DISASTER EMERGENCY REDINESS PLAN

Types of disasters that could initiate the emergency disaster plan:

- 1. Fire
- 2. Flood
- 3. Tornado
- 4. Hurricane
- 5. Infectious Disease Outbreak
- 6. Other Types of Disasters:

Chemical Emergencies, Dam Failure, Earthquake, Hazardous Material, Heat, Landslide, Critical Equipment Failure, Nuclear Power Plant Emergency, Winter Storm, Weapons of Mass Destruction Events, and Acts of Terrorism.

FIRE

- 1) Remain calm to avoid panic among family members.
- 2) Evaluate safest means of escape from the home.
- 3) Evacuate all members of the house quickly and safely.
- 4) Check to be sure each person is accounted for that lives in the home.
- 5) One parent will remain with the children outside the home at all times, to assure the children's ongoing safety. (Remain in a safe location, free of traffic and fire).
- 6) As quickly as possible contact the local fire department or 911.
- 7) Contact the Guiding Light Child Placement Staff or the local branch office during business hours, and Janelle Holland after hours, as soon as possible. M F/G 4100.3
- 8) In the event a foster child has suffered serious mental or physical injury, immediately initiate the necessary care plan as outlined in emergency services. The foster child's Managing Conservator must be contacted within a 24 hour period of time from the time the incident is reported to GUIDING LIGHT.
- 9) An incident report must also be completed and turned in to the Guiding Light office within 24 hours.

Fire Prevention & Safety:

Each home maintains the updated information on their specific DEP plans:

Number of Smoke Detectors Number of Fire Extinguishers

Location of Fire Extinguishers

The safety of all is the most important thing, and the fire extinguisher will only be used if those in the home are trained in its use and can recognize and assess if the fire can be extinguished safely or if immediate evacuation in necessary.

Other precautions the foster families will take are as follows:

- Check windows regularly to ensure they open easily
- Test smoke detectors monthly
- Never disable a smoke detector when cooking, or remove batteries without replacing immediately
- Maintain a collapsible escape ladder if the home does not have fire escapes and is on the second floor or higher
- Escape through one of the planned routes posted on the Fire Escape Plan
- Exiting through smoke requires those to crawl lowon the floor and cover faces
- If escaping through a closed door, feeling the door and handle to determine if there is fire on the other side

- Activate a fire alarm system (if available) to notify other residents of the home/building, or yell/knock (if safe) to notify other of the fire/smoke
- Remain outside of the home until notified by the fire department that it is safe to re-enter

In case of a fire, exit the home and go to the identified meeting location outside the home. (emergency evacuation route is posted in home):

Severe Weather

Should utilities be disrupted, or damage occurs to the property, follow the plans for sheltering in place or evacuation. Consult with your Case Manager or staff to help determine a plan.

If damaging windstorms, rain, hurricanes or tornadoes have been forecasted, take the following precautions:

- Continuously monitor the storm by tuning in to the radio, TV or internet for information
- Anchor outdoor objects and property that could blowaway
- Plan to be in a safe location at the time the storm begins
- If you have a vehicle, make sure the gas tank is full in case you need to evacuate
- Reviewthe contents of your Emergency Kit to ensure you have a flashlight, batteries, ample food, first aid items, etc.

Additional things we can do to prepare are Once a storm has begun:

- Seek immediate shelter
- Stay away from windows
- Stay away from downed power lines

In case of tornado:

- Stay away from all windows, doors and outside wall
- See shelter in the basement or interior place in the lowest level of the building
- Get under something sturdy, lie face down, knees under you. And cover the back of your head with your hands
- If you are outside, lie down flat in a ditch, lowlying area or ravine

Home Specific DEP Plans will identify and rehearse the location of the home that is safe to shelter in place in case of a severe storm or tornado. In case of a hurricane and mandatory evacuations, the home identifies an evacuation plan and route on the home specific DEP.

Flood

- 1) Should severe rains continue to an extent that serious flooding is suspected, the Foster Parents should keep their radios tuned to the local stations for up to date forecasts.
- If it is indicated that the chance of flooding is imminent, foster parents should have all children board the vehicles for evacuation.
- 3) Foster Parents/Staff should load all medications and records (med logs, Medicaid Cards, SS card)
- 4) Turn off all lights & unplug all electrical appliances (if time permits)
- 5) Safely transport all children to higher ground.
- 6) Should the entire vicinity be in danger of flooding, children should be transported to a safe place at the foster parent's discretion (Red Cross Shelter, Hotel).
- 7) GUIDING LIGHT office should be notified immediately upon reaching your safe destination.

- 8) Flooding can occur as a result of rainstorms, hurricane storm surges or damage to an interior water line or pipe. Flooding may happen quickly and without warning, or it may develop more slowly with some warning. The risk of flooding to each foster home and community is identified in each foster home DEP plan. In case of flooding:
- Move to higher ground
- Do not walk or drive through moving water
- If you must walk through water, use a stick to test the depth and to assist with your balance and stability.
- Flood water can be contaminated with oil, debris and sewage waste. If you encounter flood waters, you must clean and disinfect everything that got wet.
- Abandon your vehicle if necessary.

If your home is damaged from water or flooding, a plan for recovery and cleaning must be developed. Contact your Case Manager if the issue is significant and requires evacuation or a period of extensive repairs. If isolated water damage occurs as a result of a burst pipe or damage within your home (and is not a community issue) you may make repairs in a timely fashion to not disrupt the comfort and quality of home life. The foster homes will communicate their plan for recovery and cleaning.

Tornado

- 1) In case of tornado watches declared by the National Weather Service (NWS), Foster Parents should utilize the public information systems (News alerts, Emergency Broadcast System) to monitor the weather.
- All children should be advised to remain indoors and away from windows. If the NWS declares a tornado
 warning, all children should be gathered in a safe location and remain seated (preferably in an interior room
 without windows or glass).
- 3) All doors to bedrooms, bathrooms, utility rooms, etc., should be closed.

Hurricane

- 1) When local authorities issue a mandate to evacuate any GUIDING LIGHT offices in the evacuation zone will be closed prior to or on the same day as the evacuation mandate.
- 2) Families with DFPS children in their care are required to evacuate when local authorities issue a mandate to evacuate.
- 3) If the family refuses to evacuate when authorities issue the mandatory evacuation, the DFPS hotline will be called, and GUIDING LIGHT will consult with CPS/DFPS/RCCL to take whatever action is recommended. A corrective action plan will be required because they put wards of the State in danger.

Procedures for Relocating Children (In the even of an emergency requiring evacuation or quarantine, the provider is responsible for maintaining the safety and placement of all Children in its care.

- 1) Procedures for relocating children to a designated safe area or alternate shelter including specific procedures for evacuating children who are under 24 months of age, who have limited mobility, or who otherwise may need assistance in an emergency, such as children who have mental, visual, or hearing impairment, or a medical condition that requires assistance arrangements for the adequate provision of food, shelter, transportation, medication, supplies, and emergency equipment.
- 2) Each foster parent will identify the specific plan for relocating the children in their home based on their specific needs. Each home will identify prior to verification and each time the DEP is updated the relocation plan.
- 3) Each home will ensure they have an identified plan to ensure adequate supply of food, medications, and supplies are on hand. Depending on the children placed in their home and the transportation needs of each child and transportation of medication and equipment. All homes will identify the equipment needs of the children placed in their home and ensure the equipment is made available to the children with special needs and medical conditions.

- 4) If the PMN homes cannot safely identify a relocation plan due to the high acuity of the PMN child placed in their home such as those requiring EMS transport, hospital beds, and equipment that cannot be maintained in a temporary relocation setting, then the home will contact EMS for the child to be relocated to a nearby hospital during the evacuation.
- 5) All homes have a list of local first responder phone numbers and contact information on their DEP plan they have access to in their homes to notify in the event of any emergency.
- 6) All homes identify in their home specific DEP plans the identified choice of safe relocation address and will communicate during the relocation the address and contact for the alternative relocation address.
- 7) Post-Disaster Needs: The foster family will ensure the children have access to emergency power, food, water, and transportation. In the event the family needs help with anything they must communicate their needs to Guiding Light as soon as possible on the emergency contact numbers.
- 8) Plans to return after an evacuation must be communicated timely by the foster family to Guiding Light staff.

PMN children would require for someone to keep them calm and safe during an evacuation. They would need assistance in evacuating the home due to their medical conditions and limited mobility. Evacuation and relocation is the responsibility of the foster parents due to their medical condition and lack of understanding of what's going on. All vehicles will be full of fuel prior to the evacuation to ensure adequate resources are available in the event the family needs to evacuate. Generators or Welders (used as a resource for power). If the home decides to purchase one they will be full on fuel to ensure the foster home has enough fuel in vehicles to evacuate. Generators must only be used outside the home to ensure they are being used with proper ventilation. The foster family will ensure they are educated on the capacity of the alternate power source they have selected to ensure with the DME supply company it is an ample power source to supply medical equipment for a specified period of time. Surge protectors must be used when using an alternate power source in the even of an emergency to avoid any potential damage to any of the child's equipment with power surges etc. The home will ensure the power source they have on hand has adequate fuel available. Children 24 months of age/non mobile-Car seats and other devices such as strollers for transporting small children under the age of 24 months should be packed in the evacuation vehicle when transporting this population. Children who have special health care or developmental needs such as limited mobility, mental, visual or hearing impairments will continue to need any specialized equipment such as ambulatory devices (wheelchairs, walkers, hearing aid/batteries, eyeglasses etc.) in an emergency. Caregivers will need to ensure that any children in this population continue to have access to the equipment normally used in the event of an evacuation. Freezer/Refrigerator Bags: Families need to purchase insulated bags designed to put food from the refrigerator/freezer and leave in their homes that will ensure that the contents will not leak to ruination of the appliance. The foster parents will notate the time the food is placed in the refrigerated bags or coolers and ensure the food is discarded once past the time frame it has been out of the refrigerator or freezer.

Sheltering in Place:

Many emergencies do not require evacuation but may result in being isolated at home without basic services. In the event of an emergency that reduces basic services, we will contact our Case Manager to help determine the level of safety and to ensure that basic supplies are in place in order to remain in our home.

If we have no utilities (electricity or gas), the foster family will identify a plan in place to control the temperature: (this may present a need to relocate and they will communicate this to the emergency contact if they need to relocate) If our bathroom is not functioning this may present a need to relocate

This plan will detail procedures for various emergency situations, but the most significant risks for the community we live in are:

Fos	ter Homes should have the following items for use in emergency situations:
	☐ First aid kit
	☐ Flashlight &extra batteries
	☐ Fire extinguisher
	☐ Basic hygiene items (including hand sanitizer)
	☐ Pen and paper
	☐ Container for the supplies
	☐ Portable hand crank or battery powered radio
	☐ A copy of this plan
Add	litionally, you should maintain:
	\square 3-day supply of water and non-perishable food (Food and water should be used and replaced every six months.)
	☐ Manual can opener
	☐ Disposable dishes and utensils
	☐ A five-day supply of medications
	☐ Supplies of medical supplies or equipment if applicable (oxygen, syringes, tubing etc.)
	□ Extra blankets
	☐ Clean, weather appropriate clothing
	☐ Important personal documents, identification
	☐ Emergency supply of cash (should ATMs and credit cards not work due to power outage)
In case	of evacuation, we will make every attempt to bring the following items with us:
	☐ Medications
	\square MAR
	☐ Medical records & other important personal documents
	☐ A copy of this plan, and/or a list of emergency contact numbers
	☐ Comfort items for children

Basic Disaster and Emergency Preparation Information: First aid kit, medication box, medication administration records (MAR), and life sustaining medical equipment will be packed along with the other essential items needed for the evacuation to ensure supplies are available while away from the home. All medications used by children in care will be taken in a locked box. Medication logs will be maintain in a binder for each child to ensure proper documentation, since administering medication must continue to be logged daily. Refrigerated medications would have to be stored in portable cooling devices such as coolers in transport until safety and shelter is sought. Primary Medical Needs Childrenwho are in care and who require specialized medical or ambulatory equipment must continue receiving proper medical care. Specialized equipment that requires power when the power goes out or if they are being transported to safety already have battery backups that last for an extended/identified period of time. In the event the specified time lapses and the equipment no longer has power, Caregivers would be required to seek hospital services and do so to ensure no lapse in power. Caregivers are required to ensure all regularly used, necessary medical equipment is carried with the family in the vehicle during an evacuation.(i.e. nebulizers, wheelchairs, walkers). Foster parents will stay in close contact with the agency to confirm prior, during, and after the emergency that the child are safe and all their needs are being met. Prepared for the evacuation is at minimum, the following items: • at least a two-week supply of medication in its container (if applicable); • other medical supplies and equipment (such as first aid kit, glasses, face masks, gloves, etc.); • important paperwork (such as binders with medication administration records) DFPS Placement Paperwork if medical care must be sought during the evacuation. • contact information is listed in the front of each binder to ensure the family can reach out to the agency or DFPS during the evacuation. Emergency supplies to last the family at least one week. Including supplies such as non-perishable and canned food, water, medicine, first aid supplies, batteries, flashlights, diapers, and a battery-powered radio for information on local emergency services. The family will stay prepared by also looking online at the Red Cross's disaster preparedness website, www.recross.org/prepare. More information on preparing for a Call 2-1-1 to find out information about shelters as well as emergency and disaster related-related services.

The failure of critical equipment may create emergency situations or be the result of a natural or man-made disaster (flood, fire, tornado, hurricane etc.) Critical equipment is defined as any system or equipment that has lives depending on it. This may include power/energy systems, medical equipment, HVAC systems etc. Homes should assess critical equipment in their home and take precautions to ensure it is protected and maintained during a disaster or have a backup plan to evacuate to a facility that can maintain critical equipment during the disaster/emergency period. Families should consider, "What would happen if this component shut down (for a minute, an hour, a day, a week)? Is there a back-up system? What if it failed? Can the system or home function without it?" Families should identify contractors or service providers who have indepth expertise and experience with the details of the home's HVAC systems and the available alternatives should a failure occur. Contact information will be maintained in this plan.

In cases where there is advanced warning of a disaster, cell phones and electronic equipment may be charged preparing for prolonged outages, generators secured and fuel maintained, electronic and data devices unplugged prior to impact to be protected from power surges, and items moved to higher/dry/protected areas of the home.

Critical equipment in each home is identified in the foster home DEP to identify on how they will prepare and respond to critical equipment failure. Homes that will utilize generators for temporary power will only utilize generators outside the home and never inside the home, garages or any area that is not completely outside with adequate outdoor ventilation. The home will have to maintain the generator outside the home and utilize heavy duty extension cords to run necessary equipment for a short period of time until a permanent plan can be identified. Some homes are equipped with commercial generators that are set up professionally by companies that are a professionally installed back up generator to automatically turn on in the event of a power outage and these professional systems or solar power systems can be used at any time. These systems are also checked an inspected by the Fire Marshall during home inspections completed every two years.

Infectious Disease Outbreak

Prevent spread of a communicable disease such as COVID-19 (a respiratory virus). This may include the suspension of non-essential work, travel, suspensions of large gatherings (suggestions of 10 people), social distancing, not visiting anyone for a non-essential purpose, virtual meetings for face to face visits may be required. This will change based on federal and state guidelines (GUIDING LIGHT will keep Policy, Staff, and Foster Parents updated).

- 1) Follow all CDC (Centers for Disease Control and Prevention) recommendations on Travel Health Notices (found at https://wwwnc.cdc.gov/travel/notices) regarding staff and child travel and subsequent quarantine.
- 2) All offices Main and any applicable branches will have a sign posted instructing visitors not to visit if they are ill or have symptoms of a respiratory illness.
- 3) Identify a list of key contacts at your local and state health departments.
 - a. GUIDING LIGHT uses the following contacts in order to receive the most accurate information regarding the outbreak including, but not limited to: DFPS, CDC, and COSA.gov
 - b. Maintain ongoing communication with your local public health department to facilitate access to relevant information before and during an outbreak.
 - c. Monitor local and state public health sources to understand outbreak activity in your community (the CDC website https://www.cdc.gov/ and Department of State Health Services website https://dshs.texas.gov/).
 - d. Be aware of temporary school closures and address how residents will be supervised when local gathering places may be closed for public safety.

- e. If there is transmission in the community, operations should also consult with public health authorities for additional guidance.
- 4) Branch Office Requirements (When Applicable: At this time there are no Branch Offices)

I. Cleaning and sanitization:

- a. High touch surfaces in common areas will be cleaned once per business day with CDC- approved cleaner for eliminating the COVID-19 virus by GUIDING LIGHT office staff or by cleaning crews.
- b. Common shared devices, including but not limited to:
- IT keyboards and mouse,
- desks,
- chairs,
- microwaves,
- coffee makers,
- door handles
- light switches
- and copiers should be cleaned by users, with disinfectant products immediately after using. GUIDING LIGHT will provide disinfectant products for common areas.
- c. Given that cleaning supplies are difficult to purchase, supplies provided by GUIDING LIGHT should always be kept in building areas. If you use them for your individual workstations, please return supplies promptly to the shared space for others to use. Do not take products provided by GUIDING LIGHT home.
- d. Staff will disinfect office space as they are leaving the office location. It is imperative that all above shared spaces listed above are cleaned at the end of every shift.

II. Social Distancing:

- a. Employees should stay at least six (6) feet from other people, and avoid congregating in common areas, such as break rooms and lunch areas.
- When having meals in the common areas, please clean the space after using it.
- b. Employee workspace will be arranged to provide either 6 feet of space or a physical barrier between coworkers. When offices need modification, the Executive Director/CPMS should submit recommendation for Executive Director approval.
- c. We encourage the use of phone or video conferences for meetings.
- If in-person meetings are held, social distance should be maintained. When the combination of room size and number of staff doesn't allow for 6 feet separation, then masks are required.
- In addition, when 10 or more persons are in a room together, everyone is required to wear a mask.
- Staff will self-monitor temperatures upon entering the office. Employees with a temperature 100° or higher will be sent home immediately and where possible, the employee's work area will be contained and cleaned.
- Cleaning after use of meeting space is expected to be conducted by the meeting organizer.
- d. Employees must wear masks in common areas such as a hallway, workroom, stairwell, elevator, breakroom, restroom, and especially when social distancing is not possible. GUIDING LIGHT has provided GUIDING LIGHT employee with one reusable cloth mask. Employees may use a mask of their own as long as it covers the mouth and nose.
- e. Masks are required when staff go to outside programs when performing GUIDING LIGHT duties in public.
- f. Flexible Working from home
- Office Space: when GUIDING LIGHT offices don't provide for social distancing standards, supervisors will work with staff and teams to provide flexible solutions.
- Personal: As we are facing challenging times employees are encouraged to discuss with their

- supervisor working from home needs and options for your position.
- g. Non-essential work travel (conference and meetings) should be avoided and will require director's approval.
- h. We encourage all staff to follow CDC guidelines for personal travel and consider country classification levels and restrictions on entry to the US.

III. Visitors

- a. Use of the GUIDING LIGHT offices and facilities by outside groups will be utilized based on the risk to the staff and outside groups to make sure the utilizations of the facility is safe and does not pose a risk to staff or visitors.
- b. There will be times when visitors (anyone who is not an GUIDING LIGHT employee or Board member) need to come to an GUIDING LIGHT property (family visitation, vendor, required meeting etc.). GUIDING LIGHT encourages all visitors to wear masks and disclose any potential direct exposure or refrain from visiting the GUIDING LIGHT offices if ill or experienced a direct exposure and are potentially a risk to others.
- c. Posters will be located in visitor's reception areas with information about safety protocols related to their visit.
- d. When corresponding with potential visitors, please include the message in Section VI, below.

IV. Symptoms:

All staff should continue to self-monitor for those COVID-19 related symptoms and contact your supervisor and stay home (work from home if possible) when exhibiting any of the following:

- Coughing
- Shortness of breath
- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

V. Complaints & EEO

a. Employees concerned about safety and coworker's compliance with the return to work guidelines may contact their supervisor, or Human Resources.

VI. Message for Visitor Correspondence

When you visit GUIDING LIGHT, please help us do well and stay well:

- Be prepared to have your temperature taken upon arrival—no temperatures over 100^{\square}
- Maintain 6-foot social distancing—otherwise, facemasks are required
- Facemasks are required for gatherings of ten people or more *We appreciate your understanding!*

5) Staff Requirements:

- a. Keep residents and employees informed. Offer to share information about available community resources including areas that provide free WI-FI for distance learning, where to get tested, any other requirements as recommended by CDC, information and referral networks, hotlines, etc.
- b. Describe what actions the facility is taking to protect them as information evolves and changes from government officials, including answering their questions and explaining what they can do to protect themselves and their fellow residents.

- c. Notifying via staff email or during a weekly meeting as soon as we are aware of any changes, from the Governor.
- d. Emailing Foster Parents with any changes.
- e. Discuss updates regarding Covid-19 every time staff and foster families meet face to face.
- f. When conducting face-to-face services either in-home or in offices, Staff should contact the Foster Parent by phone prior to in-person contact to inquire if there are currently any illnesses in the home or office. GUIDING LIGHT staff will conduct face to face either in the home or via a virtual system, or meeting on the porch where there is 6 feet distance.
- g. When planning for or at the time of a home visit, if a client or family member reports being sick, service providers and GUIDING LIGHT staff must plan for alternate arrangements to maintain continuity of services until all members of the household are well.
- h. To prevent stigma and discrimination, do not make exposure risk determinations based on race, ethnicity or country of origin.
- i. Ensure confidentiality of people with illness, including those confirmed to have COVID-19.
- j. Staff will hold themselves accountable, keep social distancing, not come to the office with a fever, and be mindful of other people when in the office.
- k. Self-check for fever before entering the office, wearing masks until the threat of the virus is completely gone, and/or the government says masks are not needed.
- 1. Plan for the possible need to report cases and transport persons with severe illness to medical facilities.
 - i. When Foster Parents report the infection status of the child, GUIDING LIGHT staff must complete the incident report to document the positive COVID test. .
 - ii. Abuse & Neglect Hotline will be notified within 24 hours as well as the CPS worker and supervisor, Residential Contracts and Residential Child Care Regulations.
 - iii. Guiding Light Medical Director, Case Manager, & Executive Director/CPMS will receive the email.
 - iv. If the child needs to be seen at the emergency room or with primary care physician, the Foster Parent would provide transportation.
 - v. If the child is seriously ill, Foster Parent would dial 911 and go to nearest hospital.
 - vi. An Incident Report will need to be completed with notification to the abuse/neglect hotline due to contracting a communicable disease if the child tests positive. If the foster parent or staff tests positive and exposes the child, then the hotline must be notified.
- vii. The COVID report will no longer be reported to the Local Health Authorities as the websites and links are no longer available for reporting. DFPS no longer has a DFPS COVID email to report. Only the incident report, review by medical professional and an incident report notifying all parties is needed.
- m. GUIDING LIGHT Staff must stay in close contact with your local jurisdiction regarding safety protocols to ensure a coordinated approach to service delivery if status or notification requirements change at any time.
- n. If it is believed that any of these decisions will have a detrimental effect for a child, youth or family, please elevate the concerns as appropriate in discussions on weekly meetings. These decisions will be on a case by case basis, ex: child returning from runaway status, going to parent-child visits
- o. If GUIDING LIGHT had to make a change in verification, or not take placements, any required changes will be provided to RCCL, DFPS & the Residential Contract Manager.

6) Foster Parent Requirements:

- a. Monitor children for symptoms that resemble those of a disease outbreak.
- b. Contact healthcare providers for children with fever or respiratory symptoms and follow medical advice; not all children will need to be seen by a health care provider.
- c. Follow distance learning guidelines from the TEA.
- d. Follow social distancing as recommended by the CDC.
- e. Have the kids stay close to home only be in small groups in order to lower the risk of infection.
- f. If self-quarantine is required, notify the GUIDING LIGHT CM and providing documentation from the medical professional of the requirement for quarantine.
- g. If kids run away:
 - i. Take temperature upon arrival.
 - ii. Monitor for symptoms.
 - iii. Have the child self-quarantine for 14 days if they are showing symptoms.
- 7) Intake requirements:

- a. Prior to admitting a child to a foster home:
 - Ask questions about relevant symptoms, potential contact with a person showing symptoms of a disease outbreak, and/or travel within 14 days to an area with significant community spread of a disease outbreak.
 - ii. Be aware of health conditions that would put the child at greater risk for getting seriously sick if they contract COVID-19 or any variations of the COVID-19. (refer to the following link for more information regarding COID-19, this can be found at https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html)
 - 1. Primary Medical Needs (PMN) Kids.
 - 2. People with chronic lung disease or moderate to severe asthma.
 - 3. People who have serious heart conditions.
 - 4. People who are immunocompromised.
 - a. Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications.
 - 5. People with severe obesity (body mass index [BMI] of 40 or higher).
 - 6. People with diabetes.
 - 7. People with chronic kidney disease undergoing dialysis.
 - 8. People with liver disease.
 - iii. It is at the Foster Parent's discretion whether they want to hold placements during a contagious outbreak.

8) Face-to-Face Requirements:

- a. If Face-to-face visits with children are not required to be in person due to an infectious pandemic and doctors order quarantine for health and safety precautions, **Monthly contacts are still required**, but contacts may need to be done through video conferencing.
- i. Video-conferencing is interpreted to mean communications through technology, such as FaceTime or Microsoft teams, and will be referred to as a "virtual contact".
- b. In order to decide whether to conduct an in-person face-to-face contact or use technology to conduct a virtual contact, the Case Manager should balance the safety of children while simultaneously taking efforts to reduce possible health risks to those children, their families and caretakers, and themselves.
- c. When in doubt, please consult your supervisor for the updated protocol as a pandemic can evolve on a daily basis.
- d. Examples of when an in-person face to face contact should be used include:
 - i. When there have been any previous noted issues or concerns around the safety or quality of care provided in the placement.
- e. If an in person face-to-face contact is required, the following should be done differently.

Prior to making a home visit, call the family and ask the following:

- i. Have you traveled out of state in the last two weeks?
- ii. Has anyone in the household tested positive for COVID-19?
- iii. Have you had contact with anyone who could have been exposed to COVID-19 in the last two weeks?
- iv. Do you have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?

If unable to make contact prior to making a home visit:

- v. Knock on the door and ask the above questions while standing at the door/on the porch and maintaining a distance of approximately six feet.
- vi. If the answer to any of the above listed questions is yes, remain outside of the residence and encourage the family to contact a medical provider.
- vii. Staff can assist them with making a call to 2-1-1.
- viii. Staff will provide family with guidance to reassure the family who may be nervous about having someone come into contact with them during this period.

- If the answer to all of the above-listed questions is no and both the Case Manager and family are comfortable and in agreement:
- ix. The Case Manager enters the home but maintains a six-foot distance from household members. (Visits may have to be on the porch. Have laptop or notepad in hand while you walk the premises, and then go back outside to review with the family in order not to touch anything.)
- x. Before the conclusion of the visit, discuss virtual contact options for future contacts during the health crisis, as needed.
- f. All monthly face-to-face contacts for children with primary medical needs or complex medical needs can be done with virtual contacts at the discretion of DFPS. All face-to-face visits must be made in person unless a variance is issued on a case by case purpose to complete the visit virtually.
- g. How to document a virtual contact: (Only permissible when a variance to complete a virtual contact is approved and justified due to potentially exposure and risk presented)
 - i. Virtual contacts should be documented as a face-to-face contact, not a telephone contact.
 - ii. In the body of the contact it should be documented what kind of system was used to do the visit. Example: Zoom, Skype, Facetime, or Teams Meeting.
- iii. Do not document the staff location as the location of the visit. In the narrative text field document that the contact was a virtual contact.

9.) If a child on your caseload is sick:

- a. Please continue to have the caregiver reach out to the appropriate medical professional and obtain medical care. There may be telehealth options and the medical professional will guide the caregiver with choices. If they are going to the emergency room, the foster parent can notify the Case Manager during business hours, or Janelle Holland if it is after hours, during holidays, or on the weekend.
- b. If the medical provider contacted says they will not see a sick child who is in DFPS conservatorship during the COVID-19 health crisis:
 - i. The Case Manager can reach out to the Well Being Specialist in your region for assistance or have the caregiver contact the Superior Member Help Line at 866-912-6283.
 - ii. For a severe illness, go to the emergency room or dial 911
- c. The Help Line is available 24/7 and has options for Spanish speakers.
- 10.) If a child on your caseload has medication issues requiring a doctor visit, such as psychotropic medications:
 - a. Contact the prescribing medical provider and discuss options.
 - b. There may be telehealth options or refill extensions available.
 - c. Follow the prescribing medical provider's guidance.
 - d. If the medical provider contacted says they cannot assist with medication issues during the COVID-19 health crisis, Case Manager can reach out to the Well Being Specialist in your region (link) for assistance or have the caregiver contact the Superior Member Help Line at 866-912-6283.
 - e. The Help Line is available 24/7 and has options for Spanish speakers.
 - f. Case Manager should recommend to the Foster Parent that they should try to refill prescriptions during the week so that they can reach primary care physician during business hours.

11.) Home Studies:

- a. GUIDING LIGHT staff will conduct Home Studies as recommended by the state.
- b. In cases of crisis they can be postponed or done virtually only when a variance is requested and approved.
- 12.) CPS meetings, court hearings, family visits, other CPS required mandates:
 - a. CPS will conduct visits at their discretion.
 - b. GUIDING LIGHT will follow all court ordered requirements.
 - c. May include virtual visits and contacts with biological parents.

- 13.) Any training that is due to expire will be conducted virtually through a live instructor until told otherwise per state or SSCC requirements. If any training cannot be conducted face to face due to mandated stipulations, the training will be conducted as soon as possible in person.
 - a. Ex: If FP has already gone through EBI then they can demonstrate the restraints virtually
 - b. If not, we must wait until social distancing is not required anymore.
 - c. Important thing is to teach the de-escalation to prevent need for restraints.
 - d. If uncertain of the requirements, please consult with the Executive Director/CPMS in your office.
- 14.) If the state requires visits in person and it would be detrimental to the child due to spread of a highly contagious disease, GUIDING LIGHT must complete a variance. Child Care Regulation (CCR) may approve a variance request including, but not limited to the following minimum standards that broadly apply to all foster homes:
 - 749.1251(a) regarding pre-placements visits of children into a foster home.
 - 749.1291(a) and (b) regarding face-to-face contact between the CPMS and children in foster care.
 - 749.2815(a)(1) regarding quarterly supervisory visits of the foster home.
 - 749.2817(a) regarding supervisory visits of a foster home where no children are placed.
- 15.) General Precautions:
 - a. Wash hands or use hand sanitizer before and after home or office visits in addition to washing hands frequently.
 - b. Avoid physical touch (e.g. shaking hands) with others.
 - c. Use social distancing:
 - 1. The practice of maintaining a greater than usual physical distance (such as six feet or more) from other people or of avoiding direct contact with people or objects in public places during the outbreak of a contagious disease in order to minimize exposure and reduce the transmission of infection.
 - d. Cover your nose and mouth with a tissue when you cough or sneeze.
 - e. Throw the tissue away immediately after you use it.
 - f. Wash your hands often with soap and water for at least 20 seconds, especially after you cough or sneeze.
 - g. Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick, as well.
 - h. Try not to touch your eyes, nose, or mouth. While it may seem simple, germs often spread this way
 - i. At the workplace, wash your hands frequently and practice caution when coming into contact with commonly touched surfaces like door handles, handrails, and elevator buttons.
- 16.) Notification If a child in care tests positive for COVID-19, GUIDING LIGHT must notify the hotline 800-252-5400 or report on the dfps hotline online reporting https://www.txabusehotline.org/Login/Default.aspx the following is the link to the local health authorities however many are no longer taking the COVID reports as of 2023 link: https://dshs.texas.gov/regions/lhds.shtm. The foster parent must complete an incident report within 24 hours due to the minimum standards regarding communicable diseases. DFPS and/or the SSCC that placed the child will be notified by way of the following:
- a. For DFPS, email the following email address: <u>dfpscovid19testreporting@dfps.texas.gov</u> (It is not confirmed if this email is still monitored so we are pending a response from DFPS)
 - 1. In the subject line: Child's name and Personal Identification Number (PID)
 - 2. In the email, include as much of the following information about the child:
 - Name
 - Date of Birth
 - Medicaid Number
 - PID (if known)
 - CPS Caseworker's name, address

- Type of placement
- Name of the person making the report and phone number
- Date of Testing
- Testing Site
- Test Results
- 3. The CPS CW, RCCR, and RCM will be copied on the notification.
- b. For OCOK, email the OCOK Care Coordinator or QI & Contracts Specialist.
 - 1. In the subject line: Child's name and Personal Identification Number (PID)
 - 2. In the email, include as much of the following information about the child:
 - Name
 - Date of Birth
 - Medicaid Number
 - PID (if known)
 - CPS Caseworker's name, address
 - Type of placement
 - Name of the person making the report and phone number
 - Date of Testing
 - Testing Site
 - Test Results
- c. For St. Francis:
 - 1. If a staff member or foster parent has tested positive, email the following to txproviderrelations@st-francis.org
 - Facility name/location
 - Staff role (If Foster Parent, are there Region 1 children in their care)
 - Date they tested positive
 - Action taken
 - 2. If a child from Region 1 has tested positive, email the child's St. Francis Case Manager with the following information:
 - Child's name
 - Location (Facility or Home Name)
 - Date tested
 - Date results received
 - Action taken
 - 3. If a child from another region has tested positive, email <u>txproviderrelations@st-francis.org</u> with the following information:
 - Child's Name
 - Location (Facility or Home Name)
 - Date they tested positive
 - Action taken
- d. For 2ingage, notify cmd@2ingage.org and quality@2ingage.org.

Pandemic

A pandemic is an epidemic of an infectious disease (flu) that spread across a region. If a pandemic is declared, the most common directive is to shelter in place. By keeping your distance from others, you may avoid falling ill.

Things you can do to prevent illness or spread of illness are:

 $\hbox{$\bullet$ Covering our nose and mouth when coughing or sneezing.}$

- Washing hands frequently with soap and water or using alcohol based sanitary gels.
- Avoiding touching eyes, nose or mouth as germs spread this way.
- Avoiding contact with sick people.

Should illness or contact with an infected individual occur you may need to be in isolation or quarantine to prevent exposure

to others. Sometimes this is a self-imposed action, at other times you may be required to followthis directive by your doctor or by local, state, tribal or federal directives.

- Isolation separates sick people with a contagious disease from people who are not sick.
- Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick

During a period of pandemic, it is critical to be in contact with your case manager and to follow the direction and directives of your local department of health, the CDC and any federal directives to ensure you and your family's safety.

In case of Quarantine:

- Anticipate at least seven to 10 days in isolation at home.
- Try to have a two-week supply of non-perishable food items in the pantry. Stock long-life alternatives to perishable food items, such as powdered and UHT milk, tinned fruit and frozen vegetables.
- Have a supply of disposable tissues, antibacterial wipes and latex gloves.
- Check that your first aid kit includes a thermometer and paracetamol (to reduce fever).
- Make sure you have enough of any prescription and non-prescription medication you need to last a couple of weeks.
- Talk with friends and relatives who don't live with you about supporting each other if one household must be quarantined. For example, agree to drop groceries or other supplies at the front door.

If a family member has an infection and everyone in the household is quarantined, suggestions include:

Family Quarantine at Home:

If a family member has an infection and everyone in the household is quarantined, suggestions include:

- All family members should stay home. Do not allow any visitors.
- Only one adult should look after the sick person. It is best if the caregiver is not pregnant because a pregnant woman is at increased risk of complications from many infections.
- Try to keep the sick person away from other members of the household. •For example, they should stay in their bedroom with the door closed, and they should not share a bedroom. If the sick person needs to share a common area with other people, they should try to stay several feet or more from other people to reduce the spread of illness and wear a facemask.
- Arrange for the sick person to have exclusive use of one bathroom (if your house has more than one bathroom).
- Keep the sick person's items separate from everyone else's. For example, don't share towels or eating utensils, or store toothbrushes in the same holder.
- *Use disinfectant to clean items touched by the sick person, such as bedside tables and bathroom surfaces.*
- Keep an eye on the sick person for any signs that they are getting worse, for example, breathing problems, confusion or chest pain. In that case, seek medical attention.
- Make sure the sick person gets plenty of rest, drinks plenty of water and maintains a healthy diet. Use facemasks to reduce the risk of infection.

Face Masks:

• Facemasks are available from pharmacies and hardware stores. Be guided by your doctor, but general tips for their use include:

- Wear a P2 or N95 facemask when helping the sick person with a nebulizer or inhaler.
- Check that the mask has been well fitted and a good seal has been achieved. The mask should be sealed over the bridge of the nose and mouth, and there should be no gaps between the mask and face.
- Make sure the sick person wears a facemask when they are out of their bedroom.
- Throwaway disposable facemasks after one use. (Reusable facemasks can be washed in hot water and tumble-dried.)
- Wash your hands thoroughly with soap and water immediately after taking off a facemask and before touching anything else.

All foster families will maintain contact information for their Case Manager, Case Manger's Supervisor, the Emergency Coordinator and the EC's designee within their DEP. Families may call, email or text to communicate their health status and needs for the duration of the illness, quarantine and/or pandemic event.

In the event of an emergency requiring quarantine, the provider (family) is responsible for maintaining the safety and placement of all Children in its care. You MUST obey all local lawenforcement and medical professionals' guidance and instructions during a quarantine.

12 Response plan for pandemics and procedures for isolation and quarantine:

Other Types of Disasters:

Chemical Accident / Explosion / Terrorist Attack/Weapons of Mass Destruction Events

Exposure to chemicals or biological agents can create several health-related issues. In case of a chemical accident or explosion, it is important to follow the guidelines from the local emergency center. Some residents may be evacuated, and others will be told to shelter in place. Other instructions may be to turn off fans, close windows and seal doors with wet towels or blankets.

Terrorist attacks usually occur in highly visible, populated public areas. While there may be no immediate risk for a terrorist attack in our community, it is important to prepare.

- Terrorists most often strike with little or no warning.
- Use caution when you travel.
- Observe and report unusual or suspicious activity to the proper authorities.
- Always keep your packages with you.
- Do not accept packages from strangers. Locate stairways and emergency exits and develop plans for evacuating buildings, subways and crowded public areas.
- Always maintain emergency contact information
- Be prepared to do without services you normally depend on, such as electricity, telephone, natural gas, gasoline pumps, ATM machines and internet transactions.
- Be prepared to shelter in place

If an attack occurs, stay informed by listening to the radio, TV or internet. Listen to official sources, as rumors can develop quickly in these situations. Maintain contact with your Case Manager.

Each home has their individual response plan notated in their home specific DEP plan for chemical accident/explosions, and weapons of mass destruction or terrorist events:

Intruder

In the event of an intruder entering the home, personal safety is the most important thing.

Precautions:

- Always lock windows and doors, even when you are in the home.
- *Never leave keys to your home in obvious places (flowerpot, under the mat.)*
- Do not give copies of keys to your home to anyone that is not approved and authorized to have them (staff have access to your living space at all times, but will knock, wait 2 minutes and announce themselves before entering your living space).
- Keep your phone next to your bed at night

If an intruder enters:

- Call 911 immediately. Give your address, name and a quick summary of what is happening. Leave the phone line open so they can listen to what is happening.
- Evacuate the home immediately if possible
- If you cannot leave, lock or secure yourself in a room or closet

If an intruder approaches you directly:

- Speak in a calm and normal voice
- Make no sudden moves
- Tell the intruder you will cooperate and to take property
- Most burglars will flee when they are discovered

Do not take aggressive action unless your life feels threatened or you need to physically defend yourself.

Chemical Emergencies, Dam Failure, Earthquake, Hazardous Material, Heat, Landslide, Critical Equipment Failure, Nuclear Power Plant Emergency, Winter Storm, Weapons of Mass Destruction Events, and Acts of Terrorism.

- 1) Remain calm to avoid panic among the family members.
- 2) Move all persons to those areas that have no windows. Move as quickly as possible.
- 3) As soon as possible, contact the Guiding Light Child Placement Staff during business hours and Janelle Holland after hours.
- 4) In the event of mental or physical injury to a child, the general procedure outlined in the Medical Emergency Plan will be followed, depending on the extent of the injury and the severity of the disaster.
- 5) In the event of a communication blackout involving telephone lines, tune in to your local radio and/or television stations for further information.
 - a. The foster child's Managing Conservator must be contacted within 24 hours from the time the incident is reported to GUIDING LIGHT.
- 6) An incident report must also be completed and turned in to the Guiding Light office within 24 hours.

Types of Communication:

- 1) The order of the lines of communication is as follows: land lines, cell phones and then satellite phones.
- 2) Office call forwarding: When offices in disaster sites are closed, GUIDING LIGHT has the ability to remotely forward calls to the Main office or other desired location before a storm hits. The Main office staff will be trained to accept these calls. The training will be included in the DEP Training material and will be presented to each receptionist and staff who cover the phones when the receptionist is away from her desk.

- 3) The Disaster Number "800-452-9292" may be used for foster parents to call for navigation and alternate evacuation routes. The Guiding Light Disaster Number is (512) 828-7035. The Texas Department of Transportation website for evacuation preparation is https://www.txdot.gov/safety/severe-weather/hurricane-preparation.html
- 4) If families need to reach GUIDING LIGHT by email, they can email assistance@glfca.org.
 - a. It is one designated email for emergencies.
- 5) The two GUIDING LIGHT staff designated to be the DFPS "emergency contacts" are:

 Janelle Holland, phone number 254-379-1853 & Katelynn Dyess 214-385-7289

DFPS may always contact either of them for information in the event of an emergency or disaster

Natural Disaster:

When local authorities indicate the possibility of a natural disaster

- 1) Be prepared at ALL TIMES
- 2) <u>Maps</u>: Flood Plan Zones Map: The quality assurance staff will track natural disasters using the following website: https://www.twdb.texas.gov/flood/ and will update the Executive Director/CPMS as to which families will be affected by the disaster.
- 3) Emergency Food/Gear: Foster Families should refer to the 72 Hour Caregiver Emergency Support Pack which is a list of items that each family needs to have on hand in case of emergency. In addition, the list the Caregivers are reminded to pay special attention to:
 - a. Medications: for children in their care. The Caregiver must bring a first aid kit with them in the event of an evacuation to ensure supplies are available while away from the home. When securing the home's first aid kit, Caregivers must also bring all medications used by children in care. GUIDING LIGHT recommends obtaining a "tackle box" style first aid kit, large enough to store both the kit contents, medications used by children in care, and medication logs for ensuring proper documentation, since administering medication must continue to be logged daily. Refrigerated medications would have to be stored in portable cooling devices such as coolers in transport until safety and shelter is sought.
 - b. Primary Medical Needs Children- who are in care and who require specialized medical or ambulatory equipment must continue receiving proper medical care. Specialized equipment that requires power when the power goes out or if they are being transported to safety already have battery backups that last for an extended/identified period of time. In the event the specified time lapses and the equipment no longer has power, Caregivers would be required to seek hospital services and do so to ensure no lapse in power. Caregivers are required to ensure all regularly used, necessary medical equipment is carried with the family in the vehicle during an evacuation.(i.e. nebulizers, wheelchairs, walkers) The GUIDING LIGHT Response Team will confirm with the foster parent prior, during, and after the emergency to ensure medications and equipment are available to children with special needs or medical conditions.
 - c. Gasoline: Each family should have a full tank of gas prior to evacuation. Caregivers should NOT to transport extra fuel tanks in their cars.
 - d. Children 24 months of age/non mobile-Car seats and other devices such as strollers for transporting small children under the age of 24 months should be packed in the evacuation vehicle when transporting this population. Children who have special health care or developmental needs such as limited mobility, mental, visual or hearing impairments will continue to need any specialized equipment such as ambulatory devices (wheelchairs, walkers, hearing aid/batteries, eyeglasses etc.) in an emergency. Caregivers will need to ensure that any children in this population continue to have access to the equipment normally used in the event of an evacuation.

- e. Generators are only to be used completely outside the home. Generators professionally installed or the used of solar panels are evaluated once installed by the professionals to ensure safe and optimal usage in the event of backup power source needed.
- f. Freezer/Refrigerator Bags: Families need to purchase a plastic bag (home depot) specifically designed to put food from the refrigerator/freezer and leave in their homes that will ensure that the contents will not leak to ruination of the appliance.
- 4) Protection and/or recovery of children's records (including electronic records)- All children documents are scanned into GUIDING LIGHT's electronic portal which automatically backs-up daily and can be recovered after the disaster from a safe branch office. The electronic records include but are not limited to, placement information, medical information, copies of Medicaid and Star Health Cards, and Education Portfolio. GUIDING LIGHT conducts electronic information backups to ensure recoverability on a weekly basis. GUIDING LIGHT uses encrypted transmission over an external network connection as required by rules and laws to ensure confidential DFPS material. Casebook database used ensures the establishment, maintenance, and compliance with the information security plan to ensure the security, integrity, and confidentiality of sensitive information. It also ensures the protection against any known or anticipated threats or hazards to the security or integrity of such information. Casebook protects against unauthorized access of sensitive information including the use of an employee security acknowledgement agreement during the employee onboarding process and with every policy update the agreement is signed. Casebook database ensures a two step secure log on verification when accessing the database. Casebook reduces the risks associated with the access to DFPS information resources through ongoing risk assessments. All restricted access to the records and files of sensitive information is restricted to those with their secure access. All emails sent with sensitive information require encryption and the email accounts assigned to the GUIDING LIGHT staff and users have the encryption feature through Microsoft and the email domains.
 - a. GUIDING LIGHT's electronic portal is in compliance with DFPS's Contractor Information Security Standards to ensure the confidentiality of children's records applicable to federal and state laws. The records will be readily available to the Department upon request. GUIDING LIGHT is on an electronic file system and only a paper copy of the emergency disaster plan for each family is kept in a binder in the office to review in the event electricity is out and electronic systems are down. GUIDING LIGHT agrees to periodically check for any updates made to the Data and System Security Requirements document and comply with any updates made to these requirements.
 - b. 120 hours (5 days) prior to impact storm related and non-storm related disasters upon notification of event
 - 1) The Executive Director will determine area/regions that need to be notified of office closures.
 - 2) The Main office will be the location unless another location is determined. At this site, there will be a coordination of communication for tracking of storms or other catastrophic events and dissemination of agency responses.

Communication between Case Management and Foster Family

- 1) The Case Manager contacts their assigned families to verify their anticipated destination and the vehicle license plate number of the vehicle the family plans to drive when evacuating.
- 2) The Case Manager contacts their Executive Director/CPMS with the above information.
- 3) The Executive Director/CPMS will forward this information to the GUIDING LIGHT Response Team.
- 4) Logistics/routes Storm/Disaster tracking, the GUIDING LIGHT Response Team will monitor radio, TV stations, and websites regularly to update staff of the status of the disaster.
- 5) Move agency assets that might be affected. This would include heavy equipment, livestock, and possibly records if time allows. A list of such assets will be on file with the Executive Director and should be updated regularly.
- 6) The Executive Director/CPMS can access the database listing of families and children including D.O.B, SS#, and ages using GUIDING LIGHT's electronic Casebook portal. Each family has their individual

- Disaster Emergency Plan/DEP Plan and a printed paper copy is kept on file in a binder at the main office and reprinted each time it is updated for any reason.
- 7) In the event a family with children in care has no place to go, and has no funds to secure a hotel, the staff person (Executive Director/CPMS, Case Manager, or Tracking Log designee) will negotiate special arrangements, on behalf of the family, with the Executive Director, Janelle Holland, to assist in this financial dilemma. Staff training material will include this information.
- 8) Backup Team: A back-up person will be assigned by the Executive Director in case the primary person responsible for any duty is not available.

Evacuation and post evacuation reporting (destination reporting).

- 1) Families with DFPS children in their care are required to evacuate when local authorities issue a mandate to evacuate
- 2) If the family refuses to evacuate when authorities issue the mandatory evacuation, the hotline will be called, and GUIDING LIGHT will consult with CPS/DFPS/RCCR to take whatever action is recommended. A corrective action plan will be required because they put wards of the State in danger
- 3) The Response Team or their designee will assist families to ensure that medical services, treatment and educational services are continued. Such services include providing children with medication as prescribed (including insulin and asthma related treatments), emergency care, and Medical Care for Children with Primary Medical Needs.
- 4) GUIDING LIGHT staff will assist foster parents with locating medical and dental as necessary in designated areas.
- 5) Staff will also assist as necessary with enrolling foster children in local schools when closed for an extended time due to a disaster.
- 6) GUIDING LIGHT staff will assist the foster family maintain services required by a court order, visitations with biological family and siblings, and any other services required by the child's service plan

Communication Tracking Report

- 1) A Disaster Tracking Report was created for updated information about foster family locations and conditions of the children in care. The GUIDING LIGHT Response Team is designated as the contact person to receive calls from families about their destination location.
- 2) The Disaster Tracking Report is updated each time the Foster Parent updates their Disaster Plan. The Tracking report is on the agency Social Software Database (Casebook) and a paper copy accessible by any GUIDING LIGHT staff member at any time. This Disaster Tracking Report will be used to update the DFPS website.
 - 3) This contact information is available in training material as well as DEP for access by staff and foster families. The Disaster Number (254) 379-1853 for families and staff to reach during all hours. Email address: assistance@glfca.org
 - 4) Designated GUIDING LIGHT staff will access the online forms that will identify each family and child in care, and provide where the family has temporarily relocated in the event of a disaster. Additionally, GUIDING LIGHT's Casebook portal has contact information for each child's caseworker and caseworker's supervisor. This information will be given to the foster parent upon request.
 - 5) Case Managers or Executive Director/CPMSs can re-verify information by calling their assigned foster parents by phone to assure correctness and accuracy on the online form.

- 6) Any new information will be communicated to the assigned Response Team to update the Disaster Tracking Report.
- 7) The GUIDING LIGHT Response Team will collect information directly from families or staff once the family has evacuated to update the DFPS website www.dfps.state.tx.us during mass evacuation in Texas as a method to contact CPS to provide information on the location and condition of children in care who have been evacuated and when they reach their destination. In situations, where online reporting is not enabled or GUIDING LIGHT does not have access to internet the evacuation notification will be made by the Response Team by calling the DFPS abuse/neglect hotline at 1-800-252-5400 once per day at minimum, to provide information concerning the children until all children are accounted for.
- 8) Case Managers will re-inform foster parents to call GUIDING LIGHT Response Team for a prediction of their estimated time of arrival and then to call again once they reached their destination.
- 9) GUIDING LIGHT will use the information on the **Disaster Tracking Report** to determine if they reached their destination in the given timeframe.

Returning home: Post-Disaster Plans

- 1) Members of the GUIDING LIGHT Response *Team* are designated to contact staff and families in remote locations to update them of any notices from local authorities regarding locations without restored power, areas that are safe to return home, etc. Additionally, the Response team will assist foster families if they are having difficulty accessing resources such as power, food, water, and transportation. The destination of some evacuees is in another state, making it difficult to access local information.
- 2) This contact information is available in training material as well as DEP for access by staff and foster families. This information will be posted on the Tracking Report. Lists will be assigned to each team member to avoid duplication.
- 3) GUIDING LIGHT Staff will update the DFPS website or call the DFPS 1-800-252-5400 number once the family returns home.
- 4) Services available to children during and after a disaster: Foster parents are consistently trained to meet the child's emotional needs during stressful periods and will be expected to keep the children calm during evacuation procedures. Should a serious event of injury, trauma, or death occur during the disaster or the evacuation, staff will assist the family in locating a professional to render necessary services, such as medical or counseling. Once the children return home, any trauma they may have experienced or witnessed will be addressed in therapy with a therapist.
- 5) If plans of travel within the United states or out of the country check the following website for Travel Notices: https://wwwnc.cdc.gov/travel/notices

DEP Review:

- 1) The DEP (Disaster Emergency Plan) Plan will be reviewed and updated at a minimum of every two years per the Residential Contract and yearly for any SSCC requirements. The DEP is also reviewed when there are changes in administration, construction, or emergency phone numbers occur. In addition to being updated for each foster family if changes occur with the foster home that requires a DEP update.
- 2) Input will be solicited from other staff involved in previous emergency situations and submitted to the review team. Emphasis will be place upon any changes to staffing or construction of the Plan.
- 3) The Tracking Report can be accessed from GUIDING LIGHT's Casebook to review all communication from families, staff, and DFPS, in addition to a paper copy of the tracking report during disasters that affect the power source.

- 4) These reviews will be scheduled on an annual basis.
- 5) Training material will be updated if changes occur during the review.
- 6) The revised Disaster Plan will be given to each foster/adoptive family, and a revised signed plan will also be filed in each home's records. Each time the DEP is reviewed and updated, a new distribution occurs, and signed confirmation is placed in the staff and family records.

Training:

- Tests, outlines, handouts, and sign-off sheets will be pre-prepared for distribution to all Executive Director/CPMS's prior to the training. This material will be updated prior to the training after each DEP review.
- Families will receive copies of the updated DEP during training and it will be available on the Casebook access.
- 3) Disaster/Emergency Plan training will be scheduled as follows:
- 4) New hire Orientation (provided during Pre-service training for new Foster Families)
 - a. Transfer Family Orientation
 - b. Pre-service for new Foster Families
 - c. Staff every two years (annually for SSCC's)
 - d. Advanced FF training every two years (annually for SSCC's)

Practice:

- 1) A foster home must practice disaster and emergency plans each year by:
- 2) Discussing the plans and procedures for handling a fire and weather emergency with children in care;
- 3) Conduct a monthly fire drill, so children are able to safely exit the foster home within three minutes;
- 4) Conduct a severe weather drill
 - a. The Case Manager must document the discussions and the drill, including the date and time of each in a quarterly Supervisory Visit.
 - b. For foster homes treating PMN children, a substitute such as a large body pillow, should be used for each child with PMN if the drill would endanger or overstimulate the child

General Wellbeing in Emergency Situations: Information Provided in each foster home DEP/Disaster Emergency Plan for a Reference.

Emergency situations can create intense stress. These events can impact those directly involved, and in many cases even witnesses from afar are deeply impacted.

Many factors influence how we will react in emergency situations

- Past traumatic experiences
- Ability to handle day to day stressors
- Access to support and resources
- · Level of preparedness
- The length and extent of the situation
- Ability to have closure to the event

Common responses to emergency situations are:

- Shock, disbelief and feeling numb
- *Inability to concentrate*
- Feeling scared, angry or depressed
- Headaches, migraines
- Muscle tension
- Loss of appetite, or overeating, general digestion or stomach problems
- Excessive use of cigarettes, alcohol, food, drugs of other destructive and addictive behaviors.

It is important that our physical safety is cared for in emergency situations, but our emotional wellbeing is just a as important. Following any emergency event:

- Talk about your concerns, feelings and experiences with others including your Case Manager to help identify additional resources or support systems for the family.
- Assess what happened, and plan for how you could react, or plan better for any future events.
- Limit your exposure to coverage of the event. Pictures and sounds may make it difficult to get closure.
- Go back to your daily routine.
- Do not isolate yourself.
- Take care of your physical heath. (eat nourishing foods, exercise)
- Engage in activities that make you happy. (reading, taking walks, going to the movies, listening to music, playing games, etc.)

DFPS Information Security Requirements: Section II of the DFPS Vendor Supplemental and Special Conditions:

- 5) GUIDING LIGHT meets the requirements according to the Data and System Security Requirements: https://www.dfps.texas.gov/Doing Business/documents/Contractor Data and System Security Requirements.pdf Protection and/or recovery of children's records (including electronic records)- All children documents are scanned into GUIDING LIGHT's electronic portal which automatically backs-up daily and can be recovered after the disaster from a safe branch office. The electronic records include but are not limited to, placement information, medical information, copies of Medicaid and Star Health Cards, and Education Portfolio. GUIDING LIGHT conducts electronic information backups to ensure recoverability on a weekly basis. GUIDING LIGHT uses encrypted transmission over an external network connection as required by rules and laws to ensure confidential DFPS material. Casebook database used ensures the establishment, maintenance, and compliance with the information security plan to ensure the security, integrity, and confidentiality of sensitive information. It also ensures the protection against any known or anticipated threats or hazards to the security or integrity of such information. Casebook protects against unauthorized access of sensitive information including the use of an employee security acknowledgement agreement during the employee onboarding process and with every policy update the agreement is signed. Casebook database ensures a two step secure log on verification when accessing the database. Casebook reduces the risks associated with the access to DFPS information resources through ongoing risk assessments. All restricted access to the records and files of sensitive information is restricted to those with their secure access. All emails sent with sensitive information require encryption and the email accounts assigned to the GUIDING LIGHT staff and users have the encryption feature through Microsoft and the email domains.
 - c. GUIDING LIGHT's electronic portal is in compliance with DFPS's Contractor Information Security Standards to ensure the confidentiality of children's records applicable to federal and state laws. The records will be readily available to the Department upon request. GUIDING LIGHT is on an electronic file system and only a paper copy of the emergency disaster plan for each family is kept in a binder in the office to review in the event electricity is out and electronic systems are down. GUIDING LIGHT agrees to periodically check for any updates made to the Data and System Security Requirements document and comply with any updates made to these requirements.

Helpful Websites

Texas Department Emergency Management https://tdem.texas.gov CDC Travel Health Notices

https://wwwnc.cdc.gov/travel/notices

Texas Emergency Portal http://emergency.portal.texas.gov
Ready - Prepare, Plan, Stay Informed http://www.ready.gov/make-a-plan

American Red Cross https://www.redcross.org

Federal Emergency Management Agency https://www.fema.gov

Coping with Traumatic Events

https://www.nimh.nih.gov/health/topics/coping-with-traumatic-events