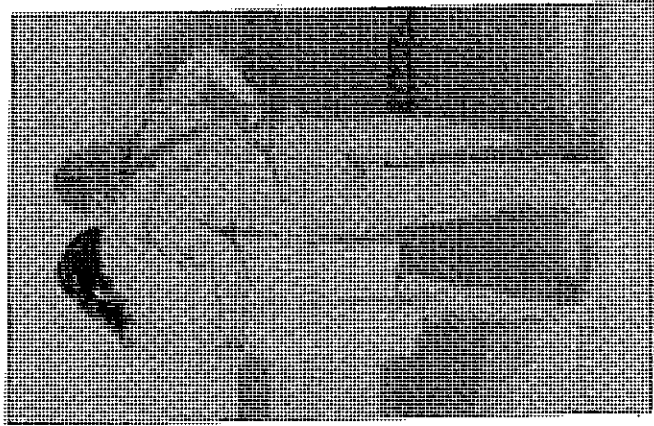
# **Side-By-Side (semi-ambulatory)**

- ◆ Stand beside the patient
- ◆ Secure patient's arm around rescuer and hold the patient's wrist or hand if possible

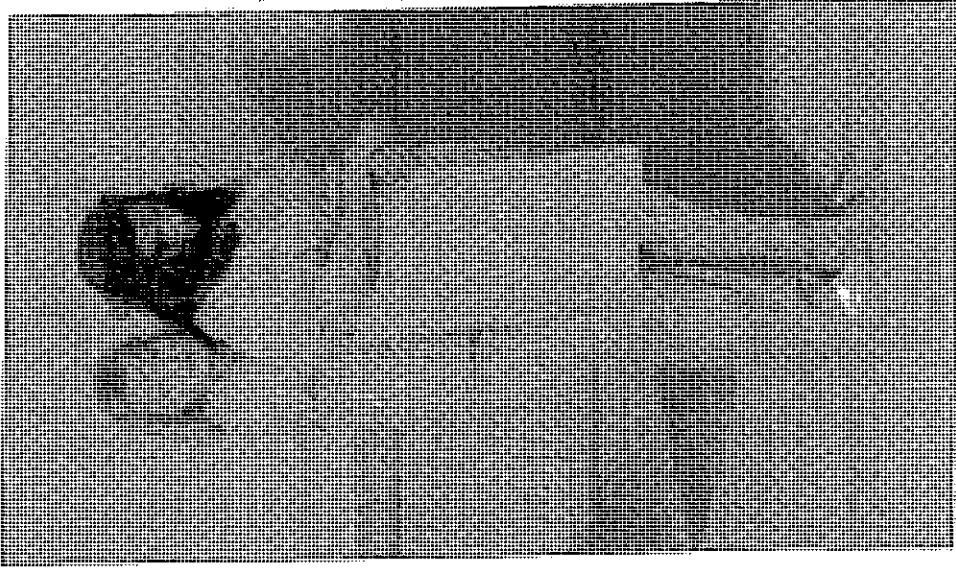


# Side-By-Side (cont'd)

- ◆ Snug the person close
- ◆ Walk to a safe area
- ◆ Grasp the patient's other arm if possible



# **Bear Hug (semi-ambulatory)**



- ◆ Stand behind the person
- ◆ Place arms under the person's armpits
- ◆ Rescuer's head should be kept off to one side
- ◆ Grasp person's left and right wrists
- ◆ Cross the arms in front
- ◆ Gently prod the person to walk to a safe area

# ***Cradle Drop (non-ambulatory)***

- Ensure the bed will not move (lock wheels or move the bed against the wall)
- Place a blanket on the floor partially under the bed and past the head of the patient



## ***Cradle Drop (cont'd 2)***



- Kneel beside the bed with one leg raised closest to the patient's head
- Grip patient under knees and shoulders
- Lean back, sliding the patient off the bed

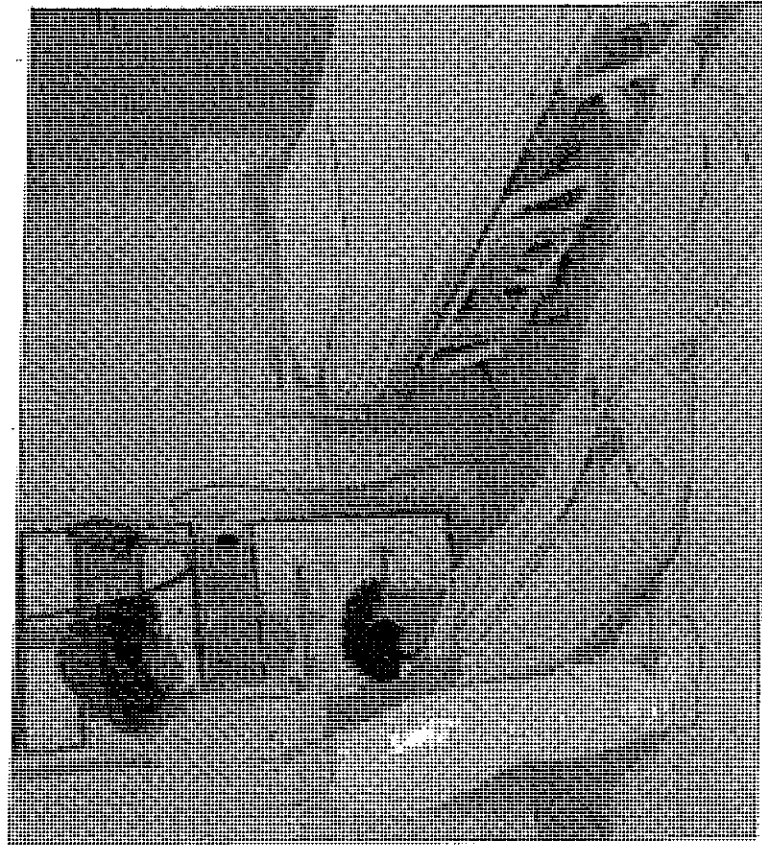
# ***Cradle Drop (cont'd 3)***

- Control the patient's descent onto your lap and then onto the floor while protecting the head
- Do not resist it





## ***Cradle Drop (cont'd 4)***



- Fold the blanket around the patient
- Drag the patient head first to a safe area

# Swing Carry (non-ambulatory)

- ◆ requires two rescuers ◆ can be used on stairs

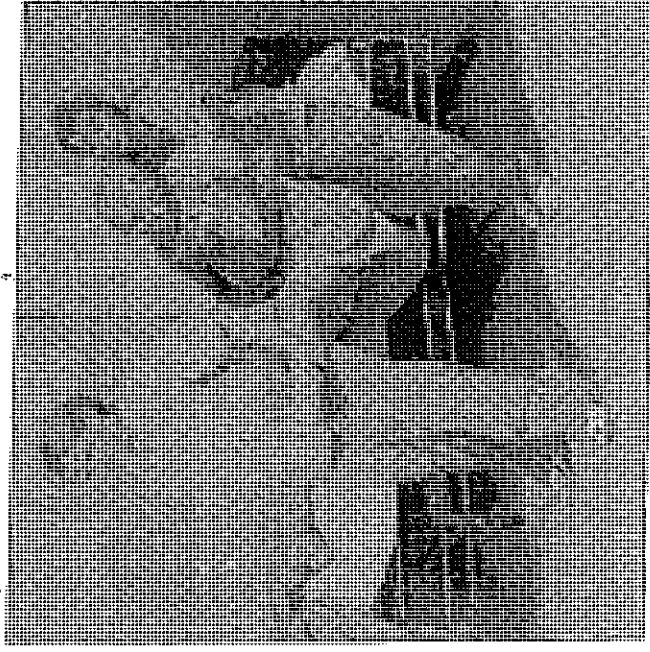
- ◆ First rescuer raises the patient to the sitting position
- ◆ Second rescuer moves the patient's legs over the side of the bed
- ◆ One rescuer must maintain control of the patient at all times to prevent the patient from falling to the floor



# **Extremity Carry (non-ambulatory)**

- *requires two rescuers*
- *can be used on stairs*

- Standing between the patient's legs, one rescuer grasps the patient's legs just above the ankles or under the knees
- The second rescuer places their arms under the patient's arms and clasps their hands on the patient's chest



- Both rescuers holding the patient firmly lift the patient simultaneously and move to a safe area

## **Swing Carry (cont'd 2)**

- ◆ Rescuers sit on each side of the patient
- ◆ Patient's arms are placed on the rescuer's shoulders
- ◆ Rescuers secure their arm around the patient's back and grasp each other's arm
- ◆ Rescuers pass other hand under patient's knees locking hands or wrists

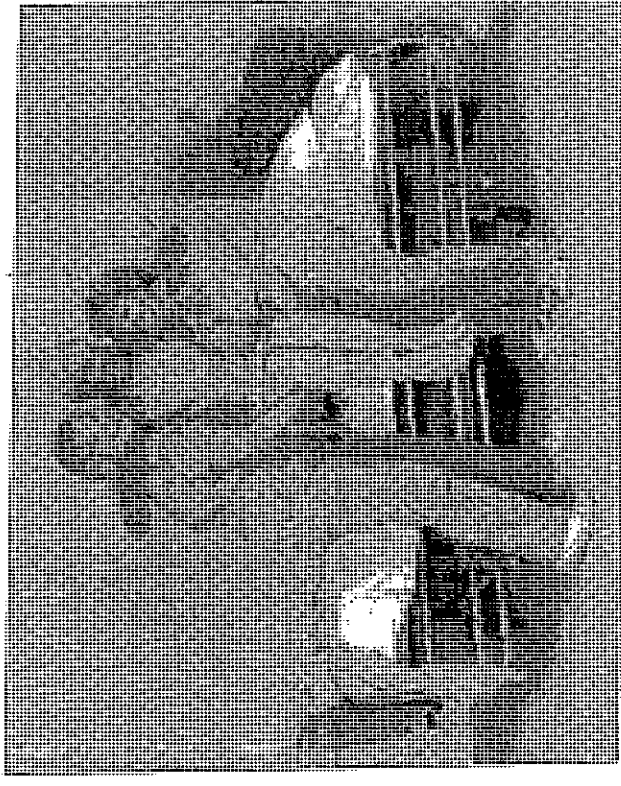


# Swing Carry (cont'd 3)

- ◆ Simultaneously lift patient and remove to a safe area

## (Lowering Technique)

- ◆ Lower patient to the sitting position by kneeling down with leg closest to the patient
- ◆ Lower patient from the sitting position to the lying position while protecting the head





**PARK LANE TERRACE**  
Long Term Care Facility  
Policy and Procedure

Facility: Park Lane Terrace
Subject: Community Evacuees

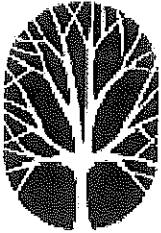
Approved by: Administrator
Effective Date: October 2011
Supercedes: January 2009
Manual: Fire and Disaster
Section: D 65/66

**Receiving Evacuees From the Community**

**Preamble:**

Park Lane Terrace is able to offer short term refuge, immediate shelter and to provide necessities of life to people in a time of community disaster. It is understood that community agencies would be working to organize a more permanent arrangement for those sheltered initially by Park Lane Terrace. However, Residents who live at Park Lane Terrace must be the staff's primary concern. *Help to the Community may be given in the follow ways:*

- The multipurpose area may be used as a triage area for bringing people in, establishing their needs and designating an area for them to be.
- The love seats and recliners in each lounge of the Home, the infirmary on Heritage and the Family Suite may be used for sleeping. Staff on each unit will assist evacuees in their lounge area.
- The Chapel floor could be utilized as a sleeping place for evacuees.
- The Multipurpose area, Café, tables and chairs in the Heritage Lounge and tables and chairs in each hobby/craft/activity room could be utilized for meal service to evacuees.
- The main business office would become Command Central for all communications.
- The DOC and ADOC would coordinate the float staff from the community as to their designated area and their duties as well as for whom they are responsible.
- The DOC and ADC WOULD ENSURE THAT THE COMMUNITY STAFF HAVE ORIENTATION TO THE FACILITY LAYOUT AND EMERGENCY PROCEDURES.
- The FSS and Dietician will ensure that additional food is ordered, additional staff hours are scheduled as needed to provide for extra people.
- Additional housekeeping hours will be scheduled to provide for the increased need.



**PARK LANE TERRACE**  
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- The office staff will maintain records of output of funds for staffing and supplies to be reimbursed to the facility.
- Administrative staff will assist community agencies in discharge planning and transfer to longer term accommodations.

**Security:**

- Maintenance man and other designated staff will assist with traffic control, moving equipment and building security.
- An area will be set aside for visitors and relatives. These will be limited to 2 per person. Designate staff to answer questions, take requests and to maintain order.
- Program staff will make and provide name tags for all authorized staff, community agency staff and volunteers.
- The Administrator will be the only one who handles any media inquiries. The Administrator will be kept informed of names of people staying in the facility as they are admitted and discharged.
- Additional volunteers and others from the community wanting to help will be channelled through the program department and volunteer co-ordinator.
- Limited, short, concise information only will be given out by the Office Assistant in order to keep phone lines clear.



**APANS**

**HEALTH SERVICES**

**POLICY & PROCEDURE**

**Approved by:** Administrator

**Effective Date:** Jan 2011

**Supersedes:**

**Home:** Park Lane Terrace

**Manual:** Admin. Manual  
*Fire and Disaster*

**Subject:** Media Policy

**Section:** 3-09/  
*D-64*

Page 1 of 1

**POLICY:**

To ensure all staff of Park Lane Terrace understand the proper protocol for communication with media outlets.

**PROCEDURE:**

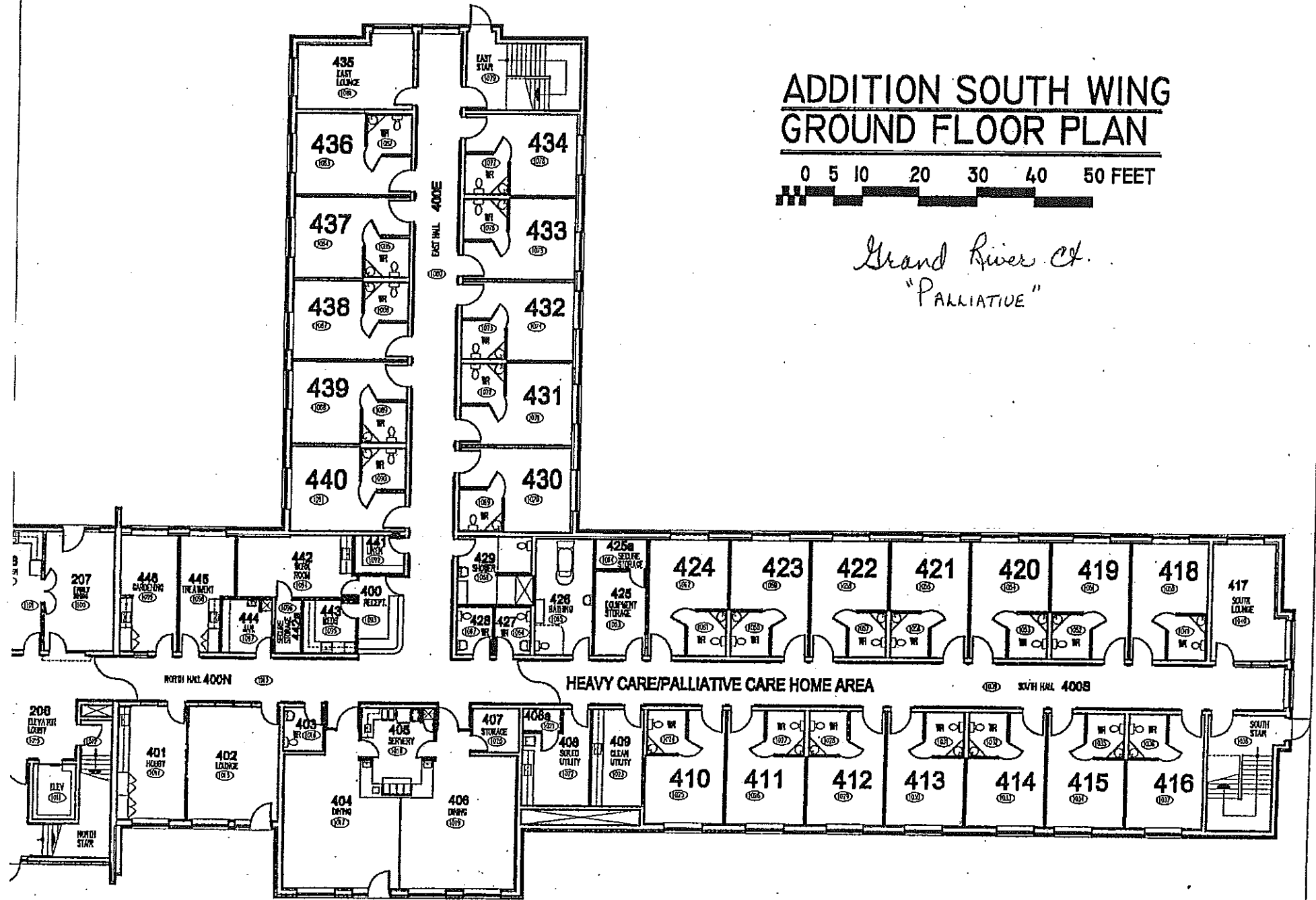
1. All communication to the media is to be conducted by the Administrator, APANS CEO, or the Owner of Park Lane Terrace.
2. No other employees, under and circumstances, are to give out ANY information to the media.
3. Breach of this policy is considered a serious misconduct and could result in disciplinary action, up to and including termination.
4. The Administrator or Owner's name and phone numbers are not to be given out to the media. A message can be taken and communicated to the Administrator by staff.



# ADDITION SOUTH WING GROUND FLOOR PLAN



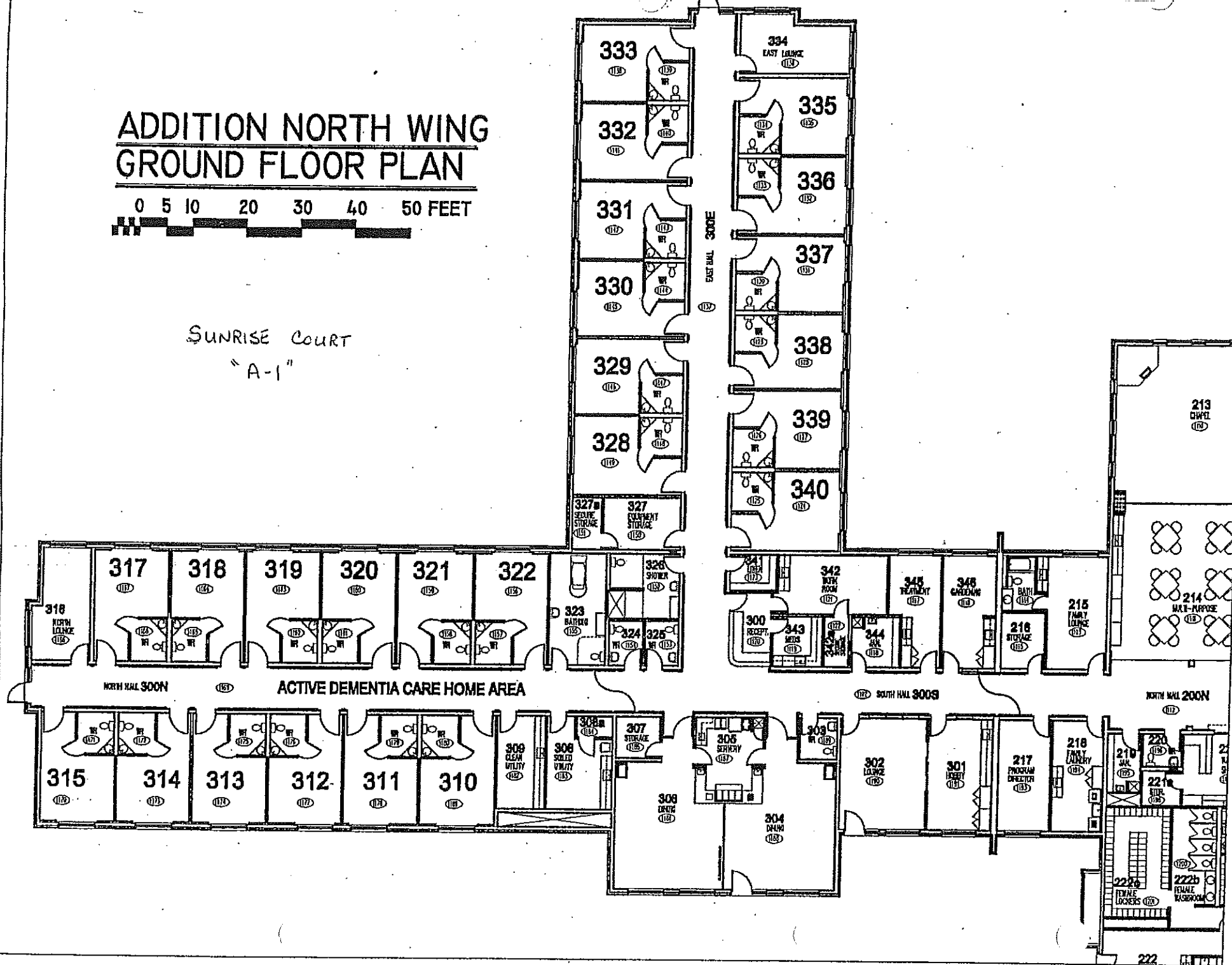
*Grand River Ct.*  
"PALLIATIVE"



# ADDITION NORTH WING GROUND FLOOR PLAN



SUNRISE COURT  
"A-1"

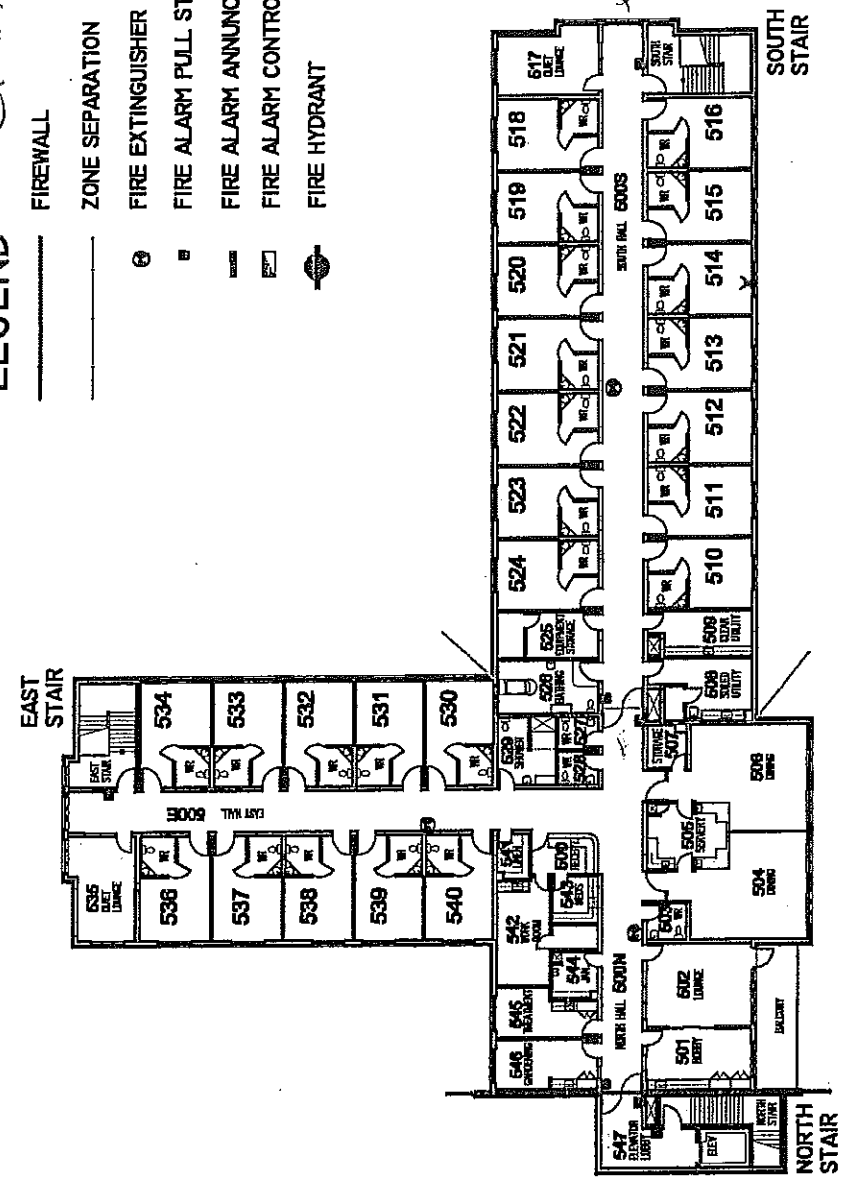


F4

GRAND

### LEGEND

- FIREWALL
- ZONE SEPARATION
- FIRE EXTINGUISHER
- FIRE ALARM FULL STATION
- FIRE ALARM ANNUNCIATOR
- FIRE ALARM CONTROL PANEL
- ⊙ FIRE HYDRANT



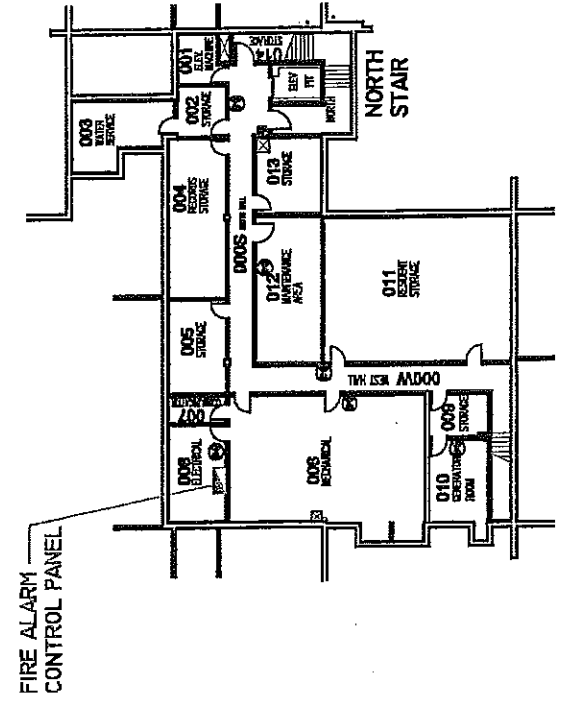
## FIRE PLANS

### SECOND FLOOR PLAN

PARK LANE TERRACE  
285 GRAND RIVER ST. N., PARIS

### LEGEND

- FIREWALL
- ZONE SEPARATION
- FIRE EXTINGUISHER
- FIRE ALARM PULL STATION
- FIRE ALARM ANNUNCIATOR
- FIRE ALARM CONTROL PANEL
- ⊙ FIRE HYDRANT



## FIRE PLANS

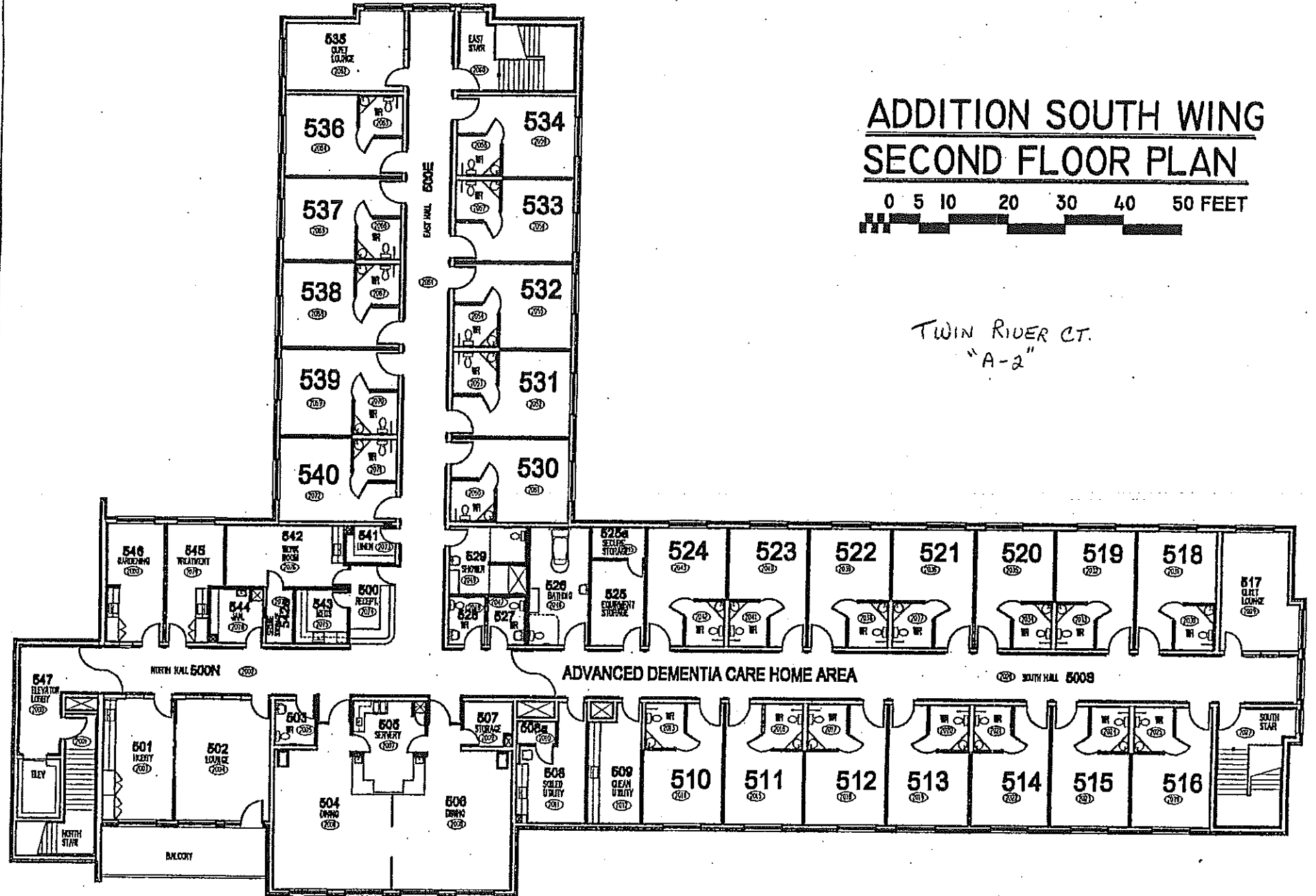
### BASEMENT FLOOR PLAN

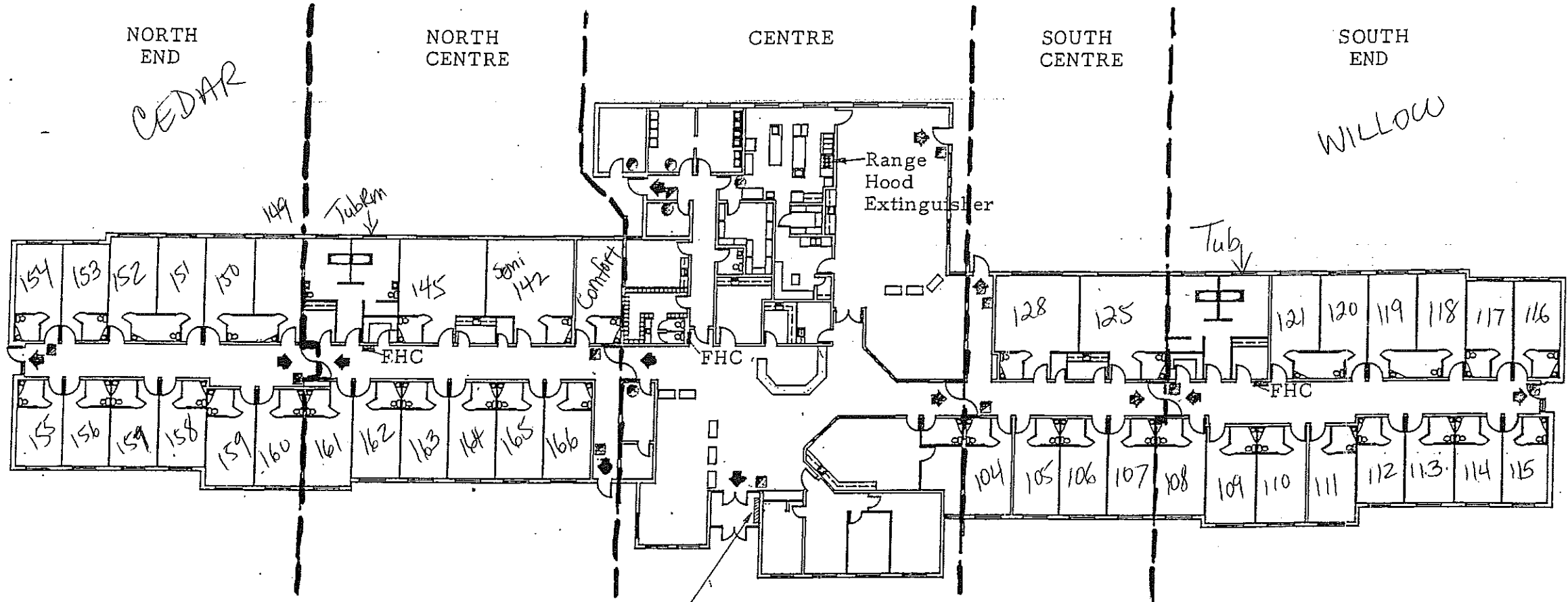
PARK LANE TERRACE  
285 GRAND RIVER ST. N., PARIS

# ADDITION SOUTH WING SECOND FLOOR PLAN



TWIN RIVER CT.  
"A-2"





**LEGEND**

- ◆ EXIT
- FIRE ALARM PULL STATION
- ZONE DIVISION
- EXTINGUISHER
- FHC ▸ FIRE HOSE CABINET

Fire Alarm  
Annunciator Panel

PARK LANE TERRACE NURSING HOME  
295 Grand River Street North  
Paris, Ontario

1/11/11

Final

### Vulnerable Occupancy - Fire Drill Scenario Form

#### This Section Completed by Owner / Operator

This guideline is intended to assist facility administrators and Chief Fire Officials with the development and validation of the annual fire drill scenario requirement in care occupancies, care and treatment occupancies and retirement homes. Complete the 4 steps below when seeking a fire service approval of the fire drill scenario.

#### PART (1) PROPERTY INFORMATION

Property Operating Name: <u>PARL LANE TERRACE</u>	Contact number: <u>519 442-2753</u>
Contact Name: <u>SANDY HALL</u>	Occupancy Classification: <u>CHECK Below</u>
Occupancy Address: <u>295 GRAND RIVER ST N</u>	<input type="checkbox"/> Care Occupancy
City/Town: <u>PARIS</u> Postal Code: <u>N3L 2N9</u>	<input checked="" type="checkbox"/> Care and Treatment Occupancy
Licensing Agency: <u>MINISTRY OF HEALTH</u> Licensing Number:	<input type="checkbox"/> Retirement Home

#### PART (2) CONTACT INFORMATION

Owner Name: <u>APANS HEALTH SERVICES</u>
Owner Address: <u>284 CENTRAL AVE</u>
City/Town: <u>LONDON</u> Postal Code: <u>N6B 2C8</u>
Contact Number: <u>519 672 8885</u> Email address: <u>mraithby@APANS.ca</u>

#### PART (3) APPROVED FIRE DRILL SCENARIO

**TIP:**

- The Ontario Fire Code requires monthly fire drills to be performed in care occupancies, and care and treatment occupancies. The local fire service observes an annual fire drill to determine sufficient supervisory staff is available to perform fire safety duties described in the Fire Safety Plan.
- Every person required to implement a fire safety plan must have completed an acceptable training program/course by January 1, 2017.
- Additional requirements and Compliance dates can be found in the Compliance Schedule. Check all Fire Code applications here

#### Step 1 - Develop a Scenario Representing Lowest Staffing Level Complement

A	Select a zone/floor area of fire origin involving residents/patients in resident/patient rooms that poses the greatest evacuation challenge for staff.	Floor #: <u>GROUND LEVEL - GRAND UNIT</u> Zone: <u>South hall</u> Number of residents/patients in the fire compartment that will require evacuation to a point of safety: <u>24 (17)</u>
B	Identify the point of safety to which residents/patients in the zone/floor area of fire origin will be evacuated.	<input type="checkbox"/> Outside Building <input type="checkbox"/> Exit stairwell (min. 30 minutes fire resistance rating) <input checked="" type="checkbox"/> Adjacent Zone (min. 30 minutes fire resistance rating)

C	Select a resident/patient room within this zone/floor area that would represent the room of fire origin.	Room #: <u>416</u> Total residents/patients in the room: <u>1</u>
D	Simulate the time of day representing the lowest staffing level complement available to respond to the room of fire origin.	Time of day: <u>1:30 AM</u> Number of staff available to respond: <u>10</u>

**TIP:**

- Submit drawings to the fire service that show the building features and the proposed area affected by the fire drill. Include the proposals listed above on the drawing so that the scenario can be reviewed and approved.
- Evacuations in stairwells with non-ambulatory residents may be labour intensive. Proxies should be considered when scenarios are developed to ensure the safety of all residents / patients within the facility. Refer to the OFMEM TG-01-2013 for details.

**Step 2 - Determine Time Available for Closing the Door to the Room of Fire Origin**

A	Estimate the time required for detecting a fire in the room of fire origin. Use max time from Chart C.1 as shown below unless otherwise documented.*	Fire Detection Time <u>2.5</u> (minutes)(A)
B	Estimate the time period during which the suite or room of fire origin is safe to enter. Choose 2.5 minutes for an unsprinklered room or 5 minutes for a sprinklered room.	Time room is safe to enter <u>.45<sup>Sec</sup></u> (minutes)(B)
C	Calculate the time available for staff to : • respond to the room of fire origin • remove/assist occupants from the room, and • close the room of fire origin door.	(B) - (A) = (C) Time Available to close door. Time available to close door: <u>1 Min 45<sup>Sec</sup></u> (minutes) (C)

Table C.1 Detection Method**	Time to Detect (min)
smoke alarm/detector in small bedroom (12 x12 ft) of fire origin	.5
smoke alarm/detector in medium to large room (15 x 20 to 25 x 25 ft) of fire origin	<u>.75</u>
smoke detector in corridor, with fire initiating in adjacent bedroom with open door	1.5
smoke detector in corridor, with fire initiating in adjacent small bedroom with closed solid-core wood door	5
135°F heat detector in small bedroom (12 x12 ft) of fire origin	1.5
135°F heat detector in medium to large room (15 x 20 to 25 x 25 ft) of fire origin	2.5
135°F heat detector in corridor outside adjacent small bedroom of fire origin with open door	3.3
135°F heat detector in corridor outside adjacent small bedroom of fire origin with closed solid-core wood door	18
135°-165°F residential type sprinkler system in a bedroom of fire origin	2.5
supervisory staff at work station smelling smoke from fire in room with door open to corridor	6
supervisory staff at work station smelling smoke from fire in room with solid-core wood door closed to corridor	8.3

\*\* For the purposes of this document only the maximum time to detect is shown. Refer to OFMEM TG-01-2013 Table C.1 for additional information.

**TIP:**

- NEVER re-open the door to the room of fire origin after evacuating the room. Smoke and fire may compromise the hallway and reduce the time available to evacuate residents to the next point of safety. Fire Safety Plan instructions should ensure doors remain closed.
- Smoke alarms are now mandatory in each suite, or sleeping room not within a suite, that is not equipped with a smoke detector. Information can be found in the Fire Alarm Test Report to determine the type of detector in each suite and sleeping room.
- Self-closing devices may be required on doors to suites and sleeping rooms on January 1, 2017. Check all Fire Code applications here.

**Step 3 - Determine Time Available to Evacuate Occupants in the Zone/Floor Area of Fire Origin to a Point of Safety AND Closing the Door to the Room of Fire Origin**

A	<p>Identify the type of door to the room of fire origin.</p> <p>*Door rating information may be found on suite door frame and on door near hinges.</p>	<p>Check applicable door type / rating:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Wood panel or Hollow-core wood = 5 min</li> <li><input type="checkbox"/> 45 mm solid-core wood = 15 min</li> <li><input type="checkbox"/> 20-min. rated door in 20 min labelled frame = 20 min</li> <li><input type="checkbox"/> Hollow metal / steel door = 30 min</li> <li><input type="checkbox"/> 45 min labelled door in 45 min labelled frame = 45 min</li> </ul> <p>Door rating - _____ (min.) (A)</p>
B	<p>Determine the minimum water supply duration for automatic sprinklers from the following information:</p> <p>No sprinklers = 0 minutes</p> <p>Sprinklers designed to NFPA 13D = 10 minutes</p> <p>Sprinklers designed to NFPA 13R = 30 minutes</p> <p>Sprinklers designed to NFPA 13 = 30 minutes</p> <p>Municipal water supply to sprinklers = 60 minutes</p> <p>*Sprinkler design information may be found in Sprinkler System Test Reports or other documentation.</p>	<p>Sprinkler system water supply duration (minutes)</p> <p style="text-align: center;">0 (min.) (B)</p>
C	<p>Calculate the <u>time available</u> to evacuate residents to the point of safety.</p> <p><u>Time available</u> is denoted as (C).</p> <p>(This is time available after the door to the room of fire origin is closed.)</p>	<p>(A) + (B) = (C) Time available</p> <p>Time available to evacuate residents to point of safety.</p> <p style="text-align: center;">15 (min.) (C)</p>

**List Supervisory Staff duties to be carried out as noted in the Approved Fire Safety Plan**

May include calling 911, pulling fire alarm or other duty to ensure resident safety:

① Instruct staff to clear the Rm  
 ② Pull ALARM ③ Announce location of fire to all staff  
 ④ Oversee evacuation ⑤ CLEAR affected area - do head count keep all doors closed, ⑥ pt of contact for fire dept



### Method of Alarm Activation for Fire Drill Scenario

May be direct fire alarm activation, silent alarm, verbal notification:

- TIP:**
- PRACTICE the fire drill scenario and supervisory duties prior to fire service observations to ensure time requirements are obtained with minimum staffing levels. Ensure the Fire Department has the most current Fire Safety Plan.
  - Options to improve evacuation times can be found on page 15 of the OFMEM Guideline TG-01-2013.
  - Submit the plan to the Chief Fire Official for approval of the Fire Drill Scenario.

### PART (4) APPROVED FIRE DRILL SCENARIO INFORMATION

Document Prepared by: SANDY HALL

Date Prepared by: OCTOBER 21/19

Proposed Date for Fire Drill Observation: OCTOBER 22/19

Alternative Date:

Date Submitted to Chief Fire Official for APPROVAL:

### Chief Fire Official Approval of Fire Drill Scenario

<u>Tom Waldschmidt</u> <small>Print Name</small>	 <small>Signature</small>	<u>Oct 21/19</u> <small>Date</small>
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### This Section Completed by the Fire Service

#### Verification of Fire Drill Scenario Variables

Verify the following prior to running the actual fire drill. Adjust scenario times as required if discrepancies identified.	Confirmed
Does the Fire Drill Scenario represent the lowest staffing level as identified in the Fire Safety Plan?	yes
Is the detection method provided in Step 2 A (table C.1) properly identified and used in calculation?	yes
Will the identified point of safety accommodate everyone from the evacuated zone?	yes
Is the door rating provided in Step 3 A properly identified and used in calculation?	yes

#### Time Verification by the Fire Service

Actions from Directive 2014-02	Time Calculated By Owner	A	
The actual time to respond to the room of fire origin, remove occupant(s) from the room, and close the door to the room.	Show time from Step 2 C - Available Time <u>1:45</u>	Record actual time to complete task <u>33:73sec</u>	Acceptable <input checked="" type="radio"/> Y or N
The actual time to evacuate residents/patients from the zone or floor area containing the room of fire origin to the next point of safety	Show time from Step 3 C - Available Time <u>15mins</u>	Record actual time to complete task <u>2:32:90</u>	Acceptable <input checked="" type="radio"/> Y or N
		Pass	Fail
Was the actual time to respond to the room of fire origin, remove occupant(s) from the room, and close the door to the room within the time permitted?		<input checked="" type="checkbox"/>	
Was the actual time to evacuate residents/patients from the zone or floor area containing the room of fire origin to the next point of safety within the time permitted?		<input checked="" type="checkbox"/>	
Were all identified Supervisory Staff duties from Fire Safety Plan completed as shown above?		<input checked="" type="checkbox"/>	
Did the fire drill observation identify any Supervisory Staff duties performed that were not shown in the Fire Safety Plan?		YES	<input checked="" type="radio"/> NO

- TIP:**
- If the fire drill observations determine that *insufficient* supervisory staff is available to perform the fire safety duties as described in the Fire Safety Plan, appropriate enforcement options provided in OFMEM TG-01-2012 - Fire Safety Inspections and Enforcement should be utilized to ensure the safety of the occupants.
- Complete the "Registry of Vulnerable Occupancies" as required in Directive 2014-001 and detailed in Communiqué 2014-09
  - Directive 2014-002 requires a Fire Safety Inspection to be completed. The inspection may be done on a different date than the Fire Drill.
- \*\*Ensure the Fire Safety Inspection Checklist is completed and retained in the fire department file.