STRATHMERE LODGE

Emergency Management Program

LOSS OF ONE OR MORE ESSENTIAL SERVICES RESPONSE PLAN

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TABLE OF CONTENTS

1. PURPOSE

The purpose of this Plan is to establish a coordinated response to the loss or significant disruption of one or more essential services required for the safe operation of Strathmere Lodge and the care of residents.

The Plan is intended to:

- protect residents, staff and others;
- maintain essential resident care;
- establish alternative means of providing critical services;
- identify and obtain external assistance;
- monitor the duration and consequences of service disruption;
- coordinate related emergency plans;
- determine when continued occupancy can no longer be safely maintained; and
- support recovery and restoration of normal operations.

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2. SCOPE AND DEFINITION

For purposes of this Plan, essential services include:

- electrical power;
- heating;
- cooling/air conditioning;
- municipal water supply;
- sewer/sanitary service;
- natural gas;
- elevators;
- resident-staff communication/nurse call system;
- telephone and communications;
- Internet/network/clinical information systems;
- medication refrigeration;
- Dietary services/equipment; and
- Laundry services.

Other service failures may be managed under this Plan where they significantly affect resident safety or the Home's ability to operate.

Routine Disruption Versus Emergency

Not every service interruption constitutes an emergency.

A brief interruption that can be safely managed through routine maintenance or downtime procedures does not necessarily require activation of this Plan.

The Plan shall be activated where the loss of one or more services creates, or could reasonably create, an imminent threat to resident health or well-being requiring immediate action.

This is consistent with the definition of "emergency" under provincial long-term care home legislation (s. 268 of O. Reg. 246/22).

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3. GUIDING PRINCIPLES AND ACTIVATION

The basic response to loss of an essential service is:

IDENTIFY → ASSESS → ACTIVATE CONTINGENCY → MAINTAIN RESIDENT CARE → OBTAIN REPAIR/EXTERNAL SUPPORT → MONITOR → RESTORE OR ESCALATE

Upon significant service failure:

1. IDENTIFY

Determine:

- service affected;
- areas affected;
- known or suspected cause;
- anticipated duration, if known;
- related systems affected.

2. ASSESS RESIDENT IMPACT

Determine whether the disruption affects:

- life-support or clinical equipment;
- medications;
- temperature;
- food/fluid;
- sanitation;
- resident communication;

- mobility;
- resident supervision;
- other essential care.

3. ACTIVATE CONTINGENCY

Implement the appropriate essential service-specific procedure in this Plan.

4. OBTAIN ASSISTANCE

Contact:

- Environmental Services/Maintenance;
- appropriate contractor/service provider;
- utility;
- emergency services (i.e., 911), when necessary.

5. MONITOR

Do not assess the event solely on whether a temporary workaround exists.

Consider:

severity + duration + resident vulnerability + number of services affected.

6. ESCALATE

Activate related emergency response plans or relocate/evacuate residents where safe care can no longer be maintained.

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4. INCIDENT COMMAND

The **Charge Nurse (RN)** shall assume initial Incident Command after hours until relieved by the Administrator or designate.

The Incident Commander shall:

- determine the extent of the service disruption;
- ensure resident safety;
- contact Environmental Services/Maintenance;
- initiate contingencies;
- notify Lodge leadership;
- coordinate external assistance;

- maintain essential resident care;
- monitor the duration and cumulative consequences;
- activate related emergency response plans as necessary;
- determine, with leadership/emergency authorities as appropriate, whether relocation or evacuation is required.

The **Environmental Services Manager** shall provide technical/building systems leadership.

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5. ELECTRICAL POWER FAILURE

Strathmere Lodge is equipped with a **whole-building diesel emergency generator**.

The generator supports the entire building, including:

- heating;
- emergency and building lighting;
- cooling/air conditioning;
- Dietary equipment;
- medication refrigeration;
- resident-staff communication/nurse call system;
- both elevators;
- Laundry equipment;
- essential clinical/safety equipment; and
- other building systems.

This provides capacity beyond the minimum systems expressly identified by provincial long-term care home legislation (s. 22 of O. Reg. 246/22).

Upon Power Failure

Staff shall:

- remain calm and reassure residents;
- verify generator operation;
- report any systems that have not transferred to generator power;
- discontinue non-essential electrical loads if directed;
- monitor residents requiring electrically powered equipment.

Environmental Services shall:

- confirm generator operation;
- assess alarms/system status;
- monitor generator performance;

- determine anticipated utility outage duration;
- contact the electrical utility/contractors as appropriate.

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6. GENERATOR FAILURE / EXTENDED POWER OUTAGE

The generator has approximately **4–5 days of operating capacity before refuelling**, subject to actual load and operating conditions.

Generator Service Provider

CF Industrial

Emergency Diesel Fuel Provider

McRoberts Fuels

During an extended outage, Environmental Services shall:

- monitor generator operation;
- monitor fuel levels;
- estimate fuel consumption;
- contact McRoberts Fuels **well before fuel reaches a critical level**;
- coordinate generator servicing with CF Industrial as required;
- assess competing demands and conserve non-essential energy where appropriate.

Generator Failure

Loss of both utility power **and** generator power constitutes a potentially serious emergency.

Immediately assess:

- lighting;
- elevators;
- heating/cooling;
- nurse call;
- medication refrigeration;
- Dietary;
- resident clinical equipment;
- communications;
- fire/life-safety systems.

Call CF Industrial and other required emergency/technical services immediately.

Prepare for resident relocation/evacuation if essential resident services cannot be safely maintained.

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7. HEATING FAILURE

Strathmere Lodge is heated through **natural-gas boilers**.

The Home has **two boilers**, providing redundancy.

The heating system is generator-supported during electrical outages.

Provincial long-term care home legislation (O. Reg. 246/22) requires long-term care homes to maintain a minimum temperature of **22°C**, subject to the regulatory provisions.

Upon significant heating failure:

- notify Environmental Services;
- determine whether one boiler can maintain service;
- contact the appropriate contractor;
- monitor indoor temperatures;
- close unnecessary exterior doors/windows;
- provide additional clothing/blankets;
- relocate residents away from colder areas where necessary;
- identify particularly vulnerable residents;
- consider safe supplemental heating options only where approved.

If temperatures cannot be safely maintained:

Activate Natural Disasters/Extreme Weather Plan → internal relocation → partial/full evacuation as necessary.

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8. COOLING / AIR-CONDITIONING FAILURE

Strathmere Lodge is fully air-conditioned and the cooling system is supported by the emergency generator.

Upon cooling system failure during warm conditions:

- notify Environmental Services;
- determine affected areas;
- monitor and document temperatures;
- activate the Home's Heat Related Illness Prevention and Management Plan where applicable;
- maintain hydration;
- reduce unnecessary resident exertion;
- relocate residents to cooler areas where appropriate;
- increase monitoring of residents vulnerable to heat-related illness;
- obtain emergency repairs.

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9. WATER SUPPLY FAILURE

Strathmere Lodge receives municipal water.

If water supply is lost:

- confirm extent/duration with the municipality;
- immediately assess potable (safe) water inventory;
- conserve available water;
- implement alternative sanitation procedures;
- obtain external potable (safe) water.

Potable (Safe) Water Resources

On-site emergency preparedness target: approximately 1,200 litres

Emergency potable water supplier: Carruthers Water Delivery

Additional bottled water shall be procured as required.

If water remains available but is unsafe:

Activate the Boil Water / Drinking Water Advisory Response Plan.

If water intrusion/flooding occurs:

Activate the Flood Emergency Response Plan.

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10. SEWER / SANITARY SERVICE FAILURE

The Home's sewer service is primarily **gravity-fed**.

Upon sewer/sanitary failure:

- immediately notify Environmental Services;
- restrict use of affected toilets/sinks/drains as required;
- contact the Municipality/qualified contractor;
- prevent residents from entering contaminated areas;
- implement alternative toileting/sanitation measures;
- involve the IPAC Lead where sewage contamination is present;
- assess impact on Dietary and resident care.

If sewage backs up into the building:

Activate the Flood Emergency Response Plan – Sewage Backup provisions.

A prolonged inability to maintain safe toileting and sanitation may require relocation or evacuation.

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11. NATURAL GAS SERVICE FAILURE

This section applies to **loss of natural gas service without evidence of a leak**.

For a suspected gas leak, activate the Lodge's **Gas Leak Response Plan**.

Loss of natural gas would affect:

- heating;
- domestic hot water; and
- Dietary equipment.

Immediately:

- notify Environmental Services;
- contact the gas utility/service provider;
- determine anticipated duration;
- assess indoor temperature;
- assess hot water availability;

- implement Dietary contingencies;
- conserve available hot water where applicable;
- assess resident hygiene and clinical requirements.

Because both boilers rely on natural gas, boiler redundancy **does not provide redundancy against loss of the gas supply itself**.

A prolonged gas outage during cold weather could therefore become a significant emergency requiring relocation/evacuation.

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12. ELEVATOR FAILURE

Strathmere Lodge has **two elevators**, both generator-supported.

Where one elevator fails:

- take the affected elevator out of service;
- notify Environmental Services/elevator service provider;
- maintain the remaining elevator for essential resident/service movement;
- prioritize clinical and resident transportation.

Where **both elevators fail**:

- immediately assess residents requiring movement between floors;
- minimize unnecessary inter-floor movement;
- relocate staff/resources as necessary to maintain care on each floor;
- establish contingency arrangements for meals, medications and supplies, as applicable;
- assess evacuation implications.

Do not manually move residents on stairs except in accordance with approved emergency/evacuation procedures.

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13. RESIDENT-STAFF COMMUNICATION / NURSE CALL SYSTEM FAILURE

Strathmere Lodge uses the **Austco nurse call system**.

Service Provider

KR Communications

The system is generator-supported during electrical outages.

However, a nurse-call system failure can occur independently of electrical power.

Upon failure:

- notify Charge Nurse;
- contact Environmental Services/Maintenance
- contact KR Communications (contractor);
- identify areas affected;
- communicate the outage to staff;
- identify residents at greatest risk;
- implement an alternative means for residents to summon assistance where available;
- initiate **enhanced scheduled staff rounds**;
- maintain increased observation of residents unable to independently seek assistance;
- document the contingency response.

The Nurse shall implement 15-minute rounding checks on residents for the duration of a nurse call system outage.

Generator availability does not eliminate the need for a nurse-call system downtime procedure.

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14. TELEPHONE AND COMMUNICATIONS FAILURE

Normal communication resources include:

- landline telephones;
- cellular telephones;
- radios/walkie-talkies.

Contact the County IT Department for support/assistance (phone: 519-930-1005).

If landlines fail:

Use cellular phones.

If cellular service fails:

Use landlines where operational and radios/walkie-talkies for internal communication.

If multiple systems fail:

- contact the County IT Department for support/assistance (phone: 519-930-1005).
- distribute radios to key personnel;
- establish designated communication points;
- use runners where necessary;
- maintain a written communication log;
- establish an external communication method as soon as possible.

911/emergency communications shall receive priority.

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15. INTERNET / IT / CLINICAL INFORMATION SYSTEM FAILURE

Loss may affect:

- Internet;
- internal network;
- PointClickCare;
- eMAR/eTAR;
- email;
- other electronic systems.

Activate established **IT/clinical downtime procedures (c**ontact the County IT Department for support/assistance at 519-930-1005).

These include access to **paper MARs and other paper documentation processes**.

Registered staff shall ensure continuity of:

- medication administration;
- treatment documentation;
- physician/nurse practitioner orders;
- resident assessments;
- clinical communication.

Information recorded during downtime shall be reconciled/transcribed into the appropriate health record system following restoration.

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16. MEDICATION REFRIGERATION FAILURE

Medication refrigerators are generator-supported.

Where an individual refrigerator fails despite continued power:

- keep refrigerator doors closed;
- record/monitor temperature;
- notify registered staff;
- notify Maintenance;
- identify affected medications;
- arrange alternate approved refrigerated storage;
- contact the Director of Resident Care/alternate regarding medication stability where required.

Do not discard medications solely because refrigeration has failed without determining applicable storage/stability requirements.

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17. DIETARY SERVICE / EQUIPMENT FAILURE

Essential Dietary equipment is generator-supported.

During equipment/service disruption, Dietary shall:

- assess refrigerators/freezers;
- monitor food temperatures;
- protect food from spoilage;
- assess cooking capability;
- modify menus as necessary;
- prioritize resident dietary and texture requirements;
- obtain alternate food/service resources where necessary.

Where natural gas is unavailable, Dietary shall identify equipment that remains operational electrically and implement an appropriate contingency menu.

Food safety requirements continue during an emergency.

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18. LAUNDRY SERVICE FAILURE

Laundry equipment is generator-supported.

Where Laundry equipment or service nevertheless becomes unavailable:

- assess available clean linen inventory;
- prioritize essential linen requirements;
- conserve linen appropriately without compromising resident care or IPAC;
- adjust Laundry operations;
- obtain repairs.

Strathmere Lodge has an **outside Laundry service arrangement with Brite Linen and Laundry Services** that may be activated where required.

A Laundry interruption alone will generally be manageable without evacuation; however, its impact shall be reassessed if prolonged or combined with other service failures.

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19. MULTIPLE ESSENTIAL SERVICE FAILURES

This deserves particular emphasis.

A single service failure may be manageable while the **combined effect of several failures may make the Home unsafe**.

For example:

Power failure + generator failure + extreme heat

or

Natural gas loss + winter storm + prolonged utility restoration

or

Water loss + sewer failure + Dietary disruption

The Incident Commander shall therefore consider the **cumulative impact**, not simply evaluate each service independently.

Assessment shall include:

- resident safety;
- temperature;
- water;
- sanitation;
- food;
- medications;
- staffing;
- communications;
- clinical equipment;
- expected duration.

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20. RESIDENT RELOCATION AND EVACUATION

Loss of an essential service does **not automatically require evacuation**.

Where safe resident care can continue using contingencies, sheltering in place is generally preferable.

Escalation should follow:

Service contingency → internal redistribution of resources → internal resident relocation → partial evacuation → full evacuation

Evacuation shall be considered where essential needs can no longer reasonably be maintained.

Activate the **Evacuation Emergency Response Plan** when required.

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21. ROLES AND RESPONSIBILITIES

Charge Nurse / Incident Commander

- Activate Plan.
- Assess resident impact.
- Implement immediate contingencies.
- Notify Environmental Services and Lodge leadership.
- Maintain resident care.

- Coordinate departments.
- Monitor duration and cumulative effects.
- Activate related emergency response plans, if applicable.

Administrator/alternate

- Assume/coordinate overall Incident Command as appropriate.
- authorize extraordinary operational resources;
- liaise with County/municipal/emergency partners;
- oversee external communications;
- determine prolonged operation/evacuation strategy.

Environmental Services Manager

- Assess building systems.
- coordinate contractors/utilities;
- oversee generator operation;
- coordinate fuel;
- assess HVAC, water, sewer, elevators and infrastructure;
- provide restoration estimates.

Director of Resident Care (DRC)

- Oversee clinical continuity.
- identify high-risk residents;
- coordinate nursing resources;
- assess staffing;
- oversee medication/treatment contingencies.

Dietary Manager

- Maintain food/fluid services.
- monitor refrigeration;
- implement emergency menus;
- coordinate water requirements.

IPAC Lead

- Advise regarding water/sewer/sanitation issues.
- support alternative care practices;
- assess infection risks.

All Staff

- Follow Incident Command direction.
- conserve resources as directed;
- report service failures immediately;
- maintain resident safety;
- implement assigned downtime procedures.

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22. COMMUNICATIONS

During a significant essential service emergency, communicate as appropriate with:

- residents;
- Substitute Decision Makers/families;
- staff;
- Residents' Council;
- Family Council;
- service providers;
- utilities;
- County and emergency authorities (fire, police, EMS).

Provide information:

- at the beginning of the emergency;
- following significant changes;
- regarding resident impacts/relocations;
- when normal operations are restored.

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23. RECOVERY AND RESTORATION

A service shall be returned to normal operation only when safe to do so.

Environmental Services/appropriate departments shall:

- confirm repair;
- inspect/test affected systems as appropriate;
- reset equipment;
- assess downstream impacts;
- replenish consumed emergency supplies;
- restore normal operations systematically.

Clinical departments shall:

- reconcile downtime documentation;
- assess residents affected by the disruption;
- restore normal medication/treatment processes.

Following an emergency activation:

- debrief affected persons as applicable;
- identify persons requiring support;
- evaluate response;
- identify corrective actions.

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24. DOCUMENTATION AND REPORTING

Document:

- service(s) lost;
- date/time;
- areas affected;
- known cause;
- Plan activation;
- resident impact;
- contingencies implemented;
- contractors/utilities contacted;
- generator operation/fuel where relevant;
- service restoration estimates;
- communications;
- relocation/evacuation;
- time of restoration;
- recovery activities.

Resident-specific clinical impacts shall be documented in the health record.

The Administrator/DRC shall determine applicable Ministry of Long-Term Care or other reporting requirements.

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25. TRAINING, TESTING AND REVIEW

Staff, volunteers and students shall receive training on their responsibilities under the emergency plans appropriate to their responsibilities and before performing those responsibilities, and at least annually thereafter.

The **Loss of One or More Essential Services Plan shall be tested annually** in accordance with provincial long-term care home legislation (O. Reg. 246/22). This may entail annual exercise **rotational scenarios**, rather than testing "power outage" every year.

For example:

Year 1 – Extended electrical outage / generator operation

Year 2 – Nurse-call system failure

Year 3 – Natural gas outage during winter

Year 4 – Municipal water outage

Year 5 – Multiple simultaneous service failures

APPENDIX A – ESSENTIAL SERVICES QUICK RESPONSE GUIDE

ESSENTIAL SERVICE FAILURE

1. IDENTIFY

WHAT failed?

WHERE?

HOW MANY residents/services are affected?

2. NOTIFY

Charge Nurse + Environmental Services

3. ASSESS

Life safety → Clinical equipment → Temperature → Water → Sanitation → Food → Medications → Communications

4. ACTIVATE BACKUP

Use the service-specific contingency.

5. GET HELP

Utility / Contractor / Service Provider / 911 as appropriate

6. MONITOR DURATION

A manageable outage can become an emergency if prolonged.

7. WATCH FOR MULTIPLE FAILURES

Assess cumulative impact.

8. ESCALATE

Contingency → Internal Relocation → Partial Evacuation → Full Evacuation

APPENDIX B – ESSENTIAL SERVICES CONTINGENCY MATRIX

Service Lost	Immediate Contingency	Key External Resource
Electricity	Whole-building generator	Electrical utility / CF Industrial
Generator	Assess critical systems; repair; prepare escalation	CF Industrial
Generator fuel	Monitor/resupply early	McRoberts Fuels
Heating	Second boiler/repair; temperature measures	HVAC contractor
Cooling	Heat plan; hydration; cooler areas	HVAC contractor
Water	1,200 litre reserve + external potable water	Carruthers Water Delivery
Sewer	Restrict use; alternate sanitation	Municipality/contractor
Natural gas	Heating/hot water/Dietary contingencies	Gas utility
One elevator	Use remaining elevator	Elevator contractor
Both elevators	Floor-based care/resources; evacuation assessment	Elevator contractor
Austco nurse call system	Enhanced rounds + alternative call method	KR Communications
Landlines (phone system)	Cell phones/radios	County IT Dept.
Internet/PCC/eMAR	Paper downtime procedures/MARs	County IT Dept.
Medication refrigerator	Alternate refrigeration + Pharmacy assessment	Pharmacy/Maintenance/DRC
Dietary equipment	Contingency menus/equipment	Service contractors

Service Lost	Immediate Contingency	Key External Resource
Laundry	Linen conservation/external Laundry	Brite Linen and Laundry Services