

**London-Middlesex Long Term Care Homes  
Collaborative Emergency Shelter Plan**

**Purpose:** To provide a summary of resources available and 24-hour contact for decision makers at all London-Middlesex Long Term Care Homes in the event that any Long-Term Care Home needs emergency shelter for its residents.

**Scope:** This is a mutual agreement between the *evacuating home* and the *receiving home* to provide assistance in the event an evacuation of either location is required.

**Please note:** Each resident's original "home" is ultimately responsible for ensuring appropriate care and services for those residents remaining under the care of said LTC home, regardless of the resident's relocation status during a disaster. All costs incurred for care and services provided are the responsibility of the resident's "home".

**Responsibilities of the *Evacuating Home* include, but are not limited to:**

- Ensure appropriate care and services for the resident(s)
- Promptly notify the receiving home of the potential to evacuate
- Promptly notify the receiving home when the decision to evacuate has been made
- Evacuate residents, utilizing own resources, to the receiving home
- Supplement the receiving home's staff
- Make arrangements with external providers to provide the following items as quickly as possible:
  - Resident medications and medication storage unit
  - Medical supplies and equipment
  - Food and water
  - Medical Records
  - Blankets as needed
  - Staff

**Responsibilities of the *Receiving Home* include, but are not limited to:**

- Provide a person of contact upon notification of imminent evacuation.
- Receive residents and direct to area where they will be sheltered.
- Coordinate appropriate use of medical supplies and services.
- Integrate evacuating home's staff into resident care planning
- Integrate evacuating home's Kitchen staff.
- Provide dietary needs using food supplies from evacuating home.

In the event of a disaster or other emergency that damages both homes, the senior management of both locations, in collaboration with local emergency response supports, determine to what extent each home may be able to assist the other.

***This agreement will be automatically renewed on January 31<sup>st</sup> of each year, without action by the participating homes who have consented to participate in the Shelter Agreement. Any home may terminate this agreement with a thirty (30) day written notice".***

**PARTICIPATING HOMES**

- |                                  |                                      |
|----------------------------------|--------------------------------------|
| 1. Babcock Community Care Centre | 2. Chartwell London                  |
| 3. Chartwell Parkhill            | 4. Chelsey Park                      |
| 5. Country Terrace               | 6. Craigwiel Gardens                 |
| 7. Dearness Home                 | 8. Earls Court                       |
| 9. Elmwood Place                 | 10. Extendicare London               |
| 11. Henley Place                 | 12. Kensington Village               |
| 13. McCormick Home               | 14. McGarrell Place                  |
| 15. Meadowpark London            | 16. Middlesex Terrace                |
| 17. Mount Hope Centre for LTC    | 18. Peoplecare Oakcrossing           |
| 19. Southbridge London           | 20. Sprucedale Care Centre           |
| 21. Strathmere Lodge             | 22. The Village of Glendale Crossing |
| 23. Westmount Gardens            |                                      |

***It is the responsibility of each Executive Director/ Administrator to keep their Home's information up to date should it change during the calendar year.***

<b>Date:</b>	February 21, 2023
<b>LTC Home:</b>	Babcock Community Care Centre
<b>Address:</b>	196 Wellington Street, Wardsville, ON N0L2N0
<b>Telephone #:</b>	519-693-4415
<b>Fax#:</b>	519-693-4876
<b>Name of person completing this form:</b>	Joe Babcock
<b>E-mail Address:</b>	admin@babcockonline.com

Number of square feet of Shelter you are able to provide:	1000
How many residents could you accommodate?	2
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	Yes
Bathrooms?	Yes

**Emergency Contact Name:** Joe Babcock

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Administrator	
<b>Contact Information:</b>	Work	519-693-4415
	Home	519-436-1005
	<b>Cell (Indicate if Text ok)</b>	519-359-3645 – text ok

<b>Alternate Contact Name:</b>	Jeff Babcock	
<b>Position:</b>	Administrative Director	
<b>Contact Information:</b>	Work	519-693-4415
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-868-8224 – text ok

<b>Director of Care:</b>	Janet Lunn	
	Work	519-693-4415
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-360-6051

**Other pertinent information:**

Unable to accept covid positive residents

Date:	February 15, 2023
LTC Home:	Chartwell London LTC
Address	2000 Blackwater Road London
Telephone #:	519-434-2727
Fax#:	519-679-3442
Name of person completing this form:	Lisa Smith
E-mail Address:	<a href="mailto:lsmith@chartwell.com">lsmith@chartwell.com</a>

Number of square feet of Shelter you are able to provide:	280
How many residents could you accommodate?	2
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No, mattresses available
Bathrooms?	Yes

**Emergency Contact Name:** Manager on Call

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Manager on Call	
Contact Information:	Work	519-434-2727
	Home	
	Cell (Indicate if Text ok)	226-236-9725

Alternate Contact Name:	Maureen Cooke	
Position:	PSSM	
Contact Information:	Work	519-434-2727 Ext 238
	Home	
	Cell (Indicate if Text ok)	

Director of Care:	Monique Davis	
Contact Information:	Work	519-434-2727 Ext 225
	Home	
	Cell (Indicate if Text ok)	519-694-1969

**Other pertinent information:**

<b>Date:</b>	February 16 2023
<b>LTC Home:</b>	Chartwell Parkhill LTC
<b>Address</b>	250 Tain Street, Parkhill, ON N0M 2K0
<b>Telephone #:</b>	519-294-6342
<b>Fax#:</b>	519-294-0107
<b>Name of person completing this form:</b>	Tania Taylor
<b>E-mail Address:</b>	tataylor@chartwell.com

Number of square feet of Shelter you are able to provide:	600 -sunroom, 60-lounge, 100- 2 <sup>nd</sup> lounge
How many residents could you accommodate?	15
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No- but mattresses available
Bathrooms?	Visitor- accessible washrooms

**Emergency Contact Name:** Tania Taylor

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Administrator and Director of Care	
<b>Contact Information:</b>	Work	519-294-6342 ext 222
	Home	226-234-4914
	<b>Cell (Indicate if Text ok)</b>	519-808-4479

<b>Alternate Contact Name:</b>	Jennifer Mum	
<b>Position:</b>	Environmental Manager	
<b>Contact Information:</b>	Work	519-294-6342 ext 230
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-520-7628

<b>Director of Care:</b>	Tania Taylor	
	Work	519-294-6342 ext 222
	Home	226-234-4914
	<b>Cell (Indicate if Text ok)</b>	519-808-4479

**Other pertinent information:**

Date:	February 21, 2023
LTC Home:	Chelsey Park LTC
Address	310 Oxford Street West, London ON
Telephone #:	519-432-1855 Ext. 225
Fax#:	519-679-7524
Name of person completing this form:	Connie Redmond
E-mail Address:	Connie.redmond@southbridgecare.ca

Number of square feet of Shelter you are able to provide:	600 sq feet
How many residents could you accommodate?	8
Can you provide food for those you are sheltering?	yes
Can you provide beds?	8
Bathrooms?	No/ public washroom in hallway male and female washrooms

**Emergency Contact Name:** Connie Redmond

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Executive Director	
Contact Information:	Work	519-432-1855 ext. 225
	Home	
	Cell (Indicate if Text ok)	519-495-2681

Alternate Contact Name:	Robert Nightingale	
Position:	Environmental Services Manager	
Contact Information:	Work	519-432-1855 ext. 227
	Home	
	Cell (Indicate if Text ok)	1-437-349-3213 text is ok

Director of Care:	Diana Sanchez- Guerra	
Contact Information:	Work	519-432-1855 ext. 264
	Home	
	Cell (Indicate if Text ok)	225-234-1247

**Other pertinent information:**

Date:	February 24, 2023
LTC Home:	Country Terrace Long Term Care Home
Address	10072 Oxbow Dr.
Telephone #:	519-657-2955
Fax#:	519-657-8516
Name of person completing this form:	Christie Patterson
E-mail Address:	<a href="mailto:cpatterson@omniway.ca">cpatterson@omniway.ca</a>

Number of square feet of Shelter you are able to provide:	0
How many residents could you accommodate?	0
Can you provide food for those you are sheltering?	
Can you provide beds?	
Bathrooms?	

**Emergency Contact Name:** Christie Patterson

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Administrator	
Contact Information:	Work	519-657-2955
	Home	
	Cell (Text ok)	519-671-6140

Alternate Contact Name:	Will Martyn	
Position:	Environmental Service Manager	
Contact Information:	Work	519-657-2955
	Home	
	Cell (Text ok)	226-973-7294

Director of Care:	Maureen Kelly	
	Work	519-657-2955
	Home	
	Cell (Text ok)	519-476-6733

**Other pertinent information:**

Country Terrace is in the middle construction until the end of 2024.

<b>Date:</b>	February 27, 2023
<b>LTC Home:</b>	Craigwiel Gardens
<b>Address:</b>	221 Ailsa Craig Main Street, Ailsa Craig, Ontario. NOM 1A0
<b>Telephone #:</b>	519 293-3215
<b>Fax#:</b>	519 293 3941
<b>Name of person completing this form:</b>	Ernie Harris
<b>E-mail Address:</b>	eharris@craigwielgardens.on.ca

Number of square feet of Shelter you are able to provide:	400
How many residents could you accommodate?	4
Can you provide food for those you are sheltering?	YES
Can you provide beds?	NO
Bathrooms?	YES

**Emergency Contact Name:** Ernie Harris

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	CEO	
<b>Contact Information:</b>	Work	519 293-3215 EXT.222
	Home	519 472-9267
	<b>Cell (Indicate if Text ok)</b>	519 852-3394

<b>Alternate Contact Name:</b>	Jeff Taylor	
<b>Position:</b>	Maintenance Coordinator	
<b>Contact Information:</b>	Work	519 293-3215 EXT. 278/234
	Home	
	<b>Cell (Indicate if Text ok)</b>	519 777-8402

<b>Director of Care:</b>	Nicole Fleischauer	
	Work	519 293-3215 EXT.223
	Home	
	<b>Cell (Indicate if Text ok)</b>	519 872-2468

**Other pertinent information:**

Date:	February 10, 2023
LTC Home:	Dearness Home
Address	710 Southdale Road
Telephone #:	519-661-0400
Fax#:	519-661-0446
Name of person completing this form:	Eileen Marion-Bellemare
E-mail Address:	ebellemare@london.ca

Number of square feet of Shelter you are able to provide:	700 (as of May1/23 – prior to we have no space or beds available due to construction)
How many residents could you accommodate?	10
Can you provide food for those you are sheltering?	yes
Can you provide beds?	no
Bathrooms?	yes

**Emergency Contact Name:** Leslie Hancock

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Administrator – Leslie Hancock	
Contact Information:	Work	519-661-2489 x8260
	Home	
	Cell (Indicate if Text ok)	226-448-5292

Alternate Contact Name:	Lina Reales	
Position:	Manager of Environmental Services	
Contact Information:	Work	519-661-2489 X8229
	Home	
	Cell (Indicate if Text ok)	226-268-0376

Director of Care:	Eileen Marion-Bellemare	
	Work	519-661-2489 x8263
	Home	
	Cell (Indicate if Text ok)	226-268-6190

**Other pertinent information:**

<b>Date:</b>	February 23, 2023
<b>LTC Home:</b>	Earls Court Village
<b>Address</b>	1390 Highbury Ave north
<b>Telephone #:</b>	519-601-5088
<b>Fax#:</b>	519-601-5388
<b>Name of person completing this form:</b>	Rob Bissonnette
<b>E-mail Address:</b>	rbissonnette@svch.ca

Number of square feet of Shelter you are able to provide:	840
How many residents could you accommodate?	4
Can you provide food for those you are sheltering?	yes
Can you provide beds?	No, but mattresses available
Bathrooms?	Visitor accessible washroom

**Emergency Contact Name:** Rob Bissonnette

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Executive Director	
<b>Contact Information:</b>	Work	519-601-5088 Ext 501
	Home	519-851-5915 (cell)
	<b>Cell (Indicate if Text ok)</b>	

<b>Alternate Contact Name:</b>	Dave Pranger	
<b>Position:</b>	Director of Environmental Services	
<b>Contact Information:</b>	Work	519-601-5088 ext 501
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-520-9793

<b>Director of Care:</b>	Kani Sundaram	
	Work	519-601-5088 ext 501
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-933-7327

**Other pertinent information:**

<b>Date:</b>	February 9, 2023
<b>LTC Home:</b>	Elmwood Place
<b>Address</b>	3400 Morgan Ave London ON N6L 0G7
<b>Telephone #:</b>	519-433-7259
<b>Fax#:</b>	519-660-0158
<b>Name of person completing this form:</b>	Lisa Maynard
<b>E-mail Address:</b>	Lisa.Maynard@reveraliving.com

Number of square feet of Shelter you are able to provide:	
How many residents could you accommodate?	4
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	3 cots and 1 Queen non-medical bed
Bathrooms?	yes

**Emergency Contact Name:** Lisa Maynard

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Executive Director	
<b>Contact Information:</b>	Work	226-268-4755
	Home	519-317-3776
	<b>Cell (Indicate if Text ok)</b>	yes

<b>Alternate Contact Name:</b>	Jennifer Kunz	
<b>Position:</b>	Resident Services Coordinator	
<b>Contact Information:</b>	Work	519-433-7259 x 2004
	Home	519-476-4768
	<b>Cell (Indicate if Text ok)</b>	yes

<b>Director of Care:</b>	Sarah Hind	
	Work	519-433-7259 x2003
	Home	
	<b>Cell (Indicate if Text ok)</b>	Yes 226-973-4786

**Other pertinent information:**

We have a hospitality suite centrally located on the second floor near the elevator equipped with the queen-sized bed, call bell system, and separate washroom.

3 decent sized cots (equal to a twin bed) that are available. They would likely be located in the Den on each home area, which has a call button and door.

Common resident washroom located on each home area which would be used.

Date:	February 7, 2023
LTC Home:	Extendicare London
Address:	860 Waterloo Street, London, ON; N6A 3W6
Telephone #:	519-433-6658
Fax#:	519-642-1711
Name of person completing this form:	Jeff Turnbull
E-mail Address:	jturnbull@extendicare.com

Number of square feet of Shelter you are able to provide:	600
How many residents could you accommodate?	5
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No
Bathrooms?	Yes

**Emergency Contact Name:** Abe Moharram

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Administrator		
Contact Information:	Work	519-433-6658	
	Home	519-668-4367 text ok	
	Cell (Indicate if Text ok)	519-668-4393 text ok	
Alternate Contact Name:	Jeff Turnbull		
Position:	Support Services Manager		
Contact Information:	Work	519-433-6658	
	Home	519-317-2913 text ok	
	Cell (Indicate if Text ok)	519-668-4393 text ok	
Director of Care:	Janet Evans		
Contact Information:	Work	519-433-6658	
	Home	519-639-2360 text ok	
	Cell (Indicate if Text ok)	519-668-4393 text ok	

**Other pertinent information:**

Date:	February 16, 2023
LTC Home:	Henley Place
Address:	1961 Cedarhollow Blvd. London
Telephone #:	519-951-0220
Fax#:	519-951-0212
Name of person completing this form:	Janet Lakie
E-mail Address:	jlakie@primacareliving.com

Number of square feet of Shelter you are able to provide:	2500
How many residents could you accommodate?	13
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No
Bathrooms?	Yes

**Emergency Contact Name:** Janet Lakie

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Executive Director	
<b>Contact Information:</b>	Work	519 951 0220 x 5130
	Home	
	<b>Cell (Indicate if Text ok)</b>	226-984-9327- no
<b>Alternate Contact Name:</b>	Tracy Richardson	
<b>Position:</b>	Vice President LTC	
<b>Contact Information:</b>	Work	
	Home	
	<b>Cell (Indicate if Text ok)</b>	416-271-1431
<b>Director of Care:</b>	Arlene MacDonald	
	Work	519-951-0220 x5131
	Home	
	<b>Cell (Indicate if Text ok)</b>	226-980-9975

**Other pertinent information:**

<b>Date:</b>	February 15, 2023
<b>LTC Home:</b>	Kensington Village
<b>Address</b>	1340 Huron St, London, Ontario, N5V 3R3
<b>Telephone #:</b>	519-455-3910
<b>Fax#:</b>	519-455-1570
<b>Name of person completing this form:</b>	Leslie DuCharme
<b>E-mail Address:</b>	lducharme@svch.ca

Number of square feet of Shelter you are able to provide:	700
How many residents could you accommodate?	15
Can you provide food for those you are sheltering?	yes
Can you provide beds?	yes
Bathrooms?	yes

**Emergency Contact Name:** Leslie DuCharme

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Director of Operations	
<b>Contact Information:</b>	Work	519-455-3910 x 221
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-319-6210 (ok to text)

<b>Alternate Contact Name:</b>	Glenna Grimmer	
<b>Position:</b>	Manager of Facility Services	
<b>Contact Information:</b>	Work	519-455-3910 x 277
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-902-1490

<b>Director of Care:</b>	Melanie Campbell	
	Work	519-455-3910 x 228
	Home	
	<b>Cell (Indicate if Text ok)</b>	226-377-4629 (ok to text)

**Other pertinent information:**

Beds on Retirement side would be able to accommodate Residents, which would include beds. Staff would ideally accompany the Residents from their LTC home.

<b>Date:</b>	February 03, 2023
<b>LTC Home:</b>	McCormick Home
<b>Address</b>	2022 Kains Road, London On N6K 0A8
<b>Telephone #:</b>	519-432-2648
<b>Fax#:</b>	519-472-1486
<b>Name of person completing this form:</b>	Lynn Mellows
<b>E-mail Address:</b>	lmellows@mccormickcare.ca

Number of square feet of Shelter you are able to provide:	1750
How many residents could you accommodate?	5
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No
Bathrooms?	Yes

**Emergency Contact Name:** Lynn Mellows

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Administrator	
<b>Contact Information:</b>	Work	519-432-2648 Ext. 2321
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-870-0564
<b>Alternate Contact Name:</b>	Jim Davis	
<b>Position:</b>	Manager of Environmental Services	
<b>Contact Information:</b>	Work	519-432-2648 Ext. 2379
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-933-7090
<b>Director of Care:</b>	Kerri Gaffney	
	Work	519-432-2648 Ext. 2322
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-282-7718

**Other pertinent information:**

<b>Date:</b>	February 27, 2023
<b>LTC Home:</b>	McGarrell Place
<b>Address</b>	355 MCGARRELL DRIVE LONDON ON N6G0B1
<b>Telephone #:</b>	519-672-0500
<b>Fax#:</b>	519-472-7987
<b>Name of person completing this form:</b>	CHRISTEN MCLEOD
<b>E-mail Address:</b>	Christen.mcleod@reveraliving.com

Number of square feet of Shelter you are able to provide:	1000 sq ft
How many residents could you accommodate?	10
Can you provide food for those you are sheltering?	YES
Can you provide beds?	NO
Bathrooms?	YES

**Emergency Contact Name:** CHRISTEN MCLEOD

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	EXECUTIVE DIRECTOR	
<b>Contact Information:</b>	Work	519-672-0500 X2002
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-494-0165 TEXT-YES

<b>Alternate Contact Name:</b>	BEN EDWARDS	
<b>Position:</b>	ESM	
<b>Contact Information:</b>	Work	519-672-0500 X2007
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-359-4491 TEXT- YES

<b>Director of Care:</b>	ROSALYN CUSSON	
	Work	519-672-0500 X2003
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-564-9854

**Other pertinent information:**

<b>Date:</b>	February 23, 2023
<b>LTC Home:</b>	Meadowpark London
<b>Address</b>	1210 Southdale Road East London
<b>Telephone #:</b>	519-686-0484
<b>Fax#:</b>	5419-686-9932
<b>Name of person completing this form:</b>	Emaculada Chesher
<b>E-mail Address:</b>	echester@jarlette.com

Number of square feet of Shelter you are able to provide:	0
How many residents could you accommodate?	0
Can you provide food for those you are sheltering?	0
Can you provide beds?	0
Bathrooms?	0

**Emergency Contact Name:** Emaculada Chesher

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

**Position:** Administrator

**Contact Information:**

Work	519-686-0484 Ext. 31
Home	
<b>Cell (Indicate if Text ok)</b>	519-870-6103

**Alternate Contact Name:** Jason Milloy

**Position:** Environmental Supervisor

**Contact Information:**

Work	519-686-0484 Ext. 15
Home	
<b>Cell (Indicate if Text ok)</b>	226-234-9062

**Director of Care:**

Work	
Home	
<b>Cell (Indicate if Text ok)</b>	

**Other pertinent information:**

<b>Date:</b>	February 3, 2023
<b>LTC Home:</b>	Middlesex Terrace
<b>Address:</b>	2094 Gideon Drive Delaware, On N0L 1E0
<b>Telephone #:</b>	519-652-3483
<b>Fax#:</b>	519-652-8733
<b>Name of person completing this form:</b>	Breanne Woodley
<b>E-mail Address:</b>	bwoodley@middlesexterrace.ca

Number of square feet of Shelter you are able to provide:	600 sq feet
How many residents could you accommodate?	2
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	Yes
Bathrooms?	Yes

**Emergency Contact Name:** Breanne Woodley

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Executive Director	
<b>Contact Information:</b>	Work	519-652-3483 Ext 38
	Home	
	<b>Cell (Text OK)</b>	226-448-2583

<b>Alternate Contact Name:</b>	Cassie Boros	
<b>Position:</b>	Director of Culinary & Environmental Services	
<b>Contact Information:</b>	Work	519-652-3483 Ext 23
	Home	
	<b>Cell (Text OK)</b>	519-281-8685

<b>Director of Care:</b>	Smitha Binu	
	Work	519-652-3483 Ext 39
	Home	
	<b>Cell (Text OK)</b>	226-268-5311

**Other pertinent information:**

Date:	February 03, 2023
LTC Home:	Mount Hope Centre for Long Term Care
Address:	21 Grosvenor St. London, ON N6A 1Y6
Telephone #:	519-646-6100
Fax#:	519-646-6148
Name of person completing this form:	Tanya Pol
E-mail Address:	tanya.pol@sjhc.london.on.ca

Number of square feet of Shelter you are able to provide:	
How many residents could you accommodate?	10 (Could consider more)
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	Yes
Bathrooms?	Yes

**Emergency Contact Name:** On-Call Leader Pager #10580

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Tanya Pol- Executive Director	
Contact Information:	Work	519-646-6100- Ext.65395
	Home	
	Cell (Indicate if Text ok)	519-859-0549

Alternate Contact Name:		
Position:		
Contact Information:	Work	
	Home	
	Cell (Indicate if Text ok)	

Director of Care:	Morgan Hoffarth	
	Work	519-646-6100 Ext. 65287
	Home	
	Cell (Indicate if Text ok)	Pager # 10788

**Other pertinent information:**

Date:	February 3 2023
LTC Home:	Oakcrossing LTC
Address	1242 Oakcrossing Rd London Ontario
Telephone #:	519-641-00231
Fax#:	519-641-0028
Name of person completing this form:	Deborah Sims
E-mail Address:	dsims@peoplecare.ca

Number of square feet of Shelter you are able to provide:	
How many residents could you accommodate?	10
Can you provide food for those you are sheltering?	yes
Can you provide beds?	3 plus pull outs
Bathrooms?	Shared yes

**Emergency Contact Name:** Deborah Sims

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Deborah Sims- Executive Director	
<b>Contact Information:</b>	Work	519-641-0021 Ext 103
	Home	519-496-2171
	<b>Cell (Indicate if Text ok)</b>	yes

<b>Alternate Contact Name:</b>	Victoria Livingston	
<b>Position:</b>		
<b>Contact Information:</b>	Work	519-641-0021 Ext 109
	Home	519-476-3090
	<b>Cell (Indicate if Text ok)</b>	Yes

<b>Director of Care:</b>	Victoria Livingston	
	Work	
	Home	
	<b>Cell (Indicate if Text ok)</b>	

**Other pertinent information:**

<b>Date:</b>	February 10, 2023
<b>LTC Home:</b>	Southbridge London
<b>Address</b>	3715 Southbridge Ave
<b>Telephone #:</b>	226-289-3731
<b>Fax#:</b>	226-289-3737
<b>Name of person completing this form:</b>	Suzi Holster
<b>E-mail Address:</b>	sholster@southbridgecare.ca

Number of square feet of Shelter you are able to provide:	1125 SQ FT –main floor activity /chapel room (additional area if vacant beds –private and basic rooms)
How many residents could you accommodate?	2 (main floor space) + any vacant room beds
Can you provide food for those you are sheltering?	yes
Can you provide beds?	No, only if have vacant residents/beds
Bathrooms?	yes

**Emergency Contact Name:** Suzi Holster

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Executive Director – Suzi Holster	
<b>Contact Information:</b>	Work	226-289-3731 Ext 1001
	Home	N/A
	<b>Cell (Indicate if Text ok)</b>	519-670-3173 Text okay

<b>Alternate Contact Name:</b>	Jody Abbot	
<b>Position:</b>	Director of Care	
<b>Contact Information:</b>	Work	226-289-3731 ext 1002
	Home	N/A
	<b>Cell (Indicate if Text ok)</b>	226-927-2681 Text okay

<b>Director of Care:</b>	Same as above	
	Work	
	Home	
	<b>Cell (Indicate if Text ok)</b>	

**Other pertinent information:**

<b>Date:</b>	February 6, 2023
<b>LTC Home:</b>	Sprucedale Care Centre
<b>Address:</b>	96 KITTRIDGE AVE.E
<b>Telephone #:</b>	519-245-2808
<b>Fax#:</b>	519-245-1767
<b>Name of person completing this form:</b>	BEV RIPLEY
<b>E-mail Address:</b>	bev@sprucedale.ca

Number of square feet of Shelter you are able to provide:	1775 square feet
How many residents could you accommodate?	15
Can you provide food for those you are sheltering?	Short Term
Can you provide beds?	NO
Bathrooms?	YES

**Emergency Contact Name:** Corrie VanHeeswyk

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Executive Director – Corrie VanHeeswyk	
<b>Contact Information:</b>	Work	519-245-2808 ext. 7127
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-854-9422
<b>Alternate Contact Name:</b>	Bev Ripley	
<b>Position:</b>	Director of Environmental Services	
<b>Contact Information:</b>	Work	519-245-2808 ext.7114
	Home	
	<b>Cell (Indicate if Text ok)</b>	519-852-5488
<b>Director of Care:</b>	Jennifer Turnbull	
	Work	519-245-2808 ext.7101
	Home	
	<b>Cell (Indicate if Text ok)</b>	226-919-4943

**Other pertinent information:**

Date:	February 8, 2023
LTC Home:	Strathmere Lodge
Address:	599 Albert St. Strathroy, ON N7G 3J3
Telephone #:	[519] 245-2520
Fax#:	519] 245-5711
Name of person completing this form:	Brent Kerwin
E-mail Address:	bkerwin@middlesex.ca

Number of square feet of Shelter you are able to provide:	1500
How many residents could you accommodate?	20
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No
Bathrooms?	Yes

**Emergency Contact Name:** Brent Kerwin

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

Position:	Administrator – Brent Kerwin		
Contact Information:	Work	(519) 245-2520, ext. 6222	
	Home	(519) 719-9987	
	Cell (Text ok)	(519) 719-9987	
Alternate Contact Name:	Augustine Caines		
Position:	Office Supervisor		
Contact Information:	Work	(519) 245-2520, ext. 6246	
	Home	(519) 762-0356	
	Cell (Text ok)	(519) 281-2525	
Director of Care:	Sonya Gillett		
Contact Information:	Work	(519) 245-2520, ext. 6234	
	Home		
	Cell (Text ok)	(519) 355-4657	

**Other pertinent information:**

Accommodation would be provided in our "Rose Room", which has two wheelchair-accessible washrooms. Lack of privacy could be an issue; arrangements would have to be made to acquire and erect privacy curtains.

**Would not accept evacuated residents if they were COVID+, or if we were in outbreak.**

<b>Date:</b>	February 8, 2023
<b>LTC Home:</b>	The Village of Glendale Crossing
<b>Address:</b>	3030 Singleton Ave London ON N6L0B6
<b>Telephone #:</b>	519-668-5600
<b>Fax#:</b>	519-668-5604
<b>Name of person completing this form:</b>	Holly Ross
<b>E-mail Address:</b>	Holly.Ross@schlegelvillages.com

Number of square feet of Shelter you are able to provide:	
How many residents could you accommodate?	6
Can you provide food for those you are sheltering?	Yes
Can you provide beds?	No
Bathrooms?	Yes

**Emergency Contact Name:** Holly Ross

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Assistant General Manager	
<b>Contact Information:</b>	Work	519-668-5600 Ext 8003
	Home	
	<b>Cell (Indicate if Text ok)</b>	
<b>Alternate Contact Name:</b>	Cindy Awde	
<b>Position:</b>	General Manager	
<b>Contact Information:</b>	Work	519-668-5600 Ext 8203
	Home	
	<b>Cell (Indicate if Text ok)</b>	226-919-7190 Ok to text
<b>Director of Care:</b>	Melissa Green	
	Work	519-668-5600 Ext 8005
	Home	
	<b>Cell (Indicate if Text ok)</b>	

**Other pertinent information:**

<b>Date:</b>	February 6, 2023
<b>LTC Home:</b>	Westmount Gardens
<b>Address</b>	590 Longworth Road
<b>Telephone #:</b>	519-472-6424
<b>Fax#:</b>	519-472-8852
<b>Name of person completing this form:</b>	Scott Mumberson
<b>E-mail Address:</b>	Scott_mumberson@srgroup.ca

Number of square feet of Shelter you are able to provide:	1600
How many residents could you accommodate?	10
Can you provide food for those you are sheltering?	yes
Can you provide beds?	no
Bathrooms?	yes

**Emergency Contact Name:** Scott Mumberson

*(if you have an emergency pager or cell phone it might be helpful as when someone calls they will need to talk with someone that can make a decision in a short time frame.)*

<b>Position:</b>	Scott Mumberson- Administrator	
<b>Contact Information:</b>	Work	519-472-6424 Ext 401
	Home	226-234-1073
	<b>Cell (Indicate if Text ok)</b>	519-808- 1784 Text ok

<b>Alternate Contact Name:</b>	Alexander Garcia	
<b>Position:</b>	Environmental Service Manager	
<b>Contact Information:</b>	Work	519-472-6424 Ext 428
	Home	
	<b>Cell (Indicate if Text ok)</b>	226-237-4184

<b>Director of Care:</b>	Carrie Morton	
	Work	519-472-6424 Ext 416
	Home	
	<b>Cell (Indicate if Text ok)</b>	

**Other pertinent information:**