



**Bomb Threat**

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**B**



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**M**



# 1

## Suspicious Package/Item

- **Identify any unusual items** such as boxes, packages, bags, etc.
- If an unusual item is found
  - **DO NOT** approach , disturb, or touch it
  - **Immediately** contact the facility emergency coordinator
  - **Evacuate** everyone away from the area surrounding the package/item saying:  
**“We have an emergency in the building. We must evacuate according to our plan. This is not a drill.”**

# 2

## Remember

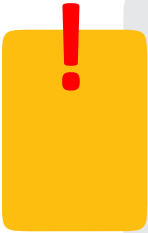
- Call 911 if a bomb threat is received
- Coordinate all actions with **law enforcement officials**
- If a suspected bomb is located within the building, the investigation will be conducted by law enforcement officials with jurisdiction over such matters

# 3

## Bomb Threat is Called In

- Be **calm and courteous**
- **DO NOT** interrupt the caller
- **Keep the caller on the line** as long as possible
- Instruct staff members to **discreetly and quietly conduct a thorough search** of their areas and departments
- **Ask and record** information

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## Record Information

• **Listen, pay attention** to, and **circle** that which applies:

<b>Gender</b>	Male	Female
<b>Age</b>	Adult	Child

### **Caller's Voice** *(circle all that apply)*

Calm	Angry	Slow	Excited	Loud
Disguised	Broken	Sincere	Stressed	Slurred
Nasal	Stutter	Lisp	Accent	Normal
Coughing	Crying	Deep	Distinct	Soft
Laughter	Ragged	Rapid	Raspy	

### **Background Sounds** *(circle all that apply)*

Animal	House Noise	Kitchen Noise	Street Noise	Booth
PA System	Conversation	Music	Motor	Clear Static
Office	Factory	Local	Long Distance	Machinery

### **Threat Language** *(circle all that apply)*

Incoherent	Message read	Taped
Irrational	Profane	Well-spoken

• **Ask** the caller:

- **When** is the bomb going to explode? \_\_\_\_\_
- **Where** is the bomb right now? \_\_\_\_\_
- What does it **look like**? \_\_\_\_\_
- What **kind of bomb** is it? \_\_\_\_\_
- What will **cause it to explode**? \_\_\_\_\_
- **Did you** place the bomb? \_\_\_\_\_
- **Why?** \_\_\_\_\_
- Where are you calling from? \_\_\_\_\_
- What is your name? \_\_\_\_\_

# Cold Weather Procedures



**The facility temperature reaches 65 degrees Fahrenheit or lower and remains so for four hours.**

**1**

## **Next Steps**

- Initiate NHICS
- Check on residents' comfort level and never leave residents unattended near a heat source
- Consider the use of heating pads and electric blankets, but check temperature often and don't allow residents to adjust the heat
- Evacuate residents to another facility if temperatures remain low and residents' safety and welfare are jeopardized
- Initiate/continue actions to ensure heat restoration as soon as possible
- Consider clustering residents into the warmest common areas of the facility until heat is restored
- Notify NDDoH of unusual occurrence and activation of facility emergency operations plan

# Tornado / Severe Thunderstorm



## Monitor the weather

1

### Immediate Response

#### TORNADO WATCH:

- **Notify the Administrator** and staff that a Tornado Watch has been issued for your area and include time frame of warning
- **Begin monitoring the storm** system on radio, TV, and/or Weather Alert Radio
- Have a battery powered portable radio available to backup commercial and auxiliary electrical power systems
- Be prepared to transition from a Tornado Watch to a Tornado Warning with little or no advance warning

2

### Next Steps

#### TORNADO WARNING:

- **Notify the Administrator** and staff that a Tornado Warning has been issued for your area and include time frame of warning
- **Close** all exterior doors and windows
- Close all interior doors
- Ensure all staff and residents are moved to **the interior hallways** and have a **pillow and blanket** to help protect their head and body
- Check restrooms and vacant rooms for visitors or stranded residents and escort them to shelter area
- If your facility has a basement, move everyone to the basement instead of hallways
- Staff and residents will remain at their Tornado Warning shelter area until the warning has expired



## R.A.C.E.

- **Rescue** anyone in immediate danger
- **Alert** other staff members of the fire and location over the intercom system. Pull the nearest fire alarm and call 911
- **Contain** the fire. Close all doors and windows adjacent to the fire. Close all fire doors. Shut off all fans, ventilators, and air conditioner as these will feed the fire and spread smoke throughout the building
- **Extinguish** if the fire is small. Aim the extinguisher low at the base of the fire and move slowly upward with a sweeping motion

## 1

### Immediate Response: A Small Internal Fire

**Notify 911** that an actual emergency situation is in progress.

Provide the 911 dispatcher with the following information:

- Name of the facility
- Address and nearest cross street
- Floor number, room number, etc.
- What is burning (electrical, trash, etc.)
- **Do not hang up**—let the person on the other end of the line end the conversation as other information might be needed
- **Small fire—attempt to extinguish it**
- Use the appropriate fire extinguisher
  - Multipurpose—Dry chemical extinguishers labeled ABC are effective for fighting most types of fires

## 2

### Immediate Response: Widespread Internal Fire

- Fire is **widespread** or cannot be immediately extinguished
- **Notify 911** that an actual emergency situation is in progress. Provide the 911 dispatcher with the following information:
  - Name of the facility
  - Address and nearest cross street
  - Floor number, room number, etc., and
  - What is burning (electrical, trash, etc.)
  - **Do not hang up**—let the person on the other end of the line end the conversation as other information might be needed
- **Commence evacuation** according to EOP procedures. Safely move residents: assist ambulatory, transfer into wheelchairs, transfer onto stretchers or by placing residents on a blanket on the ground and pulling the resident to safety
- If safe to do so, **shut off** oxygen or other medical gases that could contribute to the spread of fire
- **Coordinate** emergency operations with the fire department
- **Organize staff members** to stay with the group(s) and prevent panic



## 3

### Immediate Response: Fire Alarm

- **Secure workplace**, close all hallway and room doors to contain the fire
- **If needed, begin evacuation** of residents, visitors, and personnel
- **Do not** attempt to use an elevator. Use stairs to exit the building; always hold the handrail, and be very careful of footing while descending
- Residents, visitors, and personnel with mobility issues should be moved according to EOP with equipment as indicated

## 4

### Immediate Response: An External Fire

- **Monitor** media and local alert system for evacuation reports and instructions
- **Monitor** residents and staff for health complications from smoke
- **If fire threat is increasing, activate NHICS**
- **Preemptive methods to mitigate smoke and fire risk**
  - Close all windows, doors, and vents
  - If using HVAC, set to re-circulate indoor air
  - If possible, use a high efficiency particulate air filter
  - Prepare evacuation bags, records, and ID tags
  - Contact transportation companies/NDDoH to alert them you may need to evacuate
- **In case of immediate threat**
  - Activate emergency procedures for evacuation
  - Move residents to a pre-designated staging area for rapid evacuation
  - If you smell gas, and it is safe to do so, shut off the gas. Do not do so unless need is certain, as only the gas company can turn it back on
  - Contact your transport companies
  - Contact resident families or responsible parties and NDDoH
  - Leave a message on your facility phone with a contact number and information regarding your status



### Remember

- Account for all staff members and residents
- The situation can only be deemed “under control” after the local authorities have concluded emergency operations and incident commander has deemed the situation as “safe.” At this point “All Clear” can be announced.



# Flood

## 1

### Immediate Response

- Residents should be evacuated to the closest safe area available, preferably high ground
- **Activate NHICS**
- **Unplug appliances** if time permits you to do so safely and there is an imminent threat of water entering the building
- If time permits, store or tie down furniture
- If water is not contaminated, fill up emergency supply receptacles for water
- **Turn off water and electricity**
- **Avoid** walking through floodwaters
- If you come in **contact with floodwaters, wash hands with soap and disinfected water**
- **Gather critical supplies to take to higher ground/evacuation (i.e., water, medications, communications devices, blankets, and important health records). Follow instructions from incident commander/local authorities for evacuation**



## 2

### Next Steps

- **If safe, check for structural damage and repair** before calling NDDoH Health Facilities
- **Check for utility leaks or compromise** such as gas, water, and sewage line damage
- **Keep the power off** until an **electrician has inspected** for safety
- **Boil all water** for drinking and food preparations as directed by local authorities or if contamination is suspected
- **Dispose of** any food that has come in contact with flood waters, including canned food
- Contact NDDoH Health Facilities for approval to move residents and staff back into the facility

# Hazardous Material/Waste Spill



- If **INTERNAL**, notify **911** that a hazardous material or hazardous waste spill incident is in progress. **Provide the dispatcher** with as much **relevant information** as possible
- If **EXTERNAL**, Local authorities and/or emergency management will typically notify the facility of an incident. **Listen to information sources** (local television or radio) for the most up-to date news and instructions.

1

## Immediate Response: Internal

- Determine if a hazardous chemical or gas leak might endanger the residents and staff; refer to **Materials Safety Data Sheet (MSDS)** if appropriate
- **Evacuate residents to a non-impacted area** of the building as indicated by situation and **set up controlled access** to the impacted area
- **Assess** residents for **signs of distress**
- Provide appropriate **personal protective equipment** to residents and staff as indicated
- Initiate NHICS
- Coordinate with **NDDoH, fire department, law enforcement, and emergency management** to determine if evacuation is necessary



## Remember

- Account for all staff members and residents
- The situation can only be deemed “under control” after the local authorities have concluded emergency operations and incident commander has deemed the situation as “safe.” At this point, “All Clear” can be announced



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# Hazardous Material/Waste Spill

2

## Immediate Response: External

- Initiate NHICS
- Close windows, doors, shut down HVAC, to protect inside air quality if fumes are suspected
- Monitor road conditions and advise staff of restrictions/alternate routes
- Coordinate with fire, law, emergency management and NDDoH if evacuation or prolonged shelter in place is anticipated

!

## Remember

- Account for all staff members and residents
- The situation can only be deemed “under control” after the local authorities have concluded emergency operations and incident commander has deemed the situation as “safe.” At this point, “All Clear” can be announced



# Hot Weather Procedures



When the facility ambient room temperature reaches 85 degrees Fahrenheit or higher and remains so for four hours

1

## Immediate Response

- Assess residents for signs of discomfort/distress
- Initiate NHICS
- **Consider relocating residents** to a cooler part of the facility
- **Check on residents' comfort** level every two hours or more frequently as needed
- Provide light clothes and bedding
- Encourage residents to **take in more fluids** and **keep residents hydrated**
- Provide cold washcloths
- Open windows to let cooler outside air in and utilize fans to move air. If outside temps are warmer, keep windows closed and shades drawn
- Initiate/continue facility specific actions to restore HVAC



## Remember

- **Notify 911** if a resident/staff appears to be suffering from heat-related illness such as cramps, heat exhaustion, and/or heat stroke
- Assess situation and refer to EOP to determine course of action: **shelter in place** or **evacuation**



# Pandemic Influenza

## 1 Initial Response

- Initiate NHICS
- **Contact local health department** to discuss the specifics on symptom management and the availability and use of vaccines and antiviral medications
- **Post signs** for cough etiquette and other hygiene measures
- **Implement** specified infection control policies and procedures
- Follow **staffing guidelines** as stated in the plan and recommendations by the health department
- **Evaluate** residents, employees, visitors for symptoms; instruct employees to self-report symptoms and exposure and to not work if sick
- **Ensure** that **adequate supplies** of food, water and medical supplies are available from vendors
- Consider restricting visitors and closing to new admissions during active outbreak
- Implement respiratory protection plan for staff if recommended by health department or other regulatory entities



## Remember

- Limit contact between infected and non-infected persons
  - Isolate infected persons
  - Limit contact of non-essential persons and visitors with the residents who are ill
  - Decontaminate any areas that have been in contact with infected individuals
  - Conduct ongoing cleansing of high contact items and areas
  - Follow local health department guidance

## 2

### Mass Prophylaxis

- In the case of a rare, infectious disease emergency, community-wide antibiotic or vaccine dispensing may take place.
- Contact the local public health unit and NDDoH to see if PODS (point of dispensing sites) have been established and if are being activated.



# Missing Resident

1

## Immediate Response

- **Record time** the resident is discovered to be missing and when and where they were last seen
- **Verify** that the resident has not been signed out
- **Initiate NHICS**
- **Make copies** of the missing **resident's photograph**
- **Search the facility and grounds—BE THOROUGH!**
  - **Assign staff members** specific areas to be searched
  - **Look under** beds and furniture, in walk-in refrigerators/freezers, closets, storage rooms, or anywhere a frightened resident may be hiding
  - **Report back** to incident commander when areas have been searched

2

## After 15 Minutes

- **Notify police department** or law enforcement; **call 911**
- Provide the following to the police
  - **Description of the resident** or picture if police are on-site
  - Description of clothing, method of ambulating, cognitive status
  - **Resident photo** if available
- **Notify**
  - **Responsible party or next of kin** that resident is missing and search is under way
  - **NDDoH**

3

## Facility Search Unsuccessful

- Assign available staff to start a **neighborhood search**
- **Copy and carry a picture** of the missing resident



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# Missing Resident

4

## Upon Finding the Resident

- Examine the resident for injuries and update the care plan
- **Notify**
  - **All** staff members, residents, and other responders / searchers that the resident has been found
  - Attending **physician** of resident's status
  - **Responsible party or next of kin**
  - **NDDoH**

5

## Remember—Incident Reporting

- Complete a detailed incident report, including facility and state reporting process
- **Document**
  - Circumstances and factors that lead to the incident
  - Interventions/strategies implemented
  - Care rendered to the resident
  - Notifications
  - Physician's orders

!

## Additional Guidelines

- Assess other residents for signs of stress
- Take immediate action to decrease risk of repeated event, either with the resident or others. Prepare key messages in case contacted by media



# Utility Outage

## 1

### Immediate Response

- **Determine** if the **loss** of a utility (electric, gas, propane, water, etc.) is due to an incident occurring at the facility, like a rupture, leak, fire, or collision
- **Determine** the **impact** of service disruption and duration
- **Notify** the appropriate **utility company or companies** of the outage, and **contact 911** if there is an emergency
- Account for staff and all residents
- Activate NHICS
- Activate back-up power supply and emergency lighting
- Assess residents for signs of distress. Reassure and treat as needed.

## 2

### Next Steps

- Ensure back-up systems (emergency generators, lights, flashlights, fuel and batteries, water, food supply, etc.) are available and determine how long supplies will last should outage be prolonged
- Monitor residents to ensure they are safe and check on equipment used by residents (i.e. call lights, oxygen concentrators, electric beds, pumps)
- Initiate proactive and preventive measures to safeguard resources
- Activate emergency meal preparation plan
- Initiate cold and hot weather procedures, if necessary



### Remember

- Establish and maintain communication with response teams including local utilities and law enforcement
- Assess situation and refer to EOP to determine course of action: **shelter in place** or **evacuation**





# Active Shooter

**!** Immediately report any threats or violent acts to a Supervisor, Administrator and/or Medical Director

## **1** Immediate Response

- If there is **screaming, fighting, weapons involved**, or any **threat of danger**, **call 911**
- **Announce** facility code to warn other staff of situation (e.g., “Code Silver”)
- **When in doubt, call 911** and provide the dispatcher with as much specific and relevant information as possible
- **Initiate NHICS**
- Residents should be moved to the closest safe area available
- **Coordinate** internal emergency operations with **law enforcement**
- **Calling person stay on line with dispatcher and be prepared to give:**
  - Location of incident and nearest entrance
  - Number of assailants
  - Number of hostages/people at risk in immediate area
  - If assailant has left, direction taken, time lapsed, means of travel



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# Active Shooter

## 2

### Specific Instances

- **Armed Assailant**
  - Assist residents and visitors to take cover behind doors, heavy furniture, on floor
  - **Lock or barricade** the door to safe area if possible to keep assailant out
  - One staff stay on line with law enforcement to give and get continuous updates
- **Loud talking, arguing by staff and/or visitors without physical contact**
  - De-escalate the situation by asking the person(s) to calm down and discuss what is bothering them
  - Ensure that there are at least two employees with the individual(s) at all times
  - Ask the individual to leave the premises
  - Determine whether disciplinary action is required if staff are involved in the violent behavior
- **Non Resolution**
  - If person does not willingly leave, call 911. Once perpetrator has left the building, initiate facility lock-down procedures; law enforcement may be needed

## 3

### Next Steps

- The situation can only be deemed “under control” after the local authorities have concluded emergency operations and incident commander has deemed the situation as “safe”. At this point “All Clear” can be announced
- Account for all staff members and residents
- Assess residents and staff for signs of physical/psychological distress and provide first aid



# Evacuation

## 1

### Immediate

- Activate NHICS
- Activate emergency transportation plan and **contact local emergency manager**
- **Contact NDDoH and ask for the Case Manager**  
During working hours: **701-328-2270**  
After hours: **1-800-472-2121**

## 2

### Pending

- Activate NHICS
- Determine which residents might be able to go to families and contact in advance
- Determine number of residents needing transportation
- Contact receiving facility(s)
- Staff report to staging area for assignment
- Residents are assisted to the Assembly Area for triage. Complete **HC Standard** Information and prepare Facility Evacuation ID tags.
- **Assess**
  - Total beds and types of beds needed
  - Available staff to support transferred resident
- **Organize** resident resources
  - Residents' important belongings/equipment
  - Change of clothes
  - 1 week supply of medications
  - Medication, snacks, and water for transport period
  - Medical charts
- **Evacuate residents** in the order indicated by EOP. Usually ambulatory are evacuated out first, ambulatory moderate care are next, then non-ambulatory frequent care, and non-ambulatory continual care to follow

▶▶▶▶ **Continued** ▶▶▶▶

# Evacuation

3

## Pending—*Continued*

- **Coordinate** with
  - NDDoH and local authorities to determine potential evacuation routes and confirm relocation sites
  - Facility vehicle drivers to evacuate or contact transport company/NDDoH for services/assistance
  - Staff to conduct a final check of the building and a final head count
  - Relocation sites to track residents

4

## Remember

- **Notify**
  - Families of residents and give current resident location
  - NDDoH
  - Local emergency manager
  - Fire
  - Law enforcement
  - Maintenance
- Leave a message on your facility phone with a contact number and information regarding your status
- Consider security needs of evacuated building
- **Keep HC Standard updated** with location of evacuated residents and discharged residents



# Shelter In Place

## 1

### Immediate

- **Identify** safe and unsafe areas of buildings
- **Move and track** residents, staff, visitors, supplies, and equipment from unsafe to safe areas of the buildings
- **Activate NHICS**
- Based on the incident:
  - Select rooms that will provide safe refuge and move residents there
  - Close and lock all windows, exterior doors, and any other openings to the outside. Lockdown the facility.
  - Close the window shades, blinds or curtains if there is danger of explosion

## 2

### Next Steps

- **Account for** all staff members and residents
- **Notify**
  - Local emergency manager and NDDoH
  - Departments to conserve resources if sheltering more than 24 hours
  - External authorities of your situation
- Address staffing needs for the expected duration
- The situation can only be deemed “under control” after the local authorities have concluded emergency operations and incident commander has deemed the situation as “safe.” At this point, “All Clear” can be announced.
- Assess residents and staff for signs of distress and treat as needed
- Communicate status to administrator, local authorities and NDDoH if indicated



### Remember

- **Avoid overcrowding** by selecting several rooms if necessary. Large storage closets, utility rooms, pantries, and copy and conference rooms without exterior windows will work well
- Be prepared to **access essential disaster supplies**, such as non- perishable food, critical medication, battery-powered radios, first aid supplies, flashlights, batteries, duct tape, plastic sheeting, and plastic garbage bags



# Response Contact List

Laminate and post throughout your facility

Fire, Police, Sheriff, EMS	CALL 911
Poison Control	
Administrator	Home: Cell:
Nursing Director	Home: Cell:
Medical Director	Home: Cell:
Director Maintenance	Home: Cell:
City Emergency Manager	
Fire Alarm Monitoring	
Electric Company	
Gas Company	
Telephone Company	
Communications Provider	
Transportation Provider	
Public Works	
County Emergency Management Office	
Public Health Department	
North Dakota Department of Health	
State Licensing and Certification Agency	
North Dakota Long Term Care Association	701.222.0660
North Dakota Long Term Care Ombudsman	

