



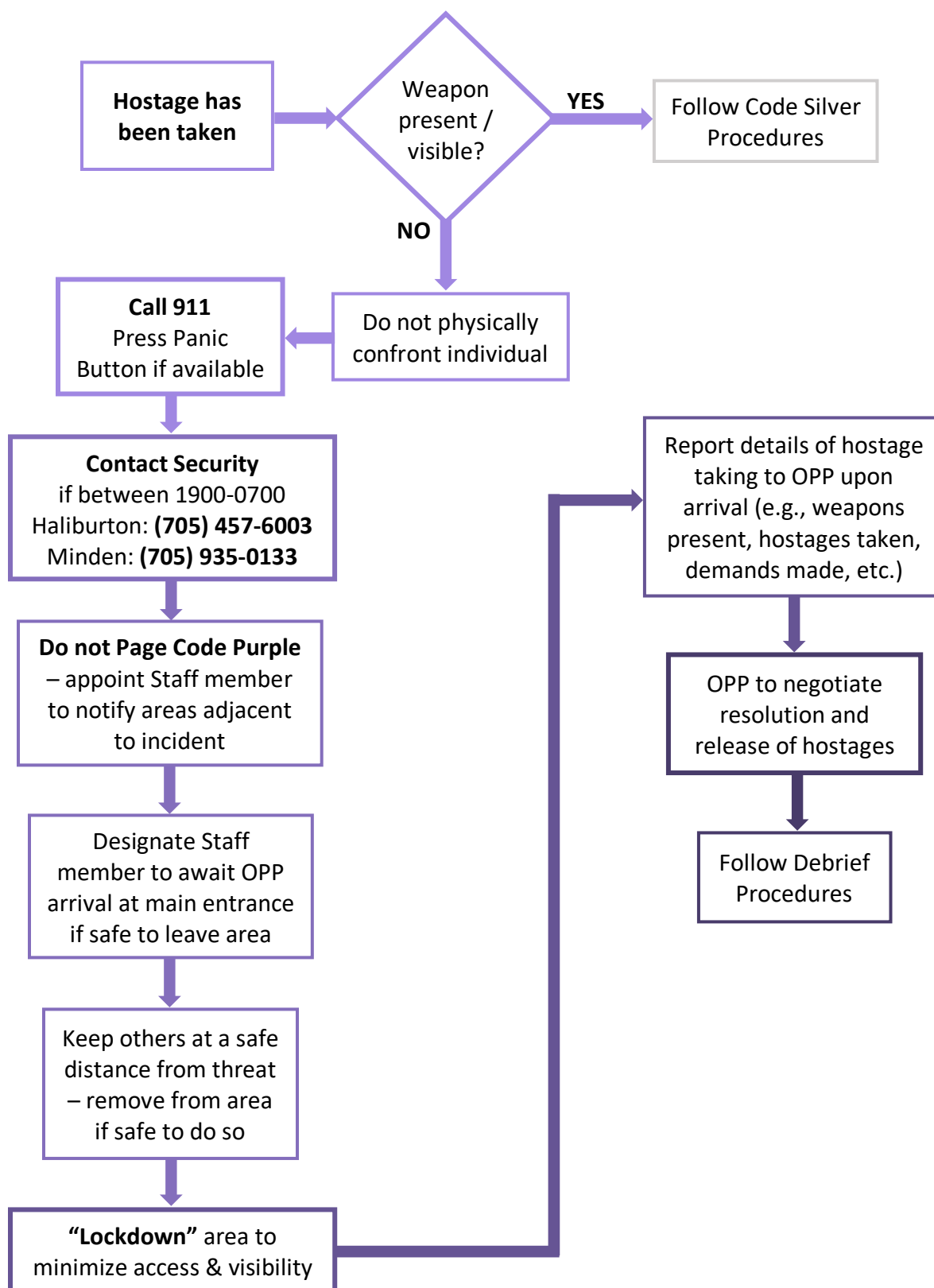
## CODE PURPLE HOSTAGE TAKING

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<b>Reviewed By:</b>	<b>Joint Health &amp; Safety Committee</b>
	<b>Executive Leadership Team</b>
<b>Approved By:</b>	<b>President &amp; CEO</b>
	<b>Director of Facilities &amp; Projects</b>

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### Hostage Taking – Algorithm



## Code Purple

### Policy – Hostage Taking

The purpose of Code Purple is to provide guidelines for HHHS personnel to follow during a hostage taking incident. This plan provides for an organized and effective response to a hostage taking incident within HHHS sites. Providing for the safety of Patients, Residents, Clients, Visitors, Staff, and other occupants of the building in a hostage taking situation is the primary goal of Code Purple.

During any hostage taking scenario, the primary goal is to remove all other people from the affected area and allow the Ontario Provincial Police (OPP) to negotiate a successful resolution to the situation.

**All Code Purple responses will be the responsibility of the OPP** and will escalate to a Code Silver when it is determined that an assailant has a weapon. Any role played by our Staff will be in support of OPP efforts, and will be conducted in a safe location, and as directed by Police. Organizations should consult with their local police services to determine the most appropriate terminology to be utilized, to ensure an enhanced police response when a Code Purple is called.

At some point, Police may decide that the use of lethal force is required in order to protect Hostages or Bystanders. This will occur whether inside the Facility or not, and will occur without warning or prior consultation. Police have many tools available, including, but not limited to: batons, pepper spray, tear gas, rubber baton rounds, conducted energy weapons (Taser), and firearms. The use of lethal force is the last resort, but Staff should be prepared for this outcome.

During a Hostage Taking event, the following basic principles will apply:

- Not all of those exhibiting violent behaviour are Patients, Residents, or Clients, or have a history of mental illness. Others who might present such behaviours might be:
  - Disgruntled employees or ex-employees
  - Unhappy family members, estranged spouses, non-custodial parents
  - Those interrupted while engaged in criminal behaviour
- On rare occasions, an individual may become desperate enough to take another person or persons hostage in an attempt to force compliance with their demands by using the hostages as currency. At this time, the **LOCKDOWN** Procedures must be activated. **LOCKDOWN** Procedures are found in the Emergency Response Manual and may need to be followed in conjunction with Code Purple Procedures. Individuals exhibiting such behaviours are the responsibility of the OPP, and our Staff will only intervene in order to prevent further injury to Patients, Residents, Clients, Visitors, or other Staff.

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- The degree to which our Staff will respond will be determined by whether or not:
  - The individual is armed
  - The individual is holding a hostage
- Staff are never expected to confront or attempt to disarm any individual who is carrying a weapon of any type.
- Staff will always permit the egress of such individuals as an alternative to confrontation. Lines of escape will never be blocked, and such individuals can be dealt with by the Police at a later time.
- All Code White responses will escalate to Code Purple as soon as it becomes clear that the individual has one or more hostages.
- Staff will always avoid areas where a Code Purple is in progress. Staff will always attempt to ensure that Patients, Residents, Clients and Visitors cannot access the area where a Code Purple is occurring.

In a Code Purple, the safety of Patients, Residents, Clients, Visitors, and Staff is paramount.

## Definitions

**Concealment** – May block the view of the subject, but affords no protection against gunfire. A normal drywall and stud wall would be an example of concealment.

**Cover** – May block the view of the subject, but is unlikely to be penetrated by gunfire. A cinder block fire wall would be an example of cover. Preferable to concealment.

**Hostage Situation** – An event in which an individual unlawfully takes and holds others against their will with the actual or threatened use of force. The individual(s) may subsequently make demands using the hostage(s) as currency or bargaining tools. Demands are often made to ensure compliance in exchange for the freedom of the hostage(s) taken. Generally, the location of the event will be known.

**Hostage Taker** – An individual who unlawfully takes and holds others against their will with the intention of using the person(s) taken as currency or bargaining tools.

**Hostage** – A person who has been unlawfully taken against their will.

**LOCKDOWN** – A total Lockdown is used in a serious emergency situation where the danger is in the building or where the danger exists immediately outside the Facility. A Lockdown minimizes access and visibility and shelters Patients, Residents, Client, Visitors, and Staff in secure locations. This type of LOCKDOWN is used when the physical threat is already in the Facility and measures need to be enacted to:

- Prevent the threat from accessing areas/assets being threatened;
- Protect people from entering areas where the threat may be present; and,
- Protect people from remaining in areas where the threat may be moving to.

**Weapon** – The Criminal Code defines a weapon as “anything used, designed to be used or intended for use: in causing injury or death to any person, or for the purpose of threatening or intimidating any person. And, without restricting the generality of the foregoing, includes a firearm”.

## Management Responsibilities

The Emergency Response Planning team consisting of at a minimum the Directors of Care and Director of Facilities & Projects will meet a minimum of once per year to review Code Purple Procedures, the Emergency Response Plan and start the planning for the annual drills or mock exercises including: Code Red, Code Brown, Code Black and Code Green exercises.

- The Director of Facilities & Projects is responsible for the implementation of Code Purple and a review of the Code Purple procedures annually
- The Director of Facilities & Projects will be accountable for the training of Code Purple with a focus on Security and Maintenance Staff knowledge as designates to the Director of Facilities & Projects
- Select drills will be organized with the HHHS Managers (or designates) and Staff to practice and identify areas of improvements. These drills will be summarized and shared with the Management Committee.
- The Acting Incident Manager, The Director of Facilities & Projects, Security (if applicable) and Area Manager will perform an event debrief within 10-days of an event being over, and provide a report summarizing the event to the HHHS Management Committee and Joint Health & Safety Committee within 30-days of the conclusion of the incident.
- The Director of Facilities & Projects will review with Security Services for input, awareness, and preparedness.

## Employee Responsibilities

- Security and Maintenance Staff are identified as designates to the Director of Facilities & Projects, and need to be knowledgeable and provide leadership of Code Purple when required.
- Maintenance Staff are to ensure entrances and driveways are cleared for Police vehicles in the event of a Code Purple.
- All Staff must obey the Acting Incident Manager, and Municipal Chief Fire Official, Emergency Responders, or OPP instructions upon arrival.
- Staff in every Department is to ensure their Staff are educated and aware of their documentation location.
- Staff are to participate in training, drills, and respond to Fire System Paging instructions.

## Security Responsibilities

- Ensure they are educated in Code Purple Procedures and aware of their documentation location.
- Participate in training, drills, and respond to Fire System Paging instructions.
- Direct OPP to the location of the incident.
- Secure area and assist in locking all exterior doors and exterior windows.
- Security Staff, or designate, will report to the main entrance to escort police to the Incident Command Centre, if safe to do so.
- Obey the instructions of the OPP upon arrival.

## Police Services

Law Enforcement (OPP) are the primary Responders, will secure the site and assume control in any Code Purple response. Police Officers may be wearing uniforms, tactical gear, and will be armed with weapons, chemical irritants, and other incapacitating devices. The OPP may shout commands and push individuals to the ground for their safety.

Do not interfere with the Police Officers by delaying or impeding their movements, do not present yourself as a threat. Officers will not stop to assist injured individuals. Rescue Teams may follow the initial Officers when safe to do so.

If you encounter a police officer, drop any items in your hands and immediately raise your hands and keep them visible at all times. Remain calm and follow their instructions.

It is the responsibility of the OPP to negotiate a successful resolution in any Hostage Taking situation.

## Appendices / Links

**Appendix 1** – Checklist Procedure – Hostage Taking – Acting Incident Manager

**Appendix 2** – Checklist Procedure – Hostage Taking – All Staff Not Held Hostage

**Appendix 3** – Checklist Procedure – Hostage Taking – Hostages

**Appendix 4** – Checklist Procedure – Command Center During a Code Purple

**Appendix 5** – Checklist Procedure – Recovery & Post-Incident Debrief

**Appendix 6** – Panic Button Location & Details

**Appendix 7** – Emergency Evacuation Kit Contents

## References

Extendicare. 2021. Emergency Preparedness and Response Manual. Retrieved:  
<http://scoc.ca/wp-content/uploads/2021/06/2021-01-25-emergency-preparedness-and-response-manual-2021.pdf>

Ontario Hospital Association (OHA). Code Silver Policy Template. Retrieved:  
<https://www.oha.com/Documents/Code%20Silver%20Policy%20template%20tool.docx>



## Appendix 1 – Hostage Taking – Checklist Procedure

DATE	_____	TIME	_____
LOCATION	_____	COMPLETED BY	_____

**Note: This document is reviewed during the Post Incident Debriefing. As each item is completed, record the time and initial when the situation permits.**

It is anticipated that any Code Purple is likely to escalate from a pre-existing Code White situation. In such situations, an Acting Incident Manager will either be at the site of the incident, or en-route from elsewhere in the Facility.

At a minimum, one or more Staff members will already be on site, attempting to deal with the Code White situation. Immediately upon seeing that the individual is armed and/or that they are holding one or more persons hostage, the following steps should be taken.

### The Acting Incident Manager Shall:

TIME	INIT	ACTIONS
TIME	INIT	1. Do not physically confront the individual. If at all possible, leave the immediate area if safety is threatened or at risk of being injured or taken as a Hostage.
TIME	INIT	2. Ensure the OPP have been notified if not already done - <b>Call 911</b> or press a Panic Button if available. a. Contact Security if between 7:00am-7:00pm and not already done - Haliburton: <b>(705) 457-6003</b> , Minden: <b>(705) 935-0133</b>
TIME	INIT	3. <b>Do not page Code Purple</b> (unless instructed to do so by OPP) – appoint a Staff member to notify areas adjacent to the incident and call the Manager On Call <b>(1-866-856-3253)</b> , if it is safe to do so.
TIME	INIT	4. Remove any Patients, Residents, Clients, and Staff from the area, if this can be done safely.
TIME	INIT	5. If Security is unavailable, designate a Staff member to meet OPP at entrance of the Facility to provide directions to scene of incident.
TIME	INIT	6. If at any time the situation escalates, <b>call 911</b> immediately and stay on the call with the Operator.
TIME	INIT	7. Attempt to dissuade the Hostage Taker from leaving with the hostage(s) if an attempt is made.
TIME	INIT	8. Keep tone of voice neutral but concerned, avoid comments or responses that may be perceived as judgmental.
		9. If Hostage Taker making demands, <b>never say “no”</b> – always respond with “I’ll do my best”
TIME	INIT	10. If the Hostage Taker responds aggressively, withdraw a little and re-assess the situation.

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TIME	INIT	ACTIONS
TIME	INIT	11. <b>Do not make promises</b> that are unable to be kept.
TIME	INIT	12. Do not “play into” the Hostage Taker’s fantasies, if they have them.
TIME	INIT	13. Observe the situation, making note crucial information such as: <ul style="list-style-type: none"> <li>a. Signs/Types of weapons</li> <li>b. What the Hostage Taker is holding</li> <li>c. Patient or Resident rooms nearby, making note of room numbers</li> <li>d. Any Patients or Residents nearby who will experience significant clinical risk if resolution is delayed (e.g., a diabetic whose insulin has been given but has received no food)</li> <li>e. If the Hostage Taker aware of other Patients, Residents, Clients, Visitors, or Staff members present</li> <li>f. Who the hostages are and how they are being held (restrained, sitting, standing, etc.)</li> <li>g. If the Hostage Taker is exhibiting signs of substance use (slurred speech, abnormal gait, drowsiness, confusion)</li> </ul>
TIME	INIT	14. Do not attempt to block the Hostage Taker’s egress from the Facility
TIME	INIT	15. Keep other individuals at a safe distance and <b>do not</b> permit others to engage in conversation with the Hostage Taker.
TIME	INIT	16. If it is safe to do so, establish a Command Centre at a safe location near the Hostage Taking event.
TIME	INIT	17. Upon arrival of the OPP, provide all available crucial information and comply with all requests, including hand-over of security information such as master keys and door codes.
TIME	INIT	18. Police to take control of the situation to attempt a successful resolution and secure freedom of Hostages.
TIME	INIT	19. Remain in current location until directed to move by Police.
TIME	INIT	20. Withdraw to a safer location <b>only if the Police has instructed that it is safe to do so.</b>
TIME	INIT	21. Upon arrival at safe location, remain in area until situation is under control, Hostages have been released, and witnesses have been

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TIME	INIT	ACTIONS
		identified and questioned. Do not leave safe location until Police have instructed to do so.
TIME	INIT	22. The Acting Incident Manager or designate must take notes and document all activities.

## Appendix 2 – All Other Staff During a Hostage Taking – Checklist Procedure

DATE \_\_\_\_\_ TIME \_\_\_\_\_  
LOCATION \_\_\_\_\_ COMPLETED BY \_\_\_\_\_

Note: This document is reviewed during the Post Incident Debriefing. As each item is completed, record the time and initial when the situation permits.

Upon being informed of or witnessing the Code Purple situation, all Staff members not captive in the Hostage situation should take the following actions.

### All Other Staff Shall:

TIME	INIT	ACTIONS
TIME	INIT	1. Do not enter the area affected by the Code Purple.
TIME	INIT	2. Get away from immediate danger and remove all Patients, Residents, Clients, and Visitors from the area safely.
TIME	INIT	3. Call 911 and provide as much information as possible (e.g., number of Hostages taken, name and descriptions of Hostages if known, location of the incident, demands made, if weapons are involved, your name, location, and phone number).
TIME	INIT	4. Do not permit Patients, Residents, Clients, or Visitors to enter the area affected by Code Purple.
TIME	INIT	5. Each Unit will follow the <b>LOCKDOWN</b> Procedures located in the Emergency Response Manual, locking all doors and windows for the duration of the emergency.
TIME	INIT	6. The Most Responsible Person of each Department will update the Acting Incident Manager as each Unit completes its <b>LOCKDOWN</b> measures.
TIME	INIT	7. <b>Do not use telephones</b> except for emergency messaging.
TIME	INIT	8. Staff in unaffected areas may visit Patient and Resident rooms for medications, needed procedures, etc. <b>if it is safe do so</b>
		9. All staircases and elevators are off-limits to anyone other than Police and should be considered out-of-service.
TIME	INIT	10. No Patient, Resident, Client, Visitors, or Staff member shall leave any unit, until the “ <b>All Clear</b> ” has been given by the OPP – <b>physically, not through an overhead announcement</b>

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TIME	INIT	ACTIONS
TIME	INIT	11. All appointments and scheduled procedures in the Facility will be canceled until further notice.
TIME	INIT	12. No one will leave the building without the approval of the Police.
TIME	INIT	13. Do not speak to the media or use social media.

## Appendix 3 – Emergency Department Staff During a Hostage Taking – Checklist Procedure

DATE \_\_\_\_\_ TIME \_\_\_\_\_  
LOCATION \_\_\_\_\_ COMPLETED BY \_\_\_\_\_

**Note:** This document is reviewed during the Post Incident Debriefing. As each item is completed, record the time and initial when the situation permits.

Upon being informed of the Code Purple situation (when occurring **outside** the Emergency Department), all Emergency Department Staff members should take the following actions.

### Emergency Department Staff Shall:

TIME	INIT	ACTIONS
TIME	INIT	1. Do not enter the area affected by the Code Purple.
TIME	INIT	2. The CEO (or designate) or Manager On Call may request the Charge Nurse to contact EMS dispatch on the direct line and advise that no further ambulances are to be sent to the affected Facility until the incident has been resolved by Police
TIME	INIT	3. Treat and discharge as many Patients as possible to the Waiting Room to free up stretcher space
TIME	INIT	4. Advise discharged Patients or those waiting for medical attention to remain in the waiting area until instructed by Police that it is safe to leave.
TIME	INIT	5. Attempt to cohort all critical Patients in an appropriate area, where they can receive treatment without a great deal of movement through the corridors.
TIME	INIT	6. Attempt to cohort all other Patients requiring admission into as few rooms as possible.
TIME	INIT	7. Close all room doors.
TIME	INIT	8. Prepare the Trauma Area to treat a potential gunshot wound victim.
TIME	INIT	9. Ensure that measure for decontamination of tear gas and/or pepper spray are in place in the Resuscitation Area.

## Appendix 4 – Command Center During a Code Purple – Checklist Procedure

DATE	_____	TIME	_____
LOCATION	_____	COMPLETED BY	_____

**Note:** This document is reviewed during the Post Incident Debriefing. As each item is completed, record the time and initial when the situation permits.

At least a partial activation of the Command Center is desirable during a Code Purple, assuming that the circumstances make it safe to do so. At a minimum, the Acting Incident Manager, Public Information, Liaison, Logistics and Scribe roles will be required. The purpose of the Command Center will be to coordinate activities in support of the Police operation, and to oversee a return to normal operations when the incident is concluded. The use of informal Command Center Staff and an improvised location may be required. The Command Center is responsible for notifying the governing bodies when the hospital has been placed on redirect and coordinating resources and patient care.

Upon being notified of a Code Purple in progress, the Command Centre Team will immediately take the following actions:

### The Command Center Team Shall:

TIME	INIT	ACTIONS
TIME	INIT	1. During normal business hours the CEO will consider the need to activate the Command Center, and commence activation, if it is safe to do so. Retrieve the Command Center Kit from the Business Office.
TIME	INIT	2. Outside of normal business hours, the Manager On Call will consider the need to activate the Command Center, and will commence activation, if it is safe to do so.
TIME	INIT	3. The Command Center (CEO or Manager On Call) will follow OPP Instructions.
TIME	INIT	4. The Acting Incident Manager may be relieved by the CEO or designate. In some circumstances, returning to the Facility may be unsafe and, in these cases, the Acting Incident Manager will remain in charge of the situation, supported by the CEO or designate by telephone (if possible).
TIME	INIT	5. The Command Center (CEO or Manager On Call) will notify the Management Team members, but should be directed not to return to the Facility as this is potentially unsafe. They should remain at a number where they can be updated periodically by telephone.

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TIME	INIT	ACTIONS
TIME	INIT	6. The Command Center (CEO or Manager On Call) will ensure that local Emergency Responders and Fire Department are notified if it is necessary to put the hospital on redirect.
TIME	INIT	7. Maintenance and Staff will be contacted by the Command Center (CEO or Manager On Call) to provide a safe perimeter to the best of their ability and as safe to do so, and following OPP instructions to prevent Visitors and Staff from entering the area during a Code Purple. <ul style="list-style-type: none"> <li>• A log must be kept of people entering and leaving the site, in the event that OPP allow people into and out of areas of the Facility.</li> </ul>
TIME	INIT	8. All traffic in and out of the SITE will be limited. Any suspicious activity should be reported immediately to the Command Center, Security, or the OPP. A log will be kept of any persons allowed access to the site by Police.
TIME	INIT	9. Under the Command Center's instructions, Patients, Residents, Clients, and Visitors will be given limited information of the incident. The Most Responsible Person in each area will assure them of the safety measures being taken on their behalf.
TIME	INIT	10. No one will speak to the media except the CEO or designate.
TIME	INIT	11. Upon resolution of the Incident, OPP will physically declare the <b>"All Clear"</b> through the Facility affected – <b>"All Clear" will not be declared over the Fire Panel PA System</b>



## Appendix 5 – Recovery & Debrief Post-Incident – Checklist Procedure

DATE \_\_\_\_\_

TIME \_\_\_\_\_

LOCATION \_\_\_\_\_

COMPLETED BY \_\_\_\_\_

**Note:** This document is reviewed during the Post Incident Debriefing. As each item is completed, record the time and initial when the situation permits.

The resolution of the incident will be the decision of the Police. When the situation has been resolved and under instruction of the Police, the Command Center (CEO) should immediately

### The Command Centre CEO (or designate) Shall:

TIME	INIT	ACTIONS
TIME	INIT	1. Police will advise the CEO or designate (Director/Senior Manager On Call) (or designate) when it is safe to end the Code Purple Procedures.
TIME	INIT	2. The Command Center and CEO (or designate) will instruct to open the doors only when the “ <b>all clear</b> ” is given by Emergency Responders.
TIME	INIT	3. In the event that the Hostage Taker is uninjured, they will be taken into Police custody and removed from the building.
TIME	INIT	4. In the event that the Hostage Taker is injured, they will be taken into Police custody and then treated by medical Staff accordingly.
TIME	INIT	5. In the event that the Hostage Taker has been killed by Police, they will be left at the Site for the purposes of investigation of the Incident. This may deny access to the location for a period of hours or days. <ul style="list-style-type: none"><li>Any Patients, Residents, Clients, or services in the affected area may need to be systematically and carefully relocated to another part of the Facility, under Police supervision, so as not to inadvertently disturb any physical evidence.</li></ul>
TIME	INIT	6. Upon completion of the Police investigation, the body of the Hostage Taker will be removed by the Coroner.
TIME	INIT	7. Police will advise when the area can be cleaned and returned to normal operations.
TIME	INIT	8. The Command Center (CEO or Manager On Call) will issue a communication of “ <b>All Clear</b> ” to All Staff and Physicians.
TIME	INIT	9. The Command Center (CEO or Manager On Call) will determine the plan for normal service.

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TIME	INIT	ACTIONS
TIME	INIT	10. Affected Patients, Residents, Clients, Visitors, and Staff, particularly those in the immediate vicinity of the incident, may require Critical Incident Stress De-briefing. Arrangements should be made for this service with the support of the CEO and Manager of Human Resources.
TIME	INIT	11. The Acting Incident Manager(s) (per Area) must collect all documentation of the incident, including Event Logs, Situation reports, etc., and forward to the CEO for storage against future need.
TIME	INIT	12. The CEO (or designate) needs to prepare for an After Action debriefing involving all Staff involved within 2-days or as soon as can be organized.
TIME	INIT	13. The CEO and The Acting Incident Manager(s) (per area affected) must complete an After Action Report, including any errors, gaps, or omissions identified, and any recommendations.
TIME	INIT	14. The CEO shall schedule a formal Post-Incident Debriefing, and involve Managers and external parties who have relevant knowledge and experience of the incident including: participating Emergency Responders, OPP, Municipal and/or County agencies, within 10 business days of the incident stand-down.
TIME	INIT	15. The Director of Facilities & Projects, with assistance from the CEO, will prepare a final report on the Incident, including all key learnings, recommendations, and other corrective actions and action plans, and will furnish this to the Management Team within 30-days of conclusion of the incident.
TIME	INIT	16. The Director of Facilities & Projects must incorporate the final recommendations into the Emergency Response Plan.

## Appendix 6 – Panic Button Locations & Details

### Call List:

Police Department	(613) 329-1835
Fire Department	(705) 457-2323
ER Department	(705) 457-1721
TAS Paging (Manager On Call)	(866) 856-3253

### Notes:

1. Desk Buttons are hard wired devices to the Security Panel.
2. Wireless Pendants communicate on 433MHz radio frequency proprietary to all Security Devices

Haliburton		
Location	Type	Quantity
Business Reception	Desk Button	1
Foundation Office	Desk Button	1
Telemedicine Office	Desk Button	1
Health Records Office	Desk Button	1
CEO Office	Desk Button	1
Executive Assistance Office	Desk Button	1
Acute Nurse Station	Desk Button	1
ER Triage Desk	Desk Button	1
ER Area	Wireless Pendant	4
Business / LTCH Screening Desk	Wireless Pendant	2
X-Ray	Wireless Pendant	1
Acute Area	Wireless Pendant	2
Minden		
Location	Type	Quantity
ER Triage Desk	Desk Button	1
ER Doctor's Office	Desk Button	1
X-Ray	Desk Button	1
X-Ray	Wireless Pendant	1
CEO Office	Desk Button	1
Foundation Office	Desk Button	1
Business Office	Desk Button	1
ER Area	Wireless Pendant	2
LTC Screening Desk	Wireless Pendant	1
Director's Office (spares)	Wireless Pendant	2

## Appendix 7 – Emergency Evacuation Kit Contents

Emergency Evacuation Kit Contents		Quantity
<input type="checkbox"/>	Small Flashlights	4
<input type="checkbox"/>	Headlamp	1
<input type="checkbox"/>	Identification Vests	4
<input type="checkbox"/>	Name tags	1 pack
<input type="checkbox"/>	Masking tape	1
<input type="checkbox"/>	Flagging tape	1
<input type="checkbox"/>	Caution tape	1
<input type="checkbox"/>	Coloured chalk	1 box
<input type="checkbox"/>	White chalk	1
<input type="checkbox"/>	Clipboards	2
<input type="checkbox"/>	Markers/pens	1 bag
<input type="checkbox"/>	Triage Tags	1 pack
<input type="checkbox"/>	Emergency Preparedness & Response Manual	1
<input type="checkbox"/>	First Aid Kit	1
<input type="checkbox"/>	<b>Search Kit</b>	1
<b>Search Kit Contents</b>	<input type="checkbox"/> “Searched” Flyers	2 sheets
	<input type="checkbox"/> Minden or Haliburton Detailed Zone Maps	1 doc
	<input type="checkbox"/> Whistles	1 pack