

<b>Manual:</b> Emergency	Approved by: Administrator	Category: Code Black	<b>EMERG - I - 08</b>
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Reviewed: Dec/23			

## POLICY

### GOAL

The purpose of the Code Black Plan<sup>i</sup> is to protect residents, staff and other persons in the Home, in the event of a bomb threat, or potentially explosive device, through standardized procedures for receiving the threat and searching the premises.<sup>ii</sup>

### INTRODUCTION

**Code Black** is called when Bob Rumball Home for the Deaf (BRHD) receives a bomb threat.

Bomb threats are usually received by **telephone** or sometimes by note or **letter**.

Most bomb threats are made by **callers** who want to create an atmosphere of general anxiety and panic, but all such calls must be taken seriously and the emergency<sup>iii</sup> handled as though there is an explosive device in the building.

Code Black also includes the discovering of a **suspicious object/package** in the Home that is suspected of being an explosive device because it is out of place or unusual for that location and cannot be accounted for, or because a threat has been received.<sup>iv</sup>

The Administrator/designate is responsible to ensure that:

- The **Code Black Plan is tested** at least **every three years**,<sup>v</sup> including arrangements with the entities, e.g., Police, that may be involved in or provide emergency services to BRHD; and
- The **Plan is evaluated** and updated, including the updating of all emergency contact information of the entities:
  - (a) at least **annually**, and
  - (b) **within 30 days** of the **Code Black** emergency being activated and declared over.<sup>vi</sup>

### MOCK EMERGENCY TEST

If conducting a **MOCK EMERGENCY TEST**, you **must notify the appropriate emergency external entities** at least 24 hours **PRIOR** to conducting the Mock Test, e.g., **Barrie Police** 705--725-7025. The emergency entities/entity will inquire as to the details (e.g., time, type of test, other external entities involved, e.g., **Fire** – 705-728-3131, **Ambulance** – 705-726-8103, as appropriate.

### CONSULTATION AND UPDATING OF THE EMERGENCY PLAN <sup>vii</sup>

The following will be involved in the consultation and updating of the Code Black emergency Plan:

- BRHD staff, including the registered nursing staff, and managers
- The Residents' Council (RC) and the Family Council (FC), if any, and
- The relevant external entity/entities. The external entity that would be involved in or provide emergency services related to Code Black would be the Police (through 911), to assist with finding and handling the bomb or suspicious object/package.<sup>viii</sup>

Any changes to the Code Black "Plan" will be identified and the following notified of the changes:

- The staff, volunteers and students
- The RC and FC if any, by bringing the updates to their respective meetings
- The entities, by providing a copy of the updated emergency plan for their review and feedback.<sup>ix</sup>

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**Record Retention:** BRHD will keep a record of the testing of all emergency plans, and the planned evacuation if required for the emergency; of changes made to improve the plans;<sup>x</sup> consultations, and the current contact information for relevant entities that may be involved in the emergency plans.<sup>xi</sup>

**Location of Emergency Manual:** A copy of the Code Black Plan is available in the BRHD's Emergency Manual located in the front vestibule, and in each Care Centre (CC). In addition, BRHD's emergency plans are located in the Home's computer system on the S drive, and on the BRHD website. Physical copies of the plan are made available upon request.<sup>xii</sup>

**Hazards That May Give Rise to The Emergency** <sup>xiii</sup>

- The BRHD internal building is accessible to residents, staff, volunteers, students, and visitors 24/7, except during exceptional circumstances, e.g., outbreaks, etc.
  - Upon request, a stranger may be let into the Home, by any person who has access to the Home.
- The front vestibule mail and packages are delivered regularly, and may be left in the front lobby.
- Person may not have knowledge about what may be considered a suspicious object/package.

**Measures to Minimize the Risk of a Bomb Threat**

- BRHD has "Fob" access passes for staff, volunteers, students, visitors and residents who require access to the Home. The Fob passes are programmed to allow access only to specific areas of the Home depending on the individual's access requirements.
- All persons are reminded to not let persons in without checking with staff.
  - Staff are available 24/7.
- Mail and packages are left in the front vestibule area and brought in by staff.
  - Mail is opened by the Administrative Assistant/designate, trained to be aware of suspicious objects/packages.
  - Refer to Appendix B for Information on "**suspicious packages**" that may be a threat. <sup>xiv</sup>
- BRHD has cameras/video monitoring throughout the Home, including at the front vestibule/entrance area.

**Note:** Post Appendix A (Part A) "Telephone Bomb Threat Questions & Checklists near the land line phones on CC1, CC2 and Reception area.

**EMERGENCY SUPPLIES and EQUIPMENT:** <sup>xv</sup>

- This Plan, and emergency contact numbers, in the Emergency Manual binder.
- Command Centre Bag located at the reception with:
  - The **Code Black folder will contain a copy of this Plan,**
  - **2 copies of the search grid lists (#1-5);**
  - 2 copies of the **Fire Zones (Appendix C);**
  - **signage** for the front door "**Emergency. Do not enter unless authorized to do so.**"
  - pens, clip boards, flashlights, etc.

**Note:** *The following roles and responsibilities are written in response to a person receiving a bomb threat by a phone call. However, an individual who observes or receives a suspicious letter or package and is concerned it poses a threat, should notify the Administrator/designate immediately. Follow the Code Black roles and responsibilities as outlined, with the understanding that modifications may need to occur depending on the circumstances.*

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## ACTIVATION OF THE PLAN <sup>xvi</sup> \*

The person who receives the bomb threat, or discovers a suspicious package **initiates the Code Black Plan.**

## ROLES AND RESPONSIBILITIES

### General Information during the Emergency

- Staff are not allowed to leave the building unless directed to do so by the FIW or Police
- Signage will be used to prevent unauthorized persons from entering the Home during the emergency.
- Staff should not be making or receiving personal phone calls until the emergency is clear.
- Only the Administrator/designate should speak with the media. Direct all inquiries about the Code Black to the Administrator/designate, who will liaise with the Police prior to releasing information.

### Person Receiving the Bomb Threat – by Phone

- **Remain Calm.**
  - Keep the caller talking as long as possible.
- Ask questions as per “**Telephone Bomb Threat Questions & Checklist**” (*Appendix A- Part A*)
  - Follow directions as outlined
  - **While talking with the caller, if possible, ask a designate, e.g., by writing a note, to call 911.**
- If unable to designate a person to call 911 (e.g., by note) while on the phone with the caller, immediately following the conversation with the caller - **call 911.**
  - Avoid alarming residents
- Complete the **Bomb Threat Form** (*Appendix A- Part B*)
- Inform Administrator/ designate, e.g., manager-on-call.
  - If designate, ask them to **inform the Administrator.**
- **Designate a staff member** to announce “**Code Black**” x 3 (*Do NOT indicate “Bomb Threat”*) state “**Front Lobby**” as the location, unless that area is deemed unsuitable.
  - Direct the same designated staff member to go to Front Lobby:
    - Retrieve the Command Centre Bag from reception; and
    - Stay at the front entrance to meet Police. <sup>xvii</sup>
- Go to the Front Lobby and **update Police** and Fire Incident Warden (FIW) who would have also gone to the Front Lobby.
  - Follow directions of the Police

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**Designated Person to announce Code Black** (if requested/designated by the person who is on the line with the caller about a bomb threat)

- Announce “**Code Black**” x 3 (Do **NOT** indicate “**Bomb Threat**”) state “**Front Lobby**” as the location, unless that area is deemed unsuitable.
  - Go to Front Lobby:
    - Retrieve the Command Centre Bag from reception; and
    - Stay at the front entrance to meet Police.

**FIW** (The most senior nurse on the Care Centre)

- Upon hearing the announcement, **obtain the Master Key** from either CC1/CC2 med room.
- Direct a staff member to ensure **communication** of the Code Black threat to **staff who are deaf**, using American Sign Language (ASL), face to face, pager, etc.
- Ensure that **at least one staff member stays on each Care Centre**
- **Go to Front Lobby:**
  - Access the Code Black folder from the Command Centre Bag
  - Obtain an **update from the person receiving the bomb threat** (Copy checklist and form x2, once completed by the person receiving the bomb threat, if possible.)
  - Post **signage**, “Emergency. Do not enter unless authorized to do so.”
  - **Meet Police and follow their direction.**
    - If waiting for Police, arrange 4 search parties (One for each care unit).

**Note:** If the **Administrator or designate is on-site, they will take over as FIW.**

- As directed by the **Police, conduct the search for the bomb/suspicious package.**

**Note:** Staff are in the best position to identify an unusual package or something that is not normally found in that area.

  - Several persons/search parties may be asked to assist.
  - If the caller identified a specific location, search that area first.
  - Use the **Fire Zones map** (Appendix C) as a guide when conducting the search. The Command Centre Bag will also contain detailed search grid lists (#1-5), as needed.
  - Ensure that instruction is given as to what the person should do if they find the bomb or a suspicious package.

**If the bomb or suspicious package is found:**

- Do not touch.
- Report finding to the Police, and
- Ensure that no one goes near the bomb/suspicious object
- Make every effort to find the owners of the package and ask if it was left in error.
- Direct staff to move residents and others away from the area.

**If the bomb or suspicious package is NOT found:**

- FIW to **follow the advice of the Police**, which may include
  - calling off the search,
  - conducting another search, or
  - **evacuating** the area or building
- If an **evacuation** is required, initiate **Code Green – Evacuation Plan.** <sup>xviii</sup>

**Note:** Notify the Administrator of Code Green and the need to commence the “fan out”.
- Refer to the section below title “**Activities after the Emergency is Declared Over**” When the Police indicate it is safe to declare the emergency over.

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### Administrator/designate

- Ensure the Administrator, if off-site, is informed of the Code Black
- If Administrator or designate is **on-site**, go to the Front Lobby, (or location as per the announcement) and **take over as FIW**, since the Police will need to be accompanied on the search. (*Follow FIW responsibilities as above.*)
- Refer to the section below title “**Activities after the Emergency is Declared Over**” When the Police indicate it is safe to declare the emergency over.

### All other staff

- At least one nursing staff member needs to stay on each Care Centre
- All other staff, go to the Front Lobby
- Take direction from the FIW and /or Police.

### Students

- Assist by staying with residents **in a safe area**, as directed by the FIW/designate

### Visitors and Volunteers

- Have the choice to either:
  - leave the building, or
  - stay with the resident **in a safe area**, as directed.

## ACTIVITIES AFTER THE EMERGENCY IS DECLARED OVER

The Police will declare the emergency over. <sup>xix</sup>

### FIW / Administrator/designate:

- After the **Police** declare the emergency over, designate a staff member to announce “**Code Black, All Clear**” three times. <sup>xx</sup>
- Designate a staff member to immediately notify **MLTC** of the Code Black emergency, followed by a Critical Incident System (**CIS**) report <sup>xxi</sup>  
*Note: Additional Mandatory and/or Critical Incident reporting may be necessary depending on the circumstances and outcome of the emergency. Please refer to the FLTCA s.28, and O. Reg. 246//22 s.115 for more details.*
- As soon as possible after the emergency is declared over, conduct an **evaluation** of the Code Black emergency. Use the ‘**Code Black/Bomb Threat Test Report**’ *Appendix D*) template as a guide to obtain the required information. Complete the report to the extent possible.
  - Invite the following persons to participate in the evaluation discussion and ensure the information reflects the accurate details of the event, feedback from those involved, and potential areas of improvement:
    - Person who received the threat; on-site managers, representatives from the staff, students, volunteers, and any entities, <sup>xxii</sup> e.g., Police, involved in the search, if available.

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- Determine what equipment and supplies were used, and assign staff to replace, disinfect, and/or return, as appropriate, to their normal location.<sup>xxiii</sup>
- Ensure the Master Key from the applicable CC med room, if used, is placed in a new sealed envelope, and returned.
- Forward a copy of the completed “**Code Black/Bomb Threat Test Report**” (*Appendix D*) to the Administrator, if the Administrator is not onsite at the meeting.

**The Administrator will:**

- Ensure the MLTC was immediately notified and the CIS report, submitted as required.
- Ensure notification of WSIB and MOL, if staff injury, and other entities, as applicable.
- Review the ‘**Code Black/Bomb Threat Test Report**’ to follow-up on any outstanding issues, and ensure documentation is completed as required.
  - If any external entities (e.g., Police) were involved in an emergency response, ensure the entities, and the RC, and FC, if any, are provided an opportunity to offer feedback, if their representative was unable to attend the post emergency evaluation discussion.<sup>xxiv</sup>
- Review of the Code Black **Plan** (EMERG-I-08), and add any recommendations for change to the Plan, to the written recommendations for improvement as outlined in the ‘**Code Black/Bomb Threat Test Report**’
- Bring all **recommendations for improvement** of the Code Black Plan to the Management Team meeting for discussion and determine which recommendations for improvement are approved or rejected. Record decisions on the ‘Code Black/Bomb Threat Test Report’.
- Administrator/designate must update the Code Black Plan, with any approved recommendations for improvement, within 30 days after the event was declared over.<sup>xxv</sup>  
**Note:** *If any changes were made to improve the plan, maintain a written record of the changes made.*<sup>xxvi</sup>
- Address the **recovery** from the Emergency: <sup>xxvii</sup>
  - **Debrief** the residents, their SDMs, if any, staff, volunteers, and students after the emergency, as appropriate, e.g., the fact that the Emergency Plan was tested (mock or actual), and the recovery, i.e., recommendations for improvement, changes to be implemented. Maintain a written record of the debrief.
  - **Resume normal operations** of the Home.
  - Determine if anyone experienced **distress** during the emergency, and if so, ensure that the person is provided with an opportunity to discuss their concerns and/or given appropriate emotional support.<sup>xxviii</sup> BRHD has an EAP, for eligible staff.
- Arrange for staff **training/retraining** to be updated and conducted, as required. (*Refer to the sections below.*)
- Complete the “**Administrator Checklist for Code Black/Bomb Threat**”, (*Appendix E*), as outlined.

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**TRAINING – Emergency Plan** <sup>xxix</sup>

- BRHD staff, volunteers, and students will receive training on emergency plans during their orientation, and at least **annually** thereafter. <sup>xxx xxxi</sup>
- The training will be based on that staff member’s responsibilities, prior to that person performing his/her responsibilities. <sup>xxxii</sup>

**Note:** *In the event of an emergency or exceptional unforeseen circumstances, e.g., the new employee is being orientated on-site with another employee, the emergency training must be provided within one week of when the person begins performing their responsibilities.* <sup>xxxiii</sup>

**STAFF RETRAINING**

- All staff will receive annual retraining / reassessment on the Emergency Plan through Surge Learning and related Qs and As. <sup>xxxiv xxxv</sup> If staff at that time, or at any time are assessed as requiring further retraining, this will be done by the employee’s supervisor in a manner considered appropriate, e.g., repeating the training, 1:1 etc.. <sup>xxxvi</sup>
- During the annual testing of the emergency procedure, any staff assessed as requiring further training will be retrained, based on his/her responsibilities during the emergency procedure. <sup>xxxvii</sup>

**APPENDICES**

- Appendix A: .....** Part A ~ **Telephone Bomb Threat Questions & Checklist** \* (1 copy)  
Part B ~ **Bomb Threat Form** \* (1 copy)
- Appendix B: .....** **Suspicious Packages**
- Appendix C: .....** **Fire Zones** (Search Grid Lists are in Command Centre Bag)
- Appendix D: .....** **Code Black / Bomb Threat Test Report**
- Appendix E: .....** **Administrator Checklist for Code Black / Bomb Threat**

\* Please make the # of copies of the Appendices, as identified for the Command Centre Bag. In addition, please make one copy of the “Activation of the Plan” section in this plan (pages 3-5 inclusive) for the Command Centre Bag Code Black (EMERG-I-08) folder.

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**Appendix A (Part A): Telephone Bomb Threat Questions & Checklist**

**Please ~ REMAIN CALM**

*Attempt to get the answers to the questions*

**DO NOT HANG UP THE PHONE UNTIL THEY DO.**

*\*Try to attract the attention of a colleague to call **911** and have the call traced.*

**Questions to ask the Caller:**

1. **Where is the bomb located? Inside? \_\_\_ Outside? \_\_\_\_\_**
  - **What part of the building? \_\_\_\_\_**
2. **When is the bomb going to explode? \_\_\_\_\_**
  - **What will set it off? \_\_\_\_\_**
3. **What does the bomb look like? \_\_\_\_\_**
  - **What kind of bomb is it? \_\_\_\_\_**
4. **Why did you place a bomb at this Home? \_\_\_\_\_**
5. **Where are you calling from? \_\_\_\_\_**
6. **What is your name? \_\_\_\_\_**

*Try to keep the caller on the line as long as possible, e.g., ask them to repeat themselves, or indicate you are having trouble understanding them.*

**AFTER THE PHONE CALL ENDS**

Immediately:

- If 911 has not yet been called, **Call 911**
- Avoid alarming the residents.
- Complete the **Bomb Threat Form** (below / Part B)
- Inform Administrator/ manager-on-call. If designate, ask them to inform the Administrator.
- Designate a staff member to announce "**Code Black**" x 3 (*Do NOT indicate "Bomb Threat"*) state "**Front Lobby**" as the location, unless that area is deemed unsuitable.
  - Direct the same designated staff member to go to Front Lobby:
    - Retrieve the command centre bag from reception; and
    - Stay at the front entrance to meet Police.



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**Appendix A (Part B): Bomb Threat Form**  
*Complete as much as possible, as quickly as possible.*

**Date:** \_\_\_\_\_ **Time Call Received:** \_\_\_\_\_ **Time Call Ended:** \_\_\_\_\_

**Name of staff / person receiving the call:** \_\_\_\_\_

**What were the Caller's exact words?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Did the caller use unusual phrases?** \_\_\_\_\_

**Is the voice familiar?** \_\_\_\_\_

**Did the caller indicate knowledge of the facility? \_\_\_ If so, how?** \_\_\_\_\_

**Was the # identified on call display?** \_\_\_\_\_

**What line did the caller call in on?** \_\_\_\_\_

**Description of the Caller's Voice (Check all that apply)**

Male	Female	Unsure Gender	Adult	Child	Unsure Age	Voice: loud ___ soft ___
Nervous	Rude	Calm	Emotional	Accent	Well Spoken	Speech: fast ___ slow ___

**Comments:** \_\_\_\_\_

**Background Noise (Check all that apply)**

Music	Running Motor	Traffic	Bells Whistles	People
Silent	Aircraft	PA system	Machinery	Other (describe)

*The person receiving the call must be available for interview by the Administrator / designate and the Police.*

**After completing the form,** go to the Front Lobby to update Police and follow their direction.

**If you find a suspicious package:**

- Do not touch.
- Report finding to the Police, and
- Ensure that no one goes near the bomb/suspicious object
- Make every effort to find the owners of the package and ask if it was left in error.
- Secure the area, i.e., direct staff to move residents and others away from the area.

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## Appendix B: Suspicious Packages <sup>xxxviii</sup>

Suspicious packages could be delivered to BRHD or the residents, so it is good practice to be vigilant and aware of what to do. You know what kind of mail and packages are usually received. Look for things that are out of the ordinary, such as unexpected mail from a foreign country.

The following might help in identifying a suspicious package:

- Unfamiliar return address or none at all
- Strange odour or noise
- Protruding wires
- Excessive postage
- Misspelled words
- Addressed to a business title only (e.g., President)
- Restrictive markings (e.g., Do not X-ray)
- Badly typed or written
- Rigid or bulky letters
- Lopsided or uneven
- Excessive wrapping, tape or string
- Oily stains, discolouration or crystallization on wrapping
- Leaking

### The contents of a letter or package may cause concern if:

- You see powder or a liquid.
- It contains a threatening note.
- It contains an object that you did not expect to receive or cannot identify.

### If you are worried about a package or letter you have received:

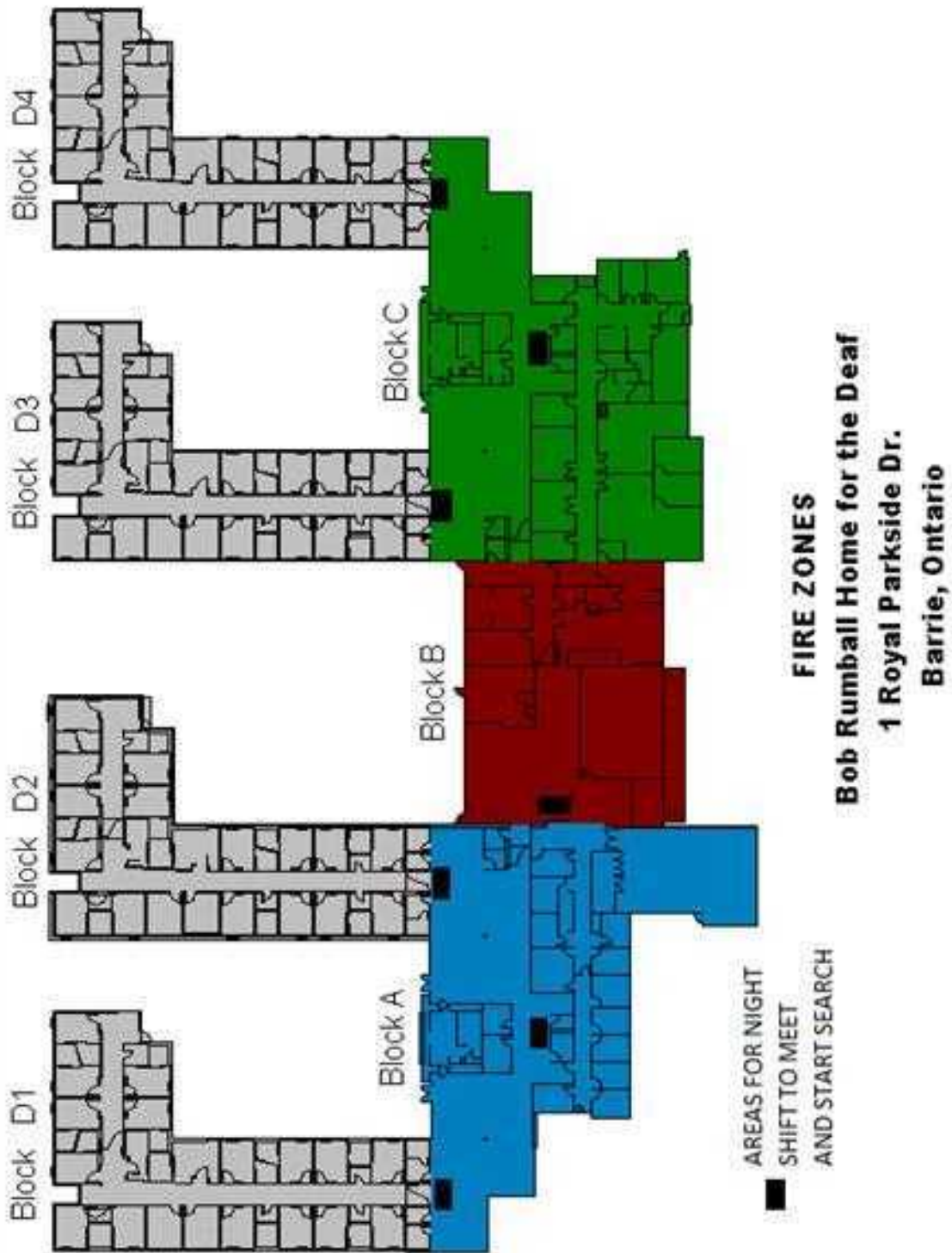
- Do not handle, shake, smell or taste it.
- Leave the letter or package where it is.
- Get everyone out of the room and close the door; or if an open area, move to a safe area.
- Call 9-1-1
- Wash your hands with soap and water.
- Notify the Administrator/designate
- Announce "Code Black" 3 times over the pager system., and identify a safe location area for the Fire incident Warden (FIW) to meet, e.g., "Front Lobby". (*This will activate Code Black*)
- Wait in the safe location until the Police arrive.

### If you have opened a suspicious package:

- Leave the package where it is.
- Remove any clothing that has powder or liquid on it and seal it in a plastic bag.
- Get everyone out of the room and close the door; or if an open area, move to a safe area.
- Wash your hands with soap and water.
- Call 9-1-1
- Notify the Administrator/designate
- Announce "Code Black" 3 times over the pager system., and identify a safe location area for the FIW to meet, e.g., "Front Lobby". (*This will activate Code Black*)
- Wait in the safe location until the Police arrive; and
- Follow the direction of the FIW and/or Police

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**Appendix C: Fire Zones** (Detailed Search Grid Lists are in Command Centre Bag)



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**Appendix D: Code Black/Bomb Threat Test Report**

**TEST: Actual Emergency (Y/N) \_\_\_\_\_; Mock Emergency (Y/N) \_\_\_\_\_** (Code Black to be tested every 3 years <sup>xxxix</sup>)

**Instructions:**

This report template is available for completion electronically. To be completed to the extent possible, by the onsite Administrator/designate and the FIW, as soon as possible after the emergency is declared over. The following additional persons **if involved** in the emergency, are encouraged to participate and provide feedback: person receiving the threat/finding the suspicious package, on-site manager(s), external entities (e.g., police),<sup>xl</sup> and representatives from involved staff, resident, and family, as appropriate.

**Attendees:**

NAME	Position		NAME	Position

List **external entities**, e.g., Police, involved, if **not** in attendance, so they can be given the opportunity for feedback:

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The following will provide a brief summary of the Code Black emergency event: (who, when, where, what, action taken, observations made, and comments for improvement)

- **For Bomb Threat** – Have the completed Appendix A (parts A and B) available for reference.

Date of emergency: \_\_\_\_\_ Time emergency started: \_\_\_\_\_

Who received the bomb threat / suspicious object/package? \_\_\_\_\_ (Name)

Was 9-1-1 called? Y/N \_\_\_\_\_ If yes, by whom? \_\_\_\_\_

Was Code Black announced? Y/N \_\_\_\_\_

Name of FIW: \_\_\_\_\_ (CC1 or CC2 nurse)

Was the Administrator notified of the Code Black? Y/N \_\_\_\_\_

Did an on-site Administrator or designate manager take over as the FIW? Y/N \_\_\_\_\_

If yes, name: \_\_\_\_\_

Was the emergency declared over by the Police? Y/N \_\_\_\_\_

- Time emergency declared over: \_\_\_\_\_ AM/PM

If the Code Black was declared at the beginning of the emergency, was the “All Clear” announced when Code Black was declared over? Y/N \_\_\_\_\_

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**Description of Emergency**

What telephone #/Ext. received the bomb threat? \_\_\_\_\_; and/or  
 Where was suspicious package found that prompted the Code Black? \_\_\_\_\_

**Describe what happened**

Description of the caller as /Appendix A, or what the suspicious package looked like: \_\_\_\_\_

What action was taken, (e.g., Police arrived; search conducted, area secured around bomb or suspicious package, etc.)

Was the bomb found? Y/N \_\_\_\_\_ If yes, where? \_\_\_\_\_

Was a horizontal (area) or total (building) evacuation required? Y/N \_\_\_\_\_ If a total evacuation was required, was Code Green announced? Y/N \_\_\_\_\_

Was the bomb/suspicious package removed, if yes, how and by whom?

Did any additional persons respond to the emergency, e.g., ambulance, fire dept, etc.? Y/N \_\_\_\_\_

If yes, name(s) if known \_\_\_\_\_

**Did anyone sustain one or more injuries?** Y/N \_\_\_\_ *If yes, please complete chart below.*

<b>Name (First / Last)</b>	<b>Position - resident, staff, visitor, etc.</b>	<b>Describe Injury</b>	<b>Treatment Provided</b>

<b>What went well?</b>

<b>What didn't go well?</b>	<b>Recommendation for improvement?</b>

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**To be Notified** (If needed and not yet done, please assign if possible)

. **MLTC notified of the emergency and was a CIS report submitted?** Y/N \_\_\_\_\_

If no, assigned to: \_\_\_\_\_

. **WSIB, MLITSD?** Y/N Not applicable? \_\_\_\_\_ If required, assigned to: \_\_\_\_\_

. **Resident's POA?** Y/N Not applicable? \_\_\_\_\_ If required, assigned to: \_\_\_\_\_

. **Resident's Physician?** Y/N Not applicable? \_\_\_\_\_ If required, assigned to: \_\_\_\_\_

Do any **resident's** health records need to be updated? Y/N \_\_\_\_\_; If yes, assigned to: \_\_\_\_\_

In the chart below, list the equipment and supplies that were used during the emergency and need to be replaced/disinfected and/or returned. Identify who will complete that task.

Supplies/Equipment Used	Replace or Disinfect & Return	Assigned to:
Command Centre Bag supplies?		
Master key from CC1/CC2 med room?		

**Did any person(s) experience distress as a result of the emergency?** Y/N \_\_\_\_

If yes, list names of person(s) who experienced distress, and indicate whether emotional support was provided.

Person's name who experienced distress	Emotional Support Provided	Follow-through required

Signature of FIW: \_\_\_\_\_

Signature of the Administrator/designate completing the report: \_\_\_\_\_

**Ensure this report and supporting documentation are forwarded to the Administrator, if Administrator not on site.**

*The remainder of the evaluation is to be completed by the Administrator/designate.*

- Review the CIS report related to the emergency, and submitted to the MLTC.
  - Make any amendments as required.
- Does WSIB, MOL/ MLITSD, or any other government body or entity need to be notified? Y/N \_\_\_\_\_. If yes, identify who will notify which entity. \_\_\_\_\_
- Were the entities (e.g., Police) who were involved in emergency response provided an opportunity to offer feedback.<sup>xii</sup> Y/N \_\_\_\_\_. If no, who will contact them and inquire if they have any feedback?  
\_\_\_\_\_

The **Administrator** will ensure the review of the existing Code Black Plan **annually**, and discuss any recommendations for improvement **with the Management Team**. (Refer to recommendations as listed above, and any additional recommendations that were received.)

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**The following are the Authorized Recommendations for Change**

#	Authorized Recommendations for Change, including any changes to Code Black Plan, if any:	Assigned to	Date of Implementation
1.			
2.			
3.			
4.			

**Note:** Authorized changes for improvement are to be promptly implemented and documented.<sup>xlii</sup>

**The following are the Rejected Recommendations**

#	Rejected Recommendations, if any:	Reason for Rejecting the Recommendation for Change
1.		
2.		
3.		

**Code Black Plan (EMERG–I–08)**

**Within 30 days** after the test is declared over, the emergency plan must be **reviewed and updated**, if necessary, based on the authorized recommendations.<sup>xliii</sup>

If the Code Black Plan (EMERG–I–08) requires **updating**, assign to DONPC: \_\_\_\_\_.

If changes were made to the **Code Black Plan** indicate how staff, volunteers, students, RC, FC if any, and external entities were involved / informed of **changes**, and will be given any **training/retraining**, as required.

Retain all supporting documentation, e.g., completed templates, changes made to the Plan, training records, etc.

- \_\_\_\_\_ New staff / volunteers & students will review updated emergency Plan as part of their **orientation**
- \_\_\_\_\_ Existing staff **Surge Learning updated, or retraining** by alternate method e.g., memo \_\_\_\_\_
- \_\_\_\_\_ Volunteers, Students, RC, FC if any, and relevant external entities given an opportunity for feedback and **advised of changes to the emergency plan**; as available on website, & internally in Emergency Manual, as appropriate.
- \_\_\_\_\_ If changes were made to emergency Plan, the revised Plan was updated in the Home’s Emergency Manuals, and the electronic emergency Plan was sent to Fred /IT Specialist, for posting on the BRHD website and the former version of the Plan removed.

After a review of this form, is there any additional follow-through required? Y/N\_\_\_\_

- If yes, identify what other tasks need to be completed, and the assigned person to complete the task.

Tasks Need to be Completed:	Assigned to:

Retain this record as part of the Home’s quality management activities.

**Name of person(s) completing report:**

**Administrator / designate:** \_\_\_\_\_ (Print); \_\_\_\_\_ (Signature)

Ensure the Administrator has a copy of the completed evaluation.

**Date of completion:** \_\_\_\_\_ (within 30 days after the emergency was initiated).

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**Appendix E: Administrator Checklist for Code Black / Bomb Threat**

The Administrator is responsible to ensure that:

- the Code Black Plan was **TESTED** at least **every three years** (Y/N) \_\_\_\_; and
- the **Code Black “PLAN”** was **evaluated**, and **updated** as necessary:
  - (a) at least **annually**, including the updating of all emergency contact information of the entities, (Y/N) \_\_\_\_; and
  - (b) **within 30 days** of the emergency being activated and declared over.<sup>xliv</sup>

**Note:** If the Code Black Plan is changed, ensure the Emergency Manuals and the website have the most current version of the Plan.
- **The Code Black may not be tested/activated every year, but when the Code Black Plan is reviewed each year, ensure to retain the following records of the annual Code Black Plan review:**
  - date of discussion \_\_\_\_\_
  - persons in attendance for discussion: \_\_\_\_\_
  - Recommendations for Improvement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

  - If recommendations are approved identify the changes; person to make the changes in the Plan; and save the changes made to the Plan (changes in red font)
  - If recommendations for changes to the Plan are **rejected**, identify the recommendations rejected, and the reason why they were rejected. \_\_\_\_\_

\_\_\_\_\_
- The **related documentation** for all **activations** of the Code Black Plan that **occurred in the year** are completed, compiled, and retained as per the retention requirements, including but not limited to:
  - the **Code Black / Bomb Threat Test Report** (Appendix B)
    - **Note:** **Tested at least every 3 years**, but may be activated during any year.
  - the **debriefing** of staff, and volunteers and students, if any; <sup>xliv</sup>
  - any **changes made to the Code Black Plan** (when reviewed at least annually and 30 days after the emergency is activated), and
  - **when the emergency plan is changed, consultation with the entities**,<sup>xlvi</sup> e.g., ambulance services and RVH, and the RC and FC, if any, as appropriate; and
  - any related training/retraining records.

Number of **Code Black** emergencies **activated** or **tested** in the year? \_\_\_\_ (at minimum every 3 years) **Note:** Ensure that the records of the **last Code Black test**, are available on site, since it may have only been tested 3 yrs. ago.

Identify any recommendations for improvement that will be **carried over to the next year** for prompt implementation:

#	Recommendation(s) carried over to next year	Reason for implementation delay	Assigned to	Date to be Implemented
1.				
2.				

Signature of the Administrator: \_\_\_\_\_ Date: \_\_\_\_\_



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**Endnotes:**

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- <sup>i</sup> O. Reg. 246/22 s.268 (4) v.
  - <sup>ii</sup> FLTCA s.90(1).
  - <sup>iii</sup> O. Reg. 246/22 s.268(15).
  - <sup>iv</sup> Suspicious Object | Ball State University (bsu.edu)
  - <sup>v</sup> O. Reg. 246. s.268(10)(b).
  - <sup>vi</sup> O. Reg.246/22 s.268 (8).
  - <sup>vii</sup> O. Reg. 246/22 s.268 (3).
  - <sup>viii</sup> O Reg. 246/22. s.268. (4)4 and 5.
  - <sup>ix</sup> O. Reg.246/22. s.268.(9).
  - <sup>x</sup> O. Reg.246/22. s.268.(10)(d).
  - <sup>xi</sup> O. Reg.246/22 s.268 (3)(4)4 and 5.
  - <sup>xii</sup> O. Reg.246/22 s.268 (7).
  - <sup>xiii</sup> O. Reg.246/22 s.268 (3)(b).
  - <sup>xiv</sup> Suspicious packages (getprepared.gc.ca)
  - <sup>xv</sup> O Reg. 246/22. s.268. (4)3.
  - <sup>xvi</sup> O. Reg. 246. s.268(5)1.
  - <sup>xvii</sup> O. Reg. 246. s.268(6).
  - <sup>xviii</sup> O. Reg. 246. s.268(6).
  - <sup>xix</sup> O. Reg. 246. s.268(5)1.
  - <sup>xx</sup> O. Reg. 246. s.268(6).
  - <sup>xxi</sup> O. Reg. 246. s.115 (1)1.
  - <sup>xxii</sup> O. Reg.246/22. s.268.(9).
  - <sup>xxiii</sup> O. Reg.246/22. s.268.(13) (b).
  - <sup>xxiv</sup> O. Reg.246/22. s.268.(9).
  - <sup>xxv</sup> O. Reg.246/22. s.268.(8)(b).
  - <sup>xxvi</sup> O. Reg.246/22. s.268.(10) (d).
  - <sup>xxvii</sup> O. Reg.246/22. s.268.(13).
  - <sup>xxviii</sup> O. Reg.246/22. s.268.(13) (c).
  - <sup>xxix</sup> O. Reg.246/22. s.268.(14) (a)(b).
  - <sup>xxx</sup> FLTCA. s. 82(2)8; and s.82(4).
  - <sup>xxxI</sup> O. Reg.246/22. s.260.(1).
  - <sup>xxxii</sup> FLTCA s.82(6).
  - <sup>xxxiii</sup> FLTCA. s, 82(3).
  - <sup>xxxiv</sup> O. Reg.246/22. s.260.(1).
  - <sup>xxxv</sup> O. Reg.246/22. s.268.(14) (a)(b).
  - <sup>xxxvi</sup> O. Reg.246/22. s.260.(3).
  - <sup>xxxvii</sup> O. Reg.246/22. s.260.(3)(b).
  - <sup>xxxviii</sup> Suspicious packages (getprepared.gc.ca)
  - <sup>xxxix</sup> O. Reg.246/22. s.268.(10)(b).
  - <sup>xl</sup> O. Reg. 246/22 s.268(9).
  - <sup>xli</sup> O. Reg.246/22. s.268.(9).
  - <sup>xlii</sup> O. Reg. 246/22. 168.(2) 6. ii.
  - <sup>xliiii</sup> O. Reg.246/22. s.268.(8).
  - <sup>xliv</sup> O. Reg.246/22 s.268 (8).
  - <sup>xlv</sup> O. Reg.246/22 s.268 (13).
  - <sup>xlvi</sup> O. Reg.246/22. s.268.(3).