

CODE GREY GENERAL CHECK LIST

Date: _____ Time: _____

Name of Registered staff responding: _____

	Reg. Staff Initial
RN in Charge reports to reception (incident command) to assess situation	
Station staff members at all entrances and stairwells as maglocks will be disengaged	
Delegate a staff member to distribute manual bells to each neighborhood	
Check to see if WIFI is still working	
Delegate a staff member to begin printing off all EMARS	
If internet is operational, RPN's to plug into ethernet near dining room	
If internet is operational, lounge areas have internet plug ins as well	
If internet and WIFI are not operational and unable to print EMARs for signing purposes, direct reg. staff to sign and hold onto med baggies for later entry into PCC.	
RN in Charge to notify Administrator/Nurse Leader on call if not completed already	
Check status of wireless phones and land lines	
Contact IT department Ext. 1700 or if after hours 519-791-4302	
Remind staff of flashlight option on screamers/spare flashlights on neighborhoods	
Get residents off air mattresses – ceiling lifts will be disengaged	
Put residents on portable oxygen tanks	
Nurse Leader on call to determine if power outage is a CI and report	

Date and Time that power was restored: _____

RN in Charge Signature: _____ Date: _____

DON Signature: _____ Date: _____

ADM Signature: _____ Date: _____