



CODE ORANGE – EXTERNAL DISASTER

Issued by: Support Services	ISSUE DATE: June 1, 2009
MANUAL: Emergency Procedures	SECTION: Codes

VALUE STATEMENT

In keeping with its value of *Excellence*, the organization is committed to ensuring that procedures are in place in the event of an emergency.

OBJECTIVE

The purpose of a Code Orange procedure is to establish a plan for the effective and efficient reception, assessment and treatment of a large number of casualties over a short period of time. In the case of a major external disaster such as an airplane crash, train derailment, chemical or radioactive spill or gas line explosion the organization could be asked to assist in such a planned response.

DEFINITIONS

'Command Centre': The Command Centre's responsibilities are generally executive in nature and are designed to develop, direct, and maintain a viable organization during the disaster. The Centre also functions to keep the organization coordinated with other agencies.

- At St. Joseph's Continuing Care Centre, the Command Centre is the reception area. In the event this is inaccessible the alternative location is the HUB.
- At St. Joseph's Villa, the Command Centre is the reception area. In the event this is inaccessible the alternative location is Lakeview Nursing Station.
- At Villa St Gabriel Villa, the Command Centre is the reception area. In the event this is inaccessible the alternative location is Whitson Nursing Station.

'Emergency Response Boss': Is the most senior staff person of authority in the building and has the authority to activate any Emergency Preparedness Plan. The most senior person in the hierarchy on the premises assumes the role of Emergency Response Boss until another individual further up the hierarchy replaces them. The next highest person on the hierarchy assumes the role of the Scene Captain and reports to the scene of the event. The Emergency Response Boss proceeds to the Command Centre to coordinate the efforts in dealing with the Code Orange. The following is the hierarchy as to who is in charge during an emergency for those present on site:

- VP of Clinical Services at SJCCC, or the Site Administrator at SJV or VSGV,
- DOCs at the Villas/Clinical Managers at CCC
- ADOC,
- Charge RN
- RPN

'Scene Captain': Is the individual who responds to the scene and is responsible for the events at the scene. The Scene Captain will communicate with the Emergency Response Boss and take direction from the Emergency Response Boss.

POLICY

The primary goal in a Code Orange would be to support the primary reception and treatment of patients/residents from area hospitals or from other long term care homes in the City of Greater Sudbury area. Some of the ways that the organization may be able to assist include:

- Providing staff support;
- Providing additional supplies and equipment;
- Providing an alternate site or facility space to help relieve the congestion at the primary reception and treatment area. For example, the reception area or Board Room could be used to provide a “drop-off and pick-up” area for those casualties who have been assessed as being ready to be discharged home; and
- Providing some accommodation within the facility (e.g. designated dining room) for those individuals who may require 24 hour nursing care.

It is difficult to predict how events might unfold during an actual disaster, therefore staff will need to be very flexible and prepared to respond to changing needs as they arise.

Brigade Members Include:

Day Shift/Afternoon Shift

- SJCCC:
 - 2 RPNs from each floor,
 - Available Social Worker and/or Chaplain,
 - Two members of the Therapy Department; and
 - Maintenance Staff.
- SJV:
 - Personal Care Assistant (#1) from Sunnyside and Lakeview,
 - One Food Service Staff – Hillcrest,
 - One Life Enrichment staff,
 - One Laundry Staff,
 - One Maintenance Staff,
 - *all of the above will be designated on the staff schedules per shift/per day.
- VSGV:
 - Day Shift / Afternoon Shift,
 - Personal Care Assistant (#1) from High Falls and White Water,
 - One Food Service Staff - Whitewater,
 - One Life Enrichment Staff,
 - One Laundry Staff,
 - One Maintenance Staff,
 - *all of the above will be designated on the staff schedules per shift/per day.

Nightshift

- All available staff.

PROCEDURE

1. The first person who receives the disaster alert will request important planning information and complete the Disaster Information/Notification Checklist (see [Appendix A](#)) with information such as:
 - The type of disaster;
 - The estimated number of casualties expected; and,

- The name and telephone number of the caller.

Note: The above information should be immediately communicated to the Emergency Response Boss (refer to emergency response hierarchy)

2. The Emergency Response Boss declares the Code Orange alert and initiates the most appropriate response.

Alerting Staff

1. The Emergency Response Boss delegates someone to announce via the PA system three times "Code Orange Alert".
NOTE: If there is adequate time to do so, the Emergency Response Boss will call a Code Orange meeting with Senior Management, the managers for the affected site, and other key personnel as identified by the Emergency Response Boss. The meeting will be used to coordinate implementation of the Code Orange plan, and determine appropriate communication strategies for residents/patients, staff, and visitors, in accordance with this policy. The "Code Orange-Alert" announcement over the PA system is not required in this situation.
2. Once the Code Orange has been confirmed and is about to be implemented, the Emergency Response Boss delegates someone to announce via the PA system three times "Code Orange – Confirmed".
3. If the decision is made not to proceed with the Code Orange plan, the Emergency Response Boss will delegate someone to announce via the PA system three times "Code Orange- Cancelled".-

When a Code Orange is Declared

1. All staff must report to their own department immediately. Emergency Response Boss will complete the Delegation of Duties Form (see [Appendix B](#)). All individuals on the Brigade will report to the designated Command Centre.
2. The Emergency Response Boss will be responsible for the overall coordination of the Code Orange response, and for deploying the members of the brigade appropriately. This includes but is not limited to ensuring the following tasks are complete:
 - All departments within the organization are notified and ready to respond;
 - The Disaster Boxes are available at the Command Centres and are stocked with appropriate emergency supplies;
 - Walkie-talkies are available in each team meeting room, each Command Centre, Administration area and maintenance shop. Base stations are located at each Nursing station;
 - All available medical staff are contacted and asked to assist in the response, where it is deemed necessary;
 - Assign a Staffing Pool Coordinator to be situated in the Command Centre;
 - Communication with external sources is established as required. For example:
 - All Hospitals;
 - Home & Community Care
 - Northeast Local Health Integration Network;
 - Fire Department;

- Police Department; and,
 - Medical Officer of Health.
 - Information is shared with the media by the office of the CEO in an appropriate and timely manner; and,
 - Relatives of patients/residents living within the facility as well as the families of any incoming casualties/ patients/residents are kept informed in an appropriate and timely manner.
3. The Scene Captain will ensure that:
- The necessary staff, supplies and equipment are in place;
 - Registered staff members are deployed appropriately;
 - All other staff are assigned to assist as able;
 - Designate a staff member to document the arrival and departure (or disposition) of any casualties/ residents/patients that are diverted/transferred to the facility (see [Appendix D](#)); and
 - Any inquiries regarding existing patients/residents or incoming casualties should be directed to the Command Centre.

Note: In the event that a Code Orange occurs outside regular business hours (evening, nights and weekends or holidays), the Emergency Telephone Fan-Out (see [Appendix C](#)) list may be used to ensure that sufficient staff is on hand to implement the procedure.

4. Other staff groups may be asked to assist as follows:
- The Environmental Services Manager (or designate) may direct staff to:
 - Control the elevators to facilitate the movement of casualties, patients/residents, nurses, supplies & equipment.
 - Maintain essential building services.
 - Control traffic. It may be necessary to limit access to the parking areas directly in front of the building. Staff can be directed to off-site if necessary.
 - Nursing Staff
 - In the event of a Code Orange alert, the Director of Care or designate will be called in. They will be responsible for ensuring that additional nursing staff are called in if required. On arrival, all staff should report to the Scene Captain for further direction.
 - Supply Distribution
 - Unit Assistant, Maintenance Service Assistant or designate will deliver supplies as needed.
 - Staff Pool Coordinator – Assignment
 - Individual will be assigned by the Emergency Response Boss.
 - Retrieve their disaster box from command centre.
 - Construct Staff Pool area sign and post outside room.
 - Assign staff to be your clerical support.
 - Assign runners to the Command Centre.
 - Assign staff as required using the Staff Pool Assignment Sheet.
 - Request additional human resources through the department managers.
 - Make tag for assigned job title from masking tape for yourself and assigned staff.

- Staff members who are sent on assignment will be instructed to report to the person in charge of the area.
- Relieved staff are then instructed to report back to the Staff Pool for reassignment.
- Coordinate relief for staff on assignment.
- Get approval from Command Centre to release employees.
- Clerical Staff
 - Answer phone.
 - Assist Staff Pool Coordinator as required.
- Employees
 - Sign-in on Staff Pool Assignment Sheet completing the first 3 left hand columns.
 - Duties as directed by Staff Pool Coordinator.
- Therapy/Life Enrichment and Environmental Services Staff (including housekeeping, laundry and maintenance):
 - Unless otherwise directed, all available therapy/life enrichment and environmental services staff should proceed to the Command Centre to join the staff pool. The Staff Pool Coordinator will direct and assign staff as deemed appropriate. They will complete the Staff Pool Assignment Sheet (*Appendix D*). Therapy/Life Enrichment staff should prepare to assist in portering discharged or admitted patients/residents/casualties to the appropriate areas.
- Food Services
 - Food service and refreshments are provided as required and able. The Food Services Manager will coordinate the food services staff and delivery as deemed appropriate.
- Chaplain/Social Worker/Other Staff

Staff to report to the Command Centre to assist the Staff Pool Coordinator in providing liaison between the casualties/patients/residents and their families, friends and clergy members.

REFERENCES

Appendix A: Initial Disaster Call Information
Appendix B: Delegation of Duties – Disaster Command Centre
Appendix C: Department Fan Out Record
Appendix D: Disaster Response Reception Log
Appendix E: Staff Pool Assignment Sheet
Delegation of Duties – Disaster Command Centre
Department Fan Out Record
Disaster Information/Notification Checklist
Disaster Response Reception Log
Internal Disaster Call Information
Staff Pool Assignment Sheet

Gatekeeper: Environmental Services Committee	Last Review Date: May 5, 2022
Next Review Date: May 5, 2023	Last Revision Date: May 2, 2019

Appendix A

Initial Disaster Call Information

1.Date: _____ Time: _____

2.Call Received by: _____

3.Name of Caller: _____

telephone no: _____

4.Description of Disaster:

5.Code Orange Alert initiated at: Date: _____ Time: _____

Disaster Information/Notification Checklist

1. Date: _____ Time: _____

2. Name of Caller: _____

3. What organization the caller works for: _____

4. Caller's call back phone # and extension: _____

5. Description of Disaster:

6. Where is the disaster? _____

7. Number of transfers anticipated: _____

8. Expected arrival time of first transfer: _____

9. Other pertinent information:

Appendix B

Delegation of Duties – Disaster Command Centre

(COMPLETED BY VP of Clinical Services at SJCCC/Site Administrator at SJV or VSGV or
ADMINISTRATOR -ON-CALL)

VP of Clinical Services/Site Administrator at SJV or VSGV or Administrator-on-call will call all individuals on the On-Call list situated in the on- call binder

Appendix C

DEPARTMENT FAN OUT RECORD

DEPARTMENTAL FAN OUT RECORD FOR: _____

Name	Telephone	Time Called	ETA	On Scene	Not Available
Total # Expected:					

Appendix D

DISASTER RESPONSE RECEPTION LOG

TIME of Arrival	Resident/Casualty NAME (or Number)	STATUS			DISPOSITION*
		Good	Fair	Poor	

Appendix E

STAFF POOL ASSIGNMENT SHEET

STAFF NAME	TIME IN	<u>ASSIGNMENT</u>	<u>RETURNED</u>	<u>COMMENT</u>

COMMAND CENTRE CHECK LIST - Code Orange

EMERGENCY RESPONSE BOSS RESPONSIBILITIES

The Emergency Response Boss designates a recorder.

Recorder enters time that each task is delegated and time it is completed.

Item numbers are assigned in the order that tasks are delegated and the same number is used on the log.

Item #	Time Start	Time End	Task
			<ul style="list-style-type: none"> • First person who receives disaster alert must provide Disaster Information / Notification Checklist to Emergency Response Boss
			<ul style="list-style-type: none"> • Contact Senior Management and Chief of Staff to inform of Code Orange
			<ul style="list-style-type: none"> • Designates a recorder for events
			<ul style="list-style-type: none"> • An announcement will be made over the PA system 3 times
			<ul style="list-style-type: none"> • Retrieves the disaster box, a 2 way radio and a vest
			Establish initial brief meeting of key people, if time permits <ul style="list-style-type: none"> • Determine the extent of the emergency • Set initial priorities • Establish temporary morgue, if need is identified
			<ul style="list-style-type: none"> • Complete Delegation of Duties (appendix B) – on call list, if needed
			<ul style="list-style-type: none"> • All Departments within the organization and notified and ready to respond
			<ul style="list-style-type: none"> • Disaster boxes are stocked with appropriate supplies
			<ul style="list-style-type: none"> • Assign a Staffing Pool Coordinator in the Command Centre
			<ul style="list-style-type: none"> • Walkie Talkies are available in each team meeting room, Command Centre, Administration area and Maintenance shop
			<ul style="list-style-type: none"> • All available medical staff are contacted and asked to assist in the response, where it is deemed necessary
			<ul style="list-style-type: none"> • Ensures the management on-call person is contacted if incident occurs • after hours
			<ul style="list-style-type: none"> • Communication with external sources is established as required; Hospitals, Fire Dept, Police, Home & Community Care, NELHIN, Medical Officer of Health etc...
			<ul style="list-style-type: none"> • Initiate Emergency Telephone Fan-Out List (Appendix C) if occurs after regular business hours (evenings, nights, weekends, holidays)
			<ul style="list-style-type: none"> • Information is shared with the media by the office of the CEO
			<ul style="list-style-type: none"> • Relatives of patients/residents living in facility as well as the families of any incoming casualties/patients/residents are keep informed
			(FROM CODE GREEN) Designate someone to establish an Assessment and Treatment area. <ul style="list-style-type: none"> • This person must take a hand-held radio from the command centre, and the ‘triage’ package from the disaster box, which contains red, yellow, and white tags, as well as a supply of transfer/discharge records for tracking patients. • Triage and categorization of injured patients as follows: <ul style="list-style-type: none"> ○ Injured and in need of immediate transfer to hospital – red tag ○ Injured and in need of eventual transfer to hospital - yellow tag ○ Deceased and in need of transfer to temporary morgue – white tag

			<ul style="list-style-type: none"> ○ Contact Emergency Response Boss to send additional staff members from staff pool as needed
			<p>(FROM CODE GREEN)</p> <ul style="list-style-type: none"> ● Designate someone to establish a “holding area” ● This person must take a hand-held radio from the command centre and the ‘holding area’ package from the disaster box, which contains yellow ‘caution’ tape and transfer/discharge records. ● All residents transported to receiving centres must be recorded on the forms along with the place they were sent and their triage tag number. ● Assign necessary personnel to the appropriate mean of transportation. ● Ensure sufficient medical documentation accompanies residents. ● Contact Emergency Response Boss or Command Centre to send additional staff members from staff pool as needed.
			<p>Delegate someone to initiate phase 1 of the fan-out system. The Command Centre must inform the staff to report to the designated holding area upon their arrival and to bring their nametag.</p>
			<ul style="list-style-type: none"> ● Ensure parking area is clear to allow sufficient room for evacuating and emergency vehicles.
			<ul style="list-style-type: none"> ● Ensure that one staff member in each area is maintaining resident head count.

DISASTER BOX CONTENTS

LOCATION: Each Command Centre

Tools within Disaster Box

1. Command Centre Checklist
2. Emergency Codes
3. Triage Area Bag (Tags, Triage Checklist, Transfer / Discharge Record)
4. Holding Area Bag (Holding Area Checklist, Transfer and Discharge Record, Barrier tape)
5. Signs (Command Centre, Holding Area, Triage Area)
6. Staff Pooling Area Sheet
7. Portable Radio
8. Stationary (Pens, markers, clip boards, paper)
9. 3 Fluorescent vests
10. Priority Phone numbers
11. Staff fan out list
12. Flash lights and batteries

St. Joseph's Continuing Care Centre Code Orange Related to Surge Crisis at HSN

Requirement	Actions	Status
Determine Unit Type and Budget Requirement	<ul style="list-style-type: none"> • Determine patient needs • Discuss proposed staffing model • Identify budget requirements at a cost neutral option or other options 	<ul style="list-style-type: none"> • Will only admit rehab patients who already meet our criteria and are on our waitlist. • Will use existing staffing but would need to ensure shifts are all covered • Will accommodate one patient per lounge
Admission Guidelines	<ul style="list-style-type: none"> • To determine the function/purpose of the unit with both admission and discharge criteria and guidelines for operations including hours of operation • To determine unit interaction between _____ and emergency. • To determine Physician coverage of patients in unit. • To determine unit leadership/management structure • Take guidelines through approval process • Communication to Clinical Management and Organization 	<ul style="list-style-type: none"> • The beds will be opened when HSN designates a Code Orange: emergency department is closed to transfers from outlying areas. When they call a code orange, we call a code orange and work through our tiered approach to surge crisis: <ul style="list-style-type: none"> ○ On an ongoing basis, we work with the team to flow patients as efficiently as possible – Clinical Managers attend rounds, monitor situation ○ On an ongoing basis, contact HSN to determine whether SJCCC patients admitted to acute care can return ○ Prioritize admissions from HSN ○ Meet with Clinical Leaders and team to determine which patients can be discharged early with appropriate and expedited H&CC support. Repatriate patients to outlying hospitals where possible. ○ If there are still patients waiting at HSN for SJCCC, determine how many patient lounges to convert to patient rooms.
Human resource Needs	<ul style="list-style-type: none"> • To identify a project lead • To determine staffing model • Send in HR documentation as required • Selection process for new staff • Determine scheduling and assignment of staff to unit • Determine staff education needs and set-up education schedule 	<ul style="list-style-type: none"> • Not applicable
Physical Space	<ul style="list-style-type: none"> • To define services currently occupying space and transfer dates 	<ul style="list-style-type: none"> • Addressed above
Physical Space Preparation	<ul style="list-style-type: none"> • Cleaning • Furniture set-up • Sharps and manorapid containers, etc 	<ul style="list-style-type: none"> • Require hand sanitizer to be mounted in each lounge • Small sharps containers available in each med cart.

	<ul style="list-style-type: none"> • Desk area set-up and needs • Addressograph • Medical Equipment (NIBP, Glucometer, etc.) 	
IT	<ul style="list-style-type: none"> • Computers, printer • Phones • Determine extension number and communicate to organization 	<ul style="list-style-type: none"> • Need PCC adjusted to include 4 patient lounges • TVs will already be in place • Need another card to create additional extensions – IT arranging. • Ron to confirm call bells are going to meet the needs.
Supplies and carts	<ul style="list-style-type: none"> • Quotas would have to be set, carts built and supplies provided • Replenishing of carts 	<ul style="list-style-type: none"> • Not applicable – use existing quota system
Housekeeping/ Linen/Portering/ Dietary, SPD	<ul style="list-style-type: none"> • Determine linen quota • Portering needs • Housekeeping needs with start date • Terminal Clean • Determine needs from Food Services • CSR supplies (bedpan, basins, urinals, K basin, restraints, forceps, scissors) 	<ul style="list-style-type: none"> • Not applicable
Equipment Needs	<ul style="list-style-type: none"> • Develop Equipment/Furniture List including special needs (i.e. emergency alert system) • Send to purchasing department for purchase 	<ul style="list-style-type: none"> • Three beds are available from SJV and there are three bariatric beds in the breezeway • Overbed tables are available (3 currently being used for non-patient uses). No others available in breezeway. • Require bedside tables – would make do with other tables we have in the building • Require clothing racks (would use hanging shoe/sweater organizers) • Require 2 additional commodes • Require oxygen concentrators from medigas (order when decision is made to open bed) • Suction machines available in dining room if needed.
Pharmacy	<ul style="list-style-type: none"> • Pyxis machine need • Obtain input on Pharmacy needs for these patients • Communicate start date to Pharmacy 	<ul style="list-style-type: none"> • Med carts are large enough • Give pharmacy the heads up re: code orange plan
Physician support	<ul style="list-style-type: none"> • Communication of plan and opportunity for input at Departmental and Program meetings 	<ul style="list-style-type: none"> • Will inform Chief of Staff of Code Orange plan and have her arrange/provide coverage for additional patients
Meditech Location	<ul style="list-style-type: none"> • Need to create unit and develop room locations • Number beds in area 	<ul style="list-style-type: none"> • Not applicable
Coding Metrics	<ul style="list-style-type: none"> • To meet with Decision 	<ul style="list-style-type: none"> • Need to add quality indicator in QIA for over census

	Support to determine coding metrics	days
Finance	<ul style="list-style-type: none"> To obtain a cost center for this area and develop a budget template 	<ul style="list-style-type: none"> Monitor impact on cost ppd
Communications	<ul style="list-style-type: none"> Need to develop communication strategy 	<ul style="list-style-type: none"> Staff in all departments Physicians Pharmacy H&CC Board of Directors