



**COMMUNITY AND HEALTH SERVICES DEPARTMENT
PARAMEDIC AND SENIORS SERVICES BRANCH
LONG-TERM CARE**

Flood Emergency Plan – CODE GREY (Policy and Procedures)

Manual	Emergency Plans – Module 3	Policy Number	EM-03.13 (v.1.10)
Applies to	All Long-Term Care Staff, Students and Volunteers		
Effective Date	November 28, 2022	Replaces	N/A

PURPOSE: The policy provides guidelines for staff to respond to and manage an **internal** water leak/flood at the Homes to ensure the safety and security of residents, staff members, volunteers and visitors in the Homes

DEFINITIONS:

CODE GREY	<p>A term that alerts staff to an infrastructure loss or failure of significance (such as boil water advisory, flood, gas leaks or loss of one or more essential services)</p> <p>Note: See the External Disaster Emergency Plan – CODE ORANGE (Policy and Procedures) for the emergency response to flooding at the Home due to an external extreme weather event</p> <p>Note: See Loss of Essential Services Emergency Plan (CODE GREY) and Seniors Services Emergency Management and Business Continuity Policy and Procedures</p>
Emergency	Means an urgent or pressing situation or condition presenting an imminent threat to the health or well-being of residents and others attending the home that requires immediate action to ensure the safety of persons in the home
Staff	<p>Means a person who works at the Home either:</p> <p>(a) As an employee of the Region/Home. This includes unionized staff, including but not limited to CUPE 905 Long-Term Care Bargaining Unit Staff (excluding Seniors Community Program Staff), and Non-Union staff working in the Homes. This also includes any redeployed Regional staff</p> <p>(b) Has a contract or agreement with Region/Home. This includes but not limited to the Medical Director, Registered Dietician, Pharmacy Service Provider, Physiotherapist, etc.</p> <p>(c) At the Home due to a contract or agreement between the Region/Home and an employment agency or other third</p>

	<p>party. This includes agency staff (including those who may not provide direct care to residents)</p> <p>Note: Education and Training exemptions apply for those in (b) and (c) who provide occasional maintenance and repair services to the Home and will not provide direct care to residents. These staff will receive information about emergency plans before commencing their services</p>
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POLICY: The key requirements of this policy are:

1. The **Flood Emergency Plan (CODE GREY) MUST** be **activated** by **any** staff member, student or volunteer:
 - Upon discovering signs of a water leak or flood at the Home
 - Upon notification of waterflow alarm on the fire protection system
2. All staff have a duty to support and respond to a **CODE GREY**
3. **Equipment and Supplies:** The Homes will ensure staff have access to resources, supplies, personal protective equipment, and equipment to adequately respond to a **CODE GREY**
4. **Communications:** The Homes will be equipped with an effective public address system for announcing **CODE GREY** to those in the Home
5. **Reporting:** The Home must report a critical incident that presents an emergency to the Home to the Ministry of Long-Term Care immediately

Note: This includes an environmental hazard that affects the provision of care or the safety, security or well-being of one or more residents for more than 6 hours (such as a flooding)
6. **Education and Training:** All staff, students and volunteers will be provided with education and training on the **Flood Emergency Plan – CODE GREY (Policy and Procedures)** at orientation and annually thereafter

Note: For CODE GREY testing and exercise requirements, see the **Long-Term Care Emergency Preparedness and Response Training and Exercise Plan**

PROCEDURES: This section contains procedures for the following:

- A. **Activating and responding to a CODE GREY**
- B. **During a CODE GREY**
- C. **Ending a CODE GREY**

D. Post CODE GREY Procedures and Documentation

A. Activating and responding to a CODE GREY

The staff member who discovers a water leak/flood will:

- Try to isolate the water source if possible. Shut-off valves are commonly located under sinks and toilets

Note: Turn valve clockwise to shut off

- If it is a **small water leak/flood** and can be corrected (such as a plugged toilet, sink overflow), stop the water flow and clean up area
- If it is a **large water leak/flood** and cannot be corrected (such as a broken toilet, burst pipe):
 - Contact the Charge Nurse immediately
 - Do **not** attempt to shut off electricity if any water is present. Water and live electrical wires can be lethal

Note: Students and volunteers should notify a staff member or Charge Nurse immediately

The Charge Nurse (or designate) will:

- In the situation of a **large water leak**, take command of the emergency and delegate a staff member to:
 - Announce the following statement **three times** over the public address system:
“CODE GREY WATER LEAK/FLOOD (location or Home Area(s))”
- If the situation is a notification from a waterflow alarm on the fire protection system, contact the local fire department and then investigate the area in case of fire

Note: If there is no fire and the water leakage involves the fire protection system, facility personnel should use the FM Global Red Tag Permit System to manage the impairment to the fire protection system. See **Red Tag Permit System Policy and Procedures**

- Notify any immediate users of the water system about the **large water leak/flood**, including the Supervisor, LTC Maintenance & Security and the Manager of Production and Support Services (during business hours) or the Manager-on-Call (after hours)
- Notify the Administrator (during business hours) or the Manager-on-Call (after hours)

The Administrator (during business hours) or the Manager-on-Call (after hours) will:

- Inform and consult with the Director, Seniors Services on whether to activate the Incident Management System (IMS). See **Long-Term Care Emergency Plan**

Note: The Risk Management Office deal with insurance related issues

- In consultation with the the Supervisor, LTC Maintenance & Security and any Emergency Services, consider the need to evacuate residents, staff and others from the location of the water leak to a safe location. See **Appendix B: Shelter-In-Place Strategies** in **External Disaster Emergency Plan – CODE ORANGE (Policy and Procedures)**
- Ensure the **LTC Emergency Communications Plan** is activated to notify stakeholders as appropriate

B. During a CODE GREY

The staff member who identified the spill will:

- Continue to contain the **large water leak** until support from the Manager of Production and Support Services arrives

The Charge Nurse (or delegate) will:

- Delegate staff members to:
 - Keep residents, staff and others in the Home away from the affected area
 - Move residents' valuable belongings to the highest areas of their room or the Home, if required and safe to do so
 - Turn off any resident beds if it is safe to do so
- Plan for actions required once **large water leak/flood** has been stopped and contained, such as replacing any damaged residents' personal items or Home furniture
- Upon notification of incident/injury of **employees**, request the employee's supervisor follow the employee incident / injury process. See [Incident and Concern Reporting](#)
- Upon notification of incident/injury of **students, volunteers, agency staff and contracted service providers**, notify the supervisor of that individual about the need to complete the **Non-Regional Incident Reporting Form**

The Supervisor, LTC Maintenance & Security (or delegate) will:

- Arrange for water to be shut off in the affected area, if required. See **Appendix B: External Stakeholder Consultation Table** in the **Emergency Planning Stakeholder Consultation Plan** for water provider contact details

- Arrange for repair and/or remediation of the system

Note: Temporary repairs to a compromised structure should be considered to minimize water damage to the affected area

- Turn off electricity and natural gas if directed to do so by authorities
- Protect any critical assets such as server rooms (that provide critical services such as nurse call system, wander alert and phone/fire systems)
- Make fans available to dry out affected area
- Contain the large water leak as much as possible

Note: For leaks involving the building structure, such as leaky roof drains, windows, etc., immediate steps should be taken to divert the water, contain the spillage and block additional water from entering the building

The Manager of Production and Support Services (during business hours) or the Manager-on-Call (after hours) will:

- Once the leak has been isolated and stopped, manage and clean the affected area (including using appropriate signage)
- Utilize wet dry vacuums and/or mops to clean/contain flooded areas as best as possible

Note: Wet dry vacs are located on each floor in designated storage rooms

- Install floor fans to dry out area

Note: Dispose of items that cannot be cleaned and dried

- Move hazardous substances such as household cleaning chemicals, insecticides and pesticides to higher shelves

The Infection, Prevention and Control Lead will:

- Implement any necessary additional precautions to prevent the transmission of infection in the Home

C. Ending a CODE GREY

The Charge Nurse (or delegate) will:

- Declare the **CODE GREY** over when the Supervisor, LTC Maintenance & Security (or delegate) has deemed it safe for the staff and residents to return to the affected area(s)
- Delegate a staff member to announce the following statement **three times** over the public address system:
“CODE GREY WATER LEAK/FLOOD. All clear”
- Notify the Administrator (during business hours) or the Manager-on-Call (after hours)
Note: Once a **CODE GREY** has been declared over, normal operations can resume once the area is clean and dry

D. Post CODE GREY Procedures and Documentation

The Charge Nurse (or designate) will:

- Report any incidents visitors and other members of the public using the **Bodily Injury Reporting Form**
- Conduct debrief(s) and other actions as required by the **Long-Term Care Emergency Recovery Plan**

The Director of Care (or designate) will:

- Follow the **Mandatory and Critical Incident Reporting Policy and Procedures**
- Notify Joint Health and Safety Committee regarding all incidents involving staff, volunteers, visitors, and contract workers

The Administrator (during business hours) or the Manager-on-Call (after hours) will:

- In consultation with the Director, Seniors Services:
 - Deactivate the Incident Management System (IMS), if activated
 - Notify the Education and Wellbeing Team to ensure staff supports are in place for those who experienced distress. See **Appendix D: Suggested Support Resources in Emergency Recovery Plan (Policy and Procedures)**

A Supervisor of any employee involved in the incident (and who sustains an injury or a near miss) will:

- Follow the employee incident / injury process. All incidents must be reported through the **Online e-Incident Report Form** on the Home’s Incident Management System

Note: All incidents (including near misses) must be investigated by employers.
See [Incident and Concern Reporting](#)

A Supervisor of a student, volunteer, agency staff or contracted service providers, involved in the incident (and who sustains an injury or a near miss) will:

- Complete the **Non-Regional Incident Reporting Form**

ROLES AND RESPONSIBILITIES:

Role	Responsibilities
All staff, students and volunteers	<ul style="list-style-type: none"> • Report and support a CODE GREY, as required
Charge Nurse (or designate)	<ul style="list-style-type: none"> • Assume command of a CODE GREY • Complete actions as required by the Long-Term Care Emergency Recovery Plan
Director of Care (or designate)	<ul style="list-style-type: none"> • Initiate Mandatory Critical Incident System, if required
Manager of Production and Support Services	<ul style="list-style-type: none"> • Manage the clean up of the affected area
Supervisor, LTC Maintenance & Security	<ul style="list-style-type: none"> • Manage the repair/remediation in the affected area • Manage contact information for response personnel such as plumbers, restoration contractors • Maintain schematic diagrams of the Homes showing the location of the domestic and sprinkler valves
Administrator (during business hours) or the Manager-on-Call (after hours)	<ul style="list-style-type: none"> • Following consultation with the Director, Seniors Services, activate the Incident Management System (IMS) for large water leaks and deactivate when emergency is over
Emergency and Contingency Planning Specialist	<ul style="list-style-type: none"> • Provide education and training on Emergency Plans • Complete After-Action Review (AAR) as required by the Long-Term Care Emergency Recovery Plan
Education and Wellbeing Team	<ul style="list-style-type: none"> • Ensure staff supports are in place for those who experienced distress. See Appendix D: Suggested

	<p>Support Resources in Emergency Recovery Plan (Policy and Procedures)</p> <ul style="list-style-type: none"> • Maintain staff records of education and training
Joint Health and Safety Committee	<ul style="list-style-type: none"> • Where required, a JHSC Worker member can assist in the investigation of the water leak • Review incident findings and provide recommendations on appropriate follow-up based on developing trends and root cause(s)

Authority	<p><i>Fixing Long-Term Care Act, 2021 s. 82(2)8 and 90; General Regulation 246/22 s.115, 263(2)2, 268, 270, 271(1)f and 273; CARF Aging Services Standards; and York Region Seniors Services Administration</i></p>
Related Resources	<ul style="list-style-type: none"> • Appendix A: Newmarket Health Centre Water System Shut-off Process <ul style="list-style-type: none"> ○ A1_NHC Flood Response Emergency Water Shut off Procedure ○ A2_NHC 1ST floor sprinkler flooding action plan ○ A3_NHC 2ND floor emergency sprinkler water shut off ○ A4_NHC 3RD floor and penthouse sprinkler emergency shut off ○ A5_NHC Valve List • Appendix B: Maple Health Centre Water System Shut-off Process <ul style="list-style-type: none"> ○ B1_MHC Basement and Ground Floor Water Shut Off ○ B2_MHC Fire System Supervised and Flow Valves (Second Floor) ○ B3_MHC Valve List • Home floor plans and maps are included in Appendix B: General Emergency Kit List in the Resources, PPE, Supplies and Equipment Emergency Plan • Insurance Carrier contact details are included in Appendix B: External Stakeholder Consultation Table in the Emergency Planning Stakeholder Consultation Plan



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	<ul style="list-style-type: none">• Contact information for response personnel such as plumbers, restoration contractors and management maintained by Supervisor, LTC Maintenance & Security and Contracts and Procurement• Related Home Policies: Emergency Planning Policies and Procedures; Mandatory and Critical Incident Reporting Policy and Procedures; Manufacturers Manuals; Maintenance Policies; Long-Term Care Infection Prevention & Control Construction & Renovation; and Red Tag Permit System Policy and Procedures• LTC Emergency Preparedness Manual		
Policy Contact	Senior Program Analyst	Review Period	Annually