

## POLICY AND PROCEDURE ON EMERGENCIES

### I. PURPOSE

The purpose of this policy is to provide guidelines on preparing for, reporting, and responding to emergencies to ensure the safety and well-being of persons served.

### II. POLICY

Partnership Resource's, Inc. (PRI) will be prepared to respond to emergencies as defined in MN Statutes, section 245D.02, subdivision 8, that occur while providing services, to protect the health and safety of and minimize risk of harm to the person(s) served. Staff will address all emergencies according to the specific procedure outlined in this policy and act immediately to ensure the safety of persons served. After the situation has been resolved and/or the person(s) involved are no longer in immediate danger, staff will complete the necessary documentation in order to comply with licensing requirements on reporting and to assist in developing preventative measures, if applicable. For incident response procedures, staff will refer to the *Policy and Procedure on Responding to and Reporting Incidents*.

All staff will be trained on this policy and the safe and appropriate response to and reporting of emergencies. Program sites will have contact information of a source of emergency medical care and transportation readily available for quick and easy access. In addition, a list of emergency phone numbers will be posted in a prominent location and emergency contact information for persons served at the facility including each person's representative, physician, and dentist.

### III. PROCEDURE

#### **Defining emergencies**

- A. Emergency is defined as any event that affects the ordinary daily operation of the program including, but not limited to:
1. Fires.
  2. Severe weather.
  3. Natural disasters.
  4. Power failures.
  5. Emergency evacuation or moving to an emergency shelter.
  6. Temporary closure or relocation of the program to another facility or service site for more than 24 hours.
  7. Other events that threaten the immediate health and safety of persons served and that require calling "911."

#### **Preparing for emergencies**

- A. To be prepared for emergencies, a staff person trained in first aid will be available on site in a day services facility, and when required in a person's *Coordinated Service and Support Plan (CSSP)* and/or *CSSP Addendum*, be able to provide cardiopulmonary resuscitation (CPR), whenever persons are present and staff are required to be at the site to provide direct services.
- B. Each day services facility will have a first aid kit readily available for use by, and that meet the needs, of persons served and staff. The first aid kit will contain, at a minimum, bandages, sterile compresses, scissors, and ice bag or cold pack, an oral or surface thermometer, mild liquid soap, adhesive tape, and a first aid manual.
- C. Day service facilities will have:
1. A floor plan available that identifies the locations of:
    - a. Fire extinguishers and audible or visual alarm systems
    - b. Exits, primary and secondary evacuation routes, and accessible egress routes, if any
    - c. An emergency shelter within the facility

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2. A site plan that identifies:
    - a. Designated assembly points outside the facility
    - b. Locations of fire hydrants
    - c. Routes of fire department access
  3. An emergency escape plan for each person served.
- D. Quarterly fire and severe weather drills will be conducted throughout the year on various days of the week and times of the day. Staff and persons served in the facility will not be notified prior to the drill, if possible, to ensure correct implementation of staff responsibilities for response. The Program Director or designee will be responsible for the initiation of the emergency drill and will record the date, day, and time of the drill in the emergency plan files.
- E. As part of the emergency plan file kept at the facility site, the following information will be maintained:
1. The log of quarterly fire and severe weather drills.
  2. The readily available emergency response plan.
  3. Emergency contact information for persons served at the facility including each person's representative, physician, and dentist.
  4. Information on the emergency shelter within the facility and the designated assembly points outside the facility.
  5. Emergency phone numbers that are posted in a prominent location.
- F. If persons served require the use of adaptive procedures or equipment to assist them with safe evacuation, staff will receive specific instruction on these procedures and equipment.

### **Responding to emergencies**

- A. Staff will call "911" based upon the emergency situation as provided in each individual response procedure as stated below.
- B. Fire**
1. Staff will respond immediately to all fire and smoke detector alarms or signs of fire by activating the alarms system.
  2. All persons will be evacuated from the building by staff and assembled at the established designated assembly point outside the facility.
  3. "911" will be immediately called from a neighbor's telephone or a cell phone in order to report the fire.
  4. Staff will contain the area of the fire, if feasible, by closing doors. If it is possible to put out the fire with a fire extinguisher, staff will attempt to do so.
  5. Staff will notify the manager or designee.
  6. Persons served and individuals will not reenter the program site until the police or fire department issue instructions that the area is safe.
  7. If the program site is not habitable and relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.
- C. Severe weather conditions and natural disasters**
1. At the first sign of severe weather, including but not limited to high winds, heavy snow or rain, or extreme temperatures, staff will confirm the location and safety of all persons served.
  2. Staff will listen to the radio or watch television for current weather conditions.
  3. Upon hearing sirens or a take cover warning, staff will notify all persons that they need to seek shelter and will guide all persons to the designated safe area in the facility and will also bring a battery operated radio or television set, first aid kit, and flashlight.
  4. If feasible, persons served but not scheduled for supervision will be called and warned.
  5. Staff will assist all persons in staying in the safe area until an all clear is issued through the radio or by other means.

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6. If injury or damage occurs, staff will notify the Program Director or designee and follow directions given.
7. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.

### D. **Power failure (electricity outage or gas leak)**

1. During a power failure, all staff will remain with persons served. If persons are not in the immediate area at the program, staff will locate them and bring them to the central program area.
2. The power company will be contacted by cell phone to determine estimated length of the power outage. If estimated to last less than two hours, the Program Director or designee will be contacted to determine what actions will be taken. If the power outage is to last more than two hours, staff will transport the persons to a safe area or location as previously established by the Program Director.
3. If gas is smelled or a gas leak is suspected, staff will evacuate persons to the established designated assembly point outside the facility.
4. The gas company will be immediately notified and instructions followed.
5. No one will be permitted to use lighters, matches, or any open flame during this time. All electrical and battery-operated appliances and machinery will be turned off until the all clear has been provided.
7. The Program Director or designee will be notified of the gas leak. This call will be made by staff from the safe area using a cell phone or from a neighbor's phone.
8. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in Letter E of this **Responding to emergencies** section.

### E. **Emergency evacuation, moving to an emergency shelter, and temporary closure or relocation of the program to another facility or service site for more than 24 hours**

1. Staff will ensure that everyone leaves the building and will assist all persons in gathering at the designated assembly point outside the facility.
2. Staff will immediately notify the Program Director or designee of the conditions that may require emergency evacuation, moving to an emergency shelter, temporary closure, or the relocation of program to another site.
3. The Program Director or designee will coordinate relocation of services in a way that promotes continuity of care of persons served.
4. The Program Director or designee will coordinate and assist staff as necessary in transporting persons to the designated location.
5. If access to the program site is permitted, staff will transfer persons' program files, clothing, necessary personal belongings, current medications, and medication administration records to the designated location.
6. The Program Director will notify the legal representative or designated emergency contact, and case manager, and other licensed caregiver (if applicable) of the new location of the program if necessary.

### F. **Other events that threaten the immediate health and safety of persons served and that require calling "911"**

1. Pandemic event: Upon request, staff will cooperate with state and local government disaster planning agencies working to prepare for or react to emergencies presented by a pandemic outbreak.
2. Bomb threat
  - a. Upon receiving a bomb threat, staff at the program site should pull the fire alarm, if available.
  - b. Staff will ensure that everyone leaves the building and assembles at the designated assembly point outside the facility.
  - c. Staff will immediately call "911" from a neighbor's telephone or a cell phone.
  - d. Staff and persons will remain outside the building until further instructions are received from the police or fire department.
  - e. If unable to re-occupy the building, staff will follow the procedures in Letter E of this **Responding to emergencies** section.
3. Repeated and unwanted or threatening phone calls

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- a. Upon receiving repeated and unwanted or threatening phone calls, staff will hang up the phone immediately or encourage the person served to hang up the phone.
- b. Staff will lock all doors and windows.
- c. Staff will monitor the frequency of disruptive phone calls, informing the Program Director when the calls continue to a point where the safety of persons served is in question or when the calls are personally threatening or environmentally threatening to a program site or property.
- d. Staff will call “911” if at any point they feel threatened.
- e. The Program Director will determine when and if the telephone number will be changed due to the harassing or threatening telephone calls.

### Reporting emergencies

- A. Staff will immediately notify the Program Director that an incident or emergency has occurred and follow direction issued to them and will document the incident or emergency on an *Incident and Emergency Report* any related program or health documentation. Each *Incident and Emergency Report* will contain the required information as stated in the *Policy and Procedure on Reviewing Incidents and Emergencies*.
- B. If an incident resulted from the emergency situation, the Program Director will maintain information about and report incidents to the legal representative or designated emergency contact and case manager within 24 hours of an incident occurring while services are being provided, within 24 hours of discovery or receipt of information that an incident occurred, unless PRI has reason to know that the incident has already been reported, or as otherwise directed in the person’s *Coordinated Service and Support Plan* and/or *Coordinated Service and Support Plan Addendum*.
- C. When the incident or emergency involves more than person served, PRI and staff will not disclose personally identifiable information about any other person served when making the report to each person and/or legal representative and case manager unless PRI has the consent of the person and/or legal representative.
- D. If a serious injury or death were to occur as a result of the emergency situation, staff will follow the response and reporting procedures as stated in the *Policy and Procedures on Responding to and Reporting Incidents* and, if needed, the *Policy and Procedure on Death of a Person Served*.