

**Medical Respite Program
Emergency Preparedness and Disaster Response
Policy and Procedures**

Adopted:

Last Reviewed:

Last Revised:

PURPOSE

The purpose of this Emergency Preparedness and Disaster Response Policy (the “Policy”) is to ensure that the Medical Respite Program (hereinafter “Facility”) is prepared for all hazards, which requires or may require action by the Facility and emergency service personnel to prevent or minimize loss of life or damage to property and/or the environment, recipients, visitors and staff while they are at the Facility.

POLICY

The Facility shall maintain a current Emergency Preparedness Plan (the “Emergency Plan”) that can be activated in the event of an emergency. All staff shall be trained on the Emergency Plan.

In all cases, the Facility shall document in the relevant staff member’s record that the staff member has been trained on the Policy and the Emergency Plan upon commencement of the staff member’s employment or engagement and annually thereafter.

All Facility staff shall be knowledgeable regarding their respective responsibilities under the Emergency Plan. Facility personnel are expected to understand and act on their responsibilities when an emergency occurs.

The Facility shall develop operational workflows for a variety of emergencies that may occur.

EMERGENCY PREPAREDNESS PLAN

Adopted:

Last Reviewed:

Last Revised:

Objectives

- To identify the chain of command/incident command system.
- To identify primary and alternative command centers.
- To allow for the timely identification of recipients who are affected in an emergency.
- To be readily available to assist emergency responder personnel in providing first aid.
- To coordinate Facility staff members with respect to recipient care and evaluation.
- To identify staff roles and responsibilities.

Emergency Preparedness Plan (“Emergency Plan”)

A. Planning. The Facility shall engage in the following planning activities to ensure that it is prepared for activation of the Emergency Plan.

1. Administration.

- i. The Facility will keep and maintain a current list of contact information for staff, staff family members, vendors, emergency services, hospitals and other appropriate community resources.
- ii. The Administrator will ensure the existence of an incident command system and team to respond to emergency situations.
- iii. The Facility shall participate in and document evidence of community planning efforts.

2. Recipient Planning.

- i. Upon a recipient’s admission to the Facility, the Facility will determine whether it can safely meet the physical needs of the recipient, including consideration of the Emergency Plan. The Facility will consider the recipient’s transportation needs; visual and hearing impairments; levels of cognition and acuity; and ability to climb or descend stairs.

- ii. As part of the admission process, a staff member will obtain a list of contact numbers from the recipient and discuss emergency planning options with the recipient. All information, including the recipient's address, phone number, and any other information that may be critical to first responders, will be kept in the recipient's records in both paper and electronic formats in a location where they can be easily retrieved during an emergency.
- iii. Any recipients requiring power for life-support or other medical equipment will be registered with the local utility companies and with local emergency offices. The Medical Respite Program must document and confirm that it has the relevant back-up batteries necessary to operate life-support or other medical equipment during an emergency.
- iv. A list of services, including medical supplies, needed by the recipient to remain safe in the event of an emergency will be maintained in the recipient's records.
- v. A list of all recipients and their needs for assistance during an evacuation will be maintained in a location that is easy to access by staff or emergency personnel during an emergency, see Appendix B.

B. Assignment Sheet. When the Emergency Plan is activated in accordance with this Policy, the following team members (collectively, the "Disaster Response Team") shall assume the following responsibilities and fulfill the duties associated with their assigned responsibilities.

Position	Responsibilities	Assigned To
Incident Commander	Establish/maintain command	Administrator
Security Officer	Anticipate, detect and correct unsafe situations	
Logistics Team	Acquire and maintain facilities, staff, equipment and materials	
Staff Members	Collect recipient status information during the emergency	

C. Authority to Activate and Deactivate the Emergency Plan. The Administrator, who serves as the incident commander, shall have the authority to activate and deactivate this Emergency Plan based on information known to them at the time. If the Administrator is not available, the [staff title] _____ will have the authority to activate the Emergency Plan. The

goal of the activation/deactivation plan is to allow smooth transition of recipient services and ensure continuity of care for all recipients served by the Facility.

Incident Command Center. Unless the emergency renders the Facility unusable or unsafe, the Incident Command Center will be located at *[insert address or floor]* _____.
_____ The alternative site will be at *[insert address or floor]* _____.

D. Plan Activation.

1. Emergency Planning. If the Facility has knowledge of an impending emergency (e.g., weather-related events), the Administrator shall convene the Disaster Response Team for planning purposes and advise relevant staff on their roles and Facility plans should the emergency occur.
2. Emergency Call-Down Procedure. Once the Emergency Plan is activated, the Administrator will notify the *[staff title]* _____ to initiate the staff call-down procedure, in accordance with the Calling List. The Calling List is appended to this Emergency Plan as Exhibit A. In short, it proceeds as follows:

[staff title] _____ will notify *[staff title]* _____, and then each will notify persons listed below them on the Calling List. If they are unable to reach a staff member by phone or text, they will proceed to the next listed person on the Calling List. *[staff title]* _____ and *[staff title]* _____ will call all staff members and list the staff available to assist in implementing the Emergency Plan. Every five (5) minutes, *[staff title]* _____ will try those employees who were not contacted on the first call attempt and notify the Logistics Team of any other employees found to be available.

E. Assignments. The Facility will maintain 24/7 staffing adequate to effectively implement the Emergency Plan in the event of an emergency. The Logistics Team is authorized to assign staff to specific tasks. The Logistics Team will work with staff members to pinpoint recipients affected by the emergency and assign clinical staff members to check on those recipients. After calls have been made to alert staff about the possible emergency, staff members will wait for a call with their assignment should the emergency commence. Staff Members will maintain a list of personnel who are available to assist with emergency assessments, if required for recipients to relocate.

F. Staff Members. Each month, all staff will get an updated copy of the emergency list and keep it in their homes for reference should an emergency occur after hours or if the Facility is damaged or destroyed. If the Administrator gets a call asking for assistance with an emergency, they will call the *[staff title]* _____, who will call the Staff Members tasked with

collecting recipient information in the event of an emergency. Immediate tasks for Staff Members will be:

1. Determine the area involved and those recipients affected by the emergency.
2. Create an assignment list.
3. While the scope of the emergency is being assessed, [staff title] _____ will make calls to nursing homes, residential care facilities and shelters to determine the number of rooms that will be available for temporary placement of displaced recipients and to local authorities to determine shelter options and locations.
4. Assign recipients who need emergency assessments to available staff.
5. Make calls to prearrange transportation for recipients in need of evacuation should the emergency take place.

G. Security. The Security Officer will assess the security of the command center, the safety of and conditions for staff travel to the command center, and where to relocate the command center if necessary, arranging transportation and/or safety escorts as needed. The Security Officer will also ensure all staff have necessary identifying badges and/or uniforms, which will allow them access to the Facility.

H. Communications. All internal and external communications shall be made in accordance with the following procedures. During an emergency, all incoming and outgoing requests for information shall be routed through the Logistics Team.

1. Internal Communications. The Facility shall maintain an updated contact list of all staff, which shall be supplied to all supervisory personnel and posted on the [Facility's intranet, Google Drive, etc.] _____. This list will be updated on a monthly basis by the Logistics Team.
2. External Communications. The Facility shall keep an up-to-date communications directory in both electronic and hard copies that contain the contact information of all potentially needed response partners, including health care facilities/agencies; local, state and federal governments; emergency services; and local resources. The Facility shall subscribe to local emergency notification services, including NY Alert.
3. Public Information. The Logistics Team will confer with the Administrator and other members of the Disaster Response Team to reach a joint decision regarding the information, if any, to be released to the media.

I. Emergency Supplies Storage Area. An emergency supplies storage area will be maintained at the Facility for staff and recipients for use in the event of an emergency. Supplies will be maintained by the Logistics Team.

J. Emergency Assessments. If a recipient resides in the Facility and needs to be discharged to another location or shelter, staff will adhere to the following procedures:

1. If the recipient is unharmed, but the Facility is damaged or unsafe, and the telephone system is working, phone emergency contacts and make arrangements for the recipient's transportation. Collect all necessary medications and records of the recipient. Keep track of where the recipient is going and all necessary telephone numbers. If other arrangements cannot be made, contact the Logistics Team for arrangements to be made through the county emergency planners.
2. If the recipient is injured and needs transport, contact the Logistics Team for arrangements to be made through the county emergency planners for transport to a hospital/emergency room/triage site, depending on need as determined by the county emergency planners. Staff must have a complete list of the recipient's needs when notifying the Logistics Team.
3. The official personnel who are at the site (police, ambulance personnel, etc.) have had training in handling emergencies, as well as potentially hazardous situations. If they tell staff not to go to a certain area, staff must follow their instruction. In the event of damaged, blocked or impassable roads, staff will take alternative routes or notify the Administrator of their inability to reach an area.
4. Notify the emergency contact(s) of recipients as to where their loved ones are housed as soon as practicable.

K. Evacuation.

1. The Administrator will be responsible for implementing the evacuation procedure.
2. Transportation will be arranged by Staff Members, in coordination with the Logistics Team.
3. All records, medication and other necessary supplies for the recipient to remain safe will be provided to the recipient to be taken with them in an evacuation.
4. A Staff Member will be assigned to each recipient being transported and, if feasible, will remain with the recipient until the recipient reaches their destination.
5. The Administrator will be responsible for authorizing re-entry into the Facility.
6. If the building was seriously damaged, the Administrator will obtain permission from the county, building and fire inspectors to re-enter the Facility.

7. Recipients and Staff Members will return to the Facility, if feasible, in the same manner in which they evacuated the Facility, using the same procedures as used in the evacuation process.

L. Procedure for Staff.

1. When Staff Are at Home. After receiving notification of an emergency, direct care staff shall receive and comply with the following directives:
 - i. Do not leave home until an assignment is received.
 - ii. Do not ask questions when called. This will only slow the rate of calling and response time to the emergency.
 - iii. When an assignment is received, all the necessary information about the emergency and those affected will be provided.
 - iv. Wear your ID badge so you can be easily recognized by other cooperating agencies.
 - v. Stay off the phone so a second call can come through uninterrupted. If phone lines are down, communications will be made via [email, messenger, etc.] _____.
 - vi. If there is no power or phone lines, open the emergency kit provided by the Facility, which includes a battery-operated radio and bus/subway tokens, and meet at the prearranged meeting area.
2. When Direct Care Staff Are Away From Home. If a direct care worker is away from home when an emergency happens, the worker shall comply with the following:
 - i. Call the Facility to let the Staff Members know whether they are available to help. If available, an assignment is given at that time.
 - ii. If there are no working telephones, the direct care worker should email the Logistics Team. If neither the phones nor the internet is working, then if possible, come to the Facility for assignment. A Staff Member will be at each location.
3. When an Emergency Occurs During Working Hours. If an emergency occurs during working hours, direct care workers shall comply with the following:
 - i. Report for assignment of emergency recipients, and provide a list of those recipients they have not yet seen to the appropriate Staff Member. A decision will be made by the

appropriate Staff Member as to whether the direct care worker will be assigned to help with the emergency assessments, be assigned to continue their regular assignments or assume responsibility for other Staff Members who are assigned to work on the emergency assessments. Personnel who have had first aid training will be among the first assigned to emergency assessments.

M. Staff Phone Tree.

Role/Title	Name	Home #	Cell #	Email
Administrator				
Security Officer				
Logistics Team (Lead)				
Staff Members (Lead)				

N. Emergency Contacts.

Organization Type	Name	Phone #	Cell #	Email
Fire				
EMS				
Emergency Office				
Hazmat				
Terrorism Tip Line				
Hospital				
Regional Resource Center				
County Highway Department				
NYS				

Department of Health				
County Department of Health				

O. Deactivation. Once the emergency response plan is deactivated by the Administrator, they will notify the [staff title] _____ to initiate the staff call-down procedure and step-down procedure to normal operations. The [staff title] _____ will provide critical personnel an operational plan for the return to normal operations, including to the following steps:

1. Notifying staff the Emergency Plan is deactivated.
2. Notifying recipients that they can return to the Facility or providing other instructions.
3. Completing any necessary documentation, including damage reports.
4. Assessing whether supplies need to be re-ordered.
5. Evaluating Facility's response.

P. Contracts with Managed Care Plans or Social Care Networks. All contracts with managed care plans or social care networks shall set forth the Facility's responsibilities in the event of an emergency.

Q. Drills and Review of Emergency Plan.

1. Review. The Facility shall review the Emergency Plan no less than quarterly and update the Emergency Plan based on the results of evaluations and drills conducted by the Facility. After the Emergency Plan has been activated and deactivated, all staff having assigned roles in the activation process shall meet to debrief the effectiveness and learnings from the emergency and make any necessary revisions to the Emergency Plan.
2. Drills. All Facility personnel will participate in an annual desktop drill to determine the effectiveness and efficiency of the current Policy and any forms developed for use in the event of an emergency and/or disaster.

