



Long Term Care and Services for Seniors

Code Grey

(Button Down Plan)



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

Title: Code Grey – Button Down Plan	
Section/Manual: Emergency Manual	
Reviewed: Oct/25	
Revised: Oct/23, Oct/24	
Peer Group Approval: Emergency Code Committee	Date: October 29, 2025
Also reviewed by: (other peer group)	
Senior Leadership Approval: <i>Laura MacDermaid</i>	Date: January 20, 2026

1. Policy

- 1.1 The Long-Term Care and Services for Seniors (LTC and SS) Division has an emergency plan in place to deal with a limited localized incidence of airborne contaminants. The safety of Residents, Staff, Students, Volunteers, and Visitors is of primary concern during an emergency.
- 1.2 This emergency plan will be evaluated and updated:
 - A. At least annually and
 - B. Within 30 days of the emergency being declared over.
- 1.3 This emergency plan is exercised at least once annually.
- 1.4 All staff are trained annually on this emergency plan.
- 1.5 In the event of the release of airborne chemical, biological, radiological, nuclear, or explosive (CBRNE) contaminants/agents and/or in the event of a nuclear emergency and/or the activation of the Durham Nuclear Emergency Response Plan, or by direction of the Provincial Emergency Operations Centre (PEOC) as per the Provincial Nuclear Emergency Response Plan (PNERP), the Code Grey-Button Down Plan will be implemented.

2. Purpose

- 2.1 To prevent contamination of the internal air supply of the building.
- 2.2 To provide for the safest possible environment, sheltering in place, for the Residents, Staff, Volunteers, and Visitors within the Home, during the specified time of a localized situation of outside air contaminants.
- 2.3 To reduce the possibility of negative physical effects for individuals inside the building, during a situation involving external air contamination believed to be of a short-term duration.

3. Definitions

3.1 Airborne Contaminants

- A. A biproduct caused by the mixing of chemicals and/or the release of the chemical(s) into the environment. The release of the toxic gas produces a situation where human life may be threatened or serious health problems may result if the fumes are inhaled.
- B. You may smell, taste, see, or feel some contaminants in the air, however not all contaminants are easily detected. For example: A tanker truck is traveling on the Highway 401 and it is filled with chlorine gas. The vehicle is involved in an accident and the tank is ruptured and gas is leaking out. The wind is blowing the released gas towards a populated area and procedures must be implemented to minimize the possibility of individuals inhaling this poisonous gas.

3.2 Command Centre

- A. The command centre is the reception area in each Home.
- B. A backup command centre is to be used if the original command centre is compromised. The backup location would be determined by the Emergency Coordinator (EC) and Emergency Assistant (EA).

3.3 Designated Code Response Staff

- A. Specific staff that have been pre-determined at the Home's emergency committee that will respond to the scene when a code has been called (i.e., designated personal support workers [PSWs] from each resident home area [RHA], members of leadership etc.) in addition to the Emergency Coordinator (EC) and Emergency Assistant (EA).

3.4 Natural Gas Leak

- A. An odour like rotten eggs and/or a hissing sound of escaping gas is present.

4. Communication

- 4.1 Emergency plans will be posted on the Long-Term Care and Services for Seniors website and physical copies are available upon request. 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 in the first section of the emergency manual.
- 4.3 RAVE Alert 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. Procedures

5.1 The Senior Manager on Site

- A. Upon notification, confirm with Emergency Social Services (ESS) and the Regional Emergency Operations Centre or Durham Regional Police (911) that an emergency exists, and a Code Grey Button-Down Plan must be implemented.

B. Contact the Emergency Coordinator (EC) and request they go to the command centre.

Hillsdale Estates	RN on Honey Harbour/Strawberry Fields
Hillsdale Terraces	RN on Vineyard View
Fairview Lodge	RN Cullen Garden/Ashburn Way
Lakeview Manor	RN Beaver River

C. Ensure Environmental Service manager/designate is informed.

5.2 Emergency Coordinator (EC)

A. Page or designate someone to page “**Code Grey**” three times over the phone/paging system using the following extensions:

Fairview Lodge	
Hillsdale Estates	Use overhead page at reception or at the Fire Panel on the main floor. If not possible, use the desk phone (wait for the tone, will reach 50 desk phones).
Hillsdale Terraces	Ext wait for tone, push 00 and then make announcement
Lakeview Manor	then 00 wait for 2 beeps and make announcement

B. EC, EA, Designated Code Response Staff, and ES Staff Report to the Command Centre.
 C. EC to put on the appropriate vest to identify themselves.
 D. Follow Appendix 1 – Code Grey Emergency Checklist.
 E. **Work with Mechanical Maintenance to ensure building automation system has shut the fans down.**
 F. Turn off or designate EA to turn off automatic doors.
 G. Assign designated staff to button down areas of the Home and return to the command centre once duties have been completed.
 H. Direct staff to account for all Residents and shut their windows and doors if applicable.
 I. Ensure all Residents are inside.
Note: Elevators may be used.
 J. Upon notification from the Senior Manager, Region or Police, announce/designate someone to announce “**Code Grey all clear**”

5.3 Emergency Assistant (EA)

A. Report to the command centre upon hearing a Code Grey.
 B. Follow direction from the EC.

5.4 Designated Response Staff

A. Respond to the command centre when a Code is called.
 B. Follow direction from EC, and EA.

5.5 Administrator

- A. Report on an on-going basis to the Director, Long-Term Care and Services for Seniors.
- B. Refer all inquiries from the press to the Social Services Corporate Communications.

5.6 **All Staff**

- A. Close and latch all windows and doors in your work location.
- B. Turn off all equipment including ventilation equipment (i.e., fans, window air conditioners).
 - (1) Reassure the Residents in your immediate area.
 - (2) Await direction from the Senior Manager on duty/EC.
- C. Complete the other specified duties identified for each department:
 - (1) **Receptionist Area**
 - (a) Post sign "Closed Temporarily No Admittance" on front door.
 - (i) One employee attends the front door and prohibits entrance or exit by individuals.
 - (ii) Receptionist to remain in the area to answer telephones and advise callers (during business hours): "The Home is temporarily closed to the public due to an outside emergency".
 - (2) **Food Services**
 - (a) Post signs on the loading dock doors (signs are in all red emergency boxes).
 - (b) Do not use Dumbwaiter if applicable. Dumbwaiter must remain at upper level.
 - (3) **Environmental Services**
 - (a) Ensures the Building Automation system fans are shut down.
 - (b) Shut off appropriate gas valves if needed.
 - (c) **Laundry Room:** Do not open dryer doors or operate machinery or equipment.
 - (4) **All Other Maintenance Staff**
 - (a) Report to the command centre as per the all page.
- D. Open the emergency box/bag where you will find signs, masking tape, flashlight, list of outside doors. Pick up signs and masking tape. Return to assigned area with supplies.
 - (a) Secure signs (facing outward) on all doors with glass panels opening to the exterior of the building.
 - (b) Place rolled blankets/towels (from linen rooms) on the floor in front of any exterior door.
 - (c) Check all sitting rooms, lounges, stairwells, tub rooms, washrooms, kitchenettes, and service rooms ensuring that doors and windows are closed and latched and that all equipment, fans are turned off.
 - (d) Remain near (or return to) the exit door most used in your area and prohibit individuals from exiting or entering the facility.
- (2) **Nursing**
 - (a) Outside activities cease and all Residents are returned to the building.
 - (b) Ensure all windows are closed and latched. Assist Maintenance Worker 1 with sealing all exterior doors.
 - (c) Reassure Residents in your immediate area; take head count of Residents on your RHA.
 - (d) Continue normal care routines with Residents, avoiding any activity that would allow for outside air to enter the building.
 - (e) If requested, assist maintenance staff with button down procedures # 5.6 C (4) (c)-(e) listed under environmental services.

(3) Recreation and Therapy Services

- (a) Outside activities/programs cease and all Residents are returned to the building.

5.7 Managers

- A. Advise the Senior Manager on duty/EC of the status prior to, during, and upon completion of the specified department tasks.
- B. If there were any staff exposures or injuries, follow the corporate Occupational Incident Reporting Program. Report to the Ministry of Labour, Training, Immigration and Skills Development (MLTSD) if a critical injury occurred as outlined in the Occupational Incident Reporting Program.

6. Post Emergency**6.1 General**

- A. Staff will resume normal practices and observe the following:
 - (1) Report any abnormal happenings to their supervisor.
 - (2) Remove linen items from in front of the doors and place items in soiled laundry hampers for washing.
 - (3) Commence start up procedures of equipment (where applicable).
 - (4) Advise nursing staff of any Residents who may be reacting negatively to the situation.

6.2 Maintenance

- A. Activate all air handling (mechanical) equipment - check and report any abnormalities.
- B. Remove signs and tape from all exit doors and return supplies to appropriate emergency box.
- C. Check all mechanical, electrical systems to ensure the ventilation systems and fire systems are operational.

6.3 Nursing

- A. Check contents of emergency box/bag and notify Supervisor of Environmental Services of any missing items.
- B. Assist maintenance with removing signs and tape from all exit doors and return supplies to appropriate emergency box as required.

6.4 Senior Manager on Duty

- A. Meet with managers/EC/EA, review reports, and conduct the debrief and evaluation (Appendix 2).
- B. Advise the Director, Long-Term Care and Services for Seniors of the status of the Home. A quick update, after resuming normal duties, will be necessary. A more formal response will be provided once an evaluation has been completed.
- C. As soon as possible advise the staff and Residents and SDM of the status of the Home and performance during the crisis.

7. Carbon Monoxide Leak and/or Alarm Activation Procedure**7.1 General Actions Applicable to All Staff**

- A. These detectors provide an audible alarm from the detector itself.
- B. If a Carbon Monoxide alarm is activated, staff should take the following actions:
 - (1) Shut down/tag out immediately any equipment or appliance that is found to be the source.
 - (2) Evacuate the immediate room/area of both Residents and staff.
 - (3) Contain the area where the alarm has been activated by closing doors.
 - (4) Call 911 and inform them that a Carbon Monoxide detector has been activated.
 - (5) Contact the Emergency Coordinator (EC) and request they go to the command centre.

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7.2 EC/EA

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- A. EC, EA, Designated Code Response Staff, and ES Staff Report to the Command Centre
- B. EA ensure that the Fire Department (911) and Gas Company have been notified.
- C. EA meets the fire department and inform them of the location of the alarm. Provide emergency responders with a listing of potential sources of Carbon monoxide within the facility.

Note: If fire department responds they will establish a Command Centre outside the Home. The Administrator or designee should be present.
- D. Consult with fire department and utility company upon their arrival to see if further evacuation is necessary.
- E. Inform all units and departments of the situation and be prepared to evacuate additional areas based upon the fire department's findings and recommendations.
- F. Be prepared move to a Code Green to evacuate additional areas based upon the Fire Department's findings and recommendations.

7.3

At any point, if the detector reading is 20 ppm or higher, follow the steps above to page a **Code Grey** over paging system.

7.4 Maintenance

- A. If safe to do so, turn off sources of incomplete combustion (boilers, stoves, water heaters, etc.)
- B. Shut down HVAC to limit spread throughout the building. If source is determined to be external, turn off air handling units that bring in outside air.
- C. All Homes have the ability to manually shut down the HVAC system.
- D. Advise emergency responders of "Emergency Utility Shut-Off Locations".
- E. Contact appropriate repair vendors as necessary.

7.5 **Nursing**

- A. Closely monitor any Residents and staff who may have been exposed to Carbon Monoxide or other source or display signs or symptoms of exposure:
 - (1) Sudden flu like illness
 - (2) Dizziness, headaches
 - (3) Nausea or vomiting
 - (4) Fluttering or throbbing heartbeat
 - (5) Red skin complexion
 - (6) Unconsciousness
- B. Administer immediate medical attention to anyone complaining of associated illness by bringing exposed individuals to an area of fresh air.
- C. Ensure EMS has been requested.
- D. Document the incident. Complete all paperwork.
- E. Notify responsible party/family of Resident, as necessary.
- F. Notify physician, as necessary.

8. **Summary and Debriefing (See Appendix 2)**

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

- A. Participating in debriefing to evaluate the emergency and in the post review, providing reports and recommendations.
- B. Formally submitting an evaluation of the emergency within 30 days of the emergency being declared over.
- C. Assisting in creating revisions and implementation of adjustments to the plan.
- D. In-servicing any modifications with staff in their respective departments.

9. **Education and Training**

9.1 **General Orientation – New Staff**

- A. Education and training on the Emergency Plans including Code-Grey Button-Down Plan are provided through the Divisional Orientation.

9.2 **Annual and Ongoing – All Staff**

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

10. References

- 10.1 Fixing Long-Term Care Act, 2021 O Reg 246/22 s268

11. Attachments/Appendices

- 11.1 Appendix 1 – Code Grey Emergency Checklist
- 11.2 Appendix 2 – [Code Grey Debrief Summary and Report](#)

Appendix 1 – Code Grey Emergency Checklist

Date	Time	
Emergency Coordinator/designate:		
Incident	Y/N	Comment
Received notification of incident via Emergency Social Services (ESS), Durham Emergency Management (DEM), or Durham Regional Police		
Senior Manager/designate notified		
ES manager notified		
Code Grey called		
Residents, Visitor, Staff notified to move indoors		
Ventilation system turned off		
By who?		
Signage posted to doors		
Entry/exist restricted to home		
Post Incident		
Ministry of Labour, Immigration, Training and Skills Development notified (if applicable)		
Ministry of Long-Term Care notified via CIS system (if applicable)		
Occupational Incident Report Completed (if applicable).		
Evaluation conducted with staff		
Any process improvement made		
Debrief conducted with staff		