THUNDER BAY REGIONAL HEALTH SCIENCES CENTRE	DEPARTMENT / RESPONSE AREA: TBRHRI Clinical Research Services Department areas	
CODE AMBER SUB PLAN - Hospital Site	APPROVAL DATE / DATE OF LAST REVIEW: February 1, 2019	
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PURPOSE: Document provides department specific information to be completed during a Code Amber. Sub-plan must be stored in the unit's emergency code binder <u>with</u> the current Code Amber policy.

REFERENCES: Refer to Code Amber Policy (EMER-80) for Hospital wide instructions

1. **DEPARTMENT SPECIFIC INFORMATION:**

    A. **Code Amber Response Area Lead:**

    Upon code activation, Manager, Unit Leader or designate to wear the emergency code vest and is responsible for ensuring response instructions are carried out within his/her response area.

    If the aforementioned staff is not present, one person must wear the vest. In both cases, staff should be well informed as to their roles and responsibilities when wearing the vest.

    B. **Description of designated Code Amber Search Area:**

    <u>The physical space that this response area/department is responsible for searching:</u>
    - All physical areas with-in *TBRHRI;*
    - *Stairwell D&O, searching one floor up and one floor down;*
    - All hallways, corridors & public areas immediately outside of your area;
    - All washrooms & meeting rooms adjacent to the department (including those in hallways adjacent to your area).

    C. **Code Amber – Exit Points**

    In the event of a Code Amber, this response area/department is responsible for monitoring and securing the following external exit points:
    - *Stairwell D & O exits*

2. **DEPARTMENT RESPONSE INSTRUCTIONS:**

    A. **AN INFANT/CHILD IS REPORTEDLY <u>MISSING</u> FROM YOUR AREA:**
    - ☐ 1. Code Amber Response Area Lead to wear the emergency code vest and is responsible for ensuring response instructions are carried out within his/her response area.
    - ☐ 2. Refer to <u>section 5.2</u> of code amber policy for specific instructions.

    B. **A CODE AMBER IS INITIATED/ANNOUNCED OVERHEAD**
    - ☐ 1. Direct anyone wishing to exit or enter the building to the Main Entrance or Emergency Waiting Room Entrance.
    - ☐ 2. Refer to section 5.3 of Code Amber policy and complete applicable instructions
    - ☐ 3. Complete Missing Infant/Child Profile (see Appendix 2 Part 1) and Suspected Abductor Profile (Appendix 2 Part 2) (if known). This is important to rapidly communicate accurate information. Copies to be provided to the Police or Incident Manager as requested. If infant/child is a patient, keep original copy in patient's chart;

    C. **CODE AMBER IS DEACTIVATED**

    Once directed by Police and Incident Manager, Switchboard to announce "Code Amber All Clear" overhead.

    Upon Code Deactivation, department staff must:
    - ☐ 1. updates to patients and visitors;
    - ☐ 2. Follow recovery instructions provided by the proper authorities;
    - ☐ 3. Participate in debriefings with your department;
    - ☐ 4. Speak to your supervisor regarding any physical and mental health needs as a result of the incident.