

Emergency Procedures

Emergency Response Intervention Plan

Emergency Response, Reporting & Review Policy

Incident Response, Reporting and Review Policy

EMERGENCY RESPONSE INTERVENTION PLAN

Definition of an Organizational Emergency: An organizational emergency is any situation which has the potential of escalating in intensity, interfering with normal operations or situations which have the potential of damaging the image of the Agency.

Purpose of an Organizational Emergency Plan: The purpose of the Organizational Emergency Plan is to address situations which require Agency management to take proactive and responsive action to resolve a crisis, minimize its impact and prevent the continuation or escalation. Preparation in responding to an emergency situation will ensure the safety and well-being of those individuals involved, address potential liability issues, and assist in maintaining a positive image of the Agency in the public eye.

Examples of Situations that “May” Require the Implementation of the Organizational Emergency Plan:

- A. Situations Involving Individuals Served:
 - Deaths with extenuating circumstances
 - Serious injury
 - Infectious disease
 - Lost individual
 - Vulnerable Adult or Child Protection Incident
 - Behavioral incident which impacts another person
 - Other behaviors having an adverse effect in the public eye
- B. Staff Related:
 - Staff injury or illness associated with their work
 - Failure to provide adequate supervision
 - Staff failure to make reliable judgements that have an adverse effect
 - Staff failure to competently follow through with care and treatment
- C. Operational Related:
 - Illness or injury related to organizational policy or procedures
 - Illness or injury related to the agency's equipment or buildings
 - Management decisions which adversely affect the well-being of others
 - Mismanagement of financial resources
 - Failure to comply with critical or multiple regulations
 - Allegations of mismanagement or discrimination
- D. Environmental or Terroristic Events:
 - Extreme weather conditions which cause destruction or injury
 - Failure of mechanical or utility systems which have an adverse effect
 - Situations of threats or actions putting clients and staff at risk
 - Fire

Core Members of the Emergency Response Team:

Executive Director
Directors
Registered Nursing Staff
Human Resources Director
Coordinator, Service Support Liaison, Support Intervention Specialist
Property Manager and Maintenance Team Members
Communication, Events, and Administrative Coordinators and Office Support Staff
Board President
Technology Members

Responsibilities of Emergency Response Team Members:

Executive Director:

- Immediately assess situation
- Assist in stabilizing the emergency
- Initiate contacts with Emergency Response Team
- Chair Emergency Response Team
- Finalize action plan
- Communicate with necessary emergency response authorities
- Facilitate internal investigation
- Initiate external investigations when necessary
- Initiate follow-up evaluation
- Notify Insurance Agents

Directors:

- Be a back-up for the Executive Director responsibilities
- Provide immediate assistance to those affected by the emergency
- Notify necessary individuals (guardian, family case manager)
- Support immediate staff of the event
- Assist in developing action plan
- Notify others who may be impacted by the emergency
- Ensure the well-being of those involved with the emergency

Registered Nursing Staff:

- Assess and take necessary action so persons affected receive appropriate medical attention
- Assess environment for additional health dangers to others
- Assist in developing action plan
- Communicate with necessary medical personnel
- Assist in follow-up evaluation as necessary

Human Resource Director:

- Support staff involved in crisis
- Assist in documenting the incident
- Assist in coordinating any staff resource needs

Coordinators, Service Support Liaison, and Support Intervention Specialist:

- Assess the program clients and staff affected and provide direct support
- Relieve direct service staff from the immediate care responsibilities as appropriate
- Assist other members of the emergency response team as necessary

Property Manager and Maintenance Team Members:

- Assist in securing the safety of the clients and staff
- Assess the building and equipment involved and seek emergency assistance to respond
- Assist in providing comfortable accommodations for those affected by the emergency
- Assist in addressing transportation needs that may be necessary
- Assist with the implementation of the action plan related to property or equipment
- Assist in keeping the ground secure and keeping media and unauthorized personnel from entering property

Communication, Events, and Administrative Coordinators and Office Support Staff:

- Assist in developing clear message
- Share message with other members of the crisis team
- Develop correspondence to communicate with media and other sources
- Assist Executive Director in notifying emergency response team members
- Assist with correspondence coming into agency
- Correspond with other parties per directives from team members
- Control media inquiries by informing them “no public information will be disclosed at this time.”
- Assist with other correspondence related communication as needed

President of the Board:

- Assist in the development of an action plan
- Communicate and correspond to other members of the Board
- Assist in communicating message
- Assist Executive Director in facilitating outside investigations
- Call Board to action as may be necessary

Technology Team:

- Ensure all PHI is secure and report any potential areas of exposure to PHI Security Officer
- Assess equipment involved and seek assistance to respond to immediate and imminent technology needs
- Assist with the implementation of the action plan related to agency network or technology equipment
- Assist in keeping the network secure and keeping viruses, hackers, and other unauthorized personnel from accessing agency network and PHI

Emergency Response, Reporting & Review Policy

Program name: Home and Community Options

Program locations: Winona County

I. Policy

It is the policy of this DHS licensed provider (program) to effectively respond to, report, and review all emergencies to ensure the safety of persons receiving services and to promote the continuity of services until emergencies are resolved.

“Emergency” means any event that affects the ordinary daily operation of the program including, but not limited to:

- fires, severe weather, natural disasters, power failures, or other events that threaten the immediate health and safety of a person receiving services; and
- that require calling 911, emergency evacuation, moving to an emergency shelter, or temporary closure or relocation of the program to another facility or service site for more than 24 hours.

II. Response Procedures

A. Safety procedures

1. Fire. Additional information on safety in fires is available online at: <http://www.ready.gov/home-fires>. In the event of a fire emergency, staff will take the following actions:

FIRE PLAN

DISCOVERY OF FIRE

1. Remain calm.
2. Rescue anyone in immediate danger, Call 911 for the fire department and provide them with relevant information, sound alarm or yell fire, remove clients and staff from premises.
3. Assure complete evacuation of all persons to an area of safety. Account for all evacuated persons and keep everyone together.
4. Close doors against smoke and heat to confine the fire to the smallest possible area. If this is a potential exit, test the closed door before opening by feeling near the top. If the door is hot, use an alternative exit. If the room is smoke-filled, keep close to the floor to breathe more easily.
5. Do not reenter until the fire department determines it is safe to do so.

STAFF INSTRUCTIONS

1. The staff in charge, or any person discovering the fire, is to follow the procedures outlined in DISCOVERY OF FIRE. Evacuation of clients is the first priority.
2. Personnel are not to endanger themselves in order to attempt to put out the fire.
3. Fire equipment is to be used only as instructed in the case of a small, contained fire. Staff are not to return to a closed room where the fire is confined and are not to open doors to a confined fire area in order to use firefighting equipment.

4. Staff are to provide emergency first aid as required until emergency personnel arrive.

NOTIFICATION

1. After ensuring everyone's immediate safety, the program supervisor or designee will complete the following steps:
 - a. Report the fire to program administration, including the division director and the executive director or designee.
 - b. Arrange for the completion of an incident report by the staff person who was in charge at the time of the fire.
2. The program administrator or designee will report the fire within 24 hours to:
 - a. the parents or legal representative, if any
 - b. other licensed caregivers, if any
 - c. county case managers

STAFF ORIENTATION AND TRAINING

1. All staff, as a part of their orientation, will become familiar with the fire plan, the operation of the fire alarm system, the firefighting equipment and the fire evacuation routes.
2. The fire plans, procedures, operation of equipment, and fire safety measures will be reviewed regularly as a part of the in-service program.
3. Staff will be required to participate and conduct fire drills which will be held quarterly incorporate foster care programs and monthly in supported living facilities. All staff and clients will be familiar with the sound of the fire alarm, evacuation routes and procedures, and precautions for the use of firefighting equipment.

All staff conducting fire drills are to complete the Fire Drill Evaluation form.

Fire safety equipment in the facility includes smoke detectors on all floors, and one class ABC fire extinguisher. Evacuation routes are posted on all floors and in each bedroom in residential sites of Home and Community Options, Inc. It is required that the indicated routes of evacuation be followed for fire drills and clients be instructed in the use of the proper routes.

When evacuating outside, the designated meeting places are:

Program	Fire Evacuation Meeting Location
405	Driveway across the street from the back of the house
1301	Mailboxes on McNally Dr.
1165	Corner of 5th and Vila
502	Down the driveway and to the left on the sidewalk
1452	Down the sidewalk from the front door by the mail box.
WHD	Down the driveway quite a bit
604	On the SW corner of 4th and McBride. (Same side of McBride as the 604 house but on the other side of 4th street.)
1125	Far end of the driveway (closest to old K-Mart)
IC	Iverson Court Parking Lot
174	Across the street from the end of the driveway
3925	Across the street from the end of the driveway
721	Corner of Main St. and Park Ave by the tree
1031	Tree in the front corner of the lot (Oscamp and Gilmore Valley)

250	Across the street from the driveway in the neighbor's yard
956	Corner of Francis and Gilmore
1420	Mailbox at the end of the driveway
1055	West corner of block in the front of the house
HWY 14	End of the driveway by the mailboxes
Saehler	The corner of Saehler Dr. and Harry's Lane
1450	End of the neighbor's driveway (1460)
PV	End of driveway at bottom of hill
142	End of driveway by the mailbox
66	Acoustic Cafe

2. **Carbon Monoxide:** Carbon Monoxide is an odorless, colorless gas which is a by-product of a fuel burning process. Carbon Monoxide poisoning may be difficult to diagnose. Its symptoms are similar to the flu, which may include headaches, nausea, fatigue, reddish skin color and dizzy spells.

Response plans to the three types of Carbon Monoxide Incidents:

a) **Activated Carbon Monoxide Detector Without Any Medical Symptoms of Poisoning**

Call the fire department non-emergency number - 457-8266 - explain that the detector is sounding. They will respond to the site with a carbon monoxide monitor to check the levels in the facility.

- o If the structure has natural gas service from Xcel, the fire department will be contacted to respond and check the facility and appliances.
- o If the facility does not have natural gas service from Xcel, the staff should contact their repair service company to check the appliance.
- o The fire/rescue response team will notify staff if the occupants can remain in the facility. If the occupants cannot remain in the facility, follow the fire evacuation routes and call a supervisor for further instruction.

b) **Activated Carbon Monoxide Detector With Medical Symptoms of Poisoning**

Evacuate all occupants of the facility using the fire evacuation routes, meet at your fire evacuation meeting spot. Call 911 from a neighbor's home. Explain that the carbon monoxide detector is sounding and the occupants have symptoms of poisoning. The fire/rescue response team will arrive to administer medical treatment and check the facility. The fire/rescue team will advise you as to further occupancy of the facility. Call a supervisor for further instruction.

c) **Symptoms of Carbon Monoxide Poisoning With No Detector Present or Sounding**

Evacuate all occupants of the facility and follow above procedure except explain to the 911 dispatcher the absence of a detector or that the detector is not sounding an alarm.

All staff, as part of the orientation an ongoing training, will become familiar with the placement of the carbon monoxide detectors, the testing procedures and the sound they emit. Staff will also become familiar with the fire evacuation routes, the meeting place, and the neighbors' homes that are identified in the area of the facility.

3. Severe weather and natural disasters. Additional information on safety in severe weather or natural disasters is available online at: <http://www.ready.gov/natural-disasters>. In the event of a severe weather emergency, staff will take the following actions:

Monitor weather conditions: Listen to local television or radio or a weather-radio for weather warnings and watches. Follow their directions on the need to change plans and activities, stay indoors, or seek shelter. It is the responsibility of staff to account for the well-being of all people receiving services and to inform people why plans and activities are changing as well as inform them of what efforts are being made to keep people safe.

WARNING: Issued by the National Weather Service local offices indicating that a particular weather hazard is either occurring or is imminent. A warning is the most significant and staff must take immediate action to protect people by seeking immediate shelter.

WATCH: Issued by National Weather Service local offices indicating that a particular hazard is possible, i.e., that conditions are more favorable than usual for its occurrence. A watch is a recommendation for planning, preparation, and increased awareness (i.e., to be alert for changing weather, listen for further information, and think about what to do if the danger materializes).

ADVISORY: Issued by the National Weather Service local offices indicating weather conditions may cause inconvenience or difficulty when traveling or being outside. Staff should help people consider changing their plans for travel and outdoor activities or consider that additional time may be required to complete their plans.

Severe Storm or Tornado:

1. Notify all persons when a tornado watch or severe storm watch is in effect and account for everyone's whereabouts. Have individuals stay in the home or on the immediate grounds. For support services program, stay close to a safe location such as the person's home, resource home or safe building for shelter. Utilize weather radio, regular radio, or television to keep apprised of storm conditions. Review the shelter procedures.
2. Keep tuned to the local radio or TV station for further information. Begin preparations to take immediate action should it become necessary. Locate and check the availability of emergency kit items (flashlight, lantern, first aid kit, blankets, non-perishable snacks, water, extra batteries and battery-operated radio).
3. If warning or a storm is evident, have all the clients go to the basement or designated area, next to the wall facing the oncoming direction of the tornado or storm. Keep all persons away from windows.
4. See that each resident has a blanket for cover. Keep available all other emergency kit supplies, medications and other important personal items.
5. Proceed calmly and reassure everyone to reduce panic. If storm hits, cover all persons with a blanket and stay low covering heads.
6. After the storm, assess for injuries, complete first aid, call for emergency assistance if necessary. Be alert for and avoid contact with downed electrical wires and vacate any area when gas smell is present. Find a safe area and account for everyone. Seek assistance immediately.
7. In the event of a storm occurring when staff are supporting clients in an unfamiliar building, seek shelter in a designated area or find a location in the internal part of the building that is well supported and is away from windows. Stay low and protect your head.

8. If in a vehicle during a severe storm, get to a sheltered area and stop. Do not stay in a vehicle during a tornado. Seek shelter in a protected or low lying area.

9. Designated Shelter Areas During Severe Storms:

Program	Designated Shelter Areas During Severe Storms:
405	Apartment bathroom or back hallway (bedroom and bathroom doors to be closed when in hallway)
1301	Basement bar area
1165	Basement living room
502	Apartment bathroom or back hallway (bedroom and bathroom doors to be closed when in hallway)
1452	Both main floor bathrooms without windows
WHD	Southwest corner of basement (corner by utility and laundry area)
604	Inner hallway by bathroom and bedrooms
1125	Large main floor bathroom
IC	1 st floor can remain in the bathroom of their apartment. Duplex can remain in their unit in the bathroom. 2 nd and 3 rd floors report to the laundry room or the hallway area adjacent to that on the first floor.
174	Storm room by front entry
3925	Inner bathroom
721	Handicap accessible bathroom on the first floor
1031	Basement in southwest corner; laundry room with the door closed for those who can't use the stairs
250	Basement storage area
956	Basement in southwest corner
1420	Basement office area
1055	Under stairs in lower level
HWY 14	Bottom of interior basement steps
Saehler	Basement laundry area immediately left of the stairway. For non-ambulatory clients, use handicapped bathroom on first floor (shower area). If one staff is available with a mix of ambulatory and non-ambulatory persons, keep all clients in bathroom on first floor.
1450	Basement storage room in southwest corner
PV (upper & lower)	Basement hallway in main unit
142	Basement utility room
66	Basement of Cambridge Building by bathrooms
In-Home	In designated area of person's home

BLIZZARDS AND WINTER STORMS:

In the event of a blizzard or winter storm, the radio should be tuned to KAGE 95.3 FM or The River 101.1 FM, or the local television. Before conditions worsen, staff should make every attempt to account for all persons. The inventory of food, medication and supply items should be checked and replenished as necessary in the case of prolonged winter storm conditions. No travel is advised in severe conditions. If emergency transportation for staff or clients is required, call 911. Protect all persons from elements with appropriate supervision and use of outer wear.

FLOOD:

If city wide emergency measures are to be taken, the staff will comply and evacuate the clients to appointed positions in the town. If the home is in danger, but no emergency statements have been issued by the City of Winona, the staff may consult with the director. Monitor weather conditions: Listen to local television or radio or a weather-radio for weather warnings and watches. Follow their directions on the need to change plans and activities, stay indoors, or seek shelter.

4. **Power failures.** Additional information on safety during power failures is available online at: <https://www.ready.gov/power-outages>. In the event of a power failure emergency, staff will take the following actions:

UTILITY EMERGENCIES.

For any power failure or natural gas odor, the staff member in charge is to follow the instructions outlined regarding the locations and operations of the various utility systems. In the event of an unresolved utility emergency, contact one of the emergency contact providers posted in your program.

- Woodland Hills, Report power failures to MiEnergy Cooperative at 1-800-432-2285.
- Lewiston, Report power failures to Alliant Energy at 1-800-255-4268.
- All other HCO Residential Programs, Report power failures to Xcel Energy at 1-800-895-1999.
- Woodland Hills and Pleasant Valley Report propane leaks to Severson Oil at 1-507-452-4743.
- Lewiston, Report natural gas leaks to Minnesota Energy Resources at 1-800-889-4970.
- All other HCO Residential Programs, Report natural gas leaks to Xcel Energy at 1-800-895-2999.

When in a family home or residence that is not operated under the control of Home and Community Options, insure everyone's safety and contact property owner for advice or seek support from law enforcement or safety personnel. Always seek a location that is safely away from gas leaks or other utility dangers, and supervise clients to insure their safety.

Use emergency supplies (flashlights, battery-operated radio) which are located in each program.

Program	Flashlight and Portable Radio or Television Location
405	In the staff office
1301	Emergency Radio is on top of the refrigerator, flashlights are in the staff bedroom (Also, all the bedrooms have a flashlight)
1165	The staff office closet.
502	Under sink in staff office
1452	Closet in kitchen by door leading to garage
WHD	Flash light is in the bottom right drawer in the desk in the living room. Radio is on the window ledge by the desk in the living room
604	Flash light is kept in the downstairs hallway in the maintenance closet; Radio is on the desk in the dining area
1125	Flashlights in each bedroom including staff office, portable radio in staff office
IC	Flashlight and Portable radio- First floor office on the shelf.
174	Emergency Flashlights are plugged into the outlets in the kitchen, main floor hallway and the upstairs living room, radio is in Main Floor Office on the window sill
3925	There is a flashlight on each level of the house. We have one in each bathroom, kitchen and staff office. The portable radio is in the kitchen on the counter
721	Storm bag in the handicap accessible bathroom on the first floor

1031	Under the basement steps in a green tote
250	Flashlights in each bedroom including staff office. Portable weather radio on kitchen counter
956	Weather radio is in main floor office. Flashlights in all bedrooms, main office and basement (lantern)
1420	Weather radio is in front living room. Flashlights in all bedrooms, basement office, kitchen. Lantern in furnace room
1055	In the designated severe weather location – in the crawl space under the stairs. Flashlights are also in the staff office in the lower level, and in the kitchen near the computer upstairs.
HWY 14	There is a flashlight in the staff office as well as in the kitchen closet along with two battery operated lanterns. There is a portable radio on the shelf by the microwave in the kitchen
Saehler	We have a flashlight and a portable radio in our severe weather kit that is kept in a clear tote in the furnace/storage room in the basement. We also have flashlights kept in the locked closet off kitchen that contains our sharps and cleaning supplies
1450	Portable radio is in the storage room in the emergency kit, flashlights are next to all beds and in kitchen drawer by the phone
PV	Upstairs: In pantry; Downstairs: In front closet
142	Radio and flashlight in laundry room closet. Flashlight in each bedroom and bathroom.
66	Reception

- Account for the well-being of all people receiving services.
- Inform people why plans and activities are changing and what they are doing to keep them safe.
- For any water overflow or leakage, the staff member in charge is to contact the program supervisor and follow instructions outlined regarding the locations and operations of the various utility systems. In the event of an unresolved utility emergency, contact one of the emergency contact providers posted in your program.

5. **Emergency shelter.** Additional information on emergency shelter is available online at: <http://www.ready.gov/shelter>. Some emergencies will be best met by seeking safety in an emergency shelter. Depending on the emergency you may need to shelter in place or shelter outside the disaster area.

In the event that utilizing an emergency shelter would be needed staff will:

- Follow directions of local emergency personnel to locate the closest emergency shelter.
- If time allows, move to the emergency shelter with a 24-hour supply of medications and medical supplies, medical books/information, and emergency contact names and information.
- At the emergency shelter, notify personnel of any special needs required to use the emergency shelter.
- Remain calm and keep everyone informed of why events are occurring.

Use of an emergency shelter may include: severe weather, natural disasters, power failures, and other events that threaten the immediate health and safety of people receiving services.

6. **Emergency evacuation.** Additional information on emergency evacuation is available online at: <http://www.ready.gov/evacuating-yourself-and-your-family>. Some emergencies will be best met by leaving a program site or the community and seeking safety in an emergency shelter. Often the emergency evacuation will be directed by police, fire, or other emergency personnel who will direct people where to seek safety.

In the event that an Emergency evacuation would be needed staff will:

- Account for the well-being of all people receiving services.
- Inform people why they are leaving the program and what is being done to keep them safe.
- Follow directions received from administrative staff, police, fire, and other emergency personnel.
- If time allows, evacuate with medication and medical supplies, medical and programs books/information, clothing, grooming supplies, other necessary personal items, and emergency contact names and information.

Emergency evacuation may include: severe weather, natural disasters, power failures, and other events that threaten the immediate health and safety of people receiving services.

7. **Temporary closure or relocation.** Some emergencies will be best met by temporarily closing or relocating a program site for more than 24 hours. This decision will be directed by program administrative staff.

In the event that temporary closure or relocation would be needed staff will:

- Inform people why the program is closing and relocating to keep them safe. Formal notification to the person receiving services, legal representatives, and case managers will be completed by administrative staff.
- Follow directions received from administrative staff, police, fire, and other emergency personnel.
- If time allows, remove from the program medication and medical supplies, medical and programs books/information, clothing, grooming supplies, consumer funds, other necessary program and personal items, and emergency contact names and information.

Closure or relocation may include: severe weather, natural disasters, power failures, and other events that threaten the immediate health and safety of people receiving services.

B. Additional safety procedures for facilities. REQUIRED FOR COMMUNITY RESIDENTIAL SETTINGS UNDER 245D.22

1. **First aid and CPR**

a. **Training**

- 1) A staff person trained in first aid will be available on site whenever a person receiving services is present and staff are required to provide direct service.
- 2) A staff person trained in cardiopulmonary resuscitation (CPR) will be available on site when required in a person's coordinated service and support plan or coordinated services and support plan addendum whenever a person receiving services is present and staff are required to be at the site providing direct service.
- 3) CPR training must include in-person instruction, hands-on practice, and an observed skill assessment under the direct supervision of a CPR instructor.

b. **First aid kits**

- 1) First aid kits must be readily available for use by staff and must meet the needs of the persons receiving services. First aid kits are located at each program site.

Program	First Aid Kit Location
405	In the cabinet above the sink in the laundry room
1301	In the closet by the dining room
1165	By the back door on the shelf of the entry table. Travel kit for the vehicle. Back up supplies in a file in the staff office.
502	Med Cabinet in staff office
1452	Med Cabinet in kitchen

WHD	In the bottom drawer of the medicine cabinet which is located in the living room.
604	In a tote which is kept in the large closet in the living room
1125	In the staff office in the med cabinet and one in the basement office near suite area.
IC	In the SS273 office top drawer of the file cabinet
174	Main Floor Office in the file cabinet in the office closet
3925	In the cupboard top shelf above the med log and program books, in the front staff office
721	Medication cupboard in the kitchen
1031	In the laundry room and in the back of the van
250	2 nd floor office on the shelf by the med cabinet. Another is kept in the cupboard closest by the dining room table, below the island part of the counter
956	Closet in back bathroom
1420	Bottom shelf of huge hutch in side living room
1055	Staff office in the lower level
HWY 14	On the top shelf of the kitchen cabinet above the phone
Saehler	There is one under the sink in the upstairs bathroom. There is another on the top shelf of the closet in main floor bathroom and another in the severe weather kit that is kept in the furnace/storage room in basement.
1450	Under the kitchen sink
PV	Upstairs: above the refrigerator; Downstairs: In Cabinet next to Refrigerator
142	Laundry room closet
66	Reception and in lower level kitchen

2) First aid kits must include accessible first aid supplies including bandages, sterile compresses, scissors, an ice bag or cold pack, an oral or surface thermometer, mild liquid soap, adhesive tape, and a first aid manual.

2. Emergency equipment (<http://www.ready.gov/build-a-kit>)

A flashlight and portable radio or television that can be used in the event of a power failure must be at our program. They are located in an accessible space at each program site.

Program	Flashlight and Portable Radio or Television Location
405	In the staff office
1301	Emergency Radio is on top of the refrigerator, flashlights are in the staff bedroom (Also, all the bedrooms have a flashlight)
1165	The staff office closet has flashlights with radio.
502	Under sink in staff office
1452	Closet in kitchen by door leading to garage
WHD	Flash light is in the bottom right drawer in the desk in the living room. Radio is on the window ledge by the desk in the living room
604	Flash light is kept in the downstairs hallway in the maintenance closet; Radio is on the desk in the dining area
1125	Flashlights in each bedroom including staff office, portable radio in staff office
IC	Flashlight and Portable radio- First floor office on the shelf.
174	Emergency Flashlights are plugged into the outlets in the kitchen, main floor hallway and the upstairs living room, radio is in Main Floor Office on the window sill
3925	There is a flashlight on each level of the house. We have one in each bathroom, kitchen and staff office. The portable radio is in the kitchen on the counter

721	Storm bag in the handicap accessible bathroom on the first floor
1031	Under the basement steps in a green tote
250	Flashlights in each bedroom including staff office. Portable weather radio on kitchen counter
956	Weather radio is in main floor office. Flashlights in all bedrooms, main office and basement (lantern)
1420	Weather radio is in front living room. Flashlights in all bedrooms, basement office, kitchen. Lantern in furnace room
1055	In the designated severe weather location – in the crawl space under the stairs. Flashlights are also in the staff office in the lower level, and in the kitchen near the computer upstairs
HWY 14	There is a flashlight in the staff office as well as in the kitchen closet along with two battery operated lanterns. There is a portable radio on the shelf by the microwave in the kitchen
Saehler	We have a flashlight and a portable radio in our severe weather kit that is kept in a clear tote in the furnace/storage room in the basement. We also have flashlights kept in the locked closet off kitchen that contains our sharps and cleaning supplies
1450	Portable radio is in the storage room in the emergency kit, flashlights are next to all beds and in kitchen drawer by the phone
PV	Upstairs: In pantry; Downstairs: In front closet
142	Radio and flashlight in laundry room closet. Flashlight in each bedroom and bathroom.
66	Reception

3. Emergency contacts

- a) A list of emergency telephone numbers is posted at each program site, next to a non-coin operated telephone that must be readily accessible at all times. The mental health crisis intervention team number must be posted, when available. In our program 911 is listed as the emergency number.

Program	Emergency Telephone Numbers Location
405	On the bulletin board in the staff office and above the corded phone in the dining room
1301	On the bulletin board in the staff office and near the phone in the kitchen
1165	Posted by each telephone and staff office by the telephone
502	Staff office
1452	Drawer in desk in kitchen
WHD	Posted on the bulletin board above the desk in the living room
604	Posted on the wall above the desk in the dining area
1125	Attached to desk in living room beside the phone
IC	Posted in the 1 st floor office on the bulletin board above the computer.
174	Bulletin Board in Main Floor Office
3925	In the rear TV room near the phone
721	On the 1st floor phone and in the emergency procedures binder in the kitchen
1031	In the office, hanging on the wall by the printer and by the staff desk in the sunporch
250	On wall above phone that sits on kitchen counter
956	In dining room under phone books
1420	Hanging on cupboard above phone in kitchen

1055	Posted in the kitchen of the upper level and next to the common phone in the lower level
HWY 14	Posted by the kitchen and office telephone
Saehler	These are kept in the black binder labeled "phone numbers" that is kept on the counter by the computer in the front living room.
1450	Posted on the walls next to all three landlines and in two of the ladies bedrooms because they can stay home alone
PV	Upstairs: Upstairs office; Downstairs: Downstairs office
142	Staff office, kitchen cabinet, bulletin board in basement by phone.
66	Reception

b) The names and telephone numbers of each person's representative, physician, and dentist must be readily available.

4. Written emergency response plan

An emergency response plan must be readily available to staff and persons receiving services. The emergency response plan is located:

Program	Emergency Response Plan Location
405	On the bulletin board in the staff office
1301	On the bulletin board in the staff office
1165	In the Fire and Severe Weather binder (red) in staff office closet. Each client has a diagram of the homes floor posted in their bedrooms for fire evacuation
502	Staff office bulletin board
1452	Staff office bulletin board
WHD	Posted on the bulletin board above the desk in the living room
604	Posted on the wall above the desk in the dining area
1125	Bulletin board in staff office
IC	Bulletin board in the hallway on the 1 st floor
174	Main floor office, in the pink binder on the shelves in the closet
3925	In the from staff office in a blue binder labeled(3925)
721	In our emergency procedures binder in the kitchen
1031	Hanging in the office on the bulletin board
250	Bulletin board in basement office
956	On bulletin board in basement office
1420	On bulletin board in basement office
1055	In a binder in the upstairs kitchen near the computer and lower level kitchen
HWY 14	On the staff office bulletin board, next to the kitchen telephone, in the paper log, and installed on the staff lap top computer
Saehler	This is located in a black binder in the wooden cabinet in the kitchen where all client program books are located also. The binder is labeled "Emergency Procedures"
1450	Hanging next to phone in Kitchen and in the Emergency Log
PV	Upstairs: Upstairs office; Downstairs: Downstairs office
142	Staff office, laundry room bulletin board
66	Reception

The plans include:

- a. Procedures for emergency evacuation and emergency sheltering, including:
 - 1) How to report a fire or other emergencies;
 - 2) Procedures to notify, relocate, and evacuate occupants, including use of adaptive procedures or equipment to assist with the safe evacuation of persons with physical or sensory disabilities; and
 - 3) Instructions on closing off the fire area, using fire extinguishers, and activating and responding to alarm systems.
- b. Floor plan that identifies:
 - 1) Location of fire extinguishers;
 - 2) Location of audible or visual alarm systems, including but not limited to manual fire alarm boxes, smoke detectors, fire alarm enunciators and controls, and sprinkler systems;
 - 3) Location of exits, primary and secondary evacuation routes, and accessible egress routes, if any; and
 - 4) Location of emergency shelter within the facility.
- c. Site plan that identifies:
 - 1) Designated assembly points outside the facility;
 - 2) Locations of fire hydrants; and
 - 3) Routes of fire department access.
- d. Responsibilities each staff person must assume in case of emergency.
- e. Procedures for conducting quarterly drills each year and recording the date of each drill in the file of emergency plans.
- f. Procedures for relocation or service suspension when services are interrupted for more than 24 hours.
- g. Floor plan that identifies the location of an enclosed exit stairs (only applies to a community residential setting with three or more dwelling units).
- h. Emergency escape plan for each person.

C. Community Emergency Plan.

The Community Emergency Plan is activated through the Red Cross in the event of a city-wide disaster.

1. Stay tuned to KAGE 95.3 FM or The River 101.1 FM or a local television station to locations of open emergency shelters.
2. The location of the shelters will depend on where the storm/disaster is.
3. The Red Cross does not provide transportation to the emergency shelters. Transportation is the responsibility of HCO staff.

III. Reporting Procedures

Emergency reports will be completed using the program's emergency report and review form as soon possible after the occurrence, but no later than 24 hours after the emergency occurred or the program became aware of the occurrence. The written report will include:

1. It is not necessary to identify all persons affected by or involved in the emergency unless the emergency resulted in an incident to a person or persons;
2. The date, time, and location of the emergency;
3. A description of the emergency;
4. A description of the response to the emergency and whether a person's coordinated service and support plan addendum or program policies and procedures were implemented as applicable;
5. The name of the staff person or persons who responded to the emergency; and
6. The results of the review of the emergency (see section IV).

IV. Review Procedures

This program will complete a review of all emergencies.

1. The review will be completed using the program's emergency report and review form by program supervisor.
2. The review will be completed within 7 days of the emergency.
3. The review will ensure that the written report provides a written summary of the emergency.
4. The review will identify trends or patterns, if any, and determine if corrective action is needed.
5. When corrective action is needed, a staff person will be assigned to take the corrective action within a specified time period.

V. Record Keeping Procedures

- A. The review of an emergency will be documented on the emergency reporting form and will include identifying trends or patterns and corrective action if needed.
- B. Emergency reports will be maintained in the program's incident report log.

Policy reviewed and authorized by:

Suzanne R. Horstman, Executive Director Suzanne R. Horstman
Print Name & Title Signature

Date of last policy review: 9/6/18 Date of last policy revision: 9/6/18
Legal Authority: Minn. Stat. §§ [245D.11](#), subd. 2; [245D.02](#), subd. 8; [245D.22](#), subd 4-7.

NOTE: Websites from the Federal Emergency Management Agency (FEMA) are included as a resource for additional information. Another useful website is the Minnesota Department of Public Safety, Homeland Security and Emergency Management Division (<https://dps.mn.gov/divisions/hsem/planning-preparedness/Pages/default.aspx>).

Incident Response, Reporting and Review Policy

Program Name: Home and Community Options, Inc.

I. Policy

It is the policy of this DHS licensed provider to respond to, report, and review all incidents that occur while providing services in a timely and effective manner in order to protect the health and safety of and minimize risk of harm to persons receiving services.

"Incident" means an occurrence which involves a person and requires the program to make a response that is not part of the program's ordinary provision of services to that person, and includes:

- A. Serious injury of a person;
 - 1. Fractures;
 - 2. Dislocations;
 - 3. Evidence of internal injuries;
 - 4. Head injuries with loss of consciousness;
 - 5. Lacerations involving injuries to tendons or organs and those for which complications are present;
 - 6. Extensive second degree or third degree burns and other burns for which complications are present;
 - 7. Extensive second degree or third degree frostbite, and other frostbite for which complications are present;
 - 8. Irreversible mobility or avulsion of teeth;
 - 9. Injuries to the eyeball;
 - 10. Ingestion of foreign substances and objects that are harmful;
 - 11. Near drowning;
 - 12. Heat exhaustion or sunstroke; and
 - 13. All other injuries considered serious by a physician.
- B. A person's death.
- C. Any medical emergencies, unexpected serious illness, or significant unexpected change in an illness or medical condition of a person that requires the program to call 911, physician treatment, or hospitalization.
- D. Any mental health crisis that requires the program to call 911 or a mental health crisis intervention team.
- E. An act or situation involving a person that requires to program to call 911, law enforcement, or the fire department.
- F. A person's unauthorized or unexplained absence from a program.
- G. Conduct by a person receiving services against another person receiving services that:
 - 1. Is so severe, pervasive, or objectively offensive that it substantially interferes with a person's opportunities to participate in or receive service or support;
 - 2. Places the person in actual and reasonable fear of harm;
 - 3. Places the person in actual and reasonable fear of damage to property of the person; or

4. Substantially disrupts the orderly operation of the program.

H. Any sexual activity between persons receiving services involving force or coercion.

- "Force" means the infliction, attempted infliction, or threatened infliction by the actor of bodily or commission or threat of any other crime by the actor against the complainant or another, harm which (a) causes the complainant to reasonably believe that the actor has the present ability to execute the threat and (b) if the actor does not have a significant relationship to the complainant, also causes the complainant to submit.
- "Coercion" means words or circumstances that cause the complainant reasonably to fear that the actor will inflict bodily harm upon, or hold in confinement, the complainant or another, or force the complainant to submit to sexual penetration or contact, but proof of coercion does not require proof of a specific act or threat).

I. Any emergency use of manual restraint.

J. A report of alleged or suspected child or vulnerable adult maltreatment.

II. Response Procedures

A. Serious injury

1. In the event of a serious injury, staff will provide emergency first aid following instructions received during training.
2. Summon additional staff, if they are immediately available, to assist in providing emergency first aid or seeking emergency medical care.
3. Seek medical attention, including calling 911 for emergency medical care, as soon as possible.

B. Death

1. If staff are alone, immediately call 911 and follow directives given to you by the emergency responder.
2. If there is another person(s) with you, ask them to call 911, and follow directives given to you by the emergency responder.

C. Medical emergency, unexpected serious illness, or significant unexpected change in an illness or medical condition

1. Assess if the person requires the program to call 911, seek physician treatment, or hospitalization.
2. When staff believes that a person is experiencing a life threatening medical emergency they must immediately call 911.
3. Staff will provide emergency first aid as trained or directed until further emergency medical care arrives at the program or the person is taken to a physician or hospital for treatment.

D. Mental health crisis

When staff believes that a person is experiencing a mental health crisis they must call 911 or a mental health crisis intervention team; First Call For Help (507) 454-2528 or Great Rivers 2-2-1, 24 hour Crisis Hotline 1-800-362-8255 or 1-800-362-8255 TTY .

E. Requiring 911, law enforcement, or fire department

1. For incidents requiring law enforcement or the fire department, staff will call 911.
2. For non-emergency incidents requiring law enforcement, staff will call (507) 457-6302.
3. For non-emergency incidents requiring the fire department, staff will call (507) 457-8266.
4. Staff will explain to the need for assistance to the emergency personnel.
5. Staff will answer all questions asked and follow instruction given by the emergency personnel responding to the call.

F. Unauthorized or unexplained absence

When a person is determined to be missing or has an unauthorized or unexplained absence, staff will take the following steps:

1. If the person has a specific plan outlined in his/her Coordinated Services and Support Plan Addendum to address strategies in the event of unauthorized or unexplained absences that procedure should be implemented immediately, unless special circumstances warrant otherwise.
2. An immediate and thorough search of the immediate area that the person was last seen will be completed by available staff. When two staff persons are available, the immediate area and surrounding neighborhood will be searched by one staff person. The second staff person will remain at the program location. Other persons receiving services will not be left unsupervised to conduct the search.
3. If after no more than 15 minutes, the search of the facility and neighborhood is unsuccessful, staff will contact law enforcement authorities.
4. After contacting law enforcement, staff will notify the program supervisor who will determine if additional staff are needed to assist in the search.
5. A current photo will be kept in each person's file and made available to law enforcement.
6. When the person is found staff will return the person to the service site, or make necessary arrangements for the person to be returned to the service site.

G. Conduct of the person

When a person is exhibiting conduct against another person receiving services that is so severe, pervasive, or objectively offensive that it substantially interferes with a person's opportunities to participate in or receive service or support; places the person in actual and reasonable fear of harm; places the person in actual and reasonable fear of damage to property of the person; or substantially disrupts the orderly operation of the program, staff will take the following steps:

1. Summon additional staff, if available. If injury to a person has occurred or there is eminent possibility of injury to a person, implement approved therapeutic intervention procedures following the policy on emergency use of manual restraints (see EUMR Policy).
2. As applicable, implement the Coordinated Service and Support Plan Addendum for the person.
3. After the situation is brought under control, question the person(s) as to any injuries and visually observe their condition for any signs of injury. If injuries are noted, provide necessary treatment and contact medical personnel if indicated.

H. Sexual activity involving force or coercion

If a person is involved in sexual activity with another person receiving services and that sexual activity involves force or coercion, staff will take the following steps:

1. Instruct the person in a calm, matter-of-fact, and non-judgmental manner to discontinue the activity. Do not react emotionally to the person's interaction. Verbally direct each person to separate area.
2. If the person does not respond to a verbal redirection, intervene to protect the person from force or coercion, following the EUMR Policy as needed.
3. Summon additional staff if necessary and feasible.
4. If the persons are unclothed, provide them with appropriate clothing. Do not have them redress in the clothing that they were wearing.
5. Do not allow them to bathe or shower until law enforcement has responded and cleared this action.
6. Contact law enforcement as soon as possible and follow all instructions.
7. If the person(s) expresses physical discomfort and/or emotional distress, or for other reasons you feel it necessary, contact medical personnel as soon as possible. Follow all directions provided by medical personnel.

I. Emergency use of manual restraint (EUMR): Follow the EUMR Policy.

J. Maltreatment: Follow the Maltreatment of Minors or Vulnerable Adult Reporting Policy.

III. Reporting Procedures

A. Completing a report

1. Incident reports will be completed as soon possible after the occurrence, but no later than 24 hours after the incident occurred or the program became aware of the occurrence. The written report will include:
 - a. The name of the person or persons involved in the incident;
 - b. The date, time, and location of the incident;
 - c. A description of the incident;
 - d. A description of the response to the incident and whether a person's coordinated service and support plan addendum or program policies and procedures were implemented as applicable;
 - e. The name of the staff person or persons who responded to the incident; and
 - f. The results of the review of the incident (see section IV).
2. When the incident involves more than one person, this program will not disclose personally identifiable information about any other person when making the report to the legal representative or designated emergency contact and case manager, unless this program has consent of the person. The written report will not contain the name or initials of the other person(s) involved in the incident.

B. Reporting incidents to team members

1. All incidents must be reported to the person's legal representative or designated emergency contact and case manager:
 - a. within 24 hours of the incident occurring while services were provided;
 - b. within 24 hours of discovery or receipt of information that an incident occurred; or
 - c. as otherwise directed in a person's coordinated service and support plan or coordinated service and support plan addendum.
2. This program will not report an incident when it has a reason to know that the incident has already been reported.
4. Any emergency use of manual restraint of a person must be verbally reported to the person's legal representative or designated emergency contact and case manager within 24 hours of the occurrence. The written report must be completed according to the requirements in the program's emergency use of manual restraints policy.

C. Additional reporting requirements for deaths and serious injuries

1. A report of the death or serious injury of a person must be reported to both the Department of Human Services Licensing Division [if the program is an ICF/DD the report must be made to Department of Health, Office of Health Facility Complaints instead of DHS Licensing] and the Office of Ombudsman for Mental Health and Developmental Disabilities.
2. The report must be made within 24 hours of the death or serious injury occurring while services were provided or within 24 hours of receipt of information that the death or serious injury occurred.
3. This program will not report a death or serious injury when it has a reason to know that the death or serious injury has already been reported to the required agencies.

D. Additional reporting requirements for maltreatment

1. When reporting maltreatment, this program must inform the case manager of the report unless there is reason to believe that the case manager is involved in the suspected maltreatment.
2. The report to the case manager must disclose the nature of the activity or occurrence reported and the agency that received the maltreatment report.

E. Additional reporting requirements for emergency use of manual restraint (EUMR) Follow the EUMR Policy.

IV. Reviewing Procedures

A. Conducting a review of incidents and emergencies

This program will complete a review of all incidents.

1. The review will be completed by the program supervisor.
2. The review will be completed within 7 days of the incident.
3. The review will ensure that the written report provides a written summary of the incident.
4. The review will identify trends or patterns, if any, and determine if corrective action is needed.
5. When corrective action is needed, a staff person will be assigned to take the corrective action within a specified time period.

B. Conducting an internal review of deaths and serious injuries

This program will conduct an internal review of all deaths and serious injuries that occurred while services were being provided if they were not reported as alleged or suspected maltreatment. (Refer to the Vulnerable Adults Maltreatment Reporting and Internal Review Policy and Maltreatment of Minors Reporting and Internal Review Policy when alleged or suspected maltreatment has been reported.)

1. The review will be completed by the program supervisor.
2. The review will be completed within 7 days of the death or serious injury.
3. The internal review must include an evaluation of whether:
 - a. related policies and procedures were followed;
 - b. the policies and procedures were adequate;
 - c. there is need for additional staff training;
 - d. the reported event is similar to past events with the persons or the services involved to identify incident patterns; and
 - e. there is need for corrective action by the program to protect the health and safety of the persons receiving services and to reduce future occurrences.
5. Based on the results of the internal review, the program must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or the program, if any.
6. The internal review of all incidents of emergency use of manual restraints must be completed according to the requirements in the program's emergency use of manual restraints policy.

C. Conducting an internal review of maltreatment

Follow the Maltreatment of Minors or Vulnerable Adult Reporting Policy

D. Conducting a review of emergency use of manual restraints

Follow the EUMR Policy.

V. Record Keeping Procedures

- A. The review of an incident will be documented on the incident reporting form and will include identifying trends or patterns and corrective action if needed.
- B. Incident reports will be maintained in the person's record. The record must be uniform and legible.

Policy reviewed and authorized by:

Suzanne R. Horstman, Executive Director 
Print Name & Title Signature

Date of last policy review: 5/30/17 Date of last policy revision: 5/30/17

Legal Authority: MS. §§§ 245D.11, subd. 2; 245.91, subd. 6; 609.341, subd. 3 and 14