

### Chemical Spills Emergency Plan – CODE BROWN (Policy and Procedures)

Manual	Emergency Plans – Module 3	Policy Number	EM-03.08 (v.1.10)
Applies to	All Long-Term Care Staff, Students and Volunteers		
Effective Date	November 22, 2022	Replaces	N/A

**PURPOSE:** The policy provides guidelines for staff to respond, manage and clean up a chemical spill to ensure the safety and security of residents, staff members, volunteers and visitors in the Homes

#### **DEFINITIONS:**

CODE BROWN	A term that alerts staff to an accidental release of a hazardous or potentially hazardous material	
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	
Small/Minor Spill	A small/minor spill is supported by an in-house facility response. These types of spills involve materials that pose minimal or no risk to individuals, and the performance of clean-up and disposal procedures is within the scope of staff knowledge and capability	
Large/Major Spill	A large/major spill cannot be supported by an in-house facility response either due to the size of the spill or because the materials pose a clear and present danger to individuals, or the performance of clean-up and disposal procedures is outside the scope of staff knowledge and capability	
Staff	Means a person who works at the Home either:	
	(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	
	(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.	



(c) At the Home due to a contract or agreement between the Region/Home and an employment agency or other third party. This includes agency staff (including those who may not provide direct care to residents)

**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

**POLICY:** The key requirements of this policy are:

- 1. The Chemical Spill Emergency Plan (CODE BROWN) MUST be activated by any staff member, student or volunteer:
  - Upon discovery of a chemical spill anywhere onsite (inside the Home or outside on the grounds of the Home)
- 2. All staff have a duty to support and respond to a CODE BROWN
- Equipment and Supplies: The Homes will ensure staff have access to resources, supplies, personal protective equipment, and equipment to adequately respond to a CODE BROWN
- 4. **Communications:** The Homes will be equipped with an effective public address system for announcing **CODE BROWN** to those in the Home
- 5. **Reporting:** The Home must report a critical incident that presents an emergency to the Ministry of Long-Term Care immediately
- 6. Education and Training: All staff, students and volunteers will be provided with education and training on the Chemical Spill Emergency Plan (CODE BROWN) at orientation and annually thereafter

**Note:** For CODE BROWN 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 BROWN
- **B. During a CODE BROWN**
- C. Ending a CODE BROWN
- D. Post CODE BROWN Procedures and Documentation



#### A. Activating and responding to a CODE BROWN

#### The staff member who identified the spill will:

- Assess the situation to identify and determine:
  - The chemical substance, if feasible
  - Size of spill
  - Level of risk to self and others
  - Appropriate equipment, personal protective equipment (PPE) and spill materials, as required by Safety Data Sheets (SDS)

**Note:** Safety Data Sheets are available through an online system **and** hardcopies in each program area (e.g., a binder in dietary, a binder in environmental)

 Follow the procedures included the Spill Response Plan (Appendix A) and notify the Charge Nurse (or designate on-call Manager) immediately

Note: Spill kits are in the receiving area at each Home. See Appendix B: General Emergency Kit List in the Resources, PPE, Supplies and Equipment Emergency Plan

Attend to anyone who may be injured or contaminated by the spill

#### The Charge Nurse (or designate) will:

- Take command of the emergency and upon notification of incident/injury, ensure care is provided
- If the spill is large/major:
  - Announce the following statement three times using the public address system:
    - "CODE BROWN (Home Area, floor number, room number)"
  - Notify the Administrator (during business hours) or the Manager-on-Call (after hours)

**Note:** CODE BROWN will not be called for small/minor spills. See **Environmental Services Program policies and procedures** 

### 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** 

#### B. During a CODE BROWN



#### The staff member who identified the manageable spill will:

 Continue to contain the spill using the spill kit and procedures in the Spill Response Plan (Appendix A)

#### The Charge Nurse (or designate) will:

- Ensure Safety Data Sheets available and used to ensure appropriate spill response and PPE use. See Appendix A: Spill Response Plan
- Upon notification of incident/injury of employees, request that the employee's supervisor follow the employee incident / injury process. See <u>Incident and</u> 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

#### C. Ending a CODE BROWN

#### For a large/major spill, the Charge Nurse (or designate) will:

- Declare the CODE BROWN over when the spill no longer poses a risk to the safety of those who live and work at the Home
- Delegate a staff member to announce the following statement three times over the public address system:

#### "CODE BROWN, All Clear"

**Note:** Once a **CODE BROWN** has been declared over, normal operations resume

 Notify the Administrator (during business hours) or the Manager-on-Call (after hours)

#### D. Post CODE BROWN Procedures and Documentation

#### The Charge Nurse (or designate) will:

- Report any incidents involving visitors and other members of the public using the Bodily Injury Reporting Form
- Ensure any actions identified in the **Spill Response Plan (Appendix A)** are complete
- Ensure all emergency response equipment is replenished after a CODE BROWN ends. See Appendix A: Spill Response Plan
- Conduct debrief(s) and other actions as required by the Long-Term Care Emergency Recovery Plan



**Note:** The Spill Reporting Form must be included as part of the debrief

• For a large/major spill, notify the Administrator (or designate) (during business hours) or the Manager-on-Call (after hours)

#### 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:
  - o 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 Homes' incident reporting 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	Be familiar with the properties and hazards of the materials in use at the Homes (includes reviewing Safety Data Sheets)	
	Be familiar with emergency response procedure, contact number and location of eyewash station, emergency exits and evacuation procedure	



	Report and support a CODE BROWN, if required	
Individual who identified the spill	Complete actions identified in the Spill Response Plan     (Appendix A)	
Manager of Production and Support Services or those responsible for purchasing supplies/chemicals	<ul> <li>Ensure safety data sheets (SDS) available at Homes</li> <li>Ensure appropriate resources, supplies, PPE and equipment as prescribed by the safety data sheet (SDS) are 1) available in the spill kit required in by the Spill Response Plan (Appendix A) and 2) located readily accessible location</li> </ul>	
Charge Nurse (or designate)	Complete actions as required by the Spill Response Plan     (Appendix A)	
	Complete actions as required by the Long-Term Care Emergency Recovery Plan	
Administrator (during business hours) or the Manager-on-Call (after hours)	Following consultation with the Director of Seniors Services, activate the Incident Management System (IMS) for large/Major spills and deactivate when emergency is over	
Emergency and	Provide education and training on Emergency Plans	
Contingency Planning Specialist	Complete After-Action Review (AAR) as required by the Long-Term Care Emergency Recovery Plan	
Education and Wellbeing Team	Ensure supports are in place for those who experienced distress. See Appendix D: Suggested Support Resources in Emergency Recovery Plan (Policy and Procedures)	
	Maintain staff records of education and training	
Joint Health and Safety Committee	Where required, a Joint Health and Safety Committee     Worker member can assist in the investigation of the spill	
	<ul> <li>Review incident findings and provide recommendations on appropriate follow-up based on developing trends and root cause(s)</li> </ul>	
Authority	Fixing Long-Term Care Act, 2021 s. 82(2)8 and 90; General Regulation 246/22 s. 20, 115, 263(2)2, 268, 270, 271(1)f and 273; CARF Aging Services Standards; and York Region Seniors Services Administration	



Related Resources	<ul> <li>Appendix A: Spill Response Plan</li> <li>Related Home Policies: Emergency Planning Policies and Procedures; Mandatory and Critical Incident Reporting Policy and Procedures; Environmental Services Program policies and procedures; and Training and Orientation Program Policies and Procedures</li> </ul>		
	Related Regional Policies: Workplace Hazardous Material Information System (WHMIS); Incident and Concern Report Post Exposure Protocol Process; First Aid Program; Transportation of Injured Worker Program; Preventing and Managing Violence in the Workplace Process Guide; and Property Services Branch General Spill Response Procedur  LTC Emergency Preparedness Manual		
Policy Contact	Senior Program Analyst Review Period Annually		