

MAPLE VILLA LONG TERM CARE CENTRE

DEPARTMENT: ADMINISTRATION DATE OF ORIGINAL ISSUE: MAY 2018

ISSUED &
APPROVED BY: ADMINISTRATOR REVISED:

SIGNATURE: *Barb Goetz*

TO: ALL STAFF AND VOLUNTEERS

SUBJECT: CHEMICAL SPILL PROTOCOL – CODE BROWN

PURPOSE

The purpose of Code Brown is to respond to hazardous material spill in a timely and appropriate manner and to protect the environment, property and human health through emphasis on awareness and spill prevention.

Hazardous spills include the discovery of spills, contamination, leak and/or suspicious and/or unusual smell of an unknown substance, liquid, powder, gas or vapor.

POLICY

A Code Brown will be called if there is an internal spill/contamination, leak, suspicious unusual smell, gas, or vapor, or discovery of an unknown substance, liquid or powder.

Manageable Spill

Staff member discovering the spill will attempt to identify the cause of the spill and will restrict access to the area by using wet floor signs etc. so that no one slips on the substance

- If spill is small the staff member will get a mop and clean up the spill
- If spill is large and more equipment is required, the staff member will report this to the Nurse Manager on the Resident Home Area and a "Code Brown" will be announced 3 times over the voice communication system stating the exact location of the spill to their immediate supervisor who will initiate the Code Brown.
- The Environmental Services Supervisor/Coordinator, Director of Care or delegate and the Infection Control Coordinator will report to the location announced and will assess the spill.
- The PSW's, at the direction of the Nurse Manager will ensure that residents in the area are kept away from the spill to ensure their safety.
- If the spill can be cleaned up by site staff the Environmental Services Supervisor/Coordinator will delegate staff to get specialized equipment (shop vacuum etc) to assist with the cleanup.
- If there are any fumes the air handling systems should be shut down to prevent the fumes contaminating the entire building.
- If the spill is a large amount, products that absorb liquid may need to be used so that the spill can be swept up and disposed of (Biosorb).

3. The staff member who discovered the incident will stay with the resident and if indicated provide cardio-pulmonary resuscitation until help arrives.
4. The staff member who is assigned to get help will immediately announce the location of the Code Blue by stating CODE BLUE location, CODE BLUE location, CODE BLUE location using the overhead paging system.
5. Following the overhead announcement the staff member assigned to get help will immediately call 911 indicating the emergency in the home. Information that will need to be given includes:
 - Home Name
 - Address
 - Resident Name
 - Room Number of the Resident
 - Date of Birth of the Resident
 - **Current Status of the resident which may include:**
 - Respiratory Status
 - Heart Rate/Pulse Status
 - Any Seizure activity
6. **All Registered Staff in the Home will response immediately to the location.**
7. Other members of the Management Team if they are in the Home are to respond to further provide assistance and support for other residents in the immediate area of the Code.
8. The PSW staff on the home area will respond to the location to determine if any further assistance is required; other residents are not to be put at risk by staff leaving their care to respond to a CODE BLUE.
9. The Registered Staff working on that home area will take the lead for the CODE BLUE
10. Staff should be clearly assigned to complete the following tasks:
 - Obtain and bring to the location all equipment required for the Code such as backboard, artificial respiration mask, Suction machine, BP cuff, Stethoscope
 - If the resident is in bed, roll the head of the bed down and place the backboard underneath the resident's upper body to aid with cardiac compressions
 - Obtain the following documentation in preparation for transfer:
 - i. Transfer Record from Point Click Care – complete with reason for transfer and current vital signs
 - ii. Photocopy of the Level of Care Directive and the MOHLTC DNR Validity Form
 - iii. Photocopy of all current Medication Administration Records (MAR sheets)
 - Notify the family contact of the status of the resident and their imminent transfer to hospital – may need to call back to advise of the hospital the resident will be taken to
 - Ensure an elevator is available for EMS personnel
 - If the front door is locked and no reception in the Home a staff member should be assigned to wait at the front door to immediately provide access for EMS staff to the Home
11. Once CPR is initiated it will be maintained until the Paramedics arrive
12. The DOC/designated should be notified immediately of a Code Blue event should it occur out of normal business hours to determine notification of the Director (MOHLTC).
13. All staff involved in the Code Blue event are to ensure complete documentation in the Resident's chart of the actions taken prior to leaving the Home at the end of their shift.
14. The residents attending physician is to be notified of the Code Blue Incident and transfer to hospital.

Unmanageable Spill

- If a spill has been identified as not being able to be cleaned up by site staff the Environmental Services Supervisor/Coordinator will inform the Administrator
- The Administrator or delegate will contact the appropriate company to clean up the spill
- During this time the Director of Care will assess the risk to residents and may need to initiate a horizontal evacuation to another Resident Home Area (Code Green will be announced if this is necessary)

If the fumes are so toxic that a total evacuation of the building is required, then a Code Green Stat will be announced and the facilities who are accepting your residents will be called to initiate a Code Orange.