1. Purpose

To ensure all staff and members of the public who are in authorized LECA areas during an emergency follow the established Emergency Evacuation Plan and LECA Safety and Security Handbook

2. Application

This policy and procedure applies to all LECA employees and members of the public who are in authorized LECA areas during an emergency. Since emergency and public safety information is not available to the public the internal process now includes members of the public as per below.

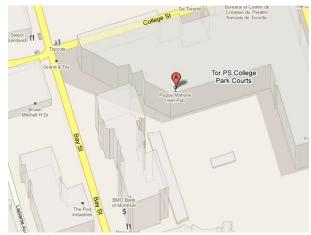
3. Designated Evacuation Meeting Area

In the event of an evacuation, the Atrium on Bay (595 Bay Street) is the primary meeting area. If access to the Atrium is unavailable, the secondary meeting area is 777 Bay St. Once you reach the meeting area you must check in with the Fire Warden.



PRIMARY LOCATION:

Atrium on Bay (595 Bay Street)



SECONDARY LOCATION:

College Park (777 Bay Street)

4. LECA Fire Wardens

"Fire Warden" is a generic term to describe those building occupants who volunteer or are assigned to perform certain functions during emergency situations.

The following are brief descriptions of each of the function of each Fire Warden:

- Fire Marshall/Team Lead will coordinate the activities of Fire Wardens.
- Searchers will ensure all areas are searched during an emergency including washrooms, storage rooms, meetings rooms, etc. The primary goal of the search is to ensure that all occupants are aware of how they should be reacting to the fire alarm signal. Searchers are not responsible to ensure that all occupants evacuate but should make note of those who do not evacuate, so the information can be reported to building staff or Fire Department personnel on scene.
- Exit Monitor will ensure exit stairs and exits are safe for use by occupants and will facilitate and ensure efficient merging of evacuees from their floor into the exit stair.

Below is a list of Fire Wardens at 655 Bay St., 10th Floor:

Name	Title	Location (if applicable)	Phone #				
Lianne Di Lecce	Fire Marshall		(647) 448-8083				
10 th Floor							
Christian Mendoza	Searcher		437-925-8372				
Fionn Anderson	Searcher		647-278-8310				
Savitha D'Mello	Searcher		437-522-4073				
Christopher Jeffreys	Exit Monitor	South Stairway	437-925-8372				
Morvarid Shojaei	Exit Monitor	North Stairway	437-990-7645				
Pamela Stephenson Welch	Exit Monitor (back- up)	North Stairway	647-621-4645				

5. Procedure for Persons Requiring Assistance to Evacuate

Self-Identification

Any staff requiring assistance in the case of an emergency evacuation should notify management at the start of their employment in order to fill out the Employee Emergency Information Worksheet (see Appendix A). There are a multitude of reasons why a person may require assistance to evacuate via the exit stairs. Conditions may include but are not limited to, arthritic knee, broken leg, hip problems, asthma, anxiety, sever claustrophobia etc.

Employees should also make every effort to note the presence of individuals who appear to require assistance to evacuate. Employees should make every effort to assist those individuals in the event of an emergency evacuation, as long as it is safe to do so.

Planning

If an employee has self-identified as requiring assistance to evacuate, the MAG Evacuation Assistance Self—Identification Form should be filled out in consultation with their manager to ensure requirements are adequately provided for during an emergency evacuation (see Appendix B).

Employees who require physical assistance should be paired up on the "buddy system" with an able-bodied volunteer who works in close proximity. "Buddies" should help their assigned "buddy" to the designated assembly area. It is recommended that at least two alternate "buddies" are identified.

As required, personal evacuation plans should clearly identify the notification system required to alert you to the emergency situation, and the circulation path (exit route) you will use to congregate in a designated waiting area and/or exit the facility.

Visitors may also require assistance, which can be provided by those who are willing and able to so, such as being escorted down the stairs, etc. Should immediate assistance not be readily available, visitors can be directed to the facility's designated waiting areas, which are identified in the local building emergency evacuation procedures.

Persons unable to evacuate

In the case of persons who are unable to evacuate, plans need to identify where a person can be left and the procedure for reporting the location of persons left in the building to Fire Department or building personnel. In the event that a person or person(s) has remained in the building and is in no immediate danger (i.e. there is no fire in the building, or the fire is not in the vicinity and is not likely to spread to other areas of the building), they will likely remain in place until the situation is resolved. Firefighters may concentrate their efforts on investigating and/or controlling any fire that may be occurring.

Red Telephones

- All phone stations are recessed red panels at all stairwell doors.
- Building Security will not be answering the regular Bell telephone.
- The regular Bell line is required for direct communications to the Fire Dept. dispatch and must be kept free at all times during an alarm condition. They will be preparing for the arrival of the Fire Dept.

APPENDIX A

Employee Emergency Information Worksheet

Please complete this worksheet to help us identify barriers that could arise in an emergency situation and provide suggestions on how to overcome them. Your input will help us provide you with individualized emergency information.

The information collected is confidential and will only be shared with your consent. You **do not** have to provide details of your medical condition or disability, only the type of help you may need in an emergency.

Date:

Employee Information

Name:					
Unit:					
Telephone:	Email:				
Mobile Phone:					

Emergency Contact Information

Name:					
Telephone:	Email:				
Mobile Phone:					
Relationship:					

Workplace Location

1. Where do you work?

Address: 655 Bay Street, Toronto, ON M7A 2T4					
Floor: 10 th Floor	Room Name/Number:				

J 0	you work in different places on a regular basis? Yes No
	List the addresses, floors and room locations. (Use additional sheets as necessary)
tei	ntial Emergency Response Barriers
Car	you see or hear the fire/security alarm signal? Yes No Don't know
	If no, what would help you know the alarm was flashing/ringing? (Use additional sheets as necessary)
'ar	you activate the fire/security alarm system? Yes No Don't know
	If no, what would help you to sound the alarm? (Use additional sheets as necessary)
Ca	n you talk to emergency staff? Yes No
	If no, what would help you to communicate with them? (Use additional sheets as necessary
_ Car	n you use the emergency exits? Yes No Don't know
	If no, what would help you to exit the building? (Use additional sheets as necessary)

nec	o, what would help it fit, or is there a better location? (Use additional sheets as essary)
ıld	you find the exit if it was smoky or dark? Yes No
If n	o, what would help you to find the exit? (Use additional sheets as necessary)
	u exit the building by yourself? Yes No o, what would help you to get out? (Use additional sheets as necessary)
nn x	ou get into an emergency evacuation chair by yourself? Yes No Don't know
шу	ou get into an emergency evacuation chair by yoursen? Tes No Don't know
	o, what help do you need? (Use additional sheets as necessary)
If n	d you be able to evacuate during a stressful and crowded situation? Yes No_

	o, what would make this information accessible to you? (Use additional sheets a essary)
yoı	need help to evacuate, what instructions do people need to help you?
Ins	tructions: (Use additional sheets as necessary)
yoı	need other accommodations in an emergency, please list them here.
Ac	commodations: (Use additional sheets as necessary)

APPENDIX B

MAG Evacuation Assistance Self-Identification Form

Complete the information sections below in consultation with your manager to ensure that your requirements are adequately provided for during an emergency evacuation.

The purpose of this form is to document an individualized evacuation plan to be used during an emergency evacuation.

The personal information collected will be:

- Provided to the local Building Emergency Coordinator;
- Shared with your floor Fire Wardens; and

Stored securely.							
Employee Information							
Name:			Division:				
Email:			Branch:				
Phone:			Unit				
Manager In	formation						
Name:		Phone:					
Work Locat	tion Information	,					
Address:		Floor:					
City:							
Personal E	vacuation Plan						
Please indic	ate if your condition or require	ement is:					
Permanent							
If temporary, please indicate when this evacuation plan can be removed:							
What types of assistance are required during an emergency? (e.g. staff support, transfer instructions, etc.)							
Develop the details of your personal evacuation plan with your manager and record each step of the plan here. Please indicate any equipment or supplies that are to accompany you when evacuating from the building.							

Staff Support (s)								
Identify those staff members who have agreed to provide support to you during a building-wide evacuation and/or emergency situation. Determine if you will need more than one primary staff support.								
Primary	rimary Phone							
Alternate 1	Alternate 1		Phone					
Alternate 2		Phone						
You should discuss with your staff support person the types of supports you require and how they should assist you during an evacuation and/or emergency situation. If a member of your office has not been identified, please indicate to your manager that you require								
their assistance to do so. If after consulting your manager a staff support cannot be identified, please modify your personal evacuation plan accordingly.								
Designated V	laiting Area							
Indicate if your personal evacuation plan includes the use of a Designated Waiting Area (DWA), e.g. waiting in an area of refuge, within your building for further direction and/or assistance from onscene first responders (e.g. fire and/or emergency medical services) based on the nature of the incident.								
Consider identifying an alternate DWA should the primary area not be accessible or safe. Primary Designated Waiting Area:								
Alternate Designated Waiting Area:								
Acknowledgement								
The employee, the manager and all those identified within the personal evacuation plan are asked to provide their signatures below, indicating understanding and acceptance of their roles.								
Signature of E	mployee				Date			
Signature of Manager					Date			
Signature of Staff Support					Date			
Signature of Alt. Support 1					Date			
Signature of Alt. Support 2					Date			
Employees are encouraged to review their personal evacuation plan with their respective manager on a quarterly basis (at a minimum) to account for any change in the status of the support required and/or to update the list of identified staff supports, as required.								
Plan Review and Practice								
Action				Date		En	nployee Initials	