

# A Guide for Kansas Adult Care Facilities



## Disaster Response and Recovery Planning.

For the purpose of this document, it is assumed that the adult care facility is in compliance with all the regulations for licensure and operation set forth by the Kansas Department of Health and Environment and State Fire Marshall, as well as any applicable city and/or county codes and regulations.



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# FOREWORD

Disasters, whether natural or man-made, can occur any time of the year, anywhere in Kansas, bringing with them the potential for loss of life, destruction of property and business disruption. This document was last published in 1985, under the title Guidelines for Development: Emergency and Disaster Planning for Kansas Adult Care Homes. In a partnership effort, the Kansas Division of Emergency Management, Kansas Department of Health and Environment, Kansas Department on Aging, Kansas Department of Social and Rehabilitation Services, the Highway Patrol, the State Fire Marshal's office and the Kansas Division of Water Resources reviewed and updated this document. The intent of the redeveloped guide is to help administrators/operators of adult care homes develop a more comprehensive disaster response and recovery plan. For those facilities that already have a plan, this guide can be a tool to review them and assess their adequacy.

The information in this guide is to be used at the discretion of administrators/operators of each facility. This document on its own will not provide all the answers for disaster planning and business recovery needs, but it serves as a foundation, also offering information about additional resources to be accessed.

You will find in this guide general information on various aspects of business recovery. We offer you step-by-step advice on creating and maintain a comprehensive emergency management program. Whether the facility is a large or small skilled nursing facility, assisted living facility or corporate office, the concepts in this guide will apply. To begin, the administrator/operator need not have in-depth knowledge of emergency management. What is needed is the authority to create a plan and commitment from the chief executive officer or owners to make emergency management part of the corporate culture.

*Before beginning to develop the plan, study the suggestions offered in this guide. When reading through this guidebook, make notes as thoughts occur. If a portion of the guidance does not apply, skip over that portion. Conversely, add items not covered in the text, which would apply to the particular situation.*

## **An effective plan provides a number of essential benefits:**

- *It helps companies fulfill their moral responsibility to protect employees, the community and the environment.*
- *It facilitates compliance with regulatory requirements of Federal, State, and local agencies.*
- *It enhances a company's ability to recover from financial losses, regulatory fines, loss of market share, damages to equipment or business interruption.*
- *It reduces exposure to civil or criminal liability in the event of an incident.*
- *It enhances a company's image and credibility with residents, their families and employees.*
- *It may reduce insurance premiums.*
- *Staff gains the knowledge and confidence to properly respond to an emergency or disaster.*

**Preparedness is essential for the maximum protection of all persons in an adult care home. It is far better to have a functional plan and never need it than to need a plan and not have it.**



# Background Information

In this guide the terms “emergency” and “disaster” are used interchangeably. However, the implications of each term are different when it comes to community wide emergency management. Governmental emergency managers often refer to “emergencies” as any unplanned event that can cause deaths or significant injuries to employees, customers or the public; or that can shut down businesses, disrupt operations, cause physical or environmental damage, or threaten the facility’s financial standing or public image. Normally emergencies can be resolved with the use of local resources. To governmental emergency managers “Disasters”, on the other hand, are events that exceed the capability of local resources, including those available from other jurisdictions through mutual aid.

Emergency management is the process of preventing, preparing for, responding to, and recovering from emergencies. Preparing for emergencies is a dynamic process. Planning, though critical, is not its only component. Training, conducting drills or exercises, testing equipment and coordinating activities with the community are also important factors.

In this guide, we provide you a suggested format for your facility’s Disaster Response and Recovery Plan—focusing on general emergency activities that must be carried out. This guide is organized as follows:

## Section 1— Five (5) Step Planning Process

- Forming a planning team
- Plans and policies review
- Resource & Vulnerability analysis
- Developing a plan
- Implementing the plan

Section 2— Special Planning Considerations—Building emergency management capabilities such as life safety, property protection, communications and community outreach.

Section 3— References—Where to turn for additional information.

Section 4— Sample Forms.



# 5-Step Disaster Planning Process

## STEP 1—ESTABLISHING A PLANNING TEAM.

### AUTHORITY AND PLANNING GUIDANCE

The Chief Executive Officer or ownership should provide guidance and resources to a team charged with developing the plan. A mission statement that demonstrates commitment, defines the purpose, authority and level of empowerment is essential for success. The guidance should include an expected completion date.

Businesses use the terms “Disaster Response/Recovery Planning” and “Business Continuity Planning” to describe the policies and strategies of their emergency management system. Emergency management is not a one-person job. A successful Disaster Response and Recovery Plan calls for the involvement of most of the facilities’ staff and some outside players.

The size of the planning team depends on the size of the facility, requirements and resources. Members of the team should have an interest in the plan and be representative of the functional areas of the adult care facility.

### ROLE OF THE DISASTER RECOVERY COORDINATOR

The Disaster Recovery Coordinator is the person in charge of developing a Disaster Response and Recovery Plan. In the role of Disaster Recovery Coordinator, an individual assumes a tremendous responsibility on behalf of the adult care facility. This position must be able to interact at both senior staff and operational levels of the facility to ensure requirements from all critical functions are addressed during plan design and development. Additionally, this position is responsible for the plan being properly tested and maintained on an ongoing basis to ensure the safety of residents and protection of assets. The Disaster Recovery Coordinator must have intimate knowledge of the plan contents, and Disaster Recovery Team responsibilities.

A successful Disaster Recovery Coordinator must possess the following characteristics:

- Proven ability to make decisions and function well under pressure
- Understanding of business operations
- Respect and confidence of team leaders
- Project management skills
- Strong interpersonal skills
- Well organized
- Effective communicator
- Strong delegation skills
- Proven self starter
- Problem resolution skills

For the purpose of this guide, the Disaster Recovery Coordinator is assumed to be administrator/operator of the adult care facility.

## DISASTER RECOVERY TEAM

Developing a Disaster Recovery Team is the first step in the plan development process. Depending on the size of the team, a variety of leaders are assigned along with alternates. The Disaster Recovery Coordinator leads the team through the planning process, and through actual disaster events.

During the initial steps of the planning process, the team will focus on identifying recognized hazards - both internal and external - that may affect the facility. Although the types of hazards that may develop into emergency or disaster situations are too numerous to be considered individually, adult care facilities must be prepared to respond and recover regardless of the nature of the disaster.

Whether needing to develop a plan, or revising an existing one, the Disaster Recovery Coordinator and Disaster Recovery Team, should consult with a number of local agencies involved in emergency response. Such agencies include County Emergency Management (also called Civil Defense or Emergency Preparedness), law enforcement, fire department, and relief organizations (the American Red Cross, the Salvation Army, etc.). Planning in isolation, or planning on using other services without full consultation and consent, will weaken and/or compromise the planning effort.

An adult care facility's planning team may include:

- Administrator/operator
- Director of Nursing
- Other selected nurse and/or nurse aide
- Marketing/Public Relations
- Environmental Supervisor
- Human Resources
- Social Worker
- Maintenance
- Business Office
- Medical Records
- Dietary
- Local Emergency Manager
- Police/Fire (as needed)
- Others (as needed)

## STEP 2—PLANS AND POLICIES REVIEW

### REVIEW INTERNAL PLANS AND POLICIES

Documents that need to be looked at and considered include:

- Evacuation plans (such as flood and fire)
- Safety program
- Environmental policies
- Security procedures
- Insurance programs
- Finance and purchasing procedures
- Employee support policies
- Employee safety manuals
- Hazardous materials plan
- Risk management plan
- Capital improvement program
- Mutual aid agreements

### EMPLOYEE SUPPORT POLICIES

Employees are your company's most valuable assets. Consider the range of services that could be provided, or arranged for during disasters, including:

- Cash advances
- Salary continuation
- Flexible work hours
- Reduced work hours
- Crisis counseling

- Care packages
- Day care

### INSURANCE POLICIES

Most companies discover that they are not properly insured only after they have suffered a loss. Lack of appropriate insurance can be financially devastating. **Discuss the following topics with your insurance advisor to determine individual needs.**

- How will the property be valued?
- Does the policy cover the cost of required upgrades to code?
- How much insurance is required to carry to avoid becoming a co-insurer?
- What perils or causes of loss does the policy cover?
- What are the deductibles?
- What does the policy require the adult care facility to do in the event of a loss?
- What types of records and documentation will the insurance company want to see? Ensure your company safeguards those records in a place where they can be obtained after an emergency.
- To what extent is the facility covered for loss due to interruption of power?
- Is coverage provided for both on and off premises power interruption?
- Is the adult care facility covered for lost income in the event of business interruption because of a loss? Is there enough coverage? For how long is coverage provided? How long is the company covered for lost income if the facility is closed by order of a civil authority?
- To what extent is the adult care facility covered for reduced income due to residents not all immediately coming back once the facility reopens?
- How will the emergency management program affect the insurance rates?

#### **DO AN INSURANCE REVIEW**

*When was the last time you met with your insurance carrier to review all policies?*

### **LEARN ABOUT EMERGENCY PLANS IN YOUR COMMUNITY**

Ask government agencies, community organizations and utilities about potential emergencies and their plans for responding to them. Selected outside groups include:

- County Emergency Management
- Mayor and /or City Administrator
- Local Emergency Planning Committee (LEPC)
- Fire Department
- Police and Sheriff Department
- Emergency Medical Services organizations
- American Red Cross
- Salvation Army
- Mennonite Disaster Services
- National Weather Service
- Public Works Department
- City Planning Commission
- Telephone companies
- Electric utilities
- Neighboring businesses
- Primary suppliers/single source vendors



## IDENTIFY CODES AND REGULATIONS

Identify and consider applicable federal, state, local and other regulations, policies and procedures such as:

- Health Care Financing Administration (HCFA), US Health and Human Services Agency
- Kansas Department of Health and Environment (KDHE)
- State Fire Marshal
- Occupation Safety and Health Administration (OSHA)
- Zoning regulations
- Transportation regulations
- Corporate policies
- Other \_\_\_\_\_

## STEP 3—RESOURCE & VULNERABILITY ANALYSIS

### IDENTIFY INTERNAL RESOURCES AND CAPABILITIES

- Skilled Personnel
  - medical
  - hazardous materials
  - safety
  - other \_\_\_\_\_
- Equipment
  - fire protection and suppression equipment (fire extinguishers, range hood suppression, fire alarms)
  - communications equipment
  - first aid supplies
  - emergency supplies
  - emergency power
  - personnel protective equipment
  - resident wandering security systems
  - emergency generator and/or battery backup power
- Facilities
  - first-aid stations
  - emergency operations center
  - media briefing area
  - shelter areas
- Organizational capabilities
  - training
  - medical personnel
  - fire and tornado plans
  - employee support system
- Backup systems - Arrangements with other facilities to provide:
  - Payroll
  - Accounting
  - Communications
  - Information systems support
  - Emergency power
  - Shipping and receiving
- Other
  - \_\_\_\_\_

## IDENTIFY EXTERNAL RESOURCES

There are many external resources that could be needed in a disaster. In some cases, formal agreements may be necessary to define the adult care facility's relationship with the following:

- County emergency management office
- Fire departments
- Hazardous materials response organization
- Emergency medical services
- Hospitals
- Local Police and Sheriff
- Community Service Organizations
- Utilities
- Contractors/suppliers
- Insurance carriers
- Others \_\_\_\_\_

## HOW TO USE A VULNERABILITY ASSESSMENT CHART

In this guide, we use a simple Vulnerability Assessment Chart as a tool to assess the vulnerability of the facility by looking at the likelihood and potential impact of each hazard. The chart helps assess threats and resources using a numerical system. The lower the score the better.

### PHASE 1—LIST POTENTIAL EMERGENCIES (PAGE 12)

In the first column of the chart, list all emergencies that could affect the adult care facility—begin by including those identified in the county emergency plan. Consider internal and external emergencies to your facility, including those that have community-wide impact. Listed below are factors to consider and possible emergencies/disasters. **Check all that apply!**

#### **Natural**

- Fires
- Floods (proximity to floodplains and dams, storm water systems, sewer backflow)
- Severe weather (tornadoes, winter storms, straight-line winds, extreme heat, etc)
- Landslide
- Other \_\_\_\_\_

#### **Technological**

- Hazardous materials (proximity to highways; companies that produce, store, use or transport hazardous materials; in-house chemicals, etc)
- Transportation accidents (proximity to major transportation routes and airports)
- Utility outages (water and power)
- Proximity to nuclear power plants
- Explosion
- Safety system failure
- Telecommunications failure
- Computer system failure
- Power failure
- Heating/cooling system failure
- Emergency notification system failure
- Other \_\_\_\_\_

#### **Criminal**

- Workplace violence
- Terrorist threats
- Intruder
- Vandalism/theft

- Civil disorder
- Substance abuse

**Physical**—What types of emergencies could result from the design or construction of the adult care facility? Does the physical facility enhance safety?

- The physical construction of the facility
- Layout of the equipment
- Designated safe areas to protect against tornadoes/straight line winds

**Other**

- Resident elopement

**PHASE 2—ASSESS THE PROBABILITY**

In the Probability column, rate the likelihood of each emergency's occurrence. This is a subjective consideration. Use a simple scale of 1 to 5 with 1 as the lowest probability and 5 as the highest.

**PHASE 3—ASSESS THE POTENTIAL HUMAN IMPACT**

Analyze the potential human impact of each emergency—the possibility of death or injury. Use the same 1-5 rating scale.

**PHASE 4—ASSESS THE POTENTIAL PROPERTY IMPACT**

Consider the property for potential losses and damages. Again use the 1-5 rating. Consider the cost to replace, cost to set up temporary replacement or cost to repair.

**PHASE 5—ASSESS THE POTENTIAL BUSINESS IMPACT**

Consider the potential loss of market share and referrals. Rate 1-5 in Business Impact column.

Assess the impact of:

- Business interruption
- Employees unable to report to work
- Families, visitors and other customers unable to reach the facility
- Adult Care Facility in violation of contractual agreements
- Imposition of fines, other civil penalties or legal costs
- Interruption of critical supplies.

**PHASE 6—ASSESS INTERNAL AND EXTERNAL RESOURCES**

Next assess the ability of internal and external resources to respond. Continue to assign the 1-5 score. Consider each potential emergency/disaster from beginning to end and each resource that would be needed to respond. For each hazard ask these questions:

- Do we have the needed resources and capabilities to respond?
- Will external resources be able to respond to the adult care facility as quickly as we need them?

If the answers are yes, move on to the next assessment. If the answers are no, identify what can be done to correct the problem.

**PHASE 7—ADD THE COLUMNS**

Total the scores for each emergency/disaster. The lower the score the better. While this is a subjective rating, the comparisons will help determine planning and resource priorities.



## STEP 4 - DEVELOPING A PLAN

The Disaster Recovery Coordinator is responsible for maintaining a viable and proven Disaster Response and Recovery Plan, one that demonstrates the facility's ability to provide an adequate level of care by prioritizing functions after a disruption of services. **Maintenance** of the Plan is ongoing to reflect both changes that occur within the adult care facility. **Exercising** the plan must be a regular activity to ensure its adequacy. **Training** must also occur on a periodic basis to ensure staff awareness of their disaster recovery function. More extensive information on plan maintenance, exercise and staff training is included later in the guide.

### Responsibilities of the Disaster Recovery Coordinator:

1. Identification & review of critical tasks for health care services and business functions
2. Regular review and updating of all tasks, resources and procedures outlined in the plan
3. Distribution of plan materials to team leaders & off-site storage facility as appropriate
4. Change control system, ensuring changes to critical procedures, functions, and documentation are reflected in the plan
5. Contact with recovery team personnel to keep current on recovery support considerations
6. Liaison between disaster recovery teams & other departments on disaster recovery issues
7. Regular contact with the Disaster Recovery Team to review emergency responsibilities
8. Research, evaluate, recommend and implement internal and external solutions to recovery problems;
9. Maintain contracts for alternate sites, services or support requirements as defined in the Disaster Response and Recovery Plan
10. Test & exercise the Disaster Response and Recovery Plan, reporting results to management and updating as required.

Depending on the size of the adult care facility, and the scope and complexity of the Disaster Response and Recovery Plan, the Disaster Recovery Coordinator may delegate certain responsibilities to a Plan Manager to ensure the ongoing viability of the plan. This Plan Manager must:

- Work closely with all team members to ensure that plans are complete and accurately reflect the recovery requirements of the adult care home;
- Ensure that vendor agreements are current, especially those with suppliers of emergency services, materials or equipment--this will ensure that business functions will have the necessary support in recovery of critical functions and applications;
- Monitor operations and equipment changes occurring within the adult care home, to assess their impact on each team's ability to recover from a disaster;
- Assist the team members making changes in the functional areas of the plan; and
- Assist the Disaster Recovery Coordinator in implementing the Plan at the time of a disaster.

The Plan for a large adult care facility may be best divided into functional or team plans. Those business function representatives or teams will then be responsible for developing, updating and implementing their plans.

The functions may be divided into resident care, financial services, medical records, environmental, maintenance, food service, medications, etc.

## PLAN COMPONENTS

The adult care facility's plan communicates a level of commitment to continued health care services, and provides the structure to achieve that goal in any given disaster. The Plan should establish and de-

fine staff responsibilities and actions to protect life, provide continued care, and protect property in the facility following a disaster. The Plan must also provide for restoration of critical processes and capabilities within a desirable timeline, keeping in mind the resources available.

### EMERGENCY CALL LISTS

Lists of all persons - on and off site - who would be involved in responding to an emergency, their responsibilities and 24-hour telephone numbers.

### BUILDING AND SITE MAPS

- Utility shutoffs
- Water hydrants
- Water main valves
- Water lines
- Gas main valves
- Gas lines
- Electrical main distribution panel
- Electrical sub-panels
- Storm drains
- Sewer lines
- Location of each building (map)
- Floor plans
- Alarm pull stations, panel and enunciators
- Fire extinguishers
- Fire suppression systems (kitchen, other)
- Sprinkler system shut off and connections
- Exits
- Stairways
- Designated escape routes
- Restricted areas
- Hazardous materials (including cleaning, laundry and chemicals)
- High-value items

### RESOURCE LISTS

Develop lists of major resources (equipment, supplies, services) that could be needed in an emergency; mutual aid agreements with other health care facilities, companies and government agencies

### IDENTIFY CHALLENGES AND PRIORITIZE ACTIVITIES

- Establish specific goals and milestones.
- Make a list of tasks to be performed, by whom and when.
- Determine how to address the problem areas and resource shortfalls identified in the vulnerability analysis
- Other \_\_\_\_\_
- Audit program
- References to state/federal emergency planning requirements for adult facilities.

Another section should contain action plans that provide more detailed information on emergency procedures specific to a function or situation. Consider beginning this section of your Plan with the Disaster Alert Procedure and then include the Disaster Recovery Team followed by all other function specific chapters.

## PAGE NUMBERING

Each section or chapter in the plan must include page numbers. The title of the chapter along with the page number should be included to assure pages are easy to locate, even if they become separated from the rest of the chapter. You may want to begin each chapter with a separate Title Page and index for ease of maintenance and review. The entire plan should have an overall Table of Contents.

## FUNCTIONAL ORGANIZATION

Each chapter must be logically organized into the sequence from which the disaster recovery team expects to require information during a recovery effort. All staff training sessions should include instruction and practice on finding information as a means of reducing confusion during a recovery.

## SPECIAL PROCEDURES

Special procedures should be located at the back of each functional or team chapter and labeled as Attachments or Appendixes, to make important information easy to find in a crisis situation.

### Emergency Actions / Recovery Procedures

Emergency Actions must be assigned to specific individuals based on their ability to perform recovery activities. Qualified alternates must be pre-selected. Any change to these assignments must be based on qualifications.

### Hardware (Equipment, Computers and Peripherals)

All Disaster Response and Recovery Plans must be based on premises or assumptions that viable recovery strategies or alternatives exist. Procedures for installation and de-installation of equipment must be part of the Disaster Response and Recovery Plan.

### Security

Isolation of the incident scene must begin when the emergency is discovered. Staff should attempt to secure the scene and control access, but not at the risk of placing anyone in physical danger when perform these functions. Some basic security measures include:

- EMERGENCY LOCKDOWN--
  - Closing or locking doors and windows
  - Establishing temporary barriers with furniture after people have safely evacuated
- Dropping containment materials (absorbent pads, etc.) in the path of leaking materials
- Closing file cabinets or desk drawers

### Facility Shutdown

The shutdown of an Adult Care Facility is generally a last resort but always a possibility. Improper or disorganized shutdown can result in confusion, injury and property damage. Some facilities require only simple actions such as turning off equipment, locking doors and activating alarms. Others require complex shutdown procedures. Work with department heads to establish shutdown procedures. Include information about when and how to shut off utilities. Train personnel in shutdown procedures.

## Notification Process

The notification process within the Disaster Response and Recovery Plan is the tool to effective activation of emergency actions in order to meet target recovery timings. Employee names and telephone numbers are a critical part of the recovery operation. Employee alerts provide the means for checking the safety and availability of employees in a disaster situation. Employee notifications must be accurate to ensure if planned emergency actions (also called recovery procedures) are to succeed.

Notification must be made immediately to local emergency response agencies when an emergency has the potential to affect public health and safety.

- Establish procedures for employees to report an emergency
- Post emergency telephone numbers near each telephone, on employee bulletin boards and other prominent location
- Maintain an updated list of addresses and telephone and pager numbers of key emergency response personnel (from within and outside the facility)
- Listen for tornado, and other severe weather warning issued by the National Weather Service
- Determine government agencies' notification requirements in advance

## Personnel Functions

A functional list should be made designating staff duties. This list can be an appendix to the plan. At a minimum, assign all personnel responsibility for:

- Recognizing and reporting an emergency
- Taking security and safety measures for residents, property and facility
- Warning other employees in the area
- Evacuating safely
- Other \_\_\_\_\_

### When listing staff duties:

- Include all staff members
- Be detailed enough so that staff members know what is expected of them crisis
- Assign staff to the functions best suited to their training & normal work duties.

## Alarm System (Warning)

Each staff member should understand the warning system used, be it for an evacuation or any other disaster. Equipment must be available to fulfill the need and circumstances. For example, for deaf residents, equipment other than sound will be required. Regardless of the system used, all staff and residents must understand it. Spell out in the plan, what outside resources will be activated when the alarm is sounded, and which staff member is to call for outside assistance.

## Regrouping

A pre-arranged point of safety outside the facility should be designated in the event of an evacuation. All staff members should know the location. In case only a partial evacuation of the facility is required, an area within the facility must be designated as the point of safety for the evacuees and staff to congregate. This information can be contained in an appendix to the plan.



## External Traffic Control

Traffic around the adult care facility may be a problem in the event of a disaster. Recalled staff will be trying to enter the facility, outside resources may be in the area, and in the case of relocation, residents will be leaving the area. In addition, there are always curious onlookers wanting to find out or see what has happened. A staff member should be assigned the duty of traffic control to ensure that only those authorized are permitted to enter the facility or leave the area. It is important that these issues be discussed in planning meetings with local responders (law and fire). In this section, the plan should set out who and what will be allowed to enter and leave the areas as well as type of identification required.

## Family Communications

In an emergency, personnel will need to know whether their families are okay. Taking care of one's loved ones is always a first priority. Make plans for communicating with employee's families in an emergency. Also, encourage employees to:

- ❑ Consider how they would communicate with families in case they are separated from one another or injured in an emergency
- ❑ Arrange for an out-of-town contact for all family members to call in an emergency
- ❑ Designate a place to meet family members in case they cannot get home in an emergency.

## SITUATION ASSESSMENT

The plan should define the circumstances that would warrant its activation. Use the list of hazards listed in your vulnerability assessment as the "triggers" that would require the Disaster Response and Recovery Plan to come into play.

## **PLAN MAINTENANCE PROCESS**

Keeping the Disaster Response and Recovery Plan current is essential to guarantee its accuracy in a disaster situation. Attention to plan maintenance and updating is essential. Day-to-day operations are not immune to change. In response to these changes, operations recovery steps may have to be developed and inserted into the Disaster Response and Recovery Plan. The Plan must be updated to handle these situations.

## RESPONSIBILITIES

Some maintenance may be required based on changes in management philosophy or company goals. The Disaster Recovery Coordinator and the Disaster Recovery Team must review and update the Plan to respond to any such changes. Conduct a formal audit of the entire plan at least once a year.

Updating the total plan is the responsibility of the Disaster Recovery Coordinator. The Disaster Recovery Coordinator will maintain the sections dealing with management, administrative, and disaster alert functions of the plan. Function or team leaders will maintain their own sections of the Disaster Response and Recovery Plan, including responsibilities, checklists and procedures.

The Disaster Recovery Coordinator will incorporate any approved maintenance changes or updates and distribute changes to all plan holders.

## APPROVAL

The Disaster Recovery Coordinator, in collaboration with the Disaster Recovery Team will review and approve all major changes to the plan (depending on level of empowerment by home

office, governing board or ownership). The Disaster Recovery Coordinator should distribute an entire section to each responsible individual quarterly or semi-annually, to initiate the maintenance process.

Any proposed revisions relating to the management, administrative, and disaster alert functions of the Disaster Response and Recovery Plan need to be submitted in writing to the Disaster Recovery Coordinator. All proposed revisions to the team member's specific function in the Disaster Response and Recovery Plan must contain a brief explanation of the reasons for requesting the proposed change.

The Disaster Recovery Coordinator will review the proposed change. If the change is purely administrative (names, telephone numbers, etc.), the change should be made. If the change is of a technical nature or reflects a change in procedures or logistics, the Disaster Recovery Coordinator should present the proposed revision to Disaster Recovery Team for approval.

### CHANGE CONTROL

For the Disaster Response and Recovery Plan to remain effective, the adult care facility must implement and continually use a formal change control system. This means instituting a formal procedure whereby planned changes are reviewed for their implications before a decision is made to proceed.

Plan holders must be responsible for incorporating all approved revisions into their assigned copy to ensure that the manual is maintained as a viable and readied Disaster Response and Recovery Plan. Disaster Recovery Coordinators often request removed pages be returned to them to ensure both the receipt of the approved revisions by each authorized manual holder and the changing of obsolete pages.

### SCHEDULE

A quarterly or semi-annual review and update are reasonable in most cases. In addition to a yearly audit, evaluate and modify the plan at these times:

- After each training drill or exercise
- After each emergency
- When personnel or their responsibilities change
- When the layout or design of the facility changes
- When policies or procedures change

A tracking system is appropriate to distribute approved plan revisions. A sample Maintenance Transmittal Memo is included in this guidebook, which can be adapted to facility's needs.

## STEP—5 IMPLEMENTING THE PLAN

### INTEGRATE THE PLAN INTO REGULAR OPERATIONS

Look for opportunities to build awareness, to educate and train staff, to test procedures, to involve all levels of management, staff, residents, families and visitors, and the community in the planning process. Look for ways to make emergency management part of what the staff does on a day-to-day basis.

### CONDUCT TRAINING

Disaster awareness and training are essential. Parallel to the planning process, efforts should be made to develop a structured training program. Without it, staff members will have limited opportunities to learn and become proficient in the use of the plan and its related procedures.

The plan will be only as functional as the training program. As part of the training program, it is crucial to establish a rigid exercise schedule. Exercises, often referred to as "drills", are an excellent way to assess the effectiveness of organizational plans and develop the skills needed to execute those plans. Well-planned exercises will ensure that everyone in the facility, as well as outside resources, is knowledgeable about the plan and actions to be expected in the event of a disaster. Exercising the plan provides new staff the means to gain experience and make necessary adjustments.

Exercises should be frequent and be designed to validate functions and training of staff in every shift. These training exercises should test the facility's response to a variety of emergencies such as fire, floods, tornadoes, etc. Certain portions of the plan should be tested frequently. For example, emergency notification, evacuation procedures and warning system should be tested on a monthly basis. With some pre-arrangement with the County Emergency Management Coordinator, the adult care facility may be able to coordinate exercises with local emergency/disaster exercises.

When holding training sessions and exercises, keep a log showing when it was held (month, day, time), who participated, and the type of exercise. A critique of the exercise should be held as soon as possible. Encourage to discuss what went well, what could be done better, what should have happened, what parts of the plan need to be changed or upgraded, and what needs to be developed to meet unforeseen circumstances. The results of the critique should be written and kept for the record. An action plan and timeline to address resource shortfalls and needed planning changes should be developed. This action plan could serve as the basis for future exercises. **Use the Training Drills and Exercises**

### Special points of interest:

Ask yourself:

- How well does senior management support the responsibilities outlined in the plan?
- Have emergency planning concepts been fully incorporated into the facility's resident care, accounting, personnel and financial procedures?
- How can the adult care facility's processes for evaluating employees and defining job classifications better address emergency management responsibilities?
- Are there opportunities for distributing emergency preparedness information through corporate or facility newsletters, employee manuals or employee mailings?
- What kinds of safety posters or other visible reminders would be helpful?
- Do personnel know what they should do in an emergency?
- How can all levels of the adult care facility be involved in evaluating and updating the plan?

## TRAINING ACTIVITIES

**Orientation and Education Sessions**—These are regularly scheduled discussion sessions to provide information, answer questions and identify needs and concerns.

**Walk-through Drill**—The emergency management group and response teams actually perform their emergency response functions. The activity generally involves more people and is more thorough than a tabletop exercise.

**Evacuation Drill**—Personnel walk the evacuation route to a designated area where procedures for accounting for all residents and personnel are tested. Based on notes or problems, plans are modified.

## EXERCISE ACTIVITIES

**Tabletop exercises**—Members of the emergency management group meet in a conference room setting to discuss their responsibilities and how they would react to emergency scenarios. This is a cost-effective and efficient way to identify areas of overlap and confusion before conducting more demanding training activities.

**Functional Drills**—These drills test specific functions such as fire, tornado, emergency notifications, warning and communications procedures and equipment, though not necessarily at the same time. Personnel are asked to evaluate the systems and identify problem areas.

**Full-scale Exercise**—A real-life emergency situation is simulated as closely as possible. This exercise involves company emergency response personnel, employees, management and community response organizations.

### **Special points of interest:**

- How can all levels of management get involved in evaluating & updating the plan?
- Are problem areas and resource shortfalls identified in the vulnerability analysis being addressed?
- Does the plan reflect lessons learned from drills and actual events?
- Do staff members understand their respective responsibilities? Have new employees been trained?
- Does the plan reflect changes in the physical layout of the facility? Does it reflect new facility processes and services?
- Are photographs and other records of facility assets up to date?
- Is the facility attaining its training objectives?
- Have the potential hazards to the facility changed?
- Are the names, titles and telephone numbers in the contact lists current?
- Are steps being taken to incorporate risk management steps into other facility processes?
- Have community agencies and organizations been briefed on the plan? Are they involved in evaluating the plan?

## EMPLOYEE TRAINING

General training for all employees should address:

- Individual roles and responsibilities
- Information about threats, hazards and protective actions
- Notification, warning and communications procedures
- Means for locating employee family members in an emergency
- Emergency response procedures
- Evacuation, shelter and accountability procedures
- Location and use of common emergency equipment
- Emergency shutdown/lockdown procedures

## TRAINING FOR RESIDENTS

Involving residents in disaster awareness training, to the extent of their capabilities, is encouraged. Residents should be instructed regularly on response procedures for an emergency or disaster. Limited training and education should be provided on sounding alarms, alerting the staff and other residents, reporting fire hazards to the staff, and understanding their role during an emergency or disaster. Informed residents will feel more empowered, and suffer less fear and panic, during an emergency or disaster.

## **EMERGENCY OPERATIONS CENTER (EOC)**

The EOC serves as a centralized management center for emergency operations. It is normally located at the main nurse's station or facility office. The EOC staff members are to report immediately to its designated location or the Incident Control Center (ICC). If the designated EOC area is not accessible, have a secondary location designated. In case of the Disaster Recovery Coordinator's absence, the plan should establish a list (chain-of-authority) of who will take charge. Charts should be made for each shift. The Disaster Recovery Coordinator is responsible for front-line management of the incident, for tactical planning and execution, for determining whether outside assistance is needed and for relaying requests for internal resources or outside assistance through the EOC.

## **COORDINATION OF OUTSIDE RESPONSE**

Emergency responders in Kansas commonly use the Incident Command System (ICS) to direct response operations. The Incident Commander is responsible for the direction and control of all response operations at the scene. The Incident Commander will be in a position to provide the Disaster Recovery Manager with information on the nature of the threat, to help determine the need to evacuate the adult care facility. On the other hand, the Disaster Recovery Manager has important information to share with the Incident Commander about the medical needs of the residents, their general condition, and special transportation needs.

Learn more about the  
Incident Command  
System! For free training  
call the Kansas Division of  
Emergency Management  
(785) 274-1412

## **COMMUNICATIONS**

In your planning effort, consider the everyday functions performed by the adult care facility and the communications (both voice and data) used to support them. Consider the business impact if communications were inoperable— How would this impact the facility's emergency operations?

- Prioritize all facility communications. Determine which should be restored first in an emergency.
- Establish procedures for restoring communications systems
- Talk to the communications vendors about their emergency response capabilities
- Establish procedures for restoring services

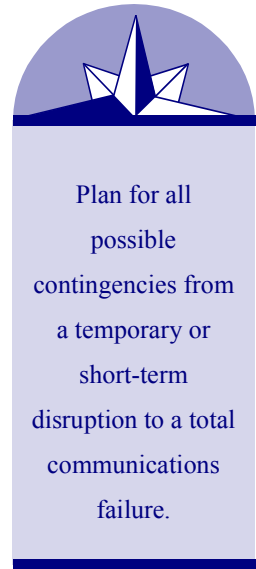
- ❑ Determine needs for backup communications for each business function. Options include messengers, telephones, portable microwave, amateur radios, point-to-point private lines, satellite, high-frequency radio

### EMERGENCY COMMUNICATIONS

Consider the functions the adult care facility will need to perform in an emergency, and the communications systems needed to support them.

Consider communications between:

- ❑ Emergency responders
- ❑ Responders and the Disaster Recovery Coordinator
- ❑ The Disaster Recovery Coordinator and the EOC
- ❑ The Disaster Recovery Coordinator and employees
- ❑ The EOC and outside response organizations
- ❑ The EOC and neighboring businesses
- ❑ The EOC and resident families and responsible party
- ❑ The EOC and employees' families
- ❑ The EOC and other customers and vendors
- ❑ The EOC and media



# Special Planning Considerations

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Disaster Mitigation  
Evacuation Planning  
Resident Relocation and Reception  
Property Protection  
Essential Record Preservation  
Records and Identification of Residents  
Community Outreach  
Public Information  
Recovery and Restoration  
Flood Recovery  
Utility Outages  
Accessing Resources  
Hazard Specific Considerations  
Fire  
Floods and Flash Floods  
Severe Weather  
Technological Emergencies  
Criminal Hazards

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# DISASTER MITIGATION

The easiest disaster to recover from is one that never happened. Disaster mitigation is an action taken to eliminate hazards, minimize exposure or reduce the effects of emergencies. The Disaster Recovery Coordinator should be actively involved in ensuring that potential disasters can be avoided through a concentrated disaster mitigation – or prevention - program. At a minimum the plan should include:

## SECURITY

Disaster mitigation begins with security. In this instance, security means protecting the residents, staff, facility, critical technology, equipment, and operations from disruption. Once disrupted, business functions be quickly regained and performed within an acceptable period of time and cost. Security procedures for protecting residents, staff; securing medications, data, technology and equipment should be regularly tested and reviewed to ensure that proper measures are in place.

## TECHNICAL AND OPERATIONS PLANNING

The Disaster Recovery Coordinator should be pro-actively involved when plans are being developed to change either technology or business operations. The Disaster Recovery Coordinator must be well informed concerning the type and usage of medical and business technology. Changing either of these factors can quickly result in an out-of-date plan. Either can also render the assigned recovery priorities, recovery requirements and recovery strategies inoperable. An outdated plan cannot be counted on to effectively assist recovery of a business following a disaster.

## SINGLE POINTS OF FAILURE

Adult care facilities depend on information technology systems must be mindful of the need to protect data centers. The Disaster Recovery Coordinator must be constantly on alert for those single elements whose failure can result in failure of the entire system. These points of failure can be both internal and external to the data center and to the business. For example, a telephone cable being cut will prevent users from accessing their critical applications, which can result in the business experiencing a disaster.

Single points of failure should be identified and eliminated during development of the Disaster Response and Recovery Plan. However, they have a way of regenerating themselves and reappearing when technology and operational changes take place. Therefore, the Disaster Recovery Coordinator must pro-actively review all changes to ensure this does not occur.

Consider physical retrofitting measures such as:

- Upgrading facilities to withstand the shaking and roof damage of high winds
- "Flood proofing" facilities by constructing flood walls or other flood protection devices
- Installing fire-resistant material and furnishings

Non-structural mitigation measures to consider include:

- Securing light fixtures and other items that could fall or shake loose in an emergency
- Moving heavy or breakable objects to low shelves
- Attaching cabinets and files to low walls or bolting them together
- Placing Velcro strips under typewriters, tabletop computers and television monitors
- Moving work stations away from large windows
- Installing curtains or blinds that can be drawn over windows to prevent glass from shattering onto residents and/or employees
- Anchoring water heaters and bolting them to wall studs.



## EVACUATION PLANNING

The nature of the disaster, and the health care needs of your residents, will determine the need to evacuate the facility. Depending on the situation, protective measures may range from moving some or all of the residents from a section to a safe area within the facility, to completely vacating the facility.

- Consult with the local fire department, County Emergency Manager and others who can offer valuable assistance in the development of evacuation policies and procedures.
- Make a simple list of the situations in which a total or partial evacuation would be made. This can be prepared by reviewing the list of potential hazards developed during the vulnerability analysis.
- Establish a clear chain of command.
- Identify who has the authority for ordering a partial or total evacuation of the facility. This should be clearly spelled out in the Plan. Ordinarily the administrator/operator (often in the role of the Disaster Response Coordinator) is the person responsible for making that decision. However, when the administrator/operator is not present, the responsibility must be delegated. All staff members shall understand this specific employee responsibility.
- Designate staff responsible for internal traffic flow during an evacuation to ensure that all traffic moves smoothly. Staff designated to these central areas should ensure that no one is allowed to return after a section is evacuated.
- Establish control points—staff assigned to these areas may have to face the oncoming traffic generated by the fire department, police department, rescue squad, etc.
- Control area staff must be adequately informed to direct outside resources to the source of the problem.
- Consider alternate evacuation routes, as the usual exit route may not be usable during an emergency.
- Delineate dangerous areas on a floor plan found in an appendix to the plan.



### STAFF RESPONSIBILITY

Outlining the responsibility of individual staff members is an important step in developing a Disaster Response and Recovery Plan. Responsibilities should be based on the response needed and the capabilities of the staff. Staff members should be assigned the functions which best suit their training and normal duties.

- Establish procedures for assisting persons with disabilities and those who do not speak English. HCFA Forms 672 and 802 provide valuable information about special transport needs.
- Designate personnel to continue or shut down critical operations while an evacuation is under way. They must be capable of recognizing when to abandon the operation and evacuate themselves.
- The staff must be well aware of their expected response duties and trained accordingly. Staff duties during an evacuation can be set out in an appendix.

### CALL BACK OF STAFF

Once the decision has been made to evacuate the facility, it may be necessary to call back staff from other shifts.

- A specific employee must be responsible for ensuring that the callback list and phone numbers*

*are current.*

- Establish an alternate call back system other than the telephone (i.e., radio or television). Whatever the system used, it is only effective if staff is aware of what they must do when they are called back.
- The facility's staff callback list needs to be included as an appendix to the plan.

### EVACUATION ROUTES AND EXITS

Many buildings have potential bottlenecks and dangerous areas:

- Train staff to make them aware of all potential bottlenecks
- Test these routes during training and exercise activities

### EVACUATION PRIORITY

Consider resident and employees' transportation needs for community-wide evacuations. In most cases, residents who are ambulatory will be evacuated first. **The staff should know the specific capabilities of residents and their mobility limitations.** Establish a system for accounting for residents and personnel.

- Does the width of hallways and doorways present problems?
- If the building has more than one floor, are the residents on all floors mobile enough to be evacuated through the hallways and stairways?

Planning should establish ahead of time the type of assistance residents will require in the event of an evacuation. Make a list of types of residents to be evacuated first, second, and third. Make a list of potential problems, and educate staff on how to manage the problem. Any time evacuation becomes an option, use information contained on the current **HCFA Forms 672 and/or 802** to help estimate transportation requirements and other special care considerations.

### **ASSEMBLY AREAS AND ACCOUNTABILITY**

Obtaining an accurate account of personnel after a site evacuation requires planning and practice.

- Designate assembly areas where residents and personnel should gather after evacuating.
- Take a head count after the evacuation.
- The names and last known locations of personnel not accounted for should be determined and given to the EOC. (Confusion in the assembly areas can lead to unnecessary and dangerous search and rescue operations.)
- Establish a method for accounting suppliers and customers.
- Establish procedures for further evacuation in case the incident expands.

### **SHELTER**

In some emergencies, the best means of protection is to take shelter within the adult care facility, also known as "Shelter-in-Place". Some situations might require an Emergency LOCKDOWN. For other emergencies, it will be better to seek shelter away from the facility into another public building, school or nursing facility.

- Consider the conditions for taking shelter, especially for a tornado.

### **Special points of interest:**

Designate primary and secondary evacuation routes and exits. Have them clearly marked and well lit. Post signs. Ensure that evacuation routes and emergency exits are:

- Clear and unobstructed at all times;
- Wide enough to accommodate the number of people being evacuated;
- Unlikely to expose evacuation personnel to additional hazards.

Design and Construction Guidance for Community Shelters (FEMA 361) is available for construction of safe rooms. For a free copy call 1-800-480-2520

- ❑ Identify shelter space in the facility and in the community. Establish procedures for sending residents and personnel to shelter.
- ❑ Determine needs for emergency supplies such as water, food, resident care and medical supplies
- ❑ Coordinate plans with local authorities.

## **FAMILY PREPAREDNESS**

Briefly explain disaster planning and readiness to the “Resident’s Council” and “Family Council”. Time spent orienting families and residents will reduce fear and confusion during an emergency.

Consider ways to help employees prepare their families for emergencies. This will increase their personal safety and help the adult care facility get back up and running. Those who are prepared at home will be better able to carry out their responsibilities at work.

Evacuation may not always be the right choice.

The importance of detailed planning for a possible evacuation cannot be overemphasized.

In the planning phase, all possible evacuation issues must be discussed with local authorities and an understanding reached.

# RESIDENT RELOCATION AND RECEPTION

## RELOCATION

If the facility is unsafe as the result of a disaster, the need to relocate may result in a decision to evacuate the facility. An example of an immediate evacuation would be rising floodwaters, which threaten to inundate the facility. Relocation might affect only a portion of the facility or the entire structure.

**Should the residents of the adult care home have to be relocated, the facility is required to have designated an alternate location.** Prior arrangements with other adult care homes in the area, assistance from KDHE, residents and relatives, are just a few of the details which need to be addressed. In addition, it is important to make sure that the alternate location is not already committed to any other emergency or disaster service use.

Another factor, which affects relocation, is time. The relocation may be temporary (just a matter of hours) or it could be a long-term event. If the facility is totally destroyed or unsafe, the Disaster Recovery Team will be faced with a permanent relocation situation. Each of the following should be given careful consideration when preparing this section of the plan.

### CIRCUMSTANCES

List the situations, which would dictate relocation of the resident population.

- Major fire
- Flood damage to building, equipment and contents
- Tornado destruction
- Other \_\_\_\_\_

### AUTHORITY

Identify the person(s) with the authority to initiate relocation of residents. Remember in planning that the facility may be relocating to another site. This arrangement should be in the form of a Statement of Understanding.

- Administrator/operator
- Chief Executive/Operating Officer
- Owner
- \_\_\_\_\_
- \_\_\_\_\_

### CALL BACK OF STAFF

Relocation of residents, much like evacuation, is a staff intensive activity. Again, the Disaster Response and Recovery Plan must include procedures for staff call back. *A specific employee must be responsible for ensuring that the staff call list and phone numbers are current.* Is recommended that an alternate call back system other than the telephone be established; i.e., radio or television. Whatever system is used, it is only effective if the staff is aware of what they must do when they are called back. The facility's staff callback list needs to be included as an appendix to the plan.

### EMERGENCY RELOCATION ROLE OF STAFF

Determine which staff will be required to accompany residents to the relocation site. The role of the staff in a disaster can be added as an Appendix to the Disaster Response and Recovery Plan.

### ESSENTIAL SUPPLIES/MATERIALS

A list of all vital supplies or materials, such as records, medical supplies, food, clothing, bedding, etc., should be prepared according to priorities. The Disaster Response and Recovery Plan should include procedures defining how materials will be transferred to the new location. The Statement of Understanding between the alternate adult care facility and relocation site must cover necessary supplies/materials, and a list of items available at the site, in addition to the costs involved in using those supplies.

### TEMPORARY DISCHARGE OF RESIDENTS

An alternative to relocation may be temporary discharge of some of the residents to the care of relatives, friends, etc. This requires pre-planning by maintaining close contact with the relatives and friends of the residents.

### STAFF RESPONSIBILITY

At the relocation site, the staff may have to perform additional duties, be reassigned different work hours than they normally work, or have to perform duties in a different manner than usual since they must work with the staff of the facility in which they are relocated. These possible changes in operational procedures should be discussed with the staff and incorporated into Statements of Understanding with the relocation facility.

### OUTSIDE RESOURCES

List all outside resources necessary to assist with the relocation of the residents. Many volunteer agencies can assist with transportation. If the plan calls for utilizing the services of volunteer agencies, it should be spelled out in a Statement of Understanding. If local government resources are needed to assist, arrangements should be established ahead of time, so that availability, source, circumstances, authority, and points of contact are included in this section of the plan.

## **RECEPTION**

Other adult care facilities may wish to incorporate the facility as a relocation site in the event they are involved in a disaster. This type of arrangement should be covered in a Statement of Understanding. Expansion of service or reception can be based on pre-arranged plans, which will provide the data necessary to handle the situation should it occur. List the facilities with reciprocal agreements. The following areas should be spelled out clearly in the agreement.

- Authority.
- Number of additional residents the facility can handle.
- Role of the staff.
- Safeguarding of records, etc.

## PROPERTY PROTECTION

Protecting facilities, equipment and vital records is essential to restoring operations once an emergency has occurred.

### PLANNING CONSIDERATIONS

Establish procedures for:

- Fighting fires
- Containing material spills
- Closing or barricading doors and windows
- Shutting down equipment
- Covering or securing equipment
- Moving equipment to a safe location
- Identify sources of backup equipment, parts and supplies. Designate personnel to authorize, supervise and perform a facility shutdown. Train them to recognize when to abandon the effort.
- Obtain materials to carry out protection procedures and keep them on hand for use only in emergencies.

### PROTECTION SYSTEMS

Determine the need for systems to detect abnormal situations, provide warning and protect property. Consider:

- Fire protection systems
- Lightning protection systems
- Water-level monitoring systems
- Overflow detection devices
- Automatic shutoffs
- Emergency power generation systems.
- Consult the property insurer about special protective systems.

## ESSENTIAL RECORDS PRESERVATION

Vital records include, but are not limited to:

- Resident medical records;
- Financial and insurance information;
- Engineering plans and drawings;
- Product lists and specifications;
- Employee, customer and supplier databases;
- Policy, Procedures and trade secrets;
- Personnel files.

Preserving vital records is essential to the quick restoration of operations. Analyzing vital records involves:

- Classifying operations into functional categories, e.g., resident care, finance, sales, ancillary support, administration
- Determining essential functions for keeping the business up and running, such as resident care, finance, etc.
- Identifying the minimum information that must be readily accessible to perform essential functions, e.g., resident care, collections, etc.
- Identifying the records that contain the essential information and where they are located
- Identifying the equipment, supplies and materials needed to access and use the information.

Next, establish procedures for protecting and accessing vital records. Among the many approaches to consider are:

- Labeling vital records
- Backing up computer systems
- Making copies of records
- Storing tapes and disks in insulated containers
- Storing data off-site where they would not likely be damaged by an event affecting the adult care facility
- Increasing security of computer equipment
- Arranging for evacuation of records to backup facilities
- Backing up systems handled by service bureaus (payroll)
- Arranging for backup power

## RECORDS AND IDENTIFICATION OF RESIDENTS

Continuity of services may depend on the action taken to safeguard business and medical records, which would be difficult or impossible to replace. In making decisions about which records to protect, it may wise to consult with your accounting, legal, technical advisers, the Kansas Department of Health and Environment, and the Kansas Department of Social and Rehabilitation Services. They can also provide guidance in establishing clear policies on the management of confidential records. Make a list of paper and electronic records to be saved. The methods of removal and/or transportation of these records should be listed in an appendix. Primary records to be protected are the current clinical records of residents.

Resident assessments (MDS's) submitted to the State depository will be available for recovery by contacting the Nursing Facility Services Program & Policy Commission, Kansas Department on Aging.

An additional factor in record keeping is the resident identification system developed in the event of a disaster. The adult care home should devise a system which will identify every resident should evacuation become necessary. Some methods of identification the facility may want to consider include the following:

- Clothing labels with name of resident, name of facility and address;
- An identiband (already labeled and ready to use) for special care residents;
- A photograph, kept in the resident's records, with pertinent information listed on the back;
- Special care needs data card which can be fastened securely to the resident's wheelchair, providing such information as name, social security number, address of facility, special medication needs and prescribed dosage, and next-of-kin and phone number, etc.

It is essential that the facility's list of residents is up-to-date and available to accompany a group evacuated. This list of residents can be kept at the facility's office. A staff member should be responsible for keeping lists up to date and ready to go at all times. The staff member assigned the responsibility for the emergency medication should have this list in the Functional Duties Appendix.

### Special points of interest:

- *Maintain complete and accurate records at all times to ensure a more efficient emergency response and recovery. Certain records may also be required by regulation or by the insurance carriers or prove invaluable in the case of legal action after an incident.*



## COMMUNITY OUTREACH

The adult care facility's relationship with the community will influence the ability to protect residents, personnel and property and return to normal operations.

### INVOLVING THE COMMUNITY

Maintain a dialogue with community leaders, first responders, government agencies, community organizations and utilities, including:

- Appointed and elected leaders
- Fire, police and emergency medical services personnel
- County Emergency Manager
- Local Emergency Planning Committee (LEPC) members
- Public Works Department
- American Red Cross
- Hospitals
- Telephone company
- Electric utility
- Neighborhood groups
- Other adult care facilities

Have regular meetings with community emergency personnel to review emergency plans and procedures. Talk about what the facility is doing to prepare for and prevent emergencies. Identify ways the adult care facility could help the community in a community-wide emergency. Look for common interests and concerns. Identify opportunities for sharing resources and information.

Conduct confidence-building activities such as facility tours. Do a facility walk-through with community response groups. Involve community fire, police and emergency management personnel in drills and exercises. Meet with your neighbors to determine how you could assist each other in an emergency.

### MUTUAL AID AGREEMENTS

To avoid confusion and conflict in an emergency, establish mutual aid agreements with local response agencies and businesses. These agreements should:

- Define the type of assistance
- Identify the chain of command for activating the agreement
- Define communications procedures.
- Include these agencies in facility training exercises whenever possible.

### COMMUNITY SERVICE

In a community-wide emergency, business and industry are often needed to assist the community with:

- Personnel
- Equipment
- Shelter
- Training
- Storage
- Feeding facilities
- EOC facilities
- Food, clothing, building materials
- Funding
- Transportation.

While there is no way to predict what demands will be placed on the facility's resources, give some thought to how the community's needs might influence adult care facility corporate responsibilities in an emergency. Also, consider the opportunities for community service before an emergency occurs.

## PUBLIC INFORMATION

When site emergencies expand beyond the facility, the community will want to know the nature of the incident, whether the public's safety or health is in danger, what is being done to resolve the problem and what was done to prevent the situation from happening.

Determine the audiences that may be affected by an emergency and identify their information needs.

Include:

- The public
- The media
- Employees and retirees
- Families and responsible parties
- Customers
- Contractors and suppliers
- Home office and shareholders
- Emergency response organizations
- Regulatory agencies (Kansas Department of Health and Environment and others)
- Appointed and elected officials
- Special interest groups
- Neighbors
- Unions

### MEDIA RELATIONS

In an emergency, the media are the most important link to the public. Try to develop and maintain positive relations with media outlets in the area. Determine their particular needs and interests. Explain the plan for protecting personnel and preventing emergencies.

Determine how the adult care facility will communicate important public information through the media in an emergency.

- Designate a trained spokesperson and an alternate spokesperson
- Set up a media briefing area
- Establish security procedures
- Determine a way to protect resident confidentiality
- Establish procedures for ensuring that information is complete, accurate and approved for public release
- Determine an appropriate and useful way of communicating technical information
- Prepare background information about the facility.

#### Special points of interest:

##### Do's

- Give all media equal access to information and time
- Conduct press briefings & interviews when appropriate
- Try to observe media deadlines.
- Escort media representatives to ensure safety.
- Keep records of information released
- Provide press releases when possible.

##### Don'ts

- Do not speculate about the incident.
- Do not permit unauthorized personnel to release information.
- Do not cover up facts or mislead the media.
- Do not place blame for the incident.

# RECOVERY AND RESTORATION

Business recovery and restoration, or business resumption, goes right to an adult care facility's bottom line--Maintaining resident commitment, keeping people employed and the business running.

## SPECIAL CONSIDERATIONS

Consider making contractual arrangements with:

- Health or adult care facilities for short or long-term resident placement
- Vendors for such post-emergency services as records preservation, equipment repair, earthmoving or engineering

Determine critical operations and make plans for bringing those systems back on-line. The process may entail:

- Repairing or replacing equipment
- Relocating some of or all of the operations to an alternate location
- Contracting operations on a temporary basis
- Inventory and Document assets. Take photographs or videotape the adult care facility to document company assets. Update these records regularly

## RESPONSE AND RECOVERY ALTERNATIVES

This guide suggest the development of a set of strategies the disaster team will follow to respond to an emergency situation. Strategies incorporated into the plan can help bring business operations back to normal soon after a disaster. The selection of an appropriate recovery strategy depends on the severity of a disaster and its impact on business operations. The adult care facility's Disaster Response and Recovery Plan should describe the adopted strategies in more detail. The following sample strategies are offered as a starting point.

### RECOVERY STRATEGY NUMBER 1

The facility has minor or no damage. Conditions require **immediate evacuation** and/ or relocation. Normal health care services can continue with minor modifications within 24 hours or as soon as the immediate threat passes. An example would be a flash flood or hazardous chemical spill threatening the facility.

### RECOVERY STRATEGY NUMBER 2

The facility has incurred minor damage. Normal health care services can continue with minor modifications to secondary support systems within 24-48 hours by repairing the equipment and activating minimal disaster support from designated service providers. The situation poses no threat to life and safety. Concentrate all resources toward repairing the facility. **Do not move to an alternate site.** Business processing may have to be done on a degraded basis depending on the capabilities of the data center.

### RECOVERY STRATEGY NUMBER 3

A portion of the facility has incurred minor to moderate damage. Normal health care activities are not compromised; however, some adjustments may be necessary. Normal service levels can be achieved in 4-5 days by repairing the facility/equipment. **Evaluate clinically-complex resident/patients and consider partial or full evacuation.** Concentrate all resources by establishing health care priorities utilizing the unaffected areas of the facility and equipment, activating moderate disaster support from designated service providers and mutual aid agreements. Outsourcing of limited support processes (laundry, meals, etc), and conducting adminis-

trative activities off-site (i.e. bookkeeping) may be needed.

#### RECOVERY STRATEGY NUMBER 4

The entire facility has incurred moderate damage. Normal health care services can be resumed on site in 6-30 days following structural and equipment repairs. Concentrate all resources toward contacting families of residents and finding adequate accommodations in other available adult care homes on a temporary basis. **Evacuate the site** and establish service operations at an alternate facility until the primary facility is operational. All business applications will be processed at an alternate site. (A period of 30 days allows the receiving adult care facility to consider the transferred resident as a respite admission)

#### RECOVERY STRATEGY NUMBER 5

The facility has incurred severe damage. Normal health care services can be achieved in 30+ days by repairing/replacing the equipment, and repairing the structure or constructing a new facility. Concentrate available resources toward contacting families of residents and finding adequate accommodations in other available adult care homes. The time required to construct/rebuild/repair a facility, may exceed the time acceptable to residents and families considering relocation back to the facility. Concentrate in providing accurate information on project completion, and helping the families recover any belongings affected. Business operations will be processed at an alternate site.

## CONTINUITY OF MANAGEMENT

It can be assumed that not every key person will be readily available or physically at the adult care home during or immediately after an emergency or disaster. Ensure that recovery decisions can be made without undue delay. Consult with your attorney regarding laws and corporate bylaws governing continuity of management.

Establish procedures for:

- Assuring the chain of command;
- Maintaining lines of succession for key personnel;
- Moving to alternate headquarters.

**Include these considerations in all exercise scenarios.**

## RESUMING OPERATIONS

Immediately after an emergency, take steps to resume operations.

- Establish a recovery team, if necessary.
- Establish priorities for resuming operations.
- Continue to ensure the safety of residents and personnel.
- Assess remaining hazards. Maintain security at the incident scene.
- Conduct an employee briefing.
- Conduct a briefing for residents and families.
- Keep detailed records. Consider audio recording all decisions. Take photographs of or video tape the damage.
- Account for all damage-related costs. Establish special job order numbers and charge codes for purchases and repair work.
- Follow notification procedures. Notify residents families. Notify employees' families about the status of personnel on the property. Notify off-duty personnel about work status. Notify insurance carriers and appropriate government agencies.
- Protect undamaged property. Close up building openings. Remove smoke, water and debris. Protect equipment against moisture. Restore sprinkler systems. Physically secure the property.

- Restore power.
- Conduct an investigation. Coordinate action with appropriate government agencies.
- Conduct salvage operations. Segregate damaged from undamaged property. Keep damaged goods on hand until an insurance adjuster has visited the premises. The material can be moved outside if it is seriously in the way and exposure to the elements will not make matters worse.
- Take an inventory of damaged goods. This is usually done with the adjuster, or the adjuster's salvor if there is any appreciable amount of goods or value. If you release goods to the salvor, obtain a signed inventory stating the quantity and type of goods being removed.
- Restore equipment and property. For major repair work, review restoration plans with the insurance adjuster and appropriate government agencies.
- Assess the value of damaged property. Assess the impact of business interruption.
- Maintain contact with customers and suppliers.

## ADMINISTRATION AND LOGISTICS

### ADMINISTRATIVE ACTIONS

Administrative actions prior to an emergency or disaster include:

- Establishing a written emergency management plan
- Maintaining training records
- Maintaining all written communications
- Documenting drills and exercises and their critiques
- Involving community emergency response organizations in planning activities

Administrative actions during and after an emergency or disaster include:

- Maintaining telephone logs
- Keeping a detailed record of events
- Maintaining a record of injuries and follow-up actions
- Accounting for residents, visitors and personnel
- Coordinating notification of family members of residents and personnel
- Issuing press releases
- Maintaining sampling records
- Managing finances
- Coordinating personnel services
- Documenting incident investigations and recovery operations.

### LOGISTICS

**Before** a disaster or emergency, logistics may entail:

- Acquiring equipment
- Stockpiling supplies
- Designating emergency facilities
- Establishing training facilities
- Establishing mutual aid agreements
- Preparing a resource inventory

**During** an emergency or disaster, logistics may entail the provision of:

- Providing utility maps to emergency responders
- Providing material safety data sheets to employees
- Moving backup equipment in place
- Repairing parts
- Arranging for medical support, food and transportation

- Arranging for shelter facilities
- Providing for backup power
- Providing for backup communications.

# FLOOD RECOVERY

Adapted from:

“A Prevention Guide to Promote Personal Health and Safety”, 1996

Centers for Disease Control and Prevention (CDC)

US Department of Health and Human Services

## INTRODUCTION

After a flood, the physical devastation to a community is obvious. But during the flood and its aftermath, there are some basic facts to remember that will help protect health and safety. This guide provides information that will help flood victims prevent disease and injury, and maintain good health in the days and weeks that follow.

### WATER QUALITY

Listen for public announcements on the safety of the municipal water supply. Questions about testing should be directed to the local health department or the Kansas Department of Health and Environment (KDHE).

### WATER FOR DRINKING AND COOKING

Safe drinking water includes bottled, boiled or treated water. KDHE or the local health department can make specific recommendations for boiling or treating drinking water in the area. Here are some general rules concerning water for drinking and cooking:

- ❑ Do not use contaminated water to wash dishes, wash and prepare food, or make ice. The precaution holds true for personal hygiene (brush teeth, wash hands, etc)
- ❑ If bottled water is used, know where it came from. Otherwise, water should be boiled or treated before use. Drink only bottled, boiled or treated water until the supply is tested and found safe.
- ❑ Boiling water kills harmful bacteria and parasites. Bringing water to a rolling boil for one minute will kill most organisms.
- ❑ Water may be treated with chlorine or iodine tablets, or by mixing six drops (1/8 tea spoon) of unscented, ordinary household chlorine bleach (5.25 percent sodium hypochlorite) per gallon of water. Mix the solution thoroughly, and let stand for about thirty minutes. This treatment will not kill parasitic organisms.
- ❑ Containers for water should be rinsed with a bleach solution before reusing them. Use water storage tanks and other types of containers with caution. For example, fire truck storage tanks, as well as previously used cans or bottles, may be contaminated with microbes or chemicals. Do not rely on untested devices for decontaminating water.

### FOOD SAFETY

Do not use food supplies that may have come into contact with floodwater.

- ❑ Discard any food without a waterproof container if there is any chance that it has come into contact with floodwater.
- ❑ Undamaged, commercially canned foods can be saved if the can labels are removed. Thoroughly wash the cans and then disinfect them with a solution consisting of one cup of bleach in 5 gallons of water. Re-label your cans, including expiration date, with a marker.

- Food containers with screw caps, snap lids, crimped caps (soda pop bottles), twist caps, flip tops, and home canned foods should be discarded if they have come into contact with flood waters because they cannot be disinfected. For infants, use **only** pre-prepared canned baby formula that requires no added water, rather than powdered formulas prepared with treated water.

### FROZEN AND REFRIGERATED FOODS

If the refrigerator or freezer will be without power for a long period:

- Seek freezer space in a store, church, school, or commercial freezer that has electrical service.
- Use dry ice -- 25 pounds of dry ice will keep a 10-cubic-foot freezer below freezing for 3-4 days. (Exercise care when handling dry ice, because it freezes everything it touches. Wear dry, heavy gloves to avoid injury.)
- Thawed food can usually be eaten or refrozen if it is still "refrigerator cold," or if it still contains ice crystals. To be safe, remember, "When in doubt, throw it out." Discard any food that has been at room temperature for two hours or more, and any food that has an unusual odor, color, or texture.
- A refrigerator will keep foods cool for about 4 hours without power, if it is unopened. Add block or dry ice to your refrigerator, if the electricity will be off longer than 4 hours.

### SANITATION AND HYGIENE

It is critical that everyone in an adult care facility practice basic hygiene during the emergency period. Hands must be washed with soap and water that has been boiled or disinfected:

- Before preparing or eating food
- After toilet use
- After participating in flood cleanup activities
- After handling articles contaminated with floodwater or sewage

Floodwaters may contain fecal material from overflowing sewage systems, and agricultural and industrial byproducts. Although skin contact with floodwater does not, by itself, pose a serious health risk, there is some risk of disease from eating or drinking anything contaminated with floodwater. Anyone with open cuts or sores should limit exposure to flood water, keeping as clean as possible by washing well with soap to control infection. If a wound develops redness, swelling, or drainage, seek immediate medical attention.

### **PRECAUTIONS WHEN RETURNING TO THE FACILITY**

- Electrical power and natural gas or propane tanks should be shut off to avoid fire, electrocution, or explosions.
- Try to return to the facility during the daytime so that you do not have to use any lights. Use battery-powered flashlights and lanterns, rather than candles, gas lanterns, or torches.
- If you smell gas or suspect a leak, turn off the main gas valve, open all windows, and leave the facility immediately.
- Notify the gas company and the police or fire department. Do not turn on the lights or do anything that could cause a spark. Do not return until advised by authorities it is safe to do so.
- The facility's electrical system may also be damaged. If anyone sees frayed wiring or sparks, or if there is an odor of something burning but no visible fire, immediately shut off the electrical system at the circuit breaker.
- Avoid any downed power lines, particularly those in water. Avoid wading in standing water, which also may contain glass or metal fragments.



- ❑ Consult the utility company about using electrical equipment, including power generators. Be aware that it is against the law and a violation of electrical codes to connect generators to the facility's electrical circuits without the approved automatic-interrupt devices.
- ❑ If a generator is on line when electrical service is restored, it can become a major fire hazard. In addition, the improper connection of a generator to the facility's electrical circuits may endanger line workers helping to restore power in the area.
- ❑ All electrical equipment and appliances must be completely dry before returning them to service. It is advisable to have a certified electrician check these items if there is any question.
- ❑ Do not operate any gas-powered equipment indoors.

## CLEANUP

- ❑ Walls, hard-surfaced floors, and many other household surfaces should be cleaned with soap and water and disinfected with a solution of 1 cup of bleach to five gallons of water.
- ❑ Be particularly careful to thoroughly disinfect surfaces that may come in contact with food, such as counter tops, pantry shelves, refrigerators, etc.
- ❑ All linens and clothing should be washed in hot water or dry-cleaned.
- ❑ For items that cannot be washed or dry-cleaned, such as mattresses and upholstered furniture, air dry them in the sun and then spray them thoroughly with a disinfectant.
- ❑ Steam clean all carpeting.
- ❑ If there has been a backflow of sewage into the adult care facility, wear rubber boots and waterproof gloves during cleanup.
- ❑ Remove and discard contaminated household materials that cannot be disinfected, such as wall coverings, cloth, rugs, and drywall.

## IMMUNIZATIONS

Outbreaks of communicable diseases after floods are unusual. However, the rates of disease present before a flood may increase because of decreased sanitation or overcrowding among displaced persons. Increases in infectious diseases that were *not* present in the community before the flood are not usually a problem.

- ❑ Upon receiving a puncture wound or a wound contaminated with feces, soil, or saliva, have a doctor or health department determine whether a tetanus booster is necessary based on individual records.
- ❑ Specific recommendations for vaccinations should be made on a case-by-case basis, or as determined by local and state health departments.

## MOSQUITOES

The large amount of pooled water remaining after the flood will lead to an increase in mosquito populations. Mosquitoes are most active at sunrise and sunset. The majority of these mosquitoes will be pests, but will not carry communicable diseases. Local, state, and federal public health authorities will be actively working to control the spread of any mosquito-borne diseases.

- ❑ To protect from mosquitoes, use window screens on the facility, and advise staff and residents to wear long-sleeved and long-legged clothing.
- ❑ Insect repellents containing DEET are very effective. Be sure to read all instructions before using DEET. Extreme care must be taken when using DEET on elderly—consult physician before applying. Products containing DEET are available from retail outlets and through local and state health departments.
- ❑ To control mosquito populations, drain all standing water left in containers around the adult care facility.

## SWIFTLY FLOWING WATER

If you enter swiftly flowing water, you risk drowning! Regardless of your ability to swim, swiftly moving shallow water can be deadly! Even shallow standing water can be dangerous for small children. Cars or other vehicles do not provide adequate protection from floodwaters. Cars can be swept away or may break down in moving water.

## ANIMALS

Flooding forces wild animals from their natural habitats. Many domestic animals are also without homes after the flood. Take care to avoid these animals because some may carry rabies. Remember, most animals are disoriented and displaced, too. Take the following precautions:

- Do not corner an animal.
- If an animal must be removed, contact local animal control authorities. The local and state health department can provide information about the types of wild animals that carry rabies in the area.
- Rats may be a problem during and after a flood.
- Take care to secure all food supplies and remove any animal carcasses in the vicinity by contacting local animal control authorities.
- If bitten by any animal, seek immediate medical attention.
- If bitten by a snake, first try to accurately identify the type of snake so that, if poisonous, the correct anti-venom may be administered.

## CHEMICAL HAZARDS

Use extreme caution when returning to the area after a flood. Be aware of potential chemical hazards that may be encountered during flood recovery. Floodwaters may have buried or moved hazardous chemical containers of solvents or other industrial chemicals from their normal storage places.

- If any propane tanks (whether 20-lb. tanks from a gas grill or household propane tanks) are discovered, do not attempt to move them. These represent a very real danger of fire or explosion.
- Call the local police or fire departments immediately.
- Car batteries, even those in floodwater, may still contain an electrical charge and should be removed with extreme caution by using insulated gloves. Avoid coming in contact with any acid that may have spilled from a damaged car battery.

## Sanitizing Flooded Laundry Equipment

When appliances have been immersed in floodwater, a qualified repairman should recondition them. After they have been reconditioned, sanitize them as follows:

### WASHER:

1. Unplug the washer and wipe off the outside of the washer and inside drum with a cloth dipped in a disinfectant solution of 1/2 cup chlorine bleach per gallon of water.
2. Remove washing machine filter and clean with the chlorine solution.
3. Rinse with a cloth dipped in clean water.
4. Pour a disinfectant such as chlorine, pine oil or phenolic, into the empty washing machine. Check the product label for the appropriate amount. Then complete a 15-minute wash cycle at the hot water setting.

## DRYER:

1. Unplug the dryer and wipe the drum with a cloth dipped in a disinfectant solution of 1/2 cup chlorine bleach per gallon of water. Be sure to wipe all areas of the drum, filter, dryer door and outside of dryer
2. Rinse with a cloth dipped in clean water
3. Leave the dryer door open until all parts are thoroughly dry--preferably overnight
4. When the drum is dry, plug in the dryer and resume normal service

In addition to disinfecting the washer and dryer, be sure to disinfect clothes baskets, work surfaces, and containers where clean, sanitary clothes will be placed. Keep clean, disinfected clothes and other textile items separate from those not yet clean, and away from surfaces likely to be contaminated.

**Note:** For best results remove all visible soil with an all-purpose cleaner before beginning the disinfecting process on an appliance.

## **SUMMARY**

The physical devastation that accompanies a flood is enormous. But as the floodwaters recede, there may be more threats to personal health and safety. By taking some basic precautions, injuries as well as some diseases can be prevented.

In the midst of all this water, remember that heat or cold can play a major role in health.

- ❑ Residents and staff must drink plenty of fluids, avoid caffeine, and do not wait to get thirsty.
- ❑ When possible, take a break. Take measures to prevent or reduce exhaustion in the staff. Do not add weather-related health problems, like heat stress or hypothermia, to the other problems.
- ❑ The weeks after a flood are going to be rough. In addition to physical health, everyone needs to take some time to consider mental health as well.
- ❑ Remember that some sleeplessness, anxiety, anger, hyperactivity, mild depression, or lethargy are normal and may go away with time. If staff or residents feel any of these symptoms acutely, seek some counseling. The Kansas Department of Health and Environment and local health departments will help find local resources, including hospitals or health care providers that may be needed.

In addition to the information provided in this guide, local and state health departments or emergency management agencies may issue health advisories particular to the location. For more information, contact the local health department or the Kansas Department of Health and Environment.

## UTILITY OUTAGES

### PLANNING CONSIDERATIONS

Identify all critical operations, including:

- Utilities including electric power, gas, water, hydraulics, municipal and internal sewer systems, wastewater treatment services.
- Security and alarm systems, elevators, lighting, life support systems, heating, ventilation and air conditioning systems, electrical distribution system.
- Medical equipment, pollution control equipment.
- Telephone and Communication systems, both data and voice computer networks.
- Transportations systems including air, highway, railroad and waterway.
- Determine the impact of service disruption.
- 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.

### TELEPHONE AND COMMUNICATION INTERRUPTIONS

An interruption to telephone and communication requires immediate response. One of the biggest problems is to determine whether the problem is with the telephone/communication provider or within the adult care facility. Many digital phone systems will not work when electric power fails. Additionally, circuit boards and the phones themselves may fail. Consult the telephone directory and systems manuals to troubleshoot the problem. Alternate telephone systems include pay phones, cell phones and others that may not be hooking into the facility system. Develop a troubleshooting plan of action. Telephone and communication equipment providers have a variety of maintenance plans available for the repair and/or replacement of equipment.

### UTILITY OUTAGES

Power failure, lack of gas or water, may require positive actions on the part of the staff of the adult care home. The cause and duration of the interruption will affect the type of responses. It may be nothing more than providing extra blankets for the residents to keep warm. However, it could be evacuation of the facility. Whether or not a particular adult care home can continue to operate when faced with a sudden and prolonged loss of one or more of the primary utilities, depends on the degree of limitation of normal operations and the amount of pre-planning on the part of the facility. Any time evacuation becomes an option, use information contained on the current **HCFA Form 672 and/or 802** to help estimate transportation requirements.

Loss of utilities may be caused by any number of natural and man-made emergencies. In the event of or prior to a utility outage, the following actions should be taken.

#### WATER OUTAGE:

- Develop water emergency procedures.
- Call local water company emergency service.
- Immediately restrict use of available water in the facility.
- Inventory the community for the location of water tanks and tankers to rent or borrow.
- Know from whom or where in the community the facility can purchase bottled and bulk containers of water and ice.

- Determine the number of gallons of safe (potable) drinking water that will be required each day for residents and staff. A general guideline for determining baseline daily fluid needs is to multiply the resident's/patient's body weight in kilograms (kg) x 30ml (2.2lbs = 1kg), except for residents with renal or cardiac distress, or other restrictions based on physician orders. For example, the average 150 lb. person will require about 2,000ml (about ½ gallon) per day.
- Potable water will be required for washing dishes, personal hygiene and resident care, etc.
- Non-potable water will be required to flush toilets and for cleaning.
- Inform the local Emergency Management Coordinator of the problem. If the outage is to be lengthy, request temporary use of water pumps and tankers.
- If the local Emergency Management cannot provide water pumps and tankers, ask them to contact the Kansas Division of Emergency Management for assistance.
- If auxiliary water is not available, and the water outage is to be of extended duration, evacuate residents in accordance with your evacuation plan.
- Call on volunteer resources as needed.

### GAS OUTAGE:

- Call local gas company emergency service.
- Appoint a staff member to turn off the gas at the main valve.
- As a safety measure, open windows to prevent gas accumulation and possible explosion.
- Do not turn on any light switches, instead, use a flashlight.
- Lanterns, a torch, electrical sparks, and cigarettes are flammable and could cause an explosive fire.
- If there is an alternate bottled gas emergency system installed, have it activated.
- Inventory your community for the location of bottled gas for sale.
- In the winter months, make sure the residents are warmly dressed when there is a gas outage (if the facility is heated by gas).
- If the decision is made to evacuate residents, do so in accordance with the evacuation plan.
- Inform the local Emergency Management Coordinator of the problem.
- Call on volunteer resources as needed.

### POWER OUTAGE:

- Call local power company emergency service.
- Make sure that flashlight and portable radios are in good working order.
- In the winter months, make sure the residents are warmly dressed when the electricity is off (if the facility is heated by electricity).
- Inventory the community for the location of generators to rent or borrow.
- Inform the local Emergency Management Coordinator of the problem. If the outage is to be lengthy and the facility does not have an emergency generator, request temporary use of one.
- If the local Emergency Management Coordinator cannot provide a generator, ask them to contact the Kansas Division of Emergency Management for assistance.
- If the decision is made to evacuate residents, do so in accordance with your evacuation plan.
- Call on volunteer resources as needed.

### LOCATION OF MAIN CONTROLS FOR UTILITIES

A trained staff member, and an alternate, should be designated and available at all times, to be able to operate utility controls such as water, gas and power into the adult care facility. The Disaster Response and Recovery Plan should clarify who has the authority to turn off the utilities and under what circumstances. The location of all utility controls should be on a floor plan of the facility.

### OPERATION OF EMERGENCY GENERATOR

Adult care facilities depend on power services (electrical and gas) to provide adequate services to residents. Having a dedicated emergency generator ensures the facility's ability to continue to operate uninterrupted in case of power failure. Generators must be tested regularly. The Disaster Response and Recovery Plan should outline the persons trained and responsible for operating this equipment. Clear instructions must be posted near the generator explaining how to activate it and how to maintain it. Generator systems must meet life safety codes as specified in NFPA 99. Contact the Kansas Fire Marshal's Office for additional information.

Kansas Department of Health and Environment regulations for licensure and operation of adult care facilities require availability of emergency electric service. (See Kansas Department of Health and Environment regulations for licensure and operations for specific requirements.)

## ACCESSING RESOURCES

Emergencies or disasters can occur as a result of an isolated incident or widespread disaster. Disaster Recovery Coordinators must be aware of the particular circumstances that may make State and Federal resources available during emergencies.

### AT THE LOCAL LEVEL

Kansas law requires all counties to designate an Emergency Manager and an agency to coordinate local response to disasters. The Emergency Manager is responsible for ensuring the jurisdiction has an adequate and updated Emergency Operations Plan. The Emergency Manager advises elected officials on the status of local resources and possible need for outside assistance.

Early in the disaster, Emergency Managers are responsible for assessing the damage (number of deaths, injuries; damage to infrastructure and buildings; economic impact) and reporting that information to the Kansas Division of Emergency Management. Emergency Managers must be aware of all local resources available in order to assess the need for outside assistance.

Based on potential or actual damages County Commissioners, or their designee, may issue a Local Disaster Declaration.

### AT THE STATE LEVEL

Issuing a Local Disaster Declaration is the first step in requesting State or Federal disaster assistance. The request must be directed through the local Emergency Manager to the Kansas Division of Emergency Management. The request for assistance must be validated by documenting that local resources are insufficient to deal with the emergency. Local resources include county/city owned resources, donations, private sector resources (donated or purchased), and mutual aid agreements. Based on this information, the Governor may issue a State Disaster Declaration.

Some State assistance may be available to local government without a State Disaster Declaration. This assistance is limited to preventing impending risk to life and/or property. Again, local resources must be utilized first and be rendered insufficient. The type of assistance involved may include equipment that is located in State area offices and expertise of State employees.

It takes time to make State or Federal assistance available. Emergency plans for adult care facilities are vital. Adult care facilities are encouraged to establish a working relationship with the County Emergency Manager, and become familiar with locally available emergency resources.

#### KANSAS NATIONAL GUARD

The Kansas National Guard (KSNG) is a State resource. National Guard assistance must be requested through the County Emergency Manager to the Kansas Division of Emergency Management. National Guard resources require time to activate, and will not be deployed when private sector resources are available.

Names and telephone numbers of person and agencies commonly required in emergencies **should also be posted beside the employee telephones**, in compliance with the Kansas Department of Health and Environment regulations. Remember to update contact information at least quarterly.

It is important that the adult care facility **does not** include the National Guard as a routine resource in its Disaster Response and Recovery Plan.

## AT THE FEDERAL LEVEL

If the disaster is of such magnitude that State resources are insufficient to respond to the degree needed, the Governor will request a Federal (Presidential) Disaster Declaration through the Federal Emergency Management Agency (FEMA). FEMA evaluates the disaster data and makes a recommendation to the President.

The time it takes for Federal assistance to be available may vary greatly. It depends on the magnitude of devastation, percentage of insurance coverage in the area, the time it takes to conduct necessary damage assessments, percentage of loss per capita, and the speed in which the disaster evolves.

## OTHER RESOURCES

A variety of other resources may be available through mutual aid agreements, volunteer agencies, and vendors. The specifics of such resources must be evaluated by the Disaster Recovery Coordinator and the Planning Team on a case by case basis. Specific steps to secure such resources must be clearly outlined in the Disaster Response and Recovery Plan.

### STATEMENTS OF UNDERSTANDING

At a minimum the following should be included in all agreements that the facility enters into with other adult care homes and volunteer disaster relief agencies:

- Services that will be provided
- Length of time the services will be provided
- Cost of the service, if any
- Method of notification that services are required
- Staff member who is authorized to request outside assistance
- The number of residents that can be handled.

If the agreement is *only* with another facility, the above as well as the following should also be addressed in the statement of understanding:

- Is the agreement reciprocal?
- What is the method to safeguard records and medication?
- What items are available for use in the other facility (cost or free)?
- What items and supplies will accompany the residents?
- What is the role of the staff from the transferring facility?

The National Emergency Management Association estimates that only 10% of requests for Federal assistance are approved. There are no guarantees that a Federal (Presidential) disaster declaration will be issued.



<b>EMERGENCY CONTACT</b>	<b>NUMBER</b>	<b>OTHER</b>
Police Department		Emergency Number
Sheriff's Department		Emergency Number
Security Company		Emergency Number
Kansas Highway Patrol		Emergency Number
Fire Department		Emergency Number
Fire Alarm Service/Monitoring		Emergency Number
Ambulance Company		Emergency Number
Mutual Aid Agreement		Emergency Number
City Emergency Manager		Emergency Number
County Emergency Manager		Emergency Number
Kansas Division of Emergency Management	785-296-3176	Emergency Number
	785-274-1431	Publications & Training
Mental Health Center		Emergency Number
Local Health Department		Emergency Number
KS Department of Health and Environment	785-296-1240	<b>Office Hours</b>
Area Agency on Aging		Emergency Number
Kansas Department on Aging	785-296-4896	<b>Office Hours</b>

Security

Fire  
Services

Transport

Emergency Mngmt.

Health/  
Aging

<b>EMERGENCY CONTACT</b>	<b>NUMBER</b>	<b>OTHER</b>
State Long Term Ombudsman	785-296-3017	Office Hours
Local Social & Rehabilitation Services		Emergency Number
KS Dept of Social & Rehabilitation Services	785-296-3981	Office Hours
Hospital		Emergency Number
Hospital		Emergency Number
Hospital		Emergency Number
Poison Control Center		Emergency Number
City Building Inspection		Emergency Number
County Building Inspection		Emergency Number
Utility Contacts:		Emergency Number
Water		
Gas		Emergency Number
Power		
		Emergency Number
Waste Disposal		
		Emergency Number
Bio-Hazard Disposal		
Other		Emergency Number

Health/Aging

Inspections

Utilities

Disposal

## HAZARD SPECIFIC CONSIDERATIONS

As mentioned at the beginning of this guide, any event that disrupts day-to-day operations has the potential of becoming an emergency or disaster for an adult care facility. The first part of this section is intended to provide basic information on the types of hazards listed, and suggested emergency actions to include in the Disaster Response and Recovery Plan.

### Natural

- Fires
- Floods (proximity to floodplains and dams, storm water systems, sewer backflow)
- Severe weather (extreme wind events, winter storms, extreme heat, winter storms, etc)
- Landslide
- Other \_\_\_\_\_

### Technological

- Hazardous materials (proximity to highways; companies that produce, store, use or transport hazardous materials; in-house chemicals, etc)
- Transportation accidents (proximity to major transportation routes and airports)
- Utility outages (water and power)
- Proximity to nuclear power plants
- Explosion
- Safety system failure
- Telecommunications failure
- Computer system failure
- Power failure
- Heating/cooling system failure
- Emergency notification system failure
- Other

### Criminal

- Workplace violence
- Terrorist threats
- Intruder
- Vandalism/theft
- Civil disorder
- Substance abuse

**Physical**—What types of emergencies could result from the design or construction of the adult care facility? Does the physical facility enhance safety?

- The physical construction of the facility
- Layout of the equipment
- Designated safe areas to protect against tornadoes/straight line winds

### Other

- Resident elopement

Before starting this section, the Disaster Recovery Coordinator and the Disaster Recovery Team should agree on the events have the potential of affecting the facility. The Plan should focus on those that hazards/situations.

Specific procedures for the above must be addressed in the Disaster Response and Recovery Plan, because of the likelihood that these types of situations may affect the adult care facility at some time. These emergencies also have the greatest potential for causing economic loss, injuries, and loss of life.

Hazards that represent minimal or negligible risks, or which occur infrequently, and cause few damage claims are not included in this document. For example, earthquake hazards have been excluded because the US Geological Survey and the Kansas Geological Survey agree the potential for damage due to earthquake activity in Kansas is low to moderate.

## FIRE

Perhaps the biggest threat to any adult care facility is that of fire. The plan should place extensive emphasis on the prevention and control of fire. The safety of residents, visitors and staff alike will depend upon the staff's knowledge and response to a fire situation.

The purpose of fire drills is to test the efficiency and response of staff. Fire drills should be well thought out and planned to simulate possible actual conditions. They must be held at varying times (once per shift per quarter), but should also use different means of exit, with the assumption being that different exits may not be accessible because of smoke or fire.

Adult care facility residents have, in many cases, varying degrees of physical disabilities, and their evacuation may present some difficulties. Movement of the infirm or bed-ridden residents to safe areas or to the exterior of the facility is not required for fire drills.

### PLANNING CONSIDERATIONS

Consider the following when developing the plan:

- Meet with the fire department to talk about the community's fire response capabilities. Talk about adult care facility operations. Identify processes, hazard areas and materials that could cause or fuel a fire, or contaminate the environment in a fire.
- Have the facility inspected for fire hazards. Ask about special fire codes or regulations.
- Ask the insurance carrier to recommend fire prevention and protection measures. The insurance carrier may also offer training.
- Distribute fire safety information to employees: How to prevent fires in the workplace, how to contain a fire, how to evacuate the facility, where to report a fire.
- Instruct personnel to use the stairs—not elevators—in a fire. Instruct them to crawl on their hands and knees when escaping a hot or smoke-filled area.
- Conduct evacuation drills. Post maps of evacuation routes in prominent places. Keep evacuation routes including stairways and doorways clear of debris.
- Assign fire wardens for each area to monitor shutdown and evacuation procedures.
- Establish procedures for the safe handling and storage of flammable liquids and gases.
- Establish procedures to prevent the accumulation of combustible materials.
- Establish a preventive maintenance schedule to keep equipment operating safely.
- Place fire extinguishers in appropriate locations.
- Train employees in use of fire extinguishers.
- Ensure that key personnel are familiar with all fire safety systems.
- Identify and mark all utility shutoffs so that fire wardens or responding personnel can quickly shut off electrical power, gas or water.

### FIRE SAFETY PROCEDURES

#### 1. Use of alarms

Instructions in the use of a code phrase to insure transmission of an alarm under the following conditions:

- a) When the discoverer of a fire must immediately go to the aid of an endangered person;
- b) In the event of a malfunction of the interior alarm system

#### 2. Transmission of alarm to fire department

#### 3. Response to alarms

#### 4. Isolation of fire

#### 5. Evacuation of area

- a) A fire evacuation schematic of the building should be included in the plan, showing evacuation routes, location of fire alarms, extinguishers, fire doors, and partitions if they exist.
  - b) Include relocating residents within the facility. This will depend to a degree on the type and intensity of the fire.
- 6) Preparing building for evacuation.
- a) Include instructions on precise locations for evacuation.
  - b) Consider seasons of the year and inclement weather.
- 7) Prevention, training staff, and conducting drills.
- a) Fire drills must be held monthly. Fire drills shall be held at least four times per shift per year, at unspecified hours of the day and night.
  - b) A record shall be maintained of each fire drill to include date and number of residents and staff participating in the drill.
  - c) At least one fire drill must be supervised by the local fire department each year, and others as indicated. There shall be a written and dated record of this drill, which is signed by the fire department representative.

**Upon discovery of fire, the staff shall immediately take the following action:**

- 1) If any person is involved in the fire:
  - a) The discoverer shall go to the aid of that person, calling aloud an established code phrase. (The use of a code phrase provides for both the immediate aid of any endangered person and the transmission of an alarm.)
  - b) Remove the person(s) from the area of the fire and immediate danger.
  - c) Shut the door to the affected area to keep smoke and heat from spreading to other areas.
  - d) Any person within the area, upon hearing the code called aloud, shall transmit the fire alarm using the nearest manual alarm station. If the alarm is not sounding, the discoverer should activate the fire alarm.
  - e) Call the fire department (911) and report the fire. Tell them what part of the building is affected.
  - f) Move other residents in the vicinity of the fire to a safe area beyond the nearest fire doors.
- 2) If a person is not involved in the fire, shut the door to the affected area. The discoverer shall transmit the interior alarm using nearest manual fire alarm station. Call the fire department (911) and report the fire. Tell them what part of the building is affected. Move other residents in the vicinity of the fire to a safe area beyond the nearest fire doors. Staff, upon hearing the alarm signal, shall immediately execute their duties as outlined in the fire safety plan (duties for staff should be detailed).

**SEMI-ANNUAL CHECKS**

- 1) Review and update the facility's fire training program.
- 2) Invite the local fire chief to inspect the facility.
- 3) Inspect all fire extinguishers to see that they are fully charged (monthly).
- 4) Hold demonstration for new staff during orientation and all others annually on the proper use of fire extinguishers.
- 5) Inspect fire hose(s), if applicable.
- 6) Check kitchen exhaust ducts for grease accumulation.
- 7) Check all portable electrical equipment
- 8) Replace all worn appliance cords.
- 9) Check grounding wires for heavy portable electrical equipment.
- 10) Check electrical circuits for overloading and over-fusing.

- 11) Inspect entire facility for fire hazards.
  - a) Are "No Smoking" signs posted conspicuously?
  - b) Are overhead lighting units in good condition?
  - c) Are materials stored clear of sprinkler heads (18 inches below ceiling) and firefighting equipment?
  - d) Are oils, waxes, sweeping compounds, and other flammable supplies and materials properly stored in safe containers? Safe quantities? Stored in metal cabinets?

## FLOODS AND FLASH FLOODS

Floods are the most common and widespread of all natural disasters. Floods are caused by heavy or continuous rainfall that exceeds the absorptive capacity of the soil and flow capacity of rivers, streams and surrounding lakes. These conditions cause the waters to overflow their banks. Heavy rains can result in flash floods, dumping several inches of rain in such a short period of time that areas not usually subject to high waters are devastated. Riverine flooding can potentially inundate a city when protection fails.

The lands most subject to flooding are known as floodplains. Every major drainage basin has a floodplain surrounding it. Flood prone areas are found throughout Kansas, as every lake, river, stream and county drain has a floodplain. The type of development that exists within the floodplain will determine whether or not flooding will cause damage. Property and structures situated in a floodplain are exposed to the risk of flooding. Strong currents associated with flash floods can wash away anything in their path and pose a threat to life. Riverine flooding can inundate large populated areas, causing more costly damage than all other hazards to properties and structures.

For more information on flood hazards visit the Kansas Division of Water Resources website at <http://www.ink.org/public/kda/water> or FEMA's website at [www.fema.gov/nfip](http://www.fema.gov/nfip)

The frequency of floods is referred to by the time interval in which a certain-size flood is likely to occur. A "100-year flood" means that a flood of a certain depth has a 1% chance of occurring each year. "Fifty-year" floods have a 2% chance of occurring in any one year; "ten-year" floods have a 10% chance. These intervals of probability are classified into hazard zones. Floods are measured according to the heights the waters reach. Their magnitude is based on the chances that water flow will equal or exceed a certain level on a recurring basis. The larger the flood, the longer the period in which one is likely to recur. Small, localized floods are more common.

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.

### PLANNING CONSIDERATIONS

Consider the following when preparing for floods:

- ❑ Ask the local emergency management office whether the facility is located in a flood plain. Learn the history of flooding in the area. Learn the elevation of the facility in relation to streams, rivers and dams.
- ❑ Review the community's emergency plan. Learn the community's evacuation routes. Know where to find higher ground in case of a flood.
- ❑ Establish warning and evacuation procedures for the facility. Make plans for assisting employees who may need transportation.
- ❑ Inspect areas in the facility 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.
- ❑ Purchase a NOAA Weather Radio with a warning alarm tone and battery backup. Listen for flood watches and warnings.
- ❑ Ask the insurance carrier for information about flood insurance. Regular property and casualty insurance does not cover flooding.

## FLOOD WATCH VS FLOOD WARNING

Know the Difference!

### FLOOD WATCH

The National Weather Service (NWS) issues watches when the risk of a flood event has increased significantly, but its occurrence, location, and/or timing remains uncertain. Watches are issued to provide enough lead-time for those who must set their plans in motion to do so. Watches contain the following information:

- Affected area
- Potential hazards and their severity
- Safety rules, call to action statements
- Speed and direction of the hazard.

When a flood watch is issued, you should monitor the situation very closely for the period of the watch, and execute the following steps:

- Monitor forecast updates and “upstream” locations
- Move to a higher state of readiness
- Determine if the location of the adult care home is in an area likely to be affected.

Contact the local Emergency Management Agency if unsure:

- Determine the timeframes for action
- Identify clinically complex residents
- Activate staff notification procedures, if necessary
- If applicable, check to see that the emergency generator is protected from floodwaters and is in running order.

### FLOOD WARNING

Warnings are issued when a hazardous flood event is occurring, is imminent, or has a very high probability of occurring. NWS issues warnings in situations where hazardous weather conditions pose a real threat to life and or property. When conditions warrant, warnings may be issued without previous notification.

Warnings contain the following information:

- Affected area
- Potential hazards and their severity
- Timing of the event
- Safety rules, call to action statements
- Speed and direction of the hazard.

When a warning is issued for the area where the adult care home is located, the following steps must be executed:

- All of the activities listed for watches
- Emergency notification of staff, possible alternate facilities, and emergency resource contacts
- Take mitigation steps as necessary (and safe) to lessen the effects of the flooding
- Assess the status of residents, and be prepared to share this information with the Incident Commander, should an evacuation advisory be issued
- Begin preparing for a possible evacuation to higher ground, allowing sufficient time for moving non-ambulatory residents - **Use information contained on the current HCFA Form 672 and/or HCFA 802 to help estimate transportation requirements**



- Activate evacuation measures, if necessary
- Listen to local TV and radio stations for vital information.

If it is certain that the facility will flood:

- Maintain contact with the County Emergency Manager, request assistance in evacuating the facility and transportation of residents, if necessary
- Recall staff as needed
- Notify other facilities with which you have agreements to be prepared to receive residents
- Move resident records to safe area
- Move furniture, equipment, supplies, and food to the highest elevation in the facility
- Notify next-of-kin/responsible party about the status of their resident
- Notify the Area Agency on Aging and the Kansas Department of Health and Environment
- Be prepared to respond to media inquiries
- Shut off all utilities
- Activate vendor agreements for pump rental--Otherwise call the fire department or local Emergency Manager, to request assistance locating pumps.

## FLASH FLOOD WATCH VS FLASH FLOOD WARNING

### FLASH FLOOD WATCH

A flash flood WATCH means flash flooding is possible in your area. If a flash flood WATCH is issued for your area, be prepared!

- Stay tuned to radio and TV stations for vital local information
- Keep alert for signs of flash flooding, such as intense rainfall or rising waters
- Keep on hand or have access to materials like sandbags plywood, plastic sheeting and lumber.
- Check with your local Emergency Management Coordinator for location of sandbags. Sandbags are very difficult to find once the flooding starts.

Know the Difference!

### FLASH FLOOD WARNING

A flash flood WARNING means you may have very little time before floodwaters reach your area. A flash flood can happen so rapidly that you may not get a warning. If a flash flood WARNING is issued for your area, or if you suspect a flash flood is happening, move everyone to safety immediately!

- Evacuate residents from the affected portion of the facility to the highest elevation in the building. If time permits, evacuate the residents from the facility. **Use information contained on the current HCFA Form 672 and/or HCFA 802 to help estimate transportation requirement.**
- Make arrangements for medical assistance as needed.
- Inform the County Emergency Manager of action taken and help needed.
- Inform the local law enforcement agency of your problem and situation.
- Recall staff as needed.
- If the facility is to be evacuated, notify other facilities with which you have agreements.
- Activate emergency transportation procedures to evacuate residents as needed.
  - If numerous residents require hospital treatment, alert area hospitals of what to expect.
  - Move resident records to safe area.
  - Inform the local Emergency Manager of action taken and help needed.

- Notify next-of-kin on the status of their relative.
- Notify the Area Agency on Aging and the Kansas Department of Health and Environment.
- Close all exit/entry and fire doors.
- Call volunteer agencies for assistance as needed.
- Be prepared to respond to media inquiries.
- Activate vendor agreements for pump rental. Otherwise call the fire department or County Emergency Manager, to request assistance locating pumps.
- Shut off all utilities
- Call utility companies, if necessary.

## PREVENTING FLOOD HAZARDS

Preventative measures are the best means of protection from floods. Floodwaters and fallen trees often damage utilities in the affected areas. Always consider:

- Know the facility's flood risk and elevation above flood stages. Do local streams or rivers flood easily? If so, be prepared! Flash flooding and external flooding can be forecasted and emergency actions initiated.
- Local public broadcast stations will disseminate flood advisory information. NOAA Weather Alert Radios carry up to date information on the weather conditions in your area. The County Emergency Manager can also provide information and warnings about flood conditions.
- Compliance with floodplain zoning laws, designed to limit or prevent construction in the flood prone areas, are the best means of limiting economic loss and property damage.
- Back-up communications should be part of the Disaster Response and Recovery Planning effort.
- If you have an emergency generator, protect it from the floodwaters. Conduct periodic safety checks before utilizing a generator to supply power to the facility
- Measures can be taken to flood proof structures, including:
  - 1) Installing check valves in facility sewer traps, to prevent floodwater from backing up in sewer drains
  - 2) Sealing cracks in walls and floors with hydraulic cement
  - 3) Installing a sump pump with a dependable power source or allow the basement to fill with water, which enters on the floor above. Most basements and floors are not able to withstand the additional pressure of water-soaked soils, so the facility will sustain less damage if water is allowed to enter the basement. The water pressure on the inside will equalize that on the outside and prevent caving-in of the basement walls or popping up of the basement floor
  - 4) Constructing floodwalls or levees outside the facility to keep flood water away.
  - 5) For new facilities, elevating the facility on walls, columns or compacted fill to be above the floodplain.

# SEVERE WEATHER

**For the purpose of this guide, severe weather hazards are broadly grouped into three categories—Extreme wind events (such as tornadoes and straight line winds), thunderstorms, and winter storms.**

The greatest threat to the adult care facility caused by tornadoes, thunderstorms or winter storms and related events are power outages, which may be minimal or extensive in duration. In addition to power outages, weather hazard events can cause breakdowns in transportation and communications.

## EXTREME WIND EVENTS

### TORNADO HAZARDS

Thunderstorms often produce violent rotating columns of wind called tornadoes. The violent rotating winds carry debris aloft that can be blown through the air as dangerous missiles. A tornado may have winds 300+ miles per hour and an interior air pressure that is 10-20 percent below that of the surrounding atmosphere. The typical length of a tornado path is approximately 16 miles, but tracks much longer than that – even up to 200 miles – have been reported. Typically, tornadoes last only a few minutes on the ground, but those few minutes can result in tremendous damage and devastation.

Kansas ranks third in the nation in the number of tornadoes with an average of 48 per year. Kansas ranks number 1 in the nation for the most powerful tornadoes. Tornadoes occur throughout Kansas, but on the average eastern and central sections have more than the west. Finney County has had the most with 68, while as few as 7 have been reported in Wyandotte County.

### TORNADO WATCH VS WARNING

#### TORNADO WATCH

Issued when weather conditions in your area are favorable to development of tornadoes. Listen to NOAA Weather Radio, commercial radio or television and be prepared to act quickly.

#### TORNADO WARNING

A tornado has been sighted in the area, or indicated on radar. Implement emergency shelter actions for residents and staff! Listen to the NOAA Weather Radio, commercial radio or television for weather information.

Know the  
Difference!

## EMERGENCY ACTIONS

### WHEN A TORNADO WATCH IS ISSUED

- Keep NOAA Weather Radio, commercial radios or televisions turned on and listen for the latest advisories.
- Keep staff members advised about location, direction and progress of the storms.
- Review the tornado warning procedure with staff. Make preliminary duty assignments in case the National Weather Service issues a tornado warning.
- When or if the storm begins to approach the vicinity of the community, increase level of interest and begin to take additional measures.
  - a. Close windows and pull curtains in all areas of the adult care home.
  - b. Secure outdoor objects such as garbage cans, garden tools, outdoor furniture,

etc., to prevent them from becoming missiles in high winds.

c. Begin movement of selected residents into hallways and/or basement.

d. Shut off lights and close doors to unoccupied rooms and service areas. Place as many resident records as possible in a safe place.

### WHEN A TORNADO WARNING IS ISSUED

1. Seek shelter immediately!
2. Clear all large rooms (dining room, activities room, etc.) of residents, visitors and staff personnel.
3. Move residents into hallways (first floor of the facility) and away from windows and outside walls.
4. If possible, move a comfortable chair from the room into the hallway so residents can sit. Furnish a pillow and blanket so the residents feel more secure. They can provide some protection from small flying debris and can be used for comfort in case of damage to the facility.
5. If the facility has a basement, take shelter there. Usually you take shelter when the *Tornado Warning* is given. However, in the case of an adult care facility, there may be little time to move numerous residents, so it may be wise to move selected residents during the *Tornado Watch*.
6. Close doors to resident rooms. Close fire doors to form a protective envelope in the hallway for residents, visitors and staff.
7. Staff members should be assigned to each hallway.
8. Keep NOAA Weather Radio, commercial radios and/or televisions turned on and listen for latest advisories.

### AFTER THE TORNADO PASSES

1. Restore calm to the residents.
2. Render first aid to residents and staff as necessary.
3. Call ambulance as required.
4. If numerous residents require hospital treatment, alert area hospital of what to expect.
5. Call medical director of the facility, as necessary.
6. Check for fires throughout the facility.
7. For fires, follow guidance as set forth in the fire plan.
8. If not already done, shut off damaged or potentially damaged utilities.
9. Call County Emergency Management to request emergency assistance report damage.
10. Notify appropriate utility companies.
11. Recall off-duty staff as needed.
12. Have facility inspected for damage if necessary.
13. If the facility is damaged, be responsive to the instructions of the safety officials on the scene.
14. Part of, or the entire facility may have to be evacuated. If evacuation is required, follow the procedures established in the plan for evacuation. Use information contained on the current **HCFA Form 672 and/or HCFA 802** to help estimate transportation requirement.
15. Notify next-of-kin on the status of their relatives.
16. Prepare public information media releases.
17. Call on volunteer resources as needed.

If the tornado damages the facility, make sure to inform local officials (including the County Emergency Manager).

## THUNDERSTORM HAZARD

Severe weather systems are accompanied by strong winds, lightning, heavy rain, possible hail and tornadoes. Thunderstorms are typically short lived, often lasting no more than 30-40 minutes, and fast moving (30-50 miles per hour). Strong frontal systems, however, may spawn one squall line after another composed of many individual thunderstorm cells. Being aware of weather hazards should be part of the routine preparedness measures for the Disaster Recovery Coordinator and Team. Access to weather forecasts from the National Weather Service, through a NOAA Weather Radio, local TV or radio stations will help the adult care home determine what weather safety measures to implement.

### SEVERE THUNDERSTORM WATCH VS WARNING

#### SEVERE THUNDERSTORM WATCH

Severe thunderstorms are possible in the area.

**KNOW THE DIFFERENCE!**

#### SEVERE THUNDERSTORM WARNING

A severe thunderstorm is imminent or has been indicated by Doppler radar or reported by storm spotters

### EMERGENCY ACTIONS

- Prior to and in the event of a storm, the following actions should be taken. (The best time to procure the items listed is before they are needed).
- Procure NOAA Weather Radio, preferably battery-powered and flashlights. Assure that they are serviceable.
- Check food and stock extra emergency supplies. Supplies should include food that requires no cooking or refrigeration in case of power outage.
- During a thunderstorm accompanied by lightning, do not permit residents to bathe or shower.
- Keep residents and staff away from open doors or windows, fireplaces, radiators, stoves, metal pipes, sinks, and plug-in electrical equipment like radios, television sets and lamps.
- Do not permit residents to use plug-in electrical equipment like hair dryers, electric toothbrushes, or electric razors during an electrical storm.
- Do not use the telephone, as lightning may strike the telephone lines outside.
- Listen to the NOAA Weather Radio or a portable radio for weather information (remember plug-in equipment is dangerous during an electrical storm).
- Keep staff members advised about location, direction and progress of the storms.
- When/If a storm begins to approach the vicinity of the community, increase level of interest and begin to take additional measures.
- Close windows and pull curtains in all areas of the adult care home.
- Secure outdoor objects such as garbage cans, garden tools, outdoor furniture, etc., to prevent them from becoming missiles in high winds.
- Begin movement of selected residents into hallways and/or basement if it appears that a severe thunderstorm warning is eminent.
- Shut off lights and close doors to unoccupied rooms and service areas.
- Place as many resident records as possible in a safe place.
- If the storm produces flooding to the facility, follow the guidance set forth in the flood section of the plan.
- Inform the County Emergency Manager, if assistance is needed.

## SEVERE WINTER STORMS

Winter storms bring heavy snow, ice, strong winds, freezing rain, cold temperatures and dangerous driving conditions. Winter storms can prevent employees from reaching the facility to work. Additionally, winter storms create difficulty for the facility accessing emergency services. Heavy snow and ice can also cause structural damage and power outages. There are a few steps that can be taken to better prepare for implementing the Disaster Response and Recovery Plan during severe winter storm events.

### PLANNING CONSIDERATIONS

- Listen to NOAA Weather Radio and local radio and television stations for weather information.
- Arrange for snow and ice removal from parking lots, walkways, loading docks, etc.
- Store food, water, blankets, battery-powered radios with extra batteries and other emergency supplies for employee who become stranded or remain at the facility.
- Provide backup power source for critical operations.

### WINTER STORM WATCH VS WARNING

**KNOW THE  
DIFFERENCE!**

#### WINTER STORM WATCH

A winter storm WATCH means that severe winter weather conditions may affect the area. This could mean freezing rain, sleet or heavy snow. The information listed below becomes important if a winter storm watch is issued for the county.

- Keep posted on developing weather conditions.
- Avoid unnecessary travel. If travel cannot be avoided, call the Kansas Department of Transportation's hotline 1-800-585-ROAD for current road conditions.
- Exercise extreme caution when using portable heaters.
- Assure that battery-powered radio and flashlights are serviceable.
- Check the food and stock extra emergency supplies. Supplies should include food that requires no cooking or refrigeration in case of power failure.
- Check generator, if applicable. A generator may very well be the most important piece of emergency equipment during a power outage, when power is crucial for keeping the residents warm.
- Check the supply of heating fuel, if applicable. Fuel carriers may not be able to move if a winter storm buries the area in snow.

#### WINTER STORM WARNING

A winter storm WARNING means that severe winter weather, including freezing rain, sleet, or heavy snow is about to occur. If a winter storm WARNING is issued for the area, be prepared!

- Listen to the NOAA Weather Radio, commercial radio or television for weather information.
- Instruct residents and staff to stay indoors during the storm.
- Anyone venturing outside will need to wear several layers of clothes. They will keep the person warmer than a single heavy coat. Gloves or mittens, and a hat will help reduce loss of body heat.
- Special transportation arrangements may need to be made for staff to get to and from work.
- If the adult care facility must be evacuated, follow the established procedures in the evacuation section of your plan. **Use information contained on the current HCFA Form 672 and/or HCFA 802 to help estimate transportation requirements.**

## TECHNOLOGICAL EMERGENCIES

Technological emergencies include any interruption of loss of a utility service, power source, life support system, telephones, information system or equipment needed to keep the business in operation.

### HAZARDOUS MATERIALS INCIDENTS

Hazardous material are substances that are either flammable or combustible, explosive, toxic, noxious, corrosive, oxidizing, an irritant or radioactive. These materials are being shipped daily by highway, rail, and air across the state. In addition to transportation of these materials, many are manufactured with the state. Many adult care homes across Kansas are located on or near major transportation routes. A hazardous material spill or release can pose a risk to life, health or property. An incident can result in the evacuation of a few people, a section of an adult care home or entire neighborhood.

There are a number of Federal laws that regulate hazardous materials. In addition to on-site hazards, the Disaster Recovery Coordinator should be aware of the potential for an off-site incident affecting operations. Additionally, the Coordinator should be aware of hazardous materials used in facility processes and in the construction of the physical plant.

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). If an accident occurs involving these materials, the warning is usually received from the Incident Commander, local fire department, law enforcement agency, local Emergency Management Coordinator or NOAA Weather Radio.

### PLANNING CONSIDERATIONS

Consider the following when developing the adult care facility plan:

- Identify and label all hazardous materials stored, handled, produced and disposed of by the facility. Follow government regulations that apply to the facility. Obtain material safety data sheets (MSDS) for all hazardous materials in the facility.
- Ask local fire department for assistance in developing appropriate response procedures.
- Train employees to recognize and report hazardous material spills and releases. Train employees in proper handling and storage.

#### ESTABLISH A HAZARDOUS MATERIAL RESPONSE PLAN:

- Establish procedures to notify management and emergency response organizations of an incident
- Establish procedures to warn employees of an incident
- Establish "Shelter-in-Place" procedures
- Establish evacuation procedures
- Depending on the operation, organize and train an emergency response team to confine and control hazardous material spill in accordance with applicable regulations.

#### IDENTIFY POTENTIAL HAZARDS

When conducting your vulnerability assessment pay special attention to external hazards:

- Identify other facilities in the area that use hazardous materials. Determine whether an incident could affect the facility.
- 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 the operations.

## TRANSPORTATION ACCIDENTS INVOLVING HAZARDOUS MATERIALS

If the accident occurs close to the adult care facility, some rapid response actions may be required. The following actions may be required.

- If officials determine that it is not necessary to evacuate the facility, it may be necessary to shut the windows, seal all doors and windows with tape and turn off air conditioning and power bathroom vents to prevent fumes from entering the facility.
- Part of, or the entire facility may have to be evacuated. If evacuation is required, follow the procedures established in the plan for evacuation. **Use information contained on the current HCFA Form 672 and/or 802 to help estimate transportation requirements.**
- Inform the local Emergency Management Coordinator, if assistance is needed.
- When moving residents from the facility, move *crosswind* not upwind or downwind.
- Render first aid to residents and staff as necessary.
- Call the medical director, as necessary.
- Call Ambulance as required.
- If numerous residents require immediate hospital treatment, alert area hospitals of what to expect.
- Be responsive to the instructions of the safety officials on the scene.
- If a decision is made to evacuate the adult care home, do not re-enter the facility unless it is declared safe to do so by safety officials.
- Notify next-of-kin on the status of their relative.
- If a fire starts in the facility as a result of the hazardous material, follow the procedures in the fire plan.
- Prepare public information media releases.



## CRIMINAL HAZARDS

For the purpose of this guide, criminal hazards are broadly grouped into three categories: Bomb threats (including chemical and biological weapons); intruder incident; civil disturbance.

### BOMB THREAT

Bomb threat incidents have become a common occurrence in the business environment. Threats may be received by mail, message, or telephone. Most will be received by telephone and are very brief. The information needed by local law enforcement is included in this section. A copy of the bomb threat report should be available close to each telephone likely to receive incoming calls. Contact the local law enforcement agency for additional guidance on this section of the disaster plan.

### PLANNING CONSIDERATIONS

- Facility construction offers protection from small devices. Relocation within the facility is the preferable response to bomb threats
- Some businesses and government agencies have discovered that the number of “prank” calls increases when the building is routinely evacuated
- Any time a bomb threat is called (prank, hoax or real), a federal law has been broken.

Upon receiving a bomb threat or finding a suspicious object in the adult care facility, the following actions should be taken:

- Report the bomb threat call immediately to the *person in charge* or *manager on duty*. The *person in charge* or *manager on duty* in turn will call the local law enforcement agency (911).
- Notify the Disaster Recovery Manager.
- Residents should not be relocated or evacuated by the staff unless the threat includes the location of the bomb, or a suspicious object is located (some law enforcement agencies disagree on this point, so consult the local law enforcement agency). Insure the relocation or evacuation route is clear.
- If a suspicious object is found, report the location to the person in charge. Clear and isolate the area. DO NOT touch the object or anything near it.
- Let law enforcement personnel take charge of the situation as soon as they are on site.
- Provide building plans to the local law enforcement bomb disposal unit.
- The staff person receiving the bomb threat should remain available to talk to law enforcement personnel when they arrive.
- If ordered to evacuate the facility, do not re-enter the facility until it is declared safe by law enforcement personnel. **Use information contained on the current HCFA Form 672 and/or HCFA 802 to help estimate transportation requirements.**
- Inform the County Emergency Manager, if assistance is needed.
- If a bomb goes off, follow the procedures as appropriate for explosion or fires as outlined in the plan.
- Prepare public information media releases.

See the sample Bomb Threat Checklist in the next page.

# Bomb Threat Checklist

**Do not hang-up the phone!**

## INSTRUCTIONS

Listen! Listen! Listen! Try to alert the Charge Person during the call, if possible. Do not interrupt except to obtain the following information

## QUESTIONS TO ASK:

### Bomb Threat:

1. When is the bomb going to explode? \_\_\_\_\_
2. Where is it located? \_\_\_\_\_
3. What does it look like? \_\_\_\_\_
4. What is your name? \_\_\_\_\_
5. Where do you live? \_\_\_\_\_

### Bodily Threats:

1. Name of the person being threatened  
\_\_\_\_\_
2. When will it happen?  
\_\_\_\_\_
3. Why are we being threatened  
\_\_\_\_\_

### Mail Bomb Recognition:

1. Restricted markings (I.e. confidential, persona, etc)
2. Excessive postage
3. No return address
4. Foreign mail
5. Hand written or poorly typed address
6. Excessive securing material such as masking tape or string
7. Excessive weight, or lopsided package
8. Pictures, drawings or visual distractions

### Caller's Voice:

- Caller's Voice
- Calm
- Angry
- Excited
- Soft
- Female
- Male
- Raspy
- Loud
- Other \_\_\_\_\_

### Background Noises:

- Street noises
- Traffic noises
- Office noises
- Local or long distance
- Cellular call
- TV or radio
- Plane or train
- Other \_\_\_\_\_

### IMMEDIATE ACTION:

- Notify the charge nurse and call security
- Write down the caller's message in its entirety, and note your perceptions of the call
- Phone number the threat was received on:  
Time \_\_\_\_\_ Date: \_\_\_\_\_
- Remarks: \_\_\_\_\_  
\_\_\_\_\_

## EXPLOSION

An explosion can originate from a number of sources (natural gas seepage, faulty boiler, bomb, etc.). If there is an explosion or the threat of one, some of the residents may have to be relocated within the adult care facility or evacuated. In the event of an explosion or threat, the following procedures apply:

- Move residents in immediate danger to a safe area or evacuate as necessary.
- Sound the fire alarm.
- Notify the fire department (911).
- Fight small fires using available fire extinguishers.
- For fires, follow guidance as set forth in the fire plan.
- Account for residents, visitors and staff.
- Render first aid to residents and staff as needed.
- Call ambulance as required.
- If numerous residents require hospital treatment, alert area hospitals of what to expect.
- Call medical director of the facility, as necessary.
- Shut off damaged or potentially damaged utilities.
- Notify appropriate utility company.
- Ask visitors to leave, and admit only safety officials and recalled staff.
- Recall off-duty staff as needed.
- Have all areas of the facility inspected for damage.
- Be responsive to the instructions of the safety officials on the scene.
- Notify next-of-kin on the status of their relative.
- Prepare public information media releases.

## INTRUDER INCIDENT

An intruder is any unwelcome person(s) that poses a threat to residents, staff, themselves or property.

### PLANNING CONSIDERATIONS

- For purposes of this guideline intruders include:
  - Vagrants or homeless people
  - Mentally disturbed, despondent
  - Domestic dispute (spouse, significant other or family member)
  - Disgruntled employee or family member
  - Person or group committing robbery
  - Person in violation of protection order or restraining order of court
  - Hostage situation
- Keep exits that are seldom used locked at all times to prevent entry.
- Establish plan to lock facility during evening or nighttime hours.
- Establish an Emergency LOCKDOWN procedure.
- Establish plan to call local law enforcement (911) when an intruder is perceived to be a threat.
- Let law enforcement personnel take charge of the situation as soon as they are on site.

## CIVIL DISTURBANCE

Civil disturbances (demonstrations, riots, etc.) do occur, and the adult care home should be prepared to deal with these potentially disruptive conditions. The demeanor of those involved and severity of the disturbance threatening the facility will prescribe the actions to be taken.

In the event of a civil disturbance that affects the facility, the following procedures will apply.

- Evaluate the situation and determine appropriate action.
- Notify the Disaster Recovery Coordinator
- Insure that all residents and staff personnel on duty are inside the facility.
- Close and lock all exterior doors and windows as soon as all residents and staff are inside the facility. CAUTION: Locking from entry may be desirable; locking from exit could be disastrous. Your exit doors must meet the requirements set forth by the National Fire Protection Association's Life Safety Code and the State Fire Marshal regulations.
- Close all fire doors located in the facility.
- Keep all residents and staff away from all exterior windows to avoid injury from broken glass, should objects be thrown at the windows.
- Request assistance, when needed, through the local law enforcement agency.
- If the situation warrants, call back needed staff.
- Circumstances permitting, a designated staff member(s) should be responsible for sealing and taping all broken windows and doors to minimize any seepage of tear gas used by local law enforcement.
- Insure that a constant patrol is maintained in the adult care home to detect any fire bombs or other devices.
- If a fire or explosion occurs, follow the guidance established in the fire or explosion section of the plan.



# Audit Procedures

Disaster Response and Recovery Planning in many adult care facilities has been made a very high priority. Unfortunately, some believe the planning process is complete with the issuance of a Plan. Successful Disaster Response and Recovery Planning, however, must continue as long as the adult care facility desires to be a viable entity.

Proactive adult care facilities must require assurance that resources invested in the Plan are protected. One way to obtain this assurance is through periodic, independent, objective, third party reviews (i.e., audits) of the Plan. Another is to utilize available tools to implement a self-assessment process. The objective of all audits is to aid Disaster Recovery Team members in the effective completion of their responsibilities by providing feedback concerning the activity under review. To this end, audit activity typically involves:

- Assessing existing health/safety considerations, continuity of medical care, procedures, limitations and needs, to ensure that all necessary measures are taken to mitigate risk and respond effectively to threats;
- Reviewing and appraising the soundness, adequacy, and application of accounting, financial and other operating controls, and promoting effective control at reasonable cost;
- Ascertaining the extent of compliance with established policies, plans, and procedures;
- Ascertaining the extent to which company assets are accounted for and safeguarded from losses of all kinds;
- Ascertaining the reliability of management data developed within the organization;
- Appraising the quality of performance in carrying out assigned responsibilities; and
- Recommending operating improvements.

Auditing a Disaster Response and Recovery Plan entails the above elements of common practice. However, the quality of such activity is much more critical because the nature of the business – providing essential medical care for vulnerable populations – and actual survivability of the company is at stake. For this reason, management must have complete assurance that the Plan is viable at all times.

The most important aspect of any Disaster Response and Recovery Plan audit is the level of its objectivity; this is the inherent value of an “independent audit”. It is important for the person conducting the audit to detach him or herself from the Disaster Response and Recovery Plan and have an objective mental attitude, an honest belief in the work produced, and an honest belief that no significant quality compromises of work product are made. In addition to independence, objectivity and proficiency, the individual selected to perform the work should:

- Have a basic understanding of Disaster Response and Recovery Planning methodology;
- Understand the business environment;
- Understand how the various business functions interface with one another;
- Have skills in working with people; and
- Have the ability to communicate effectively.

The following audit tool can be used by the adult care facility’s quality assurance/compliance team, internal audit department, external auditors, consultants, etc., to plan a Disaster Response and Recovery Plan audit, perform fieldwork and report results.

<b>Disaster Response and Recovery Plan Audit Guidelines</b>	<b>Ref. #</b>	<b>Perf. By</b>
<b>Risks</b>		
1. The recovery needs of the adult care facility will change, weather through acquisitions, divestitures, additional EDP applications, etc. If a concerted effort is not made to keep the plan current, it will become outdated without knowledge of the Disaster Recovery Team.		
2. Because personnel are subject to transfer, promotion and/or termination, the potential for losing track of Disaster Response and Recovery Plans may result in the inability to locate a copy of the Plan at the time of a disaster.		
3. Because personnel are subject to transfer, promotion, and/or termination, individual Disaster Recovery Team Members may be unaware of their total responsibilities or duties at the time of a disaster.		
4. As personnel becomes comfortable with the Plan as written, attention to Vendor Support Agreements may wane resulting in expired agreements and the inability to gain support necessary at the time of a disaster.		
5. The adult care facility's growth, or potential downsizing by one or more vendors, may result in vendor's inability to support the facility's current recovery requirements at the time of a disaster.		
<b>Objectives</b>		
1. To ensure that the Disaster Response and Recovery Plan continues to support the adult care facility's changing needs (Risk 1)		
2. To ensure that at the time of a disaster, current copies of the Disaster Response and Recovery Plan are easily accessible by authorized personnel (Risk 2)		
3. To ensure that individual Disaster Recovery Team members fully understand their respective responsibilities and duties at the time of a disaster.		
4. To ensure Vendor Support Agreements are current, enforceable and appropriate. (Risk 4)		
5. To ensure that Vendor(s) selected to support emergency recovery plans continue(s) to be able and competent to furnish the level of support necessary in case of a disaster (Risk 5)		

Disaster Response and Recovery Plan Audit Guidelines	Ref. #	Perf. By
<b>Audit Procedures</b>		
A. General		
1. Obtain a copy of the Disaster Response and Recovery Plan from the off-site storage facility		
a) Identify the following sections and review each for familiarity:		
1.) Recovery Procedures		
2.) Notifications		
3.) Hardware (equipment, computers and peripherals)		
4.) Software		
5.) Communication Networks		
6.) Essential Records		
7.) Test Results		
8.) Team Responsibilities		
9.) Other Considerations		
2. Obtain copies of Disaster Response and Recovery testing results:		
a) Component testing		
b) Integrated testing		
c) Disaster Drill Testing		
3. Obtain copies of the following:		
a) Disaster Response and Recovery timetable for review/updating of the Disaster Response and Recovery Plan		
b) Control log of changes to critical procedures, functions and documentation		
c) Copies of recovery team meeting agendas and corresponding notes		
d) Notification procedure documentation		

Disaster Response and Recovery Plan Audit Guidelines	Ref. #	Perf. By
e) Current inventory of hardware (equipment, minicomputer, PC /Server and peripheral)		
f) Listing of current communications equipment (modems, hubs and terminals)		
g) Listing of those records considered "Essential" to the Company's ability to recover from a disaster		
h) Copies of vendor support agreements as identified in the Disaster Response and Recovery Plan		
B. Determine weather the Disaster Response and Recovery Plan is up to date		
1. Determine date of last revision/review of Disaster Response and Recovery Plan Date ____ / ____ / ____		
2. Ensure that Disaster Recovery Team has reviewed and approved all changes to the Disaster Response and recovery Plan		
3. Review Disaster Response and recovery Plan testing results obtained in Step A, 2, and through c (above) for currency and completeness while verifying that tests were completed. Also identify the actions that have been taken to address weaknesses noted.		
4. Refer to the listing of teams contained in the Disaster Response and Recovery Plan. Verify through telephone calls/discussions with appropriate personnel that team members as listed in the Disaster Response and Recovery Plan remain viable as team members. Make recommendations as appropriate.		
5. Refer to the team responsibilities obtained in Step A, 1, a, 8 (above) and team minutes of meetings obtained in Step A, 3, c (above). Compare minutes to published team responsibilities and ensure that teams continue to fulfill their requirements.		
6. Using a Notification Procedure obtained in Step A, 3, d, test the accuracy of the telephone/fax numbers contained in the procedure to the extent necessary to render the opinion		



<b>Disaster Response and Recovery Plan Audit Guidelines</b>	<b>Ref. #</b>	<b>Perf. By</b>
7. Discuss with Administration officials the current organization of the adult care facility to determine whether operations have been re-organized. Evaluate any changes that are relative to the impact on disaster recovery and comment as is appropriate		
8. Identify whether additional adult/health care facilities have been added as alternate sites and evaluate as to their inclusion to the Disaster Response and Recovery Plan.		
9. Identify any new and significant applications, which may have been added, or old applications, which may have become significantly more important to the adult care facility's operations. Evaluate as to impact on the Disaster Response and Recovery Plan.		
10. Identify and evaluate any major software upgrades or changes as to their impact on the Disaster Response and Recovery Plan.		
11. Review current backup requirements for changes. Evaluate changes, if any, and their impact to the Disaster Response and Recovery Plan		
12. Review restoration priorities with appropriate management ensure that any significant changes have been incorporated into the Disaster Recovery Plan		
13. Visit alternate/backup sites to ensure that sites are able to meet current requirements as determined above.		
14. Review control log obtained in step one. Identify documented changes to the Disaster Response and Recovery Plan. Ensure that Management Team has approved all major changes to the Disaster Response and Recovery Plan.		
15. Review current inventory of hardware (minicomputer, PC server and peripheral ) obtained in Step A, 3, e and compare to original inventory to determine any changes and whether significant changes have been address in the Disaster Recovery Plan.		

<b>Disaster Response and Recovery Plan Audit Guidelines</b>	<b>Ref. #</b>	<b>Perf. By</b>
16. Review the listing of current communications equipment (modems, hubs and terminals) obtained in Step A, 3, f and evaluate changes from original listing, if any, and their effect on the Disaster Response and Recovery Plan		
17. Using the listing of records considered "Essential" obtained in Step A, 3, g test to the extent considered necessary to ensure that current copies of these records are in fact stored off-site.		
18. Conclude as to Objective 1		
C. Ensure the availability of the Disaster Response and Recovery Plan (Objective 2)		
1. Evaluate the Disaster Response and Recovery Plan tracking system through review of the Disaster Response and Recovery Plan review/update time -table and the Control Log of changes to critical procedures, functions and documentation obtained in Step A, 3, a & b (above).		
2. Verify that Plans have been distributed in accordance with the Disaster Response and Recovery Plan through telephone interviews or visits to individuals entrusted with copies. Evaluate the system for accuracy.		
3. Determine whether the Disaster Response and Recovery Plan distribution and tracking system has fallen into disuse.		
4. Conclude as to Objective 2		
D. Ensure that Disaster Recovery Team members are aware of their full responsibilities and duties		
1. Verify that new team members have been trained.		
2. Ensure that team members transferred/terminated have been replaced.		
3. Review minutes of meetings obtained in Step A, 3, c to verify that information above is supported by the minutes through references to team membership changes, team actions to mitigate weaknesses identified by the team, etc.		
4. Conclude as to objective 3.		

<b>Disaster Response and Recovery Plan Audit Guidelines</b>	<b>Ref. #</b>	<b>Perf. By</b>
E. Determine currency of Vendor Support Agreements (Objective #4)		
1. Review effective dates of vendor agreements obtained in Step A, 3, h (above) to ensure that vendors continue to be obligated to furnish services/equipment within time frames specified under the current Disaster Response and Recovery Plan		
2. Review business interruption insurance policy (ies) to ensure adequate level of coverage and that coverage is in force.		
3. Conclude as to Objective #4		
F. Ensure that vendors remain viable in their ability to support the adult care facility's requirements (Objective 5)		
1. Through site-visits, interviews or other appropriate methods determine whether key vendor(s) have down-sized and evaluate their ability to perform.		
2. Ensure that vendor(s) agreements are still viable.		
3. Conclude as to Objective 5.		

# References

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Occupational Safety and Health Administration (OSHA)  
Long Term Care Survey (HCFA)  
Adult Care Home Administrator Practice Guideline  
Decision Tree for Reporting Resident Elopement  
Kansas Nursing Facility Regulations  
Maintenance/Testing Requirements of Life Safety  
Maintenance and Testing Records  
Facility Fire Drill Record  
Requirements for Fire Detection & Signaling  
Fire Watch Guidelines  
Smoke Detection  
Requirements for Sprinkler Systems  
Information Sources

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## OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA).

29 Code of Federal Regulations (CFR) section 1910.120(q)(1) states that "An Emergency Response Plan shall be developed and implemented to handle anticipated emergencies prior to the commencement of Emergency Response operations. The plan shall be in writing and available for inspections and copying by employees, their representatives and OSHA personnel."

The following requirements are stated in 29 CFR 1910.120(q)(2) and shall be addressed as a minimum. The following subjects cover the required elements of an Emergency Response Plan as required by OSHA.

1. Pre-emergency planning and coordination with outside parties.
2. Personnel roles, lines of authority, training and communication.
3. Emergency recognition and prevention.
4. Safe distances and places of refuge.
5. Site security and control.
6. Evacuation routes and procedures.
7. Decontamination.
8. Emergency medical treatment and first aid.
9. Emergency alerting and response procedures.
10. Critique of response and follow-up.
11. Personal Protection Equipment (PPE) and emergency equipment.
12. Emergency Response organizations may use the local Emergency Response or the state Emergency Response or both, as part of their Emergency Response to avoid duplication. Those items of the Emergency Response that are being properly addressed by the Superfund Authorization Recovery Act (SARA) Title III plans may be substituted into their emergency response plan or otherwise kept together for the employer and employee's use.

# THE LONG TERM CARE SURVEY

## HEALTH CARE FINANCE ADMINISTRATION (HCFA)

July 1, 1999.

Section IV: Appendix P

- Part II: Guidance to Surveyors—Long Term Care Facilities (Guide to Survey Tag Numbers)

<i>Tag Number</i>	<i>Regulation</i>	<i>Guidance to Surveyors</i>
<b>F517</b>	<p>(m) <u>Disaster and emergency preparedness</u></p> <p>(1) The facility must have detailed written plans and procedures to meet all potential emergencies and disasters such as fire, severe weather, and missing residents</p>	<p><u>Guidelines: 483.75(m)</u> The facility should tailor its disaster plan to its geographic location and the types of residents it serves. "Periodic Review" is a judgment made by the facility based on its unique circumstances. Changes in physical plan or changes external to the facility can cause a review of the disaster plan. The purpose of a "staff drill" is to test the efficiency, knowledge, and response of institutional personnel in the event of an emergency. Unannounced staff drills are directed at the responsiveness of staff, and care should be taken not to disturb or excite residents.</p> <p><u>Procedures: 483.75(m)</u> Review disaster and emergency preparedness plan, including plans for natural or man-made disasters.</p>
<b>F518</b>	<p>(2) The facility must train all employees in emergency procedures when they begin to work in the facility.</p>	<p><u>Probes: 483.75(m)</u> Ask two staff persons separately (e.g., nurse aide, housekeeper, maintenance person) and the charge nurse:</p> <ul style="list-style-type: none"> <li>• If the fire alarm goes off, what do you do?</li> <li>• If you discover that a resident is missing, what do you do? What would you do if you discovered a fire in a resident's room? Where are fire alarms and fire extinguishers located on this unit?</li> <li>• How do you use the fire extinguisher?</li> </ul> <p><u>Note:</u> Also, construct probes relevant to geographically specific natural emergencies (e.g., for areas prone to hurricanes, tornadoes, earthquakes, or floods, each of which may require a different response).</p> <p>Are the answers to these questions correct (staff answers predict competence in assuring resident safety)?</p>

# ADULT CARE HOME ADMINISTRATOR PRACTICE GUIDELINE

*This guideline was developed as a cooperative effort between the Kansas Department of Health and Environment and representatives from the Kansas Professional Nursing Home Administrator Association, the Kansas Health Care Association and the Kansas Association of Homes and Services for the Aging.*

Definition of practice area: For the purposes of this Guideline, resident elopement is defined as an incident in which a resident who has impaired decision making ability and is oblivious to their own safety needs leaves the facility without the knowledge of staff.

Scope of the problem: In the fourth quarter of 1996, 2,213 residents were identified at Section E 3 of the Minimum Data Set Plus as exhibiting "wandering with no identified purpose; resident appears oblivious to needs or safety". Thirty-four elopements were reported by adult care homes during the fourth quarter of 1996. One reported elopement resulted in the death of a resident.

## ADMINISTRATIVE PROTOCOLS

The adult care home administrator is responsible for ensuring that effective policies and procedures are developed and consistently implemented to reduce the risk of elopement by residents. The following are recommended components of an effective elopement policy.

- A. Each facility has the responsibility to maintain a system that protects residents who are not capable of protecting themselves. The facility should define what would constitute risk for injury of a resident based on the physical environment in which the facility is located. In some facilities, residents are at high risk for injury just leaving the facility building. In other facilities, the risk for injury would be minimal if the resident remained in the immediate area of the building. In rural communities, a resident may be able to safely walk to familiar places within the community. Consideration should be given to vehicular traffic in parking lots and adjacent streets or highways, the presence of railroads, streams, ponds, rivers, drainage ditches, etc. near the facility as well as other environmental factors.
- B. Prior to or at admission, each resident should be assessed for the potential for elopement.
1. Does the resident have a prior history of wandering reported by family or other caregivers?
  2. Does the resident's history or assessment indicate impaired decision-making and/or impaired cognition and the ability to be mobile by walking or use of wheelchair or similar device?
  3. Specific interventions should be developed and implemented on the day of admission for residents with a known history of wandering.
  4. Residents who develop wandering behavior after admission to the facility should be reassessed and appropriate interventions included in the plan of care within seven days of identification of behaviors which include wandering.
  5. Interventions in the plan of care or health services plan for residents who **wander** should address the specific behavioral patterns of the resident.
  6. Residents without a history of wandering and/or elopement should be accounted for at least every two hours day and night.
  7. The facility should identify key shifts or periods during the day when elopements appear to be most frequent. In some facilities it maybe during the night shift and in others, it maybe the period after supper when visitors are leaving. More intensive protocols need to be developed and implemented during the high risk time periods.
  8. The facility should have a system of identification of residents who wander. The method should be designed to assist law enforcement and others in identifying a resident who has left the facility without staff knowledge.

1. Identification bracelets on a wrist or ankle.
  2. Identification on or in the resident's clothing.
  3. Photographs of resident taken at admission. Photographs may need to be retaken as the resident's physical appearance changes.
9. At admission, all residents should be informed in writing of the facility's method for accounting for residents who leave the building. One method frequently used is to ask residents to sign out when leaving the building and/or grounds.
- C. A specific system should be developed to notify staff that an exit door has been opened in an area accessible to residents.
1. Door alarms are tested each shift at least once a month. The results of the tests are recorded. Testing of the system should include not only that the alarms function, but also that staff respond appropriately to the alarms.
  2. A specific policy and procedure developed related to the disabling of door alarms. Who can make this decision? When is it permissible for door alarms to be turned off? Who is responsible for resetting the system?
  3. When an exit door alarm is disabled during daylight hours and the door cannot be monitored from the nurse's station, additional visual control must be provided with the use of video cameras, mirrors or individual resident safety alarm systems.
  4. A specific procedure developed for implementation when the exit door alarm system or individual resident safety alarm system is known not to be functioning.
- D. Staff who do not follow the facility's policies and procedures for prevention of elopement must be counseled, educated and disciplined to protect the health and safety of residents.
- E. Policies and procedures are developed and implemented to find a resident whose whereabouts can not be accounted for by staff.
1. A system developed to inform the administrator or designee and all departments immediately that a resident cannot be found.
  2. A search of the facility building and grounds is conducted promptly. Who is responsible for performing this task?
  3. Staff on duty should determine, if possible, the time and location the resident was last seen.
  4. A system to notify law enforcement of an elopement. Who has the authority? What law enforcement agency is to be notified? How soon after a resident is not accounted for must law enforcement be contacted?
  5. Who is responsible for notifying the resident's legal representative or family? When is that notification to occur?
  6. Who is responsible for determining whether the elopement occurred as a result of neglect and reporting the incident to KDHE?
- F. A specific protocol should be developed to prevent elopement by residents identified at risk for elopement. All staff members should be aware of the protocol.
1. The facility protocol for prevention of elopement is included in the orientation of all employees.
  2. At least once a year, the facility conducts an in service concerning elopement and implements the facility procedure.

NOTE: There will be instances when in spite of an effective system in place, residents will elope. The issue for the survey agency is whether or not the facility has acted in a prudent manner to prevent the actual or potential elopement by a resident. Surveyors will use this document as a **guide for decision-making**.

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Adult Care Home Program, BHFR

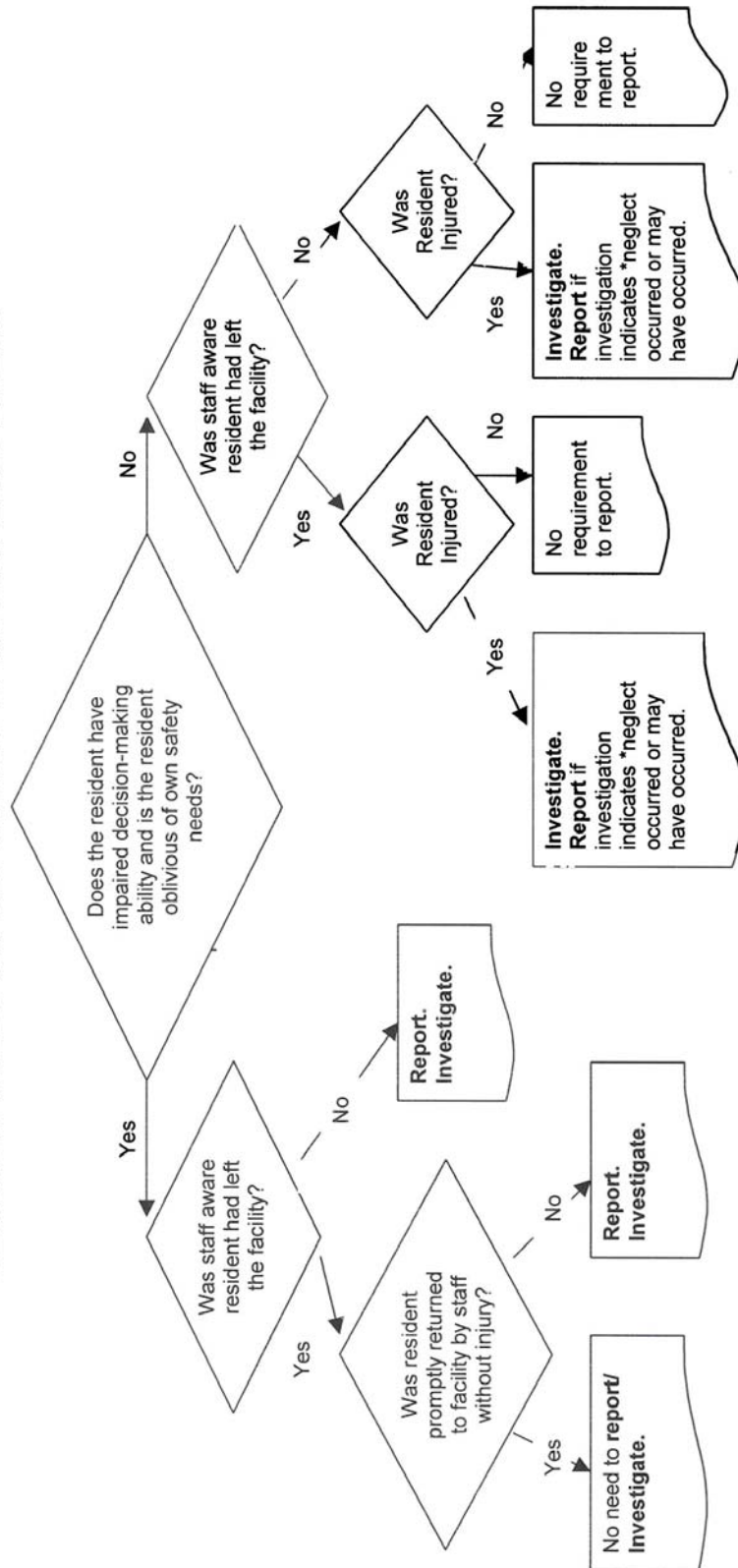
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Joseph F. Kroll, Director  
Bureau of Health Facility Regulation



# DECISION TREE FOR REPORTING RESIDENT ELOPEMENT

## DECISION TREE FOR REPORTING RESIDENT ELOPEMENT



\*"Neglect" means the failure or omission by one's self, caretaker or another person, to provide goods or services, which are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm or illness. KSA 39-1401

# KANSAS NURSING FACILITY REGULATIONS

## KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

October, 1999.

### **Nursing Facilities—page 104. 28-39-163**

(n) Disaster and emergency preparedness.

(1) The facility shall have a detailed written emergency management plan to meet potential emergencies and disasters including, fire, flood, severe weather, tornado, explosion, natural gas leak, lack of electrical or water service, and missing residents.

(2) The plan shall be coordinated with area governmental agencies.

(3) The plan shall include written agreements with agencies which will provide needed services, including providing a fresh water supply, evacuation site, and transportation of residents to an evacuation site.

(4) The facility shall ensure disaster and emergency preparedness by:

(A) Orienting new employees at the time of employment to the facility's emergency management plan;

(B) periodically reviewing the plan with employees; and

(C) annually carrying out a tornado or disaster drill with staff and residents.

(5) The emergency management plan shall be available to staff, residents, and visitors.

### **Assisted Living/Residential Health Care—pages 131-132. 28-39-251. Disaster and emergency preparedness.**

(a) The assisted living and residential health care facility shall provide sufficient staff to promptly take residents who require assistance to the outside or to a point of safety in an emergency.

(b) The facility shall have a detailed written emergency management plan to manage potential emergencies and disasters including the following:

- (1) fire;
- (2) flood
- (3) severe weather;
- (4) tornado;
- (5) explosion;
- (6) natural gas leak;
- (7) lack of electrical or water service;
- (8) missing residents; and
- (9) any other potential emergency situations.

- (c) The facility shall have written agreements which will provide the following needed services:
  - (1) fresh water;
  - (2) evacuation site; and
  - (3) transportation of residents to an evacuation site.
- (d) The facility shall ensure disaster and emergency preparedness by:
  - (1) Orienting new employees at the time of employment to the facility's emergency management plan;
  - (2) periodically reviewing the plan with employees; and
  - (3) annually carrying out an emergency drill with staff and residents which includes evacuation of the building or to a safe area.
- (e) The emergency management plan shall be available to staff, residents and visitors.

**One- and Two Bed Homes—page 146**  
**28-39-134. Administration; management**

- (g) At the time of admission, the facility shall ensure that each resident becomes familiar with the evacuation procedure.

**Boarding Care Homes—page 154**  
**28-39-409. Environmental sanitation and safety; disaster preparedness standard.**

- a) The facility shall have a written plan with procedures to be followed if a disaster, such as fire, tornado, explosion, or flood, occurs inside or outside the facility. The facility shall ensure that the staff are prepared for a disaster.
- b) The disaster plan shall be available and posted for residents and staff.
- c) The plan shall include evacuation routes and procedures to be followed in case of fire, tornado, explosion, flood, or other disaster. The plan shall include procedures for the transfer of residents, casualties, medical records, medications, and notification of next of kin and other persons.

**FIRE FACT NO. 006 CHECKLIST(s) :**

**TITLE : MAINTENANCE/TESTING REQUIREMENTS OF LIFE SAFETY FEATURES**

**CHECKLIST ITEM(s) :**

**REFERENCE(s) :**

**PAGE 1 of 1**

Much emphasis is placed on providing equipment in buildings to improve fire and life safety including alarm systems, fire sprinkler systems, fire extinguishers, and smoke detection systems. Maintenance and testing is necessary to verify they will function when needed. The following table illustrates the main fire and life safety maintenance and testing requirements.

FIRE/LIFE SAFETY SYSTEM	D A I L Y	M O N T H L Y	Q U A R T E R L Y	S E M I - A N N U A L	A N N U A L	O T H E R
<b>EXITS</b> Exit doors checked for operation. Corridors clear of obstructions. Exterior stairs/escapes checked.	X X X					
<b>FIRE ALARMS/DETECTION SYSTEMS</b> System verified on and operable. System maintained, tested, detectors Cleaned by responsible person/firm.	X				X	
<b>EMERGENCY LIGHTING UNITS</b> 30-second operational test. 90-minute ANNUAL operational test.		X			X	
<b>EMERGENCY GENERATORS</b> System checked for readiness. System run under load for 30-minutes.		X	X			
<b>FIRE SPRINKLER SYSTEMS</b> Control valves verified open. Flow alarm and Main Drain tested. Sprinklers and piping visually checked. Backflow preventor rebuilt.		X	X		X	Every 5-years.
<b>FIRE EXTINGUISHERS</b> Quick Check of gauge, hose and location. Annual service by certified person/firm. Tear down maintenance by certified person/firm. Hydrostatic test of pressurized cylinders by certified person/firm.		X			X	Every 6-years. Depends on type of extinguisher, every 12-years for stored pressure or 5-years for CO2 extinguishers.
<b>FIXED EXTINGUISHING SYSTEMS (COOKING)</b> Service by certified person/firm. Tear down maintenance by certified person/firm.				X	X	Fusible links to be replaced annually Every 6-years.



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**FIRE FACT NO. 007 CHECKLIST(s): 99**  
**TITLE : MAINTENANCE AND TESTING RECORDS**  
**CHECKLIST ITEM(s) : 99-11 through 99-22 and 99-56**  
**REFERENCE(s) : 91-101/31-1.3**  
**PAGE 1 of 2**

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One of the most important safety issues facing facility owners and operators is the maintenance, testing, and documentation of the required and supplemental safety systems in their buildings.

The Kansas Buildings Fire Safety Handbook emphasizes the importance of this testing and documentation. It is verified by field inspectors and required by the enforcement of this code document.

The proper and efficient accumulation of records for the maintenance and testing of equipment, alarms, emergency lighting, fire extinguishers, automatic sprinklers, and suppression systems has come to the forefront of the inspection process. This record gathering allows for a quick and easy overview of how the facility performs and maintains fire safety standards for the public occupancy of their buildings.

In an effort to simplify this system and to provide more consistent maintenance records, the Kansas State Fire Marshal's Office is providing a sample "Maintenance and Testing Record" to be used as a guide for facility use.

These monthly maintenance and test records should be placed in SECTION # 1 of the central Facility Fire Safety Notebook and will provide an organized and efficient means to record the maintenance of life safety systems. (See **FIRE FACT 054**). This will also allow for quick overview by the inspectors during field reviews. The facility will be able to exhibit their efforts toward year round compliance and adherence to required fire safety standards.

We believe this sample will assist the record gathering process that encompasses the facility, the inspectors, and enforcement. The end result being the proper retention of the required documentation and the compliance of facilities to the highest level of fire safety for the public occupancy and assembly of the citizens of Kansas.



# Maintenance & Testing Record For Emergency Equipment

**FACILITY :**

**BUILDING:**

**MONTH:**

**YEAR:**

Unit #	Exit Doors And Hardware	Emergency Lighting		Fire Extinguishers	Emergency Generator	Fire Alarm And Detection Systems	Automatic Sprinkler System	
		90 min. Annual	30 sec. Monthly				Monthly	Quarterly
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								

**Comments :**

**Signed:**

**Date:**

**NOTES:**

1. All testing and maintenance procedures must be dated and signed by the individual completing the testing or maintenance.
2. All components of emergency and safety systems should be listed by location and type.
3. Comments should include information regarding date and nature of system malfunction, repairs or replacements made, and date system returned to normal service.

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**FIRE FACT NO. 028 CHECKLIST(s) : 99C, 99E, 99R**  
**TITLE : FIRE DRILL RECORDS**  
**CHECKLIST ITEM(s) : 99C C08; 99E E06,07,08,10; 99R R01,02,03,04**  
**REFERENCE(s) : K.A.R. 22-18-2 (a) ; 91-101/31-3.1.3 ; 91-101/31-7.1, 7.2, 7.3**  
**PAGE 1 Of 2**

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### FACILITY FIRE DRILL RECORD

The Kansas State Fire Prevention Code and the Kansas Buildings Fire Safety Handbook defines the requirements set forth for owners and operators of regulated facilities to conduct scheduled fire drills. This drill record should be used by business, child care, and residential board and care facilities.

**PURPOSE: To practice and record the safe and timely evacuation of all occupants and staff from the facility.**

#### Instructions For Use:

- Fill in the boxes at the top of the Fire Drill Record with Building Name, Address, City, Telephone and FAX numbers. Fill in the Year or Year(s) the drills will be occurring. Fill in Responsible Party Name and Title. The Responsible Party shall record the date, time of drill, evacuation time, and the number of **actual** occupants evacuated for each drill conducted.

#### Guidelines for Conducting Fire Drills:

- Exits shall be unlocked and unobstructed whenever the building is occupied.
- Staff shall be assigned specific responsibilities for notification and evacuation of the building.
- Designate a safe evacuation area far enough from the building (50 feet minimum) to avoid the danger from fire, fire department operations and equipment, or from falling debris or explosion.
- Emergency plans shall include a minimum of two alternate evacuation routes occasionally using the secondary evacuation routes during the regularly practiced drills.
- Drills shall be initiated by use of the fire alarm or detection system components. They shall be unannounced to simulate an actual fire and shall be conducted at different times of the day and during different activities.
- After the alarm has sounded, all occupants should proceed to the nearest exit as quickly as possible. **The staff shall account for all occupants after reaching the safe area.**
- Restrooms and other possible occupied areas must be checked by sight and voice. (Mobility impaired occupants or staff may be moved to approved areas of refuge with staff in attendance until a real emergency is determined and evacuation is necessary).
- **In case of fire or smoke, *EVACUATE THE BUILDING*, contact the Fire Dept. immediately, and do not reenter the building until the building is verified as safe.**

#### Reminders:

- All fire alarm equipment shall be checked a minimum of once annually.
- Any fire alarm equipment found inoperable during drills shall be repaired IMMEDIATELY!
- If the facility is delinquent on drills, inspectors may request a drill at the time of the inspection. **Fire safety inspectors will be spot checking the previous years drill records to verify correctness and completeness as they inspect your facility.**





**Kansas State Fire Marshal's Office**  
**700 S.W. Jackson – Suite 600**  
**Topeka, KS 66603-3714**  
**Phone : 785-296-3401**  
**FAX : 785-296-0151**



<b>Facility Name:</b>	<b>Year(s) of drills:</b>
<b>Address:</b>	<b>Responsible Party Name and Title:</b>
<b>City, State, Zip:</b>	<b>License # :</b>
<b>Phone # :</b>	<b>FAX # :</b>

# FIRE DRILL RECORD

MONTH	DATE OF DRILL	TIME OF DAY	TIME FOR EVACUATION	NUMBER OF OCCUPANTS	RESPONSIBLE PARTY NAME
<b>January</b>					
<b>February</b>					
<b>March</b>					
<b>April</b>					
<b>May</b>					
<b>June</b>					
<b>July</b>					
<b>August</b>					
<b>September</b>					
<b>October</b>					
<b>November</b>					
<b>December</b>					

## POST IN A CONSPICUOUS LOCATION

When ALL REQUIRED DRILLS have been conducted, maintain the original or copy of the drill record  
 IN YOUR FILES ONLY, for a period not less than 5 years for future reference and verification by the  
 Kansas State Fire Marshal.



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**FIRE FACT NO. 031 CHECKLIST(s): 99**  
**TITLE : REQUIREMENTS FOR FIRE DETECTION AND SIGNALING SYSTEMS**  
**CHECKLIST ITEM(s) : 99-15**  
**REFERENCE(s) : 91-101/31-1.3**  
**PAGE 1 of 2**

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**Purpose**

- To help ensure an appropriate level of life safety in certain occupancies by clarifying requirements for design, installation, inspection, and maintenance of fire alarm systems.
- To reduce confusion by communicating system design, installation, inspection, testing, and maintenance expectations therefore enhancing efficient management of state and local resources as well as improving fire protection and life safety for the citizens of Kansas.
- To help ensure the parties responsible for the design, installation, inspection, testing, and maintenance of fire alarm systems are doing so in a satisfactory manner. *It is the intent of the Kansas State Fire Marshal to elevate the quality of practice of all who deal with fire alarm systems.*

**Summary**

This document is intended to clarify the Kansas State Fire Marshal Office's (KSFMO) position concerning the minimum (i.e. required and expected) design, installation, inspection, testing, and maintenance requirements for fire alarm systems. Guidance is provided for new system installations and work concerning existing systems.

**Background**

The KSFMO is required by K.S.A. 31-133 to adopt reasonable rules and regulations for the safeguarding of life and property from fire and explosions.

In addition, the KSFMO is required to act as the Authority Having Jurisdiction (AHJ) in specific occupancies. Resources are dedicated to the "priority" facilities having the most vulnerable occupants. They are:

- Educational, including private schools, pre-schools, daycare, childcare centers, and state institutions including regents universities.
- Health care, including hospitals, "adult care facilities", nursing homes, ambulatory care centers, and residential board and care facilities.
- Correction and detention.



## Kansas State Fire Marshal Prevention Division

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FIRE FACT NO. 031 CHECKLIST(s) : 99

TITLE : REQUIREMENTS FOR FIRE DETECTION AND SIGNALING SYSTEMS

CHECKLIST ITEM(s) : 99-15

REFERENCE(s) : 91-101/31-1.3

PAGE 2 of 2

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The KSFMO has adopted via regulation, the following codes and standards for the purpose of fulfilling K.S.A. 31-133 and ensuring a satisfactory level of fire protection and life safety.

- UBC, 1997
- UFC, 1997
- NFPA 72, through UBC/UFC

Later editions of the above codes may be approved for use by the KSFMO.

A fire alarm system is a specialized system and requires knowledge and experience to properly perform design, installation, inspection, and maintenance. Only those individuals properly trained, educated and experienced shall participate in work on these systems.

**Existing systems shall be maintained according to the applicable codes and standards listed above.**

By adopting these minimum standards, the KSFMO is requiring a minimum level of protection be provided through system design, installation, inspection, and maintenance.

Plans for fire alarm systems in “priority” facilities shall be submitted to the KSFMO for approval. The submitted plans shall comply with standards set forth by the KSFMO and shall include; a copy of equipment cut sheets, floor diagrams (showing placement of detectors, fire alarm control panel, pull station locations, annunciation devices, etc.). Also include specification sheets and any other information relevant to the fire alarm or smoke detection system. Approval of the completed installation shall require submittal of a “Certificate of Completion”.

**The design, installation, modification, inspection, and maintenance of fire alarm systems shall comply with all requirements of the applicable nationally promulgated codes and standards, regardless of whether or not the KSFMO required a plan or whether or not plan approval was given by any jurisdiction, including the KSFM.**

Currently, there are no mandatory statewide qualifications for the installation of fire alarm systems. Every new system and modified system are expected to be reviewed or under the supervision of either a Kansas licensed engineer with knowledge in fire alarm systems or an individual holding certification from independent testing agencies such as NICET.

### **Application**

This policy applies to the following facilities and situations:

- New system installations.
- Existing system additions, alterations, and other changes.
- Other non-priority occupancies will be included as appropriate.

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**FIRE FACT NO. 033 CHECKLIST(s) : 99-03, 14, 16**  
**TITLE : FIRE WATCH GUIDELINES**  
**CHECKLIST ITEM(s) : 99-03, 14, 16**  
**REFERENCE(s) : 91-101/31-1**  
**PAGE 1 of 1**

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### *Definition*

A fire watch is a short-term, emergency measure to provide an acceptable level of life safety in a building that has an impaired fire safety system. A fire watch is a compensatory measure only. It is intended to allow continued occupancy of a building or facility that may not be safe to be occupied during the time period required for implementing appropriate changes or repairs. The purpose of the fire watch is to check ALL areas of the building on a regular basis to detect fire/life safety emergencies and then to alert the facility occupants to take appropriate action as early as possible.

### *When Required*

A fire watch is usually required to be implemented IMMEDIATELY when certain conditions are discovered either by the facility themselves or by other authorities. Examples of when a fire watch may be required by the Kansas State Fire Marshal Office (KSFMO) include:

- Outage or significant impairment of the fire alarm signaling system.
- Outage or significant impairment of the automatic fire suppression system.
- Outage or significant impairment of the facility water supply.
- Impairment of the facility's exiting system NOT significant enough to warrant evacuation and shutdown of the facility.

Different occupancies have different levels of risk determined a great deal by the relative vulnerability of the occupants. It is not appropriate to treat all occupancies the same, therefore each situation shall be evaluated individually and the above examples are not proscriptive.

### *Fire Watch Procedures*

- Notify ALL staff and occupants (if appropriate) immediately.
- Fire watch shall be maintained during entire period of facility occupancy.
- Person(s) assigned to the fire watch **SHALL HAVE NO OTHER DUTIES.**
- Fire watch plans include notification/communication procedures. May include the use of portable radios and cellular phones to send an alarm to occupants and emergency response forces.
- Fire watch shall include ALL AREAS of the facility. Special attention shall be paid to storage areas, janitor closets, utility spaces, and other normally unoccupied areas.
- All areas are to be checked **at least hourly.** More frequent checks may be mandated if required.



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**FIRE FACT NO. 036 CHECKLIST(s): ALL**  
**TITLE: SMOKE DETECTION**  
**CHECKLIST ITEM(s):**  
**REFERENCE(s):**  
**PAGE 1 of 2**

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The use or requirement for smoke detection in regulated facilities is becoming much more common. The Kansas State Fire Marshal's Office requires smoke detection in some specific regulated facilities and in all regulated facilities with sleeping occupants. We have also accepted smoke detection as a compensatory measure for some facilities not requiring smoke detection. (See Fire Fact 020). This concept is based on the automatic early detection and notification of the occupants and their speedy evacuation prior to the exit way being obstructed by smoke.

### **SMOKE DETECTION: General**

By definition and by design, smoke detectors respond to the solid and liquid aerosols produced by a fire. Each type responds differently to different types of smoke. Also, because they respond to aerosols from non-fire sources, an understanding of their operating characteristics is helpful in their correct selection and placement to reduce the chances of false and nuisance alarms. Therefore, selection of a smoke detection principal should be based on the type of fire and fuel expected, as well as on environmental characteristics.

Smoke detectors are designed to detect smoke by one of two basic principles. They use either **ionization** or **photoelectric light** to detect smoke. Most detectors installed for use in the home or business fall into these two categories. However, there are some detectors that are available for special applications and specific uses. **The Kansas State Fire Marshal's Office will accept detectors using either of these principles.**

A smoke detector transmits an alarm signal either by sounding an internal alarm or by signaling a control panel. Most detectors encountered in field inspections fall into three general categories for sounding an alarm.

- (1) Single station detectors
- (2) Multiple station or interconnected detectors
- (3) Detection Systems

**Single station detectors:** These detectors provide coverage for a single area and will sound an alarm from that one single detector upon activation. This type of detector is powered by battery or household current. These detectors are readily available to the general public and allow for installation by the homeowner or facility operator.



## Kansas State Fire Marshal Prevention Division

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**FIRE FACT NO. 036 CHECKLIST(s) : ALL**

**TITLE : SMOKE DETECTION**

**CHECKLIST ITEM(s) :**

**REFERENCE(s) :**

**PAGE 2 of 2**

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**Multiple station or interconnected detectors:** These detectors are powered by the building electrical power supply and are connected together by an independent circuit. These detectors provide coverage for the multiple areas where detectors are located. All detectors connected in the circuit will sound upon activation of any one of the detectors. The application of this type detection is limited to the size of the facility and to the number of detectors required. These detectors are available through qualified electrical supply dealers and installers.

**Detection systems:** These detectors are connected to an alarm control panel. The activation of the detector incorporates the use of additional fire alarm horns or bells, and lights for notification. These systems also have manual pull stations to allow for occupant activation of the fire alarm. Many of the systems installed today include diagnostic features that provide critical information as to the function and status of each detector in the system. These systems are available through and are installed by registered fire alarm companies.

The Kansas "Buildings" Fire Safety Handbook recognizes all of these types of detectors.

**The use of single station detection is allowed in some instances and must be approved and documented in writing by our office for the specific application.**

The use of multiple station detection and detection systems to meet the requirements set forth in the Kansas "Buildings" Fire Safety Handbook shall require KSFMO approval. This would include a copy of the equipment cut sheets, floor diagrams (showing placement of detectors, fire alarm control panel, pull stations, annunciation devices, etc.), specification sheets (if available), and any other information relevant to the smoke detection system.

**Installation:** We recommend that detectors be securely mounted on the ceiling of the area to be protected. They should be installed as per the manufacturers instructions. They should not be installed near vents, fans, or other air handling equipment that can create a dust buildup and cause smoke detector malfunction.

**Maintenance:** All detectors are required to be maintained for proper operation. **It is the responsibility of the facility to document all monthly, annual, or semi-annual testing and maintenance records.** Documentation records shall be maintained on site and shall be kept readily available for review. A sample form for "Maintenance and Testing Documentation" is available in the Kansas Buildings Fire Safety Handbook as Fire Fact #016. These records should be kept by the facility owner/operator for a period of five years.

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**FIRE FACT NO. 045 CHECKLIST(s): 99**  
**TITLE: REQUIREMENTS FOR SPRINKLER SYSTEMS**  
**CHECKLIST ITEM(s): 99-16, 99-17, 99-18**  
**REFERENCE(s): 91-101/31-1.3.6**  
**PAGE 1 of 2**

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### Purpose

- To help ensure an appropriate level of life safety in certain occupancies by clarifying requirements for design, installation, inspection, and maintenance of automatic fire sprinkler systems.
- To reduce confusion by communicating system design, installation, inspection, testing, and maintenance expectations therefore enhancing efficient management of state and local resources as well as improving fire protection and life safety for the citizens of Kansas.
- To help ensure the parties responsible for the design, installation, inspection, testing, and maintenance of automatic fire sprinkler systems are doing so in a satisfactory manner. *It is the intent of the Kansas State Fire Marshal to elevate the quality of practice of all who deal with suppression systems.*

### Summary

This Fire Fact is intended to clarify the Kansas State Fire Marshal Office's (KSFMO) position concerning the minimum (i.e. required and expected) design, plan submittal, installation, inspection, testing, and maintenance requirements for automatic fire sprinkler systems. Guidance is provided for new system installations and work concerning existing systems.

### Background

The KSFMO is required by K.S.A 31-133 to adopt reasonable rules and regulations for the safeguarding of life and property from fire and explosions.

In addition, the KSFMO is required to act as the Authority Having Jurisdiction (AHJ) in specific occupancies. Resources are dedicated to the "priority" facilities having the most vulnerable occupants. They are:

- Educational, including private schools, pre-schools, daycare, child care centers, and state institutions including regents universities.
- Health care, including hospitals, "adult care facilities", nursing homes, ambulatory care centers, and residential board and care facilities.
- Correction and detention.



## Kansas State Fire Marshal Prevention Division

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**FIRE FACT NO. 045 CHECKLIST(s): 99**  
**TITLE : REQUIREMENTS FOR SPRINKLER SYSTEMS**  
**CHECKLIST ITEM(s) : 99-16, 99-17, 99-18**  
**REFERENCE(s) : 91-101/31-1.3.6**  
**PAGE 2 of 2**

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The KSFMO has adopted via regulation, the following codes and standards for the purpose of fulfilling KSA 31-133 and ensuring a satisfactory level of fire protection and life safety.

- UBC, 1997
- UFC, 1997
- NFPA 13, through UBC/UFC

Later editions of the above codes may be approved for use by the KSFMO.

Only those individuals properly trained, educated and experienced shall participate in work on these systems.

**Existing systems shall be maintained according to the applicable codes and standards listed above.**

By adopting these minimum standards, the KSFMO is requiring a minimum level of protection be provided through system design, installation, inspection, and maintenance.

Plans for automatic fire sprinkler systems in “priority” facilities shall be submitted to the KSFMO for approval. The submitted plans shall comply with standards set forth by the KSFMO and shall include; system layout diagrams, equipment cut sheets, hydraulic calculations. (See 1997 UBC Standard 9-1 section 6-1). Approval of the completed installation shall require submittal of “Contractors Material And Test Certificate for Aboveground Piping”.

**The design, installation, modification, inspection, and maintenance of fire sprinkler systems shall comply with all requirements of the applicable nationally promulgated codes and standards, regardless of whether or not the KSFMO required a plan or whether or not plan approval was given by any jurisdiction, including the KSFMO.**

Currently, there are no mandatory statewide qualifications for the installation of automatic fire sprinkler systems. Every new system and modified system are expected to be reviewed or under the supervision of either a Kansas licensed engineer with knowledge in automatic fire sprinkler systems or an individual holding certification from independent testing agencies such as NICET.

### Application

This policy applies to the following facilities and situations:

- New system installations.
- Existing system additions, alterations, and other changes.
- Other non-priority occupancies will be included as appropriate.

## INFORMATION SOURCES

The following publications can be obtained from your County Emergency Manager or from FEMA by writing to:  
FEMA, Publications  
P.O. Box 2012  
Jessup, MD 20794-2012

- [Principal Threats Facing Communities and Local Emergency Management Coordinators \(FEMA 191\)](#)—Statistics and analyses of natural disasters and man-made threats in the U.S.
- [Flood Proofing Non-Residential Structures \(FEMA 102\)](#)—Technical information for building owners, designers and contractors on flood proofing techniques (200 pages).
- [Non-Residential Flood Proofing—Requirements and Certification for Buildings Located in Accordance with the National Flood Insurance Program \(FIA-TB-3\)](#)—Planning and engineering considerations for flood proofing new commercial buildings.
- [Answers to Questions About Substantially Damaged Buildings \(FEMA 213\)](#)—Information about regulations and policies of the National Flood Insurance Program regarding substantially damaged buildings (25 pages).
- [Design Guidelines for Flood Damage Reduction \(FEMA 15\)](#)—A study on land use, watershed management, design and construction practices in flood prone areas.





# Sample Forms

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Disaster Response and Recovery Team  
Disaster Response and Recovery Plan Distribution Register  
Disaster Response and Recovery Plan  
Acknowledgement of Receipt  
Disaster Response and Recovery Plan  
Training Drills and Exercises  
Disaster Response and Recovery Plan  
Maintenance Transmittal Memo

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## DISASTER RESPONSE AND RECOVERY TEAM

Staff Member	Work Phone	Home Phone	Pager
Administrator/Operator: Alternate			
Director of Nursing Services: Alternate			
Charge Person: Alternate:			
Business Manager: Alternate:			
Maintenance Supervisor: Alternate:			
Social Worker: Alternate:			
Medical Records: Alternate:			
Environmental: Alternate:			
Dietary: Alternate			
Other: Alternate			



# DISASTER RESPONSE AND RECOVERY PLAN

## ACKNOWLEDGEMENT OF RECEIPT

To:

Date:

From:

Personnel File

Subject:

The Disaster Response and Recovery Plan and/or individual Team Plans are distributed to authorized personnel to assist in the understanding and performance of responsibilities and procedures related to its activation and use in an emergency or disaster.

The Plan is intended for the individual's use while an employee of the (Facility Name). If reassignment or change in employment status occurs, it is the responsibility of the individual to return their assigned copy of the Plan to the Disaster Recovery Coordinator.

The individual is responsible for the proper maintenance and security of the Plan for as long as it is so assigned. Individual copies of the Plan will be subject to review and audit at the request of the Disaster Recovery Coordinator.

The undersigned does therefore acknowledged receipt of the Disaster Response and Recovery Plan and/or Team Plans and does understand and concur with the maintenance and security conditions set forth above.

For the Position of:

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Receipt Acknowledged By:

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Disaster Recovery Coordinator:

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

Return Acknowledge By:

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Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# DISASTER RESPONSE AND RECOVERY PLAN

## TRAINING DRILLS AND EXERCISES

TY 2__	Jan/Feb	March/April	May/June	July/Aug	Sept/Oct	Nov/Dec
Management Orientation/ Review						
Employee Orientation/ Review						
Resident Orientation/ Review						
Contractor Orientation/ Review						
Community/Media Orientation/ Review						
Management Table Top Exercise						
Response Team Table Top Exercise						
Walk Through Drill						
Functional Exercise						
Evacuation Drill						
Full Scale Exercise						

