

**HANDS THEFAMILYHELPNETWORK.CA**

**EMERGENCY PLAN**

# **SECTION I**

## **INTRODUCTION**

Emergencies and disasters can occur anytime, anywhere. Some are primarily seasonal and allow for some preparations; others occur swiftly and without warning. The key to surviving an emergency is to be prepared. The following document will provide Hands TheFamilyHelpNetwork.ca with a guideline that offers precautions to take in order to ensure that staff, client and volunteer's safety is of the highest priority during emergency situations.

This outlined plan details the steps that can be taken to prepare, react to, and follow up upon emergency situations within our organization and within our community.

## SECTION II

### EMERGENCY SITUATIONS

#### EMERGENCY SITUATION GUIDELINES

When disaster strikes, people usually react in a calm and reasonable manner. To help protect yourself and others around you in an emergency situation, responding responsibly requires good common sense. Here are some helpful reminders to keep you on track.

- Follow the advice of local emergency officials.
- Listen to your radio or television for news and instructions.
- If the disaster occurs near you, check for injuries - yourself and others (tend to your own well-being first). Give **first aid** and get help for anyone seriously injured.
- If the emergency occurs at or near your workplace while you are there, check for damage using a flashlight. Do not light matches or candles or turn on electrical switches. Check for fires, fire hazards and other potential hazards.
- Sniff for gas leaks, starting at the water heater or furnace. If you smell gas or suspect a leak, turn off the main gas valve, open windows and get everyone outside quickly.
- Shut off any other damaged utilities. Notify the utility company of the problem.
- Do not use the telephone again unless it is a life-threatening emergency.
- Check on your immediate neighbours.

#### **Don't Use The Telephone**

Don't use the telephone unless it is absolutely necessary. Emergency crews will need all available lines.

## **EVACUATION PROCEDURES FOR ALL SITES**

### **IF YOU ARE REQUIRED TO EVACUATE:**

If local authorities ask you to leave your workplace, they have a good reason to make this request, and you should heed their advice immediately. Listen to your radio or television and follow the instructions of local emergency officials, keeping these simple tips in mind.

- Take your **emergency supplies kit**.
- Lock your building.
- Take a cellular telephone if you have one.
- Implement the emergency evacuation plan and have all parties meet at the place designated in your plan.
- Use travel routes specified by local authorities. Don't use shortcuts because certain areas may be impassable or dangerous.
- Stay away from downed power lines.
- If you go to an evacuation centre, sign up with the registration desk so you can be contacted or reunited with your family and loved ones.
- Contact your emergency contact to let them know what has happened, that you are ok and how to contact you.

Listen to local or provincial/territorial authorities for the most accurate information about an event in your area. Staying tuned to local radio and television and following their instructions is your safest choice.

### **If you're sure you have time:**

- Call or e-mail your family contact to tell them where you are going and when you expect to arrive.
- If instructed to do so, shut off water and electricity before leaving. Leave natural gas service 'on' unless local officials advise you otherwise. You may need gas for heating and cooking.

## **EVACUATION PROCEDURES IN CASE OF A FIRE:**

### **□ If you are in the fire area:**

- Leave the fire area and close all doors behind you. Refer to specific site location procedures.
- Telephone the Fire Department, dial **9-1-1** (never assume this has been done). Know and give correct address and location of the fire in the building.
- Activate the fire alarm (if there is one); use the pull station.
- Proceed to the nearest stairways to leave the building immediately.
- If doors are encountered on the way to an exit, feel the door for heat before opening. If not hot, brace yourself against the door and open slightly. If you feel air pressure or hot draft, close door quickly and proceed to an alternate exit.
- If you encounter smoke in the stairway, re-enter a floor area and use an alternate exit.
- Do not re-enter once you have left the building until it is declared safe to do so by the Fire Department Officials.

## **Fire extinguishment, control and confinement**

In the event that a small fire cannot be extinguished with the use of a portable fire extinguisher or the smoke presents a hazard to the operator, then the door to the area should be closed to confine and contain the fire. Leave the fire area. Ensure that the Fire Department has been notified from a safe area.

- ◆ **The fire extinguishers in the offices will only last for @ 15 to 20 seconds before they are completely discharged.**

## **Fire hazards**

In order to avoid fire hazards in the building, occupants are advised to:

- Keep stairways, landings, passageways and exits clear of obstructions and combustible refuse at all times.
- Keep all doors to stairways closed at all times.

- ❑ Ensure that electrically powered equipment, especially coffee maker, is shut off at closing time.
- ❑ Limit the use of flammable liquids and have safe handling and disposal practices.
- ❑ Maintain access to the extinguishers and other fire protection equipment.

In general, occupants are advised to:

- ❑ Know where the alarm pull stations and exits are located.
- ❑ Call the Fire Department (9-1-1) immediately whenever you need assistance.
- ❑ Know the correct building address.
- ❑ Know the procedure established to implement safe evacuation.
- ❑ Know the supervisory staff (and back up) to your floor area or for the building.
- ❑ Report any condition that may be a fire hazard to the supervisory staff or your Occupational Health and Safety representative.

## **EMERGENCY EVACUATION PROCEDURES FOR INDIVIDUAL SITES**

Effective November 1<sup>st</sup> 2009

### **HANDS - Fire and Evacuation Plan**

#### **23 Ball's Drive BRACEBRIDGE**

- Primary Fire Captain -** Downstairs Receptionist (backup reception if main receptionist is not present)
- A.I.P Fire Captain -** Senior Therapist or Lead Therapist - not responsible for a child
- Meeting Area -** A.I.P Playground – N. E. corner of parking lot

#### **Primary Fire Captain:**

- Call 911
- You are responsible for leaving the building with the “sign in book” consisting of the non-staff individuals and the clients in the building. Take a pad of paper, employee list, sign-in sheet, master keys and cell phone and walk to the A.I.P. Playground area.
- Ensure people stay at the meeting area for a head count and further instructions
- Await reports of clear building and head count from A.I.P. Fire Captain and staff
- Report to fire department on arrival informing them of all clear, smoke/fire areas, etc.
- **YOU ARE IN CHARGE** of the designated meeting area, take direction from the fire department.
- DO NOT return to building until fire department gives all clear

## HANDS - Fire and Evacuation Plan

### **23 Ball's Drive BRACEBRIDGE**

#### Lower Level – Admin. Side

##### **Staff:**

- Proceed to nearest exit with any clients in your presence (The nearest exit is posted on the map inside of each office and / or meeting room)
- The staff are responsible for closing office doors as they exit and to ensure that all personal are out of the building. If a door is locked, **DO NOT ENTER**, assume it is empty. Check the bathroom(s) on each wing.
- Assemble at the Designated Meeting Area – A.I.P. Playground
- Take a “Head Count” and report to Fire Captain the areas that have been checked and any individuals you feel are not accounted for
- Wait for instructions from the Primary Fire Captain and / or Fire Department
- DO NOT return to building until Primary Fire Captain and / or Fire Department gives all clear

#### Upper Level (West & East Wings)

##### **Staff:**

- Proceed to nearest exit with any clients in your presence (The nearest exit is posted on the map inside of each office and / or meeting room)
- The staff are responsible for closing office doors as they exit and to ensure that all personal are out of the building. If a door is locked, DO NOT ENTER, assume it is empty. Check the bathroom(s) on each wing.
- Assemble at the Designated Meeting Area – A.I.P. Playground
- Take a “Head Count” and report to the Primary Fire Captain the areas that have been checked and any individuals you feel are not accounted for
- Wait for instructions from the Primary Fire Captain and / or Fire Department
- DO NOT return to building until Primary Fire Captain and / or Fire Department gives all clear

## **HANDS - Fire and Evacuation Plan**

**23 Ball's Drive  
BRACEBRIDGE**

### **Autism Intervention Program - Lower Level**

#### **A.I.P. Fire Captain (reports to Primary Fire Captain)**

- Take a pad and paper, employee list, black box with all client information, sign in sheet, master keys and cell phone. (all will be located at front entrance)
- Try to be the first person leaving the building and stand in parking lot where all AIP exits are visible
- As people leave the building, direct them to the Meeting Area – A.I.P. Playground.
- Take a “Head Count” and report to the Primary Fire Captain the areas that have been checked and any individuals you feel are not accounted for

#### **Instructor Therapists – YOU ARE RESPONSIBLE FOR YOUR CHILD**

- Proceed to nearest exit with your child (The nearest exit is posted on the map inside of each office and / or meeting room)
- Closed your therapy room door to indicate that you have left the room
- Assemble at the Designated Meeting Area – A.I.P. Playground
- Report to the A.I.P. Fire Captain
- Wait for instructions from the Primary Fire Captain and / or Fire Department
- DO NOT return to building until Primary Fire Captain and / or Fire Department gives all clear

#### **Senior Therapist or Lead Therapist not responsible for a child:**

- Proceed to nearest exit with any clients in your presence (The nearest exit is posted on the map inside of each office and / or meeting room)
- The Senior Therapist or Lead Therapist is responsible for closing office doors as they exit and to ensure that all children and personal are out of the building. If a door is locked, DO NOT ENTER, assume it is empty. Check the bathroom(s) on each wing.
- Assemble at the Designated Meeting Area – A.I.P. Playground
- Wait for instructions from the Primary Fire Captain and / or Fire Department
- DO NOT return to building until Primary Fire Captain and / or Fire Department gives all clear

## **Fire and Evacuation Plan**

### **NORTH BAY 222 Main Street East**

#### **Receptionist (Fire Captain)** **Back-up reception if reception is not present**

You are responsible to leave the building with best guess head count. The number should be the total of the "in" on the board, the signed in individuals and the clients in family rooms. Take a pad and paper, employee list, sign-in sheet, master keys and cell phone) and walk to far side of TD Bank building on main street side walk.

- Ensure people stay for head count (roll call) and further instructions
- Await reports of clear building and head count from assistants
- Report to fire department on arrival regarding all clear, smoke/fire areas, etc
- DO NOT return to building until fire department gives all clear

**YOU ARE IN CHARGE** of the designated meeting place, take direction from the fire department.

#### **Second floor Assistants**

#### **First floor Assistants**

##### **Finance clerks**

##### **Reception**

- Check floor together, each office, washroom, and observation room. Closing doors as you go and ensure last off the floor. If a door is locked, DO NOT enter and assume it is empty
- Exit down main, inside stairwell (if clear) and back exit
- Report all clear 2<sup>nd</sup> floor / 1st floor to exit guide and proceed to captain with same report

## **Front Exit Guide**

## **Back exit Guide**

### **Clinicians**

### **Human Resources Clerk**

- Try to be one of first out the door and stay close to building
- As people exit, direct them to far side of TD Bank
- Take rough head count as they go by
- For the rear exit --after exit of floor assistants (both first and second floor) proceed to fire captain with report of all clear building then proceed via the street side walk to front exit guide to relate all clear and both return to waiting area and fire captain
- For the front exit guide—keep head count and await arrival of back exit guide then proceed together back to fire captain

## **Fire and Evacuation Plan**

### **NORTH BAY 820 LAKESHORE DRIVE**

1. **Upon detection of smoke, fire, gas smell etc.**  
The staff member who detects smoke, fire or gas smell shall immediately pull the nearest fire alarm.
2. **Instructor Therapist/Child to evacuate immediately**  
In the event of an emergency each Instructor Therapist (IT) will take the child he/she is working with, and immediately leave the building through the nearest exit away from the fire. The key exits are the side door near the play area and the front entrance of the Centre. If there is time the staff will gather the child's jacket and boots (in winter) and take child's belongings to dress them outside the building. If the child resists leaving the IT will physically take the child outside.
3. **Other staff will evacuate**  
All other AIP staff will evacuate the building immediately. If there is time, a Lead Instructor Therapist will check all therapy rooms and offices to see if someone is in them. The staff checking the rooms will then close doors and ensure last off the floor. If a door is locked, DO NOT enter and assume it is empty evacuate and report "ALL CLEAR" to the Fire Captain.
4. **Proceed to Early Years Centre**  
Staff will exit through the door at the playground area, the front entrance or the parking lot, whichever is closer.  
Staff and children will then proceed to the front entrance of the Early Years Centre, taking the children inside the Early Years Centre if necessary (e.g. in winter or inclement weather).
5. **Fire Captain (Admin Support/Back-UP (Lead IT))**  
The Scheduling Clerk/Admin Support staff is the Fire Captain. If she is not in the building the Lead Therapist will act as Fire Captain. He/she is IN CHARGE and is responsible for:
  - Leaving the building with the best guess head count
  - Taking the scheduling binder with each child's emergency phone numbers, paper and pen
  - Ensuring all staff and children gather in front of the Early Years Centre and stay for a head count.
  - Report to the Fire Department when they arrive and act as liaison

- Ensure no one returns to building until “ALL CLEAR” is given by Fire Department
- IN THE EVENT THAT THE ADMIN SUPPORT STAFF IS NOT IN THE BUILDING, ONE **LEAD INSTRUCTOR THERAPIST** WILL ASSUME THE RESPONSIBILITY OF FIRE CAPTAIN.

## **Fire and Evacuation Plan**

### **NORTH BAY CHILDREN'S TREATMENT CENTRE 770 JOHN STREET**

#### **POLICY:**

The Treatment Centre will have emergency evacuation plans in place to deal with fire and other emergencies. All staff will be trained in the proper use of fire extinguishing equipment and will be made aware of the fire plan, location of fire extinguishing equipment and safety procedures as part of the orientation process. This will be reviewed at least annually thereafter. Staff and clients are not expected to put themselves at risk in any emergency.

#### **PROCEDURE:**

A copy of the fire plan is to be kept on site and appropriate signs indicating the closest and alternate fire exits will be duly posted within each facility. Fire exits will be kept clear and accessible at all times. All staff will be notified of the designated evacuation area for each site.

Fire drills will occur monthly for each residence and day treatment classroom for all clients and staff. Drills, and any relevant comments will be recorded in the *Fire Drill Report* that will be forwarded to the *Health and Safety Committee*

Phone numbers for fire, police and ambulance, as well as that site's address and phone number, will be posted by each telephone.

The following items will be checked, and recorded as checked in the *facility log book*, on a monthly basis:

- fire extinguishers (pressure gauge)
- emergency exits
- smoke detectors
- kitchen appliances and equipment ( frayed cords, etc.)
- fire alarm fuses/circuit breakers.

There will be two good quality flashlights in convenient and accessible locations in each facility. The batteries will be checked monthly.

All flammable and hazardous substances will be properly stored and disposed of when needed.

### **In the event of a fire:**

- the person discovering the fire will sound the alarm
- the fire department will be notified from the nearest safe location
- staff and clients will immediately evacuate the building through the designated exits and will meet at the designated site
- staff will carry out a head count to ensure everyone is out of the building; no staff or clients will re-enter the building for any reason
- the last person out of each room will ensure that windows and doors are closed
- all staff and clients will remain in the designated evacuation area until fire authorities have indicated it is safe to return.

If there is an odour of gas, staff and clients will evacuate the building and call the Fire Department and/or Union Gas office immediately. No one will re-enter the building until a signal that it is safe to return has been received from the fire or gas official. **DO NOT LIGHT MATCHES OR TURN ON ANY ELECTRICAL SWITCHES.**

Following a fire or any other emergency, the staff involved will complete a Serious Occurrence Report before the end of the workday.

### **Treatment Centre Program:**

For emergency purposes, individual staff are assigned specific duties as follows:

Staff in Charge	– building sweep
Staff Partner	– evacuation and meeting place
Third Staff / Supervisor	– telephone calls, assist

### **Evacuation Plan:**

1. In any situation requiring emergency evacuation of the building, the fire alarm will be activated immediately. In the case of a fire, this may occur automatically due to smoke detection.
2. When the alarm sounds the Staff in Charge will get the walkie talkies from the Staff Office, give one to their Staff partner, and begin a sweep of the building. The sweep will begin with bedrooms 1-3 on the main floor and the main floor bathroom. Next, proceed to the upstairs bedrooms 4-7 and bathrooms. They will communicate with their Staff Partner as they ensure that each area is clear.

3. The Staff Partner will yell “EMERGENCY – PLEASE LEAVE THE BUILDING” several times as they receive a walkie talkie from the Staff in Charge. They will then proceed to sweep the basement if in use and escort all staff and clients out of the building to the designated gathering place. Once all clients and staff are out of the building, the Staff Partner will notify the Staff in Charge that there are no clients in the building.
4. The third Staff or Shift Supervisor will call the Fire Department, pick up a walkie talkie and then assist the Staff in Charge. They will follow behind ensuring that doors and windows are closed as areas are cleared. If fire is encountered they will begin efforts to extinguish or contain the fire IF POSSIBLE and safe to do so. They will maintain communication with the Staff Partner about their status.
5. When the building sweep has been completed or the Staff Partner advises that all are present, whichever is first, then the Staff in Charge will check with the third regarding status of the situation. A decision will be made to continue working on the fire / situation or to abandon efforts.
6. If no third is present, the Staff in Charge will now call the Fire Department (once the building is evacuated) from a safe location in a nearby building. Staff shall not re-enter the building once evacuated.
7. When the Fire Department arrives, the Staff in Charge will relay information to Fire Personnel.
8. Once the building has been evacuated, the Fire Department called, and the situation has become more under control, the Executive Director or designate must be notified as per Serious Occurrence Reporting procedures.

## Fire and Evacuation Plan

### **PARRY SOUND 2 May Street**

#### Fire Captain

#### Receptionist

#### Back-up reception

- Call 911
- Responsible to leave building with best guess head count(daily schedule and boardroom key) and proceed to designated meeting place
- Ensure people stay at meeting place for head count and further instructions
- Await reports from assistants
- Report to fire department on arrival regarding areas not checked, smoke/fire areas,etc
- DO NOT report “all clear” to fire department because we have no way of knowing if people are in clinics downstairs
- DO NOT return to building until fire department gives all clear
- **YOU ARE IN CHARGE** of designated meeting place, take direction from Fire Department

#### Assistant

Designated by admin. staff to alert Diabetes Clinic and HANDS staff downstairs

#### Exit Guides

#### Clinicians and other staff

- proceed to nearest exit with any clients in your presence
- staff without clients, check floor on the way out, closing doors as you go and ensure last off the floor If a door is locked, DO NOT enter and assume it is empty
- direct people to designated waiting area
- take rough head count from each organization
- report to Fire Captain areas checked and any individuals you feel are not accounted for

## **Fire and Evacuation Plan**

### **STURGEON FALLS 65 Queen Street**

- First person available without client is to take master keys, cell phone and act as fire captain. Do head count and speak with fire department on arrival
- Others with clients are responsible to leave the building with their clients and gather in front of building next door on Queen Street
- Ensure people stay for head count (roll call) and further instructions
- Report to the fire department on arrival regarding all clear, smoke / fire areas etc..
- DO NOT return to the building until fire department gives all clear
- DO NOT enter locked offices (s) assume they are empty
- Exit building either at front or back entrance of building (whichever is safer at the time)

**\*\*We will be meeting at the front of the building on Queen St. beside ours \*\***

## Fire and Evacuation Plan

### **SUNDRIDGE 37 Main Street**

#### **MAIN FLOOR**

##### **Receptionist (Fire Captain):**

- ❑ Responsible for the best guess head count. Should include the total of the “in” on the board, the signed in individuals and clients. Take a pad and paper, employee list, sign-in sheet(s), keys and cell phone.
- ❑ Exit the building and proceed to 33 Main Street (south of the building)
- ❑ Ensure people stay for head count (roll call) and further instructions
- ❑ Await reports of clear building and head count from assistants
- ❑ Report to the fire department on arrival regarding anyone who may have been left inside or all clear, smoke/fire areas, keys, floor plans (if necessary).
- ❑ **DO NOT** return to the building until the fire department gives all clear
- ❑ **YOU ARE IN CHARGE**

##### **Clinician(s):**

- ❑ Verify and ensure evacuation of all staff and clients from the waiting area, file room and offices **to the right** of the reception area, turning off lights, closing windows and doors as you go. If a door is locked, DO NOT enter and assume it is empty
- ❑ Verify and ensure evacuation of all staff and clients from Family Rooms 1 and 2, and offices down the hall **to the left** of the reception area, turning off lights, closing windows and doors as you go. If a door is locked, DO NOT enter and assume it is empty
- ❑ Exit nearest emergency exit (if clear) and leave the building immediately and proceed to the planned evacuation area south of building at **33 Main Street**
- ❑ Report all clear main floor to Fire Captain
- ❑ **DO NOT** return to the building until the fire department gives all clear
- ❑ Back up for this role will be **Whom ever is Present on the main floor.** Please call out what you are doing.

❖ **Should the rear emergency exit not be safe or accessible, the emergency exit at the front of the building will be used. Proceed down the hall to the reception area and exit the main front door**

❖ **Despite the exit used (front or rear), all staff are to meet at the planned evacuation area south of building at 33 Main Street.**

## **UPSTAIRS FLOOR**

### **Intake Worker**

- ❑ Verify and ensure evacuation of all staff and clients from offices on the upstairs floor of the building including the kitchen and bathroom, turning off lights, closing windows and doors as you go. If a door is locked, DO NOT enter and assume it is empty.
- ❑ Exit at the rear emergency exit adjacent to the bathroom (if clear) and leave the building immediately and proceed to the planned evacuation area south of building at 33 Main Street
- ❑ Report all clear Upstairs floor to Fire Captain
- ❑ **DO NOT** return to the building until the fire department gives all clear
- ❑ Back up for this role will be **Information Systems Coordinator or Whomever is Present upstairs.**

❖ **Should the rear emergency exit not be safe or accessible, the emergency exit at the front of the building will be used. Proceed down the stairs to the reception area and exit the main front door**

❖ **Despite the exit used (front or rear), all staff are to meet at the planned evacuation area south of building at 33 Main Street**

## **BASEMENT FLOOR**

### **Data Coordination Clerk:**

- ❑ Verify and ensure evacuation of all staff and clients from offices on the basement floor of the building including the Boardroom and the bathroom, turning off lights, closing windows and doors as you go. If a door is locked, DO NOT enter and assume it is empty.
- ❑ Exit at the rear emergency exit and leave the building immediately and proceed to planned evacuation area south of building at 33 Main Street
- ❑ Report all clear Basement floor to Fire Captain
- ❑ **DO NOT** return to the building until the fire department gives all clear

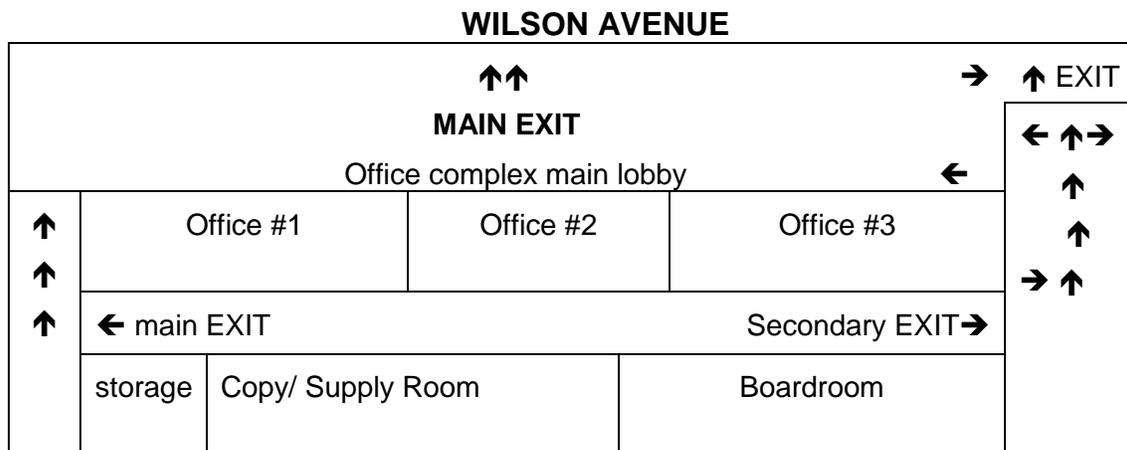
- Back up for this role will be **Whoever is present on the basement floor.**
  
- ◆ **Should the rear emergency exit not be safe or accessible, the emergency exit at the front of the building will be used. Proceed up the stairs to the reception area and exit the main front door**
  
- ◆ **Despite the exit used (front or rear), all staff are to meet at the planned evacuation area south of building at 33 Main Street.**

## Fire and Evacuation Plan

### TIMMINS 60 Wilson Avenue

Office is located on the main floor of an office complex. Four frontline staff work from this site. Alyssa McKay is the Health and Safety Officer (Fire Captain). In case of an emergency any staff member present should follow the following procedures.

1. Notify other staff or clients in office of the emergency.
  2. Call 911.
  3. You are responsible for leaving the building. Exit the office by one of the two exits. Take a pad of paper, employee list, keys and cell phone.
  4. Walk across Wilson Avenue to the J. R. Belanger Enterprises parking lot.
  5. Stay at the meeting place and await reports of clear building from the fire department.
  6. Report to fire department on arrival, informing them of all clear, smoke/fire areas, etc.
- DO NOT return to building until fire department gives notification that the building is all clear of safety hazards.
  - **If Fire Captain is present, she is in charge** and will take direction from the fire department. If the Fire Captain is not present, present staff will take direction from the fire department.



## **STEPS TO FOLLOW IN THE EVENT OF:**

### **A BOMB THREAT:**

If you receive a bomb threat, stay calm and try to get as much information as possible. Although this might be difficult, try to note any unique features about the voice and any background sounds you hear over the telephone. Keep the caller on the line as long as possible and record every word that is said.

Try to note the following:

- If the speaker is male or female,
- If the speaker has an accent,
- If the voice is disguised, muffled or funny sounding,
- If the voice is shrill or deep,
- Any background noises (traffic, bus passing, bell ringing, fax or printer sounds), and
- Any indoor vs. outdoor sounds, etc.

Call the police and building management immediately afterwards.

After you've been notified of a bomb threat, do not touch any **suspicious package**. Leave the area where the suspicious package was found. Notify the police immediately. After evacuating a building, avoid standing in front of windows or other potentially hazardous areas. Do not block the sidewalk or street, which will need to be kept clear for emergency officials.

In the case of an explosion, get out of the building as quickly and calmly as possible. If items are falling off bookshelves or from the ceiling, get under a sturdy table or desk until the situation has stabilized enough for your safe passage. Remember: ensure your own safety before trying to help others.

### **When Should I Be Worried About a Letter or a Package?**

The general public is not a target for suspicious packages, but it is good to be prepared.

You know what kind of mail and packages you usually get. Look for things that are out of the ordinary.

A package of concern would likely have several of these features:

- Something looks wrong:
  - There is too much postage

- The return address is missing or foreign
- Your name or address is not correct or not spelled correctly
- Something feels wrong:
  - The letter or package feels too heavy
  - You can feel wiring or powder inside
- What else?
  - The letter or package is dirty, stained or leaking
  - There is too much tape or string
  - There is a funny smell or noise coming from it

I received a letter or package that I am worried about. What should I do?

- Remain calm
- Do not open the letter or package
- Leave the letter or package where it is
- Get everyone out of the room and close the door
- Call 911 (or the emergency response number in your area)
- Wait in a safe place until the police/fire arrive

I already opened the package. Should I worry?

- 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

I opened the package and I am worried. What should I do?

- Remain calm
- 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
- Wash your hands or shower with soap and water
- Call 911 (or the emergency response number in your area)
- Wait in a safe place until the police/fire arrive

### What happens next?

The police, other emergency workers and public health authorities will give you advice about what to do next.

### **AN EARTHQUAKE:**

#### ***If you are in a building***

Stay inside. Stay away from windows. Get under a heavy desk or table and hang on. If you can't get under something strong, flatten yourself against an interior wall. Protect your head and neck.

#### ***If you are outside***

Go to an open area. Move away from buildings or any structure that could collapse. Stay away from power lines and downed electrical wires.

#### ***If you are in a car***

Stop the car and stay in it. Avoid bridges, overpasses or underpasses, buildings or anything that could collapse on you and your car.

### **A FLOOD:**

Turn off furnaces and the outside gas valve. Shut off the electricity. If the area around the fuse box or circuit breaker is wet, stand on a dry board and shut off the power with a dry wooden stick.

Never try to cross a flood area on foot. The fast water could sweep you away.

#### ***If you are in a car***

Try not to drive through flood waters. Fast water could sweep your car away. However, if you are caught in fast rising waters and your car stalls, leave it and save yourself and your passengers.

### **SAFELY TAKING SHELTER:**

If you are advised by local officials to "shelter-in-place", you must remain inside your office and protect yourself there, either alone or with someone else. The following steps will help maximize your protection:

- Close and lock all windows and exterior doors.
- Turn off all fans, heating and air conditioning systems.
- Get your emergency supplies kit and make sure the radio is working.
- Go to an interior room that's above ground level (if possible one without windows). In the case of a chemical threat, an above-ground location is

preferable because some chemicals are heavier than air, and may seep into basements even if the windows are closed.

- Using duct or other wide tape to seal all cracks around the door and any vents into the room.
- Continue to monitor your radio or television until you are told all is safe or advised to evacuate. Local officials may later call for the evacuation of specific areas in your community that are at greatest risk. Responders will advise when it is safe to leave the premises.

### **A SEVERE LIGHTNING STORM:**

#### ***If you are in a building***

Stay inside. Stay away from windows, doors, fireplaces, radiators, stoves, metal pipes, sinks or other electrical charge conductors. Unplug TVs, radios, toasters and other electrical appliances. Don't use the phone or other electrical equipment.

#### ***If you are outside***

Seek shelter in a building, cave or depressed area. If you're caught in the open, crouch down with your feet close together and your head down (the "leap-frog" position). Don't lie flat - by minimizing your contact with the ground you reduce the risk of being electrocuted by a ground charge. Keep away from telephone and power lines, fences, trees and hilltops. Get off bicycles, motorcycles, and tractors.

#### ***If you are in a car***

Stop the car and stay in it. Don't stop near trees or power lines that could fall.

### **A TORNADO:**

#### ***If you are in a building***

Go to the basement immediately. If there isn't one, crouch or lie flat (under heavy furniture) in an inner hallway or small inner room or stairwell away from windows. Stay away from large halls, arenas, shopping malls, etc. (their roofs could collapse).

#### ***If you are caught outside***

If there is no shelter, lie down in a ditch or ravine, protecting your head.

#### ***If you are driving***

Get out of and away from the car. It could be blown through the air, or roll over on you. Lie down as above.

## **A WINTER POWER FAILURE:**

Turn the thermostat(s) down to minimum and turn off all appliances, electronic equipment and tools to prevent injury, damage to equipment and fire. Power can also be restored more easily when the system is not overloaded.

Use proper candleholders. Never leave lit candles unattended.

Don't use charcoal or gas barbecues, camping heating equipment, or home generators indoors.

Home generators are handy for backup electricity in case of an outage, but there are hazards to be aware of.

To operate a generator safely, follow the manufacturer's instructions, and always: Ensure that the generator operates outdoors in well ventilated conditions, well away from doors or windows. Connect lights and appliances directly to the generator. If extension cords must be used, ensure they are properly rated, CSA (Canadian Standard Association) approved cords.

Direct installation of a generator to an existing electrical system should only be done by a qualified technician.

## SECTION III

### EMERGENCY AFTERMATH

#### STEPS TO TAKE WHEN RETURNING TO THE WORKPLACE

Even if your workplace has been deemed safe, one should always check for damage. Remember the following points:

- Use a flashlight - don't light matches or turn on the electrical switches if you suspect damage or smell gas.
  - Check for fires, fire hazards or other household hazards.
  - Sniff for gas leaks, starting at the water heater. If you smell gas, turn off the main gas valve, open windows and get everyone outside quickly.
  - Shut off any other damaged utilities.
  - Clean up spilled medicines, bleaches, gasoline and other flammable liquids immediately. Wear protective clothing. For major spills or leaks, call in professional help.
- ***IF YOU TURN OFF THE GAS, IT SHOULD ONLY BE TURNED BACK ON BY A PROFESSIONAL FROM THE GAS COMPANY.***

#### STEPS TO TAKE WHEN DEALING WITH EMOTIONAL REACTIONS

People caught in a disaster often feel confused. You might not act like yourself for a while. You may tremble, feel numb, vomit or faint. Immediately after the disaster people often feel bewildered, shocked, and relieved to be alive. These feelings and reactions are perfectly normal. Many survivors sleep poorly, have no appetite, are angry with those around them or panic at the slightest hint of danger. Children might start thumb-sucking or bed-wetting. These feelings and reactions are perfectly normal too.

#### **How To Get Back On Track**

Here are some suggestions to help get you and those around you get back on track after the disaster.

- Talk about your feelings. Talk about what's happened.
- Encourage expression of feelings. Understand that their feelings are real. Recognize that when you suffer a loss, you may grieve. You may feel apathetic or angry. You may not sleep or eat well. These are normal grief

reactions. Do give yourself and those around you permission to grieve and time to heal.

- Consult with professionals i.e.: Doctor, E.A.P., etc.

### **How To Help Children Cope**

Children exposed to a disaster can experience a variety of intense emotional reactions such as anxiety, fear, nervousness, stomachaches, loss of appetite and other reactions. These are normal and temporary reactions to danger. We can help relieve such reactions by taking the children's fears seriously, reassuring them, and giving them additional attention and affection.

After a disaster, children are most afraid that,

- The event will happen again,
- Someone will get hurt or injured,
- They will be separated from the family, or
- They will be left alone.

Comfort and reassure them. Tell them what you know about the situation. Be honest but gentle. Encourage them to talk about the disaster. Encourage them to ask questions about the disaster. At a time like this it's important for the child and his/ her family to stay together. Consult with professionals i.e.: Doctor, E.A.P., etc.

### **Additional Steps You Can Take**

Raw, unedited footage of terrorist incidents and other tragedies and people's reaction to those events can be very upsetting, especially to children. Talk to the children about what is happening, and how you and governments are keeping them safe. It is not recommended that children watch television news reports that show images of the same incident over and over again. Young children do not realize that it is repeated video footage and will think the event is happening again and again. Adults might also need to give themselves a break from watching disturbing footage.

Listening to local radio and television reports will provide you with the most accurate information on what's happening and what actions you will need to take.

### **Some Common Impacts Of An Emergency**

- There can be significant numbers of casualties and the safety of buildings and houses may be compromised, rubble may block areas making it dangerous or difficult to get out or walk around.

- Health services in hospitals and mental health resources in an affected community may become strained, maybe even overwhelmed. Know they are doing their very best under extraordinary circumstances. Health care facilities have emergency plans and might access additional resources, such as mobile hospitals or enlist the support of medical staff/facilities from neighboring communities, provinces or the Government of Canada.
- Law enforcement from local, provincial and federal levels might be involved following a terrorist attack due to the event's criminal nature.
- Extensive media coverage, high public anxiety and social impacts could all continue for a prolonged period.
- Workplaces and schools may be closed, and there might be restrictions on local, domestic and international travel.
- You and your family or household may have to evacuate an area following routes specifically designated to ensure your safety.
- Clean up and recovery operations could take many months.

## **STEPS TO TAKE WHEN RESPONDING TO STRESS**

### ***Taking Care of Ourselves, Our Families and Our Communities***

.....

Terrorist attacks, acts of war, and sudden violent events such as disasters challenge our coping skills, even if we only witness them on television. If they touch our lives more closely (for example, if they occur near where we live, or affect people we know) they can cause a lot of distress, fear and anxiety. We worry about our own safety, the safety of our loved ones and our community.

Events of this kind can also stir up memories and feelings about violent or painful events that we may have experienced in the past: the death of a family member or friend in an accident; a serious illness or injury; the loss of a job; family violence or sexual assault. And of course, the stress of a large-scale disaster can make any stressful circumstances we are currently facing more difficult to handle.

It is important to be aware that stressful feelings are normal when our lives are touched by violent acts, and that there are steps we can take to feel better.

### **Things to Keep in Mind**

It is important for you to know that:

- People of all ages are strong and resilient, and most recover within a short period of time.

- You have knowledge and experience that can help yourself, others and your community cope with the stresses triggered by violent events.
- Reassuring people about their safety and explaining what measures are being taken to protect them is an important step in helping them cope.
- Parents', caregivers' and community leaders' own responses to an event strongly influence children's and community members' ability to recover.
- The basic information provided below will help you help others.

### ***Feelings and Reactions to Violent Events***

.....

In the wake of violent events such as a terrorist attack, a disaster or other stressful event, our reactions can:

**Affect us physically:** For example, we may have headaches, back pain, stomach aches, diarrhea, problems with sleeping, tightness in neck and shoulders, low energy or general tiredness, loss of appetite or tendency to eat more “comfort foods” or use more alcohol, drugs and tobacco.

**Affect us emotionally:** For example, we may feel sad, angry, guilty, helpless, numb, confused, discouraged, worried and anxious about the future, and afraid that a similar event may reoccur. Feelings can come and go like the tides, building up then fading away, only to come back and fade away again. They can also come out of the blue when we least expect it.

**Affect our thinking:** For example, it may be hard to concentrate, to stop thinking about the events, hard to remember day-to-day things. Memories of other sad or difficult events from the past may surface. Thoughts, like feelings, can also come out of the blue, while reading, talking, having a meeting, driving, etc.

**Affect our sense of safety:** For example, we may find it hard to leave home or loved ones; we may tend to overprotect our children; or, we may be nervous about travelling.

### **These reactions are normal in situations of stress**

Most of us have had some of these reactions. Some of us may feel them more strongly or more often than others, but it is reassuring to know that these are common reactions when people experience a very stressful event.

Stressful events, even major crises, are part of life. In most cases, our life experience has given us the strengths and skills we need to gradually work through our feelings and reactions. Friends and family can help. Here are some healthy ways of looking after both ourselves and one another:

## ***Taking care of ourselves***

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- Take breaks from the media reports and from thinking and talking about the events.
- Take time to relax and exercise. This will help decrease stress and tension and help you be more alert, sleep and eat better, and get back on track.
- Talk with friends, relatives, co-workers, teachers or leaders of your faith community. Talk about your thoughts, feelings and reactions. Comfort one another. Talking with others can make you feel less alone and help you sort out reactions to the events.  
Remember to talk about the normal issues and pleasures of your life as well - don't let disaster take over every conversation.
- Some may be quite affected by these events, others less. Patience and understanding with one another are two of the best ways to help.
- Be careful about making major decisions if you are very upset. Give yourself a chance to think it over.
- Get back to your daily routine. Do things you enjoy to help restore a sense of safety and control.
- Watch what you eat. Eat healthy foods. For ideas, see Canada's Food Guide, <http://www.hc-sc.gc.ca/nutrition/>.
- Be physically active, doing something you enjoy. (For ideas, see Canada's Physical Activity Guide, [www.paguide.com](http://www.paguide.com) or call 1-888-334-9769.)
- Don't use alcohol or drugs to numb your feelings. This can set up an unhealthy pattern and can lead to more serious problems down the road.
- Get a good night's sleep.

## ***Taking care of our families***

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- Reassure family members who may be worried about their safety and about the future.
- Take time to talk about the events.
- Everybody needs to be heard and understood.
- Relax together. For example, go to a movie or for a meal. Go bowling. Remember, taking time out is not a cop-out.
- Visit with relatives and friends.

## ***Taking Care of Our Communities***

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- Take part in information meetings about the events.
- Attend memorials, candlelight vigils.
- Attend inter-religious events.
- Don't allow others to be blamed for what happened. When people are afraid or angry, they often want to blame and punish someone.

***Delayed Reactions***

Some of us react strongly at the time stressful events happen. Others react later, after a few days or even a few weeks. Delayed reactions can be confusing. Remember, not everyone reacts the same way. Following the tips on self-care given above will help you deal with delayed reactions.

***Self-Care for Caregivers***

.....

Terrorist attacks, acts of war, and sudden violent events such as disasters engage caregivers (doctors, psychologists, social workers, nurses, psychiatrists, teachers, counsellors, and other health workers) in working long hours, helping people of all ages to understand and manage the many reactions, feelings and challenges triggered by these stressful circumstances.

The massive effort put forth by caregivers in response to the psycho-social effects of these events is a critical contribution to their community's recovery. Caregivers draw on strength and pride that comes from a sense of helping members of their community.

However, caregivers sometimes need to be reminded that a sustained response such as this can also lead to physical and emotional wear and tear. Without conscious attention to self-care, caregivers' effectiveness and ultimately their health will suffer.

***Common Sources of Stress for Caregivers***

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Here are common sources of stress that caregivers may be faced with:

- Trying to live up to high expectations from clients and/or from self
- Intensive caring for others at the expense of self-care
- Inability to set appropriate boundaries
- Pushing oneself too hard
- Mental and physical demands
- Heavy workloads

- Long hours on the job
- Time pressures
- Limited resources
- Competing priorities
- Media requests
- Political and organizational pressures

***Signs of Stress to be on the Alert For***

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Caregivers are usually alert to the stresses of people they help. They are not, however, always as alert to the stress and fatigue that can slowly and insidiously surface in their own lives. Caregivers, like everyone else, have also been affected by these events and need to be reminded of normal stresses that may affect them.

**Common Physical/Behavioural Reactions:** fatigue, loss of appetite, difficulty falling asleep, restlessness, headaches, changes in sleeping, increased blood pressure, changes in eating habits, increased susceptibility to colds, flu, infection, change in libido, changes in smoking habits, changes in alcohol and drug consumption

**Common Emotional Reactions:** feeling helpless, overwhelmed, inadequate, fragile, vulnerable, unable to cope or go on, increased mood swings, increased emotional lability, decreased motivation, feeling burned out, crying more frequently and easily, isolation, changes in communication patterns and other relationship dynamics, withdrawal

**Common Cognitive Reactions:** confusion, difficulty making decisions, difficulty problem solving, memory blanks, having ambiguous feelings, questioning why this happened in a world that is supposed to be safe, difficulty concentrating or paying attention

Caregivers are not immune to the above reactions and need to remind themselves that these are normal human responses to stressful circumstances. Although many of the underlying stresses cannot be prevented, you can increase your resistance by taking care of yourself and staying healthy. It is important to pace yourself and know your limits so you can continue to be available to your clients and your community.

**Here are some stress-relieving activities that you can act on immediately:**

- **Go for a 15-minute walk** during a lunch or coffee break. Take other opportunities to be physically active. (For ideas, see Canada’s Physical Activity Guide, [www.paqueide.com](http://www.paqueide.com) or call 1-888-334-9769.)
- Eat sensibly. Avoid excessive use of caffeine and alcohol. Drink plenty of water and juices. (For ideas, see Canada’s Food Guide, <http://www.hc-sc.gc.ca/nutrition>)
- **Know and respect your limits.** If you feel exhausted and need time off, take it. Respect commitment for regularly scheduled time off.
- **Spend time with family and friends.** Talk to them. Listen to their stories. Listen to them if they become concerned with your health and well-being.
- As much as possible, continue to **participate in previous social and recreational activities.**
- **Get some rest.** If you have trouble sleeping, get up and do something relaxing or enjoyable.
- **Be on the lookout for any changes** in your habits, attitudes and moods.
- **Share your own and clients’ reactions** and issues with colleagues. Don’t hesitate to ask others for advice.
- **Include yourself on the list of people you are taking care of.** Take some time to do something just for yourself every day. Taking care of yourself will put you in better shape to give care to others.
- **Be self-nurturing** and don’t forget to laugh.

***Delayed Stress Reactions***

Past experiences have shown that after tragic events, it may take several weeks to adjust to “regular” routines. This is normal. The information above will help you.

**WATCH OUT FOR HAZARDS**

<b>POST EARTHQUAKE HAZARD</b>	<b>WHAT TO DO</b>
<b>Damaged buildings</b>	Stay out of damaged buildings, even if they look okay
<b>Aftershocks</b>	Stay put
<b>Water gets cut off</b>	Use emergency water from water heater, toilet tank, melted ice cubes.
<b>Power can go off</b>	If you live in a building, don't use the elevator. You'll get stuck in it.

<b>POST-FLOOD HAZARDS</b>	<b>WHAT TO DO</b>
<b>Contaminated drinking water</b>	Use bottled water or bring water to a rolling boil for five minutes, or add two drops of non-perfumed chlorine bleach to one litre of contaminated water. Stir and wait 30 minutes before drinking. (Water should still have a slight chlorine smell.)
<b>Contaminated dishes and utensils</b>	Wash and sterilize dishes and utensils. Use hot water, detergent and a disinfectant rinse (approximately one teaspoon of household bleach in a sink of water).
<b>Basement full of water</b>	Drain the water in stages, about a third of the volume of water per day. (Draining the water too quickly can structurally damage your building.)
<b>OTHER HAZARDS</b>	<b>WHAT TO DO</b>
<b>Food poisoning</b>	Check food supplies in refrigerator, freezers and cupboards for signs of spoilage. When frozen food begins to defrost it should be cooked, otherwise it should be disposed of in accordance with the instructions from local health authorities.
<b>Loose or dangling electrical wires</b>	Stay away. Advise the authorities if you can.
<b>Broken sewer and water mains</b>	Advise the authorities if you can.
<b>Contaminated flood water in the basement</b>	Disinfect every three days if the flood is severe and the house is occupied for an extended period. For the average home, mix two litres of liquid bleach into the flood water.
<b>Watch for mould</b>	Mould is a health hazard. If mould is present wear a face mask and disposable gloves. Anything that stays wet long enough will grow mould. Dry everything quickly to avoid future health problems.

## SECTION IV

### EMERGENCY SUPPLIES

#### CAR EMERGENCY KIT

Given the agency's large geographical area and the need for travel, the agency provides a car emergency kit for those employees whose position or role requires frequent travelling. Emergency roadside kits are available to all staff of the agency on a sign out basis.

In addition, individuals should consider the following as desired supplies for their vehicle.

✓	Shovel
✓	Sand, salt or kitty litter
✓	Traction mats
✓	Tow chain
✓	Compass
✓	Cloth or roll of paper towels, toilet paper
✓	Warning light or road flares
✓	Extra clothing and footwear
✓	Emergency food pack , water
✓	Axe or hatchet
✓	Booster cables
✓	Ice scraper and brush
✓	Road maps
✓	Matches and a 'survival' candle in a deep can (to warm hands, heat a drink or use as an emergency light)
✓	Fire extinguisher
✓	Methyl hydrate (for fuel line and windshield de-icing)
✓	Flashlight, spare batteries
✓	First-aid kit with seatbelt cutter
✓	Blanket (special 'survival' blankets are best)

#### EMERGENCY SUPPLIES FOR SITES

- The "agency" and/or "personal" kit may include the following items:
  - "Special needs" items for staff and potential clients (infant formula or items for people with disabilities or older people);

- First aid supplies (bandages, adhesive tape, antibiotic ointment, antiseptic towelettes, assorted safety pins, cleansing agent or soap, cold pack, eyewash solution, cotton swabs, disposable gloves and face shield, gauze pads, hydrogen peroxide, lip balm, and prescription medications);
- Candles and matches or lighter;
- Blankets;
- Flashlight and batteries;
- Battery-powered radio or television and extra batteries;
- Duct tape;
- Non-perishable food (this should be replaced every year);
- Bottled water;
- Whistle;
- Playing cards or games;
- Toilet paper and other personal care supplies;
- Radio and batteries or crank radio (so you can listen to news bulletins);
- Backpack/duffel bag (or something else to carry the emergency survival kit in, in case you have to evacuate);
- Extra car keys and cash (including coins/cards for telephone);
- Important papers (identification for everyone, personal documents)

Basic tools (hammer, pliers/wrench, screwdriver set, assortment of fasteners, work gloves);

### **CHECKLIST FOR EMERGENCY FOOD AND WATER SUPPLIES**

Have at least a three-day supply of food and water on hand. Choose ready-to-eat foods that can easily be opened and prepared. Choose food that does not need refrigeration.

✓	At least four litres per person per day - two for drinking and two for food preparation, hygiene and dish washing.
✓	Canned food: soups, stews, baked beans, pasta, meat, poultry, fish, vegetables, fruits
✓	Crackers and biscuits
✓	Honey, peanut butter, syrup, jam, salt and pepper, sugar, instant coffee, tea

➤ **REPLACE CANNED FOOD AND DRY GOODS ONCE A YEAR**

✓	Knives, forks, spoons
✓	Disposable cups and plates
✓	Manual can opener, bottle opener
✓	Fuel stove and fuel (follow manufacturer's instructions).
✓	Waterproof matches and plastic garbage bags

## **FIRST AID**

If you encounter someone who is injured, with the exception of those affected by chemical agents or spills, the following six steps should guide your action. These principles are the basis of first aid and care in any emergency situation:

1. Survey the scene to make sure the scene is safe for you and others.
2. Check the victim for responsiveness. If the person does not respond, call for professional emergency medical assistance (i.e. - call 9-1-1, or other local emergency number).
3. Check and care for life-threatening problems; check the person's airway, breathing and circulation, attend to severe bleeding and shock.
4. When appropriate, check and care for additional problems such as burns and injuries to muscles, bones and joints.
5. Keep monitoring the person's condition for life threatening problems while waiting for medical assistance to arrive.
6. Help the person rest in the most comfortable position and provide reassurance.

These steps help keep you, the casualty and other bystanders safe and increase the casualty's chance of survival.

Following are some common injuries and the steps to take when providing care. Remember: Always apply the six emergency action principles (as explained above) for any injury or illness, and throughout the care.

### ***Bleeding***

- Cover the wound with a dressing and place direct pressure on the wound.
- Elevate the injured area above the level of the heart if you do not suspect a broken bone.

- Cover the dressing with a roller bandage to hold the dressing.
- If the bleeding does not stop and blood soaks through the bandage, apply additional dressings, pads and bandages without removing any of the blood-soaked dressings/pads.
- Provide care for shock.
- Encourage the person to lie down.
- Help the victim maintain normal body temperature.

### ***Burns***

- Stop the burning by cooling the burn with large amounts of clean, cool water.
- Cover the burn with dry, clean, non-stick dressings or cloth.
- Do not break blisters.

### ***Injuries to Muscles, Bones and Joints***

- Rest the injured part.
- Avoid any movements that cause pain.
- Immobilize the injured part before moving the victim and giving additional care.
- Apply ice or a cold pack to control swelling and reduce pain.
- Elevate the injured area to help slow the flow of blood and reduce swelling.

### ***Exposure to Chemical Agents***

If it appears that chemical agents are involved, do not approach the situation, leave the scene as quickly as possible. Leave this situation to the local authorities, which are better equipped to address and contain this type of accident.

People who may have come into contact with a biological or chemical agent may need to go through a decontamination procedure before receiving medical attention. Listen to the advice of local officials on the radio or television to determine what steps you will need to take to protect yourself and your family. Since emergency services will likely be overwhelmed, only call 9-1-1 about life-threatening emergencies.

## **Reduce Care-Giver Risks**

The risk of getting a disease while giving first aid is extremely rare. However, to reduce the risk even further:

- Avoid direct contact with blood, other body fluids and wounds.
- Thoroughly wash your hands with soap and water immediately after giving care.
- Use protective equipment, such as disposable gloves and breathing barriers.
- Be aware of biological exposure risks.

## **FIRST AID SUPPLIES**

First Aid Kits will be monitored on a monthly basis by members of the Health and Safety Committee who will check the contents against the inventory list included in each kit.

To learn how to administer basic first aid, consider taking a **First Aid course**.

Assemble a first aid kit for your workplace and one for each car, to include:

✓	Sterile adhesive bandages in assorted sizes
✓	Safety pins
✓	Cleansing agent/soap
✓	Latex gloves (2 pairs)
✓	Sunscreen
✓	2-inch sterile gauze pads (4-6)
✓	4-inch sterile gauze pads (4-6)
✓	Triangular bandages (3)
✓	Non-prescription drugs (see below)
✓	2-inch sterile roller bandages (3 rolls)
✓	3-inch sterile roller bandages (3 rolls)

✓	Scissors
✓	Tweezers
✓	Moistened towelettes
✓	Antiseptic
✓	Thermometer
✓	Tongue depressors (2)
✓	Tube of petroleum jelly or other lubricant
✓	First Aid manual
✓	Nonprescription drugs: aspirin or other pain reliever, anti-diarrhea medication, antacid, and laxative

## **SECTION V**

### **HEALTH EMERGENCIES**

#### **PURPOSE**

Dealing with health emergencies and responding effectively when they occur is of paramount importance to ensure the health and safety of Hands TheFamilyHelpNetwork.ca staff, clients, volunteers and visitors.

#### **COMMUNICATION AND PREVENTION**

It is the responsibility of the Human Resources Supervisor, jointly with a Occupational Health and Safety member, to

- a) Ensure that HANDS staff receive, on an ongoing basis, current health emergency information from reliable sources (e.g. World Health Organization, Centres for disease Control, Health Canada, Ontario Ministry of Health and Long-Term Care, North Bay and District Health Unit) including relevant public health guidelines.
- b) Recommend to senior management appropriate precautions and procedures to be taken by HANDS staff in the event of a health emergency in the community as declared by the Province of Ontario or the City of North Bay.

#### **EXPOSURES: POSSIBLE AND REPORTED**

In the event of possible (unknown) or reported (known) exposure, it is the responsibility of HANDS staff to

- a) Report the possible or reported exposure to hi/her immediate supervisor.
- b) Adhere to public health guidelines (e.g. voluntary quarantine period).

It is the responsibility of the immediate supervisor to report possible and reported exposures to the following:

- a) The Human Resources Supervisor and relevant Senior Management.
- b) An Occupational Health and Safety representative.

## **CONFIRMED CASES**

It is the responsibility of the Hands staff, who have a confirmed case of a “health emergency”, based on medical diagnosis, to

- a) Receive medical assistance and remain under isolation, as per public guidelines.
- b) Report confirmed illness to his/ her immediate supervisor.

It is the responsibility of the immediate supervisor to report the confirmed case to the following:

- a) The Human Resources Supervisor and relevant Senior Management.
- b) An Occupational Health and Safety representative.

It is the responsibility of the Human Resource Supervisor and the Occupational Health and Safety Representative, in consultation with the Executive Director, to

Advise all affected staff and clients of confirmed cases through the use of telephone, e-mail and/or voice mail.

- a) Ensure that staff and strongly recommend to clients to adhere to public health guidelines (e.g. voluntary quarantine period).
- b) Contact the local District Public Health Unit to determine the appropriate remedial action to be taken in addition to the public health guidelines, if any.
- c) Ensure that staff and strongly recommend that clients follow the remedial action. This may involve arranging for alternative work arrangements or closure of offices.

## SECTION VI

### WINTER DRIVING SAFETY TIPS

#### **Winter Driving**

Winter travel by automobile can be serious business. Be prepared. If you do a lot of winter driving in isolated regions, you might consider having a Citizen's Band radio. \*911 is a free call to police and ambulance on your cellular phone, and \*CAA is a free call for CAA Emergency Road Service (for CAA members).

It's a good idea to take a cellphone with you. It can be very valuable especially if you need help or in an emergency. But don't talk and drive. Drivers should not use a cellphone while the vehicle is in motion. Let a passenger call for you or pull over to a safe spot to place a call for assistance. Cell phones are available to be signed out from each Hands, TheFamilyHelpNetwork.ca site.

See also: [Inclement Weather Policy \(#9-A-07\)](#)

#### **Heed the Warnings**

Local weather offices of Environment Canada issue warnings of impending blizzards, heavy snow, freezing rain or drizzle, cold waves and winds.

Road Conditions on Provincial Highways can be obtained by calling 1-800-268-4686 or calling 1-416-235-4686 within the GTA.

Updated winter driving conditions are also available at [www.mto.gov.on.ca/english/traveller/conditions](http://www.mto.gov.on.ca/english/traveller/conditions)

#### **Know the Hazards**

Blizzard	The most perilous of winter storms combining falling, blowing, drifting snow, winds of 40 km/hour or more, visibility less than 1 km, temperatures less than -10°C; duration: six hours or more.
Heavy snow	Ten centimetres or more in 12 hours, or 15 cm or more in 24 hours. Even less in temperate climates.
Freezing rain or drizzle	An ice storm coating roads, trees, overhead wires, etc. with ice.
Cold wave	A rapid fall in temperature in a short period, requiring greater than normal protective measures.

Winds	The cause of blizzard conditions, drifting, reduced visibility and wind-chill effects.
Black Ice	Where the road ahead looks like black and shiny asphalt. Shaded areas of the road, bridges and overpasses freeze sooner in cold weather, long after the sun has come out.

### **Tune Up Your Car**

Winter weather presents the greatest challenge to your car and its engine. Prepare for winter by getting a complete check-up in the fall and regular tune-ups throughout the year.

### **Check the following systems**

Mechanical System	Your tune-up should include battery, belts, hoses, radiator, coolant/anti-freeze, oil, lights, brakes, exhaust system, heater/defroster, wipers and ignition system.
Battery	Cold weather starts require a fully charged battery. Recharge or replace weak batteries. Check fluid levels, battery posts, voltage regulator and alternator or generator.
Ignition system	Damaged ignition wires or a cracked distributor cap or worn spark plugs can make starting difficult or may cause a sudden breakdown.
Lights	Regularly check that all lights are functioning properly and that headlights are properly aimed.
Brakes	To ensure even braking, brakes should be checked and, if needed, serviced. Pulling, a taut pedal or unusual squealing or grinding may indicate a need for repair.
Tires	<p>Traction is the key to good movement, turning and stopping on wet surfaces. Check the tires and tire pressures at least once a month when the tires are cold and remember that tire air pressure decreases in colder weather. Tires should be properly inflated to the maximum pressure amount shown in the owner's manual or on the door frame. Do not exceed pressure shown on the tire sidewall. Check your spare tire regularly.</p> <p>Identical tires on all four wheels will improve vehicle handling. Mixing tires with different tread patterns, internal construction, and size degrades the stability of the vehicle and should be avoided. Tires marked with the pictograph of a peaked mountain with a snowflake meet specific snow traction performance requirements,</p>

	and have been designed specifically for use in severe snow conditions.
Exhaust system	Have the exhaust system fully checked for leaks that could send carbon monoxide into your vehicle.
Heating and cooling system	Check your radiator and hoses for cracks and leaks. Make sure the radiator cap, water pump and thermostat work properly. Test the strength of the anti-freeze, and test the functioning of the heater and defroster.
Windshield Wipers and Washer	Make sure wipers are in good condition and fill up on winter washer fluid. Blades that streak should be replaced. Make sure there is enough windshield washer fluid in the reservoir and that it is rated in the -40°C temperature range. Carry an extra jug in the vehicle.

### **Prepare The Driver**

Check weather and travel conditions before heading out. Give yourself extra time for travel and if weather is bad, wait for conditions to improve. Plan your route and let someone know which way you'll be travelling, your destination and expected arrival time, especially when driving long distances. If you don't turn up after a reasonable delay, people will know where to search for you. If the going gets tough, turn back or seek refuge. Refer to: [Inclement Weather Policy \(# 9-A-07\)](#)

Call 1-800-268-4686 or check road conditions on-line at [www.mto.gov.on.ca/english/traveller/conditions](http://www.mto.gov.on.ca/english/traveller/conditions)

If you must drive in bad weather, think caution, plan ahead and make sure you have enough fuel. Try to keep the fuel tank at least half full.

Be alert, well-rested and sober behind the wheel. Check mirrors and environment controls before you start. Don't forget to wear your seat belt and to ensure all children are correctly positioned in appropriate child car seats and booster seats. Children aged 12 and under should ride properly buckled up in the back seat.

See and be seen; clear all snow from the hood, roof, windows and lights. Clear all windows of fog. If visibility becomes poor, find a place to safely pull off the road as soon as possible. It's best to stop at a rest area or exit the roadway and go to a protected area.

If the roadside is your only option, pull off the road as far as you can. Other drivers frequently strike vehicles parked at the side of the road. In reduced visibility you should make sure your emergency flashers are on to alert other drivers.

Try to keep to the main roads and drive with caution, measuring your speed to road and weather conditions.

Avoid passing another vehicle if possible, when weather and road conditions are bad.

Wear warm clothes that do not restrict movement.

***If you get trapped in a storm or snow bank - Don't panic!***

- Avoid over-exertion and exposure. Shovelling and bitter cold can kill.
- Stay in your car. You won't get lost and you'll have shelter.
- Keep fresh air in your car. Open a window on the side sheltered from the wind.
- Run your motor sparingly. Beware of exhaust fumes and the possibility of carbon monoxide. Ensure the tailpipe is not blocked by snow.
- Use the candle for heat instead of the car's heater, if possible.
- Set out a warning light or flares.
- Put on the dome light. Overuse of headlights may run your battery down.
- Exercise your limbs vigorously. Keep moving and don't fall asleep.
- Keep watch for traffic or searchers.
- Wear a hat as you can lose up to 60% of your body heat through your head.

**Keep Control Of Your Vehicle To Avoid Collisions**

Winter collisions can occur when your vehicle skids. Remember that not all vehicles respond the same to icy, slippery roads. You must know how to handle your vehicle and how it responds in various weather conditions. Consult your owner's manual and familiarize yourself with your vehicle's braking system and tire traction. You may want to consider taking a driver education course that teaches emergency driving techniques.

Skids can best be avoided by driving for conditions, slowing down, allowing extra time to get to your destination, anticipating lane changes, turns and curves; slowing down in advance; making smooth, precise movements of the steering wheel and by being sensitive to how your vehicle is steering.

Even careful and experienced drivers experience skids. Don't panic! Learn to handle skids and remember that sometimes, the vehicle will skid a second and even third time after the initial skid.

DO NOT PANIC

## **REAR-WHEEL SKIDS**

If the rear wheels lose traction, use these steps to regain control after a skid:

1. Take your foot off the brake if the rear wheels skid due to hard or panic braking.
2. Ease off the gas pedal if the rear wheels lose traction due to hard acceleration (rear-wheel drive).
3. Shift to neutral.
4. Look down the road in the direction you want the front of the car to go and be sensitive to the feel of the car and how it is responding to your steering.
5. To regain control of the vehicle, steer gently in the direction of the skid of the rear of the vehicle. Just before the skid ends, bring the front wheels straight. Sometimes the vehicle will skid in the opposite direction, so you may have to repeat the movement until the vehicle stabilizes.
6. Once the vehicle is straight, return to a driving gear and accelerate gently so that engine speed matches road speed.

## **FRONT-WHEEL SKIDS**

Front-wheel skids are caused by hard braking or acceleration and by entering a curve too fast. When the front wheels lose traction, you lose steering ability. The best way to regain control if the front wheels skid is:

1. If the front wheels skid from hard braking, release the brake. If the wheels spin from loss of traction due to acceleration, ease off on the accelerator (front-wheel drive).
2. Shift to neutral.
3. If the front wheels have been turned prior to the loss of traction, don't move the steering wheel. Since the wheels are skidding sideways, a certain amount of braking force will be extended.
4. Wait for the front wheels to grip the road again. When traction returns, you'll regain steering control.
5. Return to a driving gear and gently steer in the direction you want to travel. Gently accelerate until engine speed matches road speed.

## **FOUR-WHEEL SKIDS**

Sometimes all four wheels lose traction - generally at high speeds under adverse conditions. The most effective way to get your vehicle back under control when all four wheels skid is:

1. Remove your foot from the brake or accelerator.
2. Shift into neutral.

3. Look and steer in the direction you want the front of the car to go.
4. Wait for the wheels to grip the road again. As soon as the wheels regain traction, you will travel in the direction you want to go.
5. Return to a driving gear and maintain a safe speed. NOTE: Avoid using overdrive on slippery surfaces.

## **BRAKING**

To survive on the road in winter, proper braking is essential.

Stopping on a slippery surface requires more distance, so increase your following distance. Focus your attention as far ahead as possible - at least 20 to 30 seconds.

The best way to stop on a slippery surface is to use threshold or controlled braking and shift to neutral. If you don't have anti-lock brakes, the best way to use threshold or controlled braking is to keep the heel of your foot on the floor and use your toes to apply firm, steady pressure on the brake pedal. Stop just short of locking the wheels.

If your heel leaves the floor, the ball of your foot pushes the pedal, and the wheels lock because you're controlling the brake with your thigh muscles, which are incapable of finer control.

Under the stress of trying to stop quickly, drivers almost inevitably overact and lock the wheels. If this happens, release brake pressure one or two degrees, then immediately reapply it with slightly less pressure.

Anti-lock brakes are designed to prevent wheels from locking and retain steering control during panic braking. Sensors located at wheels detect lock-up. The anti-lock system relieves enough pressure to allow the wheel to turn, maintaining steering control.

Do not remove your foot from the brake or pump the pedal. If you apply too much brake pressure and the wheels lock momentarily, you might feel the brake pedal pulse back against your foot. Pumping the pedal works against the system by providing false information.

## SECTION VII

### GENERAL INFORMATION

STAFF ARE ENCOURAGED AT ALL TIME TO ENSURE THEY ARE PREPARED FOR EMERGENCIES AT WORK, IN THE COMMUNITY, AND AT HOME. THE FOLLOWING RESOURCES MAY BE ACCESSED BY STAFF TO ASSIST INDIVIDUALS TO BE PREPARED.

#### WELCOME TO HEALTH CANADA'S EMERGENCY PREPAREDNESS

Health Canada's role in an emergency, whether it's a natural disaster or human caused, is to protect the health of Canadians. In Health Canada, the Centre for Emergency Preparedness Response (CEPR) acts as the coordinating point for dealing with public health emergencies. The Centre, which is active 24 hours a day, 7 days a week, also works closely with other internal experts in areas such as infectious disease, food, blood, nuclear emergencies and chemicals.

Health Canada is also responsible for the National Emergency Stockpile System (NESS), the Emergency Social Services (ESS), the Federal Nuclear Emergency Plan (FNEP), providing emergency health care for First Nations and Inuit communities, the health of travellers entering Canada, occupational health for federal government employees and providing expert health advice when assessing potential threats.

It is important to remember that the likelihood of a terrorist attack in Canada using biological or chemical agents is very remote. Regarding the agents most likely to be used in the event of such an attack, Canada and the United States have agreed on a list of top bioterrorist agents, including anthrax, smallpox, plague, tularemia, botulism and certain viruses that cause viral haemorrhagic fevers. Of the biological agents examined, anthrax is the most likely to be used in a bioterrorist attack. It should be noted that members of the public working sector and community service providers are the likely targeted areas for such attacks. The following define various warning issued:

**Alerts** are issued to communicate information about potential, imminent or actual threats, vulnerabilities or incidents affecting the Government of Canada or other sectors of Canada's critical infrastructure. The issuance of an Alert signals the assessed potential for **serious impact** on Canada's critical infrastructure. Alerts may be time critical and may contain information and analysis not readily available in the public domain. Recipients are encouraged to immediately

consider the real or possible impact on their organization of the information presented in the Alert and to take appropriate action.

**Advisories** are used to communicate information about potential, imminent or actual threats, vulnerabilities or incidents assessed as limited in scope but having **possible impact** on the Government of Canada or other sectors of Canada's critical infrastructure. Advisories may contain information and analysis not readily available in the public domain. Recipients are encouraged to consider the real or possible impact on their organization of the information presented in the Advisory, and to take appropriate action.

**Information Notes** are used to draw attention to information relating to significant threats and vulnerabilities. Information Notes may contain information not readily available in the public domain.

## **INFORMATION ABOUT**

### **Biological Agents**

Biological agents are bacteria or viruses that can be deliberately dispersed in such a way as to cause disease and/or death in people exposed to the agents. A person exposed to a biological agent should obtain immediate medical attention. In combating the personal health implications of bio-terrorism, treatment is better than prevention. Taking antibiotics ahead of time is not recommended. This could lead to an increased risk of side effects in the general population, an increase of drug resistance of the bacteria, and a shortage of supplies.

If you experience sustained or unusual symptoms, seek immediate medical attention. If you have been exposed or think you might have been exposed to a biological agent, but you are not ill, you should still contact the public health authorities as quickly as possible. Public health officials will assess and manage the risks for anyone that has been potentially exposed to a dangerous substance. If need be, post-exposure treatment with antibiotics might be recommended by health officials.

### **Chemical Releases**

Persons exposed to certain chemicals (household, industrial or war chemicals) could suffer injury, disease or death. Hazardous chemicals can be released by accident or through a deliberate act of criminal intent. In either case, it is important to listen to the directions of emergency responders. Sometimes you should seal yourself inside the building you are in ("Shelter-in-Place"), and sometimes you should move to higher elevations or evacuate the area.

Emergency responders are trained to identify hazards and provide appropriate guidance to the public. Chemical agents that could be used by terrorists vary from warfare agents to toxic chemicals commonly used by industry.

When an accidental chemical spill occurs, an evacuation of nearby communities is often ordered as a precautionary measure to safeguard the health and safety of local residents. Stay away from the accident. Advise the nearest police services office. Remember to listen to the radio, emergency responders in your area will provide the necessary instructions.

If you suspect a chemical substance has been released in a closed area, such as a building, avoid breathing any of the fumes and evacuate as quickly as possible. Immediately contact the closest police, fire and ambulance services. Decontamination might be required before you can receive medical attention. Listen to advice from local officials.

Exposure to a chemical substance, may require quarantine and the attention of medical authorities. Because the type of chemical may not be known right away, treatment is based on symptoms. Keep track of symptoms (breathing and heart rate, perspiration, dizziness, skin tone, deliriousness) and communicate them to medical help and public health agencies.

## SECTION VIII

### RESOURCES AND OTHER AVAILABLE INFORMATION

#### HEALTH CANADA

[www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

Material Safety Data Sheets (MSDS) for Infectious Substances

#### SOLICITOR GENERAL

[www.sgc.gc.ca](http://www.sgc.gc.ca)

#### ROYAL CANADIAN MOUNTED POLICE

[www.rcmp-grc.gc.ca](http://www.rcmp-grc.gc.ca)

#### CANADIAN RED CROSS

[www.redcross.ca](http://www.redcross.ca)

#### CANADIAN AUTOMOBILE ASSOCIATION

[www.caa.ca](http://www.caa.ca)

#### OFFICE OF CRITICAL INFRASTRUCTURE PROTECTION AND EMERGENCY PREPAREDNESS

Communications

122 Bank Street, 2<sup>nd</sup> Floor, Ottawa ON, K1A 0W6

Telephone: (613)944-4875 or 1-800-830-3118

Fax: (613) 998-9589

E-mail: [communications@ocipep-bpiepc.gc.ca](mailto:communications@ocipep-bpiepc.gc.ca)

Internet: <http://www.ocipep-bpiepc.gc.ca>

#### PROVINCIAL/TERRITORIAL EMERGENCY MEASURES ORGANIZATIONS

##### *Ontario*

Emergency Measures Ontario

Telephone: (416) 314-8615

Fax: (416) 314-3758

#### MUNICIPAL EMERGENCY SERVICE PROVIDERS

##### *City of North Bay- City Hall*

Telephone: (705) 474-0400

##### *North Bay & District Health Unit*

681 Commercial Street, North Bay ON, P1B 4E7

Telephone: (705) 474-1400

##### *North Bay General Hospital*

Emergency: 9-1-1

*Hands TheFamilyHelpNetwork.ca*

Emergency Plan

PO Box 2500, North Bay ON, P1B 5A4  
Telephone: (705) 474-8600

***North Bay Fire Department***

Emergency: 9-1-1  
Station 1 & Administration: (705) 474-5662

***North Bay Police Services***

Emergency: 9-1-1  
Telephone: (705) 472-1234

***North Bay and District Critical Incident Stress Team Inc.***

119 Princess Street West, North Bay ON, P1B 6C2  
Telephone: (705) 474-5662  
Fax: (705) 4746290

***North Bay Hydro***

74 Commerce Crescent, North Bay ON, P1B 8Y5  
Telephone: (705) 474-8100

***Emergency Medical Services- Land Ambulance***

Emergency: 9-1-1  
Telephone: (705) 474-2151

***Union Gas***

Gas Emergencies Only: 1-877-969-0999  
Inquiries: 1-888-774-3111