

Section 5: The All-Hazards Emergency Plan

Writing an All-Hazards Emergency Plan for your organization can feel like a huge undertaking and the amount of work you put into it can spiral out of control. However, you do not have to do everything at once. Your All-Hazards Emergency Plan can be as detailed or as simple as you choose to make it. Make sure it is user-friendly for you and your clients. This section of the toolkit will help guide your organization in writing a plan for response in an emergency.

This section includes:

All-Hazards Emergency Plan

- Benefits of an All-Hazard Plan
- Services and Functions
- Emergency Management Structure
- Continuity of Operations Plan (COOP)
- Emergency Communication Tools
- Communication Plan
- Surge Capacity Plan
- Evacuation Plan
- Shelter-in-Place Plan
- Pandemic Influenza Plan and Social Distancing

Volunteers and Volunteer Organizations

Plan Practice, Evaluation and Updates



Tools in this section:

- *All-Hazard Emergency Plan Template*
- *Sheltering-in-Place Preparedness Checklist*
- *Pandemic Flu Planning Checklist*
- *Pandemic Flu Planning Guidance and Template*
- *Supply and Equipment Checklist for Planning*
- *Volunteer Organizations*
- *Emergency Plan Review Schedule*



Activities in this section:

- *Exercise Scenarios and Guidelines*

A. The All Hazards Emergency Plan

There are four important things to remember when embarking on writing an All-Hazard Emergency plan:

- An emergency plan is a living and changing document, developed and revised over time.
- **There is no right or wrong way to format a plan.**
- Keep it simple, understandable, and practical.
- Spend the greatest amount of time on the All-Hazards Emergency Plan and the subsets of Emergency Specific Preparedness Plans will flow naturally.

Benefits of an All-Hazards Emergency Plan

Having one plan, an All-Hazards Plan, makes the assumption that the consequences of any emergency — whether natural or man-made — are the same. Along with your All-Hazards Plan you will need to have Emergency Specific Preparedness Plans which are subsets of the larger plan and are used for occasions such as Pandemic Flu or for sheltering instructions (see the *All-Hazard Emergency Plan Template* tool on pg. 124).

Services and Functions

In an emergency situation, review all the services your organization regularly provides and determine the following:

- If providing more than one service, determine which critical services must be maintained and which less critical services can be temporarily suspended. Example: educational classes may be suspended but the meal program needs to stay functioning.
- Your ability to provide additional services to your members. Example: in addition to providing your regular service, would you be able to provide a meal? Transportation? If not, do you know any resources in the community that can provide your clients with these services?
- Your ability to take on new clients. Example: If a similar organization will no longer be able to provide services, can you take on their members? What adjustments would need to be made?
- If you are not able to provide your most critical service, do you have agreements with similar organizations to provide back-up services to your members? Network and develop these relationships before an emergency situation arises and have agreements in place.

Continuity of Operations Plan (COOP) (see *Preparing for Continuing Operations* on pg. 48)

Developing a Continuity of Operations Plan will ensure your community-based organization can survive an emergency physically, operationally and fiscally. You will need to determine essential service and functions and set clear priorities. Knowing your priorities makes everything fall into place. In crisis or opportunity, if you are clear on your priorities you can make the best decisions for your organization.

- Conduct a risk assessment (what are the vulnerabilities?) (see the *Risk Assessment Form* on pg. 10).
- Plan for utility and technology disruptions.
- List the primary services you will continue to provide following an emergency.
- List the critical material; staff and equipment necessary to maintain these operations (see the *Technology Inventory worksheet* on pg. 144).
- What neighboring agencies or businesses can you form connections with in order to share resources in an emergency, to maintain operations, or to assist others in their COOP? (see the *Sample Letter to Assist a Neighboring Community-based Organization* tool on pg.54).
- What are the predictable needs of your organization in emergencies?

- Will the needs of your clients require you to expand services in an emergency's aftermath?
- Will you need to consider providing new or different services?
- Identify programs that can be utilized after emergencies.
- Take inventory of losses and damage post-emergency (see the *Facility Damage Survey* tool on pg. 185).
- Consider applying for post-emergency funds.

Communication Plan

Make sure you can communicate with your staff, clients, volunteers and the community. Communication will make or break an emergency response. Communication is the key to letting people make the right decisions. Mastering how to send and receive information will help your organization in both a crisis and opportunity.

WHAT should you communicate?

- Agency operational status report
- Damage assessment
- Services offered or changes to them
- Funds or supplies needed
- Volunteers needed
- Other needs

TO WHOM are you communicating?

- Emergency services partners (local government, community-based organization partners)
- Staff and volunteers
- Organization members
- Media (check with your local government response first)
- General public

WHO should communicate the message?

- Ensure they have the proper training
- Ensure they have the proper authority
- Ensure they share consistent message with local/state government

WHAT can you do or prepare for in advance?

- Talking points/key messages
- Emergency-related funding/supply solicitation
- Email, phone, pager, cell phone, fax
- Take crisis/risk communication training

HOW should you communicate?

- Electronic
- Paper
- Verbal Combination

Emergency Communication Tools

There are many tools we do not normally consider that may become useful if an emergency cuts off your normal channels of communication.

• Bulletin board/white board	• Pagers
• Carbon paper	• Palm Pilots/BlackBerries
• CB radios	• Public signage
• Cell phones	• Runners
• Drums	• Digital telephones
• Flag pole	• Walkie-Talkies
• Ham radios	• Whistles
• Megaphone/bullhorns	

Community Outreach Options

There are different ways you can speak to your community. Different methods have different advantages, and may help you reach new people.

• American Sign Language interpreters	• In-person events, workshops, or classes
• Computers	• Language translators
• Door-to-door canvassing or home visits	• Mailing lists: brochures, flyers
• Email and list-serves	• Radio
• Fact Sheets or FAQ's	• Television
• Fax machines	• Video/CD-ROM/DVD
• Information phone lines/hotlines	• Websites
• Announcements	• Bulletins

Surge Capacity Plan

Having a solid surge capacity plan is the ability to manage a sudden, unexpected increase in volume of need that would otherwise severely challenge or exceed the current capacity of the facility and system. In the event of a widespread emergency, community-based organizations will not be the only groups experiencing this kind of surge. Hospitals, faith-based communities, fire, and police, to name a few, will also be affected.

Some Surge Capacity Issues

- Physical space – Your facility could be needed as a meeting place for people to gather information, seek help or for an emergency shelter or alternate care facility.
- Organizational structure could be strained due to increased demands on staff or how your staff is affected by the emergency. Staff may be stretched and/or unable to assist depending on the nature of the emergency (see *Individual Job Continuity Planning* activity on pg. 81).
- Support – Increased numbers of the community will require mental health and outreach services. Plan and think about how prepared you will be to handle the volume.
- Supplies – How long will your supplies (office, medical, food, water) last and what will you most likely need more of in the event of an emergency? It may be a good idea to stockpile these items.

Evacuation Plan (see the *All-Hazard Plan Template* tool on pg. 124)

Predetermine two locations (one in and one out of your neighborhood) where everyone (staff and others in the building) can go in case an emergency requires evacuation during business hours. Take into account special needs and requirements of staff and others as well as transportation arrangements. Use organizational communication structures to convey evacuations (e.g. phone chain).

Once at the site, designate a leader to:

- Conduct attendance at site
- Bring emergency documents and phone lists
- Bring emergency kit

Shelter-in-Place Plan

In certain situations, such as a tornado or chemical incident, it may be better to stay and shelter-in-place. The facility needs to plan for sheltering-in-place. In an emergency, your facility may be without telephone or other communications, electric power, or water and sewer service for several days. The facility must be able to exist on its own for at least 72 hours without outside assistance. Your plan should include provisions such as facility safety and security, food, water, medications, contact with first responders (fire, police, EMS), public health, transportation, staff, lighting, temperature control, waste disposal, and medical supplies (see the *Sheltering-in-Place Preparedness Checklist* tool on pg. 160).

Pandemic Influenza Plan

A pandemic is a global disease outbreak. An influenza pandemic occurs when a new influenza A virus emerges for which there is little or no immunity in the human population, begins to cause serious illness, and then spreads easily person-to-person worldwide. Many scientists believe it is only a matter of time until the next influenza pandemic occurs. However, the timing and severity of the next pandemic cannot be predicted.

If pandemic influenza occurs:

- Vaccine may not be available for several months.
- Antivirals may be used to treat the ill.
- Society, including governmental functions, may be disrupted.

The collaboration of community-based and faith-based organizations with public health agencies will be essential in protecting the public's health and safety when an influenza pandemic occurs. You can find more information at www.pandemicflu.gov (see the *Pandemic Flu Planning Checklist* tool on pg. 161 and the *Pandemic Flu Planning Guidance and Template* tool on pg. 163).

Social Distancing

Social distancing is the main defense to reduce the risk of pandemic influenza. Social distancing would be implemented during a health emergency when extraordinary measures are required to control the spread of disease or infection.

Social distancing is defined to include measures that increase the distance between individuals. These interventions can be applied to individuals, large groups or an entire community or region. They are designed to reduce personal interactions and thereby the risk of disease transmission. Some options include:

- Canceling or limiting services
- Canceling school classes

- Shutting down or limiting transportation services
- Declaring “snow days”, asking everyone to stay home and close the facility
- If your services must continue, consider providing personal protection for staff and volunteers.

B. Volunteers and Volunteer Organizations

Volunteers are an important resource for individual organizations and the surrounding community. Volunteers are needed at the community level, city/county/state and national levels. Community-based organizations may be asked to provide volunteers for services such as mass immunizations, sheltering, transportation, and meals. The Emergency Preparedness Committee will need to determine what services can be provided by the organization. Opportunities to serve in some communities through the Community Emergency Response Teams (CERT), Medical Reserve Corp, denominational disaster relief programs, and the American Red Cross should be promoted to organization volunteers. An orderly process is recommended for identifying volunteers. Volunteers are advised to sign up for one type of volunteer program (see the *Volunteer Organizations* tool on pg. 172).

Recruiting Volunteers

- Conduct a volunteer survey for emergency on an annual basis (see the *Survey of Volunteers to Assist during an Emergency* tool on pg. 51 and *Connecting with Clients* tool on pg. 50).
- Maintain a database of volunteers.
- Provide training for organizational volunteers such as CPR, use of an Automated External Defibrillator (AED), first-aid, listening, shelter volunteering, and assisting at immunization clinics. You can receive training through:
 - Community Emergency Response Team (CERT)
 - Minnesota Medical Reserve Corps (MRC)
 - Neighborhood Watch Programs
 - American Red Cross
 - Local health departments
 - Local hospitals and clinics

C. Plan Practice, Evaluation and Updates

Emergency preparedness plans should be practiced through exercises or tests in order to:

- Clarify roles and responsibilities.
- Reveal weaknesses in the plan.
- Improve coordination among the staff and volunteers and between the organization and outside resources.
- Improve readiness for a real incident.

Practicing the Plan

There are five types of exercises that may be conducted: (see the *Exercise Scenarios and Guidelines* tool on pg. 174)

1. **Orientation** – Instruction is provided about roles, relationships and responsibilities during an emergency (see the *PowerPoint Presentation, “Emergency Preparedness for Leadership & Staff”* on pg. 27).
2. **Drill** – Systems such as emergency notifications, communication procedures, evacuation procedures, or equipment are evaluated in order to identify problem areas.
3. **Tabletop Exercise** – A facilitated discussion of roles, responsibilities, and reactions to a given emergency scenario.

4. **Functional Exercises** – Members of the Emergency Preparedness Group and organizational staff actually perform their emergency response to a specific section(s) of the plans.
5. **Full-Scale Exercises** – A simulated real-life emergency situation is performed. This exercise involves the Emergency Preparedness Group, organizational staff, volunteers, and community response organizations.

It is recommended to start with basic orientation, then move through the exercises and drills as listed above. You should determine the frequency of these exercises or tests of your plans.

For more information on conducting tests and exercises, contact your city emergency manager or public health preparedness staff (see *Resources* on pg. 194). Additional information is available through FEMA online training: “An Orientation to Community Emergency Exercises – 120” at www.training.fema.gov/EMLweb/IS/is120.asp (see also the *Core Preparedness Training Recommendations for Emergencies* tool on pg. 44).

Evaluating the Plan

FEMA recommends that the written Emergency Plan be evaluated after each training, exercise or test as follows:

- On an annual basis.
- After each emergency.
- When personnel or facility changes are made.
- When policies or procedures change.

After the critique of the exercise, you should develop a written plan to address noted deficiencies. Among the issues to consider are:

- Does the plan reflect lessons learned from an exercise or actual event?
- Do the Emergency Preparedness Group, organization staff and clients understand their roles?
- Does the plan reflect changes in the physical layout of the facility?
- Have the hazards in the facility changed?
- Are names, titles and telephone number current in the plan?
- Is the facility attaining its training goals?

Updating the Plan

Procedures need to be developed and implemented for revising the plan (see the *Emergency Plan Review Schedule* tool on pg. 173). The following needs to be addressed:

1. Annual review of the existing Emergency Plan. Include a policy for review and making necessary changes to this plan.
2. Annual review of telephone numbers of staff, emergency agencies, and contracted services such as sheltering facilities, transportation services, and EMS.
3. At least an annual update or renewal of transfer agreements and transportation, and other Memorandums of Understanding.
4. Distribution of the plan to appropriate staff.
5. Indicate where the Emergency Plan will be located for staff reference.



Tool: All-Hazard Emergency Plan Template

(This document has been adapted from the City of Minneapolis MN 2007 “Emergency Preparedness Template” and Shasta County CA 2007 “Emergency Planning Faith-based Organizations”.)

[Organization Name] Emergency Plan

Date Created: _____

Date Approved: _____

Last Date Updated: _____

[Organization Logo or Motto]

Table of Contents	Page
Emergency Plan Basic Information	
Continuing Services	
Emergency Mission	
Emergency Essential Services	
Emergency Team and Team Leader/Incident Commander Information	
Building/Facility Information	
Employee, Volunteer, & Emergency Team Member Information	
Employee Roster	
Communication Plan	
Alternative Facilities	
Neighboring Agencies Support	
Important Business Resources	
Technology Inventory	
Working with your Local Government	
Key Contacts & Phone Numbers	
Evacuation Plan	
Shelter-in-Place Plan	
Emergency Supplies Kit	
Building Emergency Procedures	
Injury/Incident Report Form	
Drill/Exercise Evaluation Form	

Emergency Preparedness Plan

<i>Organization Name:</i>	
<i>Address:</i>	
<i>Phone Number:</i>	
<i>Email Address:</i>	

Date plan was created:	
Plan approved by:	

Plan Review:	
Date:	Approved by:
Date:	Approved by:
Date:	Approved by:
Date:	Approved by:
Date:	Approved by:
Date:	Approved by:

Continuing Services

It is important that essential services are continued during an emergency. In order for these services to be continued, the organization must be prepared, a way that preparedness can be reached is by having a Continuity of Operations Plan (COOP).

The purpose of a Continuity of Operations Plan is to provide your organization with the information and tools necessary to continue providing services to your clients. This plan is meant to be written ahead of time to allow for quick and easy access when an emergency occurs.

Emergency Mission

Define the purpose of this plan for your organization in the event of an emergency.

Examples include:

- Ensure the continuation or quick resumption of services.
- To provide care and support to disaster victims (clients and community members).
- To provide services/resources to help in the community's recovery from emergency (consider what services/resources you plan to provide).

List of all the Essential Services (*your organization's name*) Provides

After establishing a list of the essential services your organization provides, think about what services your organization could provide during an emergency. (Example: If you have a large building your organization may become an emergency shelter or a place to reunite families)

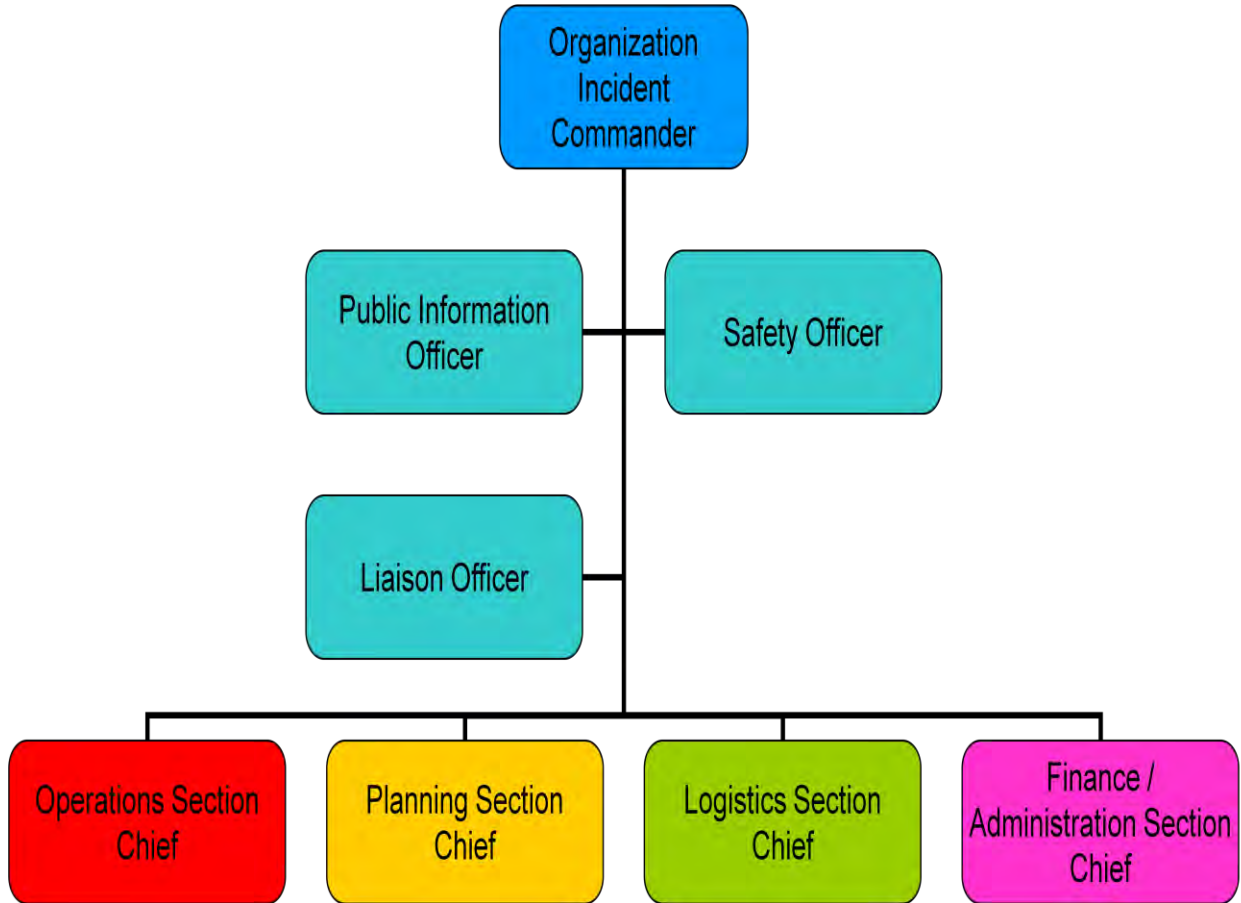
List of all the Emergency Services (*your organization's name*) May Provide

When emergencies occur they will most likely not only affect your clients but also your staff. The table below will help you identify what exactly you will require in order to continue offering services.

Rank Importance	Critical Essential Services	Location of Service	Necessary Equipment and Supplies	Minimum Staff Required



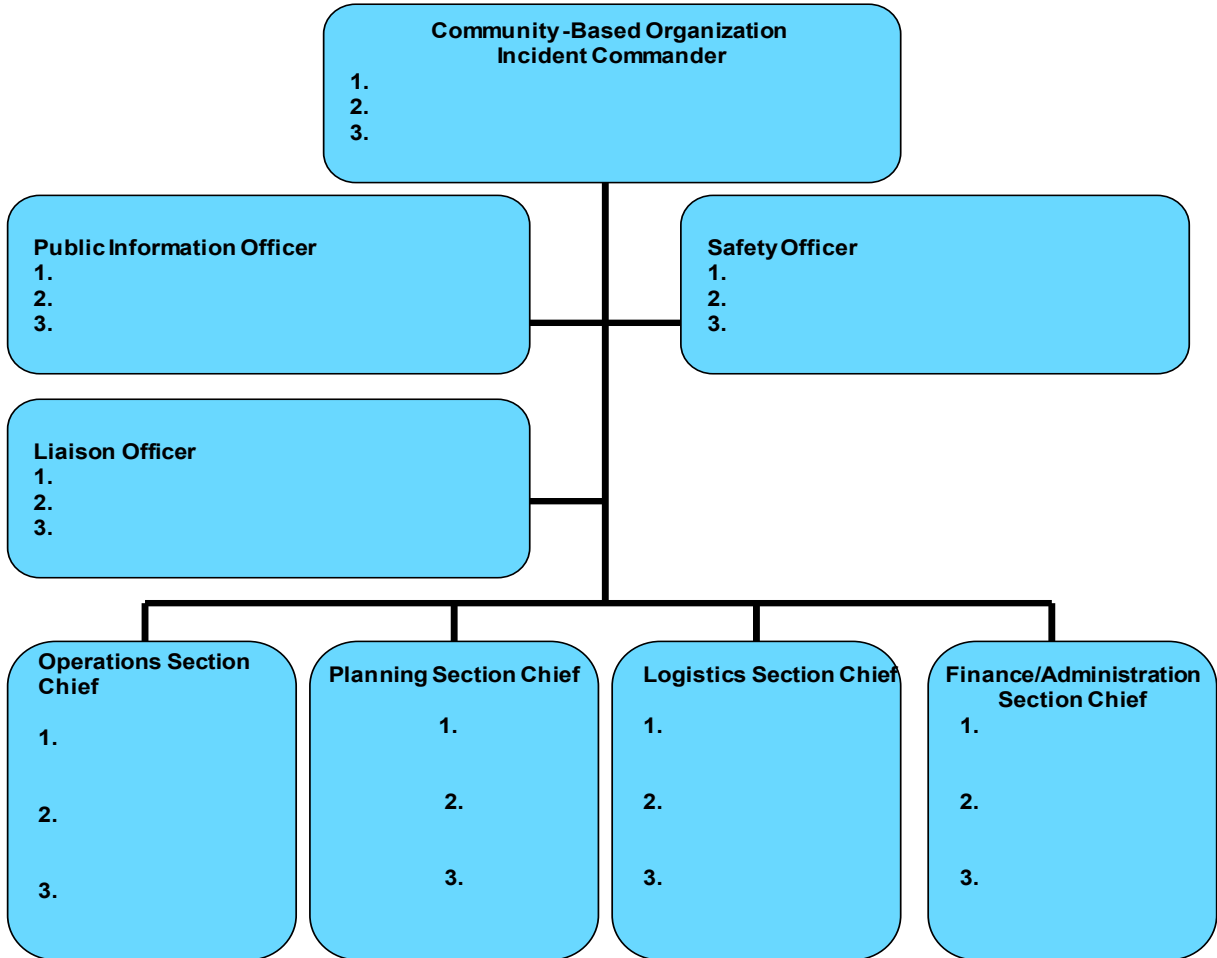
Tool: ICS Organizational Chart





Tool: Fill-In Incident Command System Chart

Fill in the chart with the individuals who may take on these specific roles during an emergency response. It is best to have three potential candidates for each position. Add phone numbers on this sheet to help with the communication process. You may not need all of the jobs for an emergency. Remind individuals that filling this out completely is for "just in case" purposes. Use the *Job Action Sheets* tool in this section for help.



Emergency Team Leader or Incident Commander

The Incident Commander should be in charge of writing and implementing the COOP. They should have the power to activate the plan when an emergency is foreseen or occurring. To help identify what is needed in your organization's COOP there should be a planning team established that will assist in developing the plan and implementing the plan during an emergency. Below is a chart where their information can be placed. It may be helpful to incorporate individuals from different parts of the organization or individuals who provide different services within the organization. In the absence of the head of the COOP Planning Team there needs to be a designated secondary person that will assume their responsibilities, this person should be a member of the COOP Planning Team. The tables below are based on the *California Volunteers COOP Workbook*.

1. The Incident Commander for our organization in an emergency is:

Name

Telephone Number

Alternate Number

Work E-mail Address

Home E-Mail Address

2. In the absence of the Incident Commander, the first alternate Incident Commander is:

Name

Telephone Number

Alternate Number

Work E-mail Address

Home E-Mail Address

3. In the absence of the first alternate Incident Commander, the second alternate Incident Commander is:

Name

Telephone Number

Alternate Number

Work E-mail Address

Home E-Mail Address

4. The authorized spokesperson (Public Information Officer) is:

Name

Telephone Number

Alternate Number

Work E-mail Address

Home E-Mail Address

Emergency Planning Team Members			
Name	Organization Role/ Department Represented	Telephone	Email

During an emergency it is important to have leaders who can make the critical decisions and are familiar with all the different services and needs your organization provides. Below is chart where leadership staff should be listed in order of succession.

Community Organization's plan of succession (list, by position or title, who determines which staff is next in line to assume overall authority).
1.
2.
3.

Building Description

Provide some basic building data (information that may be helpful to emergency services personnel)

<i>Occupancy Type (Office Building, school, church, etc.)</i>	
<i>Total Square Footage</i>	
<i>Year Built</i>	<i>Date of Most Recent Renovation</i>
<i>Number of Stories</i>	<i>Is there a basement?</i>
<i>Type of Construction</i>	
<i>Insurance Company</i>	
<i>Describe any Unique features (inside or outside)</i>	

NOTE: Attach any floor plans of the facility at the end of the document.

Building Supplies and Safety

The following emergency supplies and equipment are located as follows:	
Supplies	Location
Portable radios and extra batteries	
Emergency First-aid supplies	
Flashlights and extra batteries	
Stored drinking water	
Emergency (3-day) food supply	
Basic tool kit	
Fire Alarm System:	
<ul style="list-style-type: none"> • Location of fire alarm 	
<ul style="list-style-type: none"> • Location of fire extinguishers 	
<ul style="list-style-type: none"> • Outside agency who monitors system, name and phone 	
<ul style="list-style-type: none"> • Location of Sprinkler System (water flow valves and standpipes, including tamper alarms) 	
Exits:	
<ul style="list-style-type: none"> • Information on fire escapes (type and location) 	
<ul style="list-style-type: none"> • Information on fire doors 	

The following utility shut-offs and tools are located as follows:

Main gas valve	
Crescent wrench or gas shut-off tools	
Main water valve	
Electrical fuse box/ circuit breaker	
Emergency or portable generator (if applicable)	

Inventory of neighborhood resources:

1. Where can you rent or borrow a generator from? _____
2. Where is the nearest medical treatment facility? (Attach driving and walking directions): _____

3. Where is the nearest fire station? _____

4. Where is the nearest police station? _____

5. Where can you go for additional water? _____
6. Where can you go for additional food supplies? _____
7. Where can you go for additional medical supplies, medicines, and special equipment? _____

Volunteer Emergency Information
 (Make copies for each volunteer)

<i>Name</i>		
<i>Position</i>		
<i>Key responsibilities</i>		
<i>Home address</i>	<i>State</i>	<i>Zip</i>
<i>Home phone</i>		
<i>Cell phone</i>		
<i>Pager</i>	<i>Fax</i>	
<i>Work e-mail address</i>		
<i>Home e-mail address</i>		
<i>Emergency contact</i>	<i>Relationship</i>	
<i>Emergency contact phone number</i>	<i>Alternate number</i>	

Do you and your family have an emergency preparedness plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you and your family have an emergency preparedness kit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In an emergency situation would you continue to work assigned duties?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In an emergency situation would you be willing to work additional days or hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
In an emergency situation would you be able to work from your home?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
With personal protective equipment (PPE), would you be willing to work with individuals who have a communicable disease?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

- Certifications: LPN/RN CPR First-Aid
 Emergency Medical Technician Other AED

Emergency Team Member Information
(Make copies for each member)

Name

Position

Key responsibilities

Home address

State

Zip

Home phone

Cell phone

Pager

Fax

Work e-mail address

Home e-mail address

Emergency contact

Relationship

Emergency contact phone number

Alternate number

Do you and your family have an emergency preparedness plan? Yes No

Do you and your family have an emergency preparedness kit? Yes No

In an emergency situation would you continue to work assigned duties? Yes No

In an emergency situation would you be willing to work additional days or hours? Yes No

In an emergency situation would you be able to work from your home? Yes No

With personal protective equipment (PPE), would you be willing to work with individuals who have a communicable disease? Yes No

Certifications: LPN/RN CPR First-Aid
 Emergency Medical Technician Other AED

Employee Roster

Create a list of the essential staff you would need to operate your organization, it is important to have a list of emergency contacts for each staff member on file in case they become ill or hurt.

Name	Position	Primary Phone Number	Emergency Contact	Emergency Contact Phone Number

Communication Plan

What Should You Communicate?	Who are you communicating the message to? (Ex: local government, clients, staff)	Who should communicate the message? (Ex: emergency team leader)	How should the message be communicated? (Ex: electronically, phone call tree, mail)	Preparatory Actions (Ex: talking points, key messages, training)
Organization's status				
Damage assessment				
Services offered or service changes				
Funds or supplies needed				
Volunteers needed				
Others needed				
Other:				

Directions for accessing remote voicemail:

Directions for accessing remote email:

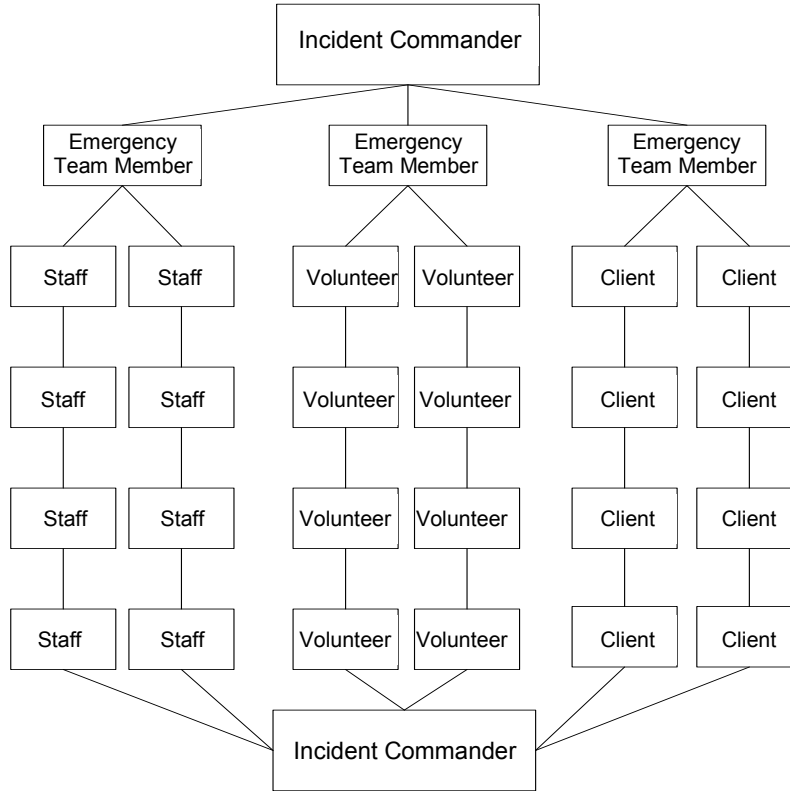
If phones are not working, our backup communication plan is as follows (include provisions for land line and cellular phones):

Designate one remote phone number where an emergency message can be recorded and be sure that all clients know that number and understand its use.

Responsible party:
Alternate responsible party:
Number:

Additional communication directions:

Sample Calling Tree (see also the *Phone Call Tree* on pg. 47)



Alternative Facilities

Not only is it important to identify what services your organization could provide during an emergency, and how you will operate within your normal facility, you must also consider what your organization will do if your facility is not safe to use during an emergency. Below is a table where you can identify your normal facility as well as two other possible options. Establishing a written agreement in advance is important with regards to renting or using other space. Consider other organizations near your facility that provide similar services that would be willing to let your organization relocate there during an emergency. The table below is based on a chart in the *California Volunteers COOP Workbook*. Once you have made an agreement with another organization or facility, attach a copy of the agreement to this document.

Facility	Address	Phone Number	Comments

Neighboring Agencies Support

After considering different options for where your organization may relocate, consider where you will obtain your necessary supplies and resources from during an emergency. It may be a good idea to partner with an organization that provides similar resources to your organization. This would allow for sharing of resources when they may become diminished. Also consider partnering with an organization close to yours that offers different resources. Collaborating with them could allow for service of more clients and individuals in the community, as well as services for your clients that you may not currently offer.

Neighboring Agencies Providing Additional/Backup Services	
Attach any Memorandums or Letters of Understanding to the back of the plan.	
1. <i>Name of agency</i>	<i>Contact information</i>
<i>Service provided</i>	
2. <i>Name of agency</i>	<i>Contact information</i>
<i>Service provided</i>	
3. <i>Name of agency</i>	<i>Contact information</i>
<i>Service provided</i>	
4. <i>Name of agency</i>	<i>Contact information</i>
<i>Service provided</i>	

Important Business Resources

Understanding where important documents and records are during an emergency is important especially if your organization needs to relocate or evacuate, below is a table based from the *California Volunteers COOP Workbook*.

Record Type	Electronic or Paper?	Storage Location	Secondary Storage Location	Staff Responsible for Records	Secondary Staff Responsible for Records
Financial Records					
Personal Records					
Contractual Records					
Client Records					
Bank Accounts					
Legal Documents					
COOP Plan					

Vital Records may include but are not limited to:

This chart helps your organization identify specific records that are important to your organization, this chart can be used to group these records together in more general categories and list them in the chart above. The following table is based off of the *Vital Information Management from Ocala/ Marion county Economic Development Council*.

Financial	
<input type="checkbox"/> 401-K Information	<input type="checkbox"/> Financial statements (bank accounts, credit cards)
<input type="checkbox"/> Business account information <ul style="list-style-type: none"> • Account numbers and company contact telephone numbers • Telephone • Electric • Company credit cards • All customers • All vendors 	<input type="checkbox"/> Tax exemption status certificate - 501 (c) (3)
	<input type="checkbox"/> Donor records
<input type="checkbox"/> Personal records/payroll information	<input type="checkbox"/> Insurance information <ul style="list-style-type: none"> • Business insurance <ul style="list-style-type: none"> ▪ All equipment insurance-extended warranties • Employee insurance
Contractual	
<input type="checkbox"/> Copy of Employee handbook	<input type="checkbox"/> Copy of building lease
<input type="checkbox"/> Vendor records	<input type="checkbox"/> Inventory of organization equipment
<input type="checkbox"/> Copy of company bylaws	<input type="checkbox"/> Copy of leases/deeds
<input type="checkbox"/> Client records	<input type="checkbox"/> Licenses
<input type="checkbox"/> Computer passwords	<input type="checkbox"/> Mission statement
<input type="checkbox"/> Copy of contracts	<input type="checkbox"/> Copy of any equipment leases <ul style="list-style-type: none"> • All leased and company vehicles • Copier • Postage machine • Telephones or other leased items
<input type="checkbox"/> Copy of any current company Strategic or Business Plan	
Other	
<input type="checkbox"/> Diagram of building layout	<input type="checkbox"/> Board minutes and rosters
<input type="checkbox"/> Corporate seal	<input type="checkbox"/> Artwork (e.g. stationery, logo)
<input type="checkbox"/> Emergency plan	<input type="checkbox"/> Volunteer records and Handbook
<input type="checkbox"/> Photographs of the facility and key equipment	<input type="checkbox"/> Articles of incorporation

It is important to have a location away from your facility where important documents can be stored, consider purchasing a safety deposit box or send the records to an affiliated organization in another city for safe storage.

Off-site Storage of Important Documents and Vital Records
Location:
Address:
Telephone Number:

If accounting and payroll records are destroyed, continuity will be provided by the following:
1.
2.
3.

Technology Inventory

With the vast amount of technology that exists today the need for tracking what your organization uses is important if you were to have to relocate or replace damaged items. This chart is borrowed from *Neighborhood Works America*.

Computer Hardware	Title & Version or Model No.	Hardware Size, RAM and CPU Capacity	Serial No.	Purchase Date	Quantity
Computer Software	Software Title and Version	Serial/Product ID Number	No. of Licenses/License Number	Date Purchased	Cost
Printers/ Fax Machines	Model/Version	Share Name	Physical Location	Date Purchased	Cost
Telephones	Brand	Type (Cord/Cordless)	Service Provider	Phone Number	Cost
Cell Phones	Carrier	Phone Number	Model	Service Plan	Cost

Vehicles	Brand	Model	Year	Warranty	Cost

*This table can be adjusted to meet your organization's needs.

Working with your Local Government

Work with your local government to identify what services your organization will provide during an emergency, it is important to keep your local government informed, they may be able to assist with obtaining supplies that can help your organization maintain essential services.

Specify area for involvement during an emergency (see *Continuing Operations* on pg. 48 or the *Letter of Intent with Local Government* tool on pg. 52 to help).

Key Contacts and Phone Numbers

Different individuals in your organization may be in charge of handling different types of business; during an emergency having all the information necessary to function in one place is essential. Below is a chart that contains many different services your organization may use on a daily basis.

<i>Key Contacts</i>	
Service Provided	Telephone number
<i>Accountant</i>	
<i>Attorney</i>	
<i>Bank</i>	
<i>Billing/Invoicing Service</i>	
<i>Benefits Administrator</i>	

<i>Building Manager/Owner</i>	
<i>Building Security</i>	
<i>Creditor</i>	
<i>Electric Company</i>	
<i>Electrician</i>	
<i>E-mail/Internet Service Provider</i>	
<i>Emergency Management Agency</i>	
<i>Fire Department</i>	
<i>Gas Company</i>	
<i>Generator Rental</i>	
<i>Grocery Store (nearest one)</i>	
<i>Hardware Store (nearest one)</i>	
<i>Hazardous Materials</i>	
<i>Hospital (nearest one)</i>	
<i>Insurance Agent/Claims Reporting</i>	
<i>IT/Computer Service Provider</i>	

<i>Local Newspaper</i>	
<i>Mental Health/Social Services Agency</i>	
<i>Payroll Processing</i>	
<i>Pharmacy (nearest one)</i>	
<i>Plumber</i>	
<i>Poison Control Center</i>	
<i>Police Department (non-emergency)</i>	
<i>Public Works Department</i>	
<i>Telephone Company</i>	
<i>Web Site Provider</i>	
<i>Other</i>	

Phone Numbers

Organization	Phone Number	Web Site
American Red Cross Twin Cities Chapter	612-871-7676	www.redcrossstc.org
Centers for Disease Control & Prevention	1-800-311-3435	www.cdc.gov
ECHO Emergency & Community Health Outreach (ECHO)	651-224-3344 1-888-883-8831	www.echominnesota.org
Minnesota Department of Health	651-201-5000	www.health.state.mn.us
Minnesota Duty Officer	1-800-422-0798 651-649-5451	
MNVOAD (Minnesota Volunteers Responding to Emergency)	612-664-8589	www.mnvoad.org
WCCO 830 AM (radio)	612-370-0611	www.wccoradio.com
KSTP 1500 AM (radio)	651-647-1500	
WCCO Channel 4	612-339-4444	www.wcco.com
KSTP Channel 5	651-646-5555	www.kstp.com
KMSP Fox 9	952-944-9999	www.myfoxtwincities.com
KARE Channel 11	763-546-1111	www.kare11.com
National Weather Service Chanhassen	952-361-6680	www.nws.noaa.gov

Evacuation

Evacuation Plan

During business hours, everyone in the building will go to:

Name of site

Address

City

Name of site manager (if re-locating to another business)

Telephone number

Directions to site:

Agency person in charge at evacuation site:

Responsibilities include:

- Conducting attendance at site
- Bringing emergency documents and phone lists
- Bringing emergency kit
- Other:

Are there people who will need assistance evacuating your facility? If so, what assistance is needed?

Who will be responsible for the care of these individuals at the alternate site?

What will your members/visitors need that may not be available at a temporary location?

Transportation for moving program individuals to a temporary location or to their homes will be provided by:

Transportation company

Contact name

Telephone number

Alternate company

Contact name

Telephone number

If a building evacuation is initiated, important ~~dos~~ and ~~don'ts~~ are:

- Remain calm.
- Follow the instructions of the incident coordinator or emergency response team, if applicable.
- If you occupy an enclosed office, close the door as you leave.
- Use stairwells (do not use elevator) for evacuation. Be alert for other staff, members, and emergency agency personnel who might also be using the stairwells by staying to the right side of the stairs allowing for emergency personal to come up the stairs.
- Do not return for coats, purses, briefcases, etc, after you have left the area.
- Do not smoke.
- Do not return to your area until the ~~all clear~~ signal is given.

Extended Relocation

If your current location is not accessible for an extended period of time, operations will be moved to the following location: (Attach Memorandum or Letter of Understanding to the back of this document)

Business name/owner

Address

City

State

Zip

Telephone number

Alternate number

Directions to relocation site:

Shelter-in-Place

If a "shelter-in-place" emergency is issued, we will move to the following room:

Ensure the following:

- All doors and windows are closed.
- Cracks around doors or windows are sealed with duct tape or plastic sheeting.
- All vents are closed and sealed.
- Any ventilation systems, motors, or fans are turned off.
- Emergency supply kit is available.
- Listen to radio/television and follow directions from authorities until they issue an "all-clear".

Emergency Supplies Kit/Go-Kit

Items in an emergency supply kit may include but are not limited to the following items. Adjust these items to meet the needs of your organization.

- Flash drive/ USB containing essential documents (financial records, insurance policy, etc.)
- Batteries – extra ones for flashlights and radios
- Blankets/sleeping bags/Mylar –space blankets”
- Bottled water (1 gallon per person per day)
- Can opener (manual)
- Cash in small denominations (include correct change for pay phones)
- Duct tape
- Fire extinguisher
- First-aid kit (scissors, tweezers, band-aids, cotton balls, gauze pads/roller gauze and tape, anti-bacterial wipes, first aid ointment, vinyl gloves, non-aspirin pain reliever, safety pins, first-aid book)
- Flashlight/light sticks
- Food/snacks (ready to eat canned goods, raisins, granola bars, etc.)
- Gloves
- Hand sanitizer
- NOAA weather alert radio
- Office supplies (note pads, pens)
- Paper plates, cups, utensils
- Paper towels, wipes
- Personal hygiene items
- Plastic bags – all size re-sealable bags and garbage bags
- Plastic sheeting
- Radio – battery operated
- Rope
- Tool kit (pliers, screwdriver, hammer, nails, crow bar, adjustable wrench, etc.)
- Change of clothes
- Whistle
- Other _____
- Other _____

BUILDING EMERGENCY PROCEDURES

Leader Responsibilities

In the event of an emergency, leader responsibilities may include the following:

- Knowing how to correctly respond to and summon help for a medical emergency.
- Knowing how to correctly report a fire or smoke emergency using the 911 emergency numbers.
- Knowing the locations of the manual fire alarm pull stations in their area.
- Knowing the locations of the fire extinguishers in their area and how to use them.
- Knowing how to correctly respond to a fire warning alarm.
- Knowing the facility's lock-down/shelter-in-place procedure.
- Knowing designated shelter areas and precautions to take in the event of a tornado emergency.
- Becoming familiar with exit routes and knowing alternate exits to correctly respond to a call for evacuation.
- Closing all opened doors as they evacuate an area.

Medical Emergency

Call 911 or other appropriate emergency response activation number. Be prepared to give the following information:

- Name and extension
- Location
- Number of people involved
- Nature of injury or illness
- Remember to stay on the line until help arrives, if at all possible

While waiting for professional help, do not move the ill or injured person unless safety considerations necessitate movement or transportation to a safer location. When professional help arrives:

- Allow responding units to take control of situation.
- Emergency response team members will stand by to assist as needed

Regular CPR/first-aid and AED training is recommended for all leaders, especially pre-school and school teachers.

Note: Treat minor injuries from supplies in the first-aid kits.

The kits are located: _____

Fire and Smoke Emergencies

If you detect smoke and/or fire:

- Activate the manual fire alarm.
- Initiate evacuation procedures for any occupants of the affected building(s).
- Call 911 (move to a safe area before making this call).
- Give your name, telephone number, and location.
- Describe the situation.
- If you know how to use a fire extinguisher and feel the best course of action is to attempt to extinguish the fire, locate an extinguisher and, without risking injury attempt to extinguish the fire.
- If the fire is beyond the point of a safe attempt to extinguish it, isolate the fire by closing doors in the area before evacuating.

If the fire alarm sounds:

- Do not use the elevator.
- Immediately initiate evacuation procedures.
- Assist disabled persons in your area.
- If you encounter smoke, take short breaths through your nose and crawl along the floor to the nearest exit.
- Feel all doors with your hand before opening. If the door is hot, do not open it. If the door is cool, open it slowly, keeping behind the door in case you have to quickly close it to protect yourself from oncoming smoke or fire.
- Proceed to the ground level and outdoors.
- Move **upwind** of the building at least 75 feet away from the building and beyond designated fire lanes. Go to your designated assembly area (if possible).
- Do not go to your automobile or attempt to move it from the parking lot. This could hinder access by emergency vehicles.
- Do not congregate near building exits, driveways, or roadways.
- Do not reenter the building until an “all clear” is issued by the incident coordinator. (Note: The “all clear” should be initially issued by the Fire Department.)

Tornado & Severe Weather Emergency

The National Weather Service has developed a method of identifying storm conditions that foster the development of tornados. The classification and definitions of storm conditions are:

- Tornado watch
- Tornado warning

A “**tornado watch**” status indicates that weather conditions are favorable for the development of tornados. The “~~w~~atch areas” are usually large geographic areas, covering many counties or even states that could be affected by severe weather conditions including tornados.

A “~~t~~**ornado warning**” is an alert issued by the National Weather Service after a tornado has been detected by radar or sighted by weather watchers or by the public. The National Weather Service provides the approximate time of detection, the location of the storm and the direction of movement. A tornado can move from 25 to 40 miles per hour so prompt emergency action must be taken. During a tornado warning, a battery-powered radio should be used and tuned to the National Weather Service and local weather watchers radio frequency. Should a tornado develop which threatens your area, emergency response team members should initiate actions to notify and protect all staff, members, and visitors in the facility.

If a Tornado Warning is Announced

When you hear the announcement for a tornado warning:

- Shelter-in-place by moving to a designated tornado shelter area immediately. Move quickly, but do not run.
- Do not use elevators.
- Assist disabled persons in your area.
- Shelter-in-place until you hear an announcement from a member of the safety response team and/or a hand-held radio system station (if applicable) that it is safe to return to your area.

Tornado Safety Basics

Tornados and tornado-producing weather conditions are common in Minnesota. Familiarize yourself with the basics of protecting yourself wherever you may be.

If you are indoors, the general responses to a tornado warning are:

- Move away from windows. If you have time, close any window blinds or shades to help prevent flying glass and debris—the cause of most injuries in office buildings.
- Warn others. Encourage them to get to safety immediately.
- Move away from large expanses of unsupported ceilings.
- Move away from building perimeter area.
- Move to an interior room away from windows—to an enclosed room or conference room, a rest room, an interior stairwell.
- If in an interior hallway, away from windows, crouch down as low as possible.
- If you are in an elevator, stop and get off at the next floor and take cover in an interior hallway or interior room. Do not use elevators during tornado warnings.
- If moving to a safer location in the building is not possible, get under a desk or table in an interior office.
- Once you have gone to the safest place you can find, protect your face and head, and stay where you are until an “all clear” signal is given. (If circumstances change and new dangers are present, seek a different safe place.)
- In general, gymnasiums are not good “shelter-in-place” locations for severe weather.

If you are outdoors, the general responses to a tornado warning are:

- If at all possible, move indoors to an interior room.
- If moving indoors is not possible, take cover near objects that are low and securely anchored to the ground, such as culverts or low retaining walls.

Intruder/Active Shooter Emergency Action Plan

When a hostile person(s) is actively causing deadly harm or the imminent threat of deadly harm or is barricaded within a building, the following procedures should be followed:

- Lock yourself in the room you are in at the time of the threatening activity.
- If communication is available, call **911** or other appropriate emergency numbers.
- Don't stay in open areas.
- Do not sound the fire alarm. A fire alarm would signal the occupants in the rooms to evacuate the building and thus place them in potential harm as they attempted to exit.
- Lock the window and close blinds or curtains.
- Stay away from windows.
- Turn all lights and audio equipment off.
- Try to stay calm and be as quiet as possible.

- If you are caught in an open area, such as a hallway or main gathering area, you must decide what action to take:
 1. You can try to hide, but make sure it is a well hidden space or you may be found as the intruder moves through the building.
 2. If you think you can safely make it out of the building by running, then do so. If you decide to run, do not run in a straight line. Keep any objects you can between you and the hostile person(s) while running. Use trees, vehicles or any other object to block you from view as you run. When away from the immediate area of danger, summon help any way you can and warn others.
 3. If the person(s) is causing death or serious physical injury to others and you are unable to run or hide, you may choose to play dead if other victims are around you.
 4. The last option you have, if caught in an open area, may be to fight back. This is dangerous, but depending on your situation, this could be an option.
 5. If you are caught by the intruder and are not going to fight back, follow their directions and do not look the intruder in the eyes.

Once law enforcement arrives, obey all commands. This may involve you being handcuffed or made to put your hands in the air. This is done for safety reasons, and once circumstances are evaluated by law enforcement, they will give you further directions to follow.



Tool: Injury/Incident Report

This sample form may be helpful should an injury occur during an evacuation or other emergency procedure. It is important to maintain accurate records of any injuries incurred during an emergency, in case of insurance or liability questions.

Date: _____

Injured Person: _____

Completed by: _____

Where were you when injury occurred:

Description of injury and how it occurred: (Use back if more space is needed)

Witnesses:

Action taken/Medical treatment provided:



Tool: Drill/Exercise Evaluation Form

Date and time of drill/exercise	
Type of drill/exercise:	

Objectives of drill/exercise: (Objectives should be measurable.)

Staff participating:

Assessment:
Explain what worked well:

Explain what needs improvement/corrective action:

Plan for improvement/corrective action:

Planned re-test date:

--

Evaluation completed by:

--



Tool: Sheltering-in-Place Preparedness Checklist

The items on this checklist are emergency-specific, so not all items will necessarily be applicable depending on the nature of the emergency.

Date Completed	Item
	Plan describing how three days of non-perishable meals are kept on hand for staff. The plan should include special diet requirements.
	Plan describing how 72 hours of portable water is stored and available.
	Plan identifying 72 hours of necessary medications that are stored at the facility and how necessary temperature control and security requirements will be met.
	Plan to identify staff that will work during the event, any transportation requirements that staff might need, and how the facility will meet those needs.
	Plan for an alternative power source to the facility such as an onsite generator and describe how 72 hours of fuel will be maintained and stored.
	Alternate power source plan provides for necessary testing of the generator.
	Plan describing how the facility will dispose of or store waste and biological waste until normal waste removal is restored.
	Emergency Communications Plan, such as for cell phones, hand held radios, pagers, Blackberries, satellite phones, laptop computers for instant messaging, HAM radios.
	Adequate planning considerations given to needs of staff.



Tool: Pandemic Flu Planning Checklist

The following checklist provides guidance for community-based organizations in developing and improving influenza pandemic response and preparedness plans. Many of the points suggested can improve your organization's ability to protect your community during emergencies in general.

Date Completed	Item
	Assign key staff with the authority to develop, maintain and act upon an influenza pandemic preparedness and response plan.
	Determine the potential impact of a pandemic on your organization's usual activities and services. Plan for situations likely to require increasing, decreasing, or altering the services your organization delivers.
	Determine the potential impact of a pandemic on outside resources that your organization depends on to deliver its services (e.g., supplies, travel, etc.)
	Outline the organizational structure during an emergency and revise periodically. The outline should identify key contacts with multiple back-ups, roles and responsibilities, and who is supposed to report to whom.
	Identify and train essential staff (including full-time, part-time, or volunteer staff) needed to carry on your organization's work during a pandemic. Include back up plans. Cross train staff in other jobs so that if staff are unable to come into work, others are ready to take on their responsibilities.
	Test your response and preparedness plan using an exercise or drill, and review and revise your plan as needed.
	Find up-to-date, reliable pandemic information. (Examples include www.cdc.gov , www.health.state.mn.us and local Public Health websites)
	Distribute materials with basic information about pandemic influenza: signs and symptoms, how it is spread, ways to protect yourself and your family (e.g., respiratory hygiene and cough etiquette), family preparedness plans, and how to care for ill persons at home.
	When appropriate, include basic information about pandemic influenza in public meetings.
	Share information about your pandemic preparedness and response plan with staff, members, and persons in the communities that you serve.
	Develop tools to communicate information about pandemic status and your organization's actions. This might include websites, flyers, local newspaper announcements, pre-recorded widely distributed phone messages, etc.
	Consider your organization's unique contribution to addressing rumors, misinformation, fear and anxiety.
	Advise staff, members, and persons in the communities you serve to follow information provided by public health authorities.
	Ensure that what you communicate is appropriate for the cultures, languages and reading levels of your staff, members, and persons in the communities that you serve.
	Plan for staff absences due to personal and/or family illnesses, quarantines, and school, business, and public transportation closures.
	Work with local health authorities to encourage yearly influenza vaccination for staff, members, and in the communities that you serve.
	Evaluate access to mental health and social services during a pandemic for your

	staff, members, and communities that you serve; improve access to these services as needed.
	Identify at-risk and vulnerable persons (e.g. elderly, disabled, limited English speakers) and be sure to include their needs in your response and preparedness plan. Establish relationships with them in advance so they will expect and trust your presence during a crisis.
	Set up policies for non-penalized staff leave for personal illness or care for sick family members during a pandemic.
	Set up mandatory sick-leave policies for staff suspected to be ill, or who become ill at the worksite. Employees should remain at home until their symptoms resolve and they are physically ready to return to duty.
	Set up policies for flexible work hours and working from home.
	Evaluate your organization's usual activities and services to identify those that may facilitate virus spread from person to person. Set up policies to modify these activities to prevent the spread of pandemic influenza (e.g. guidance for respiratory hygiene and cough etiquette, and instructions for persons with influenza symptoms to stay home rather than visit in person).
	Follow CDC travel recommendations during an influenza pandemic. Recommendations may include restricting travel to affected domestic and international sites, recalling non-essential staff working in or near an affected site when an outbreak begins, and distributing health information to persons who are returning from affected areas.
	Set procedures for activating your organization's response plan when an influenza pandemic is declared by public health authorities and altering your organization's operations accordingly.
	Determine the amount of supplies needed to promote respiratory hygiene and cough etiquette and how they will be obtained.
	Consider focusing your organization's efforts during a pandemic to providing services that are most needed during the emergency.
	Understand the roles of federal, state, and local public health agencies and emergency responders and what to expect and what not to expect from each in the event of a pandemic.
	Work with local public health agencies, emergency responders, local healthcare facilities and insurers to understand their plans and what they can provide. Share your preparedness and response plan, what your organization is able to contribute, and take part in their planning. Assign a point of contact to maximize communication between your organization and your state and local public health systems.
	Coordinate with emergency responders and local healthcare facilities to improve availability of medical advice and timely/urgent healthcare services and treatment for your staff, members, and communities that you serve.
	Share what you have learned from developing your preparedness and response plan with other community-based organizations to improve community response efforts.
	Work together with other community-based organizations in your local area and through networks (associations, etc) to help your communities prepare for pandemic influenza.



Background

What is the flu and why do we need to plan for it?

Influenza, or flu, in humans is a highly contagious disease that is usually spread through droplets of moisture caused by coughing or sneezing. Flu is caused by various forms of virus. As the virus attacks our bodies, it causes a variety of symptoms. The most common symptoms include: fever, headache, runny nose, body aches, cough, sore throat, extreme fatigue, and stomach and intestinal discomfort.

Flu season comes every year, usually in the winter. Normally, approximately 10% of the population is affected by flu symptoms. For most people, it is unpleasant, but not life-threatening. However, approximately 35,000 people die each year in the United States from symptoms or complications of the flu.

What makes the flu a pandemic flu?

We speak of a pandemic flu when a brand new strain of flu virus appears for which there is low human immunity and high human-to-human contagiousness. Normally, forms of flu change only a little from year to year – minor mutations of the previous year's variety of flu virus. Humans infected during a recent flu season retain immunity, because their immune systems "recognize" the slightly changed new flu strain and attack invading viruses, killing them.

Influenza Virus A sometimes recombines or mutates into a form that is a sudden, large change. If a human population has not recently experienced a similar form, its immune systems do not recognize the virus, do not attack and the virus enters the body successfully and begins to spread. When immunity is low within a population, the disease spreads rapidly. If it spreads over a wide portion of the globe, we call this episode of flu a "pandemic flu."

In the last century, there have been notable pandemic flu episodes - in 1918, 1957, and 1968. The 1918 flu, "The Great Influenza" as a recent book titles it, erupted during the last year of World War I. It caused especially strong symptoms and extremely high mortality rates. It is estimated that the worldwide death toll was between 20 million and 50 million.

Purpose of Pandemic Flu Planning

The World Health Organization (WHO) has identified six phases in a Pandemic Alert System. Phase Three, which we are generally in, means that humans have been infected by a new subtype virus that is spreading through an animal population (like the Avian or Bird flu), but that there is no (or only rare instances of) human-to-human spread.

During Phase three of a Pandemic Alert, it is important to:

- minimize transmission to humans
- establish early detection, notification and response systems
- contain and control possible human-to-human transmission within isolated communities

Our goal in pandemic influenza planning is two-fold: (1) To plan for and implement prevention practices – simple awareness and infection control practices and habits; (2) To prepare for possible onset of pandemic influenza and the need for immediate responses. It is important to remember that pandemic influenza preparedness is a process, not an isolated event.

What Planning Assumptions do we make in Preparing?

The Centers for Disease Control and Prevention (CDC) makes the following assumptions and projections for pandemic flu planning:

- Typical incubation period of two days.
- Persons who become infected may transmit for a full day prior to the onset of symptoms.
- On average, two secondary infections occur as a result of transmission from someone who is ill.
- In a community, a pandemic “wave” will last approximately 6-8 weeks.
- Absenteeism from school and work may reach 40% at the peak of the pandemic wave.
- At least two pandemic waves are likely to occur.

Experience during the “Great Influenza” of 1918 demonstrates that it is possible during a pandemic that:

- The health care system will be swamped by sick people seeking assistance.
- The undertaking/funereal industry, too, can be overwhelmed.
- State and national emergency delivery systems may be overwhelmed and unable to address local needs in a timely manner.
- Fear may run rampant within a community under pandemic siege. Community assistance and neighborly support may break down nearly completely.

This pandemic plan recognizes these past experiences and future possibilities. Our assumptions, drawn from the above, include:

- Absenteeism of workers could be in the 30-40% range.
- Workers may not be absent due to family care needs. Workers may simply not report due to fear of becoming infected.
- We may experience the loss of suppliers (utilities, garbage removal, food, etc.)
- Government proclamations and fuel shortages may create travel restrictions.
- Businesses may close.
- Litigation may emerge from any number of the above circumstances.

PREVENTION & PREPAREDNESS ACTIVITIES
AWARENESS/EDUCATION
Prepare Staff: Train staff as role models regarding infection prevention habits. (Identify trainers, complete training)
Teach infection control, present at meetings and events; send information regarding healthy infection prevention habits through email, phone, or mail. Plan and begin to publish articles on signs and symptoms of flu and infection control.
Post and distribute infection control and pandemic influenza basic information: <ul style="list-style-type: none">• Acquire or prepare posters, flyers, and related materials defining healthy habits that support infection control.• Post flyers and reminders of healthy habits including “cover your cough” and “stop the spread of germs”. Post in each office, meeting room and restroom, on website, and other appropriate building sites.• Distribute Pandemic Flu information and “Getting Ready For Pandemic Flu Checklist (for Families)” to families, and staff.• Publish articles in newsletters and on websites.

INFECTION CONTROL

Promote sanitation procedures to help stop the spread of infection:

- Clean shared work areas at least daily
- Maintain good cleanliness and ventilation
- Make soap, paper towels and sinks, or hand sanitizer accessible
- Display hand washing and cough etiquette posters
- Maintain adequate extra supplies and develop system for dispersal
- Supply/provide disinfectant cleaning supplies

Personal Protective Measures:

- Surgical masks (to wear if you are sick to prevent others from getting sick)
- Gloves
- Stay home when sick
- Flu vaccine

HEALTH CONCERNS

Promote preparation:

- Develop procedures to help at-risk children and adults
- Call and offer support to ill individuals who are in isolation
- Encourage sick individuals to stay home when they are sick
- Keep a list and assess needs (i.e. supplies and medications)
- Plan for children/youth to be at home without an adult that is well enough to care for them

COMMUNICATION/COLLABORATION

Develop partnerships with other community and faith-based organizations. Develop a variety of communication channels including:

- Health Alert Network (HAN) with your local government
- Phone tree for all staff
- Alternate forms of communication: email; media; newsletters
- Determine who will keep track of updating communication lists
- Rumor control
- Keep messages simple and consistent with that of your local government
- May need to vary message for staff, children, and adults

CONTINUITY OF OPERATIONS

Staff and Leadership Team Monitoring: Begin regular (or timely) staff briefings to monitor preparedness, identify lessons learned, and make necessary changes to the preparedness and response plan based on the pandemic.

Assess and prepare for identifiable staff risks and needs:

- Identify staff that, due to health condition or pregnancy, will not be able to be present at work after the flu has been identified.
- Review and update staff emergency contact lists.
- Assign staff to identify (and report) someone that can and will check on them in case of an illness.

Define critical functions that you will maintain, minimum staffing needs (numbers and skills), and plan possible re-assignments with staff.

Project and plan for financial impact.

Develop collaborative links with County Emergency Response Plan (Fire, EMS, Public Health):

- Be familiar with the ICS model
- Provide copies of plan to these agencies for review
- Plan for multiple waves of illness (estimate 2-3 months/wave)
- Drills, tabletop exercises and other practice activities

Communication

- Provide information to members regarding plan
- Hold community-wide meetings to address concerns
- Plan for alternate means of communication (redundancy)
- Determine who will keep track of updating communication lists
- Plan for rumor control
- Anticipate simple, consistent messages, develop template letters in advance

RESPONSE – PANDEMIC FLU PRESENT

AWARENESS/EDUCATION

Send information to staff and members reviewing flu symptoms and indicators. If you plan on shutting down the facility to visitors/members send an alert letter to their home, call them, email them, etc.

Provide information to members on prevention procedures and what is going on in the community. Be as transparent as possible.

INFECTION CONTROL

Implement procedures for prevention of disease transmission

- Cancel non-essential gatherings
- Avoid crowded social environments
- Limit non-essential travel
- Maintain one yard spatial separation between individuals
- Clean inanimate objects well (phones, keyboards)

Promote voluntary quarantine with staff and members

- Stay home until fever and coughing have resolved
- Voluntary home quarantine if anyone ill in household

HEALTH CONCERNS

Providing for mental health care

- Anticipate emotional trauma
- Be vigilant about ripple effects on members/family/staff
- Reinforce message about post-traumatic stress disorder (PTSD) including recognition and prevention
- Contact/coordinate delivery of grief counseling, emotional counseling support, as needed

CONTINUITY OF OPERATIONS

Follow Incident Command emergency chain of command, including filling of administrative positions when absences are caused by illness.

Modify work roles and responsibilities or add volunteer or support staff, as needed.

Implement liberal leave policies for persons with sick family members.

COMMUNICATION/COLLABORATION

Implement the Emergency Response Plan. Maintain rumor control:

- Communication in absence of person-to-person contact
- Prepare statement to be read by all answering calls
- Timely, accurate, credible and consistent information tailored to specific audiences
- Phone tree calls to all staff
- Educational materials available how to support your members with recovery

RECOVERY
AWARENESS/EDUCATION
Continue to post flyers and reminders of healthy habits.
Continue to publish articles on infection control in newsletters, on websites, and in the facility.
Provide information to members and staff on: <ul style="list-style-type: none"> • extent of pandemic flu in the community • signs and symptoms of stress/emotional issues from impact of flu including loss and grief • Counseling services and activities to assist in coping with impact of the flu on family, friends, and community
SURVEILLANCE
Identify individuals/families or staff who may need long-term physical and mental health support or intervention.
CONTINUITY OF OPERATIONS
Plan and implement activities to rebuild community including: <ul style="list-style-type: none"> • Restoration and strengthening of community and social connections • Involvement of members and community in planning and rebuilding efforts • Strengthen support systems • Reach out to other community-based organizations who have dealt with similar crises
Evaluate your Emergency Plan: What worked? What did not work? Revise and/or train as appropriate.
COMMUNICATION/COLLABORATION
Continue to develop community resources to provide needed physical and mental health support.
Communication <ul style="list-style-type: none"> • Keep communication lines open among clients, staff and community • Community-wide meetings to facilitate addressing how they will cope

Pandemic Flu Planning Template

NOTE: This is meant to be an appendix to your All-Hazard Plan. Pandemic flu will be a unique situation compared to natural or man-made emergencies because of its length of time and social disruption.

[Organization Name]

Plan Developed by:
Date Developed:
Date Approved:

Emergency Team Members involved in Planning for Pandemic Flu:

<i>Name</i>	<i>Phone</i>
<i>Name</i>	<i>Phone</i>
<i>Name</i>	<i>Phone</i>
<i>Name</i>	<i>Phone</i>
<i>Name</i>	<i>Phone</i>

Impact of a Pandemic Flu on your usual activities and services:

Service or Program	Suspend (x)	Maintain (x)	Supplies/Resources Needed to Maintain the Service

How will you provide services without meeting people face-to-face?

Can you deliver normal services with social distancing?

Can your staff and leadership work from home?

What will happen if your organization has high levels of absenteeism among staff? Among clients?

How will your organization fare with a decrease in financial resources? How will you pay staff?

Do you have mandatory sick-leave policies for staff, volunt and volunteers who are ill? What about policies for flexible work hours and work locations for staff? If not, you should think about constructing such policies specifically for the Pandemic Flu.

Consider your organization's ability to address rumors, misinformation, fear, anxiety, etc. What can you do to help?

Communication Plan for Pandemic Flu

What Should You Communicate?	Who are you communicating to? (i.e. local government, clients, staff only)	Who should communicate the message? (i.e. Emergency Team Leader, Lead Staff)	Where are you going to get reliable information from? (i.e. local government, MDH, CDC)	How should it be communicated? (i.e. electronically, phone call/tree, mail)	Preparatory Actions (i.e. talking points, key messages, training)
Services offered, or changes made to them					
Community updates related to the flu					
Funds or supplies needed					
Volunteers needed					
Others Needed					
Other:					



Tool: Supply and Equipment Checklist for Planning

The items on this checklist are not emergency-specific, so not all items will necessarily be applicable depending on the nature of the emergency.

Where are you going to store these items?

Check	Item
	Emergency placards
	Non-perishable food items
	Disposable plates, utensils, cups and straws
	Battery-operated weather radio and extra batteries
	Hand sanitizer
	Drinking water (one gallon per day per person)
	Ice
	Back-up generators
	Diesel fuel to supply generators for power and for cooling systems
	Backup supply of gasoline so staff can get to and from work
	Extra means for refrigeration
	<u>Medicines</u> – Specific lists could be made to indicate specific medications and needed quantity
	<u>Medical Supplies</u> - Specific lists could be made to indicate specific types of medical supplies needed.
	<u>Medical equipment</u> - Specific lists could be made to indicate specific type and quantity of medical equipment such as oxygen tanks
	Flashlights and extra batteries
	Toiletry items for staff (comb, brush, shampoo, soap, toothpaste, toothbrush, lotion, mouthwash, deodorant, shaving cream, razors, tissues)
	Incontinence products
	Personal wipes
	Denture holders/cleansers
	Toilet paper
	Towels
	Latex gloves
	Plastic bags
	Bleach/sterilizing cleaner
	Plastic sheeting for covering broken windows, etc.
	Duct tape
	Hammers
	Nails
	Coolers
	Lighters
	Extension Cords
	Office supplies, such as markers, pens, pencils, tape, scissors, stapler, note pads, etc. (office in a box)
	Laptop computer with charger; flash drives or CDs with medical records, portable printer if possible



Tool: Volunteer Organizations

Program	Information Resource	Description
The Medical Reserve Corps (MRC) of Minnesota	www.mnresponds.org	The MRC is a countywide resource of health professionals and other volunteers who strengthen our community by preparing for and responding to local public health and medical emergencies and assisting with key ongoing public health initiatives. The MRC goal is to have pre-identified, trained and credentialed volunteers ready to assist medical response professionals during large-scale emergencies that threaten local public health including an outbreak of SARS or influenza, mass injuries from a chemical spill or a rapidly spreading, terrorist-launched illness. MRC volunteers also can elect to assist with key public health initiatives during non-emergency times.
Community Emergency Response Teams (CERT)	www.citizencorps.gov/cert	The Community Emergency Response Team (CERT) Program educates people about emergency preparedness for hazards that may impact their area and trains them in basic emergency response skills, such as fire safety, light search and rescue, team organization, and emergency medical operations. Using the training learned in the classroom and during exercises, CERT members can assist others in their neighborhood or workplace following an event when professional responders are not immediately available to help. CERT members are also encouraged to support emergency response agencies by taking a more active role in emergency preparedness projects.
American Red Cross – Twin Cities Community Response Team (formerly known as Emergency Response)	Volunteer Resources Team at volunteer@redcrosstc.org , (612) 872-3271 or www.redcrosstc.org .	ARC Twin Cities is a chapter-wide, staff and volunteer collaboration designed to utilize every one of our resources to help prepare our community and respond with compassion to their needs. To make the best use of resources, the team creates more unified operations and a better way to integrate volunteers and staff members that have tended to function separately.



Tool: Emergency Plan Review Schedule

The emergency plan will be reviewed and updated annually by the following staff:

Emergency Plan Review Schedule	
Date	Responsible Personnel



Pandemic Flu Scenario

Date: _____

Participant Names: _____

a. Agenda:

- Introductions and Overview
- Situation Progression and Responses (guided with questions)
- Break
- Debriefing and Evaluation

b. Tabletop exercise goal: To focus and build upon the relationship between [your organization] and [who are you exercising with? Or are you just building your own capacity].

c. Expectations:

- No organization is ever fully prepared for this type of public health emergency.
- Open and honest dialogue and feedback are encouraged throughout the exercise.
- Participants should feel free to ask questions of another and challenge each other's assumptions.
- No one will be singled out or punished for what they say during the exercise.
- You will act on what you learn today.

d. Unfolding the Situation: Decisions and Response. The following commentary will show a developing influenza pandemic that requires decisions to be made by the participants in their capacity as members of a key decision making body. The role of the facilitator in this step is to provide participants with an overview of the situation and to focus the discussion on the key decisions that need to be reached by the group. A series of probes is provided to assist the facilitator in leading the discussion. It is not necessary that the facilitator read through every probe with the group. Review the scenario and then highlight the collective decisions that they will be required to make for each discussion point. The note taker should record the decisions the participants make.

e. Early Situation: The regular flu season has begun and the numbers of flu cases are mild to average (just like other years). All of the sudden there seems to be a major outbreak of a novel flu virus, like H1N1, in an Asian country. But, the world is taking notice because of how fast it seems to be spreading and how severe the illness is for humans. Now, about a month later it is spreading rapidly across all Asian countries. Young adults appear to be the most severely affected. The average attack rate in the Asian countries is 25% and the average fatality is 5% (it is behaving like the Pandemic Flu of 1918). The World Health Organization (WHO) has officially declared it a "Pandemic Level 5".

f. Progressing situation: The window of time before this virus reaches the United States will be short because of (1) international travel and (2) the virus transmits rapidly. Vaccine manufacturers are predicting it will take 6 to 8 months to begin producing a safe vaccine. Local

governments and hospitals are beginning to set up surveillance systems for this pandemic flu virus.

Questions: What actions could be taken to engage your clients with your current level of knowledge? What specific key tasks should you engage in to prepare for the outbreak before it reaches? What expectations do you have regarding your public health department (will they contact you)? Will you communicate information? Who will communicate it? Who is responsible for activating the Incident Command System (ICS)? Who is in charge of the ICS? Is there a defined trigger for when it is appropriate to establish a formal ICS?

g. Further Developments: The virus has made its way into our hospital and clinic systems. Your local public health department is sending you alerts about its prevalence in the Twin Cities. So far, it is mild. The media is reporting that “the pandemic flu virus is ripping through the cities and that there is no vaccine available” which is making people nervous. However, the regular flu season is still in full swing too, so it could be a mix of both viruses getting people sick.

Questions: What could you do to help slow the spread of the virus? What sort of information will you put out to your clients? Where will that information come from? Who is responsible for getting the information out? How do you plan on working with your local public health department? What are you going to do as an organization if it is recommended that you stop meeting in larger groups? Smaller groups? At all? What will your organization do if the schools decide to close? Will staff be unable to come to work?

h. Further Developments: A global pandemic is confirmed by the World Health Organization. The outbreak has spread rapidly in the Twin Cities and there are estimates that approximately 25% of the population is sick with this flu and approximately 5% are dying as a result. Hospitals and clinics have reached capacity and are starting to turn individuals away. The Twin Cities population has approximately three million people – which means when the Pandemic is completely over, 750,000 will have been sick and 37,500 people will have died. Everyone (public health, government, pharmacies, worksites, etc) is reporting staffing shortages.

Questions: How are you going to manage staffing shortages? What staff plans are in place to rotate critical staff to avoid complete exhaustion? What essential functions will stay in place? What could you do to help your clients? Will you use volunteers? In what way would they be utilized? Who is in charge of managing them? Would you help isolated people receive necessary food and medical supplies? How? Individuals will turn to you with the loss of loved ones - how will you handle this? What services will you offer? How do you plan on working with your local public health department? What are you going to do as an organization if it is recommended that you stop meeting in larger groups? Smaller groups? At all? What is your organization going to do if the schools decide to close? Will staff be unable to come to work? Where are you in your ICS structure? Who is in charge? What if they become ill?

i. Finishing Up and Evaluation: The pandemic is over. It has been a long, hard year and a half with many losses. But, you pulled through. It is time to evaluate your response and your plan.

Questions: What are the biggest gaps or challenges in preparedness that you see resulting from this exercise? Which problem areas should be deemed highest priority? Identify three important gaps that could help you respond more appropriately. Outline a plan for how you might begin to make improvements to your response. What initial steps can you take?

Tornado Scenario

Date: _____

Participant Names:

a. Agenda:

- Introductions & Overview
- Situation and Responses (guided with questions)
- Break
- Debriefing & Evaluation

b. Tabletop exercise goal: To focus and build upon the relationship between [your organization] and [who are you exercising with? Or are you just building your own capacity].

c. Expectations:

- No organization is ever fully prepared for this type of public health emergency.
- Open and honest dialogue and feedback are encouraged throughout the exercise.
- Participants should feel free to ask questions of another and challenge each others' assumptions.
- No one will be singled out or punished for what they say during the exercise.
- You will act on what you learn today.

d. The Scenario:

On the morning of [insert date], a series of severe thunderstorms and tornados move through the Twin Cities. The most destructive of these storms strikes [insert your city]. At approximately 8 am, a large violent tornado touched down in the southwestern portion of [insert your city]. The tornado, up to a half-mile at points, moved northeast remaining on the ground continuously for more than 30 miles before finally dissipating in northeastern [insert your county or city].

In roughly 40 minutes, six people were killed and approximately 32 others were injured.

The tornado damaged or destroyed at least 50 homes. In addition, one apartment complex, one nursing home, 19 commercial buildings, and 2,200 acres of woodland were destroyed. Because major transmission power was destroyed, much of the county is without electrical power. Your facility is still standing and operable.

Questions:

What is your first step? Do you set up your Incident Command Structure? Who is in charge?

How do you contact your Emergency Team members? (Remember there is no electricity)

How will you work with your local government? What services are you going to offer immediately? What do you need to offer these services? (Remember the community will be grieving the loss of family members and dealing with injured family members)

What services are you going to offer long term? What do you need to offer these services?

What are you going to communicate to your clients? How are you going to communicate?

e. Scenario Change:

Let's change the scenario and consider that the tornado ripped through our part of town at 2:30 pm in the afternoon. Everything else is the same.

Questions:

What is your first step? Do you set up your Incident Command Structure? Who is in charge?

How do you contact your Emergency Team members? (Remember there is no electricity)

How will you work with your local government? What services are you going to offer immediately? What do you need to offer these services? What services are you going to offer long term? What do you need to offer these services? What are you going to communicate to your members? How are you going to communicate? What happens to kids that were in school? What about their parents?

What safety precautions would you take at your own facility? What do you have available if your leadership and staff are unable to leave for several hours? Are you prepared? What would you need to be prepared? What if someone got hurt (not badly, but they are bleeding)?

f. Finishing Up and Evaluation

What are the biggest gaps or challenges in preparedness that you see resulting from this exercise?

Which problem areas should be deemed highest priority? Identify three important gaps that could help you respond more appropriately. Outline a plan for how you might begin to make improvements to your response. What initial steps can you take?

Power Outage Scenario

Date: _____

Participant Names:

a. Agenda:

- Introductions & Overview
- Situation and Responses (guided with questions)
- Break
- Debriefing & Evaluation

b. Tabletop exercise goal: To focus and build upon the relationship between [your organization] and [who are you exercising with? Or are you just building your own capacity].

c. Expectations:

- No organization is ever fully prepared for this type of public health emergency.
- Open and honest dialogue and feedback are encouraged throughout the exercise.
- Participants should feel free to ask questions of another and challenge each others assumptions.
- No one will be singled out or punished for what they say during the exercise.
- You will act on what you learn today.

d. The Scenario:

On the morning of [insert date], while direct services were going on, [insert your city or county] experienced a wide-spread power outage due to extreme hot weather. Your facility is packed and there had been plans for smaller group meetings and a community lunch. As of now, no one is hurt.

Questions:

What is your first step? Do you set up your Incident Command Structure? Who is in charge?

How do you contact your Emergency Team members? (Remember there is no electricity)

Will you work with your local government? What are you going to do about the rest of the day?

What are you going to communicate to your clients? How are you going to communicate?

Do you have a radio to receive information? Or the phone number to the electric company?

e. Further Developments:

It has more than 24 hours later and you still do not have power and the heat is sweltering. You have been told that [insert your city or county] will not likely have power again for four to nine days.

Questions:

Now what do you do? Do you set up your Incident Command Structure? Who is in charge?

How do you contact your Emergency Team members? (Remember there is no electricity)

How will you work with your local government? What services are you going to offer? What do you need to offer these services? What are you going to communicate to your clients? How are you going to communicate? What happens to kids that are school-aged? What about their parents?

What safety precautions would you take at your own facility? Who do you check on to make sure they are safe at home? Will you manage volunteers? Who will be responsible for them? What would they do? What if someone got hurt (not badly, but they are bleeding)?

f. Finishing Up and Evaluation

What are the biggest gaps or challenges in preparedness that you see resulting from this exercise?

Which problem areas should be deemed highest priority? Identify three important gaps that could help you respond more appropriately. Outline a plan for how you might begin to make improvements to your response. What initial steps can you take?

