

# **EMERGENCY PREPAREDNESS PLAN BETHANY GARDENS S.L.C.**

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Bethany Gardens has developed this plan based on a community Hazard Vulnerability Assessment and a Facility Risk Assessment. See appendix 1.  
This plan uses an all hazards approach built on the FEMA Incident Command Structure.

This plan has procedures for a wide variety of disasters and emergencies including:

Natural Disasters  
Man-made disasters  
Care related emergencies  
Equipment and utility failures  
Interruptions in communications  
Loss of all or a portion of the facility  
Interruption of normal supply of essential resources

- This plan is designed to be implemented in conjunction with the Oneida County Mutual Aid Evacuation and Supply Plan which is coordinated by the Oneida County Office of Emergency Management. The plan can be activated by dialing 911 and alerting the operator that Bethany Gardens needs to activate the Oneida County Mutual Aid Plan.
- Maintain a Safety Committee. This group can also serve as the Emergency Preparedness Committee, and be responsible to **review** (at least annually) and update the fire and disaster plans. In addition, they will assist in determining what section of the Emergency Preparedness Plan will be utilized for the drills.
- Initial orientation and annual review of the Emergency Preparedness Procedures is required for all staff. It will be the responsibility of Education Director to maintain records for this training.
- Share Plan Information. The plan was shared with the Resident Council and a copy is available for review in the Front Lobby.
- A) Two **disaster drills** will be conducted annually, approximately six months apart.  
B) Twelve **fire drills** (one each month on a different shift) will be conducted.

- Maintain a list of “in house” supplies (72 hours/3 days is a minimum goal) and local suppliers, including telephone and fax numbers, for the following: (Refer to the Section of the plan regarding Contractor and Vendor numbers)
  1. Director of Nursing / Office Manager:
    - Staff
    - Pharmaceutical Supplies
  - Dietary Supervisor:
    - Food (perishables and staples) (See Plan)
    - Potable (drinking) water (See Plan)
    - Disposables
  - Facilities Director:
    - Linen (See Plan)
    - Medical Supplies (See Plan)
- Notification of off-duty staff:  
The Administrator should maintain an up-to-date list of all staff telephone numbers, and will initiate the staff call list for emergency notification of off-duty staff. See page #62.

Staff are requested to remain at home, if not on duty, until notified by the department supervisor or Administrator. Staff will be told what is needed and where they are to report.

If telephone service in the community has been disrupted:

- Go to the local radio station to request a “broadcast”
- Seek help of amateur radio operators (Amateur Radio Emergency Service (ARES) or Radio Amateur Civil Emergency Services (RACES)).
- Go personally to staff homes

## **ITEMS TO BE CONSIDERED WHEN SELECTING A COMMAND POST:**

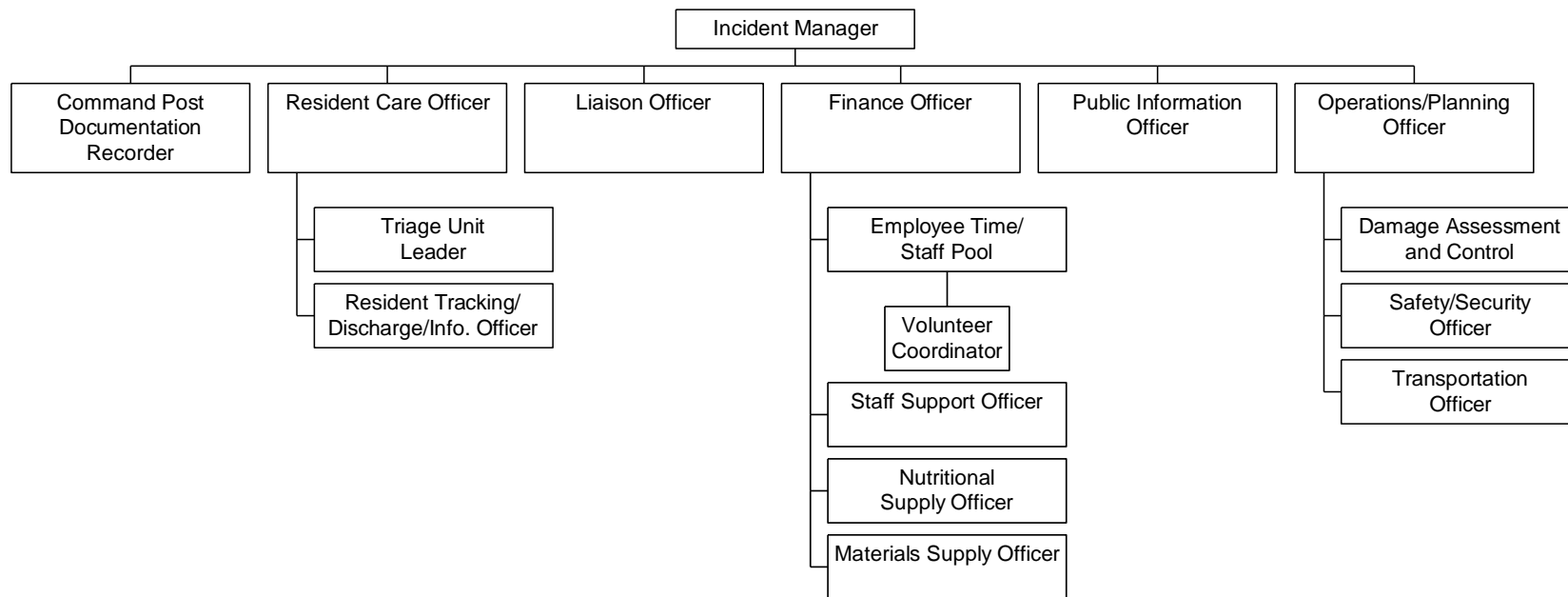
### **COMMAND POST SUPPLY LIST**

- |  |   |
|--|---|
| • emergency power                                  | • resident list                           |
| • two-way radios                                   | • flashlights and extra batteries         |
| • battery powered lamps                            | • copy of the local assistance agreements |
| • building plans/floor plans<br>(evacuation route) | • fax machine, if possible                |
| • employee phone number list                       | • copy of the EPP                         |
|  | • office supplies                         |

### **TELEPHONE NUMBERS TO HAVE AT THE COMMAND POST**

- All department extension phones and fax lines
- Contact numbers for key personnel (page, home, cell phone, fax, next of kin)
- Employees home phone numbers and next of kin phone numbers / notification list
- Regional contacts-vendors, media, funeral homes, pharmacies, etc.

BETHANY GARDENS S.L.C.



# EMERGENCY PREPAREDNESS PLAN

## GENERAL INFRASTRUCTURE

In the event of a disaster (or notification of a strong possibility of one) the person in charge of the facility shall notify the following as needed:

- Appropriate External Authority (Fire, Police, DOH etc.)
- Administrator
- Director of Nurses / Nursing Supervisor
- Facilities Director

\*Any staff member becoming aware of a disaster should notify their immediate supervisor. In the absence of the Administrator, the individuals listed above will act in place of the Administrator.

**THROUGHOUT THIS PLAN, THE TERM “ADMINISTRATOR” WILL REFER TO THE HIGHEST RANKING PERSON IN THE FACILITY, AS ABOVE.**

THROUGHOUT THE PLAN REFERENCE IS MADE TO THE RESPONSIBILITIES OF PARTICULAR DEPARTMENTS AND DEPARTMENT **SUPERVISORS**. AT TIMES WHEN THESE DEPARTMENTS ARE NOT STAFFED, OR DEPARTMENT **SUPERVISORS** ARE NOT AVAILABLE, THOSE STAFF ON DUTY WILL ASSUME THE RESPONSIBILITIES OF THE DEPARTMENTS AND CARRY THEM OUT TO THE BEST OF THEIR ABILITY.

As the particular disaster dictates, the following **Incident Management System** will be put into effect by the highest ranking person in the building at the time.

1. The person who will activate the system should follow the Flow Sheet on page #3 of this plan, and the Job Action Sheet for **Incident Manager**, and establish a Command Post at the Conference Room (basement).

You should at least consider activation of the following Job Actions:

- **Public Information Officer**  
Statements to News Media – Social Work Office  
Statements to Families – Conference Room
- **Safety & Security Officer**  
Building Security
- **Staff Pool** – Break Room

2. Decide the **specific disaster plan(s)** to be followed and have staff follow the procedural guidelines.



## BUILDING EVACUATION

Bethany Gardens is a part of the Oneida County Mutual Aid and Supply Plan. If residents must be immediately evacuated from the building call 911 and advise them that the building must be evacuated and that we need to activate the Oneida County Mutual Aid plan. The Oneida County Office of Emergency Management will open the Emergency Operations Center (EOC) and contact the other plan members to coordinate transportation, volunteers, and supplies in conjunction with the command center.

### 1). TRIAGE SITE/STOP-OVER POINT

- If triage within the building is possible, the Dining Room will be given primary consideration as the main triage site.
- In the event of a building evacuation the primary evacuation route shall be out the main entrance, meeting in the front parking lot/lawn, as far away from the building as possible to facilitate emergency vehicles, ambulances, busses, etc. If that is not feasible the secondary evacuation route shall be out the nearest fire exit, meeting in the front parking lot/lawn area as far away from the building as possible.
- If the facility must be evacuated immediately, and there is no time to triage within the building, residents will be moved to stop-over point, St John's Lutheran Church. The stop-over points could also serve as the new Communication Command Center if you must leave the building.  
NOTE: An outside triage/stop-over could be considered (weather permitting). The actual location of the triage/stop-over site will be determined by the Command Post.

The Command Post or the Oneida County Office of Emergency Management EOC will notify Emergency Transportation vehicles of the triage/stop-over point.

- The Command Post will appoint a staff member to be in charge of the triage/stop-over site. This person will be responsible:
  - a) To account for all residents at the triage/stop-over site
  - b) To ensure that residents have been assigned an e-FINDS bracelet prior to being moved from the triage/stop over site.

### 2) TRANSPORTATION

- If more than 10 people have to be moved in a disaster, Oneida County Office of Emergency Management EOC will arrange this. See page # 64 for listing of alternative transportation resources.
- Transfer Assistance Levels (TALS) are located in Appendix 2

### 3) RECEIVING FACILITIES (to be used when residents cannot stay any longer at stop-over point)

- Notification of receiving facilities will be the responsibility of the Command Post or the Oneida County Office of Emergency Management EOC. See page # 65 for listing of receiving facilities. See Oneida County Mutual Aid Evacuation and Supply Plan for Memorandum of Understanding. (MOU)

### 4) RECORDS

- The LPN of each area will assume responsibility for moving resident charts from the facility to the triage/stop-over point, and eventually to the appropriate receiving facility. Under the direction of the Command Post, the LPN of each unit will assume responsibility for moving resident paper charts from the facility to the triage/stop-over point, and eventually to the appropriate receiving facility. The resident's MARs and TARs can be accessed at any time from our EMAR system using the Matrix. <https://landa.matrixcare.com> . If the internet is not available down-time procedures must be followed. See page IT System Failure page 28.
- The paper chart can be taken to the receiving facility at a later time, provided the following information accompanies the resident at the time of evacuation: An e-FINDS bracelet will be placed on each resident before the resident leaves the facility. This bracelet will contain information pertaining to the resident's demographics and immediate care needs.
- See eFinds Policy page 12.

### 5) MEDICATIONS

- Nursing administration will be responsible to determine any special medications that **must** go with the resident. The resident's condition, the availability and acceptance of medications elsewhere, and the nature of the disaster will be taken into consideration as this decision is being made.

### 6) EQUIPMENT

- Beds, linen, food, potable liquids – If possible and necessary, these items will be moved to receiving facilities. (See Transportation Section as necessary.)

### 7) STAFFING AT RECEIVING FACILITIES

- The Command Post will be responsible to assign staff to go to each receiving facility, as they become available. If possible, a staff member should be at each receiving facility prior to the arrival of the first resident. If this is not possible, a staff member will be assigned to go with the first resident being sent to each facility.

- It shall be the responsibility of the Command Post to track all on duty staff. The Staffing Pool Coordinator must document the specific name and location of the receiving facility or other location for on-duty staff who leave the facility during the emergency and report to the Command Post.
- The facility will maintain an up-to-date list of all staff telephone numbers and will initiate the staff call list for emergency notification of off-duty staff. Staff is requested to remain at home, if not on duty, until notified by the department supervisor or Administrator. Staff will be told what is needed and where they are to report.
- The command post can be requested through the EOC. In the event that volunteers are to be utilized non-medical volunteers would perform non-medical tasks only. In the event that medical professionals volunteer a Credentialing Coordinator will be assigned to verify medical credentials and licensure.
- If telephone service in the community has been disrupted and the facility cell-phone is not working:
  - Go to the local radio station to request a “broadcast”
  - Use staff cell phones if available.
  - Walkie-Talkies are available for in-facility use.

## 8) FOLLOW-UP CARE

- Administrator (or designee) shall be responsible to arrange for a check on the welfare of each evacuated resident within 24 hours of the resident being transferred from the facility.

## Shelter in Place/Subsistence Needs

In the event that a disaster or emergency arises that would make evacuation unfeasible Bethany Gardens has adequate provisions to “Shelter in place” until an orderly evacuation can take place.

- Food and water are available in our disaster supplies for at least 72 hours.
- Linens are available for at least 72 hours.
- Medical supplies and DME are available for at least 72 hours.
- The Omnicell located on the 2nd Floor has a limited supply of pharmaceutical supplies.
- The emergency generator will provide:
  - Emergency lighting
  - Fire detection, extinguishing, and fire alarms
  - Cold food storage
  - Nurse call system
  - Heat and air conditioning of the Main Dining Room and Therapy Dept.

**NOTE: Disaster Kit Contents found on page #46**

**NOTE: See Loss of Sewage Service on page#41**

**Bethany Gardens****Section: Disaster and Evacuation Preparation****Subject: The New York State Evacuation of Facilities in Disasters Systems (e-FINDS)****POLICY:**

It is the policy of Bethany Gardens to ensure that all residents are safe and their location tracked in a disaster event. Bethany Gardens will utilize the New York State Evacuation and Facilities in Disaster Systems (e-FINDS) to monitor and update resident location information during an incident or event such as a storm, flood, non-natural incident or practice exercise/drill.

**PURPOSE:**

To ensure that all residents are safe and their location tracked using the e-FINDS database in the event of disaster or evacuation.

**PROCEDURE:**

In the event of an incident involving the need to evacuate or receive resident/patients from other healthcare institutions, the following procedure will be followed:

In the event that Bethany Gardens evacuates due to a disaster:

- 1) Resident Barcode Identification bracelets will be distributed to nursing units and one will be placed on each resident for identification. Resident names will be written onto each identification bracelet.
- 2) A computer equipped with the e-FINDS scanner will be placed at facility exit and each resident will be scanned into the e-FINDS system as they exit the building by an e-FINDS Administrator using following process:
  - a. Log onto <https://commerce.health.state.ny.us> and sign in to the Health Commerce System Database.
  - b. Under "My Applications" tab on the left side click e-FINDS link
  - c. Select Bethany Gardens [NH] and click Submit
  - d. Select "Register Patient/Resident" tab, then scan or enter each residents Barcode Identification number and complete necessary information one resident at a time.
  - e. In the event that internet access is not available, identification numbers with corresponding resident names will be monitor by hand and entered into the e-FINDS database when internet access returns.
- 3) The location of each resident will be tracked by both Bethany Gardens and the receiving facility.
- 4) Resident tracking information will be updated as changes in location occur by selecting the "Update Patient/Resident" tab in e-FINDS homepage.

In the event that Bethany Gardens accepts residents/patients from other healthcare institutions during a disaster:

- 1) A computer equipped with the e-FINDS scanner will be setup at facility entrance.
- 2) Each resident/patient will be scanned into the e-FINDS system as they enter the building by an e-FINDS Administrator using the following process:
  - a. Log onto <https://commerce.health.state.ny.us> and sign in to the Health Commerce System Database.
  - b. Under "My Applications" tab on the left side click e-FINDS link
  - c. Select Bethany Gardens [NH] and click Submit
  - d. Select "Update Patient/Resident" tab, then scan or enter each residents Barcode Identification number
  - e. Check that transfer information is correct and change resident's current location to Bethany Gardens [NH].
  - f. In the event that internet access is not available, identification numbers with corresponding resident names will be monitored by hand and entered into the e-FINDS database when internet access returns.
- 3) Resident/patient will be tracked by both Bethany Gardens and original facility.
- 4) Resident tracking information will be updated as changes in location occur by selecting the "Update Patient/Resident " tab in e-FINDS homepage.
- The e-FINDS scanner and bracelets will be kept in the Director of Nursing's Office.

## **Policy: 1135 Waivers**

**Purpose:** To allow reimbursement during an emergency or disaster even if providers cannot comply with certain requirements that would under normal circumstances bar Medicare, Medicaid or CHIP payment.

### **General Information:**

When the President declares a disaster or emergency under the Stafford Act or National Emergencies Act and the HHS Secretary declares a public health emergency under Section 319 of the Public Health Service Act, the Secretary is authorized to take certain actions in addition to her regular authorities. These actions may temporarily waive or modify certain Medicare, Medicaid, and Children's Health Insurance Program (CHIP) requirements to ensure that sufficient health care items and services are available to meet the needs of individuals enrolled in Social Security Act programs in the emergency area and time periods and that providers who provide such services in good faith can be reimbursed and exempted from sanctions (absent any determination of fraud or

abuse) . Examples of these 1135 waivers or modifications

include, but are not limited to:

- Certain conditions of participation, certification requirements, program participation or similar requirements for individual health care providers or types of health care providers;
- Preapproval requirements ;
- Requirements that physicians and other health care professionals be licensed in the State in which they are providing services , so long as they have equivalent licensing in another State (this waiver is for purposes of Medicare , Medicaid, and CHIP reimbursement only- state law governs whether a non - Federal provider is authorized to provide services in the state without state licensure;

- Emergency Medical Treatment and Labor Act (EMTALA) sanctions for redirection of an individual to receive a medical screening examination in an alternative location pursuant to a state emergency preparedness plan (or in the case of a public health emergency involving pandemic infectious disease, a state pandemic preparedness plan) or transfer of an individual who has not been stabilized if the transfer is necessitated by the circumstances of the declared emergency. A waiver of EMTALA requirements is effective only if actions under the waiver do not discriminate on the basis of a patient's source of payment or ability to pay;
- Sanctions under section 1877(g) (Stark) relating to limitations on physician referral under such conditions and in such circumstances as the Centers for Medicare & Medicaid determines appropriate ;
- Deadlines and time tables for performance of required activities to allow timing of such deadlines to be modified;
- Limitations on payments for healthcare items and services to permit Medicare Advantage Plan enrollees to use out-of-network providers in an emergency situation. To the extent possible, the Secretary must reconcile payments so that enrollees do not pay additional charges and so that the plan pays for services included in the capitation payment;
- Sanctions and penalties arising from noncompliance with HIPAA privacy regulations relating to : a) obtaining a patient's agreement to speak with family members or friends or honoring a patient's request to opt out of the facility directory, b) distributing a notice of privacy practices, or c) the patient's right to request privacy restrictions or confidential communications. The waiver of HIPAA requirements is effective only if actions under the waiver do not discriminate on the basis of a patient's source of payment or ability to pay;
- **The 1135 waiver authority applies only to Federal requirements and does not apply to State requirements for licensure or conditions of participation.**

**Waiver Process:**

The specific State Dept. of Health should provide responses to the following basic questions for any impacted provider seeking a potential 1135 waiver:

- Provider Name/Type
- Full Address (including county/city/town/state) CCN (Medicare provider number)
- Contact person and his or her contact information for follow-up questions should the Region need additional clarification
- Brief summary of why the waiver is needed

For example: CAH is sole community provider without reasonable transfer options at this point during the specified emergent event (e.g. flooding, tornado, fires, or flu outbreak). CAH needs a waiver to exceed its bed limit by X number of beds for Y days/weeks (be specific).

- Consideration - Type of relief you are seeking or regulatory requirements or regulatory reference that the requestor is seeking to be waived.

There is no specific form or format that is required to submit the information but it is helpful to clearly state the scope of the issue and the impact. If a waiver is requested, the information should come directly from the impacted provider to the appropriate Regional Office mailbox with a copy to the appropriate State Agency for Health Care Administration to make sure the waiver request does not conflict with any State requirements and all concerns are addressed timely.

(ROPHIDSC@cms.hhs.gov)

**Review of 1135 Waiver requests:**

CMS will review and validate the 1135 waiver requests utilizing a cross-regional Waiver Validation Team. The cross-regional Waiver Validation Team will review waiver requests to ensure they are justified and supportable.



**Provider responsibilities:**

- Provide sufficient information to justify need
- Keep careful records of beneficiaries to whom services are provided in order to ensure that proper payment can be made.
- Resume compliance with normal rules and regulations as soon as able to do so.

Duration: These waivers under section 1135 of the Social Security Act typically end no later than the termination of the emergency period, or 60 days from the date the waiver or modification is first published unless the Secretary of HHS extends the waiver by notice for additional periods of up to 60 days, up to the end of the emergency period.

## SEVERE THUNDERSTORM/TORNADO

- The National Weather Service may issue a Severe Thunderstorm/Tornado watch or warning –

### SEVERE THUNDERSTORM/TORNADO WATCH

If a TORNADO WATCH is received, this would be an indication that there is a possibility that a tornado **may** strike, and the facility may have several hours to prepare.

### ADMINISTRATION

- Set up Command Post, and follow the Incident Manager Job Action Sheet.
- A page announcement is made to alert staff. This page can also be made by the person in charge of the facility at the time the facility becomes aware of the tornado watch. If the storm is upgraded to a warning, announce it.
- **Ensure all other guidelines of this procedure are completed.**

### GENERAL

- Close all cubicle curtains, windows, window curtains, and blinds to provide a barrier between windows and the residents. Remove items from window ledges and pictures from walls.
- Weather radio or local radio and / or television stations should be monitored for condition updates. A “spotter” should be assigned outside to watch for funnel clouds. Bring residents in from the outside.
- All departments should prepare emergency supplies (linens, food, emergency water and food supplies, medical and first aid supplies, flashlights, etc.) for possible use.
- Identify safe areas (inside hallways and windowless rooms) within the building where residents should be brought if time allows.

### MAINTENANCE / HOUSEKEEPING

- Check outdoors for any objects (such as lawn chairs and tables, etc.) which may act as missiles if blown about by high winds. Secure objects, as practical.
- Ensure that all flashing is secured.
- **Prepare** to shut down utilities and assess battery lighting.
- Exterior doors and windows should be closed and latched.
- Ensure that roof and outdoor drains are free of debris in order to handle heavy rains.

### NURSING / HOUSEKEEPING

- Residents outside of facility should be brought in.
- Remove items from window ledges and walls where there are residents.

## **SEVERE THUNDERSTORM/TORNADO WARNING or FUNNEL CLOUD SPOTTED**

### **GENERAL**

- Move all residents into hallways or rooms without windows. If residents are sitting in chairs, place a pillow in their lap and remove eyeglasses to protect their face (at last moment if possible to reduce resident stress). If moving all residents is not practical, cover them with blankets, pillows, etc.
- Staff should position themselves under sturdy furniture, away from windows and swinging doors.
- As winds subside:
  - Perform an immediate assessment of injuries.
  - Perform an immediate assessment of structural damage in the area.
  - Move residents away from damaged areas.
  - Inform Command Post of assessment.

### **MAINTENANCE**

- Shut down utilities, as necessary. Perform an assessment of structural damage for the entire building. Inform Command Post of survey results.

### **NURSING**

- Perform an assessment of injuries for the entire building. Institute necessary medical attention, as necessary. Inform Command Post of survey results.

Emergency Agency Phone Number listing found on page #50

Emergency Contractor / Vendor Phone number listings found on pages #51-53

Emergency Utility Shut-off Locations listing found on page #55

### **SEE ALSO:**

- “LOSS OF HEATING SYSTEM” Procedures
- “LOSS OF WATER SERVICE” Procedures
- “LOSS OF COOKING ABILITY” Procedures
- “LOSS OF TELEPHONE SERVICE” Procedures
- “LOSS OF ELECTRICAL SERVICE” Procedures
- “LOSS OF SEWAGE SERVICE” Procedures
- “LOSS OF GAS” Procedures

## SNOW EMERGENCY / ICE STORM

### GENERAL

- Employees are to stay on duty until released.
- Staff members may be asked to perform a variety of functions.
- Sleeping schedule is set up by Nursing Administration or respective department supervisor. He/she will receive information regarding availability of sleeping accommodations.
- Review ability to provide transportation for staff, as necessary.
- Due to possible delayed Fire Department response, staff should perform fire prevention “watches” while making rounds in areas which are not staffed 24 hrs. a day, looking for:
  - electric overloads
  - dryer lint buildup in the laundry area

### ADMINISTRATION

- Set up Command Post as necessary, and follow the Incident Manager Job Action Sheet.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

- Keep exits and sidewalks free from snow and ice accumulation (ensure overhangs are clean).
- Keep hydrants, hose connections, and emergency access roads clear.
- Review transportation of staff with Command Post and Local Emergency Authority.
- Monitor the amount of snow on the roof to prevent accumulations from reaching unsafe levels. Clear accumulations if possible.

### IN FREEZING OR LOW TEMPERATURES

- Drain piping systems that contain liquids which are vulnerable to freeze-ups.
- Ensure that sprinkler systems are checked regularly to make sure they are operational.
- If safe to do so, periodically inspect roof and drains to ensure they are free of debris or ice buildup.
- If safe to do so, periodically inspect trees and branches close to the building(s) and/or vital equipment to ensure that they are free from snow/ice accumulation.
- If ice accumulation on branches close to the building is severe, consider relocating residents and staff to another area.

### NURSING

- Medical Director will be contacted (by Senior Nursing position) to approve initiation of “drug holidays”, as appropriate. If there is advance warning of severe weather conditions approaching, and time allows, check residents’ medications. If there is not enough to last

through the expected weather condition, order enough to last through the situation, plus one day extra. Doctors' orders may be needed for this.

- Resident meal times should be as close to normal as possible. Modify menus if deliveries will not be possible.

## **FOOD SERVICE**

- Establish a place for feeding staff and visitors if shift change will not be possible.
- If necessary, due to limited staffing, implement the Emergency Non-Cooking Menu.
- Resident mealtimes should be as close to normal as possible. Modify menus if deliveries were not possible.

## **PHYSICAL/OCCUPATIONAL THERAPY AND ACTIVITIES**

- Assist Nursing with feeding and transfer of residents, per training.

## **HOUSEKEEPING**

- Check linen supply. Arrange linen change schedule for residents and staff as necessary. Modify if deliveries/pick-ups are not possible.
- Survey building for staff sleeping areas if necessary. Advise department supervisor or Command Post if areas have been set aside for staff sleeping.
- Provide linens, etc. necessary to accommodate staff sleeping arrangements.

Contractor/Vendor Phone Numbers listing found on pages #51-53

## **SEE ALSO:**

- “LOSS OF HEATING SYSTEM” Procedures
- “LOSS OF WATER SERVICE” Procedures
- “LOSS OF TELEPHONE SERVICE” Procedures
- “LOSS OF ELECTRICAL SERVICE” Procedures
- “LOSS OF SEWAGE SERVICE” Procedures

## **INFLUX OF RESIDENTS/FAMILIES OF STAFF OR COMMUNITY SHELTER RESIDENTS**

### **GENERAL**

Upon notification of the potential for an influx of residents (or others) each department shall perform an immediate inventory of necessary supplies and staffing levels and inform the Command Post of their ability to accommodate the expected influx. Each department will also be responsible to modify their normal routines (as practical) to accommodate the arriving residents (or others).

Arriving residents (or others) will be brought first to a triage room. Unless otherwise indicated, the PT/OT Room (ext. 232) will be utilized for this. Once residents (or others) have been triaged and logged in, they will then be placed in other areas of the facility, as appropriate.

### **ADMINISTRATION**

- Set up Command Post and follow Incident Manager Job Action Sheet.
- Inform each department of the expected number of residents (or others) to be arriving, and the expected amount of time until the arrival of the first resident (or others).
- Establish a triage area to receive residents (or others).
- Ensure that a staff member is assigned to log-in the arriving residents/families/others and obtain necessary information.
- Determine the availability of bed space (either in resident sleeping rooms or in activity/dining rooms) for longer term housing of the residents (or others).
- Ensure adequate staffing is available to care for the increased census. Institute the call-in of off-duty staff or contract with a nursing agency, as necessary.
- Make provisions for notification of residents' (or others) physicians and families.
- Make provisions for the reception of family and media.
- Determine equipment needs: mattresses, medical equipment, dietary supplies, housekeeping supplies, etc.
- Make arrangements to obtain above supplies.
- In a community wide disaster it may be necessary to transport and/or house families of staff so they (staff) can remain on duty to care for residents (and others). This could also be true for community shelter residents. As necessary, notify:
  1. Transportation
  2. Dietary (food)
  3. Housekeeping (sleeping arrangements)

- Arriving people will report to the triage room. They will be logged in and assigned space.
- **Ensure all other guidelines of this procedure are completed.**
- Fax resident list to administration at other facilities as requested.

### **PERSON RESPONSIBLE FOR ADMISSIONS**

- Log-in residents as they arrive at the triage room. Obtain the following information:
  - Name
  - Age
  - Responsible party
  - Medical diagnosis
  - Medication allergies
  - Other known allergies
- Provide list of Resident names and responsible party information to:
  1. Command Post
  2. Admissions
- Provide Medical information to Nursing.
- Provide Nutritional information to Dietary.

### **NURSING**

- Perform immediate medical evaluation of residents and provide necessary treatment.
- Establish a care plan for each resident, as appropriate.
- Determine the ability to meet the medical needs of each resident in regards to medications, equipment, etc.
- Make provisions for adequate privacy of residents.
- Provide call bells (or some method for residents to notify nursing of the need for assistance) for residents not housed in a typical resident room. Call bells are stored in basement Central Supply.

### **FOOD SERVICE**

- Provide nourishment at the triage site.
- Modify planned menus as necessary to accommodate the influx of residents, extra staff, and families.
- Determine the ability to meet the nutritional needs of particular residents.

### **MAINTENANCE & HOUSEKEEPING**

- Set up sleeping areas for residents, staff and families, as necessary.
- Provide additional linens, blankets, privacy screens, etc., as necessary.

## **ACTIVITIES**

- Provide emotional support to arriving residents.
- Prepare unit residents for influx of new residents.
- Assist Nursing with feeding and transfers, per training.

## **PHYSICAL/OCCUPATIONAL THERAPY**

- Assist Nursing with feeding and transfer of residents, per training.

Disaster Kit Contents found on page #46

Emergency Bedding Materials list found on page #47

Emergency Food Supply listing found on page #48

Emergency (Non-cooking) Menu found on page #49

Emergency Agency Phone Number listing found on page #50

Emergency Contractor/Vendor Phone Number listings found on pages #51-53



## LOSS OF HEATING SYSTEM

### GENERAL

- Expected duration of outage, along with outside weather conditions, must be evaluated and possible building evacuation considered. If the furnaces in the Main Dining Room and Therapy Departments are functioning the residents may be moved to these areas. If the heating system is expected to be out for an extended period of time a full building evacuation may be necessary (See Building Evacuation Plan.)
- All staff should survey their assigned areas to ensure that all windows and doors are closed. Any windows or doors that do not seal effectively should be reported to the Command Post.

### ADMINISTRATOR

2. Set up Command Post as necessary and follow Incident Manager Job Action Sheet.
3. Adjust employee dress code, as needed.
4. **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

2. Attempt to determine expected duration of heating system outage.
3. Use duct tape, etc. for any doors or windows that do not seal effectively.

### IN FREEZING OR LOW TEMPERATURES

- Ensure that sprinkler system is checked regularly to make sure it is operational.

### NURSING

- Dress residents with several layers of loose clothing, 2 pair of socks, bathrobes, slippers, etc.
- Use extra blankets, including bath blankets.
- Group residents into rooms, if possible.
- Establish activities to keep residents active, as practical.

### ACTIVITIES / PT/OT

- Adjust therapy, as appropriate. Adjust activities, as appropriate.

Emergency Utility Shut-off Locations listing found on page #55

Emergency Agency Phone Number listing found on page #50

Emergency Contractor & Vendor List found on pages #51-54

**SEE ALSO:** "LOSS OF ELECTRICITY" Procedures

## LOSS OF GAS SERVICE

### FOOD SERVICE

- Use disposable table services – plates, cups, forks, etc.
- Gas grills may be used outside the rear exit by the garage to provide hot food.
- Sternos may be used to keep food hot.

### ADMINISTRATION

- Set up Command Post, as necessary, and follow Incident Manager Job Action Sheet.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

- Attempt to determine expected duration of gas supply outage.
- Shut off valves supplying any appliances which have pilot lights.
- Upon restoration of gas supply, relight all pilot lights and check all gas appliances for proper operation.

### NURSING

- See “LOSS OF WATER” Procedures (re: bathing).

Emergency Agency Phone Number listing found on page #53

Emergency Contractor/Vendor Phone Number listings found on pages #54-57

Emergency Utility Shut-off Locations listing found on page #58

Listing of equipment served by gas found on page #62

### SEE ALSO:

“LOSS OF HEATING SYSTEM” Procedures

## LOSS OF TELEPHONE SERVICE AND INTERNAL COMMUNICATION

### ADMINISTRATION

- Set up Command Post, as necessary and follow the Incident Manager Action Job Sheet.
- Determine if telephones not part of the main telephone system are in service.
- Determine availability of cellular telephones from staff and visitors.
- Walkie-Talkies are available on all Nursing units, the Main office and the Maintenance department. Channel 1 is for maintenance. Channel 2 is for Nursing.
- Assign runners to use off-site telephones, as applicable.
- Establish methods to communicate within the building (runners, portable radios, etc.) if intercom / paging system is affected.
- Notify Fire and Police Departments. (Ensure that all staff are familiar with the method to notify Fire and Police Departments during a loss of telephone service.)
- Have staff make “fire prevention rounds”.
- **Ensure all other guidelines of this procedure are completed.**

### FOR INTERNAL COMMUNICATIONS, CONSIDER THE FOLLOWING:

- Provide “call bells” for residents, or establish “rounds” to check on the welfare of residents, as appropriate. “Call bells” are kept in the basement Central Supply.
- Use facility cell phones.
- Assign runners to assist communication throughout the building.
- Check with local Office of Emergency Preparedness regarding amateur radio operators.

### Maintenance

- Once outside communication is established, attempt to determine the extent and expected duration of the outage.
- Take walkie-talkies to Command Post for assignment.

Emergency Agency Phone Number listing found on page #50

Emergency Contractor/Vendor Phone Number listings found on pages #51-54

Listing of telephones not part of the main telephone system found on page #61

## IT SYSTEM FAILURE

### ADMINISTRATION

- Set up Command Post, as necessary and follow the Incident Manager Action Job Sheet
- Attempt to determine if the failure is related to an outage of the Spectrum cable modem. Check modem, located in the Director of Nursing's office, for appropriate lights on the front of the modem.
- Call Spectrum (1-877-638-3278) to advise them of outage and find out if there is an expected duration.
- If issue is not related to a Spectrum outage contact CNS Data (1-866-611-9600) to advise them of outage request technical support.

### Nursing

- If outage is expected to last more than 15 minutes the Matrix Offline Report must be run to continue passing medications and doing treatments.

### Matrix Offline Report Procedure

If MatrixCare is not available, the eMAR Offline Report can only be accessed by an active MatrixCare User with a valid eMAR Offline Report password to generate the eMAR Offline report: Log onto the **SIXTH Floor Computer** using Username (**nurse**) and password (**nurse**).

- Select the Offline Report program from the desktop icon. The eMAR Offline Report Login page appears.
- Enter your MatrixCare User Name (**sedick**) and Offline Password (**bethany1**).
- Select Login.
- The eMAR Offline Report Criteria page appears. At the top of the page, report update information appears:
  - Last Update: whether Successful or Not Successful, along with the date and time.
  - Last Successful: if the last successful information load was an Incremental or Full Load, along with the date and time.
  - Last Successful Full Load: when the last successful full load occurred, along with the date and time.
- Type of Report: Select Condensed or Full. If you select Condensed, you can specify an administration date and time range and select Include PRNs, Include PRNs Only, or Exclude PRNs.
- Select Residents: Select individual residents, select Select All to report on all residents, or press Ctrl while selecting to include multiple residents.
- Select Units: Select individual units, select Select All to report on all units, or press Ctrl while selecting to include multiple units.
- Select Flow Sheets: Select individual flow sheets, select Select All to report on all flow sheets, or press Ctrl while selecting to include multiple flow sheets.
- Reasons/Results/Comments: Select Include or Exclude, as necessary.

- Sort Order: Select Unit – Patient or U/R/B. The default option is U/R/B.
- Select Run Report.
- The eMAR Offline Report opens in PDF format. Select the Print icon to print the report. You can also save the report, as necessary. The report format is similar to the Facility Administration History report, with portrait orientation and seven days of administration history and seven days of open administration boxes for recording administrations. The last page contains blank administration boxes. You can copy this page if you need extra pages for charting.

## HIGH HEAT SITUATION

### GENERAL

- Use fans, if available.
- Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight.
- Open doors and windows, as necessary to take advantage of available breezes.
- Avoid activities that may excite residents or require physical exertion.
- Keep residents out of direct sunlight.
- Turn lights off whenever possible. This would also apply to any heat-producing appliance.
- Provide plenty of liquids for residents and staff.
- Monitor vital signs of residents and staff.

### ADMINISTRATION

- Set up Command Post and follow the Incident Manager Job Action Sheet
- Consider relaxing dress code.
- Consider reduction of work time or rotating staff in high heat producing areas.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

- Attempt to determine the extent of the air conditioning system outage, if applicable.
- Report this information to the Command Post.

### NURSING

- Dress residents in loose, non-restrictive clothing.
- Maintain adequate fluid intake for all residents. Ensure that water and other fluids are within easy reach of residents and encourage consumption of liquids.
- Monitor vital signs closely. Be alert for absence of perspiration.
- Identify medications which may be contraindicated or should be administered in modified dosages in high heat conditions.
- Give sponge baths, as necessary.
- Keep residents out of direct sunlight.
- **In addition...**Monitor staff conditions closely.

### FOOD SERVICES

- Provide extra fluids for residents and staff.
- Consider the possibility of using a non-cooking menu.

Continued: Loss of Air Conditioning / High Heat

**PHYSICAL/OCCUPATIONAL THERAPY AND ACTIVITIES**

- Adjust therapy, as appropriate.
- Adjust activities, as appropriate.

**HEAT INDEX CHART**

In an average year only the winter's cold – not lightning, hurricanes, tornadoes, floods, or earthquakes – takes a greater weather-related death toll than the summer's heat and humidity. In an effort to alert you to the hazards of prolonged heat/humidity episodes, the National Weather Service devised the "heat index." The heat index (HI) is an accurate measure of how hot it really feels when the affects of humidity are added to high temperatures.

To use the heat index chart, find the appropriate temperature at the top of the chart. Read down until you are opposite the humidity. The number which appears at the intersection of the temperature and humidity is the heat index.

**Heat Index Chart (Temperature & Relative Humidity)**

RH (%)	Temperature (°F)															
	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105
<b>90</b>	119	123	128	132	137	141	146	152	157	163	168	174	180	186	193	199
<b>85</b>	115	119	123	127	132	136	142	145	150	155	161	166	172	178	184	190
<b>80</b>	112	115	119	123	127	131	135	140	144	149	154	159	164	169	175	180
<b>75</b>	109	112	115	119	122	126	130	134	138	143	147	152	156	161	166	171
<b>70</b>	106	109	112	115	118	122	125	129	133	137	141	145	149	154	158	163
<b>65</b>	103	106	108	111	114	117	121	124	127	131	135	139	143	147	151	155
<b>60</b>	100	103	105	108	111	114	116	120	123	126	129	133	136	140	144	148
<b>55</b>	98	100	103	105	107	110	113	115	118	121	124	127	131	134	137	141
<b>50</b>	96	98	100	102	104	107	109	112	114	117	119	122	125	128	131	135
<b>45</b>	94	96	98	100	102	104	106	108	110	113	115	118	120	123	126	129
<b>40</b>	92	94	96	97	99	101	103	105	107	109	111	113	116	118	121	123
<b>35</b>	91	92	94	95	97	98	100	102	104	106	107	109	112	114	116	118
<b>30</b>	89	90	92	93	95	96	98	99	101	102	104	106	108	110	112	114

Note: Exposure to full sunshine can increase HI values by up to 15°F

## LOSS OF WATER SERVICE / BOIL WATER ADVISORY

### GENERAL

Water currently stored in facility (stored tanks, bottled water, etc.) will be rationed for use depending upon availability and need. See Emergency Liquid Source listing.

*\*Note If a boiled water advisory is issued, tap water should be boiled for at least one minute at a full rolling boil.*

- Contact vendors to supply potable water.

### Priorities for the Use of Available Water and Liquids

### Location Attained

1). Personal Consumption (amount needed 75 gal) Guideline: 1 qt. per person/per day (staff and residents) for 72 hours/3 days	i.e. Dietary, milk, soda, juice, bottled water, Basement back store room
2). Personal Hygiene NOTE: Consideration may be given to “force flushing” toilets, after considering availability of stored water in conjunction with other needs.	Maintenance Room storage tank
3). Cooking	Basement back store room
4). Housekeeping	Maintenance Room storage tank

If facility has received notification of a planned disruption of the water service, available containers (tubs, pots, sinks, etc.) shall be filled prior to the shut-down.

### ADMINISTRATION

- Set up Command Post and follow Incident Manger Job Action Sheet.
- *Notify fire department and insurance carrier that the sprinkler system will be out of service.*
- Determine ability to obtain bottled water from outside sources.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

- Contact Water Department and attempt to determine the extent and expected duration of the outage.
- Shut off main valves to prevent loss of water within piping if backflow prevention devices are not present.



- Assist in obtaining stored water from within facility. Use dietary containers to transfer water for consumption.

Continued: Loss of Water

- **Institute Fire Watch, as sprinkler system will be unavailable.**
- Turn off water heaters if water is going to be drained for other uses.
- Clean faucet aerators as necessary.
- Check sprinkler systems to ensure no damage occurs before/as water service is restored.
- Upon restoration of water service flush all water lines and strainers.

## FOOD SERVICE

- **Advise Command Post of liquids available for consumption.**
- Use disposable dishes and utensils.
- Institute Emergency (Non-cooking) Menu, as necessary.
- If loss of water is due to contamination, the ice machine should be emptied and the water supply should be turned off. After water service is restored, change in-line filter, clean and disinfect hopper/bin, and discard the first batch of ice.
- Coffee Machines, soda and juice dispensers, and other appliances connected to the fresh water line should be turned off and have valves closed. After water service has been restored, change the in-line filters. Cycle three times before dispensing drinks.

## NURSING

- Restrict resident bathing.
- Use waterless hand cleaner where possible.
- Use disposable swabs for oral care.
- Use disposable pads to reduce the need for linen changes
- If loss of water is due to contamination, use bottled water for oxygen humidifiers, vaporizers, etc.
- Use premixed, prepackaged enemas.
- Use bottled water or disposable swabs for oral care.
- Provide a linen and resident clothing inventory to the Command Post.
- Coordinate a reduction of linen changes with the Nursing Department.
- A 72 hour/3 day supply is on-hand at all times.

## **HOUSEKEEPING**

- Discontinue any routine cleaning that requires water. Use spray cleaners, where necessary.
- As directed by Command Post, take containers of water for force flushing of toilets to designated areas. Also, provide for urination. (See Loss of Sewage)
- Post signs on rest rooms and water fountains.

## **BEAUTY SHOP**

- Shut down operations until given permission to re-open.

Emergency Liquid Sources listing found on page #57

Emergency Food Supply listing found page #48

Emergency (Non-cooking) Menu found on page #49

Emergency Utility Shut-off Locations listing found on page #55

Emergency Agency Phone Number listing found on page #50

Emergency Contractor & Vendor List found on pages #51-54

## CODE GREEN MISSING RESIDENT

### GENERAL

- If a resident cannot be located, the nurse in charge of the area shall be responsible to notify Administration. Immediate attempts shall be made to determine where the resident was last seen and what the resident was wearing. The search of each area for the resident will be done by staff normally assigned to that area.
- Staff searching within the building should visually identify residents in each room. Staff should also be certain to thoroughly check rooms, including “empty” beds and bathrooms.
- Once an assigned area has been searched, the results should be reported to the charge nurse/department supervisor. As the search of a department/unit is completed, this should be relayed to the Command Post.
- Staff assigned to search outside should check areas such as behind shrubbery, bus stops, look in parked cars, etc. Businesses within the immediate area should also be checked. Staff searching at night should carry a flashlight. During cold weather, a blanket should also be carried.

### ADMINISTRATION

- Set up Command Post and follow the Incident Manager Job Action Sheet.
- Ensure that all areas within the building that might be accessible to the resident are being searched.
- Assign several staff to conduct an outside search of the grounds and neighboring properties.
- Maintain a checklist of areas assigned and results reported from each area.
- Provide staff with a picture of the resident, as necessary. Consider making photocopies of the resident’s picture.
- **Ensure all other guidelines of this procedure are completed.**

### IF RESIDENT IS NOT LOCATED AFTER SEARCH OF BUILDING AND IMMEDIATE OUTSIDE AREA

- Notify Rome Police Department – *provide them with a description of the missing person*
- Notify family / responsible party.

**NOTE:** Factors such as the resident’s condition and past history, time of day, weather conditions, etc. shall be taken into consideration in deciding when to notify outside authorities. However, approximately 30 minutes should be considered as the maximum amount of time that should be allowed to elapse between the time that the resident was determined to be missing and the time that the outside authorities are notified.

Continued: Missing Resident

**UPON RETURN OF THE MISSING RESIDENT:**

**NURSING**

- Examine resident for injuries
- Contact the attending physician and report findings and condition of resident. Follow his/her orders.
- Contact the resident's legal representative.
- Notify search teams that the resident has been located.
- Complete the incident report.
- Make appropriate entries into the medical record.

## GENERATOR FAILURE

Failure of the emergency generator during a power failure is a very serious situation. **IMMEDIATE** action must be taken:

1. Notify the Rome Fire Department (call 911) and request that they stand by. (Without emergency generator power, we have no alarms and the facility phone system does not operate, see below under communications).
2. Notify:
  - a. Administrator
  - b. Generator contractor, Penn Power Systems (315-451-3838). Request a portable generator to be delivered of sufficient capacity. (minimum 175KW)
  - c. Call Dave Hall Electric (315-735-4090) and advise them to stand by. When portable generator arrives advise Dave Hall Electric to wire portable generator.
  - d. Have Penn Power Systems test transfer switch and portable generator.
  - e. Contact New York State Department of Health (315-477-8472) Business Hours or (315-477-8500) After Hours/Weekends.
1. Licensed Nurses should convert residents on oxygen concentrators to bottled oxygen. Remember to assess oxygen levels frequently.
2. Staff will closely monitor residents because the Call Bell System will be down.
3. Tap bells are located in the Central Supply Room.
4. Stair Chairs are located in the electric rooms on the nursing units.

### **Dietary:**

The Disaster Plan Menu may be used. Sufficient edibles not requiring cooking are maintained in the facility.

The gas range in the kitchen does not require electricity to operate. If needed, gas grills and camp stoves may be used outdoors. Sternos may be used indoors to maintain food temperatures. Sternos and chaffing dishes are stored in the garage for this purpose.

## LOSS OF ELECTRIC SERVICE

### GENERAL

- Outlets served by the emergency generator are identified by a red outlet.
- (See list of equipment served by generator.) on page #61
- Open curtains and drapes to take advantage of natural or off-site lighting, as applicable.
- Turn off “unnecessary” electrical equipment to reduce load on generator. Also turn off any equipment that may have been running when the power went out.

### ADMINISTRATION

- Set up Command Post as necessary and follow the Incident Manager Job Action Sheet.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

- Attempt to determine expected duration of electrical outage.
- Ensure that the generator is functioning properly. The generator should be checked periodically throughout the incident.
- If outage is expected to be for a long duration, confirm availability of “back-up” portable generators from Emergency Contractors or Office of Emergency Management.
- List of agreements with contractors from whom we can obtain portable generators:
  - Aggreko Inc. - See Emergency Contractor Phone List on page #51
  - Taylor Rental - See Emergency Contractor Phone List on page #51
- Confirm that a fuel supply comes with the generators

### NURSING

- Place an extension cord with each portable suction machine to enable one to quickly plug machine into an outlet served by the emergency generator.
- Use extension cords to plug medication refrigerators into outlets served by the emergency generator, or move necessary medications into a refrigerator already served by the generator.  
BE SPECIFIC AS TO WHICH MED. REFRIGERATORS AND WHICH EXTENSION CORDS
- Remove ice from ice machine and place into walk in freezer.
- Establish activities to compensate for loss of normal room lighting, television, etc. for residents, as practical.

- Ensure operation and availability of flashlights and batteries.

Continued: Loss of Electric Service

## **FOOD SERVICE**

- See “LOSS OF WATER SERVICE” Procedures

## **DIETARY DEPARTMENT**

- If loss of electricity affects ability to cook and/or was dishes, see Loss of Cooking and Loss of Water procedures.

### **\*\*UPON RESTORATION OF NORMAL ELECTRICAL POWER\*\***

## **MAINTENANCE**

- Notify each department of procedure for turning equipment back on to avoid all equipment being turned on at once and resulting in a massive power draw.
- Check all refrigerators and freezers for proper operation.
- Check HVAC units and water heaters for proper operation.
- Reset all clocks.
- Reset all lighting and other timers
- Check generator for proper fluid levels and ensure that all circuits have transferred properly.
- Check fire alarm system to ensure proper operation.

## **FOOD SERVICE**

- Dispose of any perishable items that may have been exposed to unsafe storage temperatures.

Emergency Utility Shut-off Locations listing found on page #55

Listing of equipment served by the emergency generator found on page #58

Listing of extension cord and flashlight locations found on page #60

Emergency Agency Phone Number listing found on page #50

Emergency Contractor/Vendor List found on pages #51-54

## **SEE ALSO:**

- “LOSS OF HEATING SYSTEM” Procedures
- “LOSS OF AIR CONDITIONING SYSTEM” Procedures
- “LOSS OF COOKING ABILITY” Procedures
- “LOSS OF WATER SERVICE” Procedures
- “LOSS OF TELEPHONE SERVICE” Procedures

## EARTHQUAKE

### GENERAL

As initial shaking begins:

- Staff should position themselves under sturdy furniture, away from windows and swinging doors.

As initial shaking stops:

- Perform an immediate assessment of injuries, inform Command Post of findings.
- Perform an immediate assessment of structural damage in the area, inform Command Post of findings.
- Move residents away from damaged areas.
- In anticipation of aftershocks, move residents away from windows and outside walls. Pull all drapes and curtains closed to reduce the potential of flying glass.

### ADMINISTRATION

- Set up Command Post and follow Incident Manager Job Action Sheet.
- Have all departments account for residents/visitors and staff.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE

- Shut down utilities, as necessary. Perform an assessment of structural damage for the entire building. Inform Command Post of survey results.

### NURSING

- Perform an assessment of injuries for the entire building. Institute necessary medical attention, as necessary. Inform Command Post of survey results.

Emergency Contractor/Vendor Phone Number listings found on pages #51-54

Emergency Agency Phone Number listing found on page #50

Emergency Utility Shut-off Locations listing found on page #55

### SEE ALSO:

- “LOSS OF HEATING SYSTEM” Procedures
- “LOSS OF WATER SERVICE” Procedures
- “LOSS OF COOKING ABILITY” Procedures
- “LOSS OF TELEPHONE SERVICE” Procedures
- “LOSS OF ELECTRICAL SERVICE” Procedures
- “LOSS OF SEWAGE SERVICE” Procedures
- “LOSS OF GAS” Procedures
- “LOW STAFFING” Procedures



## LOSS OF SEWAGE SERVICE

### GENERAL

Bed pans, commode chairs or toilet bowls can be lined with infectious waste bags and waste material collected. A small amount of chlorine bleach should be poured into each bag prior to sealing. Large receptacles (linen barrels, garbage pails, etc.) having tight fitting lids may also be lined with infectious waste bags for storing waste material collected in smaller bags. If sewer system is intact, toilets can be force-flushed by pouring a pail of water into the bowl.

### ADMINISTRATION

- Set up Command Post as necessary and follow Incident Manager Action Sheet.
- **Ensure all other guidelines of this procedure are completed.**

### MAINTENANCE / HOUSEKEEPING

- Contact plumber / sewer department and attempt to determine expected duration of incident.
- Contact Egan Excavating for non-potable water and to remove collected waste. 315-339-1847
- Establish an area to store containers of waste matter.
- Determine availability of portable toilets from outside vendors.
- Set up temporary urination collection site and schedule (provide containers).
- Ensure liquid consumption is taken care of first.
- Work closely with Infection Control to minimize contamination.

Emergency Agency Phone Number listing found on page #50

Emergency Contractor/Vendor List found on pages #51-54

### SEE ALSO:

“LOSS OF WATER SERVICE” Procedures

## **CODE BLACK BOMB THREAT/SUSPICIOUS PACKAGE**

### **PERSON RECEIVING THE BOMB THREAT CALL**

- Listen **carefully** to everything the caller says, including background noises, speech patterns, etc. Attempt to prolong the conversation as much as possible. Do not put the caller on hold.
- Fill in the appropriate information on the Bomb Threat Checklist as the call is being taken, including the first line below the “tear off” line.
- Tear off the bottom portion of the checklist and quietly give it to another staff member.

### **PERSON RECEIVING THE SUSPICIOUS PACKAGE OR MAIL**

#### *1) The following characteristics may be present regarding letters and packages*

- Restricted endorsements such as “Personal” or “Private”. Be cautious when the addressee does not normally receive personal mail at the office.
- The addressee’s name or title is inaccurate.
- There is excessive postage.
- The letter feels rigid or appears uneven or lopsided.
- Parcel bombs may have soft spots, bulges, or irregular shapes.
- The handwriting is distorted or prepared with “cut and paste” lettering or homemade labels.
- Protruding wires, aluminum foil, or oil stains are present.
- The letter or package emits a strange odor.
- The package is unprofessionally wrapped and has several different types of tape.
- The package is marked “Fragile – Handle With Care” or “Rush – Do Not Delay” etc.
- The letter or package is making an unusual sound (buzzing, ticking, sloshing, etc.)
- Pressure or resistance may be noted when removing the contents.

#### *2) Respond to suspicious mail:*

- Isolate the suspicious mail.
- Avoid further unnecessary handling:
  - Do not open or squeeze envelope.
  - Do not pull or release any wires, strings, or hooks.
  - Do not turn or shake the letter.
  - Do not put the letter/parcel in water or near heat.
- Evacuate the immediate area.

- Notify the Police (911)
- 3) *Follow the rest of the listed guidelines listed below, as applicable.*

Continued: Bomb Threat/Suspicious Package

## ADMINISTRATION

- Notify Police (9-911).
- Isolate the individual who received the threatening call as soon as possible. Have this individual write all information down and remain available for interviews by Law Enforcement Officials.
- Set up Command Post, and follow the Incident Manager Job Action Sheet.
- Notify department supervisors and charge nurses of the threat and assign areas to be searched. Generally, each area should be searched by staff who are normally assigned to and familiar with the particular area. Instruct department supervisors / charge nurses to report search results to Command Post.
- Two-way radios and cell phones should not be used for communications. Cell phones should be turned off.
- Make decisions regarding evacuation, termination of search, etc. with input from Law Enforcement Authorities.
- **Ensure all other guidelines of this procedure are completed.**

## GENERAL SEARCH PROCESS

- Staff will search their normally assigned work areas **for an out-of-place object or unfamiliar situation**. The department supervisor/charge nurse of each area will coordinate the search of the area.
- Once an assigned area has been searched, the results should be reported to the charge nurse/department supervisor. As the search of a department/unit is completed, this information should be relayed to the Command Post.
- Areas accessible to the public should be searched first.

**\*\*\*DO NOT TOUCH ANY SUSPICIOUS OBJECT\*\*\***

## SPECIFIC SEARCH PROCEDURE

- Upon entering a room, pause and **listen** for a ticking sound.
- Visually divide each room in half. Search the right half first. Divide the right half of the room into three levels: floor-to-waist level first, waist-to-eye level, and eye-to-ceiling. If your vision is blocked by an object, look under or behind whatever is blocking your vision, such as objects on window sills, dressers, etc. Do not open closets, drawers, etc.

- Be sure to search connecting bathrooms as resident rooms are being searched.
- Remain calm, not alarming residents as the search is taking place.

Continued: Bomb Threat/Suspicious Package

**IF A SUSPICIOUS OBJECT/PACKAGE IS FOUND OR RECEIVED:**

- Note precise location of object. – **DO NOT TOUCH IT!!**
- Move residents/staff from the room.
- Notify the Command Post immediately.
- If the room has a window, close the room door and all room connecting doors. If this room has no window, leave the door open and evacuate the room across the hall. Close all other doors.

**EVACUATION GUIDELINES:**

- If location of bomb **is** known
  - Move first horizontally, through fire/smoke doors, and then vertically away from the device.
  - When you leave the building, evacuate at least 300 ft. away.
  - Account for staff and residents
- If location of bomb **is not** known
  - Consider advice of Law Enforcement officials regarding decision to evacuate and the evacuation route to be used.

**TELEPHONE PROCEDURES – BOMB THREAT CHECKLIST**

**INSTRUCTIONS: BE CALM AND COURTEOUS. LISTEN do not interrupt caller. Remember to complete the bottom portion of form immediately.**

**TIME RECEIVED:** \_\_\_\_\_ **LENGTH OF CALL:** \_\_\_\_\_ **DATE:** \_\_\_/\_\_\_/\_\_\_

1. Attempt to hold caller as long as possible so tracing procedures may be started. Keep the person talking. Try to ask the following questions:  
 WHEN is the bomb going to explode? WHAT does the bomb look like?  
 WHERE is the bomb? WHY did you place it?  
 WHAT kind of bomb is it? Will it hurt people? (Tell them we have innocent people here)

Pretend difficulty hearing to keep the caller on the phone. Keep caller talking. After other information has been gathered ask, "Where are you calling from? And "Who is calling, please?"

Did the caller appear familiar with the building by his description of the bomb location? Any other information: \_\_\_\_\_

2. While talking, and as soon after the call as possible, complete the following: Try to remember the caller's exact words. \_\_\_\_\_

**CALLER'S IDENTITY: VOICE CHARACTERISTICS      SPEECH**

Male \_\_\_ Loud \_\_\_ Soft \_\_\_ Fast \_\_\_ Slow \_\_\_ Excellent \_\_\_  
 Female \_\_\_ High Pitch \_\_\_ Deep \_\_\_ Good \_\_\_ Distinct \_\_\_ Distorted \_\_\_  
 Poor \_\_\_ Fair \_\_\_  
 Adult \_\_\_ Raspy \_\_\_ Pleasant \_\_\_ Stutter \_\_\_ Nasal \_\_\_ Foul \_\_\_  
 Juvenile \_\_\_ Intoxicated \_\_\_ Other \_\_\_ Slurred \_\_\_ Lisp \_\_\_ Other \_\_\_

**ACCENT:**                      **MANNER:**                      **BACKGROUND NOISES:**

Local \_\_\_ Calm \_\_\_ Angry \_\_\_ Factory machines \_\_\_ Trains \_\_\_  
 Not local \_\_\_ Rational \_\_\_ Irrational \_\_\_ Bedlam \_\_\_ Animals \_\_\_  
 Foreign \_\_\_ Coherent \_\_\_ Incoherent \_\_\_ Music \_\_\_ Quiet \_\_\_  
 Race \_\_\_ Deliberate \_\_\_ Emotional \_\_\_ Office machines \_\_\_ Voices \_\_\_  
 Righteous \_\_\_ Laughing \_\_\_ Mixed \_\_\_ Airplanes \_\_\_  
 Street Traffic \_\_\_ Party noises \_\_\_

-----  
 Extension call received on \_\_\_\_\_. Person receiving the call \_\_\_\_\_

Go to another phone and call Phone Company. Give this message. "This is your name and facility.

We have a threatening phone call on facility phone number, extension \_\_\_\_\_. Will you please start to trace this call? We will try to keep the person talking. I will stay on the line until you ask me to get off.

## DISASTER KIT CONTENTS

A Disaster Kit is located in Central Storage in basement.

The contents of the kit are as follows:

Disaster tags (See Item #4 of the Building Evacuation Section on page # 5)

2 Flashlights with spare batteries

Flashlight bulbs (2)

Note pad

Pencils (2)

Plastic bags (small, 1 roll)

Plastic bags (large, 1 roll)

Disaster manual (copy)

Gloves – 2 boxes

3 pkg. Briefs

Radio and batteries

Lantern and batteries

### First Aid Supply Kit

4x4's, tape, band aids, wound cleanser(1 bottle), triple antibiotic ointment, stretch bandage, sterile gloves, steri-strips, alcohol preps(1 box), tongue blades(1box), transparent dressings, cotton tipped applicators, povidone swab sticks(1 box), sodium chloride (1 bottle), ace bandages (2-4" and 2-6"), thermometer, manual resuscitator, blood pressure cuff, stethoscope, Instant hand sanitizer (1 bottle), 2 instant ice packs, scissors (1 pair)

## EMERGENCY BEDDING MATERIALS LIST

Emergency bedding materials are stored as follows:

<u>EQUIPMENT</u>	<u>QUANTITY</u>	<u>LOCATION</u>
Mattresses	6	Resident storage
Pillows	10	Basement Linen Room
Beds	2	Resident storage
Blankets	3 days	Basement Linen Room & resident floor Linen Rooms
Linens	3 days	Basement Linen Room & resident floor Linen Rooms

## EMERGENCY FOOD SUPPLY LIST

EMERGENCY FOOD SUPPLIES ARE LOCATED IN THE DIETARY STORE ROOM ON THE FIRST FLOOR.

### Food Items:

Tuna – 66 ½OZ cans	1 cases
Ravioli and beef-#10 can	2 cases
Corned beef hash - #10 cans	1 cases
Beef stew-#10 can	1 case
Beans with pork - #10 cans	1 cases
Peas - #10 cans	2 cases
Carrots - #10 cans	2 cases
Green beans - #10 cans	2 cases
Dry powdered milk	45 lbs.
Assorted cold cereals	1 case
Assorted hot cereals	7 boxes
Assorted juice	7 cases
Peaches - #10 cans	2 cases
Pears - #10 cans	1 case
Fruit cocktail - #10 cans	1 case
Pudding -dry	6 bags
Peanut butter – pc's	1 cases
Applesauce - #10 can	3 cases
Jelly	2 jar
Jelly pc	2 cases
Cookies	4 cases
Mayonnaise – Gallon	2 jars
Saltines – 2pk	2 cases
Graham crackers – 2pk	1 case
Sugar pkts	1 cases
Sugar Sub pkts	1 cases
Mashed potato - #10 can	1 case
Tea bags	3 boxes
Sanka coffee packs	2 sleeves
Spring water gallons	5 cases
Thickener-cans	8 cans
Peanut butter tubs	2 tubs

### Paper Items:

5oz cups	2 cases
5oz lids	2 cases
Styro trays	6 cases
Styro 6oz cups	1 case
Styro 8oz cups	1 case
Styro 8oz lids	1 case
Garbage bags	3 cases
Styro 4oz cups	1 case
Styro 9" plates	2 cases
Styro 6" plates	1 case
Plastic forks	1 case
Plastic spoons	3 cases
Foil wrap	1 roll
Sternos	1 Case
Plastic knives	1 case
Napkins	1 case
Sandwich bags	1 case
Straws	5 boxes
Plastic gloves	1 case



### Three Day Emergency Menu

Day 1	Day 2	Day 3
Breakfast	Breakfast	Breakfast
4oz. Juice 1/2c. Fruit 1/2c Cold Cereal-Hot cereal 8oz. Milk 2 Bread, 2 Butter, 1 Peanut butter and 1 Jelly	4oz. Juice 1/2c. Fruit 1/2c Cold Cereal-Hot cereal 8oz. Milk 2 Bread, 2 Butter, 1 Peanut butter and 1 Jelly	4oz. Juice 1/2c. Fruit 1/2c Cold Cereal-Hot cereal 8oz. Milk 2 Bread, 2 Butter, 1 Peanut butter and 1 Jelly
Lunch	Lunch	Lunch
6oz Beef ravioli 2 slice bread 1/2c. canned fruit 1/2c canned vegetable 4oz. Milk 8 oz water	6oz Corned beef hash 2 slices bread 1/2c canned vegetable 4oz. Milk 1/2c. canned fruit 1 Cookie 8oz water	6oz Pork and beans 1/2c canned vegetable 2 slice bread 4oz. Milk 1/2c. canned fruit 4oz. Juice 8oz water
Supper	Supper	Supper
2oz Cheese sandwich 1/2c canned vegetable 4oz. Milk 1 Cookie 4oz. Juice 8oz water	6oz Beef Stew 1/2c canned vegetable 4oz. Milk 1/2c. canned fruit 8oz water	2oz Tuna Sandwich 4oz. Milk 1/2c. canned fruit 1 Cookie 1/2c canned vegetable 8oz water
Snacks		
1 pkg. Cookies 8oz Juice  1 pkg. Peanut butter/crackers	1 pkg. Graham crackers 8oz Juice  1 pkg. Peanut butter/crackers	1/2c pudding 8oz Juice  1 pkg. Peanut butter/crackers

\*Sanka and tea available

\* Mashed potato available

All three-day menu supplies will be available if an emergency occurs.

## EMERGENCY AGENCY PHONE LIST

<u>SERVICE</u>		<u>PHONE #</u>
FEMA		800-261-3362
Fire / EMS	(Emergency) (Non-emergency)	911 315-339-7784
Sheriff / Police	(Emergency) (Non-emergency)	911 315-337-3311
NYS Health Department	(Business Hours) (After Hours/Weekends)	315-477-8472 315-477-8500
Highway Patrol (State Police)	(Emergency) (Non-emergency)	911 315-736-0121
Highway Department	(State Highways) (Local Streets-DPW)	315-733-2111 315-339-7635
Gas Company	National Grid	800-892-2345
Electric Company	National Grid	800-867-5222
Water/Sewer Department	Business Hours After Hours	315-339-7773 315-339-7777
Telephone Company	H & F Communications	845-492-2000
Office of Emergency Services	(State) (County)	315-798-5604
Department of Health Services	Oneida County Health Dept.	315-336-0100
Hazardous Materials	Stericycle	866-783-7422
Red Cross		315-336-0030
Poison Control Center		800-222-1222

## EMERGENCY CONTRACTOR / VENDOR PHONE NUMBERS

### MAINTENANCE DEPARTMENT

<b><u>SERVICE OR PRODUCT PROVIDED</u></b>	<b><u>VENDOR / CONTRACTOR NAME</u></b>	<b><u>PHONE #</u></b>
HVAC	Airtemp	315-735-7539
ANSUL System	Fire Fighting Equipment After Hours	315-336-0322 315-292-8501 315-292-8503
Call Light System Repair	Syracuse Time & Alarm	800-762-2667
Electrical Systems	Dave Hall Electric	315-735-4090
Elevators	Thyssen Krupp Elevator	800-283-6837
Environmental Waste		
Non-hazardous	Bliss Environmental	315-245-2520
Hazardous	Stericycle	866-783-7422
Grease Trap	Eggan Excavating	315-339-1847
Fire Alarm Monitoring Service	Simplex	888-746-7539 Acct # 116-3980
Fire Alarm Service	Simplex	315-437-7718
Fire Sprinkler Service	HJ Brandeles	315-733-7565
Plumbing Contractor	After Hours	315-868-2275
Front Doors	Assa Abloy	888-393-7805
Generator		
Service	Penn Power Systems	315-451-3838
Rental	Penn Power Systems	315-451-3838
	Taylor Rental	315-336-7370
Fuel for Generator	Superior Energy Plus	315-337-5540
Kitchen Appliance Repair (small)	Hobart	315-539-9862
Laundry Equipment Repairs	Statewide Machinery	800-527-2219
Oxygen Supplier	Adirondack Compressed Gases	315-724-6155
Pest Control	Pugliese (Orkin)	315-732-4141
Snow Plowing	Panasei Excavating	315-336-0591
Telephone System Repair (internal)	H & F Communications	845-492-2000

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**EMERGENCY CONTRACTOR / VENDOR  
PHONE NUMBERS****HOUSEKEEPING / LAUNDRY DEPARTMENT**

<b><u>SERVICE OR PRODUCT PROVIDED</u></b>	<b><u>VENDOR / CONTRACTOR NAME</u></b>	<b><u>PHONE #</u></b>
Housekeeping Supplies	New Goldland Purchasing	212-221-2455
Laundry Supplies	New Goldland Purchasing	212-221-2455
Chemicals	Santec (Scott Boda)	315-741-0625

## EMERGENCY CONTRACTOR / VENDOR PHONE NUMBERS

### DIETARY DEPARTMENT

<b><u>SERVICE OR PRODUCT PROVIDED</u></b>	<b><u>VENDOR / CONTRACTOR NAME</u></b>	<b><u>PHONE #</u></b>
Frozen Foods / Groceries	New Goldland Purchasing US Foods	212-221-2455 518-877-8511
Bread	New Goldland Purchasing Midstate Bakery	212-221-2455 315-313-5005
Dairy	New Goldland Purchasing Byrne Dairy	212-221-2455 315-475-2111
Eggs	New Goldland Purchasing Byrne Dairy	212-221-2455 315-475-2111
Produce	New Goldland Purchasing US Foods	212-221-2455 518-877-8511
Coffee	American Food & Vending	315-457-9950
Meats	Ginsberg Quandt's	315-828-4004 800-666-8443
Chemicals	Santec	800-805-1605
Dish Machine	Hobart	315-539-9862
Supplements	New Goldland Purchasing TriState	212-221-2455 718-624-1000

**EMERGENCY CONTRACTOR / VENDOR  
PHONE NUMBERS****NURSING DEPARTMENT**

<b><u>SERVICE OR PRODUCT PROVIDED PHONE #</u></b>	<b><u>VENDOR / CONTRACTOR NAME</u></b>	
Ambulance / Medi-Trans	AmCare	315-339-5600
Laboratory	St Elizabeth	315-798-8294
Medical Supplies	New Goldland Purchasing	212-221-2455
Nursing Registry	ASI	800-274-7181
Pharmacy	Procare Pharmacy	
Pharmacy Consultant	Michael Caleo	518-669-4261
Respiratory / Oxygen Supplies	Adirondack Compressed Gas	315-724-6155
X-ray	K&A	315-724-6981

## EMERGENCY UTILITY SHUT-OFF LOCATIONS

<u>UTILITY</u>	<u>SHUT-OFF LOCATION</u>	<u>METHOD TO SHUTDOWN</u>
WATER	Maintenance Room	Turn gate valve
GAS	Outside of building on East Side below Dining Room window.	Turn ball valve w/ wrench
ELECTRIC	Main Electric Room	Pull down levers to disconnect
WALK-IN REFRIGERATION	Maintenance Room breaker box Panel LE-B	Flip breaker #23 refrigerator Flip breaker #25 freezer
COOKING SURFACE	Fire Protection	Next to stove
		1/4 turn valve

### SPECIFIC PROCEDURES FOR AIR HANDLING UNITS IN PENTHOUSE

SOILED UTILITY Exhaust Fan (Located in Crawl Space under Elevator Machine Room)

1. By-pass switch located above motor on side of duct.
2. Panel P-PH Penthouse I Breaker #1

Air Handling Unit (AHU) #1 – Outside Air

1. By-pass switch located on East wall
2. Panel P-PH Penthouse I Breaker #18 100 AMP 3 pole

Air Handling Unit #2 – Exhaust Air

1. By-pass switch located on the South wall
2. Panel P-PH Penthouse I Breaker #127 100 AMP 3 pole

Air Handling Unit #1 and Air Handling Unit #2 Controls

1. Panel P-PH Penthouse I Breaker #6 20 AMP (Breaker powers both control boxes)

Heat Wheel

1. By-pass switch on control box
2. Panel P-PH Penthouse I Breaker #8 30 AMP

Pre-Heat Coil #1

1. Panel P-PH Penthouse II Breaker #1 125 AMP 3 pole

Pre-Heat Coil #2

1. Panel P-PH Penthouse II Breaker #22 125 AMP 3 pole

## POWER SOURCES

<b><u>EQUIPMENT/ APPLIANCE</u></b>	<b><u>FUEL SOURCE</u></b> (Electric Natural Gas)	<b><u>CONNECTED TO EMERGENCY GENERATOR</u></b> (Yes or No)
Stove/Griddle	Natural Gas	No
Ovens	Electric	No
Kitchen		
Walk in Cooler	Electric	Yes
Walk in Freezer	Electric	Yes
Microwaves	Electric	No
Kitchen Lighting	Electric	No
Dishwashers	Electric	No
Garbage Disposals	Electric	No
Steamer	Electric	No
Steam Kettle	Electric	No
Coffee Urn	Electric	No
Ice Machine	Electric	No
Juice Machine	Electric	No
Exhaust Fans	Electric	No



**EMERGENCY CONSUMABLE LIQUID STORAGE****WATER STORED IN THE BUILDING**

<b><u>LOCATION</u></b>	<b><u>AMOUNT</u></b>
Basement Storage Room	400 gal

**OTHER LIQUIDS STORED IN THE BUILDING**

<b><u>TYPE OF LIQUIDS</u></b>	<b><u>AMOUNT</u></b>
Water Storage Tank Hot Water (Maintenance Room)	350 gal

**OUTSIDE SOURCES**

<b><u>VENDOR</u></b>	<b><u>PHONE #</u></b>
Byrne Dairy	315-475-2111

## EQUIPMENT SERVED BY THE EMERGENCY GENERATOR

Outlets served by the Emergency Generator are indicated by a red outlet.

### LE Panel (Maintenance Room)

- Fire Pump
- Exit Lights
- Circulating Pumps (Tempered Hot Water)
- Maintenance Room Lights
- Fire Alarm
- Elevator Pit Light
- Magnetic Door Holders
- Phone and Electric Room Lights
- Smoke Dampers
- Battery Charger
- Stair Lights
- Plugs (Electric Room and Generator Room)
- Plugs (Phone Room)
- Telephone System
- Sump Pump Controller
- Circulating Pump (Hot Water)
- Generator Room Lights
- Sump Pump (Elevator Pit)
- Walk in Refrigerator/Freezer Lights
- Sprinkler Valve Alarm
- Jockey Pump
- Walk in Refrigerator/Freezer

### LEB2 Panel (Maintenance Room)

- Water Heaters
- Physical Therapy Furnace
- Main Dining Room Furnace
- Diesel Tank Monitor
- Diesel Tank Overfill Alarm

### LE Sub Panels (Floors 2-6 Electric Rooms)

- Emergency Lights (hallway)
- Emergency Receptacles in Resident Rooms
- Nurse Call System
- Penthouse lights
- Elevator Equipment Room Light
- Elevator Lights and Fans

NOTE: Elevators have automatic transfer switch located in Generator Room.

**EQUIPMENT SERVED BY NATURAL GAS**

<b><u>EQUIPMENT</u></b>	<b><u>LOCATION</u></b>
Water Heaters	Maintenance Room
Stove & Griddle	Main Kitchen
Furnace	Main Dining Room
Furnace	Physical Therapy Department
Dryers	Laundry Department

**LIST OF AGREEMENTS TO OBTAIN GAS AND FUEL**

<b><u>CONTRACTOR</u></b>	<b><u>PHONE</u></b>	<b><u>WILL SUPPLY</u></b>
Superior Energy Plus	315-337-5540	Diesel Fuel for emergency generator

## LOCATION OF EXTENSION CORDS AND FLASHLIGHTS

### EXTENSION CORDS:

<u>LOCATION</u>	<u># OF CORDS</u>	<u>LENGTH OF CORDS</u>
Electric Closet	1 in each closet	25 ft.
Maintenance Room	Multiple	various
Garage	Multiple	various

### FLASHLIGHTS:

<u>LOCATION</u>	<u># OF FLASHLIGHTS</u>
Nurses Station	1 in each station
Nursing Office	2
Maintenance Room	Multiple

## LOCATIONS OF TELEPHONES NOT PART OF THE MAIN PHONE SYSTEM

THE FOLLOWING PHONES ARE SUPPLIES FROM A SOURCE OTHER THAN THE MAIN PHONE SYSTEM AND, THEREFORE, **MAY** FUNCTION EVEN THOUGH THE MAIN PHONE SYSTEM IS OUT OF SERVICE.

### FAX LINES

<u>LOCATION</u>	<u>PHONE #</u>
Main Office	315-339-6927
Nursing Office	315-339-5259
Social Services	315-339-1293
Fourth Floor Lounge	315-339-5257
Second Floor Lounge	315-339-1301

### CELLULAR PHONES

<u>LOCATION</u>	<u>PHONE #</u>
N/A	N/A

## **MANAGEMENT STAFF PHONE NUMBERS**

<b><u>NAME</u></b>	<b><u>DEPARTMENT/TITLE</u></b>	<b><u>PHONE #</u></b>
Mark Smith	Administrator	315-520-1886
Amber Hluska	Director of Nursing	315-271-3507
Natalie Legler	ADON/Nurse Manager	315-225-9642
Mahaghany Sally	Nurse Manager	315-741-4439
Deb Pannofino	Nurse Manager	315-525-4084
Russell Cole	Infection Control/ Employee Health	315-796-8979
Sean Edick	Facilities Director	315-723-6036
Russell Cangialosi	Environmental Services	315-335-3869
Kristina Teriele	Director of Social Work	315-264-6967
Tracy Johnson	Activities Director	315-271-7549
Stephanie Morosco	Food Service Director	315-790-7611
Valarie Johnson	Office Manager	315-338-1580
Kelly McCowan	Admissions	718-483-6197
Maryellen Reilly	Medicaid Coordinator	315-723-1017

### **PHYSICIAN PHONE NUMBERS**

Dr. Joel Amidon	Medical Director	315-412-6607
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### **Nurse Practitioner**

Judy Balch		315-335-3318
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### **Ombudsman**

Krystal A. Wheatly Curley		315-272-1872
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## EMERGENCY ALERT SYSTEM RADIO STATIONS

The following radio stations are part of the Emergency Alert System, and should be monitored as a source of official information in the event of disasters involving the community.

<b><u>STATION CALL LETTERS</u></b>	<b><u>BUSINESS #</u></b>
KISS 102	315-721-0102
WARM 93.5	315-797-0803
WFRG 104	315-736-0104
WIBX AM 950	315-768-9500
WOUR 96.9	315-797-0803

## **TEMPORARY HOUSING / TRANSPORTATION RESOURCES**

(Over and above that of the local Emergency Medical Service)

Temporary assistance may be provided by other area facilities. This may include the use of vans, wheelchair-mobiles, and other transportation vehicles to assist in the relocation of residents from the facility or the stop-over point to the receiving facilities.

In addition, the receiving facility may serve as temporary shelter for evacuated residents and staff. Dining rooms, Activity Rooms, Chapel, etc. could be used as resident care or staff sleeping areas. The receiving facility would be responsible for providing needs of residents and staff. However, the staff from the evacuated facility would assist in providing direct resident care, assist with meal preparation, laundry, and housekeeping responsibilities.

Whenever possible, the number of individuals that could be housed (not just in resident rooms) should be determined ahead of time and included under this heading. In this way administration will be better prepared to decide the specific residents and staff who may be sent to any given facility.

### **FACILITY OWNED VEHICLES USED FOR TRANSPORTATION OF RESIDENTS**

<u>VEHICLE</u>	<u>CAPACITY</u>
2011 Ford Van	12

### **VEHICLES USED FOR TRANSPORTATION OF GOODS AND EQUIPMENT**

<u>VEHICLES</u>
2011 Ford Van
Personal Staff Vehicles

### **OUTSIDE RESOURCES**

#### **FOR TRANSPORTATION OF RESIDENTS**

<u>TYPE OF VEHICLE</u>	<u>PROVIDER</u>	<u>PHONE #</u>
Ambulance	Amcare	315-339-5600
Bus	Birnie Bus VIP Dial a Ride	315-336-3955 or 800-734-3950 315-336-0147



## RECEIVING FACILITIES

### STOP-OVER POINT (Temporary Shelter)

<u>FACILITY</u>	<u>ADDRESS</u>	<u>PHONE #</u>
St John's Lutheran Church	502 W. Chestnut	Day 315-336-8090 Emergency 315-337-4315 315-336-0028

### OTHER FACILITIES (For housing of residents)

<u>FACILITY</u>	<u>ADDRESS</u>	<u>PHONE #</u>	<u># OF RESIDENTS ABLE TO ACCOMMODATE</u>
Betsy Ross Nursing Facility	1 Elsie St.	315-339-2221	10
St. Luke's Home	1650 Champlin Ave. New Hartford, NY 13413	315-624-8600	20
Eastern Star Home	Utica St. Oriskany, NY 13424	315-736-9311	Call to Confirm
The Pines Nursing Home	1800 Butterfield Ave. Utica, NY 13501	315-797-3570	Call to Confirm
Charles T. Sitrin Health Care	Box 1000 Tilden Ave. New Hartford, NY 13413	315-797-3114	10
The Grand Nursing Home	801 N. James St. Rome, NY 13440	315-337-0550	15
Sunset Nursing Home	Academy St. Boonville, NY 13309	315-942-4301	10
Presbyterian Home for CNY	Middle Settlement Rd. New Hartford, NY 13413	315-797-7500	10
Oneida City Hospital-ECF	323 Genesee St Oneida, NY 13421	315-363-6000	20

**See also: Oneida County Mutual Aid Evacuation and Supply Plan**

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## **MATERIAL SAFETY DATA SHEETS (M.S.D.S.) EYEWASH STATIONS**

### **M.S.D.S. SHEETS:**

#### **Main M.S.D.S. Station - First Floor West Corridor**

- In each Janitors Closet (one on each floor) - Housekeeping
- Maintenance Room - Maintenance
- In Main Nursing Office - Nursing
- In the Kitchen (yellow notebook under steam table) - Nutritional Services
- In the Laundry Department - Laundry

### **EYEWASH STATIONS:**

- 1-32 oz bottle on each Housekeeping cart floors 2 thru 6
- 1 eye and body wash in 1<sup>st</sup> floor Janitors closet - West Corridor
- Maintenance Room Bathroom - Basement
- Main bathroom sinks floors 2 thru 6
- Pot and pan sink - Main Kitchen
- Physical Therapy Room sink
- Physical Therapy bathroom
- Laundry Waher Room

**INCIDENT MANAGER**  
**(Administrator, Director of Nursing, Supervisor)**

**Command Post location: First Floor Conference Room**  
 (Alternate: Business Office)

**GOAL:**

Organize and direct the Command Post. Give overall direction for facility operations and, if needed, authorize evacuation.

**IMMEDIATE:****ADMINISTRATOR/INCIDENT MANAGER:**

1.
  - **Verify** the disaster and activate the appropriate disaster plan. In consultation with appropriate staff (and possible outside agencies), the Administrator shall assess the magnitude of the disaster and tailor the planned response accordingly, including the extent of the Incident Management System to be carried out.
  - Distribute the Job Action Sheets as appropriate. This will include the possible call-in of off-duty staff (See Staffing Pool at end of Job Action Sheet), as well as assigning staff to carry out the responsibilities of departments that are not staffed at the time of the disaster.
  - When an **Authority Having Jurisdiction (Fire Chief, Emergency Preparedness Coordinator, etc.)** is on the scene, **termination** of the disaster should be decided in consultation with them.
2.
  - Set up a **Command Post** and implement the appropriate parts of this Emergency Preparedness Plan. Unless otherwise necessary, the location of the Command Post will be the Basement Conference Room.
  - As deemed necessary, summon Department **Supervisors** to the Command Post to give specific instructions and distribute Job Action Sheets.
  - The facility Command Post shall coordinate with the Emergency Authority Incident Command Post by a radio, runner, or proximity.
  - Appoint Documentation Recorder for the Command Post.

**NOTES**

a) In a fire situation the Command Post is with the Fire Chief.

b) The above instructions shall not prevent staff from taking immediate actions necessary to protect lives and property prior to being given specific instructions by Administration.

Continued: Incident Manager

3. Put on your own I.D. and advise all staff reporting to the facility to wear I.D. badges. Assign a means of identification. Leadership staff who would be interacting with the Emergency Authority's Incident Command Post will be identified by special name tags. Temporary I.D. for those without I.D. badges will be tape with their name on it.
4. If you evacuate to a triage/stop-over point, assign someone to be in charge of it. See page # 5.
5. In consultation with appropriate staff, determine the need **to curtail normal routines** such as admissions, routine medical treatment, visiting hours, etc.
6. Notify the Department of Health of the disaster in a timely fashion.
7. Ensure that **an incident report** is written and copies filed with appropriate authorities, as well as a copy kept on file for the facility.

#### **INTERMEDIATE:**

1. Authorize resources as needed or requested.
2. Ensure building security, as needed. (See Safety/Security Job Action Sheet)
3. Authorize media (and responsible party) releases given by Public Information Officer.
4. Receiving briefings from Department Supervisors on a regular basis. Adjust responses as needed (4 hrs., 8 hrs., 24 hrs., and 48 hrs. from time of incident onset).
5. Contact Department of Health in a timely fashion.
6. Make provisions for the following, as necessary:
  - a) **Transportation** of families to safe places or to the facility, if no other choice exists. (See procedures for Influx of Residents/Families, Temporary Housing and Transportation).
  - b) **Housing** of staff families displaced by the disaster. (See Influx of Residents/ Families, Temporary Housing, and Transportation Sections).

Continued: Incident Manager

c) **Staff Management**, including disaster work hours, meal times, sleep schedule, etc.

**EXTENDED:**

- Observe staff, volunteers, and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Initiate provisions for post-disaster stress briefings.
- Meet with Finance Officer to begin recovery phase.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**STAFFING POOL:**

If it is felt that conditions warrant, the Command Post will summon all available on (or off)-duty staff to a Staffing Pool. At the time the Staffing Pool is established, the Command Post will also assign a **designated person** to be in charge of it. This person will be responsible for accountability of staff (both those that have come in from home and on-duty staff) as reported by Department Supervisors. Report staff availability to the Command Post, as requested.

Unless decided otherwise by the Administrator, the location of the Staffing Pool will be the Break Room.

Off-duty staff called in shall report to the Staffing Pool, unless otherwise instructed. The person in charge of the Staffing Pool shall be responsible to ensure that all off-duty staff are logged-in as they arrive, as well as all staff being logged-out as they are dispatched from the Staffing Pool.

**COMMAND POST DOCUMENTATION RECORDER**  
(Office Manager)

<i>Position Assigned to:</i> _____	
<i>You Report To:</i> Incident Commander	
<i>Command Post Location:</i> _____	<i>Telephone:</i> _____

**GOAL:**

To assist in the organization and function of the Command Post. To record pertinent data, incidents, and responses as they occur.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Gather Command Post Supply List items.
- Work closely with Communications Officer to facilitate concise, rapid communication.
- Establish/maintain time-log of actions taken at the Command Post. See Attachment.
- Monitor and document all communications sent and received by Command Post. See Attachment.

**INTERMEDIATE:**

- Hold all documentation received at the Command Post.
- Keep records and receipts of supplies during the disaster, and expenses incurred.
- Observe all staff, volunteers, residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.

**EXTENDED:**

- Review final written report of disaster. Ensure all times, data, information, etc. has been recorded correctly.

- Observe all staff and visitors for signs and symptoms of stress. Report concerns to the Staff Support Officer.

Continued: Command Post Documentation Recorder

- Other concerns:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**EMERGENCY INCIDENT MESSAGE FORM**

**FILL IN ALL INFORMATION**

**TO** (Receiver): \_\_\_\_\_

**FROM** (Sender): \_\_\_\_\_

**DATE & TIME:** \_\_\_\_\_

<b>PRIORITY</b>		
<input type="checkbox"/> Urgent-Top	<input type="checkbox"/> Non Urgent-Moderate	<input type="checkbox"/> Informational-Low

<i>Message:</i> _____ _____ _____ _____ _____ _____
--

Received By:	Time Received:	Comments:
Forward To:		

Received By:	Time Received:	Comments:
Forward To:		

**KEEP ALL MESSAGES/REQUESTS BRIEF, TO THE POINT, AND VERY SPECIFIC**

**Original** = Receiver

**Copy #1** = Communications Officer

**Copy #2** = Sender



**ACTIVITY LOG**

Date: \_\_\_\_\_

#	Time	Incident – Problem Situation	Action	Authorized By	Name of Outside Agency Involved
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

**EMERGENCY INCIDENT MESSAGE FORM**

**FILL IN ALL INFORMATION**

**TO** (Receiver): \_\_\_\_\_

**FROM** (Sender): \_\_\_\_\_

**DATE & TIME:** \_\_\_\_\_

<b>PRIORITY</b>		
<input type="checkbox"/> Urgent-Top	<input type="checkbox"/> Non Urgent-Moderate	<input type="checkbox"/> Informational-Low

<p><i>Message:</i> _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
---

Received By:	Time Received:	Comments:
Forward To:		

Received By:	Time Received:	Comments:
Forward To:		

**KEEP ALL MESSAGES/REQUESTS BRIEF, TO THE POINT, AND VERY SPECIFIC**

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**Copy #1** = Communications Officer

**Copy #2** = Sender

**DAMAGE ASSESSMENT AND CONTROL OFFICER**  
(Facilities Director)

*Position Assigned to:* \_\_\_\_\_

*You Report To:* Operations/Planning Officer

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

Provide sufficient information regarding the operational status of the facility for the purpose of decision making, including full or partial building evacuation. Identify safe areas where residents and staff can be moved if needed. Manage damage mitigation activities. Evaluate and monitor the patency of existing sewage and sanitation systems. Enact pre-established alternate methods of waste disposal if necessary.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Check system components of entire facility. Use "Facility System Status Report".
- Identify presence of continuing hazards (gas leaks, exposed wires, unstable structure, etc.)
- Determine geographic extent of disaster impact (facility, street, block, town, state, etc.) Report results to the Operations and Planning Officer.
- Inform responding Emergency Rescue Agencies of victims in need of search and rescue.
- Assess communication network (internal/external). Will phone lines be overloaded?
- Conduct structural assessment (Is there damage to exterior wall system? Vertical movement of structure? Roof damage? Damage from loose objects? How functional are mechanical rooms/equipment utilities? Spilled chemicals? Containment of biohazard materials stored on site?). Report results to the Operations and Planning Officer.
- Determine access to potable water (Is supply intact? Can vendors deliver?).
- Assess sanitation level (Is sewage system intact? Can vendors remove waste? Where can waste be stored?).

Continued: Damage Assessment and Control Officer

- Relay results to the Operations and Planning Officer. Follow up with written documentation/photos. See Attachment. Give copy to Operations and Planning Officer. Refer to specific Disaster Plan for response.
- Notify Safety and Security Officers of unsafe areas and other security problems.
- Identify areas of critical services and direct immediate repair to these areas.
- Take photos and/or videotape damage before clean up/repairs are initiated.
- Inspect the hazardous waste collection area(s) to ensure patency of containment measures. Cordon off unsafe areas.

#### **INTERMEDIATE:**

- Notify Staff Pool of staffing needs.
- Identify areas where salvage efforts should be directed to save critical equipment.
- Assign staff to salvage and repair operations.
- Arrange to have structural engineer report/obtain more definitive assessment, if indicated.
- Interact with Emergency Service Responders and Utility Companies as needed.
- Implement pre-established alternative waste disposal/collection plan, as necessary.
- Assure that all sections and areas of the facility are informed of the implementation of the alternative waste disposal/collection plan. Position portable toilets in accessible area; away from resident care and food preparation areas.
- Ensure an adequate number of hand washing areas are operational near resident care/food preparation areas, and adjacent to portable toilet facilities.
- Inform Infection Control personnel of actions and enlist assistance where necessary.

#### **EXTENDED:**

- Monitor levels of all supplies, equipment and needs relevant to all sanitation operations.

- Monitor levels of supplies, equipment and needs relevant to repair or maintenance of damaged areas. Work closely with Materials Supply Officer and Finance Officer.

Continued: Damage Assessment and Control Officer

- Observe all staff and volunteers for signs and symptoms of stress. Report concerns to Staff Support Team.

- Other concerns:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## FACILITY SYSTEM STATUS REPORT

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Certifying Officer: \_\_\_\_\_

<b>SYSTEM</b>	<b>OPERATIONAL STATUS</b>	<b>COMMENTS</b> (If Non-operational, give reason and estimate time/resources to complete repair.)
Structural Components		
Ceiling/Roof Integrity		
Electrical Power-Primary Service		
Electrical Power Backup Generator		
Water		
Natural Gas		

## FACILITY SYSTEM STATUS REPORT

<b>SYSTEM</b>	<b>OPERATIONAL STATUS</b>	<b>COMMENTS</b> (If Non-operational, give reason and estimate time/resources to complete repair.)
Fire Prevention/Mitigation Components		
Heater & Circulators		
Heating Service		
Radio Equipment		
Paging – Public Address		
Food Preparation Equipment		
Telephone		
FAX		

**FACILITY SYSTEM STATUS REPORT**

<b>SYSTEM</b>	<b>OPERATIONAL STATUS</b>	<b>COMMENTS</b> (If Non-operational, give reason and estimate time/resources to complete repair.)
Laundry Service Equipment  Non-structural Components  Other		



**EMERGENCY INCIDENT MESSAGE FORM**

**FILL IN ALL INFORMATION**

**TO** (Receiver): \_\_\_\_\_

**FROM** (Sender): \_\_\_\_\_

**DATE & TIME:** \_\_\_\_\_

<b>PRIORITY</b>		
<input type="checkbox"/> Urgent-Top	<input type="checkbox"/> Non Urgent-Moderate	<input type="checkbox"/> Informational-Low

<i>Message:</i> _____ _____ _____ _____ _____ _____
--

Received By:	Time Received:	Comments:
Forward To:		

Received By:	Time Received:	Comments:
Forward To:		

**KEEP ALL MESSAGES/REQUESTS BRIEF, TO THE POINT, AND VERY SPECIFIC**

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**Copy #2** = Sender

**EMPLOYEE TIME / STAFF POOL OFFICER**  
(Business Office)

<i>Position Assigned to:</i> _____	
<i>You Report To:</i> Finance Officer	
<i>Staging Area Location:</i> _____	<i>Telephone:</i> _____

**GOAL:**

To collect and inventory available staff at a central point. Receive requests and assign available staff as needed. Maintain adequate numbers of medical and non-medical personnel. Assist in the maintenance of staff morale. Maintain responsibility for the documentation of personnel time records. Responsible for the monitoring and reporting of regular and overtime hours worked/volunteered.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Meet with department supervisors to determine staffing needs.
- Remind staff to wear identification.
- Work with Volunteer Coordinator to establish Volunteer Pool.
- Meet with Finance Officer to develop action plan
- Ensure the documentation of personnel hours worked and volunteered hours worked in all areas relevant to the emergency incident response.
- Inventory the number and classify staff presently available.

Classifications:

## I – Medical Personnel

- Physicians
- Nurses
- Advanced Practitioners (N.P., C.N.C., P.A., R.T., etc.)
- Aides, Orderlies

## II – Non-Medical Personnel

- Maintenance
- Housekeeping, Nutritional Services
- Business / Finance
- Other

Continued: Employee Time / Staff Pool Officer

**INTERMEDIATE:**

- 5. Monitor hours worked. Report results to Finance Officer.
  - Collect time sheets every shift.
  - Call in needed personnel as directed by Command Post.
  - Maintain a log of all staff assignments.

**EXTENDED:**

- Prepare a total of personnel hours worked during incident
- Observe all staff and volunteers for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Document actions and decisions on a continual basis. Provide a copy to Command Post Document Recorder.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

#	Employee/ Volunteer	Address (Print)	Signature	Driver's License #	PROF/ TECH License #	Specialty Skills	Employer Address	Time IN	Time OUT	Security Follow-up

Certifying Officer: \_\_\_\_\_

Date / Time: \_\_\_\_\_

**FINANCE OFFICER**  
(Business Office, Administration)

*Position Assigned to:* \_\_\_\_\_

*You Report To:* Incident Manager

*Staging Area Location:* \_\_\_\_\_      *Telephone:* \_\_\_\_\_

**GOAL:**

Monitor the utilization of financial assets. Oversee the acquisition of supplies and services needed to provide care to residents. Supervise the documentation of expenditures relevant to the emergency incident.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Establish a Finance Section Operations Center at the Command Post. Ensure adequate documentation/recording personnel. See Attachment.

**INTERMEDIATE:**

- Create a “cost-to-date” Incident Financial Status Report every eight hours to summarize financial data relative to personnel, supplies, and miscellaneous expenses. Review with Emergency Incident Manager on a frequent basis.
- Receive and document claims issued by employees and non-employees. Confer with Safety and Security Officers. Use photographs or video documentation when appropriate.
- Obtain statements as soon as possible from claimants and witnesses.
- Document claims on appropriate forms.
- Receive updates of supplies used from Materials Supply Officer.
- Authorize needed purchases, including staff work time.
- Have checkbook and cash available for emergency purchases.

Continued: Finance Officer

**EXTENDED:**

- Work with outside suppliers to ensure payment for requested good and services.
- Assist with cost containment.
- Assist in providing funds needed for dependant care for staff/volunteers.
- Prepare a summary of all claims reported during the declared emergency incident.
- Keep records of all contracts initiated during emergency incident.
- Initiate insurance claims for Financial Recovery Plan.
- Update projected budgets for facility in future disasters based on post-disaster assessment.
- Observe all staff and volunteers for signs and symptoms of stress. Report concerns to the Staff Support Officer.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

## PROCUREMENT SUMMARY REPORT

Date: \_\_\_\_\_

#	P.O. #	Date/Time	Item/Service	Vendor	\$ Amount	Requestor	Approval
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							

Certifying Officer: \_\_\_\_\_

Date / Time: \_\_\_\_\_

**LIAISON OFFICER**  
(Administration, Director of Nursing, Supervisor)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Incident Manager*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To function as Incident Contact Person for representatives from other agencies.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification. Ensure all at the Command Post are wearing I.D.
- Review County and Municipal Plans and Mutual Aid agreements to determine appropriate contacts and message routing. Coordinate with Public Information Officer.
- Gather the following information to provide for responding agencies, Department of Health, etc., as requested:
  - Current and anticipated shortage of personnel, supplies, etc.
  - Current condition of structure and utilities
  - Number of residents to be transferred to other facilities
  - Any resources requested by other facilities (staff, equipment, supplies)
- Ensure Incident Commander is distracted as little as possible by communications from other agencies.

**INTERMEDIATE:**

- Respond to requests and complaints from incident personnel regarding inter-organizational problems.
- Relay any special information obtained to the appropriate personnel in the receiving facility (information regarding toxic decontamination, any special emergency conditions, etc.)



Continued: Liaison Officer

**EXTENDED:**

- Inventory any material resources which may be sent upon official request and method of transportation, if appropriate.
- Work closely with Material Supply Officer and Transportation Officer.
- Supply casualty data to the appropriate authorities.
- Prepare the following minimum data:
  - Number of casualties received and types of injuries treated
  - Number hospitalized and number discharged to home or other facilities
  - Number deceased
  - Individual casualty data: name or physical description, sex, age, address, nature of illness or injury. Check with Resident Care Officer before releasing this information.
- Channel requests from outside agencies to proper Department Supervisor, as practical.
- Work with outside agencies and Material Supply Officer to procure needed supplies and services.
- Observe all staff, volunteers and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**MATERIALS SUPPLY OFFICER**  
(Office Manager, Maintenance)

<i>Position Assigned to:</i> _____	
<i>You Report To:</i> _____	
<i>Staging Area Location:</i> _____	<i>Telephone:</i> _____

**GOAL:**

To organize and supply medical and non-medical equipment and supplies.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Instruct Department Supervisors to create inventory list of needed and “on-hand” supplies.
- Identify additional equipment/supply needs.
- Collect and coordinate essential medical equipment/supplies.
- Determine the anticipated drugs needed/request for residents. Work closely with the Director of Nursing.
- Contact suppliers to procure needed equipment and supplies.
- Obtain outside vendor lists from Department Supervisors.
- Contact vendors as requested.
- Deliver supplies as requested.

**INTERMEDIATE:**

- Work with the Safety/Security Officer to protect resources.
- Work closely with Finance Officer to track costs.
- Assist with equipment salvage and recovery efforts.

**EXTENDED:**

- Observe all staff, volunteers and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Update “stock-on-hand” supply, post disaster. Make needed changes.

- Ensure vendor contracts are updated and signed, post disaster.

Continued: Materials Supply Officer

- Other concerns:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### RESOURCE ACCOUNTING RECORD

Date: \_\_\_\_\_

0000 – 1159 hours

1200 – 2359 hours

Time	Item/Product Description	Received From	Dispensed To	Initials

Certifying Officer: \_\_\_\_\_

Date / Time: \_\_\_\_\_

**NUTRITIONAL SUPPLY OFFICER**  
(Dietary Supervisor)

*Position Assigned to:* \_\_\_\_\_

*You Report To : Finance Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To organize food and water stores in preparation for rationing during periods of anticipated or actual shortage.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Meet with and brief the Dietary Staff.
- Estimate the number of meals which can be served utilizing existing food stores. Implement rationing if situation dictates. Follow Emergency Food Menu as disaster dictates.
- Inventory the current drinking water supply and estimate time when resupply will be necessary. Implement rationing if situation dictates. Follow Loss of Water Plan.
- Report inventory levels to the Command Post.

**INTERMEDIATE:**

- Meet with Employee Time / Staff Pool Officer, Volunteer Coordinator, to discuss location of food and break areas for staff and volunteers and families of staff.
- Meet with Command Post to establish the number of residents, staff, volunteers, and families of staff on-site to determine projected needs of food and liquids.
- Secure nutritional and water inventories with the assistance of Maintenance.
- Submit an "anticipated needs list" of water and food to the Materials Supply Officer. Request should be based on the current information concerning emergency events as well as projected needs.

Continued: Nutritional Supply Officer

**EXTENDED:**

- Provide regular updates to Finance Officer.
- Post disaster, reorder supplies to normal levels. Work closely with Finance Officer and Materials Supply Officer.
- Observe all staff, volunteers and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**OPERATIONS/PLANNING OFFICER**  
(Maintenance)

<i>Position Assigned to:</i> _____	
<i>You Report To:</i> Incident Manager	
<i>Staging Area Location:</i> _____	<i>Telephone:</i> _____

**GOAL:**

To organize and direct those operations which ensure optimal functioning of the facility.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.

**INTERMEDIATE:**

- Record/document activities happening outside Command Post.
- Review reports from Department Supervisors. Brief Emergency Incident Commander.
- Call for projection reports from Department Supervisors on frequent, regular basis throughout the incident.
- Obtain status report on computer information system.

**EXTENDED:**

- Provide breaks for Emergency Incident Commander.
- Ensure post-disaster briefing for staff and volunteers.
- Assist in reviewing data to change Emergency Preparedness Plan, post disaster, if necessary.
- Observe Command Post and other staff/volunteers for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**RESIDENT CARE OFFICER**  
(Director of Nursing, Nurse Manager, Supervisor)

*Position Assigned to:* \_\_\_\_\_

*You Report To:* Incident Manager

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To supervise and maintain general nursing/medical services to the best possible level to meet the needs of residents. To collect, identify and protect deceased residents.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Establish triage area. Establish two-way communication with Command Post.
- Establish a Morgue Area.
- Work with Security and Transportation Officers to establish ambulance loading area.
- Assist in providing initial triage and treatment.
- Obtain assistance from the Transportation Officer for transporting deceased residents.
- Contact Safety and Security Officers and inform them of security and traffic control needs in the triage area.
- Ensure that disaster tags and other proper documentation are provided.
- Assess staffing needs. Report results to Staff Pool and Finance Officer. Request additional help, as needed. Project immediate and prolonged capabilities.
- Conduct walk-through of damaged areas. Assess resident needs.
- Work with Materials Management Officer to inventory needed medical supplies.
- Assess problems and treatment needs in each resident care unit.
- Work with Safety Officer to ensure infection control measures are followed, as practical.
- Work with Maintenance to inventory level of medical gases. Report results to the Command Post.



- If possible, assign staff members to accompany residents to stop-over point.
- Request on-call physician/county coroner to confirm conditions.

Continued: Resident Care Officer

**INTERMEDIATE:**

- Contact Material Resource Officer and inform of equipment/supply needs.
- Keep Command Post informed of triage area status.
- Work with Resident Tracking / Discharge / Tracking Officer to ensure discharge destination is recorded. Designate those who are to be discharged to family.
- Contact Security Officer with any security needs.
- Maintain awareness of all resident care capabilities. Constantly assess this need.
- Inventory drug supply. Provide continual update of this inventory.
- Contact physicians to initiate “drug holiday,” as appropriate.
- Assess damage of biomedical equipment. Work with Materials Management Officer to repair/replace necessary items.
- Obtain assistance from Transportation Officer for transporting the deceased.
- Maintain a master list of deceased residents. Give a copy of this list to the Resident Tracking / Discharge / Information Officer.
- Ensure all deceased are covered, tagged, and identified, if possible.

**EXTENDED:**

- Keep Command Post informed of the number of deceased.
- Arrange for frequent rest and recovery periods, as well as relief for staff.
- Refer families of residents to Staff Support Officer to emotional support.
- Observe all staff, volunteers and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**RESIDENT TRACKING / DISCHARGE / INFORMATION OFFICER**  
(Social Worker)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Resident Care Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

- To ensure information (hard and soft copies) preservation of resident data.
- To maintain the location of residents at all times within the facility's resident care system.
- To provide information to visitors and families regarding status and location of residents.
- To coordinate the controlled discharge of residents received from all areas of the facility.
- Facilitate the discharge process by assuring adequate staff and supplies in the discharge area.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Obtain resident census from Admitting personnel.
- Establish an area near the Incident Command Post to track resident arrivals, location and disposition. Obtain sufficient assistance to document current and accurate resident information.
- Ensure disaster tags are utilized and assign a disaster tag to each resident.
- Request staffing/supply needs from the Staff Pool and Materials Supply Officer.
- Ensure the security and prevent the loss of medical record hard copies.

**INTERMEDIATE:**

- Meet with Public Information Officer and Liaison Officer on a routine basis to update and exchange resident information and census data.
- Ensure that a copy of resident chart is sent with resident.
- Direct resident related news release through the Public Information Officer.

- Receive and screen requests about the status of individual residents. Obtain appropriate information and relay this to the appropriate requested party.

Continued: Resident Tracking / Discharge / Information Officer

- Request involvement of Admissions and Medical Records in appropriate resident disposition.
- Ensure all residents discharged are tracked and documented regarding their disposition. Ensure a copy of the resident chart is sent with resident transfers. If copy service is not available, record chart number and destination for future retrieval.
- Provide for resident discharge services in the Morgue area.
- Report frequently and routinely to the Resident Care Officer.

**EXTENDED:**

- Maintain log to document the location and time of all residents cared for.
- Observe all staff, volunteers and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Ensure discharge paperwork is complete.
- Review and approve the recordings of actions/decisions in the Discharge area. Send copy to the Command Post Documentation Recorder.
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_



**PUBLIC INFORMATION OFFICER (P.I.O.)**  
(Administration)

<i>Position Assigned to:</i> _____	
<i>You Report To: Incident Manager</i>	
<i>Staging Area Location:</i> _____	<i>Telephone:</i> _____

**GOAL:**

To provide information to the news media.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Identify restrictions in contents of news release from Incident Commander.
- Establish a “Public Information Area” away from the Command Post and resident care activity.
- Establish a “Responsible Party (Family) Area.” Unless modified, this area will be:
  - News Media: This location will be decided at the time of the incident by the Incident Manager (possibly Social Work Office).
  - Responsible Party / Families: In PT/OT. If the inside of the building is not useable, meet with the families at the stop-over site.

**INTERMEDIATE:**

- Ensure that all news releases have the approval of the Incident Commander.
- Issue an initial incident information report to the news media.
- Inform on-site media of the physical areas which they have access to, and those which are restricted. Coordinate with Safety and Security Officer.
- Contact other at-scene agencies to coordinate released information with respective P.I.O.s. Inform Liaison Officer of action.

**EXTENDED:**

- Obtain progress reports from Department Supervisors, as appropriate.

- Post general notices to keep staff updated on the disaster situation.
- Notify media about casualty status.

Continued: Public Information Officer (P.I.O.)

- Direct calls from those who wish to volunteer to Volunteer Coordinator.  
Contact the Volunteer Coordinator to determine request to be made to the public, via the media.
- Observe all staff, volunteers and residents for signs and symptoms of stress.  
Report concerns to the Staff Support Officer.
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**SAFETY / SECURITY OFFICER**  
(Maintenance)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Operations/Planning Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To monitor and have authority over the safety of rescue operations and hazardous conditions. To work closely with responding Emergency Agencies to ensure safety on site. To organize and enforce scene/facility protection, traffic flow, and security.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Ensure unsafe areas are secured and clearly marked.
- Provide fire watch rounds if the disaster has disabled the fire protection system.
- Ensure exit paths are kept clear.
- Monitor for and remove clutter, trip hazards, etc.
- Ensure areas with emergency equipment are not blocked/inaccessible.
- Advise Security and Command Post of any unsafe/hazardous conditions.
- Assist nursing staff with triage, if needed.
- Ensure staff and volunteers are wearing proper identification.
- Secure all exits/entrances of the building.
- Ensure that staff and volunteers have reported/logged in.
- Establish Emergency Vehicle Entry/Exit routes in cooperation with responding Emergency Agencies.
- Remove unauthorized persons from restricted areas.

**INTERMEDIATE:**

- Provide regular updates/reports to Command Post.
- Monitor staff and volunteers health (ex: hypo/hyperthermia, dehydration, etc.)

- Monitor closely any staff or volunteers with special needs (ex: cardiac conditions, diabetes, etc.)
- Ensure staff and volunteers take needed breaks.

Continued: Safety/Security Officer

- Monitor families of staff (if on site) to ensure their health and safety.
- Ensure copies of incident reports are given to the Command Post.
- Assist Social Workers and Staff Support Officer in providing support for injured/deceased staff members and/or their families.
- Monitor staff, volunteers, and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Secure the Command Post, triage, media, resident care, morgue, and other sensitive/strategic areas from unauthorized entry.
- Assist with two-way radio communications, if needed.
- Act to prevent/resolve hostile interpersonal interactions due to the stress of the situation.

**EXTENDED:**

- Work with C.F.O., Human Resources to process Workers Compensation Claims.
- Provide follow-up care, documentation, and tracking of staff and volunteers relating to injuries obtained during the disaster.
- Assist Social Services, Spiritual Services, and Staff Support Officer to provide or direct access to post disaster debriefing.
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_



**STAFF SUPPORT OFFICER**  
(Activities)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Finance Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To organize, direct, and supervise those services associated with the social and psychological needs of staff. Provide psychological, spiritual, and emotional support to staff, residents, families, and volunteers. Initiate and organize Critical Stress Debriefing process.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Anticipate staff needs as they relate to specific disaster.
- Establish a staff eating area.
- Establish a staff rest area in a low traffic area.
- Establish team composed of staff, clergy and other Mental Health Professionals to support the psycho-social needs of the staff, residents and volunteers.
- Establish an area where counseling can take place.
- Arrange for clergy to provide spiritual support as needed and requested.
- Advise Psychological Support Team members to document all contacts, actions, decisions and interventions.

**INTERMEDIATE:**

- Provide an area for post-disaster information updates/bulletins for staff. Establish a staff information area.
- Work with Employee Time / Staff Pool Officer to coordinate staff schedules.
- Work with Nutrition Services to provide staff meals.
- Work with Command Post and Nursing to provide sleeping area and schedule.
- Create sleeping/eating/living area for staff and families, if needed.

- Assist with any family members of staff who are on-site.
- Assist staff with logistical and personal concerns.

Continued: Staff Support Officer

- Document all actions, decisions, and interventions. Give a copy to the Command Post Documentation Recorder.
- Check with Employee Health Nurse to assess tetanus vaccination need for employees.
- Work closely with Social Work and Nursing to support family members of residents who may be injured or dying.

**EXTENDED:**

- Provide Command Post with regular updates.
- Work with Volunteer Coordinator to provide services for volunteers.
- Observe all staff, volunteers, and staff families for signs and symptoms of stress.
- Assist family members of residents with funeral assistance and grief processing.
- Schedule and post the times and dates for critical stress debriefing sessions during and after the incident.

- Other concerns:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



**TRANSPORTATION OFFICER**  
(Business Offices, Activities)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Operations/Planning Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To organize and coordinate the transportation of all casualties, ambulatory and nonambulatory. Arrange for the transportation of human and material resources to and from the facility.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Assess transportation requirements and needs for residents, personnel, and materials.
- Establish ambulance loading area with assistance of nursing.
- Assemble wheelchairs to be used to transport residents throughout the building.
- Ensure two-way radios and extra batteries accompany staff to the stop-over point.

**INTERMEDIATE:**

- Provide for the transportation/shipment of resources in/out of facility.
- Identify transportation needs for ambulatory casualties.
- Ensure all non-emergency personnel providing resident transport have a valid drivers license. Check with institution's policy/insurance to identify properly covered drivers per insurance policy.

**EXTENDED:**

- Secure transport for discharged residents.
- Assist Resident Tracking / Discharge / Information Officer in tracking/recording final destinations of residents.
- Assist in transporting staff to/from facility as directed by the Command Post.
- Provide updates to Command Post on regular basis.

Continued: Transportation Officer

- Keep track of mileage and fuel receipts. Report this to Financial Officer.
- Observe staff, volunteers and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

**TRIAGE UNIT LEADER**  
(Nursing, Social Worker)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Resident Care Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To sort casualties according to priority of injuries, and assure their disposition to the proper area.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Establish resident triage area; consult with Transportation Officer to designate the ambulance loading area.
- Ensure sufficient transport equipment and personnel for triage area.
- Assess triage-treatment needs relative to specific incident.
- Assign triage teams.

**INTERMEDIATE:**

- Identify locations of Morgue area.
- Inform Safety/Security Officer of security and traffic flow needs in the triage area.

**EXTENDED:**

- Report emergency care equipment needs to Materials Supply Officer.
- Ensure that the disaster plan and admission forms are utilized. Request documentation/clerical personnel from Staff Pool if necessary.
- Keep Command Post apprized of status, number of injured in the triage area or expected to arrive there.
- Observe staff and residents for signs and symptoms of stress. Report concerns to the Staff Support Officer.
- Review and approve the area documenter's recordings of actions/decisions in the triage area. Send copy to the Command Post Documentation Recorder.

Continued: Triage Unit Leader

- Other concerns:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**VOLUNTEER COORDINATOR**  
(Business Office, Social Worker)

*Position Assigned to:* \_\_\_\_\_

*You Report To: Employee Time / Staff Pool Officer*

*Staging Area Location:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

**GOAL:**

To collect and inventory available volunteers at a central point. Receive requests and assign available volunteers as needed. Assist in the maintenance of volunteer morale.

**IMMEDIATE:**

- Report to the Command Post for initial briefing.
- Read this entire Job Action Sheet.
- Wear identification.
- Establish Volunteer Pool area. (May be in same area as Staff Pool, if feasible).
- Work closely with Employee Time / Staff Pool Officer to determine placement of volunteers.
- Work with Security to remind volunteers to wear identification.
- Check credentials of arriving volunteers.

**INTERMEDIATE:**

- Maintain a log of volunteer assignments and hours. Give a copy to the Command Post Documentation Recorder.
- Work with Financial Officer to determine insurance coverage of volunteers.
- Work with Staff Support Officer to provide nutritional support and sleep/rest for volunteers.

**EXTENDED:**

- Provide for volunteer rest periods and relief.
- Assign volunteers to assist with care of staff and residents' families who are on-site.
- Assign volunteers to assist Activity Department to provide activities as normal as possible for residents.



Continued: Volunteer Coordinator

- Observe all volunteers for signs and symptoms of stress. Report concerns to the Staff Support Officer.
  
- Other concerns:
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_

#	Employee/ Volunteer	Address (Print)	Signature	Driver's License #	PROF/ TECH License #	Specialty Skills	Employer Address	Time IN	Time OUT	Security Follow-up

Certifying Officer: \_\_\_\_\_

Date / Time: \_\_\_\_\_

## **Appendix 1**

Hazard Vulnerability Assessment and NFPA 99 Risk Assessment

## **Appendix 2**

Pandemic/Covid-19 Emergency Preparedness Plan

## **Appendix 2a**

PPE 60 Day Supply Inventory.

## **Appendix 3**

Transfer Assistance Levels (TALs)

## Appendix 4

### Revisions

<b>Date</b>	<b>Revision</b>	<b>Revised by</b>
6/25/18	Updated vendor after hour contact information	Sean Edick
6/25/18	Verified St Johns Church as stop-over point	Sean Edick
9/5/18	Removed Rome Catholic as stop-over point Updated TALs	Sean Edick/Mark Smith
10/21/18	Updated TALs	Sean Edick/Emily Delaura
11/14/19	Updated TALs	Sean Edick/Emily Delaura
12/12/19	Updated TALs	Sean Edick/Emily Delaura
2/6/19	Updated TALs	Sean Edick/Emily Delaura
4/17/19	Updated TALs	Sean Edick/Emily Delaura
5/13/19	Updated Fire Procedures	Sean Edick

6/19/19	Updated TALs	Sean Edick/Emily Delaura
8/22/19	Updated Staff Phone Numbers Updated TALs	Sean Edick Sean Edick/Emily Delaura
10/28/19	Updated Staff Phone Numbers Reviewed NFPA 99 Risk Assessment Reviewed Hazard Vulnerability Analysis Updated TALs	Sean Edick/Emily Delaura
12/9/19	Updated TALs	Sean Edick/Emily Delaura
7/15/20	Added Pandemic/Covid-19 Policy	Sean Edick
8/7/20	Added 60 Day PPE Supply Policy	Sean Edick/Amber Hluska
9/9/20	Updated Hazard Vulnerability Assessment Reviewed NFPA 99 Risk Assessment Reviewed Fire Procedures Updated TALs	Sean Edick/Emily Delaura Sean Edick/Emily Delaura Sean Edick/Emily Delaura Sean Edick/Emily Delaura
3/1/21	Updated IT System Failure	Sean Edick
12/08/21	Updated Management Staff Phone Numbers Updated Hazard Vulnerability Assessment Reviewed NFPA 99 Risk Assessment Reviewed Fire Procedures Reviewed Pandemic/Covid-19 Emergency Preparedness Plan Reviewed 60 Day PPE Supply Policy	Sean Edick Sean Edick Sean Edick Sean Edick Sean Edick Sean Edick



