Assisted Living Facilities & Adult Care Comprehensive Emergency Management Plans

· STATUTORY REFERENCE
· GUIDANCE
· CRITERIA

The Henrico County Division of Fire’s Office of Emergency Management provides this template in an effort to guide facilities in the development of their personalized emergency operations plans. Submission of your plan to the Office of Emergency Management is may be required by the overseeing State licensure agency, and is recommended to be used in conjunction to guidance offered by the Office of the Fire Marshal in review of facility planning.

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Assisted Living Facilities

Assisted living facilities (ALFs) are non-medical residential settings that provide or coordinate personal and health care services, 24-hour supervision, and assistance for the care of four or more adults who are aged, infirm or disabled. This care may be provided in one or more locations.

Assisted living facilities are **not** nursing homes. A nursing home is a facility in which the primary function is the provision, on a continuing basis, of nursing services and health-related services for the treatment and inpatient care of two or more non-related individuals. Nursing homes are regulated by the Virginia Department of Health, and information for facilities in Henrico County can be found on the local Health Department’s web site at [http://www.co.henrico.va.us/departments/health/long-term-care/](http://www.co.henrico.va.us/departments/health/long-term-care/). An emergency planning guide for these facilities can be found on that web page.

Virginia Administrative Code 22 VAC 40-72-930
Rules establishing standards

**22VAC40-72-930**. Emergency preparedness and response plan.

A. The facility shall develop a written emergency preparedness and response plan that shall address:

1. Documentation of contact with the local emergency coordinator to determine
   
   i. local disaster risks,
   
   ii. communitywide plans to address different disasters and emergency situations, and
   
   iii. assistance, if any, that the local emergency management office will provide to the facility in an emergency.

2. Analysis of the facility's potential hazards, including severe weather, fire, loss of utilities, flooding, work place violence or terrorism, severe injuries, or other emergencies that would disrupt normal operation of the facility.

3. Written emergency management policies outlining specific responsibilities for provision of:
   
   a. Administrative direction and management of response activities;
   
   b. Coordination of logistics during the emergency;
c. Communications;
d. Life safety of residents, staff, volunteers, and visitors;
e. Property protection;
f. Continued provision of services to residents;
g. Community resource accessibility; and
h. Recovery and restoration.

4. Written emergency response procedures for assessing the situation; protecting residents, staff, volunteers, visitors, equipment, medications, and vital records; and restoring services. Emergency procedures shall address:
   a. Alerting emergency personnel and facility staff;
   b. Warning and notification of residents, including sounding of alarms when appropriate;
   c. Providing emergency access to secure areas and opening locked doors;
   d. Conducting evacuations and sheltering in place, as appropriate, and accounting for all residents;
   e. Locating and shutting off utilities when necessary;
   f. Maintaining and operating emergency equipment effectively and safely;
   g. Communicating with staff and community emergency responders during the emergency; and
   h. Conducting relocations to emergency shelters or alternative sites when necessary and accounting for all residents.

5. Supporting documents that would be needed in an emergency, including emergency call lists, building and site maps necessary to shut off utilities, memoranda of understanding with relocation sites, and list of major resources such as suppliers of emergency equipment.

B. Staff and volunteers shall be knowledgeable in and prepared to implement the emergency preparedness plan in the event of an emergency.

C. The facility shall develop and implement an orientation and quarterly review on the emergency preparedness and response plan for all staff, residents, and volunteers. The orientation and review shall cover responsibilities for:
   1. Alerting emergency personnel and sounding alarms;
2. Implementing evacuation, shelter in place, and relocation procedures;

3. Using, maintaining, and operating emergency equipment;

4. Accessing emergency medical information, equipment, and medications for residents;

5. Locating and shutting off utilities; and

6. Utilizing community support services.

D. The facility shall review the emergency preparedness plan annually or more often as needed and make necessary revisions. Such revisions shall be communicated to staff, residents, and volunteers and incorporated into the orientation and quarterly review for staff, residents, and volunteers.

E. In the event of a disaster, fire, emergency or any other condition that may jeopardize the health, safety and welfare of residents, the facility shall take appropriate action to protect the health, safety and welfare of the residents and take appropriate actions to remedy the conditions as soon as possible.

F. After the disaster/emergency is stabilized, the facility shall:

   1. Notify family members and legal representatives; and
   2. Report the disaster/emergency to the regional licensing office by the next working day as specified in 22VAC40-72-100.

Statutory Authority §§ 63.2-217 and 63.2-1732 of the Code of Virginia.

Safety and emergency procedures

A. A written emergency preparedness plan shall be developed, reviewed, and implemented when needed. The plan shall address responses to natural disasters, as well as fire or other emergency which disrupts the normal course of operations. The plan shall address provisions for relocating residents and also address staff responsibilities for:
   1. Alerting emergency personnel and sounding alarms;
   2. Implementing evacuation procedures including the evacuation of residents with special needs;
   3. Using, maintaining and operating emergency equipment;
   4. Accessing resident emergency medical information; and
   5. Utilizing community support services.

B. All staff shall participate in periodic emergency preparedness training.

C. Staff shall have documented knowledge of, and be prepared to implement, the emergency preparedness plan in the event of an emergency.

D. At least one telephone shall be available in each area to which residents are admitted and additional telephones or extensions as are necessary to ensure availability in case of need.

E. In the event of a disaster, fire, emergency or any other condition that may jeopardize the health, safety and well-being of residents, the organization shall notify the OLC of the conditions and status of the residents and the licensed facility as soon as possible.

F. The nursing facility shall have a policy on smoking.

Statutory Authority - §§32.1-12 and 32.1-127 of the Code of Virginia.


Effect of Amendment The March 1, 2007 amendment, in subsec. E, changed "center" to "OLC". Part III Resident Services

Adult Day Care Centers (ADCC)

Adult day care centers are regulated, non-residential facilities that provide a variety of health, social and related support services in a protective setting during part of the day to four or more aged, infirm or disabled adults who reside elsewhere.

Plan for emergencies.

A. A written plan shall be developed for each of the following situations:
(i) medical and mental health emergencies,
(ii) wandering and missing participants,
(iii) building evacuations,
(iv) severe weather and loss of utilities, and
(v) transportation emergencies. Professionals in the appropriate fields shall be consulted in preparing these plans.

B. Plan for medical and mental health emergencies.

1. There shall be instructions for handling medical emergencies such as:
   (i) calling the rescue squad, ambulance service, or participant's physician, and
   (ii) providing first aid and CPR, if appropriate.

2. A specific plan shall be developed for handling mental health emergencies such as, but not limited to, catastrophic reaction or the need for a temporary detention order.

3. Pertinent medical information and history shall be made available to the rescue squad or sent with the participant if hospitalized, or both. This should include any advance directive information.

4. The participant's family or personal representative and physician shall be notified as soon as possible.

C. Plan for wandering and missing participants.

1. If the center serves participants who wander, a door bell or alarm shall be installed or attached to alert staff to wandering participants.

2. A plan shall be developed that outlines the procedures to be followed in the event of a missing participant. The procedure shall include, but not be limited to:
   a. Notification of internal staff;
   b. Areas to be searched;
   c. Notification of emergency personnel;
   d. Notification of family or personal representative; and
   e. Expectations upon locating the participant, such as medical attention and documentation requirements.
D. Plan for building evacuation.

1. There shall be a written plan for emergency evacuations. The plan shall include procedures to be followed in the event of a fire or other emergency.

2. A drawing, showing exits, telephones, fire extinguishers and fire alarm boxes, if any, shall be posted.

3. A copy of the emergency plan shall be posted in a conspicuous place on each floor of each building.

4. Evacuation drills shall be held in accordance with the requirements of the Virginia Statewide Fire Prevention Code.

5. A record of the required evacuation drills shall be kept at the center for one year. The record shall include:
   a. The date of the drill;
   b. The time required to evacuate;
   c. The total number of staff and participants involved;
   d. Problems encountered, if any; and
   e. The names of any participants who were present in the center and who did not take part in the drill, and the reasons.

E. Plan for severe weather and loss of utilities.

1. A written plan shall be developed that shall include general procedures to be followed during loss of utilities or during severe weather, including plans for relocating participants if necessary.

2. Emergency equipment shall be available for use in the event of loss of utilities such as, but not limited to, a working flashlight, extra batteries, a portable radio, and a telephone.

3. A plan shall be in place to provide an emergency meal and a supply of water to all participants in the event that meals are not able to be prepared.

F. Plan for transportation emergencies.

1. For centers that are responsible for transporting participants, a plan shall be developed that outlines the procedures to be followed in the event of a vehicle emergency. This plan shall be readily accessible in the vehicle and shall include:
   a. A method to communicate with the center;
b. A list of participants’ names;

c. Telephone numbers for vehicle repair; and

d. Options for alternate transportation.

2. For centers that contract transportation, the center shall ensure that emergency procedures are in place.

3. A plan shall be developed that outlines the procedures to be followed in the event that a participant’s scheduled transportation does not arrive or the participant is stranded at the center.

G. A generic number such as 911 shall be posted in a conspicuous place near each telephone. If a generic number is not available, the following numbers shall be posted near each phone:

1. A physician or hospital;
2. An ambulance or rescue squad service;
3. The local fire department; and
4. The local police department.

H. A written record shall be made and kept on file of all emergencies. This record shall include:
   1. Date;
   2. Type of emergency;
   3. Names of any participants requiring medical treatment;
   4. Description of the outcome of the emergency; and
   5. Date and time other persons or agencies were contacted, utilized, and notified.

I. The Department of Social Services, Division of Licensing Programs, shall be notified within 24 hours following the incident any time the police or fire department must be called because of an emergency such as fire, natural disaster, or criminal activity.

Statutory Authority §§ 63.2-217 and 63.2-1733 of the Code of Virginia.

Historical Notes Derived from VR615-21-02 § 7.7, eff. April 1, 1987; amended, Virginia Register Volume 16, Issue 12, eff. July 1, 2000.
(h) Standard: Emergency plan and procedures.

(1) The facility must develop and implement detailed written plans and procedures to meet all potential emergencies and disasters such as fire, severe weather, and missing clients.

(2) The facility must communicate, periodically review, make the plan available, and provide training to the staff.
EMERGENCY MANAGEMENT PLANNING GUIDANCE FOR ADULT CARE FACILITIES

The following minimum criteria are to be used when Comprehensive Emergency Management Plans (CEMP) for all Residential Health Care Facilities, including, but not limited to Adult Day Care (ADC), Assisted Living Facilities (ALFs), Nursing Homes, Hospitals, and other Residential Health Care Providers. The criteria will serve as the recommended plan format for the CEMP. Henrico County Emergency Management is available to review the documents submitted in this template; however, HEM does not serve as a ratifying or approval agency for the plans. The purpose of the template is to assist providers in the development of their plans to be in compliance with regulations stated in 22VAC40-72-930. These minimum criteria satisfy the basic emergency management plan requirements of 22VAC40-72-930.

These criteria are not intended to limit or exclude additional information that facilities may decide to include in their plans in order to satisfy other requirements, or to address other arrangements that have been made for emergency preparedness. Any additional information that is included in the plan will not be subject to review by Henrico County Emergency Management personnel, although they may provide information comments.

Additional resources can be found online at: http://www.vdh.virginia.gov/LHD/henrico/LTCF/EmergencyPlanning/1_Emergency_Planning_Guide_forLTCF_.pdf
EMERGENCY MANAGEMENT PLANNING CRITERIA FOR ADULT CARE FACILITIES

Use this form as a cross-reference to your plan, by listing the page number and paragraph where the criteria are located in the plan on the line to the left of each item. This will ensure accurate review of your facility’s plan if you choose to submit it for review by Henrico County Emergency Management personnel.

I. INTRODUCTION

A. Provide basic information concerning the facility to include:

1. Name of facility, address, telephone number, emergency contact telephone number and pager number if available, and fax number, type of facility and license.

2. Owner of facility, address, telephone.

3. Year facility was built, type of construction and date of any subsequent construction.

4. Name of Administrator, address, work/home telephone number of his/her alternate.

5. Name, address, work and home telephone number of person implementing the provisions of this plan, if different from the Administrator.

6. Name and work and home telephone number of person(s) who develop this plan.

7. Provide an organizational chart, including phone numbers, with key management positions identified.

***As a note, this contact information should be updated at least quarterly or as soon as contact information changes***

B. Provide an introduction to the Plan that describes its purpose, time of implementation, and the desired outcome that will be achieved through the planning process. Also provide any other information concerning the facility that has bearing on implementation of this plan.

II. AUTHORITIES AND REFERENCES

A. Identify the legal basis for plan development and implementation to include statutes, rules and local ordinances, etc. (why the plan is being written)

B. Identify reference material used in the development the Plan.

C. Identify the hierarchy of authority in place during emergencies. Provide an organizational chart, if different from the previous chart required.
III. HAZARD ANALYSIS

A. Describe the potential hazards that the facility is vulnerable to such as tornadoes, flooding, fires, hazardous materials from fixed facilities or transportation accidents, proximity to a nuclear power plant, power outages during severe cold or hot weather, etc. Indicate past history and lessons learned.

B. Provide site-specific information concerning the facility to include:

1. Number of facility beds, maximum number of clients on site, average number of clients on site.

2. Type of clients served by the facility to include but not limited to:
   a. Clients with Alzheimer Disease.
   b. Clients requiring special equipment or other special care, such as oxygen or dialysis.
   c. Number of clients who are self-sufficient.

3. Identification of which flood zone facility is in as identified on a Flood Insurance Rate Map.

4. Proximity of facility to a railroad or major transportation artery (per hazardous materials incidents).

5. Identify if facility is located within 10 mile or 50 mile of emergency planning zone of a nuclear power plant.

IV. CONCEPT OF OPERATION

This section of the plan defines the policies, procedures, responsibilities and actions that the facility will take before, during and after any emergency situation. At a minimum the facility plan needs to address direction and control, notification, evacuation and sheltering.

A. Direction and Control - Define the management function for emergency operations. Direction and control provide a basis for decision-making and identifies who has the authority to make decisions for the facility.

1. Identify, by title who is in charge during an emergency, and one alternate, should that person be unable to service in that capacity.

2. Identify the chain of command to ensure continuous leadership and authority in key positions.

3. State the procedures to ensure timely activation and staffing of the facility in emergency functions.
4. State the operational and support roles for all facility staff. (This will be accomplished through the development of Standard Operating Procedures, which should be attached to this Plan).

5. State the procedures to ensure the following needs are supplied:

   a. Emergency power, natural gas or diesel. If natural gas, identify alternate means should loss of power occur which would effect the natural gas system. What is the capacity of emergency fuel system?

   b. Transportation (may be covered in the evacuation section).

B. Notification - Procedures must be in place for the facility to receive timely information on impending threats and the alerting of facility decision makers, staff and clients of potential emergency conditions.

   1. Define how the facility will receive warnings.

   2. Define how key staff will be alerted.

   3. Define the procedures and policy for reporting to work for key workers.

   4. Define how clients will be alerted and the precautionary measures that will be taken.

   5. Identify alternative means of notification should the primary system fail.

   6. Identify procedures for notifying those facilities to which facility clients will be evacuated.

   7. Identify procedures for notifying families of clients that facility is being evacuated or closed.

C. Evacuation - Describe policies, roles, responsibilities, and procedures for the evacuation of clients from the facility.

   1. Identify the individual responsible for implementing facility evacuation procedures.

   2. Identify transportation arrangements made through mutual aid agreements or understandings that will be used to evacuate clients (copies of the agreements should be attached).
3. List vehicles that will be used in the event of an evacuation (i.e. personal cars, facility owned vans, etc…)

4. List titles of personnel responsible for operating vehicles

5. Describe transportation arrangements for logistical support to include moving records, medications, food, water and other necessities.

6. Identify the pre-determined locations where clients will evacuate.

7. Provide a copy of the mutual aid agreement that has been entered into with a facility to receive clients (copies should be current, signed each year).

8. Identify evacuation routes that will be used and secondary routes that would be used should the primary route be impassable.

9. Specify the amount of time it will take to successfully evacuate all clients to the receiving facility.

10. Identify the staff who will be required to accompany evacuees to the receiving facility.

11. Identify the staff who will be required to stay with evacuees if a public shelter is utilized.

12. Identify procedures that will be used to keep track of clients once they have been evacuated (to include a log system). Include the designated person(s) by title who will be maintaining this system.

13. Determine what belongings and how much should each client take.

14. Establish procedures for responding to family inquiries about clients who have been evacuated.

15. Establish procedures for ensuring all clients are accounted for and are out of the facility.

16. Determine at what point to begin the pre-positioning of necessary medical supplies and provisions.

17. Specify at what point the mutual aid agreements for transportation and the notification of alternate facilities will begin.

D. Re-Entry - Once a facility has been evacuated, procedures need to be in place for allowing clients to re-enter the facility once
authorized to do so by the appropriate emergency services agency.

1. Identify by title who is the responsible person(s) for authorizing re-entry to occur for the facility.

2. Identify procedures for inspection of the facility to ensure it is structurally sound.

V. INFORMATION, TRAINING AND EXERCISES

This section shall identify the procedures for increasing employee and clients' and their families' awareness of possible emergency situations and providing training on their emergency roles before, during and after a disaster.

A. Identify how key workers will be instructed in their emergency roles during non-emergency times.

B. Identify a training schedule for all employees and identify the provider of the training.

C. Identify the provision for training new employees regarding their disaster related role(s).

D. Identify a schedule for exercising all or portions of the disaster plan on at least an annual basis.

E. Establish procedures for correcting deficiencies noted during training exercises.

VI. ANNEXES

The following information needs to be included in a solid plan, yet placement in an annex is optional, if the material is included in the body of the plan.

A. Roster of employee and companies with key disaster related roles.

1. List the names, addresses, and telephone numbers of all staff with disaster related roles.

2. List the name of the company, contact person, telephone number and address of emergency service providers such as transportation, emergency power, fuel, water, police, fire, emergency medical services, etc.

***AS A NOTE- THIS INFORMATION MUST BE MAINTAINED AND UPDATED AT LEAST QUARTERLY OR AS SOON AS CONTACT INFORMATION CHANGES***

B. Agreements and Understandings

1. Provide copies of any mutual aid agreement entered into pursuant to the fulfillment of this plan. This is to include reciprocal host facility agreements, transportation
agreements, current vendor agreements or any other agreement needed to ensure the operational integrity of this plan.

C. Evacuation Route Map

1. A map of the evacuation routes and description of how to get to a receiving facility for drivers.

D. Support Material

1. Any additional material needed to support the information provided in the plan.

2. Copy of the facility’s fire safety plan that is approved by the Henrico County Division of Fire Office of the Fire Marshal.