

## **Introduction**

The North Renfrew Long-Term Care Centre Emergency Management Plan is an all-hazards disaster response plan which provides overarching principles and operational guidelines used to coordinate an effective response to all types of emergencies that may affect staff, Residents, and facilities. It is intended to address all emergencies that are not normally managed by staff, requiring the coordinated effort and resources of multiple departments, community agencies, and other organizations.

The Emergency Management Plan has been created in response to the Emergency Management Plan Policy and meets the requirement under the legislation of the ON Fixing Long-Term Care Act, 2021 (FLTCA) and ON Regulation 246/22.

## **Purpose**

The purpose of this Emergency Management Plan is to ensure that this Home:

- Maintains a continuous state of readiness to manage a disaster response,
- Minimizes the actual or potential danger to individuals, Resident, staff, volunteers, or visitors, and addresses individual staff and Residents needs, including accessibility; and
- Ensure the continuity of operations to the highest degree possible.

## **Objectives**

To this end, the objectives of this Emergency Management Plan are to:

- Provide a common organizational structure and control method for the management of personnel, equipment, facilities and resources during an emergency.
- Outline the roles and responsibilities of key staff to prepare for, respond and recover from emergencies.
- Enhance communication linkages between the Home, partner facilities, other community agencies, and resources in the preparation and implementation of emergency response activities.
- Establish a clear line of authority during an emergency and clearly defined operational roles for management.
- Provide a basis on which policies, procedures, training and exercises relating to emergency management may be developed.
- Minimize the impacts of an emergency by maintaining a standard operational readiness, awareness and preparedness.
- Ensure, as much as possible, the well being of Residents, staff and all other on site in the event of an emergency or disaster.

## **Development and Updates to Plan**

- Consultation in development and annual updating of this plan is done with:
  - Local Emergency Service Providers
  - Community Agencies, health service providers, partner facilities, etc.
  - Staff, Residents' Council

## Definitions

**Emergency:** Emergency is defined as a situation, or the threat of an impending situation, that could affect the property and the health, safety and welfare of the Home in which, by their nature and magnitude, require a controlled and coordinated response.

**Emergency Management:** The term used to designate the efforts of communities or businesses to plan for and coordinate all personnel and materials required to either mitigate the effects of, or recover from, natural or manmade disasters, or acts of terrorism.

**Incident Commander (Team Leader):** The person responsible for all aspects of an emergency response; including quickly developing incident objectives, managing all incident operations, application of resources as well as responsibility for all persons involved.

**Emergency codes:** The use of emergency codes is intended to convey essential information quickly and with minimal misunderstanding to staff while preventing stress and panic among Residents and Visitors to the Home.

## Roles and Responsibilities

### Health and Safety Committee/Executive Director/Executive Assistant

- Develop an annual training and exercise program including personal preparedness training for staff, and preparedness exercises of the Emergency Management Plan and Emergency Management Code Procedures as defined in the Emergency Management Plan.
- Maintain records and documentation of emergency training, exercises, and maintenance of supplies and equipment.
- Maintain an accurate and most updated emergency contact of all staff and functions listed in the Fan Out.
- Establish agreements with relocation facilities and essential vendors/suppliers.
- Communicates to residents and families.
- Communicates to staff, board members and other community stakeholders.
- Communicates to media if required.

### Team Leader (Incident Commander)

- Assess the situation and determine the appropriate action and code.
- Initiate the Fan Out procedure, if applicable.
- Lead the response to incidents.
- Contact Administrator and Manager of Resident Services.
- Contact Community Partners, if applicable.
- Follow procedures for the appropriate code.
- As necessary, solve problems.
- Set priorities and define the organization of the incident response teams and the overall incident action plan.
- At own discretion, assign individuals, who may be from the same Home or from assisting agencies, roles.
- At the All Clear, record how the plan worked, note areas that need revisions and updating.
- Chair a formal debrief of the incident after recovery.

**IPAC Lead**

- Develops, updates, and maintains outbreak management program. Provides staff tools to aid in the assessment and management of communicable diseases and outbreaks.
- Does quarterly and post outbreak inventory of PPE stock to ensure adequate supply. Reports findings quarterly to IPAV committee.
- Develops and audits policy and procedures for Infection prevention and control.
- Has a role as liaison between NRLTC and RCDHU/PHO/Chief Medical Officer of Health.
- Is a resource for staff, residents and families regarding IPAC during an emergency.
- Is a member of emergency preparedness team in the mitigation, planning, reacting to and recovery after emergencies. Including developing of Interim Life Safety Measures (ILSM)/

**All Staff**

- Participate, review, and assist in the development of the Emergency Plans and Code Procedures
- Inform the Admin. office of changes in contact information for emergency – contact during fan out procedure
- Attend and participate in emergency training and exercises
- Follow the directions given by the Team Leader (Incident Commander) during the incident and recovery phase.
- Adhere to safe work practices in an emergency
- Report to their supervisor any known hazardous situation that may result in the course of an emergency
- Communicate the effectiveness of Emergency Plan at the end of the All Clear
- Participate in formal debriefing as required

**Food Services**

- Participate, review and assist in the development of the home emergency plans and procedures
- Maintain a sufficient supply of food and water in case of emergency, minimum of three days
- Develop contingency plans to support the emergency stockpile of food and water
- Attend and participate in emergency training and exercises

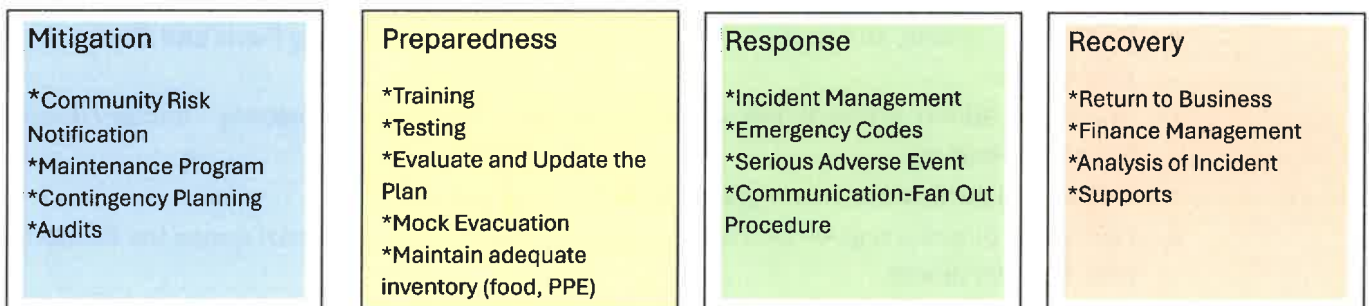
**Maintenance**

- Participate, review and assist in the development of the home emergency plans and procedure
- Participate or lead the hazard site assessment to identify and mitigate physical hazards
- Provide and maintain Home specific information in the emergency plan, such as location of utility controls and procedures for managing an emergency

## External Stakeholders

- Communication linkages will be enhanced within the Home/Community, other long-term care (LTC) home/community agencies and resources in the preparation and implementation of emergency response activities
- Community Partners will ensure appropriate plans and implementation procedures are developed for carrying out their roles and tasks. Community Partners will ensure that the health, safety, and welfare of the Residents are considered when developing plans and procedures.

## Key Elements of the North Renfrew Long-Term Care Emergency Management Plan



### Mitigation

Mitigation activities focus on anticipating and preventing disaster damage, reconstruction, and repeated damage. Activities include awareness and education on avoidable risks/threats to North Renfrew long-Term Care residents, and the implementation of measures to eliminate or reduce risks. These measures may include preventative maintenance programs, staff education, contractor/vendor agreements, alternate suppliers (contingency) and process audits/improvements.

### Preparedness

Preparedness activities are focused on planning, organizing, training, equipping, exercising, evaluating, and taking corrective action to ensure effective coordination during incident response. These activities include the assessment of unavoidable risks/threats and the development of plans for response and business continuity. Plans must be reviewed and updated regularly, and staff must be trained in the implementation of the plans.

### Response

Response phase is the implementation of the Emergency Management Plan during an emergency situation to ensure that people are safe, damage and loss are minimized, and activities continue to function at an acceptable level.

### Recovery

During the Recovery phase, the organization focuses on returning systems, processes, and property to normal standards while continuing will all business functions.

## Mitigation

### Community Risk Assessment

The purpose of a Community Risk Assessment is to analyze potential hazards, assess risks and vulnerabilities of the Home in order to facilitate risk-based decision making. These decisions aim to address vulnerabilities, mitigate hazards, and prepare for response to and recovery from hazard events. Risk-based means based on informed choice of alternate unwanted outcomes. In other words, Homes make risk reduction choices based on the acceptability of consequences and the frequency of hazards. The Community Risk Assessment is also utilized to develop the response procedures.

Risk	Consequences	Impact	Resources
Communication disease outbreak	Damage to critical infrastructure*- Energy & Utilities, Finance, Information & Communications Technology, Food, Water, Safety, Government Services, Logistics.  Damage to critical facilities  Injuries and fatalities  Staff and Residents' safety  Business Disruption	Facilities	Mitigation strategies to remove or reduce hazard
Criminal- bomb threats, hostage, shooting		Families	Emergency Plan & applicable response procedure
Earthquake		Environment	
Extreme Weather		Residents	Related education, training and exercises
Fire		Operations Staff	
Flooding			Resources and supplies contingency plans external resources
Hazardous Material event			
Nuclear accident			
Chlorine leak			
Medical Supply Chain interruption			
Missing Residents			
Utility Outages			
Other threats (geographic specific event that are identified in the Canadian Disaster Database)			

### Maintenance Program

The home shall keep a Maintenance Program of the critical services and utilities to ensure they are working properly. The program shall outline all scheduled inspections, check, audits and monitoring of the critical services and utilities.

## Preparedness

Preparedness activities are focused on planning, organizing, training, equipping, exercising, evaluating, and taking corrective action to ensure effective coordination during incident response.

### Mandatory Training

Item	Audience	Frequency	Objective
Emergency Plan and Codes	All staff, volunteers & students	Orientation – before start work in the Home	Fire Prevention and safety, emergency evacuation plan and to update Emergency Plan with any changes and revisions
Emergency Codes	Residents and Families	At Admission Annually	Familiarization with emergency codes and procedures.

### Testing of the Plan

Item	Objective	Frequency	Record
Emergency Plan*	Test the Plan	Mandatory Annually	Code Specific Checklist and Action Plan Template
Code Grey- Loss of essential services Code Yellow – Missing Resident Code Blue- Medical Emergencies Code White- Threat of Violence Code Red- Fires Code Orange- Disaster	Meeting regulation: Ontario: Reg 246/22 s. 268 (10)		
<i>Testing the Emergency Management Plan must include arrangements with community agencies, partner facilities, and resources that will be involved in responding to an emergency.</i>			
Mock Evacuation – Panned Code Brown – Chemical Spills Code Black – Bomb Threat Priority Code - Intruder	Test the Plan  Meeting regulation: Ontario: Reg 246/22 s. 268 (10)	Mandatory – Once every three years	Code specific checklist and Action Plan Template
Fan-Out List	Test the Plan	Mandatory – every 6 months	Fan-Out call list is updated
Drills	See the Fire Safety Plan	Mandatory – One drill per month Fire Department to observe on drill annually	Fire Drill Checklist and Action Plan Template

## **Preparedness**

The Health and Safety Committee/Executive Director will implement exercises to test the plan as frequently as required in the previous chart. There are three main types of exercises to test the plan: Discussion-based, Tabletop or Live exercises. The choice of which one to adopt depends on what the purpose of the exercise is. It is also a question of lead time and available resources. A combination of the three types can also be an option for testing the plan.

### **Emergency Contact Lists**

Emergency Contact Lists contain the emergency contact information of all of the staff and relevant positions in the organization, and the contact info for all of our vendors and service providers, community partners and local emergency services.

### **Resident and Family Contact List**

Families and responsible parties will be contacted promptly by staff in the event of an emergency situation. At least one list of all Residents and family contact information is maintained. This is kept in the electronic file of each residents chart, the front of each residents paper chart and the nursing desk phone binder.

The information on the list is revised as necessary. It contains relevant information on Residents and families to be utilized in case of an emergency.

The Executive Director/designate will delegate staff to make the necessary phone calls. When establishing initial contact with families, staff will convey emotional support and reassurance that safety and well-being of the Resident is the home's priority. When families are contacted in an emergency situation, they should be notified of:

- Type of emergency
- Time of emergency
- Status and/or location of Resident
- Mechanism in place for access to updated information

All media releases will be provided by the Executive Director or designate. Staff and volunteer will focus their efforts to the direct care of residents and clients.

## **Response**

This section outlines the framework for the home response. It includes an organizational structure to provide overall direction and control of North Renfrew Long-Term Care Centre emergency operations.

Emergency Management begins at the home level where most incidents are managed. If the incident cannot be adequately managed from North Renfrew Long-Term Care Centre due to insufficient resources, an emergency call will be made.

Emergency calls are prioritized based on the severity of the incidents and the availability of resources. In a larger scale incident, local authorities may also activate emergency operations centers or mobilize staff to coordinate the response.

During these major emergencies, the local authority, together with first responders, will assess and prioritize community needs, allocate resources, and respond based on the determined priorities. In a major disruption to transportation networks or severe storms, outside assistance or community resources may not be immediately available.

### **Incident Management**

When an incident occurs, appropriate steps should be followed to deal with the incident.

- Implementation of the Emergency Response Procedures – Codes
- Notify the Administrator or designate immediately
- The Administrator or designate will follow the Code Specific Procedures; with
- Communication utilizing the Emergency Fan Out Procedure when applicable

### **Response Procedure – Codes**

The “Emergency Response Procedures – Codes” provides a general approach to procedures on how to deal with various incidents or guidelines on how to respond to incidents. Consideration must be given to the incident scenario, contributing factors, resources available, magnitude, etc. to provide a proper respond to the incident.

The Emergency Response Guide is a simplified version of the procedures to be utilized as a tool for consultation and staff training.



# MEDICAL EMERGENCY – CODE BLUE

## Medical Emergency – Code Blue

### Standard

**Code Blue** will be used to alert individuals in the home of a medical emergency and provides a systematic approach for responding to it.

A medical emergency is defined as a medical condition requiring immediate treatment, for example a cardiac and/or respiratory arrest, convulsive seizure, acute chest pain, respiratory distress, syncope and/or any other situation where clinical assistance is needed.

Note: A medical emergency that involves a resident of North Renfrew Long-Term Care Centre must be addressed in accordance with their individual Goals of Care.

### Procedure

#### Upon discovering the emergency:

- Pull the nearest call bell and alert nearby staff by shouting Code Blue.
- Stay with the individual and begin assessment and if appropriate to the residents plan of care, resuscitation until help arrives.

#### Upon receiving the page for “Code Blue”:

- The RN/RPN will bring the emergency equipment to the area called and begin assessment.
- The DOC or clinical nurse will go immediately to the area of Code Blue and direct it until ambulance personnel arrives. At all other times, the Team Leader will attend the code and assume responsibility.

#### The DOC on duty will direct the code and ensure appropriate resuscitation endeavors:

- The DOC/Team Leader will direct 911 to be called where appropriate and the person will give name, address and room location.
- A PSW will be assigned to wait for ambulance at main entrance, and provide directions to Code Blue.

## FIRE – CODE RED

### Fire- Code Red

#### Standard

Emergency **Code Red** will be used:

To alert all occupants when a fire is discovered.

When conducting FIRE DRILLS

When there is a suspicious event that may lead to fire (e.g. smoke, smelling something burning).

#### Procedure

##### A. If you discover a Fire/Smoke

Call out “CODE RED”, and fire location: R.E.A.C.T:

**R:** Remove Residents from immediate area.

**E:** Ensure windows and doors are closed.

**A:** Activate Alarm

**C:** Call the Fire Department

**T:** Try to extinguish the fire (if possible)

Team Leader to check Fire Panel and page location of Fire “Code Red- exact location”

##### B. If you hear the alarm

Refer to Fire Procedure for your area of the Home

# EVACUATION PROCEDURES – CODE GREEN

## Evacuation Procedures – Code Green

### Standard

**Code Green** will be used to evacuate Residents from immediate danger in the event of an impending emergency disaster.

All employees are responsible for understanding the use of Code Green in the event of a disaster/emergency situation.

#### Code Green – Internal Evacuation

This is relocating Residents from a danger area to a safer area within the Home.

All residents to be evacuated to a safe area beyond the fire barrier doors.

#### Code Green Stat- External Evacuation

The purpose of this plan is to save lives by relocating Residents to an outside facility.

This can be the result of fire, natural gas failure, Bomb Threat, Power Failure, etc. This accomplished by moving all Residents to the designated sorting area to be assessed for further relocation.

### Authority:

The Incident Management Commander (trained staff, in consult with the Administrator, if present) will make this decision if warranted before the Fire Department arrives. Once Emergency Services is present, the Senior Officer then becomes in charge and makes this decision.

# MISSING PERSON -CODE YELLOW

## Missing Person – Code Yellow

### Standard

**Code Yellow** will be used each time a Resident is discovered missing.

An immediate and thorough search of the home and the immediate environment will be conducted upon the suspicion/notification that a Resident is missing.

### Procedure

1. In the event a Resident is suspected to be missing from the home, the staff member will notify the Team Leader immediately.
2. All staff in the immediate vicinity are to search the LTC floor, including, other residents' rooms, washrooms and other areas of the LTC floor.
3. Staff on 2<sup>nd</sup> and 3<sup>rd</sup> floor will be directed to search their areas and the security cameras will be utilized in the search. The outside garden and parking area will be searched.
4. After the initial search, the person in charge will Page **"CODE YELLOW"**.
5. **If the resident is not located within 15 minutes, the Team Leader/Doc/person in charge will:**
  - Contact the resident's physician;
  - Contact the POA;
  - Communicate with the police who will continue to assist in the search.
6. Provide police with photo of resident from front of resident's chart.

## THREAT OF VIOLENCE – CODE WHITE

### Threat of Violence – Code White

#### Standard

**Code White** will be used to obtain immediate assistance in a situation related to violent/aggressive behaviors. The Code White can be a resident, staff or visitor.

#### Procedure

1. Call out “CODE WHITE”, staff to respond immediately to area of concern.
2. Remove residents/visitors from immediate area and take to a secure, safe environment.
3. The person in charge is to assess the situation and give direction to staff.
4. Once situation is assessed then:
  - If unable to diffuse violent situation, call 911 for emergency response, notify physician, Administrator, DOC, family.
5. DOC or designate will contact Ministry of Health (CIS Report)

## EMERGENCY DISASTER RESPONSE PLAN IN EFFECT – CODE ORANGE

### Emergency Disaster Response Plan if Effect – Code Orange

#### Standard

**Code Orange** is paged to alert employees that the home will be receiving an influx of Residents as a result of an external disaster.

#### Procedure

1. The Administrator/designate will approve the receipt of Residents from another facility or the community following an external disaster.
2. On request, an employee will be directed to communicate “**Code Orange Alert**” to advise employees of a potential influx of Residents. “**Code Orange**” or “**Code Orange Confirmed**” will be communicated to declare a confirmed influx of Residents.
3. The reception plan will be implemented to handle the influx of Residents.

#### Outcome

**Code Orange** is paged and the reception plan is implemented upon notification of an influx of Residents after an external disaster.

## HAZARDOUS CHEMICAL SPILL – CODE BROWN

### Hazardous Chemical Spill – Code Brown

The spill or leak of any hazardous material can result in immediate danger to life or health, disruption of resident care and threaten both the property and the environment.

These procedures must be carried out immediately for:

1. The unplanned and/or uncontrolled release of any hazardous or potentially hazardous chemical in any quantity.



2. The spill or leak of any UNIDENTIFIED SUBSTANCE.

In the event of a spill or leak of any substance as defined above, the person(s) involved or discovering the spill/leak shall:

**S:** Safely evacuate everyone from the immediate area.

**P:** Prevent the spread of fumes by closing doors, if possible.

**I:** Initiate notification of Dietary Manager or Health & Safety Rep. Over P/A system and state the exact location of the spill as well as the chemical if known.

**L:** Leave all electrical equipment, appliances and switches alone. **Do not turn them on or off.**

**L:** Locate any information regarding the chemical spills from the M.S.D.S.

## Nuclear Accident – Code Brown

### What should I do in case of a nuclear emergency?

- **Remain Calm**
- **Shelter-in-place.** We ask that residents close all windows and ventilation (e.g., air conditioners). This step will help to prevent contamination from entering into the building should the emergency result in an airborne radiological release.
- **Be prepared for a nuclear emergency within the primary zone.** (within 9 km of the reactor).  
<https://www.cnl.ca/about-cnl/emergency-preparedness/>  
It is important to point out that the risk has not changed at Chalk River Laboratories, what has changed are the regulations in which the laboratory operates. We operate on robust processes and procedures that allow us to build a strong safety culture. KI tablets block the thyroid, preventing the organ from absorbing radioactive iodine. KI tablets continue to be pre-stocked in the primary zone for use during an emergency.
- **Listen** to the radio and/or CNL's website for further instructions and accurate up-to-date information.
- **Evacuate** only when advised to do so by provincial or municipal officials.



## LOSS OF SERVICE/NATURAL DISASTER – CODE GREY

### Loss of Essential Service/Natural Disaster – Code Grey

#### Standard

Code Grey is any unplanned interruption or loss of critical essential service or a natural disaster event. The Home will contact local authorities for further information on specific actions for each individual Code Grey situation. Its purpose is to provide an immediate plan of action to ensure the safety of everyone and allow the Home to continue its operations.

#### Procedure

North Renfrew Long-Term Care has specific process in place to deal with the loss of essential services/natural disaster such as the ones listed, but not limited to:

1. Loss of hydro
2. Loss of natural gas
3. Loss of water/Boil Water Advisories
4. Loss of telephone
5. External Air Exclusion
6. Flooding
7. Tornado/Hurricane
8. Extreme Cold
9. Withdrawal Services/No staff
10. Interruption of Food Services
11. Emergency Power Hook-up
12. Wild Fires
13. Highway closures

## **BOMB THREAT – CODE BLACK**

### **Code Black – Bomb Threat**

Any information received by North Renfrew Long-Term Care Centre concerning a bomb placement is considered to be a real threat.

If you receive a bomb threat by note or letter:

- Call 911 or have a coworker call 911;
- Contact your immediate Supervisor;
- If you notice a package or foreign object in a strange place – **DON'T TOUCH IT**
- Prepare to evacuate – do so if you perceive danger;
- Await further instructions.

**DO NOT USE CELLULAR TELEPHONES. TRANSMISSIONS FROM THESE DEVICES COULD SET OFF AN EXPLOSION.**

If you receive a bomb threat over the phone:

- Have a coworker call 911;
- Keep the caller on the line as long as possible;
- Attempt to learn:
  - Location of bomb;
  - Type of bomb;
  - Time it is set to go off;
  - Type of container it is in;
  - Why they are doing it;
  - Use the BOMN THREAT CHECKLIST (immediately following)
  - Get another person's attention. Have them call the 911.
  - Call the administrator/director if not present.
  - Organize staff to evacuate residents upon police or administrative order.

## Response

### **Additional Emergencies – Outbreaks, Pandemics**

North Renfrew Long-Term Care Centre will be proactive in the identification and prevention of outbreaks. In the event of an outbreak, an outbreak management plan will be in place and will be implemented as expeditiously as possible to interrupt further transmission of a disease-causing agent.

- Outbreaks will be reported to Renfrew County District Health Unit
- North Renfrew Long-Term Care Centre has a pandemic plan in place to guide infection prevention and control practices and provide interventions in the event of an active pandemic.
- The home will follow the provincial/regional outbreak management protocols as applicable.

### **Fire Safety Plan**

The Fire Safety Plan is established to ensure that our Residents, clients, and employees, as well as our properties, are protected to the greatest extent possible and are cared for in the safest possible manner. The Home's environment will be 100% compliant with fire code standards.

### **Hazard Identification Risk Assessment (HIRA)**

Completing a Hazard Identification Risk Assessment will ensure that measures are in place to respond to those risks identified as most likely to occur. The expectation is that training, practice and resources are customized to react to the risks that are most likely to affect your home.

### **“Food, Fluid Provision Plan”**

Emergency Management Plans will include:

- A plan for food and fluid provision in an emergency.
- A plan to ensure that in an emergency all residents have timely access to all drugs that have been prescribed for them.
- Resources, supplies, personal protective equipment, and equipment vital for the emergency response being set aside and readily available at home, including, without being limited to, hand hygiene products and cleaning supplies, as well as a process to ensure that the required resources, supplies, and personal protective equipment and equipment have not expired.

### **Drug Provision Plan**

In the event of a disaster, fire or other forced evacuation at the home:

Pharmacy will work closely with the home to provide the following in a timely manner:

- Replacement and dispensing of all required medications
- Delivery of required medication to alternative locations
- Delivery and Printing of MAR Sheets and/or Prescriber's Medication Review
- Provide ongoing refills to alternate location for the duration of the evacuation.

## **Emergency Fan Out Procedure**

The Fan out Procedure is a call out process utilized to contact, notify, and direct staff to report, respond and/or assist the Home in the event of an emergency.

## **Recovery and Continuity**

Recovery planning is just as important as preparedness planning.

### **Return to Business operation**

Recovery from an incident is dependent on the nature of the incident but it may consist of the following:

- Contacting local Renfrew County District Health Unit to advise on the issue, and seek any local resources, if available.
- Identifying critical supplies, equipment and key suppliers that support the Home to determine strategies to protect key resources or to identify alternatives. Include contact information of key suppliers in the communications directory.
- Implementing plans to maintain critical operations to ensure the continuity of those operations or to bring those systems back online.
- Indicating back up or store off-site copies of key documents, files and business records.
- Based on Agreements or appropriate arrangements for an alternate location, ensure the continuity of care provision in case the Home cannot be re-occupied or will be temporarily unavailable.
- Contacting insurance providers to determine and advise on insurance and claim management.
- Conducting a thorough damage assessment of the Home following the disaster/incident.
- Considering plans for supporting staff, such as cash advances, salary continuation, flexible work hours, reduced work hours, crisis counselling, care packages, day care.
- Identifying restoration companies that can assist with the clean up of the Home and include their 24-hour contact information in the communications directory.

### **Analysis of the incident and Process Improvement**

After the incident is managed and the operation of the Home is recovered to business as usual, the Administrator in conjunction with a selected team involved in the incident response and recovery will debrief to evaluate the incident and how it was managed. This selected team could include, but not limited to Community Agencies, partner facilities, resources, corporate representatives, etc. The purpose of this evaluation is to learn from the incident, identify changes and revisions to the plan and identify areas of improvement.

Actions for improvement are documented and implemented according to established timelines. The action plan is also used to document improvements identified during the annual review of the Emergency Management Plan, after testing exercises or review of procedures, inspections, and/or audits.