

GUIDANCE NOTES For Special Needs Facilities On Creating an Emergency Management Plan

These planning notes are intended as an aid in developing your emergency management plan. They are not part of the plan and should not be included in or attached to the plan.



**DODGE COUNTY OFFICE
OF EMERGENCY
MANAGEMENT**



**Hazmat • Homeland Security • Local Emergency Planning Committee
Citizen Corps • Emergency Planning • Community Right-to-Know Act**



DODGE COUNTY – STATE OF WISCONSIN OFFICE OF EMERGENCY MANAGEMENT

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MEMORANDUM

Emergency Management

To: Special Needs Facilities

Planning

From: Dodge County Office of Emergency Management

Response

Date: May 8, 2006

Re: Creation of an Emergency Management Plan

Recovery

Facility Managers:

Mitigation

The accompanying emergency management plan and this planning guidance document are designed to develop cooperation and coordination between the responding agencies and facilities within Dodge County.

Emergency Planning & Community Right-to-Know Act

The plan is designed to assist facility administrators and risk managers to develop a standardized plan that reflects current regulatory requirements. It also provides for coordination and cooperation with city and county emergency managers.

Hazmat

Through the efforts of emergency response planning, hopefully everyone will gain a greater awareness of, and respect for, the emergency response issues faced by special needs facilities. Dodge County is also striving to raise the awareness and respect for the corresponding issues posed to Emergency Management Departments. It is the county's goal to ensure any gaps that exist between the special needs facilities and emergency management communities are bridged, leading to quicker, more efficient responses to all hazards.

Homeland Security

Should you have any questions in the process of creating your Emergency Management Plan, please do not hesitate to contact our office at any time for assistance.

Local Emergency Planning Committee

Thank you for your cooperation in this matter.

Citizen Corps

Guidance Notes for Planning Special Needs Facilities Sample Emergency Management Plan

1. General Notes

- A. The entry **Name of Facility** should be replaced with the appropriate facility name. This can easily be accomplished by using the MS Word edit and replace functions or a similar global change command if you're using other word processing software. Remember to assign/reassign proper page numbers in the table of contents when you have completed the entire plan.
- B. The plan is designed to be generic enough for use by any special needs facility. However, you are encouraged to edit portions of the plan so it represents your particular situation. The following guidance is provided to assist you in completing those portions of the plan requiring amendment and for completing plan attachments. Remember to assign/reassign proper page numbers in the table of contents when you are finished.

2. Specific Notes – referenced to appropriate sections of the sample plan.

- A. Authority – Insert the applicable health and safety code chapter. Additional corporate standards and other regulatory standards that require you to have a plan should also be referenced in this paragraph.
- B. Purpose – Paragraph A refers the reader to attachment 1. Attachment 1 is a facility hazard analysis. Instructions for completing this form are contained on page 6 of this document.
- C. Scope – self-explanatory.
- D. Situation and Assumptions, Paragraph A1 – insert the name of the city and county in which your facility resides.

Situation - Paragraphs A1 through A4 – The situations reflected in the sample plan are generic and apply across the board. You may, however, want to edit and/or add specific situations that affect your facility.

Assumptions - Paragraphs B1 through B8 – The assumptions reflected in the sample plan are generic and apply across the board. It is recommended (not mandatory) you add any assumptions that specifically reflect your facility's disaster profile.

Cross off those which do not apply. Add additional on lines provided after number 8.

- E. Concept of Operations

Background – Paragraphs A1 through A2 – You will probably not need to make any changes to these paragraphs.

Paragraph A3 – This paragraph refers to four recommended implementation levels. This is fairly universal throughout the emergency management community. If you choose not to use a 4-level system, you will have to make appropriate changes to this paragraph.

Paragraph B – Readiness Levels – If you already use, or choose to adapt the 4-level system referred to in the previous paragraph, you will probably not need to change the information in the sample plan. If you plan to or already use a different system, you should rewrite this section to reflect that system.

Level 1 – You should contact the appropriate agency (police, fire, EMS, etc.) for day-to-day emergencies that do not fall under this plan. You start at the lower level and work your way up. You may or may not have a city emergency management coordinator. If you do, insert the city name in the appropriate space. If you do not have a city coordinator, eliminate line 2 and change the other line numbers to 2 and 3. In either case, enter the county name in the appropriate space.

F. Organizational Information, Capabilities and Resources

Paragraph A – Mission Statement – Remove the italicized sentence referencing this guidance. Develop and insert an appropriate mission statement for your facility. Four examples of missions' statements (taken from a pilot planning project) for nursing homes and assisted living centers (or both) follow:

Harlingen Nursing Center is a 120-bed nursing home. The center's mission is to provide a wide variety of health care services. The staff takes a personal interest in each resident, exerting every effort to provide high quality health care while maintaining a warm, friendly family attitude.

Villa of Harlingen is a 46-bed state-supported assisted living residence. Villa's mission is to fulfill the living needs of their residents and to give them an enriched lifestyle and better quality of life.

Golden Palms Retirement & Health Center is a not-for-profit continuous care retirement community. The facility houses 65 long-term care/assisted living residents and 120 independent living residents. Golden Palms was created to provide a comfortable lifestyle to retired men and women in a caring environment. Golden Palms believes they must earn the respect and friendship of their residents every day.

Twinbrooke South is a 60-bed Nursing Home, which provides care for private Medicare residents. Twinbrooke's mission is to treat all residents and patients of the facility with dignity and respect at all times under all circumstances.

Paragraph B – Functional Elements – – Remove the italicized sentence referencing this guidance. Develop and insert information pertaining to each of the 8 core elements listed in the sample plan. This is one of the most important portions of your plan. State and local emergency management jurisdictions cover these issues in separate, detailed annexes to their emergency

management plans. While such detail is not necessary for your facility plan, you must address these 8 core functional elements. This information is critical to the emergency management coordinator because it provides him/her with information in advance pertaining to your ability to respond internally to a disaster. In elements that refer to agreements, indicate whether agreements are formal and written or informal and verbal. Also, indicate when you don't have agreements. An example of functional elements taken from the aforementioned pilot-planning project follows:

Direction and Control:

Avalon Assisted Living employs a centralized system of Direction and Control. Information is gathered from a number of sources including personal observation, the National Weather Service, the news media, the Emergency Alert System (EAS), the city/county Emergency Management Directors and Avalon's corporate office. Information is processed and analyzed by the administrative staff with final decisions being made by the facility Administrator.

Alert and notification of facility staff is accomplished verbally and by telephone using a current alert and notification roster.

Specific procedures for all aspects of disaster response and recovery are located in the facility plans and procedures.

Warning:

Avalon warns staff, patients and patient families of an impending or immediate threat. Warnings are given verbally (face-to-face or telephone). In addition, staff members have the authority to issue warnings and make immediate decisions when there is an imminent threat to the facility, its patients or staff.

Communications:

Avalon has basic telephone, cellular phone, fax, and pager communications equipment. They also have an alarm system that immediately alerts the fire department, police department and staff as well as a passive alarm system for internal warning.

Shelter/Mass Care:

For minor emergencies, Avalon staff and residents will shelter-in-place. For major disasters, staff and residents will move to other facilities or shelters (see evacuation).

The facility maintains a 7-day supply of food and water plus a 3-day emergency supply. Avalon has backup generator powered by natural gas. If natural gas is unavailable, the system has an alternate fuel tank run by gasoline that provides four hours of use under full load. The generator is tested at full load on a weekly basis.

Evacuation:

In the event of a full evacuation, Avalon has written agreements with the following facilities that will shelter Avalon's residents.

*Avalon Place
Highway 19
Trinity, WI 54935*

*Avalon Place
5027 Pecan Grove
Ripon, WI 54971*

Patients requiring significant medical care would be transported to St. Agnes Hospital in Dodge, WI.

Transportation:

Avalon has written contracts with the following transportation companies who have agreed to transport facility residents to other facilities.

*Johnson School Bus & Edmunds Bus Service
City of Dodge Transit System*

Health and Medical:

Avalon has procedures in place for providing health and medical support to its patients and staff. This includes the following:

- *Procedures to determine health and medical requirements following a disaster including **Critical Incident Stress Management***
- *Personnel requirements*
- *Procedures to ensure food and water is safe to consume (extra food and water)*

Resource Management:

Available Resources:

Avalon has minimal resources that may be available to other agencies during a weather disaster that does not affect Avalon. Use of such resources would be at the discretion of the administration. Examples of possible available resources include:

*Beds and linens (If another facility is affected)
Non-essential medical supplies
Mass transportation
Emergency medical transportation
Pagers
Wheelchairs
Oxygen
Food and water
Fuel
Personnel*

*Drugs
Shelter*

Unmet Resource Needs:

*Vaccines
Fans and Heaters (when on emergency power)
Water testing equipment*

G. Development and Maintenance

Paragraphs A1 – A2 – Development – These paragraphs probably do not need to be changed

Paragraph B – Maintenance – It would be prudent to review this plan once a year at a minimum, even if you don't anticipate any changes. A review page is contained. Current regulation requires you coordinate with your city/county emergency management coordinator. That means making some type of personal contact as well as providing him/her with a copy of the plan, including any changes made to the plan. Signatures indicate approval by the facility Administrator, and the city/county Emergency Management Coordinator.

3. Instructions for completing attachments

A. Attachment 1 – Hazard Analysis

Facility administrators/risk managers should be very aware of the hazards that may affect their facility. Local, county and state emergency management jurisdictions conduct intense, thorough hazard vulnerability analysis to assist them in developing response strategies. You probably already have a good idea of what hazards present or have the potential to present problems for your facility. It is recommended, however, that as part of the coordination process with your emergency management director, you learn as much as you can about the hazards that affect the community in which your facility resides. Once you have gathered this information, you can fill out attachment 1 – hazard analysis as follows:

- Hazard – list the hazards you have identified that will or could affect your community/facility. A list of hazards taken from the Federal Emergency Management Agency's reporting system follows. While there are 13 spaces on the attachment, you will probably only need to address the hazards that pose the greatest threat to your facility. You should list at least 5.

Natural hazards:

Dam failure	Drought	Flood
Severe Thunderstorms	Tornado	Wild fires
Winter storms	Extreme heat	Other (identify in plan)

Terrorism:

Bomb threats Hostage situations Other (identify in plan)

Technological and man-made hazards:

Hazardous materials accident from a fixed facility

Hazardous materials transportation accident (truck, train, etc.)

Long term power failure

Structure fires

Other (identify in plan)

- Frequency – Refers to the likeliness a particular hazard will occur in your **community**. Insert one of the following three levels of frequency in the space provided:

Highly likely
Likely
Possible

- Potential magnitude – Refers to potential affect the hazard will have on the **community**. Insert one of the following four levels of magnitude in the space provided:

Catastrophic
Critical
Limited
Negligible

- Severity – Refers to the potential severity the hazard may have on your **facility**. Insert one of the following four levels of severity in the space provided:

Catastrophic
Critical
Limited
Negligible

- Warning time – Refers to the amount of time you have to react and respond to the hazard. Insert one of following time periods in the space provided:

Minimal
6-12 hours
12-24 hours
More than 24 hours

- Special Planning Considerations – If applicable, enter a short statement that identifies any special planning considerations. An example would be to reference water conservation or alternate water sources during a drought, educating the staff on what precautions to take prior to a tornado, etc.
- Risk priority – Refers to an assessment of the chance that the hazard will affect your facility. Risk is generally tied to the frequency of occurrence and magnitude or severity of the hazard. Insert one of the following three risk identifiers in the space provided.

High
Medium
Low

B. Attachment 2 – Resources and Unmet Needs

For the emergency management community to best serve your interests (and the interests of other special needs facilities in your community) during a disaster, they need to know what resources you have, what resources you will share and what resources you need. Indicate the status of your resources in the space provided as follows:

Status:

Y – Indicates you have this resource in sufficient supplies to sustain the facility for at least 72 hours following a disaster.

S – Indicates you have this resource and would be willing to share it with other facilities at the discretion of the administration, assuming you don't need it.

M – Indicates you have this resource and might be willing to share it at the discretion of the administration, depending on the situation.

U – Indicates you do not have this resource (unmet need) and are depending on other sources, such as emergency management or health department to provide it.

Comment: Enter comments if appropriate.

Note: There is additional space for you to enter health and medical resources not listed in the attachment. Add additional lines if necessary.

C. Attachment 3 – Support Agency Phone Numbers

Enter the phone and fax numbers, and the email addresses of those agencies you may need to contact immediately prior to, during or after a disaster. Examples of applicable agencies follow:

Police
Fire/EMS

Emergency Management Department
National Weather Service
Transportation services
Shelters
School district
Private Ambulance Company
Phone and power companies
Hospital(s)
Local, county and/or state health departments
Etc.

D. Attachment 4 – Facility Operating Procedures

Attach copies of your current emergency operating plans and procedures to this plan.

E. Attachment 5 – Facility Layout Map

Attach a copy of your facility layout map to this plan. Remember to mark and number exits, and areas designated as shelters.