



Disaster and Emergency Preparedness Plan

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I. INTRODUCTION

A. Purpose

The safety and well-being of participants and staff is important as well as the continuity of services. These policies and procedures are implemented to establish and implement disaster preparedness plans and procedures to ensure that participant's care, safety, and well-being are provided and maintained during and following instances of natural (tornado, flood, etc.) or other disasters, disease outbreaks, or other similar situations.

B. Authority

These policies and procedures have been implemented with the approval of the ABLED Inc. Board of Directors.

II. TYPES OF EMERGENCIES

A. Fire

Fire safety includes a supervised practice of evacuation of a building. A plan may include changing the batteries on smoke detectors, having a fire extinguisher and a first aid kit, drawing a map of the building to include doors and windows, finding two ways out of every room, making sure doors and windows are not blocked, choosing an outside meeting place in front of the building, and practicing a fire drill.

B. Tornado

Tornado safety includes a supervised practice to get to a storm shelter. A plan may include getting severe weather alerts, having a weather radio, drawing a map of the building and each room to discuss where and how to seek shelter, having an emergency kit in residential settings to include water, non-perishable food, first aid, medication or access to important information, including telephone numbers.

C. Severe Weather

Severe weather safety includes a plan to shelter in place during blizzards, winter storms and heat waves that can cause extreme temperatures and power outages. A plan can include having regular maintenance of heating and air conditioning systems, getting weather alerts, monitoring weather forecasts and having a weeks' worth of supplies on hand. If the power goes out, call your local utility.

Gather everyone somewhere comfortable. Use flashlights for lighting. Dress appropriately for extreme temperatures. Keep your fridge and freezer closed. Practice generator safety.

D. Flood

Flood safety includes a plan to get to higher ground if you are in an area that is subject to flooding. A plan may include getting flood and flash flood alerts, having a weather radio, following evacuation orders and heeding warning signs. If you have time before you evacuate, disconnect utilities and appliances. Avoid floodwaters: It is NEVER safe to drive or walk through them.

E. Disease Outbreak

Disease outbreak safety includes following CDC guidelines for prevention, monitoring, testing and isolation. A plan may include knowing the protocol if there is an outbreak, staying informed through local news and checking for updates from DHHS or CDC, maintaining proper hygiene, avoiding exposure by putting distance between yourself and other people if the disease starts to spread in your community, having a weeks' worth of supplies on hand or staying home as much as possible and avoiding crowds and places with poor ventilation.

If there has been exposure to a communicable disease, monitor for symptoms and seek medical treatment as needed. Follow physician's instructions. Public health officials may recommend community actions to report and reduce exposure. These actions can slow the spread and reduce the impact of disease.

F. Other Emergencies

Other emergencies may include gas leaks, chemical spills, explosions, active shooters, etc. Be observant of your environment. If you see something, say something. A plan may include knowing the exits and leaving the immediate area or finding a safe place. Call 911 to provide information. Remain at a safe distance to direct emergency personnel to the affected area. Advise others to stay out of the immediate area. Have access to first aid kits.

G. Natural Disasters

Less common natural disasters could include earthquakes, hurricanes, volcanoes, tsunamis, landslides, etc.

III. PLANNING AHEAD

A. Backup Staff

Identify back-up staff for participants and have them approved, trained and ready in advance through ABLED to maintain supervision, habilitation and staff ratios as outlined in the ISP.

B. At-Risk Participants

Identify at-risk participants, including those who live on their own or have severe chronic medical conditions to identify those at greater risk and plan ways to care for them to avoid serious complications. Be informed of medical conditions and have access to emergency contacts, medications, medical supplies, medication lists, etc.

C. Medical Supplies

Contact healthcare providers and/or pharmacies to ask about best protocols for maintaining regular inventory of medications and/or medical supplies.

D. Other Supplies

Maintain a supply of water and food. Have household items, medical supplies and groceries on hand including non-perishable food items to minimize trips to the store. Consider ways of getting food and supplies brought to your house. You may need to ask for help from friends, family, neighbors, community resources such as delivery services, etc.

E. Practice Drills

Create a household plan of action. Practice of fire and tornado drills. Talk with household members, other relatives, and friends to discuss safe locations to meet up. Learn about the emergency operations plan at your child's school or childcare facility and plan for your pet's safety. Stay in touch with others by phone or email.

Choose a specific room and a bathroom, if possible, in your home that can be used to separate sick household members from those who are healthy. Plan to sanitize these rooms, as needed, when someone is sick. Wear disposable gloves, use appropriate cleaners and use a dedicated lined trash.

F. Operations

ABLED has created a structure for staff and participants to work remotely which allows for continuity of services during emergency situations. We do not own or operate a provider facility. Participants integrate into the community and live with family, on their own, or with a Shared Living Provider. Staff independently schedule plans and activities that best meet each participant's needs. Ratios for staff to participants are generally 1:1. Staff use their private vehicle to provide transportation.

All documents and records are maintained and accessed electronically. Staff should notify EVP Operations, Pierre Allen, at 402-417-2613 in the event they are unable to provide scheduled services or call the office at 402-904-7433 if they are unable to reach him.

IV. RESPONSIBILITIES OF PROVIDERS

A. Information

Be properly informed by monitoring emergency announcements from local, state or federal authorities such as Law Enforcement, National Weather Service, CDC, FEMA, etc.

B. Communication

Make proper notifications and monitor Therap SComms regularly for important updates or instructions from ABLED. Staff should continue to stay in regular contact with our Executive Team by responding to all requests in a timely manner and making notifications of sensitive situations.

C. Identification

Maintain the proper identification and emergency contact information of each participant to ensure that care coincides with the individual's needs.

D. Relocation

Move participants to points of safety or provide other means of protection when all or part of the building is damaged or uninhabitable due to natural or other disaster.

E. Protection

Protect participants during the threat of exposure to the ingestion, absorption, or inhalation of hazardous substances or material.

F. Provision

Provide food, water, medicine, medical supplies, and other necessary items for care in the event of a natural or other disaster.

G. Duration

Provide for the comfort, safety, and well-being of individuals served in the event of 24 or more consecutive hours of:

1. Electrical or gas outage;
2. Heating, cooling, or sewer system failure; or
3. Loss or contamination of water supply.

H. Travel

Avoid nonessential travel based on guidance from local, state or federal authorities. Notify ABLED of travel plans according to our current policy.

I. Documentation

Notify ABLED, Service Coordination and the guardian immediately of emergency situations. Follow GER reporting for reportable incidents and submit within 24 hours.

J. Stay Calm

Try to avoid unnecessary anxiety. Share accurate information about the emergency situation without increasing fear. How staff responds will impact how participants respond. Prepare to be flexible. As part of their emergency preparedness planning, DHHS has previously worked with CMS to evaluate and explore all areas that allow flexibility in service definitions and payments in the event of a disaster situation.