**Individualized Workplace Emergency Response Plan**

**Objective**

MDM Business Solutions Inc. understands that we have a responsibility to ensure a safe, dignified, and welcoming environment for everyone. We are committed to ensuring our organization’s compliance by incorporating accessibility legislation into our policies, procedures, equipment requirements, training, and best practices.

The objective of this Emergency Response Plan for People with Disabilities or Special Needs is to serve as a guide for an individualized plan for the person with the disability during an emergency. This plan is developed in accordance with the Accessibility for Ontarians with Disabilities Act (AODA) and Workplace Safety and Insurance Act to create an inclusive and accessible environment with everyone.

**General**

It is ***NOT MANDATORY*** for employees to disclose the specific diagnosis or details of their disability or condition. However, employees with a disability are responsible for identifying accommodations needed during emergencies, which may not be immediately evident, such as those related to mental health or chronic conditions.

A copy of an Individualized Workplace Emergency Response Information (Annex B) has to be signed and submitted first by the employee with the disability before attempting to make any accommodations for emergencies.

The details included in the plan will be determined through discussions among the employee, Manager, and Human Resources Manager. These will take place when there are alterations to the employee’s work location or job, or when there are temporary or permanent changes in their accommodation requirements.

The plan will be kept confidential and the employee with the disability must give their consent before the company can share the information to the co-worker that will aid the employee with the disability.

**Involved Parties**

**Management is responsible to:**

* Ensure that the organization’s emergency response plan is inclusive and complies with the Accessibility for Ontarians with Disabilities Act (AODA) and WSIA.
* Facilitate training to ensure all staff members are knowledgeable about disability considerations during emergencies.
* Implement effective communication methods for individuals with disabilities during emergencies.
* Develop and oversee evacuation plans that consider the needs of individuals with disabilities.
* Ensure the proper functioning of assistive technologies to support individuals with disabilities.
* Facilitate the development and implementation of personalized emergency plans for employees and regular visitors with disabilities.
* Establish and maintain a feedback mechanism for individuals with disabilities.
* Ensure comprehensive documentation and ongoing compliance with AODA regulations.

**Employee with accommodation needs:**

* Be aware of personal abilities, needs, and emergency requirements.
* Establish clear communication channels with a personal support network.
* Participate actively in the development of personalized evacuation plans.
* Ensure personal assistive devices are functional and accessible.
* Have emergency supplies at their workstation specific to their disability needs.

**Co-Worker/s who will assist is responsible to:**

* Stay informed about the organization’s emergency response plan and its provisions for individuals with disabilities.
* Assist in implementing effective communication methods for colleagues with disabilities during emergencies.
* Be prepared to aid colleagues with disabilities during evacuations.
* Respect and support colleagues with personalized emergency plans.
* Cooperate with the emergency response team and follow their guidance during emergencies.

**Evacuation Marshall is responsible to:**

* Assume the leadership role in the execution of evacuation procedures.
* Provide guidance to staff and individuals during emergencies.
* Coordinate effective communication strategies during evacuations.
* Manage accessible evacuation routes and exits.
* Implement individualized support plans for employees with disabilities.
* Maintain accurate documentation of evacuation procedures and incidents.

**Procedures**

**Determine who needs help**

Mobility Limitations

Mobility limitations, which include the use of mobility aids such as a wheelchair, scooter, walker, crutches, or a walking cane can impair a person’s ability to ascend stairs or travel long distances. Also, individuals with heart conditions or respiratory conditions may be included.

Vision Disabilities

Vision loss can include a broad range of conditions ranging from complete blindness to partial or low vision that cannot be corrected with lenses or surgery. A person’s ability to read signs or move through unfamiliar environments during an emergency may be challenged, creating a feeling of being lost and/or being dependent on others for guidance.

Hearing Disabilities

A person may be deaf or hard of hearing. The distinction between these terms is based on the individual’s language and means of communicating rather than the degree of hearing loss. In an emergency, the method in which emergency warnings are issued becomes critical to how a person with hearing loss can respond and follow safety instructions.

Non-Visible Disabilities

Non-visible disabilities can include communication, cognitive, sensory, mental health, learning, or intellectual disabilities in which an individual’s ability to respond to an emergency is restricted. They can also range from allergies, epilepsy, haemophilia, diabetes, thyroid condition, multiple sclerosis, pulmonary or heart disease, and/or dependency on dialysis, sanitary or urinary supplies. Individuals with non-visible disabilities may have difficulty performing some tasks without appearing to have a disability.

**Identify and Plan**

* Encourage individuals who anticipate requiring assistance during emergencies to voluntarily disclose their needs, to make arrangements for them in advance to meet their accommodation needs.
* The plan should list the names, locations, and contact information of those who will help the one with the disability.
* The plan should list how the employee with the disability is involved in every part of the emergency response, from the first alarm signal to the end of the process.
* The plan should list which parts the worker will know about or do on their own, which parts they will perform with assistance, and what the assistants should do.
* The plan should list any alternate routes the employee and the assistant may use when exiting the building.

**Buddy System**

* Assign 2 or more colleagues willing and able to assist their colleague with a disability during evacuation.
* Identify and train the assistants so at least 1 trained assistant is always present.
* Identify individuals with disabilities and those assigned to assist them in the Emergency Action Plan.
* Those who are involved in the plan do not need to know about the employee’s diagnosis. Instead, they only need to know what tasks they will need help with and how to provide that help.

**Review/Revision**

The individualized workplace emergency response information must be reviewed:

* When the employee moves to a different location in the organization;
* When the employee’s overall accommodations needs or plans are reviewed; and
* When the employer reviews its general emergency response policies.

**Additional resources**

* **The Guide for Evacuating People Who Need Assistance in an Emergency helps** to identify what information at-risk individuals might need and develop practical strategies to help keep them safe. Visit: <http://www.hrsdc.gc.ca/eng/disability_issues/doc/pfs/page00.shtml>.
* The Emergency Preparedness Guide for People with Disabilities/ Special Needs helps people with disabilities prepare for an emergency. It also includes tips for helping people with disabilities in an emergency and a list of emergency and disability related organizations. Visit emergencymanagementontario.ca and click “special needs”.
* The Accessible Digital Office Documents Project is a one-stop shop for creating accessible digital documents using today’s most popular office applications (Microsoft, OpenOffice, iWork, Corel, GoogleDocs, etc.) at <http://adod.idrc.ocad.ca/>.
* Learn more about the Accessibility for Ontarians with Disabilities Act and find free tools and templates at ontario.ca/AccessON.

**Annex A: Employee memo**

To: All Employees of MDM Business Solutions Inc.

From: MDM Business Solutions Inc.

Subject: Employee Safety During Emergencies

At MDM Business Solutions Inc., the safety and well-being of our employees are of utmost importance.

If you have a disability, whether it’s permanent or temporary, and you may require assistance or accommodation during an emergency, please inform us. We will guide you through completing an Individualized Workplace Emergency Response Information form and a plan that will cater to your specific needs in case of emergency.

It is important to note that we do not require the details of your medical condition or disability, nor is it required to be disclosed to the company. Rather, in the spirit of safety, we are interested in understanding the type of assistance you may require. The information you will provide will be kept confidential and shared only with your consent. If you have any questions or need to adjust existing emergency response information, please reach out.

Thank you for your cooperation and commitment to maintaining a safe working environment.

Sincerely,

MDM Business Solutions Inc.

**Annex B: Individualized Workplace Emergency Response Information Plan**

MDM Business Solutions Inc. Is required to provide individual emergency response information to employees with disabilities to comply with the Accessibility for Ontarians with Disabilities Act, 2005 (AODA). The purpose of the workplace emergency response information is to outline how an employee will be provided with assistance in the event of an emergency.

In consultation with the employees with disabilities, the Manager/Supervisor shall use the plan to determine the employee’s needs in an emergency.

If you have any questions or need assistance completing the Plan, please contact the Manager or the Human Resource Manager.

|  |
| --- |
| **For Employees with Disabilities/Special Needs** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Employee’s Printed Name and Signature Date** |

|  |  |
| --- | --- |
| **Contact Information** | |
| Employee’s Name: | |
| Email | Phone: |
| Manager/Supervisor’s Name: | |
| Date | |
| Update and Revision of Plan | |
| The AODA (2005) requires employees to update and revise their workplace emergency response information annually, or based on the following:   * Your emergency evacuation needs change. * The name(s) of the person(s) who will assist you in the event of an emergency change. * When your overall accommodation needs are revised * When MDM Business Solutions Inc. revises its emergency response policies | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Communication** | | | | | |
|  | | | **Yes** | **No** | **N/A** |
| All MDM Business Solutions Inc. building has an alarm system that warns employees of a fire emergency. Can you hear the fire emergency system? | | |  |  |  |
| **Workplace Emergency Response Information Plan** | | | | | |
| Do you require evacuation assistance to exit the building? | | |  |  |  |
| If yes, please identify what assistance will be required: | | | | | |
| Assistant(s) (if required) | | | | | |
| Name | Phone Number | Email | | | |
|  |  |  | | | |
|  |  |  | | | |
|  |  |  | | | |
| **Lockdown** | | | | | |
|  | | | **Yes** | **No** | **N/A** |
| Do you require accommodation(s) during a lockdown? | | |  |  |  |
| Workplace Emergency Response Information Plan | | | | | |
| If yes, please identify what assistance will be required: | | | | | |
| **Other Types of Emergency Requirements** | | | | | |
| Are there any other measures that could be introduced that would assist you in the event of an emergency? | | |  |  |  |
| If yes, please identify what accommodation will be required: | | | | | |

I consent to have my individualized emergency workplace response information shared with the person(s) designated to provide me with assistance in the event of an emergency:

|  |  |
| --- | --- |
|  |  |
| **Employee Printed Name and Signature** | **Date** |
|  |  |
| **Co-worker(s) Printed Name and Signature, if needed** | **Date** |