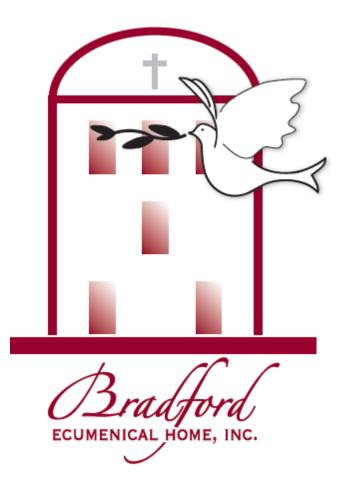
Emergency Preparedness Plan

Bradford Ecumenical Home, Inc.

Updated: 11/2017



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Objective

The Emergency Preparedness Plan is designed to prepare Bradford Ecumenical Home, Inc.'s personnel for responding to disasters or potential disasters. The purpose of this Emergency Plan is to identify each necessary function, determine who will be responsible for handling such, assign authority within that function and illustrate how that function will relate to others.

Applicability and Scope

Bradford Ecumenical Home, Inc. has completed a Hazard Vulnerability Assessment (see Risk/Vulnerability) and has determined potential internal and external hazards to the safety and welfare of the residents and employees.

The Emergency Preparedness Plan addresses the following planning elements which are included in this plan:

Organizational Chart (Including Emergency Contact Numbers); Emergency Management Command (Incident Command) Facility Risk Assessment – Hazard Vulnerability Assessment (HVA)/Security Vulnerability Assessment; Policies and Procedures (Types of Disasters); Communication Plan Collaboration and Coordination with Partners (Transfer Agreements); Training and Testing (New Employee/Volunteers/Annual Training/Drills/Exercises).

Overview of the Emergency Preparedness Plan

Bradford Ecumenical Home, Inc. is committed to protecting the well-being of our residents, staff, and visitors. An important aspect of this responsibility is the development and active commitment of facility leadership and staff to an effective Emergency Management Program (EMP). This document, our facility's All-Hazard Emergency Plan (EP), states our organization's understanding of how we will manage and conduct actions under emergency conditions. As such, it has been reviewed and approved by Bradford Ecumenical Home, Inc.'s Safety Committee.

We understand that there are a variety of hazards, both natural and human-caused that may pose risks to the health and safety of residents, staff and visitors. Furthermore, these hazards may also pose risks to our on-going business operations.

This is an "all hazards" plan and we have verified through our Hazard Vulnerability Analysis (HVA) that the hazards that pose the greatest risk (a combination of probability and consequence) are given special attention in our plan, training, and exercises.

We recognize that the effectiveness of this plan requires the commitment of facility administrators and staff. The day-to-day provision of services to our residents requires considerable focus and effort, yet we have a duty to prepare for events that may have significant impact to our residents and facility. This plan is a living document that will be reviewed at least annually and updated as necessary based on "lessons learned" during exercises or real events; the evolution of new "best practices"; or changes to local, state, and federal regulatory requirements.

Purpose and Scope

The purpose of our EP is to describe our all-hazards approach to emergency management, and by so doing, support the following incident objectives:

- Maintain a safe and secure environment for residents, staff and visitors;
- Sustain our organization's functional integrity, including our usual service and business functions (continuity of operations); and
- Integrate into the community's emergency response system as necessary.

The scope of this plan extends to any event that disrupts, or has the potential to disrupt, our normal standards of care or business continuity. This includes the impact due to internal incidents, such as a fire, or external incidents, such as a severe weather emergency.

Structure, Leadership, Succession Plans

Our facility has an organizational structure as indicated by the Organization Chart. This structure identifies the general chain-of-command and principal roles of facility administrators and senior management staff.

The normal organizational structure and its associated processes are well suited for day-to- day operations. However, it may not be an ideal structure for emergency management. Everyday decision-making at the organizational level is typically conducted with deliberate, time-consuming methods such as scheduled committee meetings, executive deliberations, and board meetings. Reflecting our chain-of-command, the senior authority on duty at the time of the emergency is responsible for activation of our EP. Once the EP is activated, our leadership structure may switch to the emergency management system, called the Incident Command System (ICS).

This ICS emergency management system is threaded through our EP, but the day-to-day management system does not "go away" during emergencies. Instead, the emergency management organization forms a "parallel structure" to the existing management team. The head of the emergency management system (called the "Incident Commander" or IC) reports to the Board of Directors.

Facility and Service Description

Bradford Ecumenical Home, Inc. is located at 100 St. Francis Drive, Bradford, PA. We are a Continuing Care Retirement Community that services the needs of the elderly and disabled of the Bradford (McKean County) and surrounding communities. The facility's occupancy, needs and the ability to provide assistance, to the authority having jurisdiction, the Incident Command Center or designee is outlined and/or addressed within the Facility's Assessment.

Safety Committee

The Bradford Ecumenical Home, Inc. has an established Safety Committee (Emergency Preparedness Committee) which is comprised of representatives from facility administration, management, supervisory staff, clinical team members, plant operations and support services. The community response partners are invited to the committee meetings as needed to provide guidance, support, training and resources for plan and procedure development. The committee is responsible for:

- Development and maintenance of the Emergency Preparedness Plan
- Correlation of the EPP with the Facility Assessment
- Oversight of the Hazard Vulnerability Assessment
- Development and conducting of training and testing exercises
- Conducting after action reviews of training, testing, drills to determine lessons learned and necessary improvement activities for compliance
- Review results of the plan implementation via the QAPI process

Facility and Community Risk Assessment – Hazard Vulnerability Assessment (HVA)

Bradford Ecumenical Home, Inc. will utilize the *American Society for Healthcare Engineering of the American Hospital Associations* which follows the HVA all hazards approach methodology to evaluate potential facility and community hazards, which will provide a guide to prioritize efforts for emergency preparedness issues.

Policies and Procedures

Policies and procedures are included in the Emergency Preparedness plan which outlines emergency response procedures based upon the overall purpose and scope of the Emergency Preparedness Plan as well as potential hazards identified by the HVA.

Maintenance and Implementation of the Plan

Bradford Ecumenical Home, Inc. is committed to providing a safe and secure environment for both residents and staff. This is accomplished by the development and maintenance of an effective emergency response plan, which outlines the implementation of procedures following the guidance of the National Incident Management System (NIMS). The plan and procedures are reviewed at least annually or whenever new information or lessons learned necessitate a change. Corresponding policies and procedures will be reviewed and updated as applicable. Outcomes of the plan review will align with the facility assessment.

The Administrator in cooperation with the facility's Safety Committee is responsible for maintaining an effective and current emergency preparedness plan and implementing procedures. All staff members are provided training upon orientation and at a minimum on an annual basis as it relates to the emergency preparedness plan and are responsible for understanding the scope of the emergency plan and the role they play in implementing its procedures.

Emergency Incident Command

Bradford Ecumenical Home, Inc. will implement, to the extent possible, an Incident Command System (ICS) to provide command and control during an emergency incident. The ICS positions that will be established will include:

- Facility Incident Commander
- Media Coordinator
- Facility Coordinator (Supplies/Resources)
- Clinical Operations Coordinator (Medical)
- Information Coordinator (PHI)
- Labor Pool Coordinator (Staffing)
- Finance Coordinator

The ICS positions identified above will form the Incident Management Team (IMT). This team will gather in a Command Center located in the main Conference Room or secondary location Finance Conference Room.

ICS Position	Title of Facility Position
Facility Incident Commander	Administrator or designee
Media Coordinator	Director of Community Relations
Facility Coordinator	Director of Facility Development
Clinical Operations	Director of Nursing
Information Coordinator	Director of Information Technology
Labor Pool Coordinator	Director of Human Resources
Finance Coordinator	CFO

The Facility Command location will be equipped with communication systems primary and secondary needed to communicate during an emergency incident response. The following equipment and materials will be stored in or near the Command Center. This will include but not limited to:

- Communication systems
- Contact lists and directories
- Emergency Response equipment and inventory lists
- Triage resources and labeling
- General office supplies
- Flash lights
- White boards/flip charts
- Facility blue prints
- Emergency Preparedness Plan copy

Collaboration and Coordination with Partners

Bradford Ecumenical Home, Inc., via the Facility Assessment, has appropriate and needed "Letters of Agreement (LOA)" or "Memorandums of Understanding (MOU)" negotiated and signed with emergency response, support partners, and vendors. Copies available in the ICS. Partners/organizations/vendors are considered planning partners and are encouraged to participate in facility emergency planning efforts (see Agreements).

Communication Plan

Bradford Ecumenical Home, Inc. has developed a communication plan as well as communication systems and capabilities to be provided to take care of daily routine business and emergency response activities. Where possible, redundancy will be built into the communication network that will support both internal and external alerting, notification and information flow (see Communication Plan)

Managing Communications

The facility communication process during an emergency is as follows:

- The Media Coordinator (Director of Community Relations or designee) is responsible for maintaining the resident family emergency contact information and where current copies will be maintained.
- The Information Coordinator (Director of Information Technology or designee) is responsible to identify the scope and confidentiality of contact information to be maintained for each resident during an emergency.
- The Media Coordinator will utilize pre-scripted messaging for resident family members which describes where residents will be taken if the facility needs to evacuate or temporarily moved. The pre-scripted messages will be distributed via communications software, social media outlets, and facility website.
- The facility will provide standard format where messages may be delivered to or received from family members or outside organizations. (Who, What, When and Where)
- The Labor Pool Coordinator (Director of Human Resources or designee) is responsible for maintaining employee emergency contact information and where current copies will be maintained.
- The Labor Pool Coordinator will utilize pre-scripted messaging for employees and will be distributed via communication software, text messaging, telephone, etc.

Training and Testing

Training on the facility Emergency Preparedness Plan will begin upon hire as well as conducted on an annual or as needed basis for all employees, volunteers, etc. New employees/volunteers

will be given comprehensive training on the overall scope of emergency planning and specific training on procedures and policies that are important to their assigned duties.

Fire drills are done monthly and a disaster drill is held every six months under varied conditions for each individual shift of facility personnel. A written report of drills and exercises is maintained and corrective actions are taken as indicated. The actual evacuation of residents to safe areas during a drill is optional.

The facility staff will participate in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility-based. If the facility experiences an actual natural or man-made <u>emergency</u> that requires activation of the <u>emergency plan</u>, the facility is exempt from engaging in a community-based or individual, facility-based full-scale exercise for 1 year following the onset of the actual event. The facility will conduct an additional exercise that may include, but is not limited to the following:

- A second full-scale exercise that is community-based or individual, facility-based; or
- A tabletop exercise that includes a group discussion led by a facilitator, using a narrated, clinically-relevant <u>emergency</u> scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an <u>emergency plan</u>

Following all training, drill and exercise events, staff and other participants will be given the opportunity to provide comment on the accuracy and effectiveness of established policies, the emergency plan and implementing procedures. They will also be given the opportunity to comment on the conduct of the exercise. Areas for improvement should be identified evaluated by the Emergency Preparedness Committee and the facility QAPI process. Based on this evaluation, changes will be incorporated into the emergency plan and its procedures. Retraining of for appropriate staff will be conducted that addresses changes to the emergency plan or it's supporting procedures as identified. Following emergency plan and implementing procedure changes, the changed elements will be re-tested in future drills or exercises to verify the effectiveness of the change.

Continuity of Operations Planning (COOP)

Bradford Ecumenical Home, Inc. realizes the necessity to continue operations following a crisis or disaster situation. Bradford Ecumenical Home, Inc. shall review and identify critical/essential functions, personnel, and other factors that must remain operational immediately following a crisis or disaster situation to help ensure the safety of facility occupants (i.e., residents, staff, and visitors) as well as allow the facility to provide services immediately following a critical event.

Whereas the Emergency Management Plan is designed to provide guidance and assistance on planning, preparedness response, and recovery from a critical event, Continuity of Operations Planning helps to ensure that the facility can sustain operations that are absolutely vital

including administrative and business components of the facility (i.e., records, payroll, finance, funding, insurance, etc.)

Rapid Response Guides

Follow these steps if you recognize a potential or actual emergency that may threaten or impact:

- > The health and safety of occupants (including residents, staff, volunteers, and visitors),
- > The facility's ability to provide care, or
- > The environment or property.

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STEP 1	Protect yourself and those in the immediate area from harm.
	If appropriate, call 911 for emergency response and sound the facility alarm
	and/ or code/page if appropriate per the Emergency Rapid Response Guides
	for hazard-specific protocols.
STEP 2	Take a deep breath and assess the situation
	Gather basic facts:
	Type of incident, including specific hazard/agent,
	Location of incident,
	Number and types of injuries, and
	What you have done so far.
	If the situation allows, begin to document your actions.
STEP 3	Contact your immediate supervisor to report the incident and get further
	instructions.
	If you are unable to contact your supervisor, activate the Incident
	Commander (IC) position and the Emergency Plan.
	Activate code/page facility emergency alert system as appropriate.
STEP 4	Notify additional authorities if appropriate and indicated by protocols.
STEP 5	Follow facility policy for documenting actions and incident reporting.