



Emergency Operations Plan (EOP) Workshop

Instructors

Ron Holbeck

Rick Larkin

Introductions

Course Introduction

Objectives:

- Identify the importance of an EOP
- Learn about the Incident Command System (ICS)
- Identify the most common types of EOP
- Identifying the strengths and weaknesses of different types of EOPs
- Identify required policies and procedures required by the CMS Emergency Preparedness Rule

Course Objective

Upon completion of this course, students will demonstrate through exercises and discussion a basic understanding of how to construct an Emergency Operations Plan.

Course Design

- The course is scheduled for 6 hours
 - We plan to break for 5-10 minutes every hour
 - There will be a 1 hour break for lunch.
- There will be some group activities throughout the course
- You will leave with materials to assist you in constructing an Emergency Operations Plan for your facility

What is an Emergency?

A serious, unexpected, and often dangerous situation requiring immediate action.

Emergencies don't always involve natural or man-made disasters (ran out of food, employees are on strike, scandal, etc.)



What is an Emergency?

A serious, unexpected, and often dangerous situation requiring immediate action.

For this class, an emergency falls into three categories:

1. Natural Hazard (Tornado, Flood, Winter Storm, Flu)
2. Human Caused (Active Shooter, Terrorism, Cyber)
3. Technological (Train derailment, Chemical Spill, Utility Failure)

Why Are We Here Today?

Hurricane Surprised Many Nursing Homes

September 13, 1992 | By CHARLYNE VARKONYI, Staff Writer

If you have a loved one in a nursing home, Hurricane Andrew's wrath should make you take another look at what the home's evacuation plans are in an emergency. State law requires nursing homes to have agreements with alternate facilities so that patients can be transferred to another home in case of a fire, explosion or other emergency. But during Andrew's wrath, it appeared that many of the homes had no plans or plans that were not thought out well enough.

Reports of nursing homes and adult congregate living facilities dumping residents at hospitals cropped up in Dade, Broward and Palm Beach counties, but not

Recommend 0

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1992



10 of 24

Residents of a Homestead, Fla. nursing home line the halls of the Richmond Heights Middle School, Tuesday, Aug. 25, 1992, in Homestead, Fla. About 70 elderly residents were evacuated Monday, many lacking medicine. Officials said their former residence was wrecked by Hurricane Andrew

Chris O'Meara, The Associ

Why Are We Here Today?

Northridge remembered: How quake left hospitals in the dark

February 7, 2013

By [Deborah Schoch](#)

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The giant shaking hit at 4:31 a.m. on Jan. 17, 1994, jolting awake millions of residents across the Los Angeles Basin.

In Los Angeles' Fairfax District, we scrambled outside to the dark streets in pajamas and bare feet, terrified, staring at the blinding arc flashes on overhead power lines as sirens began howling far away.

We were lucky. The Northridge quake killed 60 people, injured more than 7,000 and [crippled hospitals throughout the Los Angeles area](#), blackening emergency rooms and shutting down ventilators and other live-saving equipment.

1994



Why Are We Here Today?

ARCHIVES | 2001

Houston Hospital Denies Power Failure Killed 4

By THE ASSOCIATED PRESS JUNE 14, 2001

Three men and an infant died after water from Tropical Storm Allison knocked out electricity at one of Houston's top hospitals, but hospital officials said today that illnesses caused the deaths, not power problems.

"Their deaths were not unexpected, and we are confident that they are not attributable to the flood emergency," said James Eastham, chief executive of the hospital, Memorial Hermann.

Memorial Hermann, the hardest hit hospital in Houston's world-famous Texas Medical Center, evacuated all 540 of its patients and shut down Saturday for the first time in its 76-year history when water deluged its electrical system in the basement of the main building.



CONSTRUCTION

1,000-Year Flood Paralyzes Texas Medical Center

2001

Why Are We Here Today?

Help 'too late' to save patients

By Matthew Davis
BBC News, New Orleans

The authorities in New Orleans have removed 45 bodies from a city hospital badly hit by flooding.

The dead were geriatric patients thought to have expired in the heat after Hurricane Katrina knocked out the hospital's power supply.



Staff stayed to care for patients who were not moved before floods hit

2005

U.S.

Hurricane Katrina

» [Rebuilding](#) | [Landmarks](#) | [Storm & Flood](#) | [Special report](#)

Nursing home owners face charges

Couple charged with 34 counts of negligent homicide

Tuesday, September 13, 2005; Posted: 8:52 p.m. EDT (00:52 GMT)

BATON ROUGE, Louisiana (CNN) -- The owners of St. Rita's Nursing Home in St. Bernard Parish, where 34 people died as Hurricane Katrina hit, have been charged with negligent homicide, Louisiana Attorney General Charles Foti Jr. said Tuesday.

"They did not die of natural causes; they drowned," Foti told reporters. "Thirty-four people drowned in a nursing home where they should have been evacuated."

The attorney general said the home's owners -- Mable and Salvador Mangano Sr., both 65 -- surrendered Tuesday to Medicaid Fraud Control Unit investigators in Baton Rouge, where they were charged with 34 counts of negligent homicide and jailed prior to posting bond. Each count carries up to five years in prison.

Jim Cobb, an attorney for the Manganos, told CNN that his clients did not abandon the patients who died. The Manganos stayed in the nursing home through the storm with their children, grandchildren, and nieces and nephews, he said.

story.ritas.jpg

St. Rita's Nursing Home is in the St. Bernard Parish of New Orleans.

Image:

NEXT →

RELATED

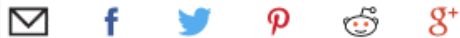
Gallery: [Aftermath and recovery](#)

- On the scene: [Hope after storm](#)
- Timeline: [Katrina's toll](#)
- Your e-mail: [Words of hope](#)

Why Are We Here Today?

24 nursing home evacuees die in bus fire

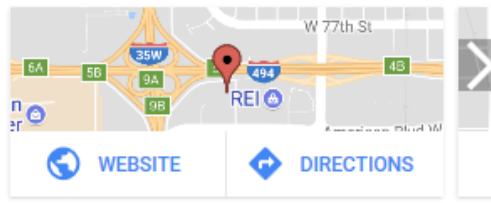
By ANNE BELLI and Lisa Falkenberg Published 5:30 am CDT, Saturday, September 24, 2005



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DALLAS - To **Eileen Kisluk**, he's the center of her world. So the Houston lawyer was taking no chances with her 78-year-old father's life as Hurricane Rita approached.

She made sure the Bellaire nursing home Brighton Gardens was taking all precautions to safely evacuate her father, Harry Wilson, and dozens of others, on a chartered bus to Dallas on Thursday before the storm.

Fifteen hours later, the bus was a charred hulk on the side of Interstate 45, with 24 bodies inside and investigators seeking the cause of a fire and explosion that tore through the bus in the Dallas suburb of Wilmer.

Thursday morning, Wilson's daughter brought bagels and cream cheese for the group of seniors, half of whom she said couldn't walk and many of whom couldn't communicate well. She waited four hours until several Bellaire firefighters helped carry her father, a large man paralyzed on one side after two strokes, onto the bus.

2005

Action vs. Inaction



In Both Scenarios, the outcome is the same.
I'm Dead.

Do we remember this the same way we remember the deaths in Katrina?

The screenshot shows the CNN.com website interface. At the top, the CNN logo is on the left, and 'Member Center: Sign In | Register' is on the right. Below the logo is a search bar with 'SEARCH' and radio buttons for 'THE WEB' and 'CNN.COM'. A navigation menu on the left lists categories like Home Page, World, U.S., Weather, Business, Sports, Analysis, Politics, Law, Technology, Science & Space, Health, Entertainment, Offbeat, Travel, Education, Special Reports, Video, Autos, and I-Reports. The main content area features a large 'U.S.' header and a sub-header 'Police: 24 dead after bus fleeing Rita catches fire'. Below this is a sub-headline 'Nursing home residents were leaving Houston' and the date 'Friday, September 23, 2005; Posted: 2:08 p.m. EDT (18:08 GMT)'. The main text reads: 'DALLAS, Texas (CNN) -- A bus carrying elderly evacuees from a nursing home near Houston, Texas, caught fire and exploded Friday south of Dallas, killing at least 24 people and jamming a key evacuation route for people fleeing Hurricane Rita.' A quote from Dallas County Sheriff's Sgt. Don Peritz follows: '"We believe, at this point, we have 24 [bodies] remaining on the bus," said Peritz. (Watch police describe bus fire tragedy -- 3:38)'. Below this, it states: 'Rita was expected to reach landfall somewhere near the Texas-Louisiana border Friday or early Saturday, the National Hurricane Center said. (Full story)'. The final sentence is: 'In Bellaire, Texas, the Brighton Gardens nursing home issued a statement saying, "A charter bus evacuating 38 residents and six team members from Brighton Gardens of'.

U.S.

» [2006 Forecast](#) | [Saffir-Simpson scale](#) | [Your stories](#)

Police: 24 dead after bus fleeing Rita catches fire

Nursing home residents were leaving Houston

Friday, September 23, 2005; Posted: 2:08 p.m. EDT (18:08 GMT)

DALLAS, Texas (CNN) -- A bus carrying elderly evacuees from a nursing home near Houston, Texas, caught fire and exploded Friday south of Dallas, killing at least 24 people and jamming a key evacuation route for people fleeing Hurricane Rita.

Dallas County Sheriff's Sgt. Don Peritz said 14 to 15 people were able to escape the bus.

"We believe, at this point, we have 24 [bodies] remaining on the bus," said Peritz. ([Watch police describe bus fire tragedy -- 3:38](#))

Rita was expected to reach landfall somewhere near the Texas-Louisiana border Friday or early Saturday, the National Hurricane Center said. ([Full story](#))

In Bellaire, Texas, the Brighton Gardens nursing home issued a statement saying, "A charter bus evacuating 38 residents and six team members from Brighton Gardens of

This image is no longer available

A bus that caught fire on Interstate 45 is towed away on Friday in Wilmer, Texas.

Image: [NEXT](#)

RELATED

- [Hurricane Rita closes in](#)
- ["Baytown a ghost town"](#)
- ["New era" of hurricanes](#)

Why Are We Here Today?

Mercy Hospital- Joplin, MO



2011

Why Are We Here Today?



A firefighter searched West Rest Haven nursing home after the explosion.

2013



Why Are We Here Today?

After Fertilizer Blast, Nursing Home Deaths Higher Than Usual

June 20, 2013

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Article

0 Comments

While the fertilizer plant explosion in the town of West, Texas, destroyed much of the nursing home next to it, almost all of its residents survived that first night.

But two months after the blast, 14 of the residents have died.



Non-Weather-Related Risks

Learn how to assess
Non-weather-related risks
From fire and water.

Learn More

CoreLogic

That's almost twice as many residents who would be expected to die in a normal two months at West Rest Haven, administrator Rose Ann Morris told The Dallas Morning News.

2013

Why Are We Here Today?

13th and 14th Residents Die From Florida Nursing Home That Lost A/C After Hurricane Irma

by Associated Press / Oct. 09, 2017 / 3:42 PM ET



2017

Florida nursing home deaths during Hurricane Irma ruled homicides

HURRICANE IRMA · November 22nd, 2017

By Nicole Darrah | Fox News



Florida officials have declared the deaths of 12 of 14 nursing home patients who died after Hurricane Irma as homicides. (John McCall/South Florida Sun-Sentinel via AP)

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Can This Happen Here?

Training pays off during nursing facility evacuation

By [Maria Lockwood](#) on May 11, 2018 at 7:46 a.m.

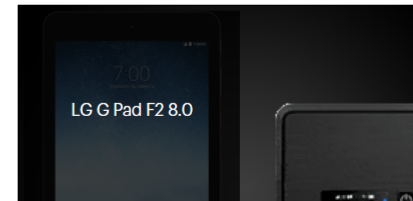


When a series of explosions and fires at the Husky Energy oil refinery prompted the April 26 evacuation, planning paid off for Twin Ports Health Services.

"Our evacuation went really well," said executive director Peggy Rahkonen.

It wasn't the best situation, she said, but both the residents and staff remained calm. Community resources, including U-Haul trucks, Voyageur buses and a flatbed truck, were ready to roll.

"It's all in the training," Rahkonen said. "It went really well."



Can This Happen Here?

Albert Lea
Tribune



37°

HOME NEWS PROGRESS MAYO UPDATES SPORTS OPINION ARTS & CULTURE OBITUARIES

LATEST STORIES

Students add color (and line, texture, space, value, form) to walls

Finding artwork along the way

Births

Turkey vultures have rooted history in southeastern Minnesota

Organizations

Fire at Knutson Place causes evacuation of residents



By Sam Wilmes
Email the author

Published 9:39 am Monday, February 26, 2018



TECOVAS

A fire Friday night at St. John's Lutheran Community's Knutson Place Apartments reportedly caused \$35,000 in damage.

The fire caused a temporary evacuation of residents to other parts of the facility not impacted by the fire. Third-floor residents were taken to the first floor dining room in the nursing home while first responders were on scene.

Can This Happen Here?

Downed trees, power outages litter Cannon Falls after storm

By Katie Lauer klauer@postbulletin.com Sep 21, 2018



Personnel from multiple local emergency response teams helped evacuate residents of The Gardens nursing home to area hospitals Friday afternoon. Severe thunderstorms cut power to the facility Thursday evening.

Katie Lauer/klauer@postbulletin.com

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September 21, 2018- Less than two months ago

Why Are We Here Today?

GREG WALDEN, OREGON
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FRANK PALLONE, JR., NEW JERSEY
RANKING MEMBER

ONE HUNDRED FIFTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115

Majority (202) 225-2927
Minority (202) 225-3641

April 2, 2018

The Honorable Seema Verma
Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Administrator Verma:

Pursuant to Rules X and XI of the U.S. House of Representatives, the Committee on Energy and Commerce (the committee) is continuing its oversight of Skilled Nursing Facilities (SNFs) and Nursing Facilities (NFs) participating in the Medicare and Medicaid programs. We appreciate the testimony that Principal Deputy Administrator for Operations Kimberly Brandt provided on this issue at the Subcommittee's October 24, 2017 hearing examining HHS' preparedness for and response to the 2017 hurricane season.

The committee has been closely following recent media reports describing horrific instances of abuse, neglect, and patient harm allegedly occurring at SNFs and NFs across the country, including at the Rehabilitation Center at Hollywood Hills where 14 residents died in the immediate aftermath of Hurricane Irma in Florida.¹ These reports raise serious questions about the degree to which the Centers for Medicare and Medicaid Services (CMS) is fulfilling its responsibility to ensure federal quality of care standards are being met, as well as its duty to protect vulnerable seniors from elder abuse and harm in facilities participating in the Medicare and Medicaid programs. The adequacy of the CMS' oversight of SNFs and NFs has also been called into question in recent reports issued by the Office of Inspector General at the U.S. Department of Health and Human Services (HHS OIG) and the U.S. Government Accountability Office (GAO).²

Why Are We Here Today?



NEWS ADV

Senators Blast Nursing Home Operators, CMS Over Emergency Prep Rules

By Alex Spanko | November 4, 2018

Members of a prominent Senate committee on Friday released a scathing report on emergency preparedness in the nation's nursing homes, accusing both operators and the federal government of failing residents during storms and other disasters.

Compiled by the Democratic members of the Senate Committee on Finance, the report — titled "[Sheltering in Danger](#)" — specifically looked at operators' responses to Hurricanes Harvey and Irma in 2017; the latter storm claimed a dozen victims at a nursing home in Hollywood Hills, Fla. after a power outage sent inside temperatures soaring.

"This investigation cataloged a series of missteps, poor emergency planning, and faulty communication strategies that contributed to the misery and the preventable deaths of nursing home residents," the senators wrote. "The investigation identified gaps in nursing home emergency preparedness and response, particularly when their vulnerable residents are sheltered-in-place."

The New York Times [first reported on the results](#) of the senators' investigation, with Sen. Ron Wyden of Oregon telling the paper that "too many [operators] are not equipped to handle matters of basic safety in disasters."

The #1 Key to Good Emergency Planning is

Believing the Plan will be Used

Why Are We Here Today?

- When faced with emergency situations, medical facilities have proven ill prepared to respond.
- Emergency planning is an ethical and responsible practice.
- Failing to prepare is preparing to fail.
- We can do better.
- The CMS requirements are not going away.

The CMS Requirements

“We believe that, currently, in the event of a disaster, healthcare facilities across the nation will not have the necessary emergency planning and preparation in place to adequately protect the health and safety of their patients.”



Federal Register- Published 9/16/16.
Implementation 11/15/17

The CMS Requirements

- The CMS is responding to what it sees as the complexities of actual emergencies and the inconsistencies of preparedness among providers.
- CMS states that the previous requirements were “insufficient” and the new requirements are “comprehensive.”



What is an all-hazards approach?



When planning, you shouldn't focus on just one hazard or threat. The probability of one hazard or threat impacting your facility is difficult to determine.

Your plan should focus on all hazards that are possible in your area.

The CMS Requirements

HAZARD SPECIFIC PROCEDURES

| Types of Threats |
|------------------|
| Bomb Threat |
| Evacuation |
| Extreme Cold |
| Extreme Heat |
| Fire |
| Flood |
| Missing Resident |
| Shelter in Place |
| Tornado |
| Utility Failure |

The results of your Hazard Vulnerability Assessment should identify the most relevant threats to your facility. These threats should have their own specific procedures within your EOP.

Example of a Policy: Shelter-in-Place

The biggest decision by our Incident Commander (or designee) may be whether to stay or go in response to a threatened or actual emergency. These criteria should be met when deciding...

This decision is always based on the best interests of the residents; shelter-in-place is often the preferred method over facility evacuation due to the stress to residents associated with evacuation to another facility or alternate care site.



Example of a Procedures: Shelter-in-Place

Once the Incident Commander makes the decision to shelter in place, the following activities occur:

- ✓ Action Item #1
- ✓ Action Item #2

What are typical procedures for Shelter in Place?



The CMS Requirements

Our Recommendation:

QUICK REFERENCE GUIDES

| | |
|---|--|
|  | Bomb Threat 2 |
|  | Cold Weather Procedures 4 |
|  | Earthquake 5 |
|  | Fire 7 |
|  | Flood 10 |
|  | Hazardous Material/Waste Spill 11 |
|  | Hot Weather Procedure 13 |
|  | Pandemic Influenza 14 |
|  | Missing Resident 15 |
|  | Utility Outage 17 |
|  | Workplace Violence 18 |
|  | Evacuation 20 |
|  | Shelter in Place 22 |

Continuity of Operations

Continuity of Operations (COOP) is a means to ensure that **Primary Mission Essential Functions** continue to be performed during a wide range of emergencies.

What are some of the Mission Essential Functions of your organization?

Continuity of Operations

Some essential elements to identify for a viable Continuity of Operations Plan

- Essential Functions
- Orders of Succession
- Delegations of Authority
- Continuity Facilities
- Continuity Communications
- Vital Records Management
- Devolution of Control and Direction
- Reconstitution

Continuity of Operations

Four Phases of Continuity of Operations Activation

Phase 1- Readiness and Preparation

Phase 2- Activation & Relocation: plans, procedures, schedules to transfer activities, personnel, records, and equipment to alternate facilities are activated.

Phase 3- Continuity of Operations: full execution of essential operations at alternate operating facilities is commenced.

Phase 4- Reconstitution: operations at alternate facility are terminated and normal operations resume.

Your Resource List

- We (Midwest Hazard Solutions) suggest every facility create and maintain a Resource List of organizations & businesses you can contact to provide supplies in an emergency.

Discussion

- What are some Resources your facility may depend on in an emergency?

| | | | | | |
|------------|------------|------------|----------|-------------|-------------|
| | | | | | |
| Food | Water | Shelter | Blankets | Fuel | Wheelchairs |
| Medication | Counselors | Generators | Buses | Flashlights | Beds |

Your Resource List will help you get these items faster

Example of a Resource List

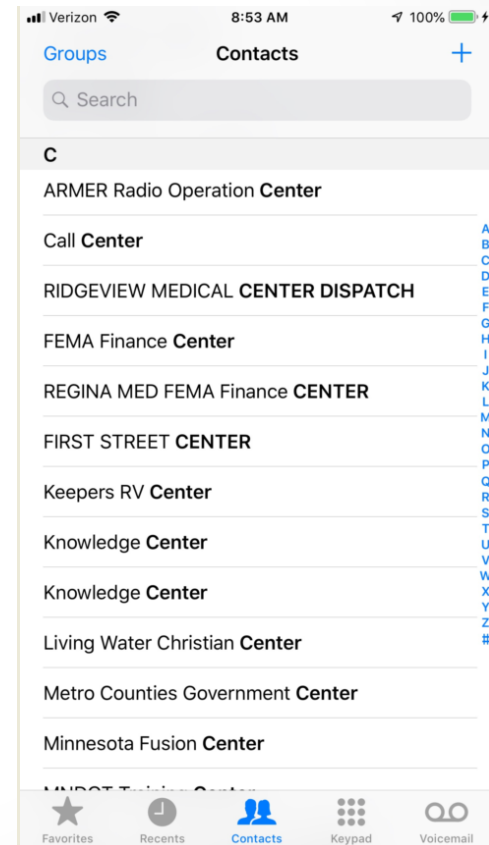
| | | | | | |
|-------------------------------------|---------------------|----------------|--|------------------------------|---------------------|
| Jon Ulrich | County Commissioner | | Jon Ulrich | 14043 Walters Way | Savage |
| Dave Menden | County Commissioner | | Dave Menden | 904 Clay Street | Shakopee |
| North Memorial Ambulance | EMS | (507) 334-6031 | Dave Augustin | 1226 Willow Street | Faribault |
| Northfield Ambulance | EMS | (507) 646-1444 | Brian Edwards | 2000 North Ave | Northfield |
| Mdewakanton Emergency Services | EMS | | Greg Hayes | 2525 Flandreau Trail | Prior Lake |
| Allina Medical Transportation | EMS | (952) 894-5492 | Jeff Lanenberg | 8019 124th Street SE | Savage |
| Ridgeview Ambulance Services | EMS | (952) 442-2191 | Darel Radde | 500 S Maple Street | Waconia |
| Anoka Equine Veterinary Services | Equine Clinic | (763) 441-3797 | | 16445 70th St NE | Elk River |
| Clear Lake Veterinary Hospital | Equine Clinic | (952) 435-8387 | | 18577 Natchez Ave | Prior Lake |
| University of Minnesota | Equine Clinic | (612) 625-8387 | | 1365 Gortner Ave | St. Paul |
| Stillwater Equine Veterinary Clinic | Equine Clinic | (651) 770-6167 | | 9550 60th St N | Stillwater |
| Kolden Funeral Service | Funeral Home | (952) 873-6227 | Darrell D. Kolden Gregory L. Borchert Shawn T. Kolden Karl R. Kolden Rosemary Kolden | 219 North Willow Street | Belle Plaine |
| Wagner Funeral Home | Funeral Home | (952) 873-3424 | Joseph M. Wagner | 620 East South Street | Belle Plaine |
| Cremation Society of Minnesota | Funeral Home | 952-924-4100 | | 7110 France Ave S | Bloomington |
| Ballard-Sunder Funeral Home | Funeral Home | (952) 492-2818 | Mark R. Ballard Charles J. Sunder | 104 First Street West | Jordan |
| Wagner Funeral Home | Funeral Home | (952) 492-3366 | Joseph M. Wagner | 17365 Johnson Memorial Drive | Jordan |
| Bruzek Funeral Home | Funeral Home | (952) 758-4949 | Stephen G. Frost | 610 Main Street East | New Prague |
| Ballard Sunder Funeral Home | Funeral Home | (952) 447-2633 | Mark R. Ballard Rodney Lieske Charles J. Sunder | 4565 Pleasant Street SE | Prior Lake |
| Ballard-Sunder Funeral Home | Funeral Home | (952) 445-1202 | Mark R. Ballard Charles J. Sunder | 833 So. Marschall Road | Shakopee |
| McNearney Funeral Home | Funeral Home | (952) 445-2755 | James J. McNearney Joseph W. Schmidt | 1220 East Third Avenue | Shakopee |
| Hennepin County Medical Examiner | Funeral Home | | | | |
| Titan Energy | Generators | 952-960-2371 | Tom Vagts | 6321 Bury Drive, Suite 8 | Eden Prairie |
| Winco Generators | Generators | 800-733-2112 | | | LeCenter |
| Allied Generators | Generators | 651-770-3483 | Roger Heath | 533 Hayward Ave N #150 | Oakdale |
| Ziegler Cat | Generators | 952-887-4570 | | | Shakopee |
| Onan Generators | Generators | 763-574-5000 | Zach | 1600 Buerkle Rd | White Bear Lake |
| Advanced Recyclers | HazMat- Appliances | (651) 454-9215 | | 10619 Courthouse Blvd. | Inver Grove Heights |
| JR's Appliance, Inc. | HazMat- Appliances | (651) 454-9215 | | 8980 Highway 149 | Inver Grove Heights |
| Appliance Services | HazMat- Appliances | (952) 445-2916 | | 13122 Johnson Mem Dr | Shakopee |
| DemCon | HazMat- Appliances | (952) 445-5755 | | 3601 West 130th Street | Shakopee |

Your Resource List

- With every resource, try to go **Three Deep** if you can
 - Have three sources for food, water, generators, etc.

TIP: Maintain three physical copies, a digital copy AND...

Ensure three members of your staff (preferably Logistics members) have these contacts in their cell phones!!



Go Kits

Have Pre-packaged, easily mobile resources to take with you if you evacuate!

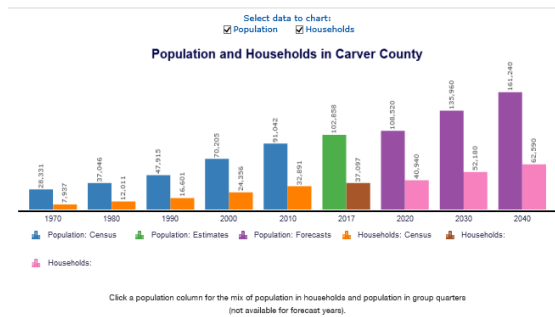


Discussion- Supplies

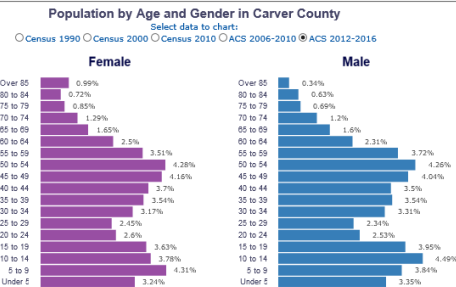
1. How many days of meds does your facility have?
2. How about Food & Water?
3. What about Fuel for your Generator(s)?
4. Where would you get more?
5. What is your procedure if you were running out of any of the above?

When to Use a Search Engine

- To find existing plans you may be able to examine or modify to fit your needs.
- To find relevant data about your location, such as Census Data.



Sources: U.S. Census Bureau Decennial Census, Metropolitan Council Annual Estimates, and Metropolitan Council Forecasts.
[Download chart data](#)
[Back to top](#)



Sources: U.S. Census Bureau Decennial Census or American Community Survey.
[Download chart data](#)
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Emergency Management Planning Criteria

Many licensed health care facilities are required by statute or rule to must include:

- Risk Assessment and Planning
- Policies and Procedures
- Communication Plan
- Training and Testing

Current CEMP Forms

- [Adult Day Care Centers](#) [PDF]
- [Ambulatory Surgery Centers](#) [PDF]
- [Assisted Living Facilities](#) [PDF]
- [Home Medical Equipment Providers](#) [DOC]
- [Home Health Agencies](#) [DOC]
- [Hospices](#) [DOC]
- [Hospitals](#) [PDF]
- [Nursing Homes](#) [PDF]
- [Nurse Registries](#) [DOC]

[Emergency Plan Regulations and Review](#) [21KB, PDF]

[County Emergency Management Offices](#)

When to Use a Search Engine

- To find information on hazards or threats in your area.

NCEI > Storm Events Database (Select State) > (Select Date/County/Event)

Storm Events Database

Data Access

- [Search](#)
- [Bulk Data Download \(CSV\)](#)
- [Storm Data Publication](#)

Documentation

- [Database Details](#)
- [Version History](#)
- [Storm Data FAQ](#)
- [NOAA's NWS Documentation](#)
- [Tornado EF Scale](#)

External Resources

- [NOAA's SPC Reports](#)
- [NOAA's SPC WCM Page](#)
- [NOAA's NWS Damage Assessment Toolkit](#)
- [NOAA's Tsunami Database](#)
- [ESRI/FEMA Civil Air Patrol Images](#)
- [SHELDUS](#)
- [USDA Cause of Loss Data](#)

Storm Events Database

Search Results for Redwood County, Minnesota

Event Types: **Tornado**

28 events were reported between 07/01/1950 and 07/31/2018 (24868 days)

Summary Info:

| | |
|--|----|
| Number of County/Zone areas affected: | 1 |
| Number of Days with Event: | 15 |
| Number of Days with Event and Death: | 1 |
| Number of Days with Event and Death or Injury: | 2 |
| Number of Days with Event and Property Damage: | 10 |
| Number of Days with Event and Crop Damage: | 0 |
| Number of Event Types reported: | 1 |

Column Definitions:
'Mag': Magnitude, 'Dth': Deaths, 'Inj': Injuries, 'PrD': Property Damage, 'CrD': Crop Damage

Click on [Location](#) below to display details.
Available Event Types have changed over time. Please refer to the [Database Details](#) for more information.

Select: Sort By:

| Location | County/Zone | St | Date | Time | T.Z | Type | Mag | Dth | Inj | PrD | CrD |
|-------------------------------|-------------|----|------------|-------|-------|---------|-----|-----|-----|---------|-------|
| Totals: | | | | | | | | | | | |
| REDWOOD CO. | REDWOOD CO. | MN | 06/19/1958 | 16:00 | CST | Tornado | F0 | 0 | 0 | 7.226M | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 08/04/1958 | 19:30 | CST | Tornado | F1 | 1 | 2 | 0.25K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 05/04/1959 | 18:00 | CST | Tornado | F0 | 0 | 0 | 0.25K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/07/1967 | 15:00 | CST | Tornado | F0 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/13/1968 | 18:10 | CST | Tornado | F5 | 0 | 0 | 2.500M | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/28/1979 | 15:30 | CST | Tornado | F1 | 0 | 1 | 25.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/21/1981 | 16:04 | CST | Tornado | F2 | 0 | 0 | 250.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/21/1981 | 16:47 | CST | Tornado | F0 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/21/1981 | 16:54 | CST | Tornado | F2 | 0 | 0 | 250.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/23/1981 | 13:56 | CST | Tornado | F2 | 0 | 0 | 2.500M | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 04/21/1985 | 19:00 | CST | Tornado | F1 | 0 | 0 | 250.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 04/21/1985 | 19:15 | CST | Tornado | F1 | 0 | 0 | 250.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 17:25 | CST | Tornado | F3 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 17:55 | CST | Tornado | F1 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 18:10 | CST | Tornado | F3 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 18:25 | CST | Tornado | F2 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 18:25 | CST | Tornado | F2 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 18:30 | CST | Tornado | F1 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD CO. | REDWOOD CO. | MN | 06/16/1992 | 18:40 | CST | Tornado | F2 | 0 | 0 | 0.00K | 0.00K |
| CLEMENTS | REDWOOD CO. | MN | 06/18/1998 | 14:55 | CST | Tornado | F1 | 0 | 0 | 0.00K | 0.00K |
| REDWOOD FALLS | REDWOOD CO. | MN | 06/18/1998 | 15:07 | CST | Tornado | F0 | 0 | 0 | 0.00K | 0.00K |
| REVERE | REDWOOD CO. | MN | 04/18/2004 | 17:03 | CST | Tornado | F0 | 0 | 0 | 0.00K | 0.00K |
| LAMBERTON | REDWOOD CO. | MN | 04/18/2004 | 17:29 | CST | Tornado | F1 | 0 | 0 | 0.00K | 0.00K |
| REVERE | REDWOOD CO. | MN | 06/25/2010 | 17:55 | CST-6 | Tornado | EF1 | 0 | 0 | 0.00K | 0.00K |

Break

What is an Emergency Operations Plan?

An emergency operations plan (EOP) is a document which outlines how a facility will respond to an emergency. The EOP sets guidelines to manage a disaster in an effective, efficient, and timely manner.

The EOP typically calls for the establishment of the Incident Command System (ICS). An emergency operations plan is activated on an as-needed basis and is designed to be used for all types of emergencies.

What is the Incident Command System (ICS)?

- A management structure for command, control and coordination in chaotic events
- Needed when incidents require a coordinated effort to ensure an effective response and for the efficient, safe use of resources

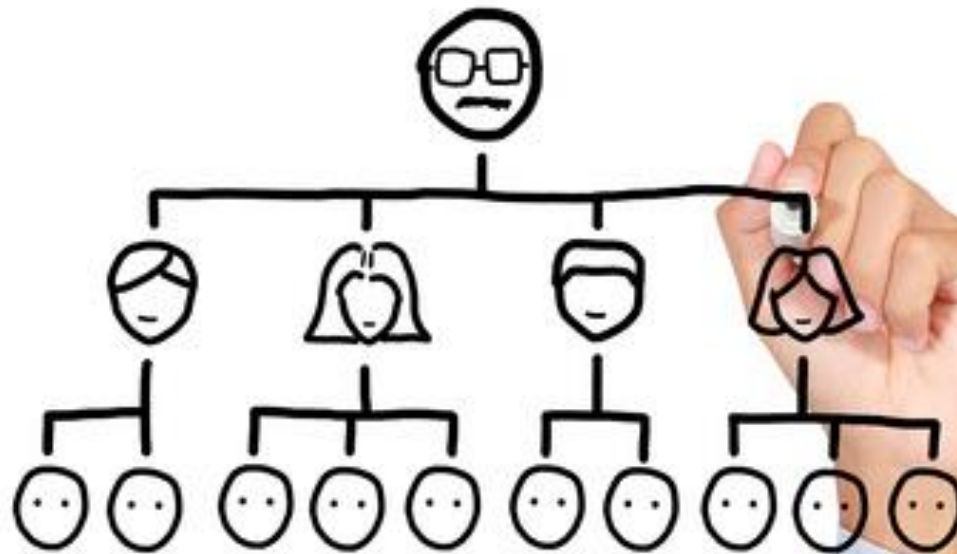
What is the Incident Command System (ICS)?

- Standardized, on-scene, all hazard incident management concept.
- Integrated organizational structure to match the complexities of incidents or events.

What is the Incident Command System (ICS)?

- ICS uses principles that have proven efficiency and effectiveness in a business setting and applies principles to emergency and disaster response.
- ICS structure is the standard for emergency and disaster response.

Span of Control



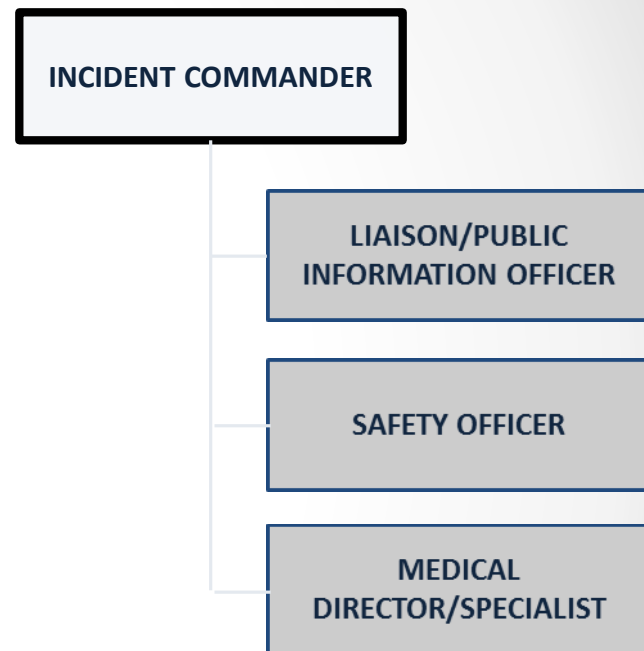
- The 5 Primary Functions of ICS are:
 - Incident Commander (the Leader)
 - Operations (the Doers)
 - Planning (the Planners)
 - Logistics (the Getters)
 - Finance and Administration (Supporters)

Incident Commander

- The Leader
 - Activates and directs the response
 - Establishes priorities and objectives
 - Determines the size of the Incident Management Team and assigns roles
 - Coordinates with other response partners
 - EMS, fire, law enforcement, public health

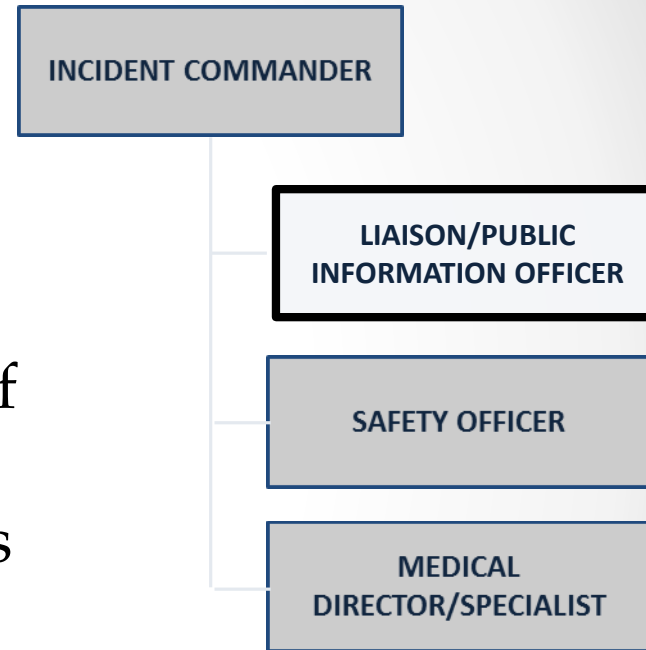
Command Staff

- As needed, the Incident Commander may appoint:
 - Liaison/Public Information Officer (PIO)
 - Safety Officer
 - Medical Director/Specialist
- This group is collectively called the “Command Staff.”

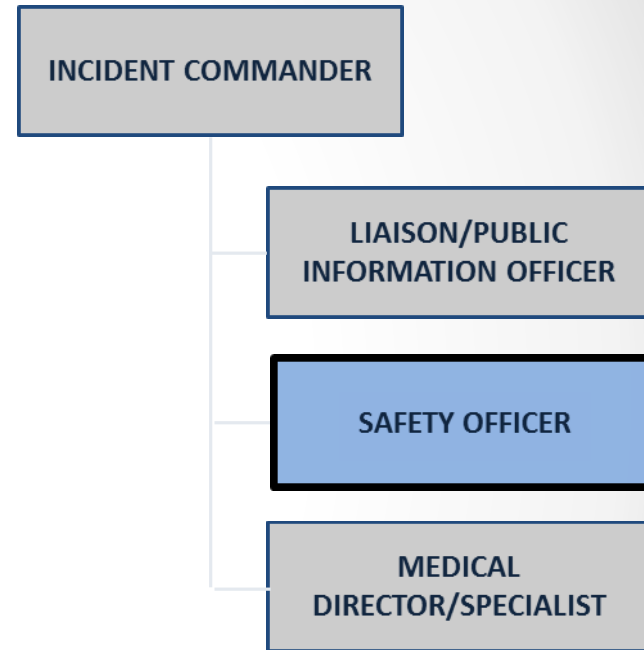


The Liaison/PIO:

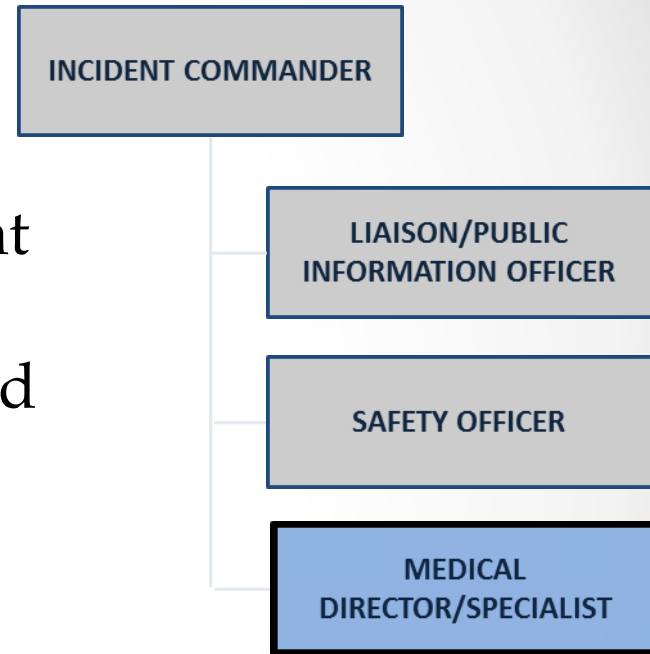
- Communicates with external partners
- Provides information to residents, staff and family/guardians
- Develops public information/messages



- The Safety Officer:
 - Ensures the safety of residents, staff, and family/guardians
 - Identifies risks to the facility
 - Advises IMT staff about any unsafe conditions and recommends corrective action.



- The Medical Director/Specialist
 - Oversees medical services
 - Assists with the medical management of residents and injured staff
 - Advises the Incident Commander and staff regarding medical, biological/infectious, ethics, or hazmat implications due to the incident.



Incident Command System (ICS)?

General Staff

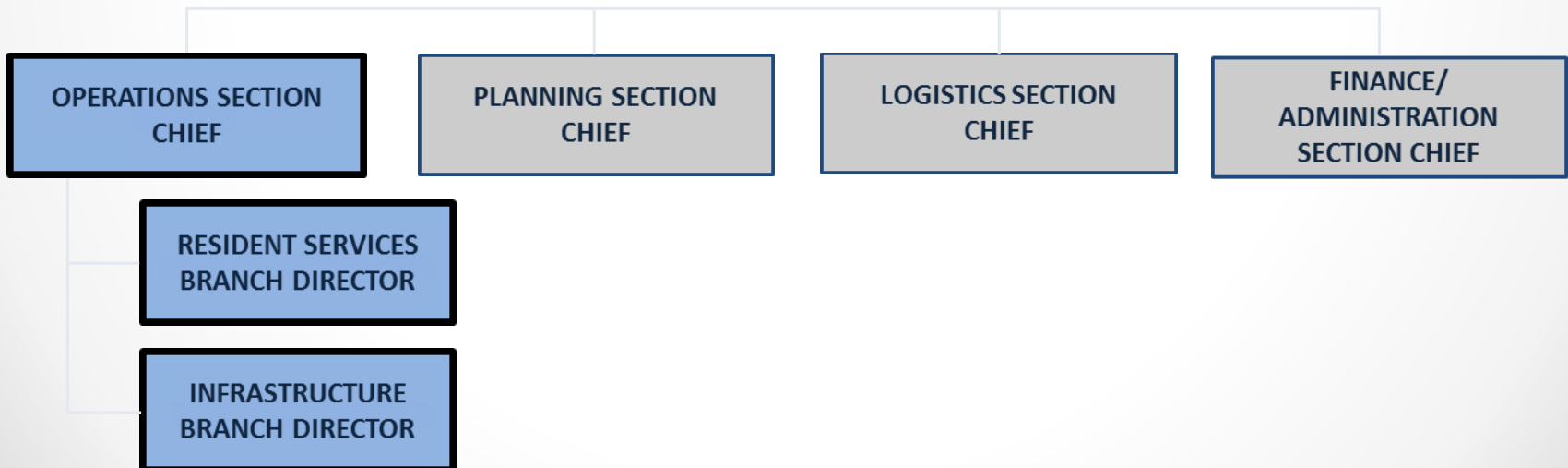
- General staff include the:
 - Operations Section Chief
 - Planning Section Chief
 - Logistics Section Chief
 - Finance and Administration Section Chief



Incident Command System (ICS)?

Operations

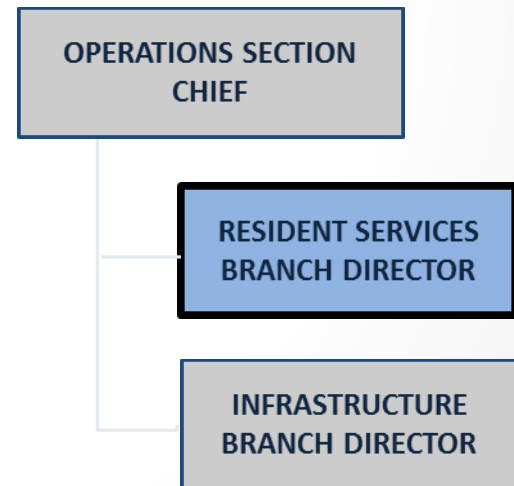
- The “Doers”:
 - Coordinate tactical activities and implement actions consistent with the objectives identified by the Incident Commander



Incident Command System (ICS)?

Residential Services Branch

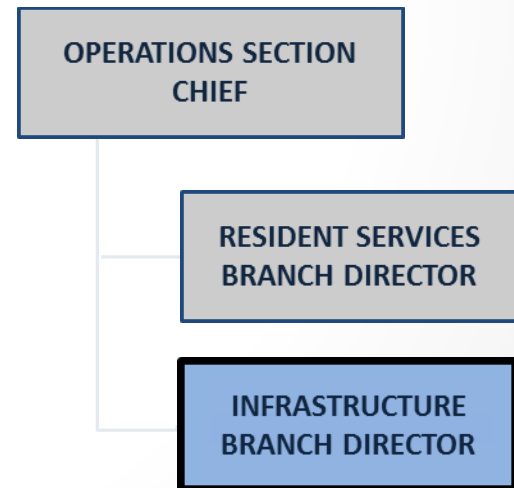
- Functions managed by the Residential Services Branch under Operations:
 - Admission/Transfer and Discharge
 - Nursing
 - Medical Records
 - Psychosocial



Incident Command System (ICS)?

Infrastructure Branch

- Functions managed by the Infrastructure Branch under Operations:
 - Dietary
 - Physical Plan
 - Environmental



Incident Command System (ICS)?

Planning

- The “Planners”:
 - Collect and report status information
 - Prepare the Incident Action Plan (IAP) and other necessary forms and reports
 - Support incident objectives established by the Incident Commander



Incident Command System (ICS)?

Logistics

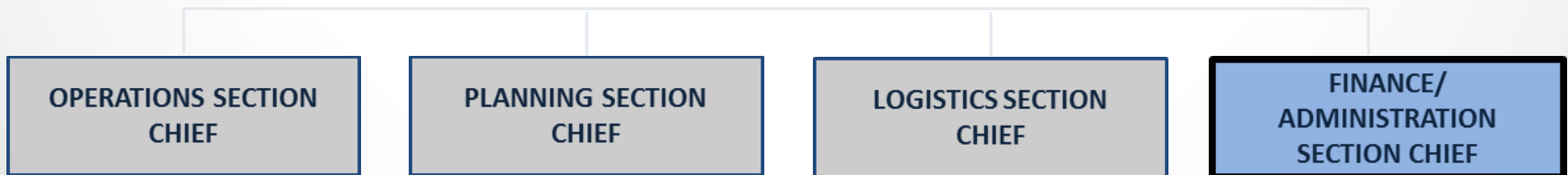
- The “Getters”:
 - Acquire necessary staff, stuff and space
 - Support IMT operations
 - Ensure preservation of essential services and maintain facility supplies, equipment, transportation, and labor pool



Incident Command System (ICS)?

Finance and Administration

- The “Supporters”:
 - Track response costs and expenditures
 - Purchase supplies and equipment
 - Maintain detailed records
 - Prepare payroll
 - Perform clerical tasks



Incident Command System (ICS)

ICS Flexibility & IMT Size

- The size of the IMT is influenced by certain factors including the:
 - Type of incident
 - Magnitude of impact to your facility
 - Span of control
 - No IMT member should supervise more than 3 to 7 people (average is 5)

Incident Action Planning

- The six essential steps of Incident Action Planning are:
 1. Understand the facilities policies and direction
 2. Assess the situation
 3. Establish incident objectives
 4. Determine appropriate strategies to achieve objectives
 5. Give tactical direction and ensure that it is followed
 6. Provide necessary back-up when tactical direction is initiated

Management by Objectives

- The Incident Commander sets the overall objectives for response and recovery
 - Once the Incident Commander has established the overall objectives, the IMT staff will develop strategies for each section.
 - As the response evolves, needs and priorities may change, leading to revisions of the objectives and strategies.

Incident Action Planning

| Action | Who | What | Example |
|---|--------------------|--|--|
| Establish INCIDENT OBJECTIVES | Incident Commander | The major priorities for incident response (include in Incident Action Plan) | Ensure the safety of residents, staff and visitors |
| Establish STRATEGIES to meet the Objectives | Section Chiefs | The major approaches that will be under taken by each section to achieve the incident objectives established by the Incident Commander and contained in the Incident Action Plan (IAP) | Assess the building for structural damage due to the earthquake |
| Decide on and implement TACTICS to meet the Objectives | Section Chiefs | The specific actions that will be under taken by each section to achieve the objectives established in the Incident Action Plan (IAP) | Equip the assessment team with appropriate protective gear and tools to conduct assessments. |

Questions

1. Who would likely be the Incident Commander at your facility?
2. What is the difference between an Incident Commander and a Section Chief?
3. Does your facility currently have a similar structure for emergency response?
4. Does your facility have a PIO (Public Information Officer)?
 1. Is there a plan to communicate with loved ones/family members during a crisis?



Making your Emergency Operations Plan



Six Steps in the Emergency Planning Process

1. Make a Planning Team
2. Understand the Situation (i.e.- Know your hazards and threats)
3. Determine Goals and Objectives
4. Develop the Plan
5. Prepare, Review, and Approve the Plan
6. Implement and Maintain the Plan

Step 1: Creating your Planning Team

Your planning team should include a diverse sub-set of your organization.

1. DO NOT plan with one person
2. DO NOT only include people who work the day shift
3. DO NOT fill your team with only the leaders of your organization.
4. DO include people from all shifts
5. DO include people from all occupations (cooks, maintenance, housekeeping, accounting, facility owner)
6. DO make sure at least one person from each shift is represented
7. DO consider having the person who has worked at your organization the longest on your team.
8. DO meet frequently and be open to all input
9. DO form a partnership with local first responders and neighboring businesses.

Why Should You Use a TEAM Approach to Planning?



What Should the Planning Team Do First?

Step 2: Understand the Situation





The CMS Requirements

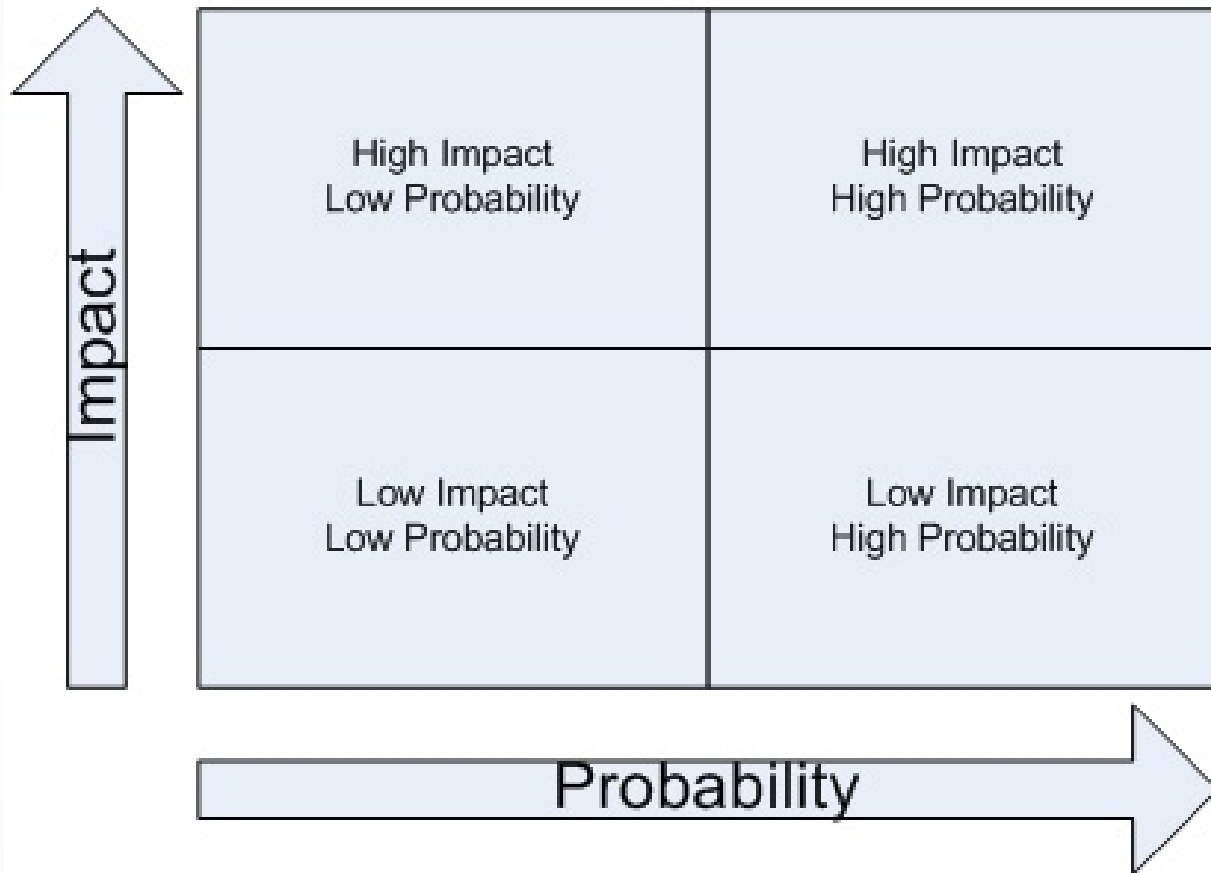
Hazard Vulnerability Assessment (HVA)



How to Identify Threats and Hazards

1. Make a Map





See Page 8 in your EOP Workbook

How to Identify Threats and Hazards

2. Find Your County Hazard Mitigation Plan

- Search for Lincoln County Minnesota Hazard Mitigation Plan
- Risk Assessment is always Chapter 4 in a Hazard Mitigation Plan.

CHAPTER 4: RISK ASSESMENT

This Chapter profiles hazards facing the county. Section V describes identified natural and technological hazards. Section VI provides a profile of identified hazards. Section VII provides an overview of vulnerability to identified hazards. Section VIII addresses Repetitive Loss Properties. Section IX addresses risks to structures. Section X addresses estimates of potential losses. Section XI provides an analysis of development trends. Section XII addresses multi-jurisdictional risk analysis for participating jurisdictions.

V. Identifying Hazards

Requirement §201.6(c)(2)(i): [The risk assessment shall include a] description of the type ... of all natural hazards that can affect the jurisdiction.

The 2008 Minnesota State All-Hazard Mitigation Plan (MAHMP) includes a detailed hazard analysis, the result of a risk and vulnerability assessment conducted state-wide. Those hazards were themselves selected by Minnesota Homeland Security and Emergency Management (HSEM) from a comprehensive list of natural hazards identified by the Federal Emergency Management Agency (FEMA) in 1997, as well as relevant human-caused hazards. The state-wide risk assessment is intended to satisfy the requirements of the federal Disaster Mitigation Act of 2000 (DMA2K).

A. Description of All Hazards

Presidential Disaster Declaration #1622 was declared in 2006 for 9 counties in Minnesota, including Lincoln County, for **Severe Winter Storms** which occurred November 27-29, 2005. These counties were eligible for Public Assistance. The following Presidential Disaster Declarations were detailed in the 2005 edition of the MAHMP:

Key: PA = Public Assistance Program (formerly Infrastructure Support Program)
IA = Individual Assistance
HM = Hazard Mitigation Grant Program

#1175 in 58 Counties
4/8/1997 Severe Flooding, High Winds, & Severe Storms
PA, IA, HM

#1158 in 40 Counties
1/16/1997 Severe Winter Storms & Blizzards, Snow Emergency Declaration
PA

How to Identify Threats and Hazards

3. Ask your **long-term employees**, or even your residents

People who have lived through a disaster generally recall it in great detail.

Employees who may have worked in your facility at the time may possibly recall the impact to the facility.



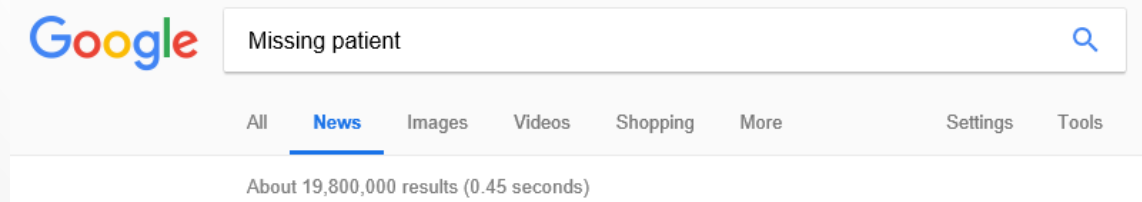
How to Identify Threats and Hazards

4. Google is your friend; look for resources which may show hazards that have occurred in similar facilities.

Some Google Search Terms

Nursing Home Evacuated
Hospital Evacuated
Hospital Shelter in Place
Nursing Home Shelter in Place
Missing Patient

Look in “News” section of Google



Step 3: Develop Goals and Objectives

Once your planning team has identified your threats and hazards, the team should begin developing goals and objectives for each highly ranked threat.

Goals are broad, general statements that indicate the desired outcome in response to the threats and hazards identified by the planning team in the previous step.

Goals and objectives will help you identify when major activities are complete and what defines a successful outcome.

Step 3: Develop Goals and Objectives

The planning team should develop at least three goals for addressing each threat. Those goals should indicate the desired outcome for:

- **Before**
- **During**
- **And After each threat or hazard.**

Example Goals for a Fire:

1. (Before) Prevent a fire from occurring within the facility
2. (During) Protect all persons from injury and limit property damage by the fire.
3. (After) Provide necessary medical attention to all in need.

Step 3: Develop Goals and Objectives

Objectives are specific, measurable actions that are necessary to achieve the goals. You may need to identify multiple objectives in support of a single goal. Let's assign objectives to the first of the goals we made for a Fire:

Goal 1: (before) Prevent a fire from occurring within the facility.

Objective 1: Provide fire prevention training to all staff who use combustible materials or equipment.

Objective 2: Store combustible materials in fireproof containers or rooms.

Step 4: Plan Development

Identify Courses of Action

- Courses of action include criteria for determining how and when each response will be implemented under a variety of circumstances.
- Subsequently, the planning team develops response protocols and procedure to support these efforts.

Possible courses of action are typically developed using the following steps:

- Depict the scenario
- **Determine the amount of time available to respond**
- Identify decision points
- Develop courses of action

Step 4: Plan Development

Select Courses of Action

- After developing courses of action, planners compare the costs and benefits of each proposed course of action against the goals and objectives.
 - Example: PRO- We can shelter-in-place in a center room of the building, CON- **but** we may not be able to maintain heating/cooling and we won't have a place for patients to sleep comfortably.
- Based on this comparison, planners select the preferred course or courses of action to move forward in the planning process.

After selecting courses of action

- The planning team identifies resources necessary to accomplish each course of action without regard to resource availability.
- Once the planning team identifies all of the requirements, it begins matching available resources to requirements.

Step 5: Plan Preparation, Review, & Approval

Format the Plan

- An effective Emergency Operations Plan is presented in a way that makes it easy for users to find the information they need quickly and is compatible with all CMS requirements.

Write the Plan

- As the planning team works through the draft, members should add necessary tables, charts, maps, forms, and other supporting graphics.

Review the Plan

- Planners should check the written plan for CMS compliance as well as for its usefulness in practice.

Approve and Share the Plan

- After finalizing the plan, the planning team should present it to the appropriate leadership and obtain official approval of the plan.
- The team should then share the plan with its staff and any community partners who have a responsibility or are mentioned in the plan.

Step 5: Plan Preparation, Review, & Approval

Format the Plan

- There currently is no mandate on the particular format of an EOP by the CMS.
- An EOP's format is "good" if the EOP users understand it, are comfortable with it, and can use it to extract the information they need.

Step 5: Plan Preparation, Review, & Approval

Format the Plan

- In designing a format for your EOP, the planning team should consider:
- **Organization.** Does the EOP deliver the information one needs, or do users have to sift through irrelevant information?
- **Progression.** In any one section of the EOP, does each element seem to follow the previous one, or are some items strikingly out of place?
- **Consistency.** Does each section of the EOP use the same logical progression of elements, or must the reader reorient themselves in each section?

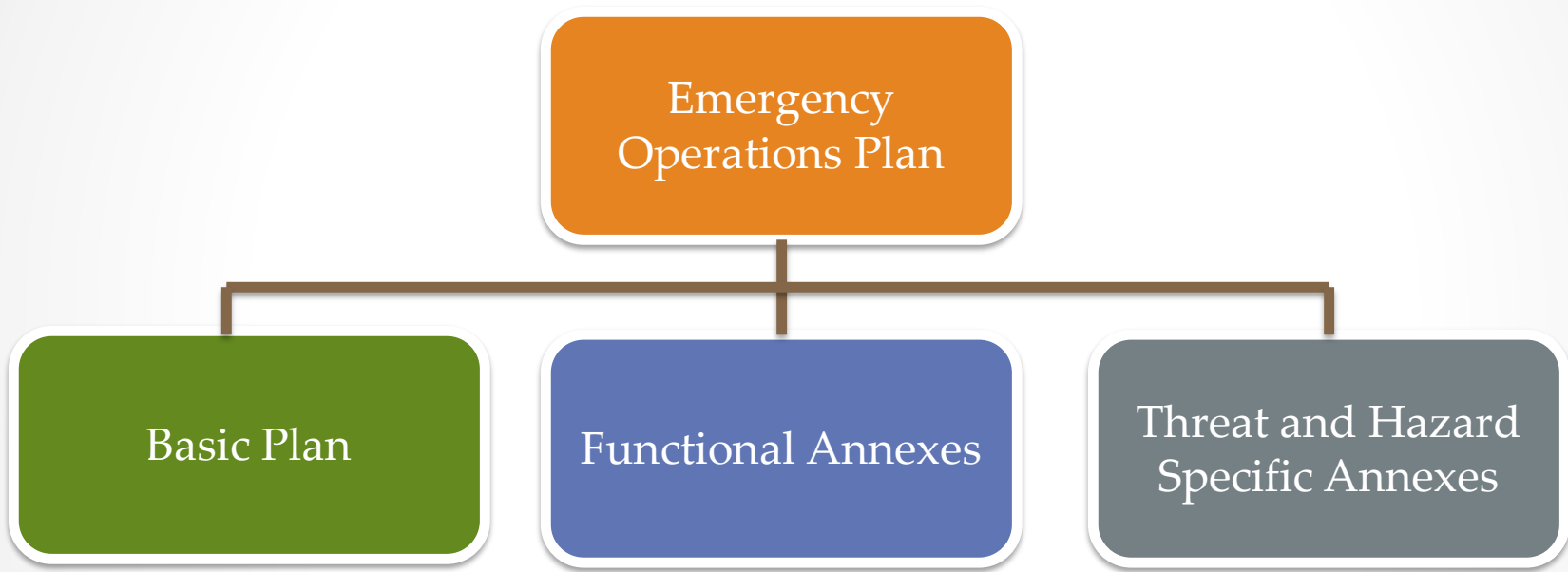
Step 5: Plan Preparation, Review, & Approval

Format the Plan

- In designing a format for your EOP, the planning team should consider:
- **Adaptability.** Is information in the EOP organized so that the EOP may be used in unanticipated situations?
- **Compatibility.** Does the EOP format promote or hinder coordination with other facilities, agencies, or responders?

Step 5: Plan Preparation, Review, & Approval

Formatting Suggestion



Step 5: Plan Preparation, Review, & Approval

Basic Plan



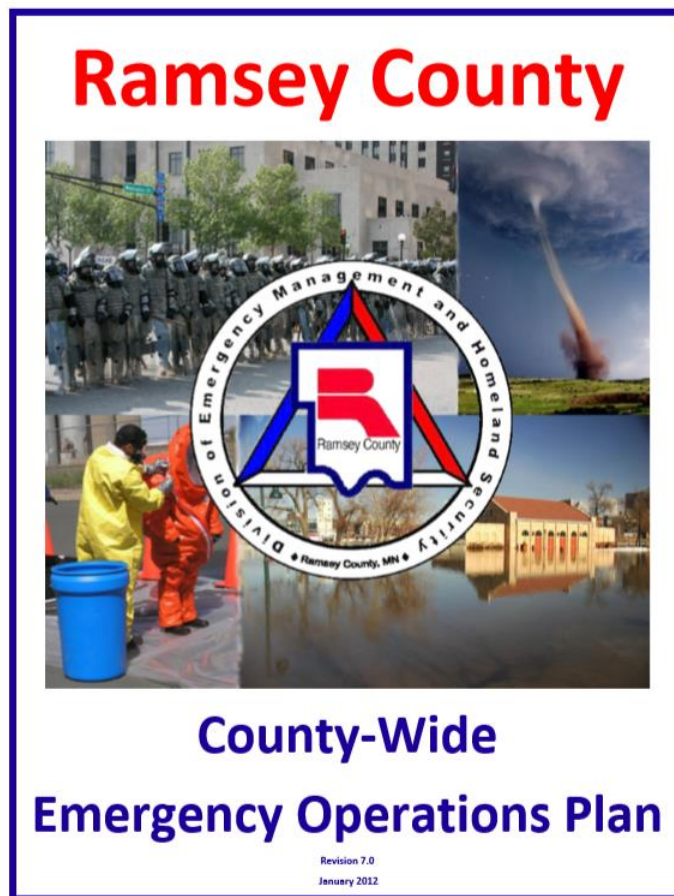
Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

Cover Page

The cover page includes the title of the plan, a date, and the facilities covered by the plan.



Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

Promulgation Statement/Signature Page

This area contains a signed statement formally recognizing and adopting your EOP. It gives both the authority and the responsibility to facility staff to perform their tasks before, during, or after an incident. It should be signed by the administrator or another authorized official.

PROMULGATION STATEMENT

The Board of Directors of the Southwest Missouri Emergency Services Organization, in conjunction with the Region D Emergency Services Organizations developed an emergency operations plan that will enhance their emergency response capability. This document is the result of that effort.

It is designed to promote the coordination of regional emergency services and the use of available resources to minimize the effects of a major disaster (natural or otherwise) on life and property of the citizens of the region and state of Missouri. It also incorporates the principles and processes of the National Incident Management System (NIMS) and the Incident Command System (ICS) while working towards the concepts of the Community Planning Guidance 101.

This plan, when used properly and updated appropriately; can assist local and regional government officials in responding to and recovering from the effects of disasters. This plan and its' provisions will become official when it has been signed and dated below by the concurring Board of Directors.

SMESO Chairman

Date

SMESO Co-Chairman

Date

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

Approval and Implementation Page

The approval and implementation page introduces the plan and outlines its applicability, and indicates that it supersedes all previous plans. It includes a delegation of authority for specific modifications that can be made to the plan and by whom they can be made without the administrator's signature. It also includes a date and should be signed by the authorized administrator.

APPROVAL AND IMPLEMENTATION

The Salt Lake County Emergency Operations Plan identifies and assigns disaster responsibilities for county personnel. It addresses the four goals identified in the National Strategy for Homeland Security:

- Prevent and disrupt terrorist attacks
- Protect the American people, critical infrastructure, and key resources
- Respond to and recover from incidents that do occur
- Continue to strengthen the foundation to ensure long-term success

By integrating planning efforts in those four areas, Salt Lake County can produce an effective emergency management and homeland security program.

This plan is designed to comply with all applicable Salt Lake County regulations and provides the policies and procedures to be followed in response to emergencies, disasters and terrorism events and was developed to meet the requirements of the National Response Framework (NRF) and the National Incident Management System (NIMS). This plan supersedes all previous plans.

Specific modifications of the plan can be made by Salt Lake County Emergency Management without the senior official's signature.

I acknowledge that I, or a representative have reviewed this plan and agree to the tasks and responsibilities assigned herein. I also agree if necessary to upgrade this Emergency Operations Plan as it relates to responsibilities on an annual basis and submit any changes to Salt Lake County Emergency Management for their annual review and updates.

| | |
|-----------------------|---------------|
| _____ Name / Title | _____ Date |
| _____ Name / Title | _____ Date |

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

Record of Revisions

Each update or change to the plan should be tracked. The record of changes, usually in a table, contains a change number, date of the change, the name of the person who made the change, and a summary of the change.



HSE – Emergency Management
Emergency Response Plan
HSE-PLAN-0031

REVISION HISTORY

| DCR # | Revision | Date | Summary of Changes | Checked By |
|-------------------------|----------|------------|---|--------------------------------|
| 696554 | 14 | 2016-09-29 | <ul style="list-style-type: none"> Moved Roles and Responsibilities to HSE-BUSPROC-0002, other minor revisions. | ██████ |
| 696554 | 13 | 2015-06-10 | <ul style="list-style-type: none"> Updated CEO and VP, Pipeline Operations and Engineering removing COO | ██████ |
| 696554 | 12 | 2014-11-09 | <ul style="list-style-type: none"> Updated RACI | ██████ |
| 696554 | 11 | 2014-10-23 | <ul style="list-style-type: none"> Include post incident review 2.10.1 | ██████ |
| 696554 | 10 | 2014-05-13 | <ul style="list-style-type: none"> Under checklist for Executive changed #3 to read "Maintain your position log" | ██████ |
| 696554 | 09 | 2013-12-11 | <ul style="list-style-type: none"> Adding Roles and Responsibility for the Executive Changes to Emergency Management Personnel Diagram Deleted ICS forms Area ERPs: Edson moved from Whitecourt ERP to Morinville ERP Maps: Added Tioga maps | ██████ |
| 696554 | 08 | 2013-03-15 | <ul style="list-style-type: none"> Added Financial Approval Process to Roles & Responsibilities Added Doc Unit Leader email account info, and instructions to ask for documentation, to Roles & Responsibilities Updated HR/Claims Coordinator position to include immediate notification of family members if an employee is injured Revised Planning P (Section 2) to align with 6 steps Updated roles and responsibilities for HS&S Coord, Ops Section Coord, HR/Claims Unit, Public Information Coord, and Public Information Coord Assistant Updated Pentane MSDS Fact Sheet | ████████████████████ ██████ |
| HSE-5 HSE-7 HSE-8 | | | <ul style="list-style-type: none"> Made Area Specific Sections 8-15 into separate Area ERPs Moved Supplies and Equipment into the Area ERPs Added a Calgary ERP and Eden Prairie ERP | |

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

Record of Distribution

The record of distribution indicates the title(s) and the name(s) of the people receiving the plan, the agency to which the recipient belongs, the date of delivery, and the number of copies delivered.

Sutter County Emergency Operations Plan

Distribution List

County of Sutter

Board of Supervisors – Each (SC, HC)
Agricultural Commissioner (SC)
Assessor (SC)
Auditor – Controller (SC)
Child Support Services (SC)
Community Services (SC, HC)
- Director
- Office of Emergency Management
County Administrative Office (SC, HC)
- County Administrative Officer
- Asst County Administrative Officer
- Public Information Officer
- Public Copy
Clerk-Recorder (SC)
County Counsel (SC)
District Attorney (SC)
Human Resources (SC)
- Director
- Risk Management
Human Services (SC)

Contiguous Operational Areas (SC, HC)

Butte County OEM
Colusa County OES
Placer County OEM
Sacramento County OES
Yolo County OES
Yuba County OEM

Special Districts (SC)

Levee District 1
Levee District 9
Reclamation District 70
Reclamation District 1000
Reclamation 1001
Reclamation District 1500
Reclamation District 1660
Sutter Community Services District
Meridian Fire Protection District
Sutter Basin Fire Protection District
Yuba City Unified School District

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

Table of Contents

The table of contents is a logically ordered, clearly identified layout of the major sections and subsections of the plan that will make finding information within the plan easier.

TABLE OF CONTENTS

BASIC PLAN

- ESF 1 Transportation
- ESF 2 Communications
- ESF 3 Public Works & Engineering
- ESF 4 Firefighting
- ESF 5 Emergency Management
- ESF 6 Mass Care & Human Services
- ESF 7 Resource Support
- ESF 8 Public Health & Medical Services
- ESF 9 Search & Rescue
- ESF 10 Hazardous Materials Emergency Response
- ESF 11 Agriculture & Natural Resources
- ESF 12 Energy and Utilities
- ESF 13 Public Safety, Law Enforcement, & Security
- ESF 14 Long-Term Recovery & Mitigation
- ESF 15 Public Affairs
- ESF 16 Hazard Mitigation
- ESF 17 Animal Services

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Introductory Material

All Hazards Approach

Note that this plan does not list specific hazards; just specific FUNCTIONS. (ESF= Emergency Support Functions)

TABLE OF CONTENTS

| |
|---|
| BASIC PLAN |
| ESF 1 Transportation |
| ESF 2 Communications |
| ESF 3 Public Works & Engineering |
| ESF 4 Firefighting |
| ESF 5 Emergency Management |
| ESF 6 Mass Care & Human Services |
| ESF 7 Resource Support |
| ESF 8 Public Health & Medical Services |
| ESF 9 Search & Rescue |
| ESF 10 Hazardous Materials Emergency Response |
| ESF 11 Agriculture & Natural Resources |
| ESF 12 Energy and Utilities |
| ESF 13 Public Safety, Law Enforcement, & Security |
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| ESF 15 Public Affairs |
| ESF 16 Hazard Mitigation |
| ESF 17 Animal Services |

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Purpose and Situation Overview

Purpose

The purpose sets the foundation for the rest of the EOP. The Basic Plan's purpose is a general statement of what the EOP is meant to do. The statement should be supported by a brief synopsis of the Basic Plan and annexes.

PURPOSE

This Ramsey County Emergency Operations Plan (RCEOP) is a guide to how Ramsey County and our communities manage major emergencies that threaten health, safety, property and resources. The plan also provides information on how the county will manage major emergencies that threaten county functions, services and operations; and on the strategic efforts that are undertaken by each of the municipalities who adopt this plan. It is a countywide document that will provide cohesive, coordinated, and cooperative interoperability among and between the municipal governments and the county. It is intended to capture specific authorities and best practices for managing incidents that range from the serious but purely local, to large scale catastrophic disasters, whether they be natural, technological, or human caused; accidental or intentional.

Any municipality that does not choose to adopt this plan as their municipal Emergency Operations Plan is required to develop their own plan and file copies of that plan with the Ramsey County Division of Emergency Management and Homeland Security. Currently, the cities of St. Paul, St. Anthony, Spring Lake Park, and Blain, and the University of Minnesota maintain separate plans. Statements of acceptance of this plan by the various municipal governments are attached to this document.

This plan is built upon scalable, flexible, and adaptable coordinating structures already in place across the county and state. A guiding principle of this plan is that, aside from specific processes detailed herein, all processes, procedures and protocols of the various municipalities and County agencies governing incident management and

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Purpose and Situation Overview

Situation Overview

The situation overview explains why the EOP is needed. The situation section covers areas such as:

- Threats and hazards that pose risk to your facility and would result in a need to use the plan
- Dependencies on parties outside your facility for critical resources (fire department, fuel company, food vendors, etc.)

BASIC SITUATION AND PLANNING ASSUMPTIONS

SITUATION

Ramsey County is approximately 170.2 square miles in size and is located in the southeast central "Metropolitan" portion of the State of Minnesota. It is bordered by Anoka County on the North; Washington County on the East; the Mississippi River and Dakota County on the South; and Hennepin County to the West. Ramsey County's largest city, St. Paul, is also the State Capitol.

The adjusted 2000 census population of Ramsey County is 511,035. The largest cities are St. Paul (the State Capitol) – population 287,151; Roseville – population 33,690; and Maplewood – population 34,947.

The county encompasses all of 16 municipalities: Arden Hills, Falcon Heights, Gem Lake, Lauderdale, Little Canada, Maplewood, Mounds View, New Brighton, North Oaks, North St. Paul, Roseville, St. Paul, Shoreview, Vadnais Heights, White Bear Lake, and White Bear Township. In addition, portions of the cities of Blaine, St. Anthony, and Spring Lake Park are within the county's borders. Those cities and the city of St. Paul maintain separate emergency plans and are not covered by this document.

There is a highly sophisticated transportation system in place including nearby Minneapolis – St. Paul International Airport and the St. Paul Downtown Airport (Holman Field), Amtrak passenger rail service, various railroad freight services, Interstates 94, 694, 494 and 35W and 35E, various U.S. Highways, and numerous State Highway Routes. A new "light rail" transportation system is under construction and should begin operations within a few years. There is also considerable boat and barge traffic on the Mississippi River and the lakes located within our borders.

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Concept of Operations

The Concept of Operations section explains in broad terms the facility's intent in regard to an operation. This section is designed to give an overall picture of how the facility will protect patients, staff and visitors. It should include:

- Identify those with authority to activate the plan (administrator, charge nurse, emergency preparedness director, etc.)
- Describe how plans take into account your facility's structure, patient needs, and communication methods of individuals with disabilities & others with access and functional needs.
- Identify other response and support agency plans that support the implementation of your plan (county EOP, MDH EOP, etc.)
- Explain the primary purpose of actions taken before an emergency is to prevent, protect from, and mitigate the impact on life or property.
- Explain that the primary purpose of actions taken during an emergency is to respond to the emergency and minimize its impact on life or property
- Explain that the primary purpose of actions taken after an emergency is to recover from its impact on life or property.

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Concept of Operations

CONCEPT OF OPERATIONS (CONOPS)

Ramsey County and all jurisdictions that adopt this plan also have adopted the National Incident Management System (NIMS) for the purpose of appropriate control and response to emergencies. The **concept** of operations for this plan is **in line with the National Response Framework (NRF) and involves *Leaning Forward*** to ensure situational awareness; a **Common Response Doctrine** and an understanding of **Specific Roles** countywide that aligns with the National Response Framework to ensure integration of activity; and understanding of for all involved in planning, response, recovery, and mitigation activities.

Plans must comply with the Americans with Disabilities Act, which requires that emergency policies be modified to enable people with disabilities to evacuate, use emergency transportation, stay in shelters, and participate in all emergency and disaster-related programs together with their service animals.

DOCUMENTS MAKING UP THE OVERALL RCEOP

In addition to this Basic Plan, the following documents provide more detailed information to assist practitioners in implementing the Plan:

Emergency Support Functions group resources and capabilities into functional areas that are most frequently needed in a multi-jurisdictional response (e.g., Transportation, Firefighting, Law Enforcement).

Support Annexes describe essential supporting aspects that are common to all incidents (e.g., Financial Management, Volunteer and Donations Management, Private-Sector Coordination).



Step 5: Plan Preparation, Review, & Approval

Basic Plan

Organization and Assignment of Responsibilities

Provide an overview of the roles and responsibilities of staff and community partners (first responders, counselors, etc.), and of organizational functions **during** all emergencies.

- Individuals the planning team may wish to include in this section of the plan are firefighters, administrators, nurses, cooks/dietary, bus drivers, social workers, support personnel, housekeeping, counselors, maintenance staff, etc.
- The following is an example of the type of information that would be included in the plan to describe the broad roles and responsibilities of nurses **during** all emergencies.
 - ✓ Direct patients and staff to shelter-in-place or to proceed to the evacuation area.
 - ✓ Track all patients and staff throughout the emergency.
 - ✓ Report missing patients or staff to the Incident Commander.
 - ✓ Provide medical treatment for injured patients and staff members

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Organization and Assignment of Responsibilities

VI. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

In most instances, the responsibilities of County, City, and Tribal nations departments, committees, etc. are embodied in the local charters and codes. Local laws also largely determine which department is assigned as lead agency for each ESF. Given these legal parameters and the tendency of people to react reflexively in the midst of a crisis

Produced by TriData, a division of
System Planning Corporation
May 2005

23

Coconino County, Arizona
Emergency Operations Plan

Basic Plan

situation, the County, cities, and Tribal approach to emergency management will be to emphasize the use of familiar systems and practices. By design this plan leverages the interdisciplinary skills and collective resources that are part of normal County, City, and Tribal government services and operations, and fuses the totality of these capabilities into an integrated organization that serves as a common and mutually supportive backbone for any emergency response. It also provides the County, cities, and tribal nations with a mechanism for accessing a more comprehensive network of external resources.

Thus, whenever an event taxes the capabilities and/or authority of a community in a manner that seriously challenges their ability to adequately cope with emergent demands and/or changes, there is an established means to readily obtain supplemental aid and assistance. Such forms of supplementary support are initially sought from other departments, designated support organizations, and the private sector within their own communities. If unmet needs are serious enough, this may be followed by requests from the communities for specific forms of aid from regional providers, and as a last resort from the state and federal governments.

In order to realize the potential of local capabilities and to achieve an economy of scale in integrating and applying resources, the County, City, and Tribal departments and support organizations are arranged in this Plan into thirteen ESFs. Due to the unique nature of Coconino County and their municipalities and the smaller scale of operations, the County has chosen to modify some of the standard 18 ESFs and reduce the number to 13 outlined below:

- ESF-1, Transportation
- ESF-2, Communications
- ESF-3, Public Works and Engineering
- ESF-4, Firefighting and Hazmat

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Direction, Control, and Coordination

Plan the framework for all direction, control, and coordination activities. Explains the following:

- The ICS structure used by the facility
 - Which positions will fill each ICS role
 - Example: The charge nurse will take on the role of Incident Commander
 - The lead medical tech will take on the role of Logistics Section Chief
- Show the relationship between your EOP and the broader community's emergency management system.
- Identify in your facility who has control of the equipment, resources, and supplies needed to support your EOP.

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Direction, Control, and Coordination

ESF ADMINISTRATION, DIRECTION, AND CONTROL

The County Director of Emergency Management and Homeland Security (EMHS) designates an **ESF Coordinator** for each area.

The ESF Coordinator has ongoing responsibility to ensure that the ESF documents and processes are valid and maintained. The major responsibilities of the ESF Coordinator are:

- Pre-incident planning and verification
- Maintain ongoing contract with ESF Primary and Support agencies
- Conduct periodic ESF meetings
- Coordinate efforts with corresponding private-sector organization
- Coordinate ESF activities relating incident planning and critical

The EMHS Director working with the **Emergency Management Council (EMC)** identifies a **Primary County Agency** and a **Primary Municipal Agency** who is responsible for the prevention, preparedness, response, recovery, and mitigation phases of incident management. The role of the Primary Agency is carried out through a unified command approach. The responsibilities of the Primary Agency include:

- Subject matter expertise
- Coordinate the ESF during activations
- Maintain ongoing contract with ESF support agencies
- Participate as necessary in creation of Incident Action Plan
- Provide staff as necessary to command post and/or EOC operations
- Notify and request assistance from support agencies

- Manage mission assignments and coordinate with support agencies
- Work with appropriate private-sector organizations to maximize use of all available resources
- Support and keep other ESFs informed of operational priorities and activities
- Execute contracts and procuring goods and services as needed

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Information Collection, Analysis, and Dissemination

This section addresses the role of information in the successful implementation of the activities that occur before, during, and after an emergency.

Types of information that may be helpful in the successful implementation of response activities before, during and after an emergency include:

- Before and during: weather reports, law enforcement notices, crime reports, outdoor warning sirens, traffic cameras, local news
- After: Mental health agency websites & hotlines, emergency management websites or call centers assisting in all aspects of recovery.

For each of the identified types of information, provide answers to the following questions

- What is the source of the information?
- Who analyzes and uses the information?
- How is the information collected and shared?
- What is the format for providing the information to those who will use it?
- When should the information be collected and shared?

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Training and Exercises

This section describes the critical training and exercise activities the facility will use in support of the plan. This includes core training objectives and frequency to ensure staff, volunteers, and community representatives understand roles, responsibilities, and expectations.

This section also establishes the expected frequency of exercises to be conducted by the facility. Content may be influenced based on specific requirements by CMS. Exercises should range from basic fire drills and shelter-in-place drills to full-scale community wide exercises that realistically portray a crisis and show the role the facility may take within the community.

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Training and Exercises

5-2.2: TRAINING ACTIVITY

5-2.2(A): NATIONAL LEVEL:

DHS/FEMA ensures that there are training standards for persons and agencies with a role in emergency response.

5-2.2(B): STATE LEVEL:

Minnesota's Division of Homeland Security and Emergency Management (HSEM) sets standards and requirements for emergency management programs and for emergency management personnel in the state.

5-2.2(C): LOCAL LEVEL:

RCEMHS appoints a training and exercise officer to create and conduct training of all levels for Ramsey County agencies, and to assist and coordinate training of all levels for the Jurisdictions. Each agency with a role in this plan maintains their own training officer(s); training calendars; and training records. Such information is available from the specific agency by written request.

5-2.3: EXERCISE ACTIVITY

5-2.3(A): NATIONAL LEVEL:

DHS develops and manages the National Exercise Schedule and the Homeland Security Exercise Evaluation Program to ensure that exercises meet standards and identified local needs.

5-2.3(B): STATE LEVEL:

HSEM works with DHS/FEMA to maintain the exercise calendar for Minnesota.

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Administration, Finance, and Logistics

This section covers general support requirements and the availability of services and support for all types of emergencies, as well as general policies for managing resources. It should identify and reference policies and procedures that exist outside the plan. This section should:

- Identify administrative controls (e.g.- overtime authority, budget and acquisition policies and procedures) and requirements that will be used to provide resource and expenditure accountability
- Briefly describe how the facility will maintain accurate logs/documentation of activities during an emergency.
- Briefly describe how vital records will be preserved and transferred (this may be contained in a COOP Annex)
- Identify general policies for keeping financial records, tracking resource needs, tracking the source and use of resources, acquiring ownership of resources, and compensating the owners of privately-owned resources (like buses or rental equipment).

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Plan Development and Maintenance

This section describes the overall approach to planning and the assignment of plan development and maintenance responsibilities. This section should:

- Describe the planning process, participants on the planning team, and how development and revision of different sections of the EOP are coordinated before an emergency.
- Assigns responsibility for the overall planning and coordination to a specific position or person
- Provides for the regular cycle of training, evaluating, reviewing, and updating of the EOP

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Authorities and References

This section provides the legal basis for emergency operations and activities, and includes

- List of laws, statutes, ordinances, executive orders, regulations and formal agreements to emergencies.
 - For your facilities, many of these will be the CMS or NFPA requirements.
- Provisions for the succession of decision-making authority and operational control to ensure that critical emergency functions can be performed throughout the disaster.

Step 5: Plan Preparation, Review, & Approval

Basic Plan

Authorities and References

AUTHORITIES AND STATUTES

- Robert T. Stafford Disaster Relief and Emergenc Assistance Act (PL 93-288) as amended
- U.S.C. 36 mandates that the American Red Cross provide disaster mass care (provide disaster "relief" and "mitigate suffering") as part of its mission.
- [Title II of the Americans with Disabilities Act \[ADA\] \(42 U.S.C\)](#) prohibits discrimination on the basis of disability in public services, programs, or activities
- [Title III of the ADA \(42 U.S.C\)](#) prohibits discrimination on the basis of disability in private services, programs, or activities
- [Minnesota Statutes 12A.08](#) – charges the Commissioner of Health with evaluation and assessment of facilities including nursing homes and mass care facilities; food safety, lodging and shelter; public swimming pools; community and other drinking water systems; and private drinking water supply wells in times of natural disaster.

Functional Annexes

Functional annexes focus on critical operational functions and the courses of action developed to carry them out. Your functional annexes should be based on the needs of your facility, and as situations or threats evolve, you may need to prepare additional or different annexes.

While each function should be described separately, it is important that many functions will occur consecutively. For example, you may implement a shelter-in-place annex while also issuing a missing resident annex.

Functions may build upon one another and overlap; it is not necessary to repeat a course of action in one functional annex if it appears in a second functional annex. For example, if an evacuation occurs and you have a Tracking Patients/Residents annex, you do not have to include the Tracking Patients/Residents in your evacuation annex.

Functional Annexes

Evacuation Annex

Plan your course of action to evacuate the facility

The planning team should consider the following when developing goals, objectives, and courses of action:

- How to safely move residents, staff, and visitors to designated assembly areas from outside areas, the dining area, and from individual rooms.
- How to evacuate when your primary evacuation route is unusable.
- How to evacuate residents who have access & functional needs.
- What medications, equipment, and records need to evacuate with you.

Lockdown/Security Annex

Plan your course of action to secure the facility and grounds during incidents that pose an immediate threat of violence in or around the facility. The primary objective of a lockdown is to quickly ensure all patients/residents, staff, and visitors are secured in rooms away from immediate danger.

The planning team should consider the following when developing goals, objectives, and courses of action:

- How to lock all exterior doors, and when to do so.
- How particular building characteristics (windows) may impact possible lockdown courses of action.
- What to do if the threat materializes within the facility.
- When to use different variations of a lockdown (outside activities are cancelled, doors are locked, visitors are limited or monitored closely) but all other operations continue as normal.

Functional Annexes

Shelter-In-Place Annex

Plan your course of action for when residents/patients, visitors, and staff are required to stay indoors, perhaps for an extended period of time, because it is safer inside the building than it is outside. The threat or hazard may dictate how you shelter in place (i.e.- chemical hazard may require rooms that can be sealed or without windows; or a weather shelter in the event of a tornado.

The planning team should consider the following when developing goals, objectives, and courses of action:

- What supplies will be needed to seal the room and to provide for the needs of the residents and staff
- How a shelter-in-place may affect individuals with access and functional needs, such as patients who require regular administration of medication.
- How to move residents when the primary route is unusable.

Accounting for All Persons Annex

Plan your course of action for accounting for the whereabouts and well-being of residents/patients, staff, and visitors, and identify those who may be missing.

The planning team should consider the following when developing goals, objectives, and courses of action:

- How staff will determine who is in attendance if an assembly/staging area is needed.
- What to do if a resident/patient, staff member, or visitor cannot be located.
- How staff will report to the assembly/staging supervisor.
- How and when residents/patients will be released from the assembly/staging area.

Functional Annexes

Communications Annex

Regardless of the emergency, you will need to communicate with:

- Staff
- Patients/Residents
- Visitors
- First Responders
- Media
- Loved Ones/Family Members

Your communications annex provides a guideline for how you will handle such communications.

Functional Annexes

Communications Annex

Different forms of communication



Functional Annexes

Communications Annex

How will you communicate with staff during an emergency?

How about residents/patients? How will you ensure they continually get the information they need?

If the media shows up or calls, who can talk to them and what can they say?

Functional Annexes

Transportation Annex

This annex details how you will transport your patients/residents if needed.

This annex will have information on where your keys are stored if you have vehicles, or how to contact buses or other means of transportation in an emergency.

You should also detail where the buses/vehicles should arrive, how they will be loaded, and where you expect they may go (and how to get there).

Thinking Outside the Box

Seldom will your emergencies align 100% with your plan. You need to learn to think on your feet in order to find contingencies when things are not going your way.

For instance:

1. What would you do if you need buses, and you are unable to obtain them?
2. How can you keep your residents/patients cool if you are unable to restore Air Conditioning on a hot day?
3. How can you quickly reach loved ones/family members if the phones are not working?
4. How can you ensure your facility gets food if your shelter-in-place lasts for a week?

Emergency Support Functions



Emergency Actions

Often, when preparing goals and objectives, you will begin to realize there are only really **two key actions** your facility takes during an emergency.

| Evacuate | Shelter-In-Place |
|---------------------------|------------------------|
| Fire | Tornado |
| Building Damage | Severe Thunderstorm |
| Long-term Utility Failure | Blizzard |
| Flood (Internal) | Ice Storm |
| HVAC Failure | Temperature Extremes |
| Internal HazMat Exposure | Epidemic |
| Gas Leak | Communications Failure |
| | Active Shooter |

Every Facility Should **Master** Their Evacuation & Shelter-In-Place Processes!!

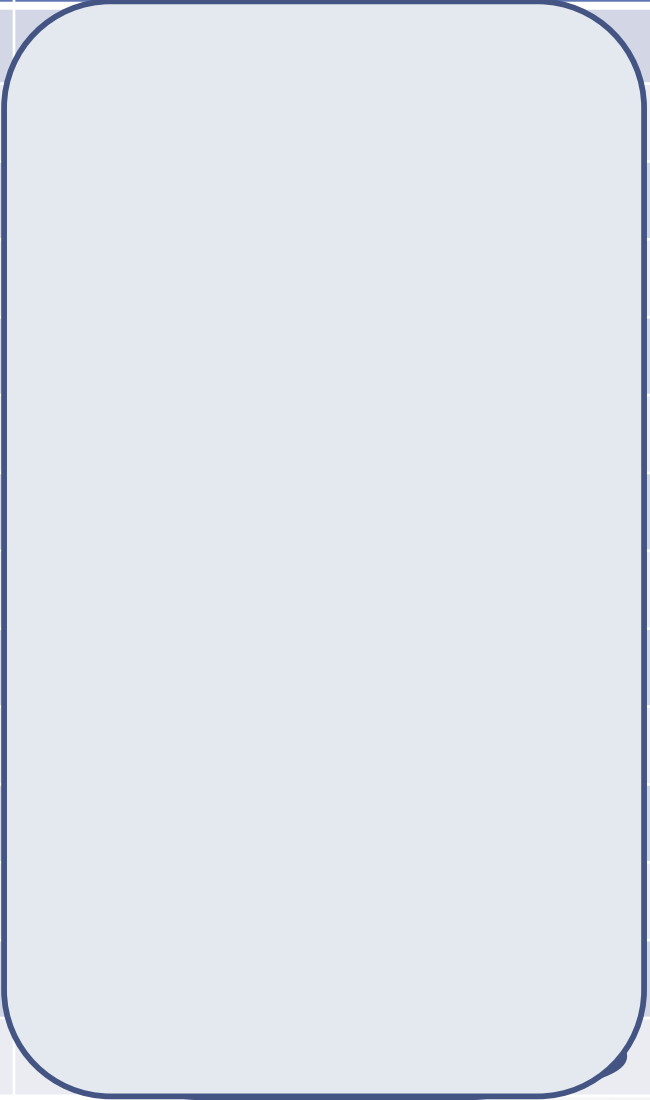
Emergency Actions

Another word for Key Actions is FUNCTIONS. Functions are actions you may utilize for various types of emergencies.

| Evacuate | Shelter-In-Place |
|---------------------------|------------------------|
| Fire | Tornado |
| Building Damage | Severe Thunderstorm |
| Long-term Utility Failure | Blizzard |
| Flood (Internal) | Ice Storm |
| HVAC Failure | Temperature Extremes |
| Internal HazMat Exposure | Epidemic |
| Gas Leak | Communications Failure |
| | Active Shooter |

Other common functions include the sharing of public information, obtaining resources, or restoring utilities.

Emergency Support Functions

| Hazard Based Plans | Functional Based Plans |
|--------------------|---|
| Tornado |  |
| Hail | |
| Winter Storm | |
| Active Shooter | |
| Flood | |
| Fire | |
| Missing Person | |
| Hazardous Material | |
| HVAC Failure | |
| High Winds | |
| Bomb Threat | |
| Mass Casualty | |
| Hostage Situation | |
| Extreme Heat | |

See page
14 & 15 in
your EOP
Workbook

Evaluating your Emergency Operations Plan



Evaluating Your EOP

- Evaluation of your plan should be an ongoing process
- Your plan should be evaluated when:
 - You have conducted an exercise
 - Your facility has gone through a real-world event
 - When new threats or hazards emerge
 - At least annually to ensure information in the plan remains current

Evaluating Your EOP

- Evaluate your plan after taking part in any exercise
- Part of the exercise process is evaluating the strengths & weaknesses in your plan
 - After the exercise, conduct a hotwash of participants to gather feedback on strengths and weaknesses
 - Update your plan based on lessons learned in your exercise.

Evaluating Your EOP

- Evaluate your plan when your facility has gone through a real-world event
- The best test of your plan will be when it is utilized in a real event.
 - Like an exercise, perform a hotwash once the situation has resolved itself.
 - Identify what went right and what went wrong, and update your plan accordingly.



Evaluating Your EOP

Conducting a Hotwash

Following an exercise or real-world event, gather those who played key roles in the event to provide feedback.

The Hotwash should be facilitated by a moderator, often someone who was not involved in the event.

The moderator will ask questions regarding the emergency, starting with what occurred before the emergency, the response during the emergency, and the recovery of the emergency.

Evaluating Your EOP

- Evaluate your plan after new threats or hazards emerge.
 - There are always new threats, examples would be:
 - Cybersecurity
 - A new manufacturing facility being erected near your facility.
 - An emerging outbreak, such as Ebola or H1N1

When you recognize a new threat, re-evaluate your plan to ensure you can deal with the threat(s) accordingly.

Evaluating Your EOP

- Evaluate your plan at least once a year to ensure the plan is current.
- Utilize crosswalks to ensure your plan has all of the CMS requirements met.

| CMS Emergency Preparedness Conditions of Participation Language | CMS Emergency Preparedness Conditions of Participation Reference | Accreditation Association for Ambulatory Health Care (AAAHC) www.aaahc.org | American Association for Accreditation of Ambulatory Surgery Facilities www.aaasf.org |
|---|--|---|--|
| October 2016 | Part 416.54 | 2016 | Version 14.4 February 2016 |
| Require both an emergency preparedness program and an emergency preparedness plan | 416.54 | Chapter 7 Subchapter II Standard E - Infection Prevention and Control and Safety | 400.20 General Safety in the Facility -Emergency Protocols 400.020.010 400.020.045 400.020.055 |
| Comply with all applicable Federal, State and local emergency preparedness requirements. The emergency plan must be reviewed and updated at least annually. | 416.54 | | |
| The emergency plan must be based on and include a documented facility based and community based risk assessment utilizing an all hazards approach | 416.54 (a)(1) | | |
| The emergency plan includes strategies for addressing emergency events identified by the risk assessment. | 416.54 (a) (2) | | |
| The emergency plan must address the patient population including the types of services that the facility would be able to provide in an emergency; continuity of operations, including delegations of authority and succession plans | 416.54 (a) (3) | | |
| Have a process for ensuring cooperation and collaboration with local, tribal, regional, state, or Federal emergency preparedness officials' efforts to maintain an integrated response during a disaster or emergency situation, including documentation of the facility efforts to contact such officials and, when applicable, its participation in collaborative and cooperative planning efforts. | 416.54 (a) (4) | | |

Evaluating Your EOP

Love Thy Neighbor

Have neighboring or similar facilities review your plan and give you feedback.

Do the same type of review for them.

This is called a **PEER Review**.



Recovery Planning

An often overlooked but very vital role in your EOP is planning for Recovery.

Your plan should include how to return your facility to normal operations.

Include an Emergency Support Function for Recovery.

Recovery Planning

Your Recovery Plan should include:

- Who will inspect the facility and give the OK to return.
- Who will coordinate the return of your residents/patients?
- Who makes the decision when to return?

Online EOP Resources



A collection of online resources for disaster planning, including:

- One-on-one support from Technical Assistance Specialists
- A collection of preparedness material
- Links to exercise/evaluation resources

<https://asprtracie.hhs.gov/>

Online EOP Resources



Homeland Security Exercise & Evaluation Program (HSEEP) Toolkit

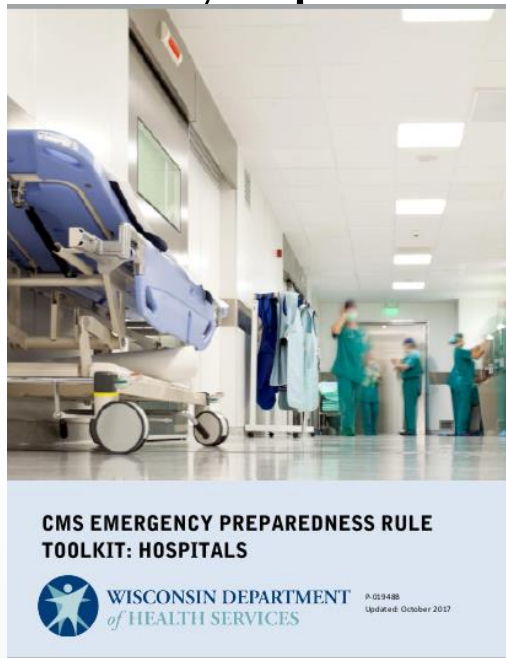
Online toolkit to assist with
development, documentation, and
delivering emergency exercises.

<https://preptoolkit.fema.gov/web/hseep-resources>

Online EOP Resources



CMS Emergency Preparedness Rule Toolkits Facility Specific Planning Templates



<https://www.dhs.wisconsin.gov/preparedness/toolkits.htm>

Online EOP Resources



CAHF Disaster Preparedness Program

Templates for:

- Plans
- Exercises
- Procedures

INCIDENT RESPONSE GUIDE
UTILITY FAILURE



UTILITY FAILURE

| MISSION | |
|---|---|
| To safely manage resident care through effective and efficient nursing home operations during the loss of a major utility with the facility. | |
| DIRECTIONS | |
| Read this entire response guide and use as a checklist to ensure tasks are addressed and completed. For each response period, all activated IMT positions should refer to their Job Action Sheet for additional actions. Each IRG is intended to be a starting point and not all inclusive. Customize to your facility. <i>Note: Section duties and responsibilities remain the responsibility of the Incident Commander unless delegated.</i> | |
| OBJECTIVES | |
| <input type="checkbox"/> | Identify extent of outage and consider evacuation. |
| <input type="checkbox"/> | Maintain resident care capabilities. |
| <input type="checkbox"/> | Minimize impact on nursing home operations and clinical services. |
| <input type="checkbox"/> | Communicate the situation status to residents, staff, and the public. |

| RAPID RESPONSE CHECKLIST | |
|--------------------------|---|
| <input type="checkbox"/> | Call 9-1-1 if the power outage causes or threatens a medical emergency (e.g., power is lost to a ventilator). |
| <input type="checkbox"/> | If the utility outage poses a risk to the safety of residents, staff or visitors, take actions to reduce/eliminate the threat without jeopardizing the safety of staff. |
| <input type="checkbox"/> | Report the outage to the appropriate utility company or repair vendor. |
| <input type="checkbox"/> | Activate facility's EOP and appoint a Facility Incident Commander (IC) if warranted. |
| <input type="checkbox"/> | Activate back-up power and/or emergency lighting if necessary. |
| <input type="checkbox"/> | Comfort and assess residents for signs of distress. |
| <input type="checkbox"/> | Account for all residents. |
| <input type="checkbox"/> | Notify appropriate state survey agency to report an unusual occurrence and activation of facility's EOP. |
| <input type="checkbox"/> | To the extent possible, mobilize emergency back-up power generators and necessary fuel for operation. Check with maintenance and security to ensure generators are operational. |
| <input type="checkbox"/> | Take all reasonable steps to protect food and water supplies and maintain a safe environment of care for residents and staff. |

<https://www.cahfdisasterprep.com/>

Online EOP Resources



Florida Health Care Association Emergency Preparedness

STAYING CONNECTED

Links to national & state information sources disaster news and updates.

PLANNING & RESPONSE

Tools & resources to improve all-hazards preparedness planning, as well as information to assist in executing a response.

TRAINING & EXERCISES

Resources in this section focus on training & exercise, critical to preparedness.

DISASTER RECOVERY

This section includes information and resources to help address disaster recovery.

<https://www.ltcprepare.org/>

Online EOP Resources



Emergency Preparedness Rule
Go straight to the source for templates & checklists

Templates

FAQ's

Trainings

Guidance

UPDATES

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Emergency-Prep-Rule.html/>

Online EOP Resources



Missouri Hospital Association Emergency Preparedness

Packed with information

Includes on-demand education on the CMS preparedness rule, hazard-specific resources, and links to online training sites.

<https://web.mhanet.com/emergency-preparedness.aspx>

Online EOP Resources



Kansas Hospital Association
Hospital Emergency Preparedness Program

CMS Info
Links to Crosswalk
Link to Emergency Preparedness Resources

[http://www.kha-
net.org/criticalissues/hospitalpreparednessprogram/](http://www.kha-net.org/criticalissues/hospitalpreparednessprogram/)



Contact Midwest Hazard Solutions with questions and/or concerns regarding your EOP and we'll do our best to answer them.

Please e-mail and allow up to 72 hours for a response.

rholbeck@midwesthazardsolutions.com



Feedback Forms