



Long-Term Care & Services for Seniors

# **Code Brown**

(Chemical Spill)



**Regional Municipality of Durham**  
Social Services Department  
Long Term Care (LTC) and Services for Seniors

<b>Title:</b> Code Brown – Chemical Spill	
<b>Section/Manual:</b> Emergency Manual	
<b>Reviewed:</b>	
<b>Revised:</b>	
<b>Peer Group Approval:</b>	<b>Date:</b>
<b>Also reviewed by: (other peer group)</b>	
<b>Senior Leadership Approval:</b> <i>Laura MacDermaid</i>	<b>Date:</b> July 15, 2022

**1. Policy**

- 1.1 There is an organized plan to manage a chemical spill. Chemical spills must be handled safely in accordance with the chemical specific Globally Harmonized System (GHS). Under no circumstances should an individual clean up a hazardous chemical spill alone. At least two people must be present and donning the proper personal protective equipment (PPE) when cleaning a spill. Staff who are handling and cleaning a chemical spill must be Workplace Hazardous Materials Information System (WHMIS) trained.
- 1.2 This emergency plan must be shared with residents and family councils annually or when any changes are made.
- 1.3 A planned evacuation must be completed once every three years. Records must be kept of any type of evacuation exercise, as well as an evaluation of the exercise.

**2. Purpose**

- 2.1 To ensure a safe, timely and appropriate response in the event of a hazardous materials spill at the Home.

**3. Definitions**

**3.1 A Code Brown**

A chemical spill that threatens:

- The safety of any residents/staff and visitors on the property

- The natural environment
- The property of the Home

### 3.2 **Small Chemical Spill:**

A spill that would normally take place within a medication room, or storage environment. Personnel at the scene of where the spill takes place can manage most small chemical spills. Do not pour into sinks, drains or other environmental releases. Follow GHS safety data information.

### 3.3 **Large Chemical Spill:**

This is usually a spill in which the quantity exceeds four litres. Several locations in the Homes have inventories of hazardous chemicals. This would include maintenance shops, mechanical rooms, and chemical storage rooms.

Caution:

These definitions are to be used as guidelines. Some chemicals may be extremely toxic. Refer to your GHS for more information. If you are unsure about the nature of the spill, initiate a CODE BROWN.

**Please note:** Information on Cytotoxic medications is located in pharmacy service provider policy MEDI-CL-ONT-047 Handling and Administration of Hazardous Agents

## 4. **Communication**

- 4.1 Emergency plans will be posted in the homes and on the Long-Term Care and Services for Seniors website. There will be regular consultation with Residents and Family Councils as well as our internal and external stakeholders when reviewing and evaluating emergency plans.
- 4.2 Homes will consult internal and external stakeholders on a regular basis regarding emergency plan components. There will be an internal and external stakeholder list which is located in the first section of the emergency manual.
- 4.3 RAVE system of communication will be used if family/substitute decision maker (SDM)-/staff need to be informed on any aspect of next steps if required.

## 5. **Procedure**

### 5.1 **Upon discovering a chemical spill:**

A. Notify the Emergency Coordinator

Hillsdale Estates	RN on Honey Harbour/Strawberry Fields (x 6418)
Hillsdale Terraces	RN on Vineyard View (x 5210)
Fairview Lodge	RN on Cullen Garden/Ashburn Way (x 5961)
Lakeview Manor	RN on Beaver River (x5366)

B. Notify the Supervisors of Environmental Services (ES) or the lead hand at

Hillsdale Estates	x 6326
Hillsdale Terraces	x 5066
Fairview Lodge	x 5921
Lakeview Manor	x 5391

C. ES supervisors or designate will ensure that the manager of Environmental Services is notified.

D. The Emergency Coordinator (EC)/Designate (reception upon request) will page “Code Brown” three times via the overhead paging system, announce where the spill is located and request environmental service staff to report to the spill location.

E. The EC will follow the following acronym “**SPILL**”

<b>S</b>	Safely evacuate everyone from the immediate area and secure the area
<b>P</b>	Prevent the spread of vapours by closing doors
<b>I</b>	Initiate appropriate spill procedures as outlined in Safety Data Sheets. Located in the GHS binder at reception desk
<b>L</b>	Leave all electrical equipment alone. Do not turn on or off
<b>L</b>	Leave large spills and toxic or undetermined substances for the fire department

F. Secure the area against unauthorized entry with the use of yellow caution tape located

G. If spill is a large spill (over four litres) and/or toxic or undetermined substance,

- Call 911 and wait for Fire Department prior to clean up.
- Liaise with the Fire Department to assess the situation.
- if safe to proceed (as per instruction from the Fire Department), instruct the ES staff to clean up the spill.

H. Ensure that the Code Brown checklist is completed (see appendix 1)

## 5.2 Chemical Clean Up Procedure:

A. Identify the chemical you are dealing with by consulting the Safety Data Sheet.

B. Consult the Safety Data Sheet for proper clean up procedures

C. Consult the Safety Data Sheet for required personal protective equipment

D. Apply personal protective equipment as outlined in the Safety Data Sheet.

E. Contain spill as per procedure in the Safety Data Sheet using spill containment kits.

Location of spill kits is:

Fairview Lodge	Hillsdale Terraces	Lakeview Manor	Hillsdale Estates
Penthouse	Mechanical	Laundry	Fire Room

	Room 3 <sup>rd</sup> floor	room	
Ground level mechanical room	Laundry room basement	Basement Hall	General Receiving
Loading dock	Receiving dock	Penthouse	
Storage hall of ground floor	Generator room in basement		
laundry	Compactor room		
Utility corridors behind each RHA kitchenette			

F. Dispose the chemical as per the Safety Data Sheet procedures.

### 5.3 Reporting Requirements

- A. The EC is responsible for completing a Universal Incident form in collaboration with others as required.
- B. Notify the Administrator, Assistant Administrator, and Director of Care of incident via email.
- C. If the incident:
  - (1) Resulted in harm to a resident
  - (2) Resulted in an evacuation of residents
  - (3) Resulted in loss of essential service greater than 6 hours
    - (a) Report to the **Ministry of Long-Term Care (MLTC)** via the critical incident reporting system (See ADM-01-07-16 Mandatory and Critical Incident Reporting)
    - (b) Report to the Director of Long-Term Care and Services for Seniors
    - (c) Contact Social Services Emergency Management and/or Durham Emergency Management if the home is compromised.
- D. EC/designate to report to the **Ministry of Environment** via The Spills Action Centre at 1-800-268-6060 and the municipality, if the spill caused, or will likely cause any of the following adverse effects:
  - (4) Impairment to the quality of the natural environment - air, water, or land
  - (5) Injury or damage to property or animal life
  - (6) Adverse health effects
  - (7) Safety risk
  - (8) Making property, plant, or animal life unfit for use
  - (9) Loss of enjoyment of normal use of property

(10) Interference with the normal conduct of business

- E. EC/designate report to the **Ministry of Labour, Immigration, Training and Skills Development** and the Joint Health and Safety Co-chairs if the chemical spill results in a death or critical injury of a worker.

## **6. Evaluation and Debriefing**

6.1 See appendix 2 - Post emergency evaluation and debrief checklist

6.2 **All departments will be responsible for:**

- A. Maintaining a record of supplies and equipment used, where it was sent, and ensuring its return when the evacuation is over.
- B. Participating in debriefing to evaluate the emergency and in the post, review providing reports and recommendations.
- C. Formally submitting an evaluation of the emergency within 30 days of the emergency being declared over.
- D. Assisting in creating revisions and implementation of adjustments to the plan.
- E. In-servicing any modifications with staff in their respective departments.

## **7. Training Requirements**

7.1 **General Orientation – New Staff**

Education and training on the Emergency Plans are provided through the Divisional Orientation and at Departmental Orientation.

7.2 **Annual and Ongoing – All Staff**

Education is provided on the All-emergency codes on an annual basis through e-learning platform.

## **8. References**

8.1 Fixing Long Term Care Act Reg 246/22 s 268

8.2 Ministry of Environment - <http://www.ene.gov.on.ca/spills.htm>

8.3 MEDI-CL-ONT-047 Handling and Administration of Hazardous Agents

## **9. Attachments/Appendices**

9.1 Appendix 1 - Code Brown Emergency Checklist

9.2 Appendix 2 - Code Brown- Post Incident Debrief/ Evaluation Checklist

Appendix 1  
Code Brown Emergency Checklist

Date		
Emergency Coordinator		
Reporting staff		
Actions taken when spill is found		
Person who located spill		
Location of spill		
Identified spill		
	Yes	No
Code Brown called		
EC notified		
ES notified		
Emergency Services required		
If yes, what type		
Any exposure during spill		
Was SPILL acronym followed		
Was Health and Safety notified		
Scene Evaluation		
Was Safety Data Sheet sheet verified?		
Was person wearing PPE (if applicable)?		
Drains covered (if applicable)		
If spill went down drain were external services notified?		
Was Code Brown kit used		
Contaminated substance bagged and properly labelled?		
Was code green required		
If so, provide details.		
Were there any injuries to report?		
If so, provide more detail		
Was an incident report completed?		
Method used to clean spill		
Code Brown all clear completed		
Notifications		
Administrator/designate		
Director		
Health and Safety		
Ministry of Labour, Immigration, Training and Skills Development		
Ministry of LTC via CIS system		

## Appendix 2 Code Brown- Post Incident Debrief/ Evaluation Checklist

Date: \_\_\_\_\_ Completed By: \_\_\_\_\_  
Incident: \_\_\_\_\_

Reports:	Yes/ No	Comments:
Evaluation completed		
Has a formal debrief occurred with staff/residents/family		
Has there been a formal report completed and sent to the Director?		
Were external partners informed of the outcome?		
<b>Dietary Department Checklist</b>		
Was any equipment or supplies used during the emergency by the department?		
<b>Environmental Services</b>		
Was any equipment or supplies used during the emergency by the department?		
<b>Recreational Department</b>		
Was any equipment or supplies used during the emergency by the department?		
<b>Nursing Department</b>		
Was any equipment or supplies used during the emergency by the department?		
<b>Administration Department</b>		
Was any equipment or supplies used during the emergency by the department?		



<b>Process Review</b>		
Processes which went well.		
Gaps in process		
Improvement Suggestions		
<b>Any revisions to the policy required</b>		