Nursing Home #1 Disaster Planning Document

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Fire Policy & Procedure

Purpose: The primary purpose of the Fire Policy and Procedure is to provide a course of action for all personnel to follow in the event of a fire.

Procedure:

R - Rescue anyone in immediate danger.

A - Alert other staff members of the fire and location over the intercom system. Pull the nearest fire alarm. The Person in Charge shall contact the fire department by calling 911.

C - Contain the fire. Close all doors and windows adjacent to the fire. Close all fire doors. Shut off all fans, ventilators and air conditioners, as these will feed the fire and spread smoke throughout the building.

E - Extinguish if the fire is small. The extinguisher should be aimed low at the base of the fire, and move slowly upward with a sweeping motion.

- Never aim high at the middle or top of the flames as this will cause the fire to spread.
- If you cannot extinguish the fire, evacuate the building immediately.

Special Note: The most common cause of death in a fire is smoke, and not the flames. Keep low to the floor and avoid inhaling too much smoke.
Duties of Personnel:

Person In Charge:

1. Call the fire department at 9-1-1. Give exact location of the fire and its extent.
2. Call the Administrator.
3. Assist with residents if evacuation is necessary.
4. Assign a staff member to meet the fire department in order to direct them to the fire.
   Assign a staff member to keep a roster of residents if evacuation is necessary.
   Assign a staff member to answer the telephone and relay messages and instructions.

Nursing, Dietary, and Housekeeping/Laundry Personnel:

1. Remove residents from immediate danger.
2. Close all doors and windows.
3. Turn off fans, ventilators, air conditioners, and other equipment.
4. Stay close to residents to provide reassurance and provide comfort measures.
5. Make sure fire exits are clear.

Maintenance Personnel:

1. Go directly to scene of fire, taking extra fire extinguishers.
2. Check to be sure that all ventilating or blower equipment is shut off.
3. Once fire is over, care for all fire extinguishers.

Administrator:

1. Call the fire department if not already done.
2. Coordinate staff movement for highest efficiency.
3. Assist with resident movement in coordination with charge nurse.
4. Delegate responsibility for the movement of records as deemed necessary.
5. Check with department heads in the event of evacuation to determine that all staff and residents are out of the building.

Evacuation Procedures

Depending on the location of the fire, residents may be evacuated to another portion of the building, rather than total facility evacuation. However, in the event that a partial or complete evacuation of the facility becomes necessary, the following procedure shall be followed:

1. The shift charge nurse shall immediately contact the Administrator, Maintenance Director, and Director of Nursing, if they are not yet present.
2. Once the Administrator, Director of Nursing, or Maintenance Director arrives and determines that the situation requires evacuation, the facility call tree shall be put into effect in order to obtain available persons to evacuate the residents to safety.
   - Administrator contacts: Medical Records and Business Office personnel
• Director of Nursing contacts: Social Worker and Activity Director
• Maintenance Director contacts: Housekeeping/Laundry Supervisor and Dietary Manager

Once Business Office and Medical Records personnel arrive, they shall contact the Board of Directors and other off-duty personnel to come and assist with the evacuation.

3. A command center shall be established per the Administrator’s direction. This should be in a convenient location out of the line of danger.
   o The Administrator, or highest ranking person at scene, shall become the "Commander" in order to direct people to areas needing assistance.
4. Alternate placement for residents must be arranged. The Administrator, or highest ranking person at scene, shall designate someone to coordinate a shelter.
   o This can be arranged by contacting the American Red Cross by calling 9-1-1 and requesting a shelter through the County Department of Emergency Government.
5. Residents should be evacuated in this order: residents in immediate danger, nonambulatory or bedridden residents, wheelchair residents, and ambulatory residents.
6. The Administrator, or highest ranking person on scene, shall assign a second person to coordinate transportation.
7. Once a shelter is arranged, the Commander shall designate a meeting spot outside of the facility. Residents shall be evacuated from the building in an orderly fashion.
   o All departmental personnel shall report to the designated location with the supplies they are assigned to gather.
8. Medical Records personnel shall be responsible for tagging and identifying all residents upon evacuation. They shall also be responsible for ensuring that the residents' medical records are transported with the resident.
9. Nursing personnel will be responsible for caring for residents. The Charge Nurse shall be responsible for taking the Med Cart to the meeting spot.
10. Housekeeping and Laundry personnel will be responsible for gathering all linens and supplies needed for resident care. If possible, attempts should be made to gather resident clothing also.
11. Dietary personnel will be responsible for gathering food and dietary supplies.
12. The Social Worker will be responsible for contacting family members to notify them of the disaster and where residents are being transported.
   o The Social Worker may also have to reassure and supervise family members and on-lookers that may arrive on the scene.
13. The Activities personnel shall be assist wherever needed. The Activities personnel shall also be responsible for the facility pets.
14. The Business Office Manager shall gather all departmental employee schedules and the employee roster, as well as other pertinent business office supplies and records.
15. The Administrator, or designated person, shall check all rooms before leaving the grounds. An "X" should be marked on each door to verify that the room is empty.
   o All available staff members shall assist with a last walk through of the building to ensure that no residents or staff members are left behind.
16. Once everyone has been evacuated and all supplies gathered, boarding of residents and supplies for relocation shall begin in an orderly fashion.
17. The Social Worker shall be responsible for keeping an official roster with names of residents, staff, board members, and volunteers present at the time of disaster and during the evacuation. Information to be recorded shall include:
   - name of resident and next of kin/responsible party
   - shelter transferred to and person accompanying resident
   - medications, med sheet, and chart sent with resident to location of transfer.

Disclaimer: It is important to note that each situation is going to be different, and that a situation may not allow for the above procedures to be implemented in this specific order.

At a time of a disaster, it is imperative that the Administrator be contacted in order to give staff proper direction. This policy and procedure is written so that there are clear guidelines for providing resident care and ensuring their safety in the event of a disaster.

Sound judgment and common sense are the best practices in an emergency. Therefore, the Administrator and charge persons will have to make the best judgment at that time.

This plan will be in cooperation with the American Red Cross, the County Emergency Government office, and local Police and County Sheriff's Departments.

Fire Drill Policy & Procedure

Purpose: The purpose of this policy is to establish a procedure for staff to follow when conducting fire drills. Fire drills are to be conducted on a quarterly basis on each of the three shifts according to Michigan statutes.

In order to meet this requirement, fire drills are scheduled on a monthly basis.

Procedure:

1. Call Fire Systems at ------; ask for Central Monitoring Station. Tell them we will be conducting a fire drill. Tell them facility's account number, password number, and your name.
2. Call County Dispatch at ----- to tell them we will be conducting a fire drill. Tell them facility name, approximate time, and your name.
3. Remove glass rod from fire alarm pull station **FIRST, AND SAVE**.
4. Place red fire flag at desired site.
5. When fire is discovered, the pull station alarm should be activated.
6. Notify the charge nurse of location of fire. Charge nurse shall announce over the intercom. All available staff shall grab the nearest fire extinguisher and go to the announced location.
7. Follow the RACE procedures as stated in the "Fire Policy and Procedures."
8. Check the Fire Control Panel for the A number and Alarm Zone number.
9. The fire alarm may be silenced by pushing the **SILENCE** pad. This will silence the bells, but will continue dialing and notifying Fire Systems of the fire drill.
10. Announce "All Clear" and meet at the nurses’ station. A discussion of the fire drill shall ensue. A critique of the drill should be done. Recommendations, concerns should be noted on fire drill report form.
All staff in attendance must sign the back of the fire drill report form in order to verify attendance.

11. Reset the alarm system.
12. Call Fire Systems to notify them that the drill is over.
13. Call County Dispatch to notify them that the drill is over.
14. Complete the fire drill report form and submit to the Administrator.

**Severe Weather Policy & Procedure**

**Purpose:** The purpose of a Severe Weather Policy and Procedures is to educate and inform staff of weather conditions that warrant their attention.

It is the facility’s responsibility to keep the residents and staff safe at all times. If severe weather strikes, precautions need to be taken to ensure their safety.

**Definitions:**
- *Watch* -- Means that conditions are favorable for a thunderstorm or tornado to develop.
- *Warning* -- Means that a thunderstorm or tornado have been sighted. If a siren sounds, stay inside and take cover.

**Procedure:**

1. Account for all residents and staff. Make sure everyone is inside.
2. Close all windows and pull all curtains.
3. Keep all residents away from windows.
4. Gather residents in hallways behind fire doors, or in the bathroom. If residents are in bed, pull the beds into the hallway. If this is not possible, make sure all curtains in room are pulled, including cubicle curtains.
   - Cover the resident with extra blankets and pillows, especially near the head.
5. Gather flash lights and radio. Be sure to listen to weather reports for updates. Do not leave the area until the storm has passed and the warning has lifted.
6. Stay calm and provide reassurance to the residents. Keep them as comfortable as possible.

**Disaster Policy & Procedure**

**Purpose:** The purpose of a Disaster Policy and Procedure is to inform the facility’s employees of the steps that should be taken in the event of a disaster.

The Administrator, or highest ranking staff person on duty, shall be responsible for declaring a situation a disaster and active the facility disaster and evacuation policies and procedures.
A disaster may be a fire, tornado strike, gas leak, flood, electrical power outage, heating failure, explosion, bomb threat, or any other situation that would warrant evacuation of the facility in order to protect the lives and safety of the facility’s staff and residents.

**Procedures:**

1. **In the event of an emergency**, the shift charge nurse shall immediately contact the Administrator, Maintenance Director, and Director of Nursing.
2. **Call 9-1-1 to report the situation.**
3. **Once the Administrator, Director of Nursing, or Maintenance Director arrives and determines that the situation requires evacuation**, the facility call tree shall be put into effect in order to obtain available persons to evacuate the residents to safety.
   - Administrator contacts: Medical Records and Business Office personnel
   - Director of Nursing contacts: Social Worker and Activity Director
   - Maintenance Director contacts: Housekeeping/ Laundry Supervisor and Dietary Manager
4. **Once Business Office and Medical Records personnel arrive**, they shall contact the Board of Directors and other off-duty personnel to come and assist with the evacuation.
5. **A command center shall be established per the Administrator’s direction.** This should be in a convenient location out of the line of danger.
   - The Administrator, or highest ranking person at scene, shall become the “Commander” in order to direct people to areas needing assistance.
6. **Alternate placement for residents must be arranged.** The Administrator, or highest ranking person at scene, shall designate someone to coordinate a shelter.
   - This can be arranged by contacting the American Red Cross by calling 9-1-1 and requesting a shelter through the County Department of Emergency Government.
7. **The Administrator, or highest ranking person on scene, shall assign a second person to coordinate transportation.**
8. **Once a shelter is arranged, the Commander shall designate a meeting spot outside of the facility.** Residents shall be evacuated from the building in an orderly fashion.
   - All departmental personnel shall report to the designated location with the supplies they are assigned to gather.
9. **Medical Records personnel shall be responsible for tagging and identifying all residents upon evacuation.** They shall also be responsible for ensuring that the residents' medical records are transported with the resident.
10. **Nursing personnel will be responsible for caring for residents.** The Charge Nurse shall be responsible for taking the Med Cart to the meeting spot.
11. **Housekeeping and Laundry personnel will be responsible for gathering all linens and supplies needed for resident care.** If possible, attempts should be made to gather resident clothing also.
12. **Dietary personnel will be responsible for gathering food and dietary supplies.**
13. **The Social Worker will be responsible for contacting family members to notify them of the disaster and where residents are being transported.**
   - The Social Worker may also have to reassure and supervise family members and on-lookers that may arrive on the scene.
14. The Activities personnel shall be assist wherever needed. The Activities personnel shall also be responsible for the facility pets.

15. The Business Office Manager shall gather all departmental employee schedules and the employee roster, as well as other pertinent business office supplies and records.

16. The Administrator, or designated person, shall check all rooms before leaving the grounds. An "X" should be marked on each door to verify that the room is empty.
   o All available staff members shall assist with a last walk through of the building to ensure that no residents or staff members are left behind.

17. Once everyone has been evacuated and all supplies gathered, boarding of residents and supplies for relocation shall begin in an orderly fashion.

18. The Social Worker shall be responsible for keeping an official roster with names of residents, staff, board members, and volunteers present at the time of disaster and during the evacuation.
   o Information to be recorded shall include: name of resident and next of kin/responsible party; shelter transferred to and person accompanying resident; medications, med sheet, and chart sent with resident to location of transfer.

Disclaimer: It is important to note that each situation is going to be different, and that a situation may not allow for the above procedures to be implemented in this specific order.

At a time of a disaster, it is imperative that the Administrator be contacted in order to give staff proper direction. This policy and procedure is written so that there are clear guidelines for providing resident care and ensuring their safety in the event of a disaster.

Sound judgement and common sense are the best practices in an emergency. Therefore, the Administrator and charge persons will have to make the best judgement at that time.

This plan will be in cooperation with the American Red Cross, the County Emergency Government office, and local Police and County Sheriff’s Departments.

Loss of Telephone Service Policy & Procedure

Purpose: In the event that there is a power outage, or other circumstances in which the facility is out of telephone service, it is important that staff know how to respond in such a situation. The facility’s operation depends on the use of telephone a great deal.

It is important that the nursing personnel are able to communicate with physicians regarding resident care. It is also important that we be able to make emergency contacts if need be. The following procedures should provide clear guidelines for staff to follow if this situation occurs.

Procedures:

1. In the event that telephone service is lost due to outside causes, the telephone company must be notified immediately.
2. Unplug the fax machine, and plug in the Emergency Phone.
3. If the Emergency Phone does not work, the Maintenance Director, or other designated person, shall be directed to go to the nearest operating telephone available in order to report the loss, and as much information concerning the outage as possible.

4. If the telephone service is anticipated to be out for an indefinite period of time, the shift charge nurse shall contact the local radio station to inform them of the phone outage so that weather and other major announcements can be relayed to the facility during the telephone outage.

5. A designated person and vehicle must be ready at all times to depart in an emergency in order to report any disaster requiring emergency services from the police, fire department, or ambulance.

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**Bomb Threat Policy & Procedure**

**Purpose:** The purpose of this policy is to inform staff of precautions to be taken in the event of a bomb threat.

The current national situation of increased bombings, bomb threats, and bomb scares must be given immediate consideration. In the past, the vast majority of bomb threats were hoaxes. However, the current trend nationally is that more of the threats are materializing.

Upon receipt of a bomb threat, it is impossible to know if it is real or a hoax. Therefore, precautions need to be taken for the safety of our residents and employees.

**Procedure:** If you receive a bomb threat over the phone, follow these procedures:

1. Keep the caller on the line as long as possible.
2. Ask the caller to repeat the message.
3. Ask the caller his name.
4. Ask the caller where the bomb is located.
5. Record every word spoken by the person making the call.
6. Record time call was received and terminated.
7. Inform the caller that the building is occupied and the detonation of a bomb could result in death or serious injury to many innocent people.
8. Complete the bomb threat form, attached, to record the caller's characteristics.

If possible, during the call, try to notify the charge nurse immediately. The charge nurse shall:

1. Call the Police Department at 9-1-1.
2. Call the Administrator if not present.
3. Organize staff to evacuate residents upon police or administrative order.

Once the Police have arrived:

- Keys shall be available so that searchers can inspect all rooms. Employee lockers will be searched. If padlocked, padlock will be cut off.
The Administrator or designee shall remain with the Search Commander during the entire search to provide assistance and counsel during the search.

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

**Emergency Notification of Administrator**

The Business Office Manager during normal business hours, or the Charge Nurse at any other time shall notify the Administrator. In the following situations, the Administrator is to be notified immediately, if possible, on a 24-hour basis:

- Death involving unusual circumstances or family dispute;
- Emergency requiring immediate services or repair authorization;
- Fire of any size or nature;
- Missing resident;
- Formal Division of Health Inspection or Annual Survey;
- Urgent resident/family problems;
- Any situation involving violence by staff or resident.

**Absence of Administrator**

In the absence of the Administrator from the facility, the Director of Nursing shall be the designated "Person-in-Charge."

If the Administrator and Director of Nursing are absent from the facility, there shall be two persons in charge of the facility. The charge nurse on duty shall be in charge of staff and all resident care delivery. The Business Office Manager shall be in charge of all business matters.

If the Administrator cannot be reached, a board member shall be contacted. The President of the Board of Directors should be contacted first. If the President cannot be reached, contact the Vice-President.

If the Vice-President cannot be reached, the Secretary shall be notified. If none of the latter persons cannot be reached, attempts should continue to inform any one of the other board members.

**Water Shortage Policy & Procedure**

**Purpose:** The purpose of this policy is to ensure that there will adequate water supply on hand to supply residents with water for their personal and hygienic needs.

**Procedure:** If the water supply is suddenly disrupted for any reason, the following steps will be taken by the person-in-charge.

1. Notify the Administrator and the Maintenance Director immediately.
2. All attempts will be made to determine the cause for water disruption and the probable length of shut down.
3. The Dietary Department will distribute emergency meals and provide juice and other beverages that are on hand for resident consumption.
4. The hot water in the hot water tanks will be utilized by kitchen staff for cooking purposes if necessary.
5. Disposable dishes and utensils may be used during emergencies.
6. If necessary, water will be brought in and dispensed as needed. This water supply is only for necessary circumstances, and should be used conservatively.
7. If it becomes apparent that a water shortage will last for an undetermined length of time, the Administrator will order emergency measures to be taken to ensure proper care for those whose care has been disrupted by lack of water supply. Arrangements will be made to transfer those residents to the hospital or to other facilities for care.

**Electrical Power Outage Policy & Procedure**

**Purpose:** It is the policy of this facility to provide auxiliary power to designated areas within the facility to operate life-support equipment should our normal power supply fail.

The facility has an emergency generator that should be automatically activated in the event of a power outage. The generator operates on natural gas, and as long as the gas lines are not damaged or disrupted, the generator is capable of providing the facility with a minimal supply of electricity.

**Procedure:** In the event of a power outage, the following steps should be followed:

1. Immediately identify any residents that require oxygen concentrators or other life support equipment. Move the resident to areas supplied with emergency power (outlets marked with a red "X" on them).
2. Gather all flashlights and other needed supplies. Check on all residents to ensure their safety. Calm any residents experiencing distress.
3. Unplug the fax machine, and plug in the "Emergency Phone."

**Facility Generator DOES NOT...**

- Provide Heat or Water
- Provide Power to Laundry or Kitchen
- Operate Fire Alarm System (this is on its own battery back-up system)
- Operate the phone system

**Areas Equipped with Emergency Lighting:**

- Front Lobby
- Hallways
- Break room
- Laundry Room
- Boiler Room
Missing Resident Policy & Procedure

Purpose: The purpose of a Missing Resident Policy and Procedure is to ensure that all necessary steps are taken in the event that a resident wanders away from the facility.

Procedures:

1. Any staff member observing a patient attempting to leave the facility shall with proper conduct attempt to prevent such departure. Should the attempt fail or a resident is determined missing on scheduled checks, the following should be done:
   - The charge professional should be notified.
   - All available staff will be directed by the charge professional to systematically search the entire premises, both inside and outside, patient rooms, bathrooms, closets, kitchen, basement, lobby, and offices.

Should a facility search prove unsuccessful, the person-in-charge shall carry out the following steps:

2. Assign available staff to begin neighborhood search. Some staff members should always remain in the building with residents.
3. Contact the RN on call if none in the building. The Administrator and/or Director of Nursing should be called if possible.

Should a neighborhood search prove unsuccessful, the person-in-charge shall carry out these steps:

4. Notify local law enforcement agency via the telephone number 911. Ask for assistance to locate a wanderer, give them description of the resident.
5. When the authorities have arrived, give them a picture of the resident if available.
6. The authorities will assume command and direction of the search from this point. The briefing to authorities shall consist of identification and other pertinent information about the resident that could assist in determining the resident's whereabouts.
7. The family and/or responsible party of the resident shall be notified. Explain what is being done to find the resident and encourage them to assist if able.
8. All previously contacted persons and organizations shall be notified of the return to the facility of the resident.

Upon return of the resident to the facility, the director of nursing or person-in-charge should:

9. Examine the resident for injuries, and contact the attending physician and report findings and conditions of the resident. Follow orders
10. An incident report shall be written and signed by the charge nurse providing detailed accounting of the incident in its entirety.
11. The person-in-charge shall be responsible for documenting the incident in the nursing notes of the resident’s chart. All documentation must be concise and reflect the actual facts as they relate to the incident including:
   - times
   - persons contacted
   - condition of resident upon return to the facility
   - physician notification
   - physician's orders
   - treatment indicated
   - any other pertinent information.

12. The maintenance personnel are responsible for seeing that alarms are operational for 24 hour service and are checked on a routine basis.

13. In the event of an alarm malfunction, maintenance shall be notified immediately. In event of the inability to locate maintenance personnel, contact the alarm company.

**Winter Storms Safety Precautions**

**Purpose:** The purpose of these winter storm safety precautions is to inform staff of measures that should be taken during severe winter weather.

The following winter storm safety precautions have been established for all personnel to follow during blizzards, heavy snow, freezing rain, ice storms, or sleet.

**Precautions:**

1. Keep posted on all area weather bulletins and relay to others.
2. Have portable radio available. Make sure extra batteries are available.
3. Be prepared for isolation at the facility.
4. Make sure all emergency equipment and supplies are on hand, or can be readily obtained.
5. Make sure emergency food supplies and equipment are on hand.
6. Make sure emergency supply of water is available.
7. Make sure emergency power supply is operable.
8. Make sure heating system is operable.
9. Have extra blankets available and keep residents as warm as possible.
10. Make sure adequate staff is available.
11. Keep flashlights handy, and extra batteries available.
12. Close drapes on cloudy days and at night.
13. Travel only when necessary, and only during daylight hours. Never travel alone. Travel only assigned routes.
14. Be prepared to evacuate residents if necessary.
15. Do not make any unnecessary trips outside. If you must venture outside, make sure you are properly dressed, and fully covered.
16. Avoid overexertion by doing only what is necessary. Cold weather strains the heart.
17. Do not panic; remain calm.

**Heat & Humidity Policy & Procedure**
Purpose: The purpose of this policy is to provide precautionary and preventative measures for our residents during the hot and humid summer months. Elderly people are extremely vulnerable to heat related disorders.

Definitions:

*Heat Exhaustion:* A disorder resulting from overexposure to heat or to the sun. Early symptoms are headache and a feeling of weakness and dizziness, usually accompanied by nausea and vomiting.

There may also be cramps in the muscles of the arms, legs, or abdomen. The person turns pale and perspires profusely, skin is cool and moist, pulse and breathing are rapid.

Body temperature remains at a normal level or slightly below or above. The person may seem confused and may find it difficult to coordinate body movements.

*Heat Stroke:* A profound disturbance of the body's heat-regulating mechanism, caused by prolonged exposure to excessive heat, particularly when there is little or no circulation of air.

The first symptoms may be headache, dizziness and weakness. Later symptoms are an extremely high fever and absence of perspiration. Heat stroke may cause convulsions and sudden loss of consciousness. In extreme cases it may be fatal.

Precautionary Procedures:

1. Keep the air circulating.
2. Draw all shades, blinds and curtains in rooms when exposed to direct sunlight.
3. Remove residents from areas that are exposed to direct sunlight.
4. Keep outdoor activities to a minimum.
5. Check to see that residents are appropriately dressed.
6. Provide ample fluids, and provide as many fluids as the resident will take.
7. Increase the number of baths given.