



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

Bomb Threat Emergency Plan – CODE BLACK (Policy and Procedures)

Manual	Emergency Management – Module 3	Policy Number	EM-03.06 (v.1.11)
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 and manage to a bomb threat (includes a suspicious object) to ensure the safety and security of residents, staff members, volunteers and visitors in the Homes

DEFINITIONS:

CODE BLACK	A term that alerts staff that a bomb threat has been received or a suspicious package has been found for which ownership cannot be identified
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
Suspicious Object	A suspicious object can be considered an unattended item (such as a bag, package, vehicle, etc.) of unknown origin with contents that could reasonably contain a bomb. Staff should watch for any item that is hidden or not typically found in the facility, and/or has unexplainable wires, electronics, unusual sounds or odours (this includes any packages that are delivered to the Home via courier)
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

	<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>
--	---

POLICY: The key requirements of this policy are:

1. To ensure the safety of those who live and work at the Homes, **all bomb threats and unidentified suspicious objects** shall be treated as **real and serious threats** that requires immediate attention
2. The **Bomb Threat Emergency Plan (CODE BLACK) MUST** be **activated** by **any** staff member, student or volunteer:
 - When a bomb threat is received (by phone, email, letter, or verbally), **OR**
 - A suspicious package is found at the Home for which ownership cannot be identified
3. All staff have a duty to support and respond to a **CODE BLACK**
4. **Equipment and Supplies:** The Homes will ensure staff have access to resources, supplies, personal protective equipment, and equipment to adequately respond to a **CODE BLACK**
5. **Communications:** The Homes will be equipped with an effective public address system for announcing **CODE BLACK** to those in the Home

Note: To avoid alarming residents and visitors, bomb threats or the identification of suspicious packages will only be referred to using the phrase “CODE BLACK” when communicating with others
6. **Reporting:** The Home must report a critical incident that presents an emergency to the Ministry of Long-Term Care immediately
7. **Education and Training:** All staff, students and volunteers will be provided with education and training on the **Bomb Threat Emergency Plan (CODE BLACK)** at orientation and annually thereafter

Note: For CODE BLACK Testing and Exercise requirements, please see the **Long-Term Care Emergency Preparedness and Response Training and Exercise Plan**

- 8. All threats** (other than bomb threats) **in any form** (written, telephone call, or in-person) **MUST** be reported to the **Administrator (or designate) (during business hours) or the Manager-on-Call (after hours) immediately**

PROCEDURES: This section contains procedures for the following:

- A. Activating and responding to a CODE BLACK**
- B. During a CODE BLACK**
- C. Ending a CODE BLACK**
- D. Post CODE BLACK Procedures and Documentation**

A. Activating and responding to a CODE BLACK

1. The individual who receives a bomb threat by telephone will:

- Remain calm
- If possible, make a second person aware of the call on the line and have this person notify the Police by dialing “8-911” immediately
- As a minimum, try to get the caller to tell you:
 - Where is it now?
 - When is it going to explode?
 - What does it look like?
 - What kind of bomb is it?
 - Why did you place the bomb?
 - Where are you calling from?
 - What is your name?
- Try to keep the caller on the line as long as possible to support attempts to trace the call. **Do not ridicule the caller**

Note: If the caller is still on the line when the police arrive at the Home, the police will attempt to take over the call
- After the call, complete the **Code Black Form – Telephone Threat (Appendix B)** to record details of the conversation
- When the call is over, contact the Charge Nurse using **another phone** and notify them of the situation

Note: Do not use the same phone used during the bomb threat until the phone is cleared for use by the Police. If you have a remote phone, keep it with you. If it is a desk phone put a sticky note (DO NOT USE)

Note: Staff may continue to use other cell phones or portable radios during a **CODE BLACK**

2. The individual who receives a bomb threat in writing will:

- Contact the Charge Nurse immediately. If it is a handwritten note, handle it as little as possible (to prevent forensic contamination). If it is an email, **do not** delete the message

3. The individual who identifies a suspicious object will:

- Contact the Charge Nurse immediately
- Avoid alarming residents or visitors
- Never touch it and keep others away from it

The Charge Nurse (or designate) will:

- Call “8-911” and contact the police (if not already done so) and provide the operator with as much detail as possible
- Notify the Administrator (during business hours) or the Manager-on-Call (after hours)
- Delegate a staff member to:
 - Wait for the Police at the entrance to the Home and escort them to the location of the incident (e.g., where the call was received)
 - Retrieve the Home’s floor plans from the General Emergency Response Kit. See **Resources, Supplies, PPE and Equipment Emergency Plan**
- Request the Administrator (or designate) to access and review any surveillance camera footage (CCTV) at the Home. See **Long-Term Care Home Closed Circuit Television (CCTV) Use**

The Administrator (or designate) will:

- Access and review any surveillance camera footage (CCTV) at the Home.

Note: Only the System Administrator (Supervisor, LTC Maintenance and Security) and System Operators (Administrator, Director of Care and Manager, Production and Support Services) can access video footage. See **Long-Term Care Home Closed Circuit Television (CCTV) Use**

B. During a CODE BLACK

The Charge Nurse (or delegate) will:

- Take command of the emergency until the Police arrive on site
Note: The Police will establish a command centre, determine the need to announce a CODE BLACK using the public address system, what to communicate to staff and any other actions required
- Upon notification of incident/injury of **employees**, request that 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 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**
- Follow direction from the Police on whether to evacuate all or part of the Home. See **Evacuation Plan – CODE GREEN (Policy and Procedures)**

All staff, students and volunteers will:

- Take a quick look for any objects that may be out of place
- Assist the police in their investigation and follow their direction
- Keep residents calm and hallways clear
- Keep everyone away from the suspicious object

C. Ending a CODE BLACK

The Charge Nurse (or designate) will:

- Declare the **CODE BLACK** over when there is no longer a threat
- Delegate a staff member to announce the following statement **three times** over the public address system:

“CODE BLACK. All clear”

Note: once a **CODE BLACK** has been declared over, normal operations resume

D. Post CODE BLACK Procedures and Documentation

The Charge Nurse (or designate) will:

- Ensure all emergency response equipment taken from the General Emergency Response Kit is replenished and cleaned. See **Resources, Supplies, PPE and Equipment Emergency Plan**
- Report any incidents/injuries involving 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**
- Update the Administrator (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 of Seniors Services
 - Deactivate the Incident Management System (IMS), if activated
 - Notify the Education and Wellbeing Team to ensure staff supports in place for those who experienced distress. See **Appendix D: 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
------	------------------



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

All staff, students and volunteers	<ul style="list-style-type: none"> Complete a Code Black Form – Telephone Threat (Appendix A), if required
Administrator (during business hours) or the Manager-on-Call (after hours)	<ul style="list-style-type: none"> Access CCTV footage, as required Following consultation with the Director of Seniors Services, activate and/or deactivate the Incident Management System (IMS)
Director of Care (or designate)	<ul style="list-style-type: none"> Initiate Mandatory Critical Incident System Report
Charge Nurse (or designate)	<ul style="list-style-type: none"> Assume command of a CODE BLACK until the Police arrive at the Home Ensure completion of a Code Black Form – Telephone Threat (Appendix A), if required
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 Support Resources in Emergency Recovery Plan (Policy and Procedures) Maintain staff records of education and training

Authority	<i>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</i>		
Related Resources	<ul style="list-style-type: none"> Appendix A: Code Black Form – Telephone Threat Related Home Policies: Emergency Planning Policies and Procedures; Mandatory and Critical Incident Reporting Policy and Procedures; and Long-Term Care Home Closed Circuit Television (CCTV) Use LTC Emergency Preparedness Manual 		
Policy Contact	Senior Program Analyst	Review Period	Annually