

Extended Care Facility Emergency Response Guidelines

FACILITY:
PURPOSE:
To provide basic emergency planning, response and recovery guidelines for extended care facilities (e.g., nursing homes, assisting living facilities, adult day care, mental health/retardation facilities). Preplanning efforts should include developing comprehensive checklists that will assist facility personnel in responding to an emergency. Emergency response guidelines should be tailored to meet specific facility needs. They should also be periodically reviewed and revised by personnel responsible for their use in order to keep the documents current.
APPLICABILITY: This document presents guidelines useful for responding to a variety of emergency conditions. These conditions include but are not limited to the following:
 Extended power loss Fire or explosion
 Hazardous material incident Mass casualty incident
 Offsite event affecting facility habitability, e.g.: Transportation incident (interstate, railroad, airline)
 Toxic (chemical gas, liquid) release Nuclear facility event.
 Security (bomb threat, sabotage, hostage situation, unauthorized entry) Severe weather (tornado, hurricane force winds, flooding)
APPROVED: Facility Manager Date

<u>NOTE</u>	<u>:</u> Ir	nitia	l each step below to indicate completion or an "N/A" to indicate not applicable.
1.	Init	iate	a chronological log of events and maintain notes on actions taken.
2.	Ap	poir	nt/designate individual in charge of managing the facility's emergency response effort.
3.	per..	Son Sev Inju The need	nine if emergency assistance is needed from local fire, law enforcement or rescue nel. Examples of situations requiring offsite assistance might include: were damage to facility aries to personnel or clients a facility has lost (or is expected to lose) power, water and/or other infrastructure added to sustain client health/safety and your backup capability is inadequate to provide their needs ents must be relocated/evacuated to another facility
	CA	UT	In a large scale event, emergency services or other assistance may not be immediately available. Facilities should have plans and agreements in place to remain self-sustaining to the furthest extent possible. Current standards suggest planning for a minimum of 3 days sustainment, but 4 days is highly recommended. This should include provisions for water, food, oxygen, fuel, etc. An example emergency supply list is provided as Attachment 4.
4.			te assistance is needed, then request fire/law enforcement/rescue assistance as needed epare for their arrival:
		Cal	Il for assistance. Refer to Attachment 1, EXTERNAL SUPPORT AND CONTACT ST, for numbers. Provide the following information when calling:
		1.	Description of event/hazard
		2.	Number and extent of injuries
		3.	Caller's (your) name:
		4.	Facility name:
		5.	Type of facility (e.g., Nursing Home, Assisted Living, Group Home)
		6.	Facility maximum occupancy level: rooms, individuals
		7.	Special equipment or care needed such as oxygen, water or dialysis assistance
		8.	Address:
		9.	Jurisdiction (city or county):
		10.	Your telephone/call-back number:
		11.	Emergency fuel needs and amount (if needed)

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4	Continued:

- b. Assign staff member(s) to meet incoming emergency response vehicles upon arrival.
- c. Provide Attachment 2, SITE PLAN to responding emergency personnel.
- d. Provide Attachment 3, HAZARDOUS MATERIALS LIST (the type, quantity and location of hazardous materials kept onsite such as oxygen tanks, pool and laundry chemicals, gas bottles) to responding emergency services personnel.
- e. Help direct them to the location on the facility grounds where services are needed.
- ___5. Notify other local/state agencies that should be notified as time permits. These may be able to help coordinate additional assistance:
 - Nursing Homes Health Department
 - Assisted Living Facilities and Adult Day Care Department of Social Services
 - Mental Health Facilities Department of Mental Health and Mental Retardation Services

6. Notify the facility owner/operator/manager as time permits:

NAME	TITLE	CONTACT NUMBERS
Primary:		Office: Home: Cell:
		Pager:
Alternate:		Office: Home: Cell: Pager:

7. Establish a central command location to manage operations and response	7.	Establish a central	command	location to	o manage	operations	and respons	se
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a.	The facility Command Center (location from which emergency	operations v	vill b	Ę
	coordinated and key decisions made) is:			

- ___8. Alert staff and conduct personnel accountability:
 - a. Designate method(s) for alerting staff. Consider use of cell phones, radios, pagers, walkdowns, alarm/PA system or other appropriate mechanism.
 - b. Designate individual(s) to alert staff and conduct personnel accountability:
 - c. Verify staff accounted for. If personnel remain missing, then initiate efforts to locate them. However, if they are presumed to be in a hazardous area or special assistance is needed to help locate them, immediately notify Emergency Services and ask for help.
- __9. Brief staff on event conditions, response activities underway and priority needs. Make assignments as necessary.

17. Consider taking pictures to document event (still photographs or video).

- ___18. Prepare for media (if situation is expected to raise media/public interest):
 - a. Designate an individual to give media briefings (facility spokesperson, e.g., marketing or sales representative, public information specialist, attorney).
 - b. Designate an area from which to provide media briefings.
 - c. Consider limiting comments to a prepared (i.e., written) statement.
 - d. Instruct staff that the spokesperson is the individual authorized to speak with the media. Media inquiries should be directed to that person.
 - e. Control media access escort to the designated media briefing area; limit their coverage to the area of concern.
- ____19. Ensure safe storage of files, records, computer diskettes and other forms of documentation. Place hard copies in safe storage areas, backup electronic files, etc.
- __20. Review Attachment 1, EXTERNAL SUPPORT AND CONTACT LIST. Identify any additional resources that may be needed to respond to or recover from the incident and initiate contacts as necessary.
- 21. Continuously review and make provisions for humanitarian assistance as needed:
 - Meals for staff, residents, guests
 - Resident medications and incontinent products
 - Check cashing policy, cash availability, financial assistance
 - Requesting assistance from American Red Cross
 - Sanitation facilities
 - Sleeping accommodations (e.g., staff remaining for long-term recovery)
 - Transportation
 - Keeping relocated residents together

ATTACHMENT 1 EXTERNAL SUPPORT - CONTACT LIST

ORGANIZATION		IZATION	OFFICE TELEPHONE	EMERGENCY OR AFTER-HOURS TELEPHONE
Emergenc	y :			
Fire/Law	Enforc	ement/Rescue		
Alarm Sys	tem Ve	ndor:		
Departmen	t of He	alth		
Department of Social Services		cial Services		
Humanitar	ian	Red Cross		
Aid		Salvation Army		
Insurance:				
Legal Services:				
Pharmacy:				
Records Retention Services:		Services:		
Repair	Repair Electrical			
Services: Mechanical		hanical		
Plun		nbing		
	Glas	S		
Smoke/Fire		ke/Fire		
General Contractor				
Sprinkler System Vendor:		Vendor:		
Transportation Services:		rvices:		
Utilities:	Electric			
	Gas			
	Telep	hone		
	Water	-		

ATTACHMENT 2 SITE PLAN [TO BE INSERTED BY FACILITY]

Note: This section should include information such as:

•	A description of potential hazards that the facility is vulnerable to, e.g., hurricanes, tornados,
	flooding, fires, hazardous material incidents from nearby facilities or transportation accidents,
	proximity to railroads, proximity to nuclear power plants (within 10 mile or 50 mile emergency
	planning zone), power outages during severe weather, etc.

• Identification of Hurricane Zone (if applicable):

- Identification of Flood Zone (if applicable), as identified on a Flood Insurance Rate Map:
- Site Plan/Facility Map
- Locations of electrical panels, fire/smoke alarms and infrastructure equipment including gas, water and electrical shut-offs, distribution panels, oil/gas tanks and burners, sewer manholes, etc.

ATTACHMENT 3 HAZARDOUS MATERIALS LIST

ITEM/MATERIAL	QUANTITY	LOCATION

ATTACHMENT 4 EXAMPLE EMERGENCY SUPPLY LIST

A PERSONAL DISASTER SUPPLY KIT SHOULD INCLUDE:

- A 4-day supply of water (at least 3 gallons per person per day) and food that will not spoil. Additional water may be needed for people with special medical needs. Note: A 3-day supply is the accepted standard, but 4 days is highly recommended.
- At least one change of clothing and footwear per person.
- At least one blanket or sleeping bag per person.
- A first aid kit, including prescription medication.
- Emergency tools, including a battery powered NOAA Weather Radio, a portable radio, flashlight, extra batteries, gloves, and boots.
- An extra set of car keys and a credit card or cash (merchants may not accept checks or credit cards following a catastrophic event).
- Special items for infant, elderly, or disabled dependents.
- Maps

The following checklist is provided to assist in determining supplies needed to accommodate evacuation or sheltering in place. While 3 days is the accepted norm, it is strongly recommended that supplies to provide for a minimum of 4 days duration be arranged.

FOOD SUPPLY LIST - NON-PERISHABLE:

ITEM	QUANTITY NEEDED:
Can opener	
Coffee	
Condiments	
Creamer	
Dish detergent	
Jelly	
Juice, fruit	
Meat, canned (e.g., chili, tuna, stew)	
MREs (Meals Ready to Eat)	
Peanut Butter	
Pork and Beans	
Pudding, canned	
Soft drinks	
Sugar	
Sweet-N-Low / Equal	
Utensils, disposable (e.g., forks, spoons, cups, plates)	
Vegetables, canned	
Water, bottled	

FOOD SUPPLY LIST - PERISHABLE:

ITEM	QUANTITY NEEDED:
Bread (loaves, buns)	
Fruit	
Meats, assorted	

BEDDING AND LINENS SUPPLY LIST:

ITEM	QUANTITY NEEDED:
Blankets	
Cots	
Mattresses	
Sheets	
Towels	
Wash (face) cloths	

MEDICAL AND PERSONAL HYGIENE SUPPLY LIST:

ITEM	QUANTITY NEEDED:
Prescription Medications	
Incontinence Products	
Aspirin	
Acetaminophen	
Allergy/cold preparation	
Antacid tablets	
Antibiotic ointment	
Anti-diarrhea agent (e.g., Imodium)	
Anti-nausea agent (e.g. Emetrol)	
Bandages, assorted sizes	
Benadryl	
Eye drops	
Hand cleaner, waterless	
Hand lotion	
Hydrocortisone cream, 1%	
Hydrogen Peroxide	
Ibuprofen	
Muscle liniment (e.g. Myoflex)	
Oxygen (specify container types, portable, bottles, etc.)	
Soap (liquid, for hand and bath)	
Toiletries Kit: Shaving cream, shampoo, toothbrush, toothpaste, etc.	

OTHER:

ITEM	QUANTITY NEEDED:
Fuel (e.g., emergency supply for generators) Specify gas, diesel, etc.	

ATTACHMENT 5 SHELTERING GUIDELINES

- 1. If advised to "shelter in place," then do the following:
 - a. Ensure adequate staff available to accommodate needs and support 24/7 operations. Assist personnel/critical workers in making arrangements for their own families, e.g., allocating space for their sheltering, sleeping and care at your facility.
 - b. Ensure adequate arrangements for logistics and humanitarian needs (e.g., food, water, shelter, medical supplies). It is recommended that plans be made to support a minimum 4 day duration. Review Attachment 4, EXAMPLE EMERGENCY SUPPLY LIST, and initiate efforts to obtain needed supplies.
 - c. Identify safe locations on the premises where residents will be housed. For example, ensure people are placed away from areas that could become hazardous in a severe weather event.
 - d. Establish provisions to monitor/track/continuously account for client whereabouts.
- 2. If your facility is to be used as a shelter for patients coming from another facility, then do the following:
 - a. Confer with facility that contacted you. Discuss how patients will be transported to your facility, offloaded, special assistance and equipment required, additional staff, etc. and make provisions accordingly.
 - b. If a waiver is needed due to the anticipated overflow of operating capacity, then contact the regulating agency and submit request.
 - c. Ensure adequate staff available to accommodate needs and support 24/7 operations. Have staff prepare to receive incoming patients. Assist personnel/critical workers in making arrangements for their own families, e.g., allocating space for their sheltering, sleeping and care at your facility.
 - d. Ensure adequate arrangements for logistics and humanitarian services (e.g., food, water, shelter, medical supplies). It is recommended that plans be made to support a minimum 4 day duration. Review Attachment 4, EXAMPLE EMERGENCY SUPPLY LIST, and initiate efforts to obtain needed supplies.
 - e. Identify where the incoming residents will be housed. Ensure people are placed away from areas that could become hazardous in a severe weather event.
 - f. Establish provisions to monitor/track/continuously account for incoming residents being sheltered.

ATTACHMENT 6 EVACUATION GUIDELINES

- 1. Notify Reciprocal Agreement/Host Facility:
 - Pre-arrangements should be made with Host Facilities that are nearby as well as distant (out of region) in the event clients must be relocated out of harm's way, as in a hurricane situation.
 - For severe weather situations, relocation should be completed before the arrival of tropical storm force winds (greater than 40 mph).

FACILITY NAME	LOCATION	MANAGER	CONTACT NUMBERS
			Office: Home: Cell:
			Pager:
			Office: Home: Cell:
			Pager:
			Office: Home: Cell:
			Pager:

2. Initiate relocation activities:

- a. Designate staff responsible for arranging transportation and ensuring an orderly relocation.
- b. Determine time needed to relocate clients and logistical support items (medicines, records, food, etc.). Relocation will have to be completed before onset of hazardous conditions, to the furthest extent possible.
- c. Arrange for client transportation, additional staff and assistance, etc. as appropriate. Activate mutual aid agreements.
- d. Arrange for transportation of records, medications, food, water and other necessities to Host facility.
- e. Identify primary evacuation routes that will be used, and secondary routes if the primary route becomes impassable. Provide maps.
- f. Arrange for staff transportation, accompaniment of clients, etc. to Host Facility.
- g. Determine what staff and clients need to take (refer to Attachment 4, EXAMPLE EMERGENCY SUPPLY LIST).

- 3. Ensure accommodation of special needs, e.g., medicine storage, handicap access, pre-positioning of supplies and provisions at the Host facility, etc.
- 4. Keep track of clients:
 - a. Record locations to which individuals are sent (e.g., another facility, hospital, home, shelter).
 - b. Establish provisions to monitor/track/continuously account for clients once relocated.
- 5. Designate staff responsible for securing your facility. Make task assignments (e.g., lock-down, site assessment, ensuring patrons leave). Ensure all clients are accounted for and out of the facility.
- 6. Establish provisions to notify family members/guardians/next of kin, and to respond to inquiries about residents who have been relocated.
- 7. When ready to return to facility of origin:
 - a. Verify facility is inspected, is habitable and structurally sound.
 - b. Verify Facility Manager/designee authorized re-entry.
 - c. Initiate operations to transport clients from the Host facility back to the home facility.