Emergency plan and annual evacuation exercises

Guidelines for retirement village operators

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Introduction

Operators must prepare an emergency plan for their village and conduct evacuation exercises. These guidelines are issued under section 189B of the *Retirement Villages Act 1999* (the Act) to assist operators and residents by providing information on the requirements.

It should be noted that the NSW Civil and Administrative Tribunal (the Tribunal) may take these guidelines into account to determine if operators have complied with the requirements of the Act.

Any reference to an *operator* in this guideline means "the person operating a retirement village who manages or controls the village".

Emergency plans

Retirement villages must have an emergency plan. This is a written set of instructions that outlines what staff, residents and visitors in the village should do in an emergency. The plan does not need to be lengthy or complex. It should be easy to understand and tailored to the particular retirement village.

An emergency plan should provide for:

- emergency procedures, including effective responses to an emergency;
- evacuation procedures;
- notifying emergency service organisations at the earliest opportunity;
- medical treatment and assistance;
- effective communication between the emergency response coordinator and all residents in the village;
- testing the emergency procedures—including the frequency of testing, and the results of safety inspections guiding any corrective action needed; and
- informing, training and instructing relevant workers in relation to implementing the emergency procedures.

Developing an emergency plan

An emergency plan should be based on a practical assessment of resources and hazards associated with a particular retirement village and the possible consequences of an emergency because of those hazards.

The operator must consider all relevant matters, including:

- the nature of particular hazards in their retirement village and its immediate surrounds;
- the village's size, location and layout;
- the number of residents in the village, including those willing to have official roles if necessary (i.e. fire warden);

- arrangements for residents with mobility, hearing, visual or other impairments to move them to a safe place in an emergency; and
- advice from local emergency services.

Operators must identify hazards for their particular village, without restricting the plan to only these hazards. For example, the village may be in a bush-fire zone or flood plain, increasing the risk of such emergencies. Nearby external hazards should also be considered, such as a chemical storage facility across the road. The emergency documents should identify and communicate any additional precautions that may need to be taken as a result.

Operators should consider the village's size, layout (for example, vertical building or villas) and location. This information will help identify the hazards the village may be exposed to and the response that may be needed. An example may be the location of the village and how close its neighbouring premises are. In an urban setting, it may be appropriate for plans to include processes to notify neighbours in the event of a fire emergency.

The emergency plan must also take into account:

- the number of staff on site;
- staff capability after hours (or at times when there are no staff present or at reduced capacity); and
- any contractors and other people who may be in the village, such as visitors.

To enable staff to respond in an emergency, the emergency plan should be readily accessible. It should contain practical information, such as:

- quick reference information; including emergency contact numbers, assembly point information, village address, nearest cross streets, entrances etc;
- a list of key staff (or residents) and their emergency contact details. This includes those with specific roles or responsibilities under the emergency plan. For example, fire wardens, floor wardens and first aid officers;
- contact details for local emergency services (e.g. police, fire brigade, poison information centre);
- with resident consent, materials (such as a map) indicating the identity, disability type and location of residents with a disability;
- a description of the mechanisms installed for alerting residents and staff at the village to an emergency or possible emergency (e.g. a siren or bell alarm);
- evacuation procedures, including arrangements for assisting any residents with decreased cognitive ability or a hearing, vision or mobility impairment;
- a clear map of the village illustrating the location of fire protection equipment, emergency exits and assembly points;
- location of defibrillators and first-aid kits;

- triggers and processes for advising neighbouring businesses or residences about emergencies;
- the post-incident follow-up process. For example, notifying relevant authorities (e.g. NSW Health, Fire and Rescue, SafeWork, etc), organising counselling or medical treatment; and
- procedures for testing the emergency plan, including the frequency of testing.
- Procedure for signalling to all that the emergency is over.

Types of emergencies to cover

Emergencies are actual or imminent occurrences that may:

- endanger, or threaten, the safety or health of people or animals;
- destroy, damage or threaten property; or
- cause to fail, or significantly disrupt, an essential service or infrastructure.

Emergencies to cover in a plan may include accidents, fires, floods, storms, earthquakes, explosions, medical emergencies, power outages, rescues, incidents with hazardous chemicals, bomb threats, armed confrontations and natural disasters.

Awareness and training

Staff should be adequately trained in the emergency procedures. The emergency plan itself should set out the arrangements for informing, training and instructing staff. Staff training may include:

- identifying the roles of staff members;
- practising evacuations;
- identifying assembly points and locations of emergency equipment;
- first aid arrangements (including defibrillator training if required); and
- specific training on how to assist residents with an impairment.

To maintain awareness and ensure training is kept current, operators should consider providing:

- emergency procedure training in induction courses for new workers;
- refresher training for existing workers;
- training for short-term contractors or visitors (this may not need to be as extensive as staff training);
- specific training for individuals with a formal role in an emergency. For example, fire wardens, floor/area wardens and first aid officers; and
- reminders and information sessions for residents and the residents' committee.

Reviewing emergency plans

The operator must review their emergency plan at least every 12 months. This is to ensure it remains current, robust and effective while also complying with the law and continuing to best serve residents.

The plan may need to be reviewed and amended when:

- there are changes to the structure of the retirement village, such as expansion, re-location or refurbishments;
- there are changes in the number or make-up of residents, including an increase in the size of the village or changes to the type of accommodation provided;
- there is a change in the number of staff and the services they can provide;
- new facilities or services have been introduced;
- a safety inspection recommends that the emergency plan be amended; or
- there are changes to the external environment (e.g. new development built close to the retirement village).

Evacuation exercises

In an emergency, the safety of residents, staff and others in the village at the time must take priority. Practising scheduled evacuation exercises will help ensure residents and staff know how to evacuate the retirement village in the safest and most efficient manner. This practice can help reduce residents' stress and confusion in an actual emergency.

Operators must hold an evacuation exercise for residents at least once each calendar year. A one-year gap between exercises is not required. Operators are free to choose the most suitable time within the calendar year.

By carrying out an evacuation exercise, the operator and residents should be able to:

- understand the procedures and actions to take in an emergency;
- identify any potential deficiencies or gaps in the emergency plan;
- test emergency and evacuation procedures to discover and resolve any unanticipated issues before an emergency occurs; and
- observe the knowledge, skills and application of the emergency plan by staff, residents and any other volunteers.

Residents' participation

Retirement villages are independent living facilities, and operators have no authority to require residents to participate in annual evacuation exercise. However, operators should seek to actively promote participation as the greater the participation, the more prepared the village will be in an emergency.

Residents are more likely to take part when they have sufficient notice and clearly understand what to expect during the exercise.

Understanding the emergency procedures will give residents greater peace of mind in knowing what to do in an emergency. Providing clear instructions and ensuring residents understand why it is important to participate should reduce concerns residents may have.

Villages are only required to complete one evacuation exercise per year. The operator may also hold additional exercises at other times to ensure all residents and staff are able to take part throughout the year.

Operator may find it necessary to identify which residents take part in the drill to help them determine participation levels across the village.

Type of evacuation exercises

Different emergencies require different evacuation procedures. The operator does not have to conduct an annual evacuation exercise for each type of emergency, or any specific type. However, it is important to consider the differences and how these may affect evacuation exercises.

The evacuation exercise should take into account the different hazards and emergencies a village faces based on its location and layout.

Full evacuations are typically carried out in response to life-threatening situations or where the building cannot function due to a severe malfunction of its services. Partial evacuations may be carried out in circumstances such as a localised fire, localised flood or chemical spill.

Residents who need assistance

The operator should identify residents needing assistance during an emergency due to physical or mental impairment. The operator should have this information readily accessible, including in the event that fire and rescue services are required.

Operators should prearrange appropriate evacuation procedures and routes for residents who are hearing, vision or mobility-impaired. This may be done in consultation with your local fire and rescue service.

Most residents with an impairment may be able to evacuate safely without assistance. However, it is important to check that residents using any kind of assistive device can successfully leave the building unassisted, using the emergency routes.

In an emergency evacuation, fire and rescue services will assist in removing residents with an impairment from the village. **Attachment A** provides further guidance where staff may need to provide assistance to residents with:

- low vision or blindness;
- deafness or who are hard of hearing;

- crutches, canes or walking frames;
- wheelchairs; or
- reduced cognitive ability.

Key safety information

Operators must provide all residents with the following key safety information for their residential premises:

- a map indicating the location of assembly areas, exits and fire extinguishers;
- any other emergency equipment; and
- instructions for evacuating residents and staff in a fire or other emergency.

This information must be clear and easily readable by the majority of residents.

The above information must also be tailored for, and clearly displayed in, all the communal areas of the village.

These are the minimum requirements. Operators should consider what other safety information they should provide.

An operator may choose the format of the key safety information. This includes both for the communal areas and the individualised information for each resident regarding their residential premises.

Maps should be clear, simple and easy to read. Factor in residents' ages and cognitive abilities. Include readability measures such as:

- ensuring colour is not the only visual means of conveying information. If colour alone is used, people who are colour blind, or may have difficulty differentiating between certain colours will not understand the information;
- describing and presenting content in a way that all residents can interpret and understand; and
- clear and concise instructions. This does not mean leaving out relevant information. Residents should be given all the information they may require in the event of an emergency.

Providing residents with key safety information

Residents need maps and instructions that are clear, concise and best demonstrate the behaviour required during an emergency. This helps to improve village safety and give residents peace of mind.

The map and instructions must consider:

• the individual resident's mobility, any impairments or any circumstances affecting their ability to evacuate or respond to an emergency situation; and

• the location of the resident's residential premises or unit. Different residences may have separate assembly areas or emergency equipment.

This information should also be part of the package to all new residents and their families.

Operators do not need to ensure residents display the information within their residence. They should encourage residents to become familiar with the material and have it located in a location that is readily available should an emergency occur.

Displaying key safety information in communal areas

The information displayed within communal areas does not need to be resident specific. It can be more generalised (without compromising its usefulness or quality). It should be displayed on noticeboards or signs, close to exits or any other location that is easily and clearly viewable.

It is recommended that general emergency information is displayed close to the key safety information. For example, operators could summarise the information in the village's emergency plan or make it available in communal areas. General safety information may include the following:

- emergency numbers (000, State Emergency Service, poison hotline, crime stoppers, national security hotline);
- address and location details (village address, nearest cross street etc);
- operator or village management contact details; and
- specific instructions or information that may need to be provided to emergency services.

ATTACHMENT A – Assisting residents with an impairment

Retirement village staff should always ask a resident (or visitor) with an impairment how they can best assist them in evacuating or responding to an emergency. This applies whether creating an evacuation strategy for them or when assisting them in an emergency evacuation.

The following information is recommended as a guide for operators who provide staff with training and/ or written procedures on assisting residents with an impairment. Always refer to current medical and health guidelines and industry best practice in dealing with people with disabilities.

Residents who are vision impaired

If residents have low vision or are blind, staff may need to help them evacuate. Staff training should be provided on assisting these residents as follows:

- Explain to the resident the nature of the emergency and offer your arm for guidance.
- Give verbal instructions to advise about the safest route or direction, using estimated distances and directional terms.
- As you walk, explain to the person where you are and where obstacles are located.
- When you reach safety, orient the person to their surroundings and ask if they need further assistance.

Residents who are hearing impaired

Some people who are deaf or hard of hearing may not be aware of the audible evacuation alarm sounding during an emergency.

Specialised smoke alarms are available for people who are deaf or hard of hearing. These have a strobe light and/or vibrating pad that can be placed under the pillow which activates when the smoke alarm sounds. They can be interconnected with conventional audible alarms in different locations within the home.

In the event of an emergency, an alternative warning system is required. This could include:

- a written note to tell the resident of the situation, the nearest evacuation route, and where to meet outside (for example, "FIRE! Exit the building via the rear door on your right. NOW. Meet outside on the front lawn.");
- turning the light switch on and off to gain their attention, then indicating through gestures or in writing what is happening and what to do;
- giving visual instructions for the safest route or direction by pointing toward exits or evacuation maps; and
- ensuring that a service animal is not separated from its owner, if possible.

Residents who are mobility impaired – crutches, canes or walking frames

Consider evacuation options and the suitability of carrying people who are mobility-restricted to an area of refuge or out of the building. Carrying options may include using a two-person lock-arm position or having the individual sit on a sturdy chair (preferably with arms) that is then lifted and carried.

Residents who are mobility impaired – wheelchairs

When assisting a resident in a wheelchair during an emergency, it is important that staff:

- do not lift a resident in a wheelchair. There is too much risk involved for both staff and the person using a wheelchair (back injury, loss of control of the wheelchair and person in it, tripping, falling). Wheelchairs have many movable or weak parts that are not made to withstand the stress of lifting (for example, the seat bar, foot plates, wheels and movable arm rests);
- are aware that some individuals in wheelchairs may have:
 - minimal ability to move. Lifting them may be dangerous to their wellbeing;
 - o very little upper body and neck strength; or
 - respiratory conditions or equipment that increases their vulnerability to smoke, vapours or other airborne toxicants
- always ask the person what their needs and preferences are regarding:
 - o ways of being moved;
 - whether to extend or move extremities when lifting because of pain, braces, etc;
 - o whether a seat cushion or pad should be brought along; and
 - o aftercare, if the resident will be removed from the wheelchair.

If a resident must be lifted from a wheelchair during evacuation:

- ask others to bring the wheelchair;
- when the wheelchair is left behind, remove it so it does not obstruct exit routes such as a stairwell;
- ensure that an assistance animal is not separated from its owner (if possible); and
- reunite the person with the wheelchair as soon as possible.

Residents with reduced cognitive ability

Cognitive impairments may range from forgetfulness and disorientation during an emergency through to dementia and other serious conditions.

Simple, readable and repeated evacuation procedures may help. Operators should also consider these principles in their plans and staff training:

- People with reduced cognitive ability may have difficulty recognising an emergency, being motivated to act or responding to instructions during an emergency;
- When offering your assistance to someone, first identify yourself;
- Break instructions into small steps and use language that is easy to follow; and
- It may help to pair people with anxiety or other mental illness with an evacuation 'buddy' to reduce stress and provide comfort.