Section IV: Emergency Response

1. Emergency Management Codes

______________________________ (facility name) has designated the following codes to be utilized to notify the employees of the various crises or disaster situations that may impact the facility. All employees will be trained to the following color designations and applicable emergency procedures that are found later in this section.

- **Code Red:** Fire Emergency
- **Code Pink:** Missing Resident
- **Code Green:** Tornado/Severe Weather/Natural Disaster
- **Code Black:** Utility Outage
- **Code Orange:** Hazardous Material/Waste Spill/Release
- **Code Gray:** Workplace Violence or Threat of Violence
- **Code Brown:** Nuclear Power
- **Code Yellow:** Suspicious Package/Bomb Threat
- **Code Blue:** Medical Emergencies
- **Code Purple:** Epidemic/Pandemic Episode
- **Code White:** Terrorist Attack

2. Emergency Response Guideline/Plan Activation

Any staff member of _________________________________ (facility name) aware of a crisis or disaster situation should notify the Administrator and/or his or her immediate supervisor.

In the event of a crisis or disaster situation (or notification of the potential for one), the most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. __________________________ (facility name) will ensure staff members are trained to the Incident Command System and designate individuals throughout the facility.

The Incident Commander, in conjunction with the Administrator if the Administrator does not function as the Incident Commander, should have the responsibility to declare a situation a disaster and to activate the **All Hazards Emergency Plan**.

1. The proper Code will be paged to bring leadership staff to the predesignated Incident Command Post and alert the facility of a disaster status. All other staff should remain in their assigned areas to begin implementation of related emergency procedures, and then report to the Incident Command Post as called. If staff members are called in from home to respond to the emergency, they should do so after rendering their families safe and reporting to the facility in a safe manner.

2. Activate the appropriate parts of the plan, based on the type of disaster that has occurred.

3. Notify the following as needed:
   a. Emergency Management Services
      i. Fire
      ii. Police
      iii. Ambulance
b. Executive Director, Administrator, Assistant Administrator, Director of Nursing

c. Director of Maintenance/Environmental Services

d. Other key individuals within the organization, Ownership, and Corporate

f. Insurance Agent, if applicable

4. Guidance provided in the plan for the specific crisis or disaster situation should be followed.

3. **National Incident Management System (NIMS) and Incident Command System (ICS)**

_(facility name)_ should utilize elements of the National Incident Management System (NIMS) and Incident Command System (ICS) in crisis and disaster situations to help manage the events in an organized and efficient manner.

While long term care facilities are not required to implement this approach, _ (facility name)_ has made the decision to utilize elements of the Incident Command System to handle emergencies.

**National Incident Management System & Incident Command System**

In Homeland Security Presidential Directive-5 (HSPD-5), the President of the United States ordered the Department of Homeland Security to institute a national incident management system to provide a comprehensive and nationwide approach for federal, state, tribal, and local governments “to align command, control, organization structure, terminology, communication protocols, resources, and resource-typing for synchronization of response efforts at all echelons of government.” This has been accomplished. While it is required for federal, state, tribal, and local governments to use the Incident Command System (ICS) in a nationally declared emergency, there is a great benefit of ensuring more rapid external response and consistency when all agencies, including healthcare facilities, incorporate and support this system.

**Incident Command System (ICS) is:**

- A proven management system based on successful business practices
- The result of decades of lessons learned in the organization and management of emergency incidents

This system represents organizational “best practices,” and as a component of the National Incident Management System (NIMS), has become the standard for incident management across the country.

**NIMS Components:** Each facility should have a basic understanding of NIMS including the following key components:

**Command and Management:** NIMS standard incident command structures are based on three key organizational systems:

- The Incident Command System (ICS)
- Multi-Agency Coordination System (MACS)
- Public Information Systems
**Preparedness:** The range of deliberate, critical tasks and activities necessary to build, sustain, and improve the operational capability to prevent, protect against, respond to, and recover from domestic incidents. Preparedness is a continuous process. Preparedness involves efforts at all levels of government and between government and private sector and nongovernmental organizations to identify threats, determine vulnerabilities, and identify required resources. Within the NIMS, preparedness is operationally focused on establishing guidelines, protocols, and standards for planning, training and exercises, personnel qualification and certification, equipment certification, and publication management.

**Resource Management:** Efficient incident management requires a system for identifying available resources at all jurisdictional levels to enable timely and unimpeded access to resources needed to prepare for, respond to, or recover from an incident. Resource management under the NIMS includes mutual-aid agreements; the use of special federal, state, local, and tribal teams; and resource mobilization protocols.

**Communications and Information Management:** NIMS requires incident management organizations to ensure that effective interoperable communications and information management processes, procedures, and systems exist to support a wide variety of incident management activities across agencies and jurisdictions.

**Incident:** An incident is an occurrence, either caused by humans or natural phenomena, that requires response actions to prevent or minimize loss of life or damage to property and/or the environment.

ICS is interdisciplinary and organizationally flexible to meet the following management challenges:

- Meet the needs of incidents of any kind or size
- Allow personnel from a variety of agencies to meld rapidly into a common management structure
- Provide logistical and administrative support to operational staff
- Be cost effective by avoiding duplication of efforts

ICS consists of procedures for controlling personnel, facilities, equipment, and communications. It is a system designed to be used or applied from the time an incident occurs until the requirement for management and operations no longer exists.

The ICS structure is unique but easy to understand. There is no correlation between the ICS structure and the administrative structure of any single facility or organization. This is deliberate, because confusion over different position titles and organizational structures has been a significant stumbling block to effective incident management in the past. For example, someone who serves as a Department Head every day may not hold that level or area of responsibility when deployed under an ICS structure.

The ICS is a management system used to organize emergency response to a crisis or disaster situation within the facility as well as a system used by emergency responders across the county. ICS offers a scalable response to an emergency (incident) of any magnitude, and provides a common framework within which people can work together. These people (resources) may be drawn from multiple agencies that do not routinely work together. The system is designed to grow and shrink along with the incident, allowing more resources to be smoothly added into the system when needed and released when no longer needed. This is achieved because, in essence, ICS is a special case of “role playing.” Authorities and responsibilities are inherent in roles (positions); individuals are assigned more or less temporarily to those roles, and can be reassigned, replaced, or released as needed. This key aspect of ICS helps to reduce or eliminate the “who’s in charge” problem.
There are five major management functions that are the foundation upon which the ICS organization develops. These functions apply whether you are handling a routine emergency, organizing for a major non-emergency event, or managing a response to a major disaster.

- Incident Command
- Finance/Administration
- Logistics
- Operations
- Planning

The major management positions always apply and are always filled, no matter the size of the incident, and represent five sections of staff: Command, plus Finance/Administration, Logistics, Operations, and Planning. (These four are sometimes remembered as FLOP.) Three other Incident Command positions are Information Officer, Safety Officer, and Liaison Officer. The staff positions can be performed by the same person or by multiple people.

**Command** — The facility’s Incident Commander is the single person in charge of the incident at the facility and initially fills all five command staff positions. As the incident grows the tasks covered by other sections can be delegated, and those new positions take the title of Section Leader. The Incident Commander is responsible for all activity on the incident as well as creating the overall incident objectives.

**Finance/Administration** — The facility’s Finance Leader is tasked with tracking incident related costs, personnel records, requisitions, and administrating procurement contracts required by Logistics, including:

- Contract negotiation and monitoring
- Timekeeping
- Cost analysis
- Compensation for injury or damage to property

**Logistics** — The facility’s Logistics Leader is tasked with providing all resources, services, and support required by the incident, including:

- Ordering, obtaining, and maintaining essential personnel, equipment, and supplies
- Providing communication planning and resources
- Setting up food services
- Setting up and maintaining incident facilities
- Providing transportation
- Providing medical services to incident personnel

**Operations** — The facility’s Operations Leader is tasked with directing all actions to meet the incident objectives.
Planning — The facility’s Planning Leader is tasked with the collection and display of incident information, primarily consisting of the status of all resources and overall status of the incident, including:

- Collecting, evaluating, and displaying intelligence and information about the incident
- Preparing and documenting Incident Action Plans
- Conducting long-range and/or contingency planning
- Developing plans for demobilization
- Maintaining incident documentation
- Tracking resources assigned to the incident

Public Information Officer serves as the conduit for information to internal and external stakeholders, including the media or other organizations seeking information directly from the incident or event.

Safety Officer monitors safety conditions and develops measures for assuring the safety of all assigned personnel.

Liaison Officer serves as the primary contact for supporting agencies assisting at an incident.

In accordance with available staff at the time of the crisis or disaster situation, it is essential to establish an incident commander and designate tasks in accordance with this model or as specific needs dictate.

Expansion of an incident may require the delegation of authority for the performance of the other management functions.

As an incident grows, the Incident Commander may delegate authority for performance of certain activities to the Command Staff and the General Staff. The Incident Commander will add positions only as needed.

Facility Action Cards are found in Appendix U, which are to be utilized as “cheat sheets” for the designated ICS positions. Additional Facility Action Cards are also available for Plan Activation as well as other Emergency Procedures.

Chain of Command: The “Chain of Command” is an essential part of controlling incidents, regardless of size and magnitude. Every person participating in the incident has a designated supervisor. There is a clear line of authority within the incident command organization, and all lower levels connect to higher levels, eventually leading solely back to the Incident Commander.
The principles clarify reporting relationships and eliminate the confusion caused by multiple, conflicting directives. Incident managers at all levels must be able to control the actions of all personnel under their supervision. These principles do not apply to the exchange of information. Although orders must flow through the chain of command, members of the organization may directly communicate with each other to ask for or share information.

The command function may be carried out in two ways:

- As a Single Command in which the Incident Commander will have complete responsibility for incident management. A Single Command may be simple, involving an Incident Commander and single resources, or it may be a complex organizational structure with an Incident Management Team.
- As a Unified Command in which responding agencies and/or jurisdictions with responsibility for the incident share incident management.

A Unified Command may be needed for incidents involving:

- Multiple jurisdictions
- A single jurisdiction with multiple agencies sharing responsibility
- Multiple jurisdictions with multi-agency involvement

During a large-scale crisis or disaster situation, a representative of the facility would likely be involved in a Unified Command structure.

The Chain of Command follows an established organizational structure that adds layers of command as needed. The basic outline of command layers follows:

- Command
- Sections
- Branches
- Divisions/Groups
- Units
- Resources

A role of responsibility can be transferred during an incident for several reasons: As the incident grows, a more qualified person is required to take over as Incident Commander to handle the ever-growing needs of the incident, or in reverse when an incident reduces in size, command can be passed down to a less qualified person (but still qualified to run the now-smaller incident) to free up highly qualified resources for other tasks or incidents. Other reasons to transfer command include jurisdictional change if the incident moves locations or area of responsibility, or normal turnover of personnel due to extended incidents. The transfer of command process always includes a transfer of command briefing, which may be oral, written, or a combination of both.

**Flexibility:** The ICS is an extremely flexible organizational system that ideally reflects only what is required to fill the planned incident objectives. The efficient use of all resources on an incident is a high priority, reducing incident clutter and costs. A single person may be in charge of more than one unit if the span of control for that single person has not yet been exceeded, but in all cases an element of the incident must have a person in charge of that element. Elements of the system that have been expanded but are no longer needed are contracted and the resources released from the incident.

**ICS Key Management Concepts:** Many agencies and organizations modify ICS to fit their needs, yet it is absolutely critical to realize that without the application of the ICS management concepts, ICS becomes ineffective. While the picture of the response organizational tree may look like the ICS, without applying the management concept and principles, the organizational charts and models will resemble the original ICS model in title alone. Furthermore, problems and conflicts experienced...
during some incidents will indicate that fundamental ICS management concepts either are missing or are not functioning as designed. Therefore, to avoid such difficulties, agencies/organizations using an ICS design should incorporate the following basic management concepts:

**Span of Control:** Span-of-control is the most fundamentally important management principle of ICS. It applies to the management of individual responsibilities and response resources. The objective is to limit the number of responsibilities being handled by, and the number of resources reporting directly to, an individual. ICS considers that any single person’s span of control should be between three and seven individuals, with five being ideal. In other words, one manager should have no more than seven people working under him/her at any given time.

When span-of-control problems arise around an individual’s ability to address responsibilities, they can be addressed by expanding the organization in a modular fashion. This can be accomplished in a variety of ways. An Incident Commander can delegate responsibilities to a deputy and/or activate members of the Command Staff. Members of the Command Staff can delegate responsibilities to Assistants, etc.

There may be exceptions, usually in lower-risk assignments or where resources work in close proximity to each other.

**Incident Action Plans:** “Consolidated Incident Action Plans” means that for the specific event, the response is coordinated and managed through one plan of action. The consolidated Incident Action Plan (IAP) can be verbal or written (except for hazardous material incidents, where it has to be written), and is prepared by the Planning Section. The consolidated IAP means that everyone is working in concert toward the same goals set for that operational time period. The purpose of this plan is to provide all incident supervisory personnel with direction for actions to be implemented during the operational period identified in the plan. Incident Action Plans include the measurable strategic operations to be achieved and are prepared around a time frame called an Operational Period. Incident Action Plans provide a coherent means of communicating the overall incident objectives in the context of both operational and support activities. The consolidated IAP is a very important component of the ICS that reduces freelancing and ensures a coordinated response.

At the simplest level, all Incident Action Plans must have four elements:

- What do we want to do?
- Who is responsible for doing it?
- How do we communicate with each other?
- What is the procedure if someone is injured?

**Unity of Command:** Unity of Command means that each individual participating in the operation reports to only one supervisor. This eliminates the potential for individuals to receive conflicting orders from a variety of supervisors, thus increasing accountability, preventing freelancing, improving the flow of information, helping with the coordination of operational efforts, and enhancing operational safety. Unity of Command also means that that all personnel are managed and accounted for.

**Accountability:** Effective accountability during incident operations is required at all levels within the facility. The following guidelines are adhered to:

- **Check-In:** All employees and responders must report in to receive an assignment in accordance with the procedures established by the Incident Commander.
- **Incident Action Plan:** Response operations must be directed and coordinated as outlined in the IAP.
- Unity of Command: Each individual involved in incident operations will be assigned to only one supervisor.
- Span of Control: Supervisors must be able to adequately supervise and control their subordinates, as well as communicate with and manage all resources under their supervision.
- Resource Tracking: Supervisors must record and report resource status changes as they occur.

**Incident Commander**

The most qualified staff member (in regard to the Incident Command System) on duty at the time of the emergency will assume the Incident Commander position until the Administrator or his/her designee arrives at the facility. The Administrator or his/her designee can then assume the role of Incident Commander, if he/she is more or equally qualified.

___ (facility name) should educate leadership to the ICS, so that in the event of an emergency of significant magnitude, other Incident Command positions can be designated as needed. It may not be practical for all positions to be filled due to lack of positions at any given time, so some sections may be covered by the same individual.

(Facility should consider purchasing an Incident Command Vest to wear during an emergency situation. Visit [www.safetygearonline.com](http://www.safetygearonline.com) for further information.)

___ (facility name) should utilize an Incident Management Sheet to document the incident and pertinent details surrounding the disaster. The Incident Management Sheet also lists the employees who assume the ICS functions during the incident. See Appendix V.

**Transfer of Command**

**Transfer of Command** is the process of turning over responsibility from one Incident Commander to another.

There are five steps in effectively assuming command of an incident in progress:

a. The incoming Incident Commander should, if at all possible, personally perform an assessment of the situation with the existing Incident Commander.

b. The incoming Incident Commander must be adequately briefed by the existing Incident Commander face-to-face if at all possible. The briefing should include the following:
   - What has happened thus far
   - Priorities and objectives
   - Current plan
   - Resource assignments
   - Incident organization
   - Resources ordered/needed
   - Facilities established
   - Status of communications
   - Any constraints or limitations
   - Incident potential
   - Delegation of authority

c. The incoming Incident Commander should determine a time for transfer of command after the incident briefing.

d. At the appropriate time, notice of a change in Incident Commander should be made.

e. The incoming Incident Commander may give the previous Incident Commander another assignment, as he/she retains first-hand knowledge of the incident, and would be able to observe the progress of the incident and to gain experience.
The following are detailed procedures addressing various emergency and disaster situations:


R | Rescue | Rescue/Evacuate persons in immediate danger.
A | Alarm | Pull nearest “pull station.” Announce “CODE RED” and fire location over loud speaker. Repeat the announcement.
C | Confine | Confine the fire by closing doors to isolate the fire and smoke.
E | Extinguish | Attempt to extinguish the fire only if the first three parts of the R.A.C.E. Procedure have been completed and the fire appears to be manageable.

Fire/Explosion

A. _______________________________ (facility name) employees should be trained to utilize the R.A.C.E. Procedure and notify the Fire Department of the exact circumstances of the situation.

B. All staff should receive training in the proper use of fire extinguishers. Fire extinguishers are located in every corridor of the facility. The extinguishers, type A, B, or C, can be utilized in any type of fire.

C. Responding to a Fire/Explosion, the following are essential tasks that must be completed during all emergency operations:

DO NOT USE THE ELEVATORS ONCE THE FIRE ALARM HAS SOUNDED!

- Stay calm and reassure residents—do not mention fire
- Evacuation in this plan means moving to a safe Area of Refuge in a fire emergency. This does not necessarily mean emptying the building unless each wing/section is expected to be evacuated beyond fire doors or to the nearest exit
- Keep all smoke/fire doors closed. Limit passage through smoke partitions as much as possible
- Keep all doors closed in resident rooms and functional rooms (storage, pantry, linen, etc.)
- Keep all stairwell doors closed
- Close all windows
- Understand that the sprinkler system (if present) will likely control the fire
- Shut off oxygen or other medical gasses that could contribute to the spread of the fire
- Connect O₂ concentrators to all residents requiring oxygen
- Assist the Fire Department in any way possible
- Understand that even thought the alarms stop ringing, emergency procedures will not be stopped until an “All Clear” is called
Emergency Procedure

FIRE

The following procedure should be utilized in the event of an actual fire, smoke condition, or smell of smoke in the facility.

A. The staff member who discovers a fire or potential fire situation within the building should immediately utilize the R.A.C.E. Procedure:

**DO NOT PANIC**

**RESCUE:** Everyone in immediate danger and move them to a safe location away from the fire.

**ALARM:** Activate the building’s fire alarm system by pulling the nearest manual pull station. Announce “CODE RED” and the fire location over the loudspeaker—repeat.

**CONFINE:** Make every attempt to confine the fire to its room of origin by closing all appropriate doors.

**EXTINGUISH:** Attempt to extinguish the fire ONLY if the above steps have been taken and the size of the fire has not exceeded the capacity of the fire extinguisher. *It is ALL staff members’ responsibility to know the locations of fire extinguishers.*

B. “CODE RED” should be announced overhead with the location of the fire. The word “fire” should be avoided in order to maintain a calm environment for the residents.

C. 911 should be notified to alert the emergency response system that an actual emergency situation is in progress. The caller should provide the 911 dispatcher with as much relevant information as possible.

D. Administrator and Director of Nursing and ________________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated.

E. Activate the ICS to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of fire warrants, then appoint other positions of the ICS structure.

F. Staff will begin evacuation according to the size of the fire and the amount of smoke production. The Incident Commander will give guidance on evacuation type. See evacuation types below:

1. **Phase I:** Evacuate the rooms on either side and directly across from the room that is on fire. Move residents to an area away from the fire. This type of evacuation should be used during the initial stages of a small fire.

2. **Phase II:** Evacuate all residents from the smoke compartment where the fire has occurred to the opposite smoke compartment (through the smoke doors). This type of evacuation should be used when moderate smoke conditions are present or the welfare of the residents is in jeopardy based on the situation.

3. **Phase III:** FIRE DEPARTMENT ORDERED EVACUATION. Evacuate all residents from the building by whatever means possible. This type of evacuation should only be used during a major fire or severe smoke conditions within the building as ordered by the Fire Department.
G. The order of evacuation is:
   1. Ambulatory residents
   2. Residents with assistive devices
   3. Residents in wheelchairs
   4. Bedridden residents

H. A staff member(s) should be assigned to stay with the group(s) to prevent panic and to begin re-entry to dangerous areas.

I. It is essential that all internal emergency operations be coordinated with the Fire Department. The Fire Department will be able to quickly assist in controlling the situation provided that a good line of communication is established between the Incident Commander and the Fire Officer in charge.

J. The situation should be deemed “under control” only after the Fire Department has concluded its emergency operations and the Incident Commander has declared the situation “safe.”

K. An “All Clear” will be paged only after the situation is declared safe by the Fire Department.

L. Account for all staff members and residents.

**Emergency Job Tasks**

*Fire*

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Report to the fire alarm panel and determine the location of the activation.
   b. Report to the area of activation and assess the situation.
   c. Supervise emergency operations (evacuation, fire control, chart removal, etc.).
   d. Upon arrival of the Fire Department, establish contact with the officer in charge and relay all relevant information regarding the situation or designate someone to do so.
   e. Coordinate all emergency operations with the Fire Department.
   f. Ensure all staff members and residents are accounted for and safe.

2. Nursing Staff
   a. Report to the area of fire alarm activation.
   b. Quickly assess the magnitude of the situation.
   c. Initiate Evacuation Procedures.
   d. Close all doors and windows, as residents are evacuated.
   e. Connect O₂ concentrators to all residents requiring oxygen.
   f. Shut off oxygen or other medical gasses that could contribute to the spread of the fire.
   g. Secure medical records.
   h. Perform a complete head count to ensure that all residents are accounted for.
   i. Be prepared to assist where needed at the direction of the Incident Commander and/or Fire Department.

3. Certified Nursing Assistants
   a. Initiate Evacuation Procedures and close all doors and windows of resident rooms.
   b. Be prepared to assist where needed at the direction of the Incident Commander.

4. Director of Nursing
   a. Report to the fire alarm panel and determine the location of the activation.
   b. Report to the area of activation and provide instruction to staff members regarding the location to remove residents, starting with the residents who are closest to the area of the fire.
c. Ensure that all windows and doors are closed.
d. Coordinate operations with the Incident Commander to determine the type of evacuation that will be necessary for the situation.
e. Instruct Certified Nursing Assistants to remain with residents in an attempt to keep them calm and prevent them from returning to the fire area. Perform a complete head count to ensure that all residents are accounted for.

5. Office Staff/Medical Records
   a. Secure all records by storing them in the appropriate metal cabinets.
   b. Close all doors and windows in your work area.
   c. Be prepared to assist where needed at the direction of the Incident Commander.

6. Activity Staff
   a. Report to the area of fire alarm activation, providing that staff are not in the middle of a supervised activity.
   b. If conducting an activity during alarm activation, stay with residents and remain calm.
   c. Relocate all residents from immediate danger.
   d. If available, assist with other emergency operations at the direction of the Incident Commander.

7. Maintenance Personnel
   a. Report to the fire alarm panel and determine the location of the activation.
   b. Immediately respond to the area of activation.
   c. While enroute, retrieve a fire extinguisher that is in the path of response in order to provide additional fire extinguishing capacity at the fire scene.
   d. Ensure that the appropriate Evacuation Procedures are in progress and attempt to control the fire if required.
   e. Once the fire is under control, attempt to de-power the fire area by shutting down circuit breakers for the fire area.
   f. Assist the Fire Department in whatever way required.
   g. NEVER shut down the fire sprinkler system during a fire. The shutting down of the fire sprinkler system must be ordered by the Fire Department.

8. All Other Employees (housekeeping, laundry, dietary, etc.)
   a. Report to the area of fire alarm activation after securing your individual work area and assist with emergency operations per the direction of the Incident Commander.
   b. Secure your individual work area by quickly shutting down all machinery (kitchen equipment, laundry equipment, computers, etc.) and storing all vital papers or currency in a metal container (desk, cabinet, etc.).
   c. When leaving your individual work area, ALWAYS close all doors and windows to help reduce the effects of potential smoke damage.
   d. Do not return to your work area until the situation is under control.
(facility name)

Emergency Procedure

FIRE WATCH

PURPOSE: A plan of action should the fire alarm system fail to work properly to provide continuous facility-wide fire detection and alarm capabilities. A fire alarm system could include but is not limited to: fire alarm panel, smoke or heat detection system, sprinkler system, and fire department notification system. Fire alarm system outages can occur during construction, renovation, electrical storms, or other unplanned events that eliminate part or all of the fire alarm system.

1. Contact the Administrator, Director of Nursing, and Maintenance Director and __________________________ (facility to fill in appropriate titles/positions) when any problems are encountered with the fire alarm system.

2. Contact the fire alarm company if the Maintenance Director (____________________ other responsible position) is unable to correct the problem.

3. Notify the ______________________________________ (Fire Department) at ___________________ (phone number) and Division of Health Service Regulation at ____________________ (phone number) that the fire alarm system is not working correctly, and that procedures are in place until the system is restored.

4. Facility management staff should report to the Incident Command Post for instruction. Activate the ICS to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

5. Fire watch tours will be initiated throughout the facility. Fire watch tours should occur at one-half hour intervals, 24 hours a day.

6. A fire watch tour is a periodic walking tour of the entire facility by one or more assigned and trained staff. The tour monitors the facility through direct observation of all rooms, including resident rooms, mechanical and electrical rooms, kitchen, laundry, etc. for possible signs of fire.

7. Fire watch tours will be documented with findings noting date, time, and staff initials.

8. Fire watch tours should be performed by personnel solely dedicated to the fire watch with no other facility-related activities or events.

9. Maintenance staff should be available on site or on call for equipment emergency shutdown situations.

10. Additional fire extinguishers should be distributed facility-wide and staff should be informed of locations.

11. The Fire Watch should not be terminated until all fire protection equipment has been restored to normal operating condition and upon the authority of the Administrator or designee.
Emergency Job Tasks
Fire Watch

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Determine the problem with the system.
   b. Establish contact with the fire alarm company.
   c. Contact Division of Health Service Regulation to notify of the situation and what actions are being taken to rectify.
   d. Notify the Fire Department.
   e. Determine personnel to conduct fire watch tours and supervise.
   f. Ensure construction or renovation work areas are monitored.
   g. Supervise emergency operations if necessary (evacuation, fire control, chart removal, etc.).

2. Nursing Staff
   a. Remove smoking materials and extension cords from resident rooms.
   b. Ensure ALL SMOKING IS TO OCCUR OUTSIDE with a staff member present.
   c. Ensure all exits are unobstructed.
   d. Ensure fire doors remain closed.
   e. Ensure windows remain closed.
   f. Be prepared to assist where needed at the direction of the Incident Commander.

3. Certified Nursing Assistants
   a. Remove smoking materials and extension cords from resident rooms.
   b. Ensure ALL SMOKING IS TO OCCUR OUTSIDE with a staff member present.
   c. Ensure all exits are unobstructed.
   d. Ensure fire doors remain closed.
   e. Ensure all windows are closed.
   f. Be prepared to assist where needed at the direction of the Incident Commander.

4. Office Staff/Medical Records
   a. Secure all records by storing them in the appropriate metal cabinets.
   b. Close all doors and windows in your work area.
   c. Be prepared to assist where needed at the direction of the Incident Commander.

5. Activity Staff
   a. Remove smoking materials and extension cords from resident rooms.
   b. Ensure ALL SMOKING IS TO OCCUR OUTSIDE with a staff member present.
   c. Ensure all exits are unobstructed.
   d. Ensure fire doors remain closed.
   e. Ensure all windows are closed.
   f. Be prepared to assist where needed at the direction of the Incident Commander.

6. Director of Nursing
   a. Ensure ALL SMOKING IS TO OCCUR OUTSIDE with a staff member present.
   b. Ensure all exits are unobstructed.
   c. Ensure fire doors remain closed.
   d. Ensure all windows are closed.
   e. Be prepared to assist where needed at the direction of the Incident Commander.

7. Maintenance Personnel
   a. Ensure all combustible/flammable items are stored properly and removed from mechanical and electrical rooms.
b. Ensure dryer vents are clean.
c. Ensure Fire Department/EMS access to the facility is clear from snow, ice, etc.
d. Ensure Fire Department access to hydrants, sprinkler connections, standpipes, and fire extinguishers.
e. Ensure exits are unobstructed.
f. Ensure fire doors remain closed.
g. Ensure unnecessary machinery that runs continuously is turned off.
h. Ensure sprinkler valves are open and sealed, gauges indicate normal pressure, and sprinkler heads are unobstructed.
i. Monitor construction or renovation work areas.
j. Be prepared to shut down equipment as necessary.
k. Be prepared to assist where needed at the direction of the Incident Commander.

8. All Other Employees (housekeeping, laundry, dietary, etc.)
   a. Laundry is to remove lint from dryers.
   b. When leaving the individual work area, ALWAYS close all doors and windows.
   c. Ensure exits are unobstructed.
   d. Ensure fire doors remain closed.
   e. Be prepared to assist where needed at the direction of the Incident Commander.
5. Code Pink: Missing Resident

_________________________ (facility name) Emergency Procedure
MISSING RESIDENT

The following procedure should be utilized when a resident is determined to be missing.

A. “Code Pink” will be announced with the resident’s unit

B. Note the time that the resident was discovered to be missing.

C. The staff members assigned to the resident’s unit will report to the nursing station and verify that the resident has not been signed out.

D. Administrator and Director of Nursing _______________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. Activate Recall Roster if necessary.

E. Facility management staff should report to the Incident Command Post for a briefing and instruction.

F. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

G. A thorough search should be initiated by staff members to locate the resident. If the resident is not located, proceed with the following:
   1. Staff members will search the entire facility and grounds.
   2. All areas of the facility, grounds, and neighboring streets are to be systemically searched.
   3. The Administrator/Incident Commander will assign each staff member a section when searching to minimize overlapping or overlooking of an area.
   4. When conducting a search, it is important to look under beds and furniture, in walk-in refrigerators/freezers, in closets, under desks, behind doors, as well as in storage rooms, behind boxes, in boxes, and on shelves. A resident who has eloped may be frightened and may be hiding. Being thorough is extremely important.
   5. When finished searching a section, staff members should report back to the Administrator/Incident Commander.

H. If the resident has not been found after a period of ten minutes of the search, the Administrator/Incident Commander will call the police to report the resident missing.

I. When the police arrive the Administrator/Incident Commander will provide the officer with a picture and provide pertinent information such as:
   1. What the resident was wearing.
   2. How the resident was ambulating, i.e., with a cane, walker, etc.
   3. The resident’s cognitive status, i.e., confused, alert.
   4. Information as to where the resident may be going, if known.
   5. Resident’s previous address and family’s address.

J. The family/responsible party and attending physician will be notified if the resident is not found in the facility or the grounds.

K. When the resident has been found:
   1. The Administrator/Incident Commander should notify all staff members that the resident has been found.
   2. The resident should be examined for injuries.
3. The attending physician should be notified of the resident’s status.
4. The family/responsible person will be contacted and informed of his/her status (ensure all the above steps are documented in the nursing notes).
5. The care plan should be updated.
   a. Consider implementing additional measures such as the addition of a wander bracelet if not in current use and 15-minute safety checks, and document in resident record.

L. Complete an incident report and follow the facility’s incident reporting process.

M. Ensure the incident and events are documented objectively in the resident record, including:
   - Circumstances and precipitating factors
   - Interventions utilized to return the resident to the unit
   - Resident’s response to the interventions
   - Results of reassessment upon the resident’s return and the condition of the resident
   - Care rendered
   - Notification of police, family, and physician
   - Physician orders following notification
   - Additional prevention strategies implemented

N. Administrator should report the incident to Division of Health Service Regulation.


(Missing Resident Emergency Protocol based on protocol developed by LTC Alliance, LLC.)

**Emergency Job Tasks**

**Missing Resident**

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Assign each staff member a section to search the facility to minimize overlapping or overlooking of an area.
   b. Contact the police to report the resident missing.
   c. Provide the police with a picture and provide pertinent information such as:
      - What the resident was wearing
      - How the resident was ambulating, i.e., with a cane, walker, etc.
      - The resident’s cognitive status, i.e., confused, alert
      - Information as to where the resident may be going, if known
      - Resident’s previous address and family’s address
   d. Ensure the attending physician is notified of the resident’s status.
   e. Ensure the family/responsible person is contacted and informed of his/her status (ensure all the above steps are documented in the nursing notes).
   f. Ensure care plan is updated.
   g. Report the incident to Division of Health Service Regulation.
   h. Report elopement in Quality Assurance/Risk/Safety committee

2. Director of Nursing
   a. Report to the named nursing station.
   b. Assist with resident search and follow-up actions as directed by Incident Commander.
   c. Ensure the resident is examined for injuries.
   d. Ensure the attending physician is notified of the resident’s status.
e. Ensure the family/responsible person is contacted and informed of his/her status (ensure all the above steps are documented in the nursing notes).
f. Ensure care plan is updated.

3. Nursing Staff
   a. Report to the named nursing station.
   b. Assist with resident search and follow-up actions as directed by Incident Commander.
   c. Examine the resident for injuries.
   d. Notify the attending physician of the resident’s status.
   e. Notify the family/responsible person and inform him of his/her status (ensure all the above steps are documented in the nursing notes).
   f. Update the care plan.
   g. Evaluate implementing additional measures such as the addition of a wander bracelet if not in current use and 15-minute safety checks, and document in resident record.
   h. Complete an incident report and follow facility’s incident reporting process.
   i. Ensure the incident and events are documented objectively in the resident record, including:
      - Circumstances and precipitating factors
      - Interventions utilized to return resident to the unit
      - The resident’s response to the interventions
      - Results of reassessment upon the resident’s return and the condition of the resident
      - Care rendered
      - Notification of police, family, and physician
      - Physician orders following notification
      - Additional prevention strategies implemented

4. Staff Members of All Departments
   a. Report to the named nursing station.
   b. Assist with resident search and follow-up actions as directed by Incident Commander.
6. Code Green: Severe Weather

Tornadoes

Tornadoes are incredibly violent local storms that extend to the ground with whirling winds that can reach 300 mph.

Spawned from powerful thunderstorms, tornadoes can uproot trees and buildings and turn harmless objects into deadly missiles in a matter of seconds. Damage paths can be in excess of one mile wide and 50 miles long.

Tornadoes can occur in any state but occur more frequently in the Midwest, Southeast, and Southwest. They occur with little or no warning.

**Tornado Watch**—Atmospheric conditions are right for tornadoes to potentially develop. Be ready to take shelter. Stay tuned to radio and television stations for additional information.

**Tornado Warning**—A tornado has been sighted in the area or is indicated by radar. Take shelter immediately.

Planning Considerations for Tornadoes:

- Consult with ________________________ (county name) Emergency Management officials regarding its tornado warning system
- Purchase a National Oceanic and Atmospheric Administration (NOAA) Weather Radio with a warning alarm tone and battery backup. Listen for tornado watches and warnings
- Establish procedures to inform personnel when tornado warnings are posted. Consider the need for spotters to be responsible for looking out for approaching storms
- Consult with Emergency Management officials or National Weather Service office for guidance in designating shelter space
- Consider the amount of space you will need. Adults require about six square feet of space. Nursing home and hospital residents require more
- The best protection in a tornado is usually an underground area. If an underground area is not available, consider:
  - Small interior rooms on the lowest floor without windows
  - Hallways on the lowest floor away from doors and windows
  - Rooms constructed with reinforced concrete, brick, or block with no windows and a heavy concrete floor or roof system overhead
  - Protected areas away from doors and windows
  - *Note: Auditoriums, cafeterias, and gymnasiums that are covered with flat, wide-span roofs are not considered safe*
- Make plans for evacuating personnel away from lightweight modular offices or mobile home-sized buildings. These structures offer no protection from tornadoes
- Conduct tornado drills
Emergency Procedure
TORNOADO WATCH

The following procedure should be utilized when a tornado watch has been issued.

A watch indicates that tornadoes may potentially develop as reported by the National Weather Service or through other reports (television, radio, community warning sirens, etc.).

This procedure should work in tandem with the Take Cover procedure during an emergency situation that requires the relocation of residents, staff, and visitors to a Safe Refuge.

A. “CODE GREEN, a tornado watch has been issued for this area effective until _______ (time watch ends). A tornado watch means that current weather conditions may produce a tornado. Please close all draperies and blinds throughout the facility and await further instructions. Please continue with your regular activities.”

B. The above message should be repeated again after five (5) minutes and then hourly until the watch has terminated.

C. Administrator and Director of Nursing ____________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if needed.

D. Facility management staff should report to the Incident Command Post for instruction to be prepared for Take Cover Procedures.

E. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

F. Monitor weather alert radio and television for changing conditions.

G. All window drapes and blinds are to be closed.

H. Distribute flashlights, towels, and blankets to staff and residents.

I. Ensure first aid and medical supplies are secured and taken to central area for refuge.

J. Secure all outside furniture, trash cans, etc.

K. Once the Tornado Watch has been cancelled and the Incident Commander has determined the dangerous situation has passed, “All Clear, Repeat, All Clear” should be paged.

L. Account for all staff members and residents.
Emergency Procedure
TORNADO WARNING

The following procedure should be utilized when a tornado “warning” has been issued.

A warning indicates that a tornado has been sighted in the immediate area as reported by the National Weather Service or through other reports (television, radio, community warning sirens, etc.).

This procedure should work in tandem with the Take Cover Procedure during an emergency situation that requires the relocation of residents, staff, and visitors to a Safe Refuge.

A. “CODE GREEN, a tornado warning has been issued for our area. Immediately implement the Take Cover Procedure. Repeating—a tornado warning has been issued for our area. Immediately implement the Take Cover Procedure.”

B. The above message should be repeated again after five (5) minutes and then hourly until the watch has terminated.

C. Administrator and Director of Nursing ________________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if needed.

D. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

E. Upon hearing this announcement, all personnel should refer to the Take Cover Procedure and follow it in its entirety to help ensure the safety of the residents, visitors, and themselves.

F. Once the Tornado warning is over and the Incident Commander has determined the dangerous situation has passed, “All Clear, Repeat, All Clear” should be paged to signal the Take Cover situation has ended.

G. Upon issuance of the All Clear announcement, residents should be taken back to their rooms.

H. Account for all staff members and residents.
Emergency Procedure
Take Cover
External Threat

The following procedure should be utilized when a threatening situation occurs outside of the building and requires that all occupants of the building immediately Take Cover.

These situations include (but are not limited to): Severe Weather (tornado, intense thunderstorm, etc.), Immediate National Emergency (attack), and Transportation Emergency (proximal explosion)

1. It is the responsibility of the Administrator and/or Incident Commander to monitor all threatening situations and determine when the Take Cover Procedure should be initiated. The decision should be based on visual observations of the environment (outside conditions) and broadcast weather or news reports of an impending situation. Any situation where the safety and well-being of the residents and staff members of the facility are at risk due to an event that occurs outside of the facility should be considered in the decision of taking cover.

2. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

3. Upon making the decision to Take Cover, an announcement should be broadcast over the facility’s intercom system stating the following message:

   “Attention all staff, there is an immediate situation outside of the building requiring all occupants to Take Cover. Please initiate the Take Cover Procedure.”

4. Upon broadcast of the announcement, all staff should immediately discontinue the tasks they are working on and begin implementing their responsibilities.

5. All nursing staff should immediately relocate the residents to either the bathrooms within the rooms or the interior hallways away from all windows and doors as quickly as possible. Staff members should close all drapes/blinds and all doors during the procedure. All visitors should be directed to Take Cover with the residents.

   IMPORTANT NOTE: If residents, visitors, and staff are directed to Take Cover in a hallway that has a door or window at the end of the corridor, all persons must be kept at a distance of at least thirty feet (30’) away from the door or window and attempt to stay near the center of the building.

6. All staff should avoid all areas where there are large ceiling spans. Small rooms or interior hallways away from windows and doors are suitable for taking cover in a situation where an immediate threat is present.

7. Upon relocating all residents to a safe refuge, staff should stay in close proximity of the residents while taking cover as well. Every attempt should be made to maintain calm and reassure the residents during the emergency.

8. Maintenance staff should be prepared to activate Shutdown Procedures if warranted by the situation. See Shutdown Procedures in Appendix W.

9. All other staff members should immediately secure their work areas by securing records, closing drawers and cabinets, shutting down electronic appliances, etc., and reporting to the nearest Area of Refuge away from all windows and doors.
10. Staff members should close as many interior doors as possible. Staff working in an area near the residents should assist with relocating the residents and reassuring them about the situation.

11. If a situation occurs that allows for a longer time (advanced warning), then the residents, staff, and visitors should be re-located to the designated area that provides optimum refuge. If time permits, all occupants should be moved from upper floors to the basement or lowest level within the facility. Priority should be given to evacuating the highest floor first. If it can be a coordinated relocation effort, residents on the upper floors should be moving toward the lower floors until all residents and staff have been moved to the lowest level within the facility. A census should be taken to ensure all residents are accounted for. All employees should be accounted for as well.

12. Stairwells must be recognized as safe areas and used to relocate residents and visitors whenever possible.

13. All residents, staff, and visitors should remain in their refuge area until the danger has passed. This determination should be made by the Incident Commander.

14. An “All Clear, Take Cover is over” should then be paged to signal the Take Cover situation has ended.

15. Upon issuance of the All Clear announcement, residents should be taken back to their rooms.

16. Account for all staff members and residents.

**Essential Tasks**

The following tasks must be completed during all Take Cover situations:

1. Keep all doors closed in resident rooms and functional rooms (storage, pantry, linen, etc.).
2. Keep all stairwell doors closed.
3. Close all windows.
4. Shut off oxygen or other medical gasses.
5. Connect O₂ concentrators to all residents requiring oxygen.
6. Be prepared for the worst—maintain calm at all times.
7. Account for your residents at all times.
8. Maintenance staff should be prepared to shut off gas and electric service if warranted by the situation.

**Emergency Job Tasks**

*Take Cover*

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Monitor weather alert radio and television for changing conditions.
   b. Be prepared to activate the Incident Command System (ICS).
   c. Direct staff as needed.
   d. All visitors should be directed to Take Cover with the residents.
   e. Be prepared to contact authorities if injuries and damages occur.
   f. Ensure staff members are accounted for and safe.
2. Nursing Staff
   a. Connect O₂ concentrators to all residents requiring oxygen.
   b. Relocate the residents to safe refuge. All visitors should be directed to Take Cover with the residents.
   c. Direct staff as needed.
   d. Take first aid supplies/medical supplies to designated Area of Refuge, time permitting.
   e. Remain calm to not upset the residents.

3. Certified Nursing Assistants
   a. Relocate the residents to safe refuge and stay in close proximity of the residents while taking cover as well.
   b. Ensure drapes, blinds, doors, and windows are closed.
   c. Remain calm to not upset the residents.

4. Management Staff of All Departments
   a. Secure work area by securing records, closing drawers, cabinets, shutting down electronic appliances, etc. and reporting to the nearest Area of Refuge away from all windows and doors.
   b. Direct staff as needed.
   c. Ensure drapes, blinds, doors, and windows are closed.
   d. Assist in relocating residents to safe refuge if possible.
   e. All visitors should be directed to Take Cover with the residents.
   f. Remain calm to not upset the residents.
   g. Assist Incident Commander as needed.

5. Maintenance
   a. Ensure drapes, blinds, doors, and windows are closed.
   b. Be prepared to activate Shutdown Procedures if warranted by the situation.
   c. Assist in relocating residents to safe refuge if possible.
   d. Remain calm to not upset the residents.
   e. Assist Incident Commander as needed.

6. Other Staff Members
   a. Secure work area by securing records, closing drawers, cabinets, shutting down electronic appliances, etc., and reporting to the nearest Area of Refuge away from all windows and doors.
   b. Ensure drapes, blinds, doors, and windows are closed.
   c. Assist in relocating residents to safe refuge if possible.
   d. Remain calm to not upset the residents.
Flood/Flash Flood/Dam Failure

Floods are the most common and widespread of all natural disasters. Most communities in the United States can experience some degree of flooding after spring rains, heavy thunderstorms, or winter snow thaws.

Most floods develop slowly over a period of days. Flash floods, however, are like walls of water that develop in a matter of minutes. Flash floods can be caused by intense storms or dam failure.

**Flood Watch**—Flooding is possible. Stay tuned to National Oceanic and Atmospheric Administration (NOAA) radio. Be prepared to evacuate. Tune to local radio and television stations for additional information.

**Flood Warning**—Flooding is already occurring or will occur soon. Take precautions at once. Be prepared to go to higher ground. If advised, evacuate immediately.

Planning Considerations for Floods

- Consult with _______________________________ (county name) Emergency Management officials if facility is located in a flood plain and to review the history of flooding in the area.
- Review the community’s emergency plan. Learn the community’s evacuation routes. Know where to find higher ground in case of a flood.
- Inspect areas that may be subject to flooding. Identify records and equipment that can be moved to a higher location. Make plans to move records and equipment in case of flood.

Ensure insurance policy provides coverage for flooding. Evaluate the feasibility of flood proofing your facility.

_________________________ (facility name)

**Emergency Procedure**

**FLOODING**

The following procedure should be utilized in the event of flooding, flash floods, dam break near _______________________________ (facility name).

The following procedure should be utilized when a flood watch or warning has been issued.

A. \**watch** indicates that flooding is likely.

A \**warning** indicates flooding is occurring in the area.

A. \*“CODE GREEN, a flood/flash flood **watch** or **warning** has been issued for this area effective until ______ (time watch ends). A **flood watch** means that current weather conditions may produce flooding. A **flood warning** indicates that flooding is occurring in the area. Please await further instructions.”*

B. Administrator and Director of Nursing _______________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if needed.

C. Facility management staff should report to the Incident Command Post for a briefing and instruction.
D. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

E. Incident Commander must decide whether to flood proof (see attached flood proofing methods) or evacuate based on geographical location and history of flooding of the facility. If evacuation is necessary, Evacuation Emergency Procedures will be followed.

F. It is essential that all internal emergency operations are coordinated with the local authorities. They will be able to quickly assist in controlling the situation provided that a good line of communication is established between them and the Incident Commander.

G. The situation should only be deemed “under control” after the local authorities have concluded emergency operations and the Incident Commander has declared the situation “safe.”

H. Account for all staff members and residents.

**Flood proofing measures**

Permanent flood proofing measures are to be taken before a flood occurs and require no human intervention when floodwaters rise. They include:

- Filling windows, doors, or other openings with water-resistant materials such as concrete blocks or bricks. This approach assumes the structure is strong enough to withstand floodwaters
- Installing check valves to prevent water from entering where utility and sewer lines enter the facility
- Reinforcing walls to resist water pressure and sealing walls to prevent or reduce seepage
- Building watertight walls around equipment or work areas within the facility that are particularly susceptible to flood damage
- Constructing floodwalls or levees outside the facility to keep flood waters away
- Elevating the facility on walls, columns, or compacted fill. This approach is most applicable to new construction, though many types of buildings can be elevated

Contingent flood proofing measures are also taken before a flood but require some additional action when flooding occurs. These measures include:

- Installing watertight barriers, called flood shields, to prevent the passage of water through doors, windows, ventilation shafts, or other openings
- Installing permanent watertight doors
- Constructing movable floodwalls
- Installing permanent pumps to remove flood waters

Emergency flood proofing measures are generally less expensive than those listed above, though they require substantial advance warning and do not satisfy the minimum requirements for watertight flood proofing as set forth by the National Flood Insurance Program (NFIP). They include:

- Building walls with sandbags
- Constructing a double row of walls with boards and posts to create a “crib,” then filling the crib with soil
- Constructing a single wall by stacking small beams or planks on top of each other
- Evaluate the need for backup systems, such as:
  - Portable pumps to remove flood water
  - Alternate power sources such as generators or gasoline-powered pumps
  - Battery-powered emergency lighting
  - Participation in community flood control projects
Emergency Job Tasks
Flooding

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Activate Recall Roster and alert management staff to report to the Incident Command Post.
   b. Should be responsible for deciding to flood proof the facility or evacuate.
   c. If decision is to evacuate, Evacuation Emergency Procedures would be activated.
   d. Ensure staff members and residents are accounted for and safe.

2. Management Staff of All Departments
   a. Report to the Incident Command Post.
   b. Assist with flood proofing the facility if necessary.
   c. Remain calm to not upset the residents.
   d. Be prepared to activate Evacuation Procedures.

3. Maintenance
   a. Report to the Incident Command Post.
   b. Flood proof the facility if necessary.
   c. Remain calm to not upset the residents.
   d. Be prepared to activate Evacuation Procedures.

4. Staff Members of All Departments
   a. Assist with flood proofing if necessary.
   b. Remain calm to not upset the residents.
   c. Be prepared to activate Evacuation Procedures.

Hurricanes and Tropical Storms

Hurricanes are severe tropical storms with sustained winds of 74 miles per hour or greater. Winds may gust to over 200 miles per hour. Hurricane winds can reach 160 miles per hour and extend inland for hundreds of miles.

Hurricanes bring torrential rains and a storm surge of ocean water that crashes into land as the storm approaches. Hurricanes also spawn tornadoes.

Hurricane advisories are issued by the National Weather Service as soon as a hurricane appears to be a threat. The Atlantic hurricane season lasts from June through November. The majority of hurricanes occur in September. National Hurricane Center located in Miami, Florida, tracks and predicts storm activity.

**Hurricane Watch**—A hurricane is possible within 36 hours. Stay tuned for additional advisories. Tune to local radio and television stations for additional information.

**Hurricane Warning**—A hurricane is expected to hit land within 24 hours. Hurricane conditions are imminent, bringing:
- Sustained winds of 74 miles per hour or higher
- Torrential rain fall, which will cause flooding
- Storm surge, rising tidal sea levels of more than 10 feet above normal

**Hurricane Landfall**—The periods of time in which hurricane winds, rains, and storm tide present a danger to the general population as the storm approaches land and passes through the area.
Tropical Storm—Winds over 39 miles per hour, but less than 74 miles/hour.

Tropical Depression—Winds less than 30 miles per hour.

Tropical Storm Watch—Issued when storm conditions are expected within 36 hours.

Tropical Storm Warning—Issued when storm conditions are expected within 24 hours.

Before a hurricane strikes, each facility must determine its flood probability, the possibility of evacuation based on flood predictions, and prepare evacuation procedures.

Prior to hurricane season, facility administration should conduct a review of hurricane preparedness. This will include in-service staff training and an updating of all hurricane related disaster planning.

Consult with your county Emergency Management Office to determine your flood zone and hurricane evacuation zone. Keep in mind that wind damage from a hurricane can create the need for facility evacuation even when there is no threat of flooding from the storm surge.

Saffir/Simpson Scale

The Saffir/Simpson Scale is used by the National Hurricane Center to give public officials a continuing assessment of the potential for wind and storm surge damage. Scale assessments are revised regularly as new observations are made. Storm surge heights may vary depending upon your location and coast configuration.

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>PRESSURE (mb/inches)</th>
<th>WINDS (MPH)</th>
<th>STORM SURGE (ft)</th>
<th>DAMAGE</th>
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<td>1</td>
<td>980 OR HIGHER (28.94 or higher)</td>
<td>74–95</td>
<td>4–5</td>
<td>Minimal</td>
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<tr>
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<td>965-979 (28.50-28.91)</td>
<td>96–110</td>
<td>6–8</td>
<td>Moderate</td>
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<tr>
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<td>945-964 (27.91-28.47)</td>
<td>111–130</td>
<td>9–12</td>
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<td>13–18</td>
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<tr>
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<td>920 or less (27.17 or less)</td>
<td>156+</td>
<td>18+</td>
<td>Catastrophic</td>
</tr>
</tbody>
</table>

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The main hazards of a hurricane include, but are not limited to, the following:

1. **Wind:** Winds cause a barrage of sand and debris. They sever communication lines. Broken power lines whipping around are extremely dangerous. Branches from trees are severed, and many trees themselves may fall. Mobile homes are often destroyed. Roofs are damaged and windows are usually broken. Poorly built structures may collapse. Boats are destroyed by being pushed against their moorings. Air traffic is disrupted, and small planes are flipped over and destroyed. Winds in excess of 40 mph begin to cause damage to traffic signals and trees.

2. **Storm Surge:** Storm surge, historically, is the hurricane’s worst killer. Nine out of ten people who lost their lives in a hurricane were killed because of storm surges. Rising tidal sea levels of more than 10 feet above normal may occur as the storm moves toward land. The potential damage depends upon the hurricane category, its direction, and size. Storm surge causes salt water flooding, which cripples communications, causes sewers to back up, pollutes drinking water, shorts out power lines, washes out roads, and alters shorelines and ship channels.

3. **Torrential Rain:** Torrential rain will cause fresh water flooding. Massive health problems may be caused by insects, dead animals, and polluted waters from sewage backup.
Planning Considerations for Hurricanes and Tropical Storms:

- Consult with ______________________________ (county name) Emergency Management Office to determine your facility’s flood zone and hurricane evacuation zone. Wind damage from a hurricane can necessitate evacuation even if there is no threat of flooding from the storm surge.
- Purchase a National Oceanic and Atmospheric Administration (NOAA) Weather Radio with a warning alarm tone and battery backup.
- Listen for hurricane watches and warnings.
- Survey your facility. Make plans to protect outside equipment and structures.
- Make plans to protect windows. Permanent storm shutters offer the best protection. Covering windows with 5/8-inch marine plywood is a second option.
- Consider the need for backup systems:
  - Portable pumps to remove flood water
  - Alternate power sources, such as generators or gasoline-powered pumps

_________________________ (facility name)

Emergency Procedure

HURRICANE AND TROPICAL STORM

THREAT AND WATCH

The following procedure should be utilized when a Hurricane or Tropical Storm is predicted (threat) and when a Watch is issued.

A Watch is issued when a hurricane or tropical storm is expected to hit within 36 hours.

A. Meet with management team to activate Incident Command System and discuss preparations for the storm. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

B. Contact ownership, Corporate Contact, and emergency management office for updates and further instructions.

C. Contact ownership, Corporate Contact, Division of Health Service Regulation, Emergency Management Office, and Medical Director to notify them of the decision to Evacuate or Shelter-in-Place.

D. Notify staff members.

E. Each department needs to contact all employees and create a list of employees with phone numbers/emergency phone numbers who will be available to work during a Shelter-in-Place or Evacuation scenario. Confirm expected availability, as well as the number of family members joining the staff members:
   1. Before the storm strikes
   2. During the storm
   3. After the storm

F. Alert alternate care facilities and transportation providers of the potential storm.

G. Update the Resident Acuity Levels for Evacuation Purposes sheet (Refer to Appendix D) to determine transportation needs according to acuity and special needs.

H. Update and have ready resident Emergency Packet, Emergency “Go Bags,” and Evacuation Identification Wristbands. See Appendix X for Resident Evacuation Emergency Packets, “Go Bags,” and Identification Bracelet Information.
I. Contact family members/responsible parties to notify them of potential threat of a storm in order to determine if they wish to take residents home during the storm and compile a list.

J. Medical Records should begin preparation to transport medical records if Evacuation Procedures are activated.

K. Medications, medication carts, and emergency drug boxes should be prepared for transport, as well as first aid supplies, medical equipment, etc.

L. Disaster supplies should be ready for transport if necessary. Assure at least one-week supplies of pharmaceuticals, oxygen, and disposable supplies.

M. Disaster food and water for at least a week must be ready for transport if necessary.

N. Alert transportation providers.

O. Assign tasks to the designated driver(s) to ensure facility transportation is ready for usage.

P. Alert food and emergency water vendors, medical supply vendors, and pharmacy that an Evacuation or Shelter-in-Place situation might occur.

Q. Prepare residents in designated groups according to acuity for transport to alternate care facilities if Evacuation Procedures are activated. Ensure the residents:
   - Are properly attired for the weather with shoes, coats, hats, etc.
   - Are wearing Evacuation ID bands
   - Have Emergency Packets with face sheets, identification, DNR orders, insurance information, etc.
   - Have Emergency “Go Bags” with personal clothing, gowns/pajamas, shoes, slippers, socks, underclothes for three to four days, incontinence supplies, personal grooming items, dental supplies, dentures, hearing aides, eyeglasses, falls and skin breakdown preventative aids, and other medical supplies.
   - Have pillows, blankets, bed linens, (mattresses may be transported as well)
   - Ensure all adaptive aids, such as hearing aids and dentures are packed and properly labeled

R. Cancel all outside activities and restrict admissions as storm approaches.

S. Stockpiling of water in tubs, trash cans, buckets, etc. should begin 12 hours before the predicted arrival of the hurricane.

T. Continue to monitor updates regarding the storm and check with Emergency Management Office for updates and recommendations.

U. Administrator or Designee must decide whether to Evacuate or Shelter-in-Place, depending on the prediction of the storm conditions.

V. All evacuation procedures must be completed before the onset of tropical storm winds in the area. Facility must determine how long it will take to complete a full-scale facility evacuation. The amount of time it takes to evacuate then travel to the sheltering facility should be multiplied times three to account for evacuation traffic, as well as other factors.¹

W. It is essential that all internal emergency operations are coordinated with the local authorities. They will be able to quickly assist in controlling the situation provided that a good line of communication is established between them and the Incident Commander.

Emergency Job Tasks
Hurricane and Tropical Storm Threat and Watch

1. Administrator/Incident Commander
   a. Meet with the management team to activate Incident Command System (ICS) and discuss preparations for the storm.
   b. Contact ownership, Corporate Contact, and emergency management office for updates and further instructions.
   c. Notify staff members and the Medical Director.
   d. Alert alternate care facilities and transportation providers of potential storm.
   e. Ensure Resident Information and Emergency Information Packets and Travel Bags are updated.
   f. Ensure families/responsible parties are notified.
   g. Continue to monitor updates regarding the storm and check with Emergency Management Office for updates and recommendations.
   h. Contact ownership, Corporate Contact, Division of Health Service Regulation, and Emergency Management Office of decision to Evacuate or Shelter-in-Place.
   i. Should be responsible for activating Evacuation Procedures or Shelter-in-Place Procedures.
   j. Keep in mind that all Evacuation Procedures must be completed before the onset of tropical storm winds in the area. Facility must determine how long it will take to complete a full-scale evacuation. The amount of time it takes to evacuate then travel to the sheltering facility should be multiplied times three to account for evacuation traffic, as well as other factors.²
   k. It is essential that all internal emergency operations are coordinated with the local authorities. They will be able to quickly assist in controlling the situation, provided that a good line of communication is established between them and the Incident Commander.

2. Director of Nursing
   a. Contact employees and create a list of employees with phone numbers/emergency phone numbers who will be available to work during a Shelter-in-Place or Evacuation scenario. Confirm expected availability, as well as the number of family members joining the staff members:
      - Before the storm strikes
      - During the storm
      - After the storm
   b. Update Resident Acuity Sheet for Evacuation Purposes to determine transportation needs based on acuity and special needs
   c. Determine all special transportation needs for residents who will require higher levels of care.
   d. Ensure resident Emergency Information Packets are updated.
   e. Ensure resident Emergency “Go Bags” are packed.
   f. Notify medical supply vendors and pharmacy.
   g. Ensure disaster supplies are packed and ready for transport if necessary.
   h. Ensure family members/responsible parties are notified of potential threat of a storm. Determine if they wish to take residents home during the storm.
   i. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

3. Nursing Staff
   a. Contact attending physicians to receive discharge orders for those residents being discharged to their families, as well as securing updated orders for all residents.
   b. Prepare medications/medication carts/emergency drug boxes for transport.

c. Ensure Resident Emergency Packets of Information and Evacuation Identification bracelets are updated.
d. Prepare disaster supplies for transport if necessary. Assure at least one-week supplies of pharmaceuticals, oxygen, and disposable supplies.
e. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures

4. Certified Nursing Assistants
   a. Prepare Emergency “Go Bags” for residents with:
      i. Personal clothing, gowns/pajamas, shoes, slippers, socks, underclothes for three to four days, incontinence supplies, personal grooming items, dental supplies, dentures, hearing aids, eyeglasses, falls and skin breakdown preventative aids, and other medical supplies.
      ii. Have pillows, blankets, bed linens, (mattresses may be transported as well).
      iii. Ensure all adaptive aids, such as hearing aids and dentures are packed and properly labeled.
   b. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

5. Office Staff/
   a. Gather essential resident, employee, and facility records.
   b. As directed by Incident Commander, continue to notify families/responsible parties of discharge plans and/or plan to Evacuate/Shelter-in-Place.
   c. Document all emergency actions taken and notifications.
   d. As directed by Incident Commander, continue to notify staff members to report to the facility as soon as possible.
   e. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

6. Medical Records
   a. Protect and gather resident records for transport if necessary.
   b. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

7. Social Services/Activities
   a. Notify families/responsible parties who have requested their loved ones be discharged to their care. Make list and forward to nursing department, so discharge orders can be obtained from attending physicians.
   b. Ensure DNR orders are accurate.
   c. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

8. Maintenance
   a. Monitor fuel supply for generator and ensure all equipment and utilities are functioning properly.
   b. Ensure supplies, such as radios, flashlights, batteries, etc. are organized for usage and ready for transport if necessary.
   c. Tape windows and glass doors in an “X” pattern.
   d. Clear gutters, drains, and storm sewers.
   e. Secure outside furniture, planters, awnings, and trash cans.
   f. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

9. Food Service
   a. Contact employees and create a list of employees with phone numbers/emergency phone numbers who will be available to work during a Shelter-in-Place or Evacuation scenario. Confirm expected availability, as well as the number of family members joining the staff members:
      - Before the storm strikes
      - During the storm
      - After the storm
b. Protect and gather for transport vital resident nutritional and department records.
c. Collect and prepare for transport needed food, water, cooking utensils, and disposal materials based on the available facilities at the evacuation site.
d. Alert vendors that supplies may need to be delivered to alternate care facility.
e. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.

10. Housekeeping/Laundry
   a. Contact employees and create a list of employees with phone numbers/emergency phone numbers who will be available to work during a Shelter-in-Place or Evacuation scenario. Confirm expected availability, as well as the number of family members joining the staff members:
      ▪ Before the storm strikes
      ▪ During the storm
      ▪ After the storm
   b. Ensure an adequate supply of personal clothing and linens for Evacuation or Sheltering-in-Place.
   c. Gather and prepare all linens for transport if necessary.
   d. Establish distribution and collection systems for linens at alternate care facility.
   e. Housekeeping is responsible for maintaining a healthy and sanitary environment.

11. Transportation
   a. Move facility vehicles away from trees and utility poles.
   b. Check fuel, oil, and water levels for each vehicle.
   c. Prepare maps with evacuation routes and alternate routes.

12. Medical Director
   a. Will assist facility with resident transfer decisions and emergency orders if attending physician is unavailable.

13. Family Members and Loved Ones of Staff and Residents
   a. May accompany staff members and residents during Sheltering-in-Place or Evacuation to an alternate care site. Family members are not to provide any resident care.
   b. Employees will wear name tags. Family Members will wear visitor tags.
   c. Meals will be provided. (The Dietary Department should be advised of how many family members will be joining the facility).

See Appendix Y for Information Sheets pertaining to flooding, flash floods, heat wave, hurricanes and tropical storms, severe thunderstorms, and winter storms.

Technological emergencies include any interruption or loss of a utility service, power source, information system, or equipment needed to keep the residents and employees safe, as well as maintaining ______________ (facility name) operations.

Planning Considerations for Utility Outages

- Identify all critical operations, including:
  - Security and alarm systems, elevators, lighting, life support systems, heating, ventilation and air conditioning systems, electrical distribution system
  - Emergency generators, medical gas delivery systems, and other critical systems
  - Communication systems, both data and voice computer networks
- Ensure that key safety and maintenance personnel are thoroughly familiar with all building systems
- Establish procedures for restoring systems
- Determine need for backup systems
- Establish preventive maintenance schedules for all systems and equipment

_________________________ (facility name)

Emergency Procedure

UTILITY OUTAGE

The following procedure should be utilized in the event of a utility outage at ______________ (facility name).

A. “CODE BLACK” should be announced overhead, unless electrical power source is out.
B. Administrator and Director of Nursing ________________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.
C. Immediately determine if the loss of a utility (electric, gas, propane, water, etc.) is due to an incident occurring at the facility like a rupture, leak, fire, collision (vehicle striking meter, etc.).
D. Determine the impact of service disruption and projected duration.
E. Notify appropriate utility company(s) of the outage and contact 911 if there is an emergency situation.
F. Facility management staff should report to the Incident Command Post for a briefing and instruction.
G. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.
H. Ensure back-up systems (emergency generators, emergency lighting, additional blankets, flashlights, emergency water, emergency food supply, etc.) are available and operating as designed in accordance with requirements.
I. Monitor residents to ensure they are safe. See attached SEVERE COLD AND HOT WEATHER PROCEDURES to prevent hypopyrexia during loss of heating functions and procedures to prevent hyperpyrexia during loss of cooling functions.
J. Continuously monitor equipment that may be adversely impacted by the failure due to the failure itself (electrical grounding, failure of other systems, etc.) as well as negative circumstances that may occur upon sudden resumption of utility (over-pressurization, power surge, etc.).

K. Initiate proactive and preventative measures to safeguard and isolate resources to help preserve said resources (keep doors to refrigerators and freezers closed, keep outside doors closed to maintain air conditioning, etc.).

L. If outage is long-term and threatens resident safety and welfare, initiate Evacuation Emergency Procedures.

M. Establish and maintain contact with local emergency responders to advise them of the situation and keep them informed of potential needs as the situation worsens.

N. The situation should only be deemed “under control” after the outage has been restored and the Incident Commander has declared the situation “safe.” At that point an “All Clear” can be announced or “Re-Entry” if evacuation had occurred.

O. Account for staff members and residents.

**Severe Cold Weather Procedures**

The following procedures will be followed if there is a loss of heating function during cold weather to prevent hypopyrexia:

When the facility temperature reaches 65 degrees Fahrenheit and remains so for four hours:
- Ensure residents are dressed warmly and have enough blankets/coverings
- Cover the heads of the residents and protect other extremities
- Force fluids
- Monitor body temperatures
- Monitor environmental thermometers
- Evacuate residents if temperatures remain low and residents’ safety and welfare is jeopardized
- Notify Medical Director

**Severe Hot Weather Procedures**

The following procedures will be followed if there is a loss of cooling functions during hot weather to prevent hyperpyrexia:

When the facility temperature reaches 85 degrees Fahrenheit and remains so for four hours:
- Move residents to another air conditioned part of the facility, if available
- Encourage residents to take in more fluids and keep the residents hydrated. Force fluids if necessary and record fluid intake
- Provide cold wash cloths as needed
- Open windows to let cooler outside air in and utilize fans to move air
- Monitor body temperatures of the residents and notify attending physicians if necessary
- Notify 911 if a resident/staff member appears to be in danger of heat-related stress
- Evacuate residents if necessary
- Monitor environmental thermometers
- Notify Medical Director

See Appendix Y for Severe Weather Information Sheets pertaining to heat (heat wave).
Emergency Job Tasks
Utility Outage

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Immediately determine if the loss of a utility (electric, gas, propane, water, etc.) is due to an incident occurring at the facility like a rupture, leak, fire, collision (vehicle striking meter, etc.).
   b. Determine the impact of service disruption and projected duration.
   c. Notify appropriate utility company(s) of the outage and contact 911 if there is an emergency situation.
   d. Consider activating the Incident Command System (ICS) to manage the situation.
   e. Activate the ICS to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of fire warrants, then appoint other positions of the ICS structure.
   f. If severity of incident warrants, then appoint other positions of ICS structure.
   g. Initiate Severe Cold and Hot Weather Procedures if necessary.
   h. Initiate Evacuation Emergency Procedures, if outage is long-term and threatens resident safety and welfare.
   i. Ensure staff members and residents are accounted for and safe.

2. Director of Nursing
   a. Ensure back-up systems (emergency generators, emergency lighting, additional blankets, flashlights, emergency water, etc.) are available and operating as designed in accordance with requirements.
   b. Monitor safety of the residents and staff members during severe cold and hot weather during a power outage. Activate Severe Weather Procedures.
   c. Be prepared to activate Evacuation Procedures.
   d. Be prepared to assist where needed at the direction of the Incident Commander.

3. Nursing Staff
   a. Initiate proactive and preventative measures to safeguard and isolate resources to help preserve said resources (keep doors to refrigerators and freezers closed, keep outside doors closed to maintain air conditioning, etc.).
   b. Monitor resident safety. Initiate Severe Weather Procedures if necessary.
   c. Be prepared to activate Evacuation Procedures.
   d. Be prepared to assist where needed at the direction of the Incident Commander.

4. Certified Nursing Assistants
   a. Monitor resident safety. Initiate Severe Weather Procedures if necessary.
   b. Be prepared to activate Evacuation Procedures.
   c. Be prepared to assist where needed at the direction of the Incident Commander.

5. Office Staff/Medical Records
   a. Initiate proactive and preventative measures to safeguard and isolate resources to help preserve said resources (keep doors to refrigerators and freezers closed, keep outside doors closed to maintain air conditioning, etc.).
   b. Be prepared to activate Evacuation Procedures.
   c. Be prepared to assist where needed at the direction of the Incident Commander.
6. Activity Staff
   a. Assist with Severe Weather Procedures if necessary
   b. Be prepared to activate Evacuation Procedures.
   c. If available, assist with other emergency operations at the direction of the Incident Commander.

7. Maintenance Personnel
   a. Immediately determine if the loss of a utility (electric, gas, propane, water, etc.) is due to an incident occurring at the facility like a rupture, leak, fire, collision (vehicle striking meter, etc.).
   b. Determine the impact of service disruption and projected duration.
   c. Ensure back-up systems (emergency generators, emergency lighting, additional blankets, flashlights, emergency water, etc.) are available and operating as designed in accordance with requirements.
   d. Assist with Severe Weather Procedures if necessary
   e. Be prepared to activate Evacuation Procedures
   f. Be prepared to assist where needed at the direction of the Incident Commander.

8. All Other Employees (housekeeping, laundry, dietary, etc.)
   a. Ensure back-up systems (emergency generators, emergency lighting, additional blankets, flashlights, emergency water, emergency food, etc.) are available and operating as designed in accordance with requirements.
   b. Initiate Severe Weather Procedures if necessary.
   c. Be prepared to activate Evacuation Procedures.
   d. Be prepared to assist where needed at the direction of the Incident Commander.

Hazardous materials are substances that are flammable or combustible, explosive, toxic, noxious, corrosive, oxidizable, an irritant, or radioactive. A hazardous material spill or release can pose a risk to life, health, or property. “

A warning of a hazardous accident or incident is usually received from the Fire and/or Police Departments or from Emergency Management officials. An overturned tanker, truck, or train, a crashed airplane, a broken fuel line, or an accident in a chemical plant are all potential hazards.”

There are a number of federal laws that regulate hazardous materials, including: the Superfund Amendments and Reauthorization Act of 1986 (SARA), the Resource Conservation and Recovery Act of 1976 (RCRA), the Hazardous Materials Transportation Act (HMTA), the Occupational Safety and Health Act (OSHA), the Toxic Substances Control Act (TSCA), and the Clean Air Act.

Title III of SARA regulates the packaging, labeling, handling, storage, and transportation of hazardous materials. The law requires facilities to furnish information about the quantities and health effects of materials used at the facility, and to promptly notify local and state officials whenever a significant release of hazardous materials occurs.

Planning considerations regarding hazardous materials:

1. Identify and label all hazardous materials stored, handled, produced, and disposed of by your facility. Follow government regulations that apply to your facility. Obtain material safety data sheets (MSDS) for all hazardous materials at your location.

2. Train employees to recognize and report hazardous material spills and releases. Train employees in proper handling and storage.

3. Identify any hazardous materials used in facility processes and in the construction of the physical plant.
   a. Identify other facilities in your area that use hazardous materials. Determine whether an incident could affect your facility.

4. Identify potential for an off-site incident affecting operation.
   a. Identify highways, railroads, and waterways near the facility used for the transportation of hazardous materials. Determine how a transportation accident near the facility could affect your operations.

Detailed definitions as well as lists of hazardous materials can be obtained from the Environmental Protection Agency (EPA) and the Occupational Safety and Health Administration (OSHA).

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Emergency Procedure
HAZARDOUS MATERIALS INCIDENT

The following procedure should be utilized in the event of a hazardous materials incident in or near ______________________ (facility name).

A. “CODE ORANGE” should be announced overhead with the location of the incident, if it occurs within the facility premises. 911 should be notified to alert the emergency response system that a hazardous materials incident is in progress. The caller should provide the 911 dispatcher with as much relevant information as possible.

B. Local authorities and the Emergency Management Office will typically warn the facility of such an accident, if it occurs within the community.

C. Administrator and Director of Nursing ________________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

D. Facility management staff should report to the Incident Command Post for a briefing and instruction.

E. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.

F. Determine if a hazardous chemical or gas leak might endanger the residents.

G. Based on the magnitude of the incident/accident, evacuation may be necessary. Fire Department, Police, and Emergency Management will assist in determining if evacuation is necessary.

H. If evacuation is necessary, Evacuation Emergency Procedures will be followed.

I. It is essential that all internal emergency operations are coordinated with the local authorities. They will be able to quickly assist in controlling the situation provided that a good line of communication is established with the Incident Commander.

J. The situation should only be deemed “under control” after the local authorities have concluded emergency operations and the Incident Commander has declared the situation “safe.” At that point an “All Clear” can be announced.

K. Account for all staff members and residents.
Emergency Job Tasks
Hazardous Materials Incident

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Contact 911 and Emergency Management Director.
   b. Activate Recall Roster and alert management staff to report to the Incident Command Post.
   c. Instruct all staff members.
   d. Upon arrival of authorities, establish contact with the officer in charge and relay all relevant information regarding the situation.
   e. Should be responsible for making the decision regarding evacuation, which would be activated via Evacuation Emergency Procedures.
   f. Ensure all staff members are accounted for and safe.

2. Management Staff of All Departments
   a. Report to the Incident Command Post.
   b. Instruct staff members to keep windows and doors closed.
   c. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities. Again, keep doors CLOSED.
   d. Remain calm to not upset the residents.
   e. Be prepared to activate Evacuation Procedures.

3. Maintenance
   a. Report to the Incident Command Post.
   b. Shut off all air conditioning.
   c. Instruct staff members to keep windows and doors closed.
   d. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities. Again, keep doors CLOSED.
   e. Remain calm to not upset the residents.
   f. Be prepared to activate Evacuation Procedures.

4. Staff Members of All Departments
   a. Shut windows and doors.
   b. Ensure residents and visitors remain in the facility until further notice from the local authorities. Again, keep doors CLOSED.
   c. Remain calm to not upset the residents.
   d. Be prepared to activate Evacuation Procedures.
9. Code Gray: Workplace Violence or Threat of Violence

Workplace violence is defined as “violent acts (including physical assaults and threats of assaults) directed toward persons at work or on duty.” (National Institute for Occupational Safety and Health (NIOSH))

Actions or words that endanger or harm employees or that result in others having a reasonable belief that they are in danger include:

- Verbal or physical harassment
- Verbal or physical threats
- Assaults or other violence made directly or indirectly by words, gestures, or symbols
- Any other behavior that causes others to feel unsafe (e.g. bullying, sexual harassment)
- Use or possession of a weapon on the company’s premises

Workplace violence incidents can be categorized by the relationship of the assailant and the worker/workplace. They are as follows:

- **Violence by strangers**—persons who have no connection to the workplace
- **Violence by customers, clients, residents, etc.**
- **Violence by co-workers**—former or current employment relationship. Incidents that occur outside the workplace, but which resulted or arose from the employment relationship are counted in this category
- **Violence by personal relations**—incidents committed by someone who has a personal relationship with the worker, such as a current or former spouse or partner, relative or friend

A Workplace Violence Policy and Prevention Program can be found in Appendix Z.
Emergency Procedure

WORKPLACE VIOLENCE OR THREAT OF VIOLENCE

The following procedure should be utilized in the event of a Workplace Violence incident or threat of violence in __________________________ (facility name).

A. All staff members are to be trained regarding __________________________ (facility name) Workplace Violence Policy and Prevention Program.

B. It is the responsibility of all staff members to report any acts of violence to their immediate supervisor and/or Administrator/Designee immediately.

C. “CODE GRAY” should be announced overhead with the location of the incident. 911 should be called if there is screaming, fighting, weapons involved, or any threat of danger. IF IN DOUBT, CALL 911. The caller should provide the 911 dispatcher with as much relevant information as possible.

D. Administrator and Director of Nursing __________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

E. Staff members in the area of the incident should immediately remove the residents and themselves to a safe refuge.

F. Facility management staff should report to the Incident Command Post for a briefing and instruction.

G. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

H. It is essential that all internal emergency operations are coordinated with the local authorities, if they are contacted.

I. If there is arguing or loud talking without physical contact, ask person(s) to calm down to discuss what is bothering them. Ensure that there are at least two employees with this individual(s) at all times when attempting to resolve issue.

J. If individual(s) are employees, determine whether disciplinary action needs to be enforced and depending on the severity of the incident, up to and including termination.

K. If resolution occurs, have individual(s) escorted off facility property. Again, legal authorities may need to be involved.

L. The situation should only be deemed “under control” after the local authorities have concluded emergency operations and the Incident Commander has declared the situation “safe.” At this point an “All Clear” can be announced.

M. Account for all staff members and residents.

N. Refer to Workplace Violence Policy and Prevention Program for further guidance.

Nuclear power plants use the heat generated from nuclear fission in a contained environment to convert water to steam, which powers generators to produce electricity. Nuclear power plants operate in most states in the country and produce about 20 percent of the nation’s power. Nearly three million Americans live within ten miles of an operating nuclear power plant.

Although the construction and operation of these facilities are closely monitored and regulated by the Nuclear Regulatory Commission (NRC), accidents are possible. An accident could result in dangerous levels of radiation that could affect the health and safety of the public living near the nuclear power plant.

Local and state governments, federal agencies, and the electric utilities have emergency response plans in the event of a nuclear power plant incident. The plans define two “emergency planning zones.” One zone covers an area within a ten-mile radius of the plant, where it is possible that people could be harmed by direct radiation exposure. The second zone covers a broader area, usually up to a 50-mile radius from the plant, where radioactive materials could contaminate water supplies, food crops, and livestock.

The potential danger from an accident at a nuclear power plant is exposure to radiation. This exposure could come from the release of radioactive material from the plant into the environment, usually characterized by a plume (cloud-like formation) of radioactive gases and particles. The major hazards to people in the vicinity of the plume are radiation exposure to the body from the cloud and particles deposited on the ground, inhalation of radioactive materials, and ingestion of radioactive materials.

Radioactive materials are composed of atoms that are unstable. An unstable atom gives off its excess energy until it becomes stable. The energy emitted is radiation. Each of us is exposed to radiation daily from natural sources, including the Sun and the Earth. Small traces of radiation are present in food and water. Radiation is also released from man-made sources such as X-ray machines, television sets, and microwave ovens. Radiation has a cumulative effect. The longer a person is exposed to radiation, the greater the effect. A high exposure to radiation can cause serious illness or death.

Although the risk of a nuclear accident is slight, knowing how to handle these products and how to react during an emergency can reduce the risk of injury.

Facility staff members should be familiar with these terms to help identify a nuclear power plant emergency:

**Notification of Unusual Event:** A small problem has occurred at the plant. No radiation leak is expected. No action at the facility will be necessary.

**Alert:** A small problem has occurred, and small amounts of radiation could leak inside the plant. This will not affect the facility and no action is required.

**Site Area Emergency:** Area sirens may be sounded. Listen to your radio or television for safety information.

**General Emergency:** Radiation could leak outside the plant and off the plant site. The sirens will sound. Tune to local radio or television station for reports. Be prepared to follow instructions promptly.

**Planning Considerations for a Nuclear Plant Emergency:**

1. Obtain public emergency information materials from the power company that operates your local nuclear power plant or your local emergency services office. If you live within 10 miles of the power plant, you should receive these materials annually from the power company or your state or local government.
2. Minimize Exposure to Radiation by the following:
   a. Distance—The more distance between you and the source of the radiation, the better. This could be evacuation or remaining indoors to minimize exposure.
   b. Shielding—The more heavy, dense material between you and the source of the radiation, the better.
   c. Time—Most radioactivity loses its strength fairly quickly.

_________________________ (facility name)

Emergency Procedure

NUCLEAR POWER PLANT INCIDENT

The following procedure should be utilized in the event of a Nuclear Power Plant Incident near _____________________________ (facility name).

A. “CODE BROWN” should be announced overhead. Sirens will be sounding in the community. Radio announcements will give specific instructions regarding the need to evacuate.

B. Administrator and Director of Nursing _____________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

C. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.

D. Facility management staff should report to the Incident Command Post for a briefing and instruction.

E. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position.

F. Turn off the air conditioner, ventilation fans, furnace, and other air intakes.

G. Close and lock doors and windows.

H. Listen to battery-operated radio for information regarding the incident and specific instructions.

I. If evacuation is instructed, initiate Evacuation Procedures in conjunction with Emergency Management Services.

J. During evacuation, ensure that windows and vents of the transportation are closed; utilize re-circulating air.

K. If facility is instructed to remain indoors, institute Shelter in Place Procedures.

L. Keep food in covered containers or in the refrigerator. Food not previously covered should be washed before being put into containers.

M. Staff members and residents exposed to nuclear radiation should:
   1. Change clothes and shoes
   2. Put exposed clothing in a plastic bag
   3. Seal the bag and place it out of the way
   4. Take a thorough shower

N. Continue to monitor radio announcements for further instruction. The situation should only be deemed “under control” and safe by local and state authorities. At that point, the Incident Commander can declare the situation “safe” for re-entry and/or normal operations.

O. Account for all staff members and residents.
Emergency Job Tasks

Nuclear Power Plant Incident

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Listen to battery-operated radio for information regarding the incident and for specific instructions.
   b. Establish contact with Emergency Management Office if necessary.
   c. Activate Recall Roster and alert management staff to report to the Incident Command Post.
   d. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   e. Should be responsible for activating the Evacuation Emergency Procedures, if evacuation is ordered by local and state officials.
   g. Should be responsible for activating the Shelter-in-Place Procedures, if facility is instructed to remain indoors.
   h. Account for all staff members and residents.

2. Management Staff of All Departments
   a. Report to the Incident Command Post.
   b. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   c. Instruct staff members to lock doors and windows.
   d. Remain calm to not upset the residents.
   e. Ensure food items are kept in covered containers or in the refrigerator. Uncovered food items should be washed before being put into containers.
   f. Be prepared to activate Evacuation or Shelter-in-Place Procedures.

3. Maintenance
   a. Report to the Incident Command Post.
   b. Turn off the air conditioner, ventilation fans, furnace, and other air intakes.
   c. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   d. Remain calm to not upset the residents.
   e. Be prepared to activate Evacuation Procedures or Shelter-in-Place Procedures.
   f. During evacuation, ensure that windows and vents are closed; utilize re-circulating air.

4. Staff Members of All Departments
   a. Shut windows and doors.
   b. Ensure residents and visitors remain in the facility until further notice from the local authorities. Again, KEEP DOORS CLOSED.
   c. Remain calm to not upset the residents.
   d. Ensure food items are kept in covered containers or in the refrigerator. Uncovered items should be washed before being put into containers.
   e. Be prepared to activate Evacuation or Shelter-in-Place Procedures.
   f. During Evacuation, ensure that windows and vents are closed; utilize re-circulating air.
11. Code Yellow: Bomb Threat

_____________________ (facility name) should treat all bomb threats as serious dangers, although many prove to be false. All staff should receive training on the Bomb Threat Procedure.

Emergency Procedure

BOMB THREAT

The following procedure should be utilized when _____________________________ (facility name) receives a bomb threat.

A. Staff members should utilize the Bomb Threat Telephone Procedure (see attachment), if telephone threats or warnings about bombs in the facility are received. Individuals should try to keep the caller on the phone as long as possible by asking the questions outlined in the Telephone Procedure. Staff are responsible for immediately notifying:
   1. Administrator and/or the highest-ranking staff member on duty, who will activate the Recall Roster
   2. Police Department or local law enforcement (call 911)

B. If staff member(s) receive written threats or warnings about bombs in the facility, they are responsible for immediately notifying:
   1. Administrator and/or the highest-ranking staff member on duty
   2. Police Department or local law enforcement (call 911)

C. Facility management staff should report to the Incident Command Post for a briefing and instruction.

D. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.

E. Administrator or Incident Commander should instruct staff members to discreetly and quietly conduct a thorough search of their respective areas and departments.
   1. Staff members should look for any unusual or extraneous items, such as boxes, packages, bags, etc.
   2. If any unusual item is found, staff members are not to disturb it.

F. Staff members should not approach or touch a suspicious package/device and should immediately evacuate everyone away from such discoveries and immediately report all findings to the Administrator or Incident Commander, so additional actions may be implemented, including consideration of complete facility evacuation.

G. It will be essential to coordinate all actions with law enforcement officials.

H. If a suspected bomb is located within the building, the responsibility for investigation will be that of the law enforcement officials having jurisdiction over such matters.

Telephone Procedures: All staff members who normally receive telephone calls from the general public should be instructed on the Bomb Threat Telephone Procedure, as well as the following:

- Keep the caller on the line as long as possible
- Ask the caller to repeat the message
- Record every word spoken by the person making the call
- Record time the call was received and terminated
- Ask the caller his/her name
- See following table for recording information
- If the caller does not indicate the location of the bomb or possible detonation time, the person receiving the call should ask the caller to provide this information
- It may be advisable to inform the caller that the building is occupied and that the detonation of a bomb could result in death or serious injury to many innocent people
 Bomb Threat Telephone Procedure

Listen — Keep on the phone for as long as possible — do not interrupt caller except to ask:

Person receiving call:

Date: ________________________________
Time of Call: __________________________
End of Call: ___________________________

1. When will it go off?
2. Time remaining?
3. Where is it located?
4. What kind of bomb is it?
5. What does it look like?
6. What will cause it to explode?
7. Did you place the bomb?
8. Why?
9. What is your name?
10. What is your address?

   Caller’s Identity:

   Sex of caller: _____

   Approximate Age: ________________

   Voice Characteristics

   □ Loud
   □ High pitch
   □ Raspy
   □ Intoxicated
   □ Nasal
   □ Fast
   □ Slow
   □ Stutter
   □ Slurred
   □ Is the voice familiar? ________________

Origin of Call

   □ Local
   □ Caller ID shown
   □ Internal (from within building)
   □ Long distance

Accent

   □ Local
   □ Foreign
   □ Racial
   □ Angry
   □ Irrational
   □ Incoherent
   □ Laughing
   □ Righteous
   □ Other (Please specify:) ________________

   □ Not Local
   □ Regional
   □ Calm
   □ Rational
   □ Coherent
   □ Emotional
   □ Deliberate
   □ Calm
   □ Not Local
   □ Regional
   □ Calm
   □ Rational
   □ Coherent
   □ Emotional
   □ Deliberate

Background Sounds

   □ Quiet
   □ Music
   □ Mixed
   □ Airplanes
   □ Office machines
   □ Street traffic
   □ Voices
   □ Animals
   □ Party
   □ Bedlam
   □ Factory machines
   □ Other (Please specify:) ________________

   □ Other (Please specify:) ________________
Emergency Job Tasks

Bomb Threat

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Contact Law Enforcement.
   b. Activate Recall Roster and alert management staff to report to the Incident Command Post.
   c. Instruct all staff members to search respective areas/departments to look for any unusual or extraneous items, such as boxes, packages, bags, etc.
   d. Upon arrival of Law Enforcement, establish contact with the officer in charge and relay all relevant information regarding the situation.
   e. Should be responsible for making the decision regarding evacuation, which would be activated via Evacuation Emergency Procedures.
   f. Ensure staff members and residents are accounted for and safe.

2. Management Staff of All Departments
   a. Report to the Incident Command Post.
   b. Instruct staff members to search respective areas discreetly and thoroughly looking for any unusual or extraneous items, such as boxes, packages, bags, etc.
   c. Remain calm to not upset the residents.
   d. Be prepared to activate Evacuation Procedures.

3. Staff Members of All Departments
   a. Search respective areas discreetly and thoroughly looking for any unusual or extraneous items, such as boxes, packages, bags, etc.
   b. Remain calm to not upset the residents.
   c. Be prepared to activate Evacuation Procedures.
12. Code Blue: Medical Emergencies

Place Copy of Facility Medical Emergency Procedures Here.
13. Code Purple: Epidemic/Pandemic Episodes

(facility name) should utilize and reference the North Carolina Pandemic Flu Plan that has been implemented at the state-level. The website is www.epi.state.nc.us/epi/gcdc/pandemic.html

Part F of the North Carolina Statewide Program specifically relates to healthcare facilities and can be found in Appendix AA.

A federal website offers information at www.pandemicflu.gov. A Long-Term Care and Other Residential Facilities Pandemic Influenza Checklist can be found in Appendix BB.

14. Code White: Terrorism

Throughout human history, there have been many threats to the security of nations. These threats have brought about large-scale losses of life, the destruction of property, widespread illness and injury, the displacement of large numbers of people, and devastating economic loss.

Recent technological advances and ongoing international political unrest are components of the increased risk to national security. The following are types of terrorist threats and procedures to take if they were to occur:

Explosions

Terrorists have frequently used explosive devices as one of their most common weapons. Terrorists do not have to look far to find out how to make explosive devices; the information is readily available in books and other information sources. The materials needed for an explosive device can be found in many places including variety, hardware, and auto supply stores. Explosive devices are highly portable using vehicles and humans as a means of transport. They are easily detonated from remote locations or by suicide bombers.

Conventional bombs have been used to damage and destroy financial, political, social, and religious institutions. Attacks have occurred in public places and on city streets where thousands of people around the world have been injured and killed.
Emergency Procedure
TERRORISM–EXPLOSION

The following procedure should be utilized when an explosion occurs in or near ___________________ (facility name).

A. “CODE WHITE” should be announced overhead. “Attention all staff members, there has been an explosion in the area. Please Take Cover. Please initiate the Take Cover Procedure.”

B. Instruct staff and residents to get under or next to a sturdy table or desk if things are falling. When items stop falling, warn them to watch for weakened floors and stairways.

C. Administrator and Director of Nursing ______________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

IMPORTANT NOTE: If residents, visitors, and staff are directed to Take Cover in a hallway that has a door or window at the end of the corridor, all persons must be kept at a distance of at least thirty feet (30’) away from the door or window and attempt to stay near the center of the building.

D. Facility management staff should report to the Incident Command Post for a briefing and instruction.

E. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.

F. All staff members should avoid all areas where there are large ceiling spans. Small rooms or interior hallways away from windows and doors are suitable for “taking cover” in a situation where an immediate threat is present.

G. Upon relocating all residents to a safe refuge, staff members should stay in close proximity of the residents while “taking cover” as well. Every attempt should be made to maintain calm and to reassure the residents during the emergency.

H. Maintenance staff should be prepared to activate Shutdown Procedures if warranted by the situation

I. All other staff members should immediately secure their work areas by securing records, closing drawers and cabinets, shutting down electronic appliances, etc., and reporting to the nearest Area of Refuge away from all windows and doors.

J. Staff members working in an area near the residents should assist with relocating the residents and reassuring them about the situation.

K. Stairwells must be recognized as safe areas and used to relocate residents and visitors whenever possible.

L. If someone is trapped in debris, encourage them to:
   - Use a flashlight to signal location
   - Avoid unnecessary movement, so to not kick up dust
   - Cover nose and mouth with anything you have on hand and breathe through material. Dense-weave cotton material can act as a good filter
   - Tap on a pipe or wall so rescuers can hear location
- If possible, use a whistle to signal rescuers
- Shout only as a last resort. Shouting can cause a person to inhale dangerous amounts of dust

M. All residents, staff, and visitors should remain in their refuge area until the danger has passed. This determination should be made by the Incident Commander.

N. Upon issuance of the “All Clear” announcement, residents should be taken back to their rooms.

O. Account for all staff members and residents.

P. If the explosion occurs in or adjacent to the facility, the Incident Commander may decide to activate Emergency Activation Procedures.

Q. If evacuation occurs, staff members, residents, and visitors must be mindful of falling debris and not utilize elevators. They must not stand in front of windows, glass doors, or other potentially hazardous areas.

Emergency Job Tasks
Terrorism–Explosion

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Initiate Take Cover Procedures.
   b. Be prepared to activate the Incident Command System (ICS).
   c. Direct staff as needed.
   d. All visitors should be directed to Take Cover with the residents.
   e. Be prepared to contact authorities if injuries and damages occur.
   f. Be prepared to activate Evacuation Procedures if necessary.
   g. Ensure staff members and residents are accounted for and safe.

2. Nursing Staff
   a. Connect O₂ concentrators to all residents requiring oxygen.
   b. Relocate the residents to safe refuge. All visitors should be directed to Take Cover with the residents.
   c. Direct staff as needed.
   d. Take first aid supplies/medical supplies to designated Area of Refuge, time permitting.
   e. Remain calm to not upset the residents.
   f. Be prepared to activate Evacuation Procedures.

3. Certified Nursing Assistants
   a. Relocate the residents to safe refuge and stay in close proximity of the residents while taking cover as well.
   b. Remain calm to not upset the residents.

4. Management Staff of All Departments
   a. Secure work area by securing records, closing drawers, cabinets, shutting down electronic appliances, etc. and reporting to the nearest Area of Refuge away from all windows and doors.
   b. Direct staff as needed.
   c. Assist in relocating residents to safe refuge if possible.
   d. All visitors should be directed to Take Cover with the residents.
   e. Remain calm to not upset the residents.
   f. Assist Incident Commander as needed.
   g. Be prepared to activate Evacuation Procedures.
5. Maintenance
   a. Be prepared to activate Shutdown Procedures if warranted by the situation.
   b. Assist in relocating residents to safe refuge if possible.
   c. Remain calm to not upset the residents.
   d. Assist Incident Commander as needed.
   e. Be prepared to activate Evacuation Procedures.

6. Other Staff Members
   a. Secure work area by securing records, closing drawers, cabinets, shutting down electronic appliances, etc. and reporting to the nearest Area of Refuge away from all windows and doors.
   b. Assist in relocating residents to safe refuge if possible.
   c. Remain calm to not upset the residents.
   d. Be prepared to activate Evacuation Procedures.

Nuclear Blasts
A nuclear blast is an explosion with intense light and heat, a damaging pressure wave, and widespread radioactive material that can contaminate the air, water, and ground surfaces for miles around. A nuclear device can range from a weapon carried by an intercontinental missile launched by a hostile nation or terrorist organization, to a small portable nuclear devise transported by an individual. All nuclear devices cause deadly effects when exploded, including blinding light, intense heat (thermal radiation), initial nuclear radiation, blast, fires started by the heat pulse, and secondary fires caused by the destruction.

Hazards of Nuclear Devices
The extent, nature, and arrival time of these hazards are difficult to predict. The geographical dispersion of hazard effects will be defined by the following:
   - **Size of the device** – A more powerful bomb will produce more distant effects
   - **Height above the ground the device was detonated** – This will determine the extent of blast effects
   - **Nature of the surface beneath the explosion** – Some materials are more likely to become radioactive and airborne than others. Flat areas are more susceptible to blast effects
   - **Existing meteorological conditions** – Wind speed and direction will affect arrival time of fallout; precipitation may wash fallout from the atmosphere

Radioactive Fallout
Even if individuals are not close enough to the nuclear blast to be affected by the direct impacts, they may be affected by radioactive fallout. Any nuclear blast results in some fallout. Blasts that occur near the earth’s surface create much greater amounts of fallout than blasts that occur at higher altitudes. This is because the tremendous heat produced from a nuclear blast causes an updraft of air that forms the familiar mushroom cloud. When a blast occurs near the earth’s surface, millions of vaporized dirt particles also are drawn into the cloud. As the heat diminishes, radioactive materials that have vaporized condense on the particles and fall back to Earth. The phenomenon is called radioactive fallout. This fallout material decays over a long period of time, and is the main source of residual nuclear radiation.

Fallout from a nuclear explosion may be carried by wind currents for hundreds of miles if the right conditions exist. Effects from even a small portable device exploded at ground level can be potentially deadly.

Nuclear radiation cannot be seen, smelled, or otherwise detected by normal senses. Radiation can only be detected by radiation monitoring devices. This makes radiological emergencies different from
other types of emergencies, such as floods or hurricanes. Monitoring can project the fallout arrival times, which will be announced through official warning channels. However, any increase in surface build-up of gritty dust and dirt should be a warning for taking protective measures.

**Electromagnetic Pulse (EMP)**

In addition to other effects, a nuclear weapon detonated in or above the earth’s atmosphere can create an electromagnetic pulse (EMP), a high-density electrical field. An EMP acts like a stroke of lightning but is stronger, faster, and shorter. An EMP can seriously damage electronic devices connected to power sources or antennas. This includes communication systems, computers, electrical appliances, and automobile or aircraft ignition systems. The damage could range from a minor interruption to actual burnout of components. Most electronic equipment within 1,000 miles of a high-altitude nuclear detonation could be affected. Battery-powered radios with short antennas generally would not be affected. Although an EMP is unlikely to harm most people, it could harm those with pacemakers or other implanted electronic devices.

**Protection from a Nuclear Blast**

The danger of a massive strategic nuclear attack on the United States is predicted by experts to be less likely today. However, terrorism, by nature, is unpredictable.

If there were threat of an attack, people living near potential targets could be advised to evacuate or they could decide on their own to evacuate to an area not considered a likely target. Protection from radioactive fallout would require taking shelter in an underground area or in the middle of a large building.

In general, potential targets include:

- Strategic missile sites and military bases
- Centers of government such as Washington, DC, and state capitals
- Important transportation and communication centers
- Manufacturing, industrial, technology, and financial centers
- Petroleum refineries, electrical power plants, and chemical plants
- Major ports and airfields

The three factors for protecting oneself from radiation and fallout are distance, shielding, and time.

**Distance** – The more distance between you and the fallout particles, the better. An underground area such as a home or office building basement offers more protection than the first floor of a building. A floor near the middle of a high-rise building may be better, depending on what is nearby at that level on which significant fallout particles would collect. Flat roofs collect fallout particles, so the top floor is not a good choice, nor is a floor adjacent to a neighboring flat roof

**Shielding** – The heavier and denser the materials—thick walls, concrete, bricks, books, and earth—between you and the fallout particles, the better.

**Time** – Fallout radiation loses its intensity fairly rapidly. In time, you will be able to leave the fallout shelter. Radioactive fallout poses the greatest threat to people during the first two weeks, by which time it has declined to about one percent of its initial radiation level.

Remember that any protection, however temporary, is better than none at all, and the more shielding, distance, and time you can take advantage of, the better.

**Before a Nuclear Blast**

The following should be considered in advance of a nuclear blast:

- Find out from officials if any public buildings in your community have been designated as fallout shelters. If none have been designated, make your own list of potential shelters near
your home, workplace, and school. These places would include basements or the windowless center area of middle floors in high-rise buildings, as well as subways and tunnels.
- During periods of increased threat, ensure disaster supplies are adequate.

**If you are caught outside and are unable to get inside immediately:**
- Do not look at the flash or fireball—it can blind you.
- Take cover behind anything that might offer protection.
- Lie flat on the ground and cover your head. If the explosion is some distance away, it could take 30 seconds or more for the blast wave to hit.
- Take shelter as soon as you can—even if you are many miles from ground zero where the attack occurred, radioactive fallout can be carried by the winds for hundreds of miles.

Remember the three protective factors: distance, shielding, and time.

**After a Nuclear Blast**

Decay rates of the radioactive fallout are the same for any sized nuclear device. However, the amount of fallout will vary based on the size of the device and its proximity to the ground. Therefore, it might be necessary for those in the areas with highest radiation levels to shelter for up to a month.

The heaviest fallout would be limited to the area at or downwind from the explosion, and 80 percent of the fallout would occur during the first 24 hours.

People in most of the areas that would be affected could be allowed to come out of shelter within a few days and, if necessary, evacuate to unaffected areas.

Remember the following information:
- Keep listening to the radio and television for news about what to do, where to go, and places to avoid
- Stay away from damaged areas. Stay away from areas marked “Radiation Hazard” or “HAZMAT.” Remember that radiation cannot be seen, smelled, or otherwise detected by human senses.

_________________________ (facility name)

*Emergency Procedure*

**TERRORISM–NUCLEAR BLAST ATTACK**

The following procedure should be utilized in the event of a Nuclear Blast near ______________________ (facility name).

A. “CODE WHITE, a nuclear blast has occurred,” should be announced overhead. “Attention all staff members, residents, and visitors please remain in the facility until further notice.” Local radio announcements will give specific instructions whether an attack warning is issued or an incident has occurred.

B. Administrator and Director of Nursing _______________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

C. Facility management staff should report to the Incident Command Post for a briefing and instruction.

D. Activate the Incident Command System (ICS) to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.
E. Residents, visitors, and staff should close blinds and drapes and move away from windows and doors. Close and lock doors and windows. Initiate Shelter-in-Place Procedures.

F. If a threat warning is issued in advance, the facility should ensure disaster supplies are adequate for Sheltering in Place.

G. Instruct staff, residents, and visitors to remain in the facility until further notice from the local authorities.

H. Listen to battery-operated radio for information regarding the incident and specific instructions.

I. If staff members, residents, and visitors are caught outside and are unable to get inside immediately, instruct them to the following:
   - Do not look at the flash or fireball—it can blind you
   - Take cover behind anything that might offer protection
   - Lie flat on the ground and cover your head. If the explosion is some distance away, it could take 30 seconds or more for the blast wave to hit
   - Take shelter as soon as you can—even if you are many miles from ground zero where the attack occurred, radioactive fallout can be carried by the winds for hundreds of miles. Remember the three protective factors: distance, shielding, and time

J. Continue to monitor radio announcements for further instruction. The situation should only be deemed “under control” and safe by local and state authorities. At that point, the Incident Commander can declare the situation “safe” and back to normal operations.

K. Account for all staff members and residents.

**Emergency Job Tasks**

**Terrorism–Nuclear Blast**

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Listen to battery-operated radio for information regarding the incident and for specific instructions.
   b. Activate Recall Roster and alert management staff to report to the Incident Command Post.
   c. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   d. Should be responsible for activating the Shelter-in-Place Procedures until further notice from local and state authorities.
   e. Ensure staff members and residents are accounted for and safe.

2. Management Staff of All Departments
   a. Report to the Incident Command Post.
   b. Instruct staff members, residents, and visitors to remain in the facility.
   c. Close blinds and drapes and move away from windows. Close and lock doors and windows.
   d. Initiate Shelter-in-Place Procedures until further notice from the local authorities.
   e. Remain calm to not upset the residents.

3. Maintenance
   a. Report to the Incident Command Post.
   b. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   c. Instruct staff members to close blinds and drapes and move away from windows. Close and lock doors and windows.
   d. Initiate Shelter-in-Place Procedures until further notice from the local authorities.
e. Remain calm to not upset the residents.

4. Staff Members of All Departments
   a. Close blinds and drapes and move residents away from windows. Close and lock doors and windows.
   b. Initiate Shelter-in-Place Procedures.
   c. Remain calm to not upset the residents.

**Radiological Dispersion Device (RDD)**

Terrorist use of an RDD—often called “dirty nuke” or “dirty bomb”—is considered far more likely than use of a nuclear explosive device. An RDD combines a conventional explosive device—such as a bomb—with radioactive material. It is designed to scatter dangerous and sub-lethal amounts of radioactive material over a general area. RDDs appeal to terrorists because they require limited technical knowledge to build and deploy compared to a nuclear device. Also, the radioactive materials in RDDs are widely used in medicine, agriculture, industry, and research, and are easier to obtain than weapons grade uranium or plutonium.

The primary purpose of terrorist use of an RDD is to cause psychological fear and economic disruption. Some devices could cause fatalities from exposure to radioactive materials. Depending on the speed at which the area of the RDD detonation was evacuated or how successful people were at sheltering-in-place, the number of deaths and injuries from an RDD might not be substantially greater than from a conventional bomb explosion.

The size of the affected area and the level of destruction caused by an RDD would depend on the sophistication and size of the conventional bomb, the type of radioactive material used, the quality and quantity of the radioactive material, and the local meteorological conditions—primarily wind and precipitation. The area affected could be placed off-limits to the public for several months during cleanup efforts.

**Before a Radiological Dispersion Device**

The following should be considered in advance of an RDD:

There is no way of knowing how much warning time there will be before an attack by terrorists using an RDD, so being prepared in advance and knowing what to do and when is important.

To prepare for an RDD event, you should do the following:

- Find out from officials if any public buildings in your community have been designated as fallout shelters. If none have been designated, make your own list of potential shelters near your home, workplace, and school. These places would include basements or the windowless center area of middle floors in high-rise buildings, as well as subways and tunnels.
- If you live in an apartment building or high-rise, talk to the manager about the safest place in the building for sheltering and about providing for building occupants until it is safe to go out.
- During periods of increased threat increase your disaster supplies to be adequate for up to two weeks.

Taking shelter during an RDD event is absolutely necessary. There are two kinds of shelters—blast and fallout. The following describes the two kinds of shelters:

- **Blast shelters** are specifically constructed to offer some protection against blast pressure, initial radiation, heat, and fire. But even a blast shelter cannot withstand a direct hit from a nuclear explosion.
- **Fallout shelters** do not need to be specially constructed for protecting against fallout. They can be any protected space, provided that the walls and roof are thick and dense enough to absorb the radiation given off by fallout particles.

**During an RDD**

While the explosive blast will be immediately obvious, the presence of radiation will not be known until trained personnel with specialized equipment are on the scene. Whether you are indoors or outdoors, at home or at work, be extra cautious. It would be safer to assume radiological contamination has occurred—particularly in an urban setting or near other likely terrorist targets—and take the proper precautions. As with any radiation, you want to avoid or limit exposure. This is particularly true of inhaling radioactive dust that results from the explosion. As you seek shelter from any location (indoors or outdoors) and there is visual dust or other contaminants in the air, breathe though the cloth of your shirt or coat to limit your exposure. If you manage to avoid breathing radioactive dust, your proximity to the radioactive particles may still result in some radiation exposure.

If the explosion or radiological release occurs inside, get out immediately and seek safe shelter. Otherwise, if you are:

<table>
<thead>
<tr>
<th>Outdoors</th>
<th>Indoors</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Seek shelter indoors immediately in the nearest undamaged building.</td>
<td>• If you have time, turn off ventilation and heating systems, close windows, vents, fireplace dampers, exhaust fans, and clothes dryer vents. Retrieve your disaster supplies kit and a battery-powered radio and take them to your shelter room.</td>
</tr>
<tr>
<td>• If appropriate shelter is not available, move as rapidly as is safe upwind and away from the location of the explosive blast. Then, seek appropriate shelter as soon as possible.</td>
<td>• Seek shelter immediately, preferably underground or in an interior room of a building, placing as much distance and dense shielding as possible between you and the outdoors where the radioactive material may be.</td>
</tr>
<tr>
<td>• Listen for official instructions and follow directions.</td>
<td>• Seal windows and external doors that do not fit snugly with duct tape to reduce infiltration of radioactive particles. Plastic sheeting will not provide shielding either from radioactivity or from blast effects of a nearby explosion.</td>
</tr>
<tr>
<td></td>
<td>• Listen for official instructions and follow directions.</td>
</tr>
</tbody>
</table>

**After an RDD**

After finding safe shelter, those who may have been exposed to radioactive material should decontaminate themselves. To do this, remove and bag your clothing (isolating the bag away from you and others), and shower thoroughly with soap and water. Seek medical attention after officials indicate it is safe to leave shelter.

Contamination from an RDD event could affect a wide area, depending on the amount of conventional explosives used, the quantity and type of radioactive material released, and meteorological conditions. Thus, radiation dissipation rates vary, but radiation from an RDD will likely take longer to dissipate due to a potentially larger localized concentration of radioactive material.
Follow these additional guidelines after an RDD event:

- Continue listening to your radio or watch the television for instructions from local officials, whether you have evacuated or sheltered-in-place.
- Do not return to or visit an RDD incident location for any reason.

_________________________ (facility name)

Emergency Procedure

**TERRORISM–RADIOLOGICAL DISPERSION DEVICE (RDD)**

The following procedure should be utilized in the event of a RRD near ________________________ (facility name).

A. “CODE WHITE” should be announced overhead. **“Attention all staff members, residents, and visitors please remain in the facility until further notice.”** Sirens will be sounding in the community and/or local authorities will notify the facility. Radio announcements will give specific instructions regarding the need to evacuate.

B. Administrator and Director of Nursing ________________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

C. Facility management staff should report to the Incident Command Post for a briefing and instruction.

D. Activate the ICS to manage the incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of fire warrants, then appoint other positions of the ICS structure.

E. Residents, visitors, and staff members should close blinds and drapes and move away from windows and doors. Close and lock doors and windows.

F. Initiate Shelter-in-Place Procedures.

G. Turn off air conditioner, ventilation fans, furnace, and other air intakes as soon as possible.

H. Seal windows and external doors that do not fit snugly with duct tape to reduce infiltration of radioactive particles.

I. If a threat warning is issued in advance, facility should ensure disaster supplies are adequate for Sheltering-in-Place.

J. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.

K. Facility management staff should report to the Incident Command Post for a briefing and instruction.

L. Listen to battery-operated radio for information regarding the incident and specific instructions.

M. If staff members, residents, and visitors are outside, they should be instructed to breathe though the cloth of their shirts or coats to limit exposure. They must then seek shelter. In the event of a RDD near ________________________ (facility name), they should be instructed to:

   - **If they manage to avoid breathing radioactive dust, the proximity to the radioactive particles may still result in some radiation exposure.**

N. If staff members, residents, and visitors have been exposed to radioactive material, they must decontaminate themselves by:

   - Removing clothing and bagging it, isolating the bag away from others.
Showering thoroughly with soap and water.
Seeking medical attention after officials indicate it is safe to leave shelter.

O. Continue to monitor radio announcements for further instruction. The situation should only be deemed “under control” and safe by local and state authorities. At that point, the Incident Commander can declare the situation “safe” for re-entry and/or normal operations.

P. Account for all staff members and residents.

**Emergency Job Tasks**

*Terrorism–Radiological Dispersion Device (RDD)*

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. **Administrator/Incident Commander**
   a. Listen to radio and/or television for information regarding the incident and for specific instructions.
   b. Establish contact with Emergency Management Office if necessary.
   c. Activate Recall Roster and alert management staff to report to the Incident Command Post.
   d. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   e. Instruct staff to close blinds and drapes and move residents away from windows and doors. Close and lock doors and windows.
   f. Should be responsible for activating the Shelter-in-Place Procedures.
   g. Ensure staff members and residents are accounted for and safe.

2. **Management Staff of All Departments**
   a. Report to the Incident Command Post.
   b. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   c. Close blinds and drapes and move residents away from windows and doors. Close and lock doors and windows.
   d. Seal windows and external doors that do not fit snugly with duct tape to reduce infiltration of radioactive particles.
   e. Remain calm to not upset the residents.
   f. Activate Shelter-in-Place Procedures.

3. **Maintenance**
   a. Report to the Incident Command Post.
   b. Turn off the air conditioner, ventilation fans, furnace, and other air intakes.
   c. Seal windows and external doors that do not fit snugly with duct tape to reduce infiltration of radioactive particles.
   d. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   e. Remain calm to not upset the residents.
   f. Activate Shelter-in-Place Procedures.

4. **Staff Members of All Departments**
   a. Close blinds and drapes and move residents away from windows and doors. Close and lock doors and windows.
   b. Ensure residents and visitors remain in the facility until further notice from the local authorities.
   c. Remain calm to not upset the residents.
   d. Activate Shelter-in-Place Procedures.
Biological Threat

Biological agents are organisms or toxins that can kill or incapacitate people, livestock, and crops. The three basic groups of biological agents that would likely be used as weapons are bacteria, viruses, and toxins. Most biological agents are difficult to grow and maintain. Many break down quickly when exposed to sunlight and other environmental factors, while others, such as anthrax spores, are very long lived. Biological agents can be dispersed by spraying them into the air, by infecting animals that carry the disease to humans, and by contaminating food and water. Delivery methods include:

- Aerosols—Biological agents are dispersed into the air, forming a fine mist that may drift for miles. Inhaling the agent may cause disease in people or animals
- Animals—Some diseases are spread by insects and animals, such as fleas, mice, flies, mosquitoes, and livestock
- Food and water contamination—Some pathogenic organisms and toxins may persist in food and water supplies. Most microbes can be killed, and toxins deactivated, by cooking food and boiling water. Most microbes are killed by boiling water for one minute, but some require longer. Follow official instructions
- Person-to-person spread of a few infectious agents is also possible—Humans have been the source of infection for smallpox, plague, and the Lassa viruses

Children and older adults are particularly vulnerable to biological agents.

Before a Biological Attack

Consider installing a high efficiency particulate air (HEPA) filter in your furnace return duct. These filters remove particles in the 0.3 to 10 micron range and will filter out most biological agents that may enter the facility. If you do not have a central heating or cooling system, a stand-alone portable HEPA filter can be used.

Filtration in Buildings

Determine the type and level of filtration in the facility and the level of protection it provides against biological agents. The National Institute of Occupational Safety and Health (NIOSH) provides technical guidance on this topic in their publication *Guidance for Filtration and Air-Cleaning Systems to Protect Building Environments from Airborne Chemical, Biological, or Radiological Attacks*. To obtain a copy, call 1 (800) 35NIOSH or visit the National Institute for Occupational Safety and Health Web site and request or download NIOSH Publication 2003-136.

Using HEPA Filters

HEPA filters are useful in biological attacks. If you have a central heating and cooling system with a HEPA filter, leave it on if it is running or turn the fan on if it is not running. Moving the air in the facility through the filter will help remove the agents from the air. If you have a portable HEPA filter, take it with you to the internal room where you are seeking shelter and turn it on.

If you are in a facility that has a modern, central heating and cooling system, the system’s filtration should provide a relatively safe level of protection from outside biological contaminants.

HEPA filters will not filter chemical agents.

After a Biological Attack

In some situations, such as the case of the anthrax letters sent in 2001, people may be alerted to potential exposure. If this is the case, pay close attention to all official warnings and instructions on how to proceed. The delivery of medical services for a biological event may be handled differently to respond to increased demand. The basic public health procedures and medical protocols for handling exposure to biological agents are the same as for any infectious disease. It is important for you to pay attention to official instructions via radio, television, and emergency alert systems.
Emergency Procedure
TERRORISM–BIOLOGICAL ATTACK

The following procedure should be utilized in the event of a Biological Attack.

The basic public health procedures and medical protocols for handling exposure to biological agents are the same as for any infectious disease.

A. “CODE WHITE, a Biological Attack has occurred,” should be announced overhead. “Attention all staff members, residents, and visitors please remain in the facility until further notice.”

B. Administrator and Director of Nursing __________________________ (facility to fill in appropriate titles/positions) will be notified if a biological attack has occurred, if they are not aware or on the premises. The Recall Roster should be activated if warranted.

C. Individuals who find or become aware of an unusual and suspicious substance or package (please see the following information on Suspicious Packages) should notify the Administrator or highest ranking individual in the facility.

D. Facility management staff should report to the Incident Command Post for a briefing and instruction.

E. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.

F. In the event of a biological attack, public health officials may not immediately be able to provide information on what you should do. It will take time to determine what the illness is, how it should be treated, and who is in danger. Watch television, listen to the radio, or check the Internet for official news and information including signs and symptoms of the disease, areas in danger, if medications or vaccinations are being distributed, and where you should seek medical attention if needed.

G. The first evidence of an attack may be when symptoms of the disease caused by exposure to an agent are noticed. Be suspicious of any symptoms you notice, but do not assume that any illness is a result of the attack. Use common sense and practice good hygiene.

H. With suspicious envelopes and packages other than those that might contain explosives, take these additional steps against possible biological and chemical agents:
   1. Contact 911 and Emergency Services immediately. Do not disturb the package.
   2. Leave the room and close the door, or section off the area to prevent others from entering.
   3. Wash your hands with soap and water.
   4. List all people who were in the room or area when this suspicious letter or package was recognized. Give a copy of this list to both the local public health agencies and law enforcement officials for follow-up investigations and advice.

I. If exposure occurs with a biological agent:
   1. Remove and bag your clothes and personal items. Follow official instructions for disposal of contaminated items.
   2. Wash yourself with soap and water and put on clean clothes.
   3. Seek medical assistance as soon as possible when it is announced by the local authorities where to go to receive medical care. You may be advised to stay away from others or even be quarantined.
J. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.

K. Continue to listen for official instructions via radio, television, and emergency alert systems for further instructions.

L. Account for all staff members and residents.

**Suspicious Packages**

Be wary of suspicious packages and letters. They can contain explosives or chemical or biological agents. Be particularly cautious in the mail handling area and refrain from eating or drinking in that area.

Some typical characteristics postal inspectors have detected over the years, which ought to trigger suspicion, include parcels that:

- Are unexpected or from someone unfamiliar to you
- Have no return address, or have one that can’t be verified as legitimate
- Have protruding wires or aluminum foil, strange odors, or stains
- Show a city or state in the postmark that doesn’t match the return address
- Are of unusual weight given their size, or are lopsided or oddly shaped
- Are marked with threatening language
- Have inappropriate or unusual labeling
- Have excessive postage or packaging material, such as masking tape and string
- Have misspellings of common words
- Are addressed to someone no longer with your organization or otherwise outdated
- Have incorrect titles or titles without a name
- Are not addressed to a specific person
- Have hand-written or poorly typed addresses

**Emergency Job Tasks**

**Terrorism—Biological Attack**

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. **Administrator/Incident Commander**
   a. Contact 911 and Emergency Management Services if necessary. Upon arrival of authorities, establish contact with the officer in charge and relay all relevant information regarding the situation.
   b. Activate the Recall Roster and alert management staff to report to the Incident Command Post.
   c. Instruct all staff members to remain in the facility.
   d. Listen for official instructions via radio, television, and emergency alert systems for further instructions.
   e. Ensure staff members and residents are accounted for and safe.

2. **Management Staff of All Departments**
   a. Report to the Incident Command Post.
   b. Instruct staff members to remain in the facility with windows and doors closed.
   c. Follow instructions if exposure occurs.
   d. Listen for official instructions via radio, television, and emergency alert systems for further instructions.
   e. Remain calm to not upset the residents.
   f. Assist Incident Commander as needed.
3. Maintenance
   a. Report to the Incident Command Post.
   b. Instruct staff members to keep windows and doors closed.
   c. Follow instructions if exposure occurs.
   d. Listen for official instructions via radio, television, and emergency alert systems for further instructions.
   e. Remain calm to not upset the residents.
   f. Assist Incident Commander as needed.

4. Staff Members of All Departments
   a. Keep windows and doors shut.
   b. Ensure residents and visitors remain in the facility until further notice from the local authorities.
   c. Follow procedures if exposure occurs.
   d. Remain calm to not upset the residents.
   e. Assist Incident Commander as needed.

Chemical Attack

Chemical agents are poisonous vapors, aerosols, liquids, and solids that have toxic effects on people, animals, or plants. They can be released by bombs or sprayed from aircraft, boats, and vehicles. They can be used as a liquid to create a hazard to people and the environment. Some chemical agents may be odorless and tasteless. They can have an immediate effect (a few seconds to a few minutes) or a delayed effect (two to 48 hours). While potentially lethal, chemical agents are difficult to deliver in lethal concentrations. Outdoors, the agents often dissipate rapidly. Chemical agents also are difficult to produce.

A chemical attack could come without warning. Signs of a chemical release include people having difficulty breathing; experiencing eye irritation; losing coordination; becoming nauseated; or having a burning sensation in the nose, throat, and lungs. Also, the presence of many dead insects or birds may indicate a chemical agent release.

If staff members and residents are caught in or near a contaminated area, they should be instructed to:
   - Move away immediately in a direction upwind of the source.
   - Find shelter as quickly as possible.

After a Chemical Attack

Decontamination is needed within minutes of exposure to minimize health consequences. Do not leave the safety of a shelter to go outdoors to help others until authorities announce it is safe to do so.

A person affected by a chemical agent requires immediate medical attention from a professional. If medical help is not immediately available, decontaminate yourself and assist in decontaminating others.

Decontamination guidelines are as follows:
   - Use extreme caution when helping others who have been exposed to chemical agents
   - Remove all clothing and other items in contact with the body. Contaminated clothing normally removed over the head should be cut off to avoid contact with the eyes, nose, and mouth. Put contaminated clothing and items into a plastic bag and seal it. Decontaminate hands using soap and water. Remove eyeglasses or contact lenses. Put glasses in a pan of household bleach to decontaminate them, and then rinse and dry
   - Flush eyes with water
   - Gently wash face and hair with soap and water before thoroughly rinsing with water
   - Decontaminate other body areas likely to have been contaminated. Blot (do not swab or scrape) with a cloth soaked in soapy water and rinse with clear water
Emergency Procedure

TERRORISM--CHEMICAL ATTACK

The following procedure should be utilized in the event of a Chemical Attack.

A. “CODE WHITE, a Chemical Attack has occurred,” should be announced overhead. “Attention all staff members, residents, and visitors please remain in the facility until further notice.”

B. Administrator and Director of Nursing ___________________________ (facility to fill in appropriate titles/positions) will be notified if not on the premises. The Recall Roster should be activated if warranted.

C. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.

D. Facility management staff should report to the Incident Command Post for a briefing and instruction.

E. The most qualified staff member (in regard to the Incident Command System) on duty at the time will assume the Incident Commander position. If severity of incident warrants, then appoint other positions of ICS structure.

F. Residents, visitors, and staff members should close blinds and drapes and move away from windows and doors. Close doors and windows.

G. Initiate Shelter-in-Place Procedures. Ensure disaster supplies are adequate.

H. Turn off air conditioner, ventilation fans, furnace, and other air intakes.

I. Seal windows and external doors that do not fit snugly with duct tape and plastic sheeting.

J. Listen to radio for information regarding the incident and specific instructions.

K. If staff members, residents, and visitors have been exposed to chemical agents, decontamination is needed within minutes of exposure to minimize health consequences. Decontamination guidelines are as follows:
   1. Use extreme caution when helping others who have been exposed to chemical agents.
   2. Remove all clothing and other items in contact with the body. Contaminated clothing normally removed over the head should be cut off to avoid contact with the eyes, nose, and mouth. Put contaminated clothing and items into a plastic bag and seal it. Decontaminate hands using soap and water. Remove eyeglasses or contact lenses. Put glasses in a pan of household bleach to decontaminate them, and then rinse and dry.
   3. Flush eyes with water.
   4. Gently wash face and hair with soap and water before thoroughly rinsing with water.
   5. Decontaminate other body areas likely to have been contaminated. Blot (do not swab or scrape) with a cloth soaked in soapy water and rinse with clear water.
   6. Change into uncontaminated clothes. Clothing stored in drawers or closets is likely to be uncontaminated.
   7. Seek medical assistance as soon as possible for screening and professional treatment.

L. Continue to monitor radio announcements for further instruction. The situation should only be deemed “under control” and safe by local and state authorities.

M. Account for all staff members and residents.
Emergency Job Tasks
Terrorism–Chemical Attack

Specific tasks should be assigned to staff members during an emergency based on the following criteria:

1. Administrator/Incident Commander
   a. Listen to radio and/or television for information regarding the incident and for specific instructions.
   b. Establish contact with Emergency Management Office if necessary.
   c. Activate the Recall Roster and alert management staff to report to the Incident Command Post.
   d. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   e. Instruct staff to close blinds and drapes and move residents away from windows and doors. Close doors and windows. Activate Decontamination Procedures if necessary.
   f. Should be responsible for activating the Shelter-in-Place Procedures.
   g. Ensure staff members and residents are accounted for and safe.

2. Management Staff of All Departments
   a. Report to the Incident Command Post.
   b. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities.
   c. Close blinds and drapes and move residents away from windows and doors. Close and lock doors and windows.
   d. Seal windows and external doors that do not fit snugly with duct tape and plastic sheeting.
   e. Activate Decontamination Procedures if necessary.
   f. Remain calm to not upset the residents.
   g. Activate Shelter-in-Place Procedures.

3. Maintenance
   a. Report to the Incident Command Post.
   b. Turn off the air conditioner, ventilation fans, furnace, and other air intakes.
   c. Seal windows and external doors that do not fit snugly with duct tape to reduce infiltration of radioactive particles.
   d. Instruct staff members, residents, and visitors to remain in the facility until further notice from the local authorities. Activate Decontamination Procedures if necessary.
   e. Remain calm to not upset the residents.
   f. Activate Shelter-in-Place Procedures.

4. Staff Members of All Departments
   a. Close blinds and drapes and move residents away from windows and doors. Close and lock doors and windows.
   b. Ensure residents and visitors remain in the facility until further notice from the local authorities.
   c. Activate Decontamination Procedures if necessary.
   d. Remain calm to not upset the residents.
   e. Activate Shelter-in-Place Procedures.
15. Special Response Procedures

Special Response Procedures should be developed based on the outcome of the Hazard Vulnerability Assessment.

Special Response Procedures may include specific information pertaining to the following topics that may be partially addressed in other plans:

- Earthquake
- Loss of cooking ability
- Loss of emergency power
- Loss of elevator service
- Loss of information technology
- Loss of natural/propane gas service
- Loss of heating system
- Loss of oxygen, medical air, and vacuum supply
- Loss of parking/inability to commute to facility
- Loss of sewage service/toilet system
- Loss of steam pressure
- Loss of telephone service/internal communication
- Loss of water service/contamination of water supply
- Natural gas odor/leak
- Snow emergency/ice storm

*Place Copies of Facility’s Special Response Procedures Here.*