



EMERGENCY PREPAREDNESS PLAN

PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY

224 KRAYS MILL ROAD

COLD SPRING, MN



EMERGENCY PREPAREDNESS PLAN

Psychiatric Residential Treatment Center

- A. Power Failure
- B. Natural Disaster (serious thunderstorm, tornado, and hurricane)
- C. Code Blue/Medical Emergency
- D. Earthquake
- E. Site Evaluation
- F. Bomb Threat
- G. Security Threat
- H. Van Evacuation
- I. Implementation and Evacuation Emergency Drill

NOTE: Throughout this plan the term “on-duty manager” is used. This refers to the following titles: Operations Administrator, Residential Supervisor, Executive Director and/or designee. Quality Assurance Supervisor refers to Operations Administrator or Nurse Manager depending on Director’s delegation.

A. POWER FAILURE

In the event of loss of utilities, the following guidelines will be followed:

1. In the event of a general power failure, the emergency generator system will engage providing emergency electrical power to key services on the campus.
2. Personnel in the affected area will notify the on-duty manager or administrator in-charge immediately with a detailed description of the type of utility loss.
3. Personnel in the affected area will maintain supervision of their assigned residents and will not leave the area until they are advised to do so by the on-duty manager or administrator in-charge. Specified relocation areas at the site will also be identified by the on-duty manager or administrator in-charge.
4. Only those personnel designated by the on-duty manager or administrator in-charge will be authorized to move about the location during a utility failure to ensure the safety of all personnel and residents.
5. The on-duty manager will immediately notify the administrator in-charge and the maintenance staff.
6. The maintenance staff will determine the cause of the failure if possible and notify the appropriate agency or initiate the repair if the failure is due to Grafton’s equipment.
7. The maintenance staff and/or administrator in-charge will act as the campus representative to assist the responding agency personnel in oversight of the required repairs.
8. In the event repair is not possible within a reasonable length of time, as determined by current condition, a relocation of residents and personnel from the affected facility will be initiated at the discretion of the on-duty manager in consultation with the administrator in-charge; follow section “**E. Site Evacuation**” and/or “**Sheltering in Place**” procedures.
9. The on-duty manager will maintain accurate concurrent documentation to ensure a viable record of the event.
10. Once secured from the incident, the on-duty manager will complete documentation of the serious incident.

B. NATURAL DISASTERS (Serious Thunderstorm, Tornado and Hurricane)

In the event of the prediction of severe weather, the on-duty manager or administrator in-charge will monitor the weather situation to evaluate the need for implementation of the appropriate procedures from the Emergency Preparedness Plan. Should evacuation become necessary:

1. All Program personnel will gather their assigned residents and
 - a. Attendance log
 - b. Emergency procedures materials including flashlights and first-aid kits
 - c. Ensure an accurate accounting of all assigned residents

- d. Transit to their assigned emergency shelter location
- e. Secure the space as they exit
2. Upon arrival at the designated on-site emergency shelter personnel shall
 - Ensure an accurate accounting of all assigned residents
 - a. Secure the emergency shelter location by closing all access
 - b. Place residents in a location as far as possible from entryways and against walls to maximize safety
 - c. Personnel should ensure that noise is held to a minimum
3. All personnel will remain in their designated shelter location and maintain supervision of assigned residents until notified of the “all clear” by the on-duty manager or administrator in-charge.
4. In the event that Emergency Services Personnel arrive at the location, the on-duty manager or administrator in-charge will act as the point of contact and ensure assistance is provided as requested.
5. The on-duty manager or administrator in-charge will utilize personnel as required to conduct a facility walk through to determine the presence or extent of damage.
6. Post damage assessment, the on-duty manager or administrator in-charge, in consultation with the maintenance staff and the administrator in-charge, may direct group relocation of residents and personnel or a site evacuation in accordance with section “**E. Site Evacuation**” procedures and/or **Sheltering in Place** procedures.
7. In the event of injury, emergency medical treatment will be provided in accordance with section C. Code Blue/Medical Emergency” procedures.
8. The on-duty manager will maintain accurate concurrent documentation to ensure a viable record of the event.
9. Once secured from the threat, the on-duty manager or administrator in-charge will complete a serious incident notification form. If evacuation occurred the serious incident notification form is completed for each resident involved and the notification procedures for serious incidents are followed.
10. The Quality Assurance Supervisor will make notifications to applicable regulatory authorities no later than the next business day.
11. In the event of a snow blizzard or heavy rain, staff and residents remain in their living area. Should a utility failure occur follow “**A. Power Failure**” procedure.

C. CODE BLUE/MEDICAL EMERGENCY

In the event of an emergency medical situation, the facility medical team consisting of all available healthcare providers (physicians, physician extenders, and nurses) will respond to the location and assume responsibility for providing emergency medical care.

Most Grafton personnel are trained in basic first aid, but this is not meant to substitute for the assessment and treatment skills of trained medical personnel. Grafton personnel should provide appropriate assistance to an injury individual until trained medical personnel arrive and assume responsibility for providing care.

1. The person discovering the medical emergency will notify the on-duty manager or administrator in-charge immediately reporting the emergency and where it is located. The on-duty manager or administrator in-charge will call 911 and call trained Grafton personnel to the scene. The on-duty managers or administrator in-charge will have a current list of all staff certified in CPR/First-aid training.
2. The person discovering the situation should remain on-site clearing the area, if possible, of all hazards and offering whatever assistance is possible based upon their level of training.
3. The on-duty manager or switchboard operator shall announce the emergency over all available communication sources by stating: "Code Blue, Code Blue in the (location)." Repeat as necessary.
4. The senior medical staff present shall assume command of the situation.
5. The on-duty manager shall report to the scene to coordinate any additional support as requested by the senior medical staff.
6. Evaluation of the situation shall follow established medical best practice guidelines.
7. Upon completion of the evaluation by the senior medical staff, best practice treatment processes will commence.
8. Local Emergency Medical Services will be contacted as deemed appropriate by the on-site senior medical staff.
9. Treatment efforts will continue until such time as Emergency Medical Services Personnel assume the treatment responsibilities, or the situation is determined to be a non-emergency.
10. Upon securing from the Code Blue situation, the on-duty manager will complete the senior incident notification form as applicable and the notification procedures for serious incidents are followed.
11. The Quality Assurance Supervisor will make notifications to applicable regulatory authorities no later than the next business day.

D. EARTHQUAKE

In the event of an earthquake, all personnel and residents should take cover immediately. Taking shelter beneath solid tables will help prevent injury from falling objects. Additionally, shelter may be sought in doorway frames or other areas of overhead protection. If site evacuation is required refer to section "**E. Site Evacuation**" procedures and/or "**Sheltering in Place**".

1. Facility switchboard operator will make an announcement, "TO TAKE COVER IMMEDIATELY", over the telephone/paging system.
2. Once the earthquake has subsided, the on-duty manager or administrator in-charge will immediately order the evacuation of all buildings using the FIRE ALARM.
3. Once all residents and staff are accounted for in the designated assembly area, evaluation of the facility will be done for suitability to re-occupy the buildings.
4. The initial facility inspection will be conducted by the maintenance department but will be augmented by outside resources as soon as possible.
5. If the buildings are determined to offer no immediate risks, the on-duty manager or administrator in-charge will order the "**ALL CLEAR**" for the return of residents to the facility.

6. In the event of inclement weather, the vans may be used to shelter residents and personnel while maintaining appropriate supervision.
7. If the facility is not ready for the return of residents within a reasonable length of time, a site evacuation of residents may be ordered by the administrator in-charge in accordance section **"E. Site Evacuation"** Emergency procedures.
8. In the event of injury, emergency medical treatment will be provided in accordance with **"C. Code Blue/Medical Emergency"** procedures.
9. The on-duty manager or administrator in-charge will maintain accurate concurrent documentation to ensure a viable record of the event.
10. Once secured from the event, the on-duty manager or administrator in-charge will complete the serious incident notification form. If evacuation occurred, the serious incident notification form is completed for each resident involved and the notification procedures for serious incidents are followed.
11. The Quality Assurance Supervisor will make notifications to applicable regulatory authorities no later than the next business day.

E. SITE EVACUATION

Evacuation of any Grafton site(s) could be necessary because of an order from the local authorities or because our own criteria for site evacuation has been met. The local emergency officials are familiar with our emergency plan, we would therefore seek their advice/approval on setting up our own shelters.

Implementing the Plan

1. The following are the detailed steps to implementing our current emergency plan. The plan will be reviewed after each drill or actual disaster and revised as needed.

Procedures: The following conditions may be reasons to relocate Grafton residents and staff from a location:

- 1.1 If a location does not have heat and the temperature falls below 65 degrees
 - 1.2 If a location does not have air conditioning and the temperatures exceeds 85 degrees
 - 1.3 Any condition that would make the facility unsafe and/or uninhabitable (i.e., fire, bomb threat, significant water damage, earthquake, significant structural damage, gas leak, extended loss of electricity).
 - 1.4 If the location does not have a working telephone or cell phone
 - 1.5 If local authorities order an evacuation for any other reason
 - 1.6 If the location does not have running water for more than 24 hours
2. If any of the aforementioned situations require a site evacuation, the following steps are to be taken:
 - 2.1 Staff will do what is immediately necessary to make the situation safe for everyone. Staff will notify the on-duty manager or administrator in-charge, which will coordinate and direct operations during, the course, of the site evacuation. The on-duty manager or administrator in-charge will enlist the immediate support of the appropriate personnel.
 - 2.2 The on-duty manager or administrator in-charge will notify the Psychiatric Residential Treatment Facility Executive Director and/or Executive Vice-President who will notify the Operations Administrator. This emergency situation may necessitate the effected site visiting another location for the day, going out in the community, making sleeping

- arrangements in another location, etc.
- 2.3 If a site evacuation order has been issued, the on-duty manager or administrator in-charge will contact the City of Cold Spring Emergency Operations Manager to report the relocation site or sites.
 - 2.4 The on-duty manager or administrator in-charge will have access at all times to an emergency information book. The book will include:
 - 2.4.1 A list of important local numbers such as the City of Cold Spring Emergency Operations Center, forms that will be used to record log sheets, primary site, and relocation sites for each site evacuation implementation.
 - 2.5 If the problem at the site in question is with the physical plant and there is no immediate danger, the on-duty manager or administrator in-charge will notify maintenance personnel or an outside contractor to assess the situation to determine the necessary timeframe it will take to correct the problem.
 - 2.6 While waiting for confirmation from maintenance personnel or outside contractor, the on-duty or administrator in-charge will make arrangements to implement a site evacuation if that becomes necessary. Since there will be more time available, the administrator will be able to take the following into consideration:
 - 2.6.1 The age range as well as the needs of the residents
 - 2.6.2 Relocation sites that have more than one common area in which ample space is available to facilitate additional residents and staff for the day
 - 2.6.3 Whether cots are needed at relocation sites
3. When site evacuation is imminent, staff and residents relocating will take with them the materials listed below:
 - 3.1 At least one complete change of clothing, minimal footwear, or jackets, with three changes of underwear. This clothing/items should be assembled in a personnel emergency kit. For anyone who uses diapers or pull-ups, the personnel kit must include at least a three-day supply plus wipes.
 - 3.2 If relocation becomes necessary, each resident's pillow, blanket and emergency items can be carried in a large sturdy bag.
 - 3.3 All prescription medications will be kept in a "locked box" that can be carried from the house. Prescription medications stored in the "locked box" will be maintained at no less than a three-day supply.
 - 3.4 All commonly used over-the-counter medications will be kept in the separate first-aid kit that will relocate with residents.
 - 3.5 If each resident's personal kit does not also include hygiene and grooming items, these will be stored collectively in a box in the same area where food and water is stored and relocate respectfully.
 - 3.6 A notebook or portable file with current emergency information (i.e., face sheet) for each resident.
 - 3.7 Other supplies vital for a resident's health, such as feeding tube or special food.
 - 3.8 If time and space in the vans permit, as much as possible from the supplies listed in section 1 of the "**Sheltering in Place**" portion of this Disaster Plan.
 - 3.9 Any other personal items that can practically be taken to make the resident's stay more comfortable.
 4. The on-duty manager or administrator in-charge will keep the PRTF Executive Director updated as to the projected duration of the site evacuation.
 5. If the site evacuation is to last more than 24 hours, the on-duty manager or administrator in-charge will notify the guardians and funding agent for the residents, depending on whether the

site evacuation occurs during or after business hours. The on-duty manager or administrator in-charge will also inquire whether guardians could care for the child for the time period that is necessary to remedy the problem.

- 5.1 If guardians are unable to assist during the relocation period, the on-duty manager or administrator in-charge will supply the guardians with the location and telephone number of the relocation area for their child.
- 5.2 The on-duty manager or administrator in-charge will document calls to guardians on phone conversation records.
- 5.3 The on-duty manager or administrator in-charge will contact the nursing staff, appropriate Grafton staff, and related service personnel.
- 5.4 The on-duty manager or administrator in-charge will notify the supervisor for the Quality Assurance department during normal working hours. If the site evacuation relocation occurs outside working hours, on-duty manager or administrator in-charge will contact the organization's Psychiatric Residential Treatment Facilities Operations Team and Director of Quality Assurance who will be responsible for notifications.
- 5.5 The on-call supervisor or on-duty manager or administrator in-charge will complete a serious incident notification form each resident involved. The notification procedures for serious incidents are followed.
- 5.6 The Quality Assurance Supervisor will make notifications to applicable regulatory authorities no later than the next business day. Grafton will request a variance if relocation causes the parameters of licenses to be compromised.
- 5.7 The on-duty manager or administrator in-charge will have staff complete the site evacuation checklist, which details what items to take with the relocated residents.
- 5.8 The on-duty manager or administrator in-charge will secure additional transportation, as needed.
- 5.9 After confirmation that the effected location is safe and again inhabitable, the following process will occur:
 - 5.9.1 The Executive Director or Executive Vice-President will notify the on-site shift supervisor and on-call personnel
 - 5.9.2 On-call will notify the nurse, necessary education/residential personnel, and related service personnel.
 - 5.9.3 If confirmation comes during working hours, case manager will contact guardians and other necessary parties as well as the date and approximate time that the residents will return to the facility that same day. If confirmation occurs outside of normal working hours, the on-duty manager or administrator in-charge will notify guardians immediately and forward information to the case managers who will notify other necessary parties by the next business day. All contacts will be documented on phone conversation records.
 - 5.9.4 The Quality Assurance department will notify licensing personnel of the confirmation and ate of return to the evacuated facility.
 - 5.9.5 Staff again will use the resident's site evacuation checklist to ensure all items that needed to accompany the residents during relocation, return with them back to the facility.
 - 5.9.6 The on-duty manager or administrator in-charge, in conjunction with Executive Director and/or designee will facilitate return to the evacuated location, including transportation.

6. If for any reason an evacuated location is deemed permanently uninhabitable, Grafton's Facility Development Administrator in concert with Executive Director will promptly begin a search for alternate locations. If for any reason Grafton is unable to secure alternate locations, the organization will help to locate comparable services elsewhere for those residents affected.
7. Staff will be staying with the residents for perhaps an extended period. They are strongly advised to keep their own emergency kits in their personal vehicles for quick retrieval. Administrative support staff may be requested to assist with residents.

Sheltering in Place

The PRTF campus is preferable to shelter in place due to having Emergency Power Generators. Supplies and valued possessions will be move available, and many people do not enjoy having to confront a new environment and unfamiliar people if their only choice is to move to a public shelter. Our residents may in general fall into this category. In the case of a site evacuation order from the local authorities, however, we must relocate.

It may happen that during a disaster the situation is at first safe enough to allow sheltering in place, but later becomes less safe and necessitates moving from the location into a public or other shelter. In this event, section **"E. Site Evacuation"** will be implemented. Supplies stored for sheltering in place will need to be brought to the new shelter location.

- 1.0 Staff will follow the usual daily procedure of taking each resident's prescription medications box with them if the facility is site evacuated.
- 2.0 Staff also take a notebook or portable file containing emergency information and permission to treat documentation for each resident in the building.
- 3.0 Facility assigned staff will have a cell phone or walkie-talkie for communication in case power outage also causes telephone service to be cut off.
- 4.0 The on-duty manager or administrator in-charge will be considered the supervisor of the location and will call or visit at minimum three times per day or as often as needed to manage the situation. The on-duty manager or administrator in-charge may delegate the supervision duties if the supervisor is on staff.

F. BOMB THREAT

In the event of a bomb threat, the residents should not be informed. Every effort should be made to determine the nature and scope of the threat so the information can be relayed to the authorities. Every bomb threat should be regarded as legitimate, and all appropriate actions taken to protect the safety of everyone.

1. The person receiving the threat should remain calm and get as much information as possible:
 - Where the bomb is located
 - When is it expected to detonate
 - Who is making the call
 - Keep caller on the line for as long as possible for tracking the call purposes
2. The person receiving the threat immediately notifies on-duty manager or administrator in-charge.
3. The on-duty manager shall notify the police immediately and follow their direction explicitly.
4. If circumstances deem it necessary or if the police recommend building(s) evacuation, the on-duty manager shall activate **"FIRE ALARM SYSTEMS"** campus-wide to signal immediate evacuation of **"ALL BUILDINGS"**.

5. Once Fire Alarm Systems are activated all occupants shall respond in accordance with established fire evacuation procedures.
6. The on-duty manager shall account for all occupants by designating a person to collect and check all emergency drill record sheets for all groups, verify complete evacuation status then report this information to the on-duty manager.
7. The on-duty manager, administrator in-charge or designee shall meet Emergency Services Personnel upon their arrival and coordinate any requested assistance.
8. All occupants shall remain at designated area until the person in-charge receives Emergency Services Personnel permission to move.
9. The on-duty manager, administrator in-charge or designee shall request Emergency Service Personnel search vehicles first then search Residential Treatment Center and/or educational areas.
10. With Emergency Service Personnel escort, on-duty manager and medical staff shall enter Residential Treatment Center and/or educational areas to retrieve vehicle keys, two-way communication devices, medications, and documentation.
11. Staff and residents shall remain at the Emergency Service Personnel identified location until the on-duty manager or administrator in-charge gives further instructions.
12. If current conditions make remaining outdoors untenable, the on-duty manager after consulting with Emergency Service Personnel and administrator in-charge will implement section "E. Site Evacuation" procedure.
13. Once the on-duty manager receives "ALL CLEAR" directive from Emergency Service Personnel that all buildings are safe; they will notify all occupants to return to buildings.
14. The on-duty manager shall maintain accurate concurrent documentation to ensure a viable record of the event and attach a copy to emergency drill record sheet.
15. The on-duty manager or administrator in-charge will coordinate completion of a serious incident notification form for each resident involved, and the notification procedures for serious incidents are followed. The serious incident notification forms will be attached to the emergency drill record sheet.
16. The Quality Assurance Supervisor will make notifications to applicable regulatory authorities no later than the next business day.

G. SECURITY THREAT

Grafton does not employ security personnel and therefore depends upon the alertness of current employees to detect security threats. Threats could come from current or former employees, residents, or strangers. In the event of security threat, remember that safety is the utmost concern. The Grafton code word for security threats is "**Dr. Lock**". When this code word is announced over the announcing system it will be followed by a location which will indicate the location of the threat. As example: "**Dr. Lock Residential Treatment Center Main Lobby,**" would indicate that the threat is currently in the main lobby.

1. The person identifying the threat shall immediately and by any means available notify on-duty manager who will then contact or designate a staff to contact the administrator in-charge.
2. The person notifying the on-duty manager should provide as much information as possible regarding the threat's appearance, weapons, and direction of travel.
3. Any available personnel should immediately move all residents and guests from the vicinity of the threat if possible.
4. After notification to the on-duty manager or administrator in-charge is complete, personnel should remain at a safe distance, keeping the threat under observation without jeopardy.
5. If the threat escalates, personnel should vacate the area immediately or secure the area in which they are located; whichever poses the lowest risk of harm.
6. The on-duty manager or administrator in-charge upon notification of the threat, shall immediately announce, "**Dr. Lock (insert location)**" and repeat once.
7. The on-duty manager or administrator in-charge shall immediately notify the local police providing whatever information is available.
8. Upon announcement of the security threat code word, "**Dr. Lock**", all personnel shall immediately secure their location by every means possible. Once secured, they should remain secured until notified in person that it is safe for the space to be unsecured.
9. The code for friendly entry into a space is "**six knocks**" on the door. At which time, the personnel inside the space should ask for voice identification of the person knocking.
10. The order to end the securing of the facility will only be valid if delivered in person by either the on-duty manager or administrator in-charge or the police.
11. The on-duty manger or administrator in-charge will maintain accurate concurrent documentation to ensure a viable record of the event.
12. The on-call administrator will assess the security threat and make decision of need to complete a serious incident notification form for each resident involved or single serious incident notification form for the event.
13. Once secured from the threat, the on-duty manager or administrator in-charge will complete the serious incident notification form per assessment decision in "step 12". The notification procedures for serious incident are followed.
14. The Quality Assurance Supervisor will make notifications to applicable regulatory authorities no later than the next business day.

H. VEHICLE EVACUATION

Evacuation of a vehicle could become necessary due to a mechanical failure, introduction of a hazardous material, or a fire onboard. Due to the needs of residents served, Grafton will exercise exiting a van simulating emergency twice annually. A Grafton driver transporting residents, while during a routine trip, will conduct a van evacuation of all passengers. The purpose of evacuation drill will be to assess the time and capacity of individuals to exit a van during an emergency.

1. Special attention will be given to the time required to exit the vehicle and position all passengers at a “safe spot” away from the vehicle as pertinent to the situation.
2. Driver and/or additional staff present will take a head count immediately of total persons, accounting for all passengers.
3. Driver and/or additional staff present will telephone for assistance from appropriate local Emergency Services as required.
4. Driver and/or additional staff present will notify the on-duty manager or administrator to make notification of the incident.
5. The on-call administrator will maintain accurate concurrent documentation to ensure a viable record of the event.
6. The on-call administrator will assess the situation and make a decision of need to complete a serious incident notification form for the event.
7. The on-duty manager or administrator in-charge will complete the serious incident notification form per assessment decision in “step 6”. The notification procedures for serious incident are followed.
8. The Quality Assurance Supervisor will make notifications to the applicable regulatory authorities no later than the next business day.

I. IMPLEMENTATION AND EVALUATION OF EMERGENCY DRILLS

1. Emergency procedures are drilled at minimum twice annually and a record of the drill is completed.
2. The Operations Administrator is responsible for review of drill documentation records.
3. The drill record performance review is designed to analyze information results in improvement of performance or affirm satisfactory current practices.