# IN CASE OF EMERGENCY CALL 9-1-1

# People Inc. RESIDENTIAL DEPARTMENT **EMERGENCY PREPAREDNESS POLICY**

# MANAGEMENT CHAIN CONTACT NUMBERS

Senior	Residential Supervisor (SRS):
>	Name:
	Name: Cell (include area code):
Reside	ential Director (RD):
	Name:
	Cell (include area code):
>	Fax (if applicable):
Associ	ate Vice President (AVP): (Place a $\sqrt{\text{next to the AVP of the site}}$ ):
	Sandie Brown-Maynard: 716.345.0764 (cell)
	Karen Lazik: 716.479.4738 (cell)
	Kristi Leone: 716.536.8203 (cell)
	Jamie Marzec: 716.468.0945 (cell)
	Cheryl Stevens: 716.989.1435 (cell)
	Kathleen Wahila: 716.445.6318 (cell)
	Jordan Wollaber: 716.291.8305 (cell)
Clinica	al Vice President Behavioral Health:

#### (

➤ Julie Barber: 716.220.3074 (cell)

#### **Senior Vice President:**

Dawn MacMurray: 716.866.5358 (cell)

# MANAGEMENT CHAIN CONTACT PROCEDURES

- 1. For emergencies, please initiate contacting the management chain listed above until you reach someone.
- 2. For non-emergencies, if unable to reach your direct supervisor, please leave a message and wait 15 minutes. If you do not hear back, please call again. If you still do not hear back, please call the next member of the management chain listed above.
- 3. If you are still unable to reach the management chain, please contact the Agency Administrative On-Call Number at 716.634.8132 and follow the prompts/directions given.

# ADDITIONAL CONTACT NUMBERS

#### **FIRE SAETY:**

#### **Monitoring Company:**

- Name of Company: \_\_\_\_\_
- Phone: \_\_\_
- Password:

# **INCIDENT REPORTING:**

# People Inc. QI 24/7 Incident Help Line:

For incidents: 716.255.4182

#### **OPWDD Justice Center:**

For reporting allegations of abuse and neglect: 1.855.373.2122

# **CARE COORDINATION ORGANIZATION (CCO) AGENCIES:**

- Person Centered Services: General Information: 1.888.977.7030
- Person Centered Services: On-Call Number (after 4:30pm): 1.833.200.0678
- ➤ Prime Care: Western NY: On-Call Number: 716.225.5861
- ➤ Prime Care: Finger Lakes: On-Call Number: 585.392.4812

#### **PEOPLE INC. TECHNOLOGY:**

#### **People Inc. IT Department Help Desk:**

For computer/technology concerns: 716.817.7200

# **People Inc. eVero Support:**

➤ eVero Help Form: Located on People Connect via Application Links page, External Applications, eVero Help Form



# VIRTUAL MEDICAL CARE ON-CALL RN

# **Prior to calling Virtual Medical Care, please complete the following:**

- 1. Please have a full set of vital signs completed with the person-served, for non-life threatening emergencies (whenever possible).
- 2. Please also have the tablet/laptop available for telehealth visits as necessary.
- 3. If the tablet/laptop is not fully charged locate the charger and plug in the tablet/laptop.

#### **Virtual Medical Care**

# When To Call The Virtual Medical Care On-Call RN

Type of Call:	Who To Call:	
Call	ll 911 for all life threating emergencies!	

# After calling 911, call Virtual Medical Care.

# For any of the following:

- Illness
- Injury
- Health status changes
- Declined fluid intake for an 8-hour period / food intake for a 24-hour period during naturally-occurring times (e.g., meals, snacks etc.)

# For any of the following:

- Medication Questions/Concerns
- Medication Incidents/Actual Medication Errors
- Medication Verification:
  - o New/Changes in Medications/Treatments
- Medication Verification for Psychiatric Medications:
  - o Change in Psychiatric Medications within range
- Upon a person returning after ER visit to review and complete PONS
- Upon a person returning after a MD appointment (if questions/concerns)
- \*\*Behavioral Health Concerns
- Person Specific Protocol Concerns:
  - Seizure
  - o Fall
  - o Chest Pain
  - Choking
  - Vital Signs
  - Blood Sugar
  - o Pulse OX
  - o Weight
  - o Fluid/Food Intake

Virtual Medical Care On-Call RN:

Phone: 716.395.3595 Fax: 716.427.0999

If the On-Call RN does not answer, please leave a message. If there is no response after 2 calls (30 minutes) contact Management Contact Numbers listed above. Management will then contact the On-Call RN Director: Denise Fleck @ 716.440.0634.

\*\*For Behavioral Health concerns, the VMC On-Call RN will rule out medical concerns and then instruct staff to contact the Residential Management Chain listed above.

# People Inc. Site RN / People Inc. On-Call RN

# When To Call The Site RN / On-Call RN

Type of Call:	Who To Call:
For any of the following:  Medication Verification for Psychiatric Medications: New Psych Medications Psychiatric Medications outside of range Discharge from ER (held for observation only) Discharge from Hospital Any Equipment Issues: CPAP/BiPAP Oxygen G-Tube Vital Sign Equipment Staff Medical Training (e.g., slings, ACE wrap, insulin/blood sugar, new equipment etc.)	Call Site RN: Site RN Name: Site RN Phone Number:  If there is no response after 2 calls (30 minutes) contact Residential Management Contact Numbers listed above. Residential Management will then contact Nursing Management.  If after hours or the Site RN is not available, Call People Inc. On-Call RN: Phone: 716.243.0389  If the On-Call RN does not answer, please do not leave a message, instead listen to the voice mail message, and obtain the phone number. If no response after 2 calls (30 minutes) contact Residential Management Contact Numbers listed above. Residential Management will then contact Nursing Management.

# LIFE THREATENING MEDICAL EMERGENCIES

# 1. DO NOT WAIT, CALL 911

- For all serious or life threatening emergencies as per your training.
- ➤ When a person is unresponsive, not breathing, gasping and/or not breathing normally DO NOT WAIT, CALL 911 to activate emergency medical services (EMS) and perform Cardio-Pulmonary Resuscitation (CPR).

Please Note: For people with a Do Not Resuscitate (DNR) Order, CPR is NOT to be initiated.

When a person is experiencing Severe Choking and is conscious and is unable to cough, breathe or make any sounds DO NOT WAIT, CALL 911 to activate emergency medical services (EMS) and perform the Abdominal Thrusts. If after <u>5</u> abdominal thrusts the object is not cleared, use the LifeVac as per your training (if available).

Please Note: For Severe Choking, if the person is not transported via EMS, the person is still required to be evaluated by a medical practitioner via Telemedicine, the Emergency Room or Immediate Care Facility.

- ➤ Chest Pain (unless the person has a specific protocol)
- > Respiratory Distress
- > Uncontrollable bleeding
- ➤ Sign of shock (pale cool skin, blue lips or nails, rapid breathing, nausea, vomiting and restlessness)
- > Signs of stroke (drooping of one-side of face, one-side weakness, unable to speak, change of vision)
- 2. Contact the On-Call RN: 716.395.3595
- 3. Contact the Management Contact Numbers listed above
- 4. Contact the person's family/guardian/emergency contact
- 5. Contact the person's Care Manager

# <u>LIFE THREATENING MEDICAL EMERGENCIES REQUIRING THE USE OF AN EPI PEN / GLUCAGON:</u>

- 1. Administer Epi Pen / Glucagon
- 2. CALL 911
- 3. Contact the On-Call RN: 716.395.3595
- 4. Contact the Management Contact Numbers listed above
- 5. Contact the person's family/guardian/emergency contact
- 6. Contact the person's Care Manager

# INDIVIDUALIZED MEDICAL PROTOCOLS / MEDICAL EMERGENCIES

- 1. Follow all Individualized Protocols and make all necessary contacts per the protocol.
  - ➤ Vitals/Blood Pressure Protocols
  - ➤ Diabetic/Blood Sugar Protocols
  - > Seizure Protocols

# NON-LIFE THREATENING MEDICAL EMERGENCIES

# **MORE THAN BASIC FIRST AID MEDICAL EMERGENCY:**

#### 1. Contact the On-Call RN: 716.395.3595

- > For all non-life threatening medical emergencies as per your training.
- ➤ When a person is experiencing Mild Choking and is able to cough, breathe or make vocal sounds.
- ➤ When a person is experiencing an injury requiring *more* than basic first (e.g. possible sprain, burn).
- ➤ When a person is experiencing an illness (e.g. vomiting, rash, hives etc.)
- ➤ When a person declines fluid intake for an 8-hour period / declines food intake for a 24-hour period during naturally-occurring times (e.g., meals, snacks etc.).
- When the person may be developing a pressure wound.
- When the person may have a medical concern (e.g. bed bug bites, scabies etc.)
- When a person is experiencing a human bite regardless if there is a break in the skin.
- When a person bites someone which causes skin to be broken with possible blood exposure.
- 2. Contact the Management Contact Numbers listed above
- 3. Contact the person's family/guardian/emergency contact
- 4. Contact the person's Care Manager
- 5. Complete DA Log
- 6. Place Body Check Sheet in the MAR (Binder) (if applicable by program type) for staff completion (e.g., Day <u>2</u> and Day <u>3</u> etc.)

Please Note: In the event of a serious injury the initial Body Check Sheet may be delayed until further directed by nursing and/or management.

7. Complete OPWDD 147 Form/Agency Incident report as directed by management.

# **BASIC FIRST AID**

# **BASIC FIRST AID:**

- 1. Upon discovery of a minor injury (e.g. minor cuts etc.) follows basic first aid training and responds to the injury accordingly.
- 2. Upon discovery of a person who **bit** someone and did NOT break skin and there was NO possible blood exposure.
- 3. Documents on a Body Check Sheet
- 4. Documents a DA Log.
- 5. Place Body Check Sheet in the MAR (Binder) (if applicable by program type) for staff completion (e.g., Day <u>3</u> and Day <u>3</u> etc.)
- 6. Place the Body Check Sheet in the MAR for staff completion (e.g. Day 2 and day 3 etc.).

# **NO BASIC FIRST AID:**

- 1. Upon discovery of a minor injury (e.g. minor scratch, small bruise, and minor abrasions) NOT requiring any basic first aid.
- 2. Documents on a Body Check Sheet
- 3. Documents a DA Log.
- 4. Place Body Check Sheet in the MAR (Binder) (if applicable by program type) for staff completion (e.g., Day 2 and Day 3 etc.)
- 5. Place the Body Check Sheet in the MAR for staff completion (e.g. Day 2 and day 3 etc.).

# BEHAVIORAL HEALTH EMERGENCIES / LETHALITY STATEMENTS MADE

Refer to person-served Behavior Support Plan (BSP)/Medication Monitoring Plan (MMP) for specific directives.

Refer to the Lethality Statement guide in the absence of individualized directives.

- 1. Contact 911 for all behaviors that are unable to be safely managed.
- 2. Contact 911 for all serious behaviors (if a person makes an attempt to self-harm that results in serious injury or has potential to cause death).
- 3. Upon observing an attempt at suicide or any serious self-harm provide for the safety of the person by:
  - a) moving the person to a safe location
  - b) removing objects that could be used by the person to harm him or herself
- 4. Upon the person reporting they are going to self-harm provide for the safety of the person by:
  - a) increasing supervision
  - b) removing objects that could be used by the person to harm him or herself
- 5. Follow the persons Behavior Support Plan/Medication Monitoring Plan (If applicable)
- 6. Contact the On-Call RN: 716.395.3595 to rule out medical concerns
- 7. Contact the Management Contact Numbers listed above
- 8. Contact the person's family/guardian/emergency contact
- 9. Contact the person's Care Manager

# VEHICLE ACCIDENTS MEDICAL EMERGENCIES

- 1. DO NOT WAIT, Call 911 for all serious or life-threatening emergencies.
- 2. Call 911 for all vehicle accidents.
- 3. If people receiving services are in the vehicle and not transported via ambulance, contact Virtual Medical Care On-Call RN: 716.395.3595.
- 4. Do NOT leave the scene or drive the vehicle.
- 5. Contact the Management Contact Numbers listed above *immediately* for all vehicle accidents and wait for further guidance and an alternate driver to come to the scene.
- 6. Complete Auto Accident Report Form located in van
- 7. Send the completed form to the MVA@people-inc.org
- 8. Contact Kathryn Alterio from HR *immediately* for all vehicle accidents with serious staff injuries: 716.536.2171 cell

Please also refer to the Staff Injury section as necessary.

#### VEHICLE PROCEDURES

## **VEHICLE USE:**

Each site has an agency vehicle(s) to meet the needs of people receiving services. Vehicle use includes but is not limited to the following activities: medical appointments, community activities, transportation to and from day services, agency meetings etc. The vehicle should not be used by staff for personal trips or errands.

The vehicle comes equipped with a GPS that monitors vehicle speed, breaking and acceleration to ensure everyone's safety.

The vehicle has an assigned gas card for the agency vehicles only. Staff are required to monitor the tanks' fullness and fill the tank as necessary.

Staff are required to complete the Driver's Trip By Trip Record for each destination and/or stop on the trip. Staff are also required to clean the vehicle after each use and remove any garbage.

In the event the agency vehicle is already in use and another spontaneous activity comes up, staff will follow the outline below:

1	l. (	Contact	sites	nearby	to	borrow	anothe	r ag	ency	vehic	le:

1 <sup>st</sup> site nearby:	Phone:
2 <sup>nd</sup> site nearby:	Phone:

- 2. If the vehicle is available, arrange to borrow for a specific activity and time frame.
- 3. Upon completion of the activity, return the vehicle timely.
- 4. If there is not a vehicle available, contact Management Contact Numbers listed above for further guidance.

#### **VEHICLE SERVICE:**

#### **Towing:**

> AAA 716.633.8363

➤ ARI Fleet Management 1-800-CAR-CARE / 1-800-227-2273

# STAFFING EMERGENCIES

# STAFFING SHORTAGE (e.g., due to a no-call, no-show, medical emergency, site emergency etc.):

- 1. Contact the Management Contact Numbers listed above
- 2. Remain at the site until staff and/or management arrive
- 3. Do not leave people unattended at the site as supervision/safeguards are required to be implemented at all times as written in each person's plan.

## **STAFF INJURY:**

- 1. Contact 911 for all serious and/or life threatening emergencies and go to the nearest emergency room.
- 2. Contact the Management Contact Numbers listed above
- 3. Injured employees who require medical treatment are required to call the Corvel PPO Nurse Triage (24/7) at 1.855.265.8210 to coordinate care or if medical advice is needed.
- 4. Contact Human Resources, especially if medical treatment is necessary
  - a. \*Paulette Byrne: 716.817.7425
  - b. \*Employee Service Line: 716.817.7272
    - \*If the injury occurs after hours leave a message on one of the above voice mails
- 5. Complete Staff Injury Report regardless if medical treatment is necessary or not.
- 6. Fax the Staff Injury Report to 716.817.2600 within 24 hours

# PHYSICAL PLANT / MAINTENANCE EMERGENCIES

#### **Associate Vice President of Facilities:**

> Jeff Dulinawka: 716.491.0613

#### **Director of Facilities:**

Residential: Jon Salas:.716.243.0511

Admin/SL/Tax Credit: Peter Dauphin: 716.341.9209

# **BUFFALO AREA & ROCHESTER AREA:**

1. Contact On-Call Maintenance:

North: 716.440.8807 (cell) South: 716.989.7187 (cell) Rochester: 716.263.1216 (cell)

2. Wait 15 minutes. If no response continue to #3.

3. Contact the Project Managers:

North Region: Derek Thurlow: 716.536.1950

Central North Region: Dermot McGrane: 716.264.1798 Central South Region: Ron Jeacoma: 716.713.2745

**South Region:** Emory Gott: 716.336.5472

4. Contact Management Contact Numbers listed above

# APPLIANCE REPAIR AND SERVICE EMERGENCIES

Orville's Appliances

716.998.3434

# BUFFALO AREA EMERGENCY SERVICES / HOSPITALS

<b>EMERGENCY SERVICES:</b>	<b>Area Code: (716)</b>
American Red Cross	886.7500
Poison Control of WNY	878.7654 / 800.888.7655
Crisis Services	834.3131
Niagara Frontier Transportation Authority	855.7300
BUFFALO / NIAGARA HOSPITALS:	<b>Area Code: (716)</b>
Bertrand Chaffee	592.2871
Brooks Memorial (Dunkirk)	366.1111
BryLin	886.8200
Buffalo General	859.5600
DeGraff Memorial	694.4500
Erie County Medical Center	898.3000
Inter-Community Memorial (Newfane)	778.5111
Kenmore Mercy	447.6100
Lockport Memorial	514.5700
Mercy Ambulatory Care Center	662.0500
Mercy Hospital	826.7000
Millard Fillmore (Suburban)	568.3600
Mount St. Mary's Hospital & Health Care Center (Lewiston)	297.4800
Niagara Falls Memorial Medical Center	278.4000
Oishei Children's Hospital	323-2000
Roswell Park	845.2300
Sisters of Charity	862.1000
Sisters St. Joseph Campus	891.2400
Veteran's Administration	834.9200
<b>DEPARTMENT OF HEALTH CONTACTS:</b>	Area Code: (716)
New York State Department of Health	847.4500
Erie County Department of Health	858.7690
Niagara County Department of Health	439.7430
Cotto acceptance Country Deposits and of Health	272 0050

Cattaraugus County Department of Health Chautauqua County Department of Health

373.8050 753.4312

# ROCHESTER AREA EMERGENCY SERVICES / HOSPITALS

# **EMERGENCY SERVICES:**

Poison	Control Help	o (The U	pstate NY Poison Center	1.800.743.1702
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ROCHESTER HOSPITALS:	<b>Area Code: (585)</b>

Highland Hospital	473.2200
Monroe Community Hospital	760.6500
Rochester General Hospital	922.2900
Strong Memorial Hospital	275.2100
Unity Health System Unity Hospital	723.7015

# **<u>DEPARTMENT OF HEALTH CONTACTS</u>**:

New York State Department of Health	716.847.4500
Monroe County Department of Health	585.753.5437

# **DEPARTMENT OF EMERGENCY MANAGEMET:**

Monroe County Emergency Management 585.753.3810

# BUFFALO AREA UTILITIES

# **ELECTRIC**:

*New York State Electric and Gas Company	
<ul> <li>Electrical Interruption/Emergency</li> </ul>	1.800.572.1131
Natural Gas Odor/Emergency	1.800.572.1121
*National Grid	
Power Outage	1.800.867.5222
Gas & CO emergency helpline	1.800.892.2345
NATURAL GAS:	
*National Fuel	
➤ Gas Emergencies, 24-Hour	1.800.444.3130
*New York State Electric and Gas Company	
<ul><li>Electrical Interruption/Emergency</li></ul>	1.800.572.1131
Natural Gas Odor/Emergency	1.800.572.1121
TELEPHONE:	
*Verizon 24-Hour Repair Service	
Residential Customers	1.800.837.4966
	(1.800.Verizon)
Business Customers	1.800.837.4966
	(1.800.Verizon)
*AT & T Repair Service, 24 Hour	
Residential Customers	1.800.222.0300
Business Customers	1.800.222.0400
*Spectrum	1.833.949.0036
<u>WATER</u> :	
*Erie County Water Authority	716.849.8484

Please Note: When contacting any of the above companies, you may need to give them the Agency business name and address: People Inc. 1219 North Forest Road, Williamsville NY 14221 and/or a password or pin# 1219.

# **ROCHESTER AREA UTILITIES**

# **ELECTRIC**:

# \*Rochester Gas & Electric

Natural Gas Odor/Emergency	1.800.743.1702
Electrical Interruption/Emergency	1.800.743.1701

# **NATURAL GAS:**

# \*\*Rochester Gas & Electric

Gas Emergency	1.800.743.1702
Power Outage	1.800.743.1701

# **TELEPHONE:**

*Time Warner	1.800.756.7956
*Frontier	1.800.921.8101
*Spectrum	1.833.949.0036

# **WATER:**

> \*Monroe County Water Authority 585.442.7200

585.422.2009 (After Hours)

# ADDITIONAL EMERGENCY CONTACT PHONE NUMBERS

# **FEDERAL EMERGENCY CONTACTS:**

FEMA Disaster Assistance	800.621.3362
Center for Medicare and Medicaid Services	800.633.42274
United States Department of Health and Human Services	877.696.6775

# **POLICE AGENCIES NON-EMERGENCY NUMBERS:**

	<b>Area Code: (716)</b>
Akron Police	542.4481
Angola Police	549.3600
Amherst Police	689.1311
Blasdell Police	648.5111
Buffalo Police Headquarters	853.2222
Chautauqua County Sheriff	753.4231
Cheektowaga Police	686.3510
Depew Police	683.1123
East Aurora Police	652.1111
Eden Police	992.9211
Erie County Sheriff	853-2903
Evans Police	549.3600
Gowanda Police	532.2020
Grand Island Police	667.5201
Lancaster Police	683.2800
Niagara County Sheriff	438.3393
North Tonawanda Police	692.4111
Orchard Park Police	662.6444
Hamburg Police	648.5111
Hamburg Village Police	649.4501
Tonawanda Police (City)	692.2121
Town of Tonawanda	876.5300
State Police (Boston)	941.9300
State Police (Clarence)	759.6831
State Police (Lockport)	434.5588
State Police (Niagara)	297.8831
State Police (Other areas)	941.9300
State Police (Thruway)	836.0240 / 896.2525
West Seneca Police	674.2280

# **DEPARTMENT OF EMERGENCY MANAGEMENT:**

New York State Office of Emergency Management	518.292.2275
Erie County Emergency Management	681.6070
Niagara County Emergency Management	438.3171
Cattaraugus County Emergency Management	938.2213
Chautauqua County Emergency Management	753.4341

#### **EMERGENCY PREPARDNESS**

The following is a list of potential emergencies that can occur in or around the site. If any of the emergencies listed below present themselves follow the instructions and make notification(s).

In certain cases, there are actions staff can take immediately to lessen the potential risk to health and safety of the people we serve and themselves. When this is the case, these actions are referenced herein or in a separate Standard Operating Procedure (SOP).

In the immediate time, after the hazard is discovered and staff have taken the initial actions, staff should then defer to emergency responders to address mitigation of the emergency.

In the case of more complex incidents the management team, in coordination with the Emergency Preparedness Coordinator/or designee and responding emergency personnel, will create an Incident Action Plan. As necessary the Incident Action Plan will then be shared with staff to implement.

#### **Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)**

## PERSON MISSING/UNAUTHORIZED ABSENCE:

- 1. Contact the Management Contact Numbers
- 2. Management contact to contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)
- 3. Based on the person-served current status, needs and history, the Management Contact and Emergency Preparedness Coordinator/designee will determine an Incident Action Plan and relay it to staff to implement. Management Contact should refer to the Missing Person/Unauthorized Absence SOP for further instruction.
- 4. Contact the person's family/guardian/emergency contact
- 5. Contact the person's Care Manager

# **POLICE EMERGENCIES:**

- 1. Contact 911 as necessary
- 2. Contact the Management Contact Numbers
- 3. Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)

#### \*\*FIRE EMERGENCIES:

- 1. Contact 911 as necessary
- 2. Follow the Fire Evacuation Plan SOP
- 3. Contact the Management Contact Numbers
- 4. Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)

# \*\*CARBON MONOXIDE/GAS EMERGENCIES:

- 1. Follow the Fire Evacuation Plan SOP CO Monoxide Emergency Section
- 2. Contact the Management Contact Numbers
- 3. Contact Facilities Department Refer to Emergency Maintenance Repair and Service
- 4. Follow Fire Department / Gas Company Recommendations
- 5. Only if an evacuation is recommended, Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)

#### **HAZARDOUS MATERIALS EMERGENCIES**

- 1. Contact 911 as necessary
- 2. Follow Fire Department / Emergency Services Recommendations
- 3. Contact the Management Contact Numbers listed above
- 4. Management Contact to contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)
- 5. In the event an evacuation is being ordered by authorities the Emergency Preparedness Coordinator/ or designee will coordinate with the Management Contact and instruct staff on the Incident Action Plan.

# \*\*<u>UTILITY COMPROMISE - (LOSS OF ELECTRCITY, HEAT, GAS, WATER, TE</u>LEPHONE):

- 1. Contact local Utility Company See attached list of phone numbers
- 2. Contact the Management Contact Numbers

- 3. Management Contact to coordinate with Emergency Preparedness Coordinator if repair or outage takes an extended amount of time (Over 2 hours): Thomas Ess: 716.714.5384 (cell)
- 4. In the event an evacuation is advisable the Emergency Preparedness Coordinator/ or designee will coordinate with the Management Contact and instruct staff on the Incident Action Plan. Management Contact can refer to Site Evacuation Evaluation SOP.

<sup>\*\*</sup>RESPITORY BOURNE ILLNESS: Refer to HERO ACT Plan.

<sup>\*\*</sup> WORKPLACE VIOLENCE: Refer to the Workplace Violence Prevention Program.

# EMERGENCY PREPARDNESS FOR SEVERE WEATHER

## \*\*TORNADO:

- 1. Upon notification of a Tornado Warning: Seek shelter in a sturdy building ideally in a basement (if possible) or if a basement is not available or ambulation needs prevent access, go to the center of the site in an interior room or hallway that is away from windows and outside walls. If ability allows prompt person-served to get down on the floor, face down and covering their head. Staff should do the same.
- 2. Contact the Management Contact Numbers listed above
- 3. Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)
- 4. If there is damage to the building, Contact Facilities Department *Refer to Emergency Maintenance below*

#### \*\*HURRICANE:

- 1. **Stay inside:** Remain indoors throughout the storm, avoiding windows and glass doors.
- 2. **Seek shelter on the lowest level:** Go to a small, interior room on the lowest floor of your house, ideally with no windows.
- 3. Close all interior doors: Shut all interior doors to help distribute pressure throughout the house.
- 4. **Monitor updates:** Listen to local radio or TV broadcasts for updates and instructions from authorities.
- 5. **In the event an evacuation is being ordered by authorities** the Emergency Preparedness Coordinator/designee will coordinate with the Management Contact and instruct staff on the Incident Action Plan.

# \*\*SNOW / ICE EMERGENCY:

- 1. Emergency Preparedness Coordinator/designee monitors for Snow and or Ice emergency watches and warnings.
- 2. The Emergency Preparedness Coordinator/designee in coordination with the Management Contact will determine when these require action by staff and will provide an Incident Action Plan for staff to implement.
- **3.** For any concerns that arise during this type of emergency, Contact the Management Contact Numbers listed above
- 4. Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)
- 5. If there is damage to the site, Contact Facilities Department *Refer to Emergency Maintenance Repair and Service below*

<sup>\*\*</sup>Please Note: Management will consult with QI to determine OPWDD/DQI notification.

# EMERGENCY FOOD SUPPLY

# **Suggested Food Supplies for an Emergency:**

☐ Comfort/stress foods

The following items are suggested when selecting emergency food supplies. Each site should maintain a three-day supply of foods of this type multiplied by number of person-served and accounting for the site staffing pattern.

Ready	-to-eat canned meat, fruits, vegetables and a non-electric mechanical can opener.
	Water (1 gallon per person per day)
	Protein or fruit bars
	Dry cereal or granola
	Peanut butter
	Dried fruit
	Nuts
	Crackers
	Canned juices
	Non-perishable pasteurized milk
	High energy foods
	Vitamins

# FOOD SAFETY AND SANITATION IN AN EMERGENCY

Flood, fire, national disaster or the loss of power from high winds, snow or ice could jeopardize the safety of your food. Knowing what to do before and after an emergency can help you reduce your risk of illness and minimize the amount of food that may be lost due to spoilage.

Power outages can occur at any time of the year and it may take from a few hours to several days for electricity to be restored to residential areas. Without electricity or a cold source, food stored in refrigerators and freezers can become unsafe. Bacteria in food grow rapidly at temperatures between 40 and 140 °F, and if these foods are consumed, people can become very sick.

### DO:

- Keep food in covered containers.
- Keep cooking and eating utensils clean.
- Keep garbage in closed containers and dispose outside, burying garbage if necessary.
- Keep your hands clean by washing them frequently with soap and water that has been boiled or disinfected.
- Discard any food that has come into contact with contaminated floodwater.
- Discard any food that has been at room temperature for two hours or more.
- Discard any food that has an unusual odor, color or texture.

#### DON'T:

- Eat foods from cans that are swollen, dented or corroded, even though the product may look safe to eat.
- Eat any food that looks or smells abnormal, even if the can looks normal.
- Let garbage accumulate inside, both for fire and sanitation reasons.

**Note:** Thawed food usually can be eaten if it is still "Refrigerator Cold." It can be re-frozen if it still contains ice crystals. To be safe, remember, "When in doubt, throw it out."

For more information about food safety during an emergency, visit <u>FoodSafety.gov</u>.

# COOKING IN AN EMERGENCY

Alternative cooking sources in times of emergency include crockpots and microwave as the site standby generator will not provide enough power for the stove to operate. Grills can also be used, if accessible, and are for outdoor use only.

Commercially canned food may be eaten out of the can without warming.

#### To heat food in a can:

- 1. Remove the label.
- 2. Thoroughly wash and disinfect the can. (Use a diluted solution of one part bleach to ten parts water)
- 3. Open the can before heating.

# **Managing Food without Power:**

#### Be Prepared:

- Have a refrigerator thermometer.
- Know where you can get ice.
- Keep a few days' worth of ready-to-eat foods on hand that do not require cooking or cooling.

#### When the Power Goes Out:

- Keep the refrigerator and freezer doors closed as much as possible.
- The refrigerator will keep food cold for about 4 hours if it is unopened.
- Refrigerators should be kept at 40° F or below for proper food storage.

#### **Once the Power is Restored:**

- Check the temperature inside the refrigerator and freezer.
- If an appliance thermometer was kept in the freezer, check the temperature when the power comes back on. If the freezer thermometer reads 40° F or below, the food is safe and may be refrozen. If a thermometer has not been kept in the freezer, check each package of food to determine its safety. You can't rely on appearance or odor. If the food still contains ice crystals or is 40° F or below, it is safe to refreeze or cook.
- Refrigerated food should be safe as long as the power was out for no more than 4 hours. Keep the door closed as much as possible.
- Discard any perishable food (such as meat, poultry, fish, eggs or leftovers) that has been above 40° F for two hours or more.

References: http://www.fema.gov/food

#### **EVACUATION CONSIDERATIONS**

- In the event of the loss of heat at a site, staff should make appropriate notifications to Facilities and their Management Chain. Staff are to monitor temperature and alert Management and the VP of Emergency Management or designee when the temperature reaches 55 degrees Fahrenheit. At that point the VP of Emergency Management will decide on the need for evacuation.
- All evacuation locations, both primary and secondary, assigned to sites are OPWDD certified program
  sites. Therefore, all considerations for proper sanitary sewer, hygiene facilities, temperature control,
  HIPPA complaint medication administration spaces and file storage, necessary programmatic and
  personal hygiene supplies, ADA accessibility to protect person-served health and safety during the
  duration of evacuation.
- All evacuation locations, both primary and secondary, assigned to sites are OPWDD certified program sites. These facilities have provisions to preserve and protect all person-served files and information.
   Furthermore, staff working in these evacuation locations are People Inc. staff trained in HIPPA, maintaining files and availability of records.
- All evacuation locations are staffed by People Inc. staff who are trained in sharing information and
  medical documentation to maintain continuity of care. If a person is evacuated to another care facility
  staff are to use the Ready to Go packet that contains critical information for the person served. Staff are
  to refer to the agency's HIPPA policy for the release of patient information during an evacuation.
- If a route of travel to an evacuation site is obstructed by weather or other incident, staff will report the condition to the VP of Emergency Management or designee who will determine an alternative evacuation location(s).

#### TEMPORARY EMERGENCY EVACUATION PLAN

In the event of an emergency situation that may hinder the safe operation of the site temporarily, certain guidelines have been developed. When there are interruptions in services, which may include but are not limited to the fire safety system, electricity, heat, gas, water, telephone, and physical plant repairs etc. temporary measures may need to be put in place.

#### In the event that temporary measures are necessary, the following procedures will occur:

- 1. Contact the Management Contact Numbers listed above
- 2. Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)
- 3. Determine if the emergency situation is temporary
- 4. Determine if people are able to safely remain in the site under the temporary situation
- 5. Notify each family/legal guardian and/or emergency contact as necessary

# **List Temporary Emergency Placement:**

Name/Location:			
Address:			
Telephone:			
Directions:			

#### EXTENDED EMERGENCY EVACUATION PLAN

In the event an emergency situation that may hinder the safe operation of the site for an extended period of time, certain guidelines have been developed. Evacuation may be necessary when there are interruptions in services, which may include but are not limited to the fire safety system, electricity, heat, gas, water, telephone, and major physical plant repairs etc.

#### In the event the evacuation is necessary, the following procedures will occur:

- 1. Contact the Management Contact Numbers listed above
- 2. Contact Emergency Preparedness Coordinator: Thomas Ess: 716.714.5384 (cell)
- 3. Determine if the people are able to stay with the family/legal guardian for the duration of the evacuation.
- 4. If not, temporary shelter can be provided at another location until safe operation of the site can resume.
- 5. Notify each family/legal guardian and/or emergency contact as necessary

#### List shelter emergency placement:

In the event the evacuation is required to be an extended period of time due to the site not being safe to return, the Emergency Preparedness Coordinator and Management Chain may also consider an uncertified location (e.g., hotel etc.) with a working system and fire protection.

Name/Location:		
Address:		
Telephone:		
Directions:		

Please Note: Management will consult with QI to determine OPWDD/DQI notification.

# **EMERGENCY EVACUATION:** continued

# If relocation is necessary, staff will prepare and/or pack the following items for each person:

Medic	al Needs:
	Medication
	Medication Administration Record (MAR)
	Off-Site Medication Sheet (If going w/family)
	Medical Equipment (e.g. CPAP machine, oxygen, glucometer etc.)
	Medical Supplies (e.g. briefs, chuck pads, gloves, med cups etc.)
	Adaptive Eating and Feeding Equipment (e.g. weighted utensils, weight cup, scoop dish etc.)
	Security (lock box/lockable office space)
File / S	Site Information:
	Ready-To-Go Packet with emergency numbers
	eVero Book (Blank Back-Up eVero Form)
	Res Hab Books with IPOP's
	Accessible Account secured in a lock box
	Time Clock Adjustment Book
	List of staff phone numbers
	Security (lock box/lockable office space)
Person	nal Belongings:
	Change of Clothing
	Pajamas, Robe and Slippers
	Hygiene Supplies
	Pillows
	Blanket
	Leisure Activities and/or other items that provide comfort to the person
Site B	elongings:
	Towels and Washcloths
	Large garbage bags to store dirty clothes
Food 1	Items to Consider:
	Water
	Bread
	Milk
	Cereal
	Lunch Meat
	Snacks
Agenc	y File Information:
	<b>Posted copy</b> of Emergency Preparedness Policy with <i>current</i> Management Contact Numbers listed.

# People Inc. Extended Site Evacuation Record and Planner

			The Evacuation I			
		Family/Guardian/Advocate				
		Notification				
Person	*Staff	Name of Family Notified	Staff	Time	Initial	Extended
(initials)	Assigned to		Making	Notified	Evacuation Location	Evacuation Location
	Person (initials)		Notification (initials)			

<sup>\*</sup>Staff assigned are responsible for their accountability when evacuating from or arriving at a location. Once at the extended evacuation location the regular staff assignment checklist should be utilized. They are also responsible for packing belongings (if possible).

**Staff Key:** All staff present during the evacuation are required to sign the key.

Staff Initials	Staff Name (Printed)	Staff Signature	Title	Contact Information	Initial Evacuation	Extended Evacuation

# **Extended Site Evacuation Checklist:**

<sup>\*</sup>Staff assigned to specific people as listed above.

*Perso	onal Belongings:
	Change of Clothing
	Pajamas, Robe and Slippers
	Hygiene Supplies
	Pillows/ Blanket
	Person specific items
	Leisure Activities and/or other items that provide comfort to the person
**Staf	ff assigned to packing Medical Needs & File/Site Information below for all people receiving services:
**Me	dical Needs:
	Medication
	Medication Administration Record (MAR) (If Possible Bring Site Lap Top)
	Off-Site Medication Sheet (If going w/family)
	Medical Equipment (e.g. CPAP machine, oxygen, glucometer etc.)
	Medical Supplies (e.g. briefs, chuck pads, gloves, med cups etc.)
	Adaptive Eating and Feeding Equipment (e.g. weighted utensils, weight cup, scoop dish etc.)
	Security (lock box/lockable office space)
**File	e / Site Information:
	Ready-To-Go Packet with emergency numbers including the person's physician(s).
	eVero Book (Blank Back-Up eVero Form)
	Res Hab Books with IPOP's
	Time Clock Adjustment Book
	List of staff phone numbers
	Site Assignment Checklist
	Security (lock box/lockable office space)

# **Extended Site Evacuation Checklist (cont.):**

***Staff assigned to packing Site Belongings, Food, File Information and Site Equipment for all people receiving services:			
***Site Belongings:			
☐ Towels and Washcloths			
☐ Large garbage bags to store dirty clothes			
☐ Gas Card			
☐ Grocery Card			
***Food Items to Consider:			
□ Bread			
□ Milk			
□ Cereal			
□ Water			
☐ Lunch Meat			
□ Snacks			
☐ Specialized Diet Foods / Meal Supplements			
***Agency File Information:			
<ul> <li>□ Posted copy of Emergency Preparedness Policy with current Mana</li> <li>□ Revised Fire Evacuation Plan and Special Considerations</li> <li>□ Revised IPOP</li> </ul>	gement Contact Numbers listed.		
***Site Equipment / Property Utilized (e.g. Vitamix etc.):			

<b>Evacuation Report:</b>		
Place a $\sqrt{\ }$ in the appropriate box: $\ \ \Box$ Actual Evacuation $\ \ \Box$ Sim	ulated Drill (table top exercise)	
Site:	Time Program Evacuation Initiated	
Date:	Time Program at Initial Evac Location	
Hazardous Condition:	Time Program Evacuated to Emergency Location	
	Time Program Arrived at Extended Evacuation Site	
Cause of Hazardous Condition:	Time Program Returned	
Fire Department:		
Law Enforcement Agency:		
EMS Provider:		
Post Evacuation Analysis:		
To be completed after evacuation has been completed by staff in conjunction with all staff involved.		
Narrative of Evacuation (Who, What, Where, Why, When and Ho	ow):	
<b>Problems Encountered During Evacuation:</b>		
Staff Signature Comple	eting Evacuation Report:	
<b>Emergency Preparedness Coordinators Summary (to be complete</b>	ed only for actual evacuations):	
Emergency reparedness coordinators building to be complete	a only for actual cracuations).	

Emergency Preparedness Coordinator Signature:

# People Inc. RESIDENTIAL DEPARTMENT Emergency Preparedness Policy

Annual Review

The Emergency Preparedness Policy will be reviewed a minimum of once a year with all Residential staff, following initial orientation, and as needed thereafter.

The Emergency Preparedness Policy will also be posted in the site office near the phone and in site vehicle(s).

By signing below, I am acknowledging that I have read and/or been trained on the content, requirements and expectations of the policy and procedure listed above. I'm also acknowledging that I understand what I read and/or what training I received. I was given the opportunity to ask questions the date of this in-service. I also understand that if I have questions, at any time, regarding the policy, I will consult with my immediate supervisor.

Site: Trainer:

Review Date:		
Staff Print Name	Staff Signature	Date

3/20/2025