

# EMERGENCY OPERATIONS PLANNING GUIDANCE FOR FACILITIES

The City of Richmond Office of Emergency Management provides this template in an effort to guide facilities in the development of their personalized emergency operations plans. This will also serve as the compliance review document for the City of Richmond Office of Emergency Management upon submission for review and approval pursuant to House Bill 2726 of Virginia, which grants authority to localities to require the review of, and suggest amendments to, the emergency plans of nursing homes, assisted living facilities, adult day care centers, child day care centers, and any other residential care facilities that are located within the cities jurisdiction.

For more information, please contact:

Office of Emergency Management  
201 East Franklin Street  
Richmond, VA 23219

Office: (804) 646-2504 or (804) 646-5448

Website: <http://www.richmondgov.com/fire/EmergencyManagement.aspx>

Plan Submission Email: [EOPReview@richmondgov.com](mailto:EOPReview@richmondgov.com)

**GENERAL GUIDELINES TO FOLLOW TO COMPLETE THE  
EMERGENCY OPERATIONS PLAN**

1. Complete, the Model Facility Emergency Operations Plan Template. Follow this Model Plan, adapting it to your center's situation and needs. Make sure that all of your employees are trained in the provisions of this plan so that they can act in an emergency. Make sure guardians are aware of the provisions set forth in the plan.
2. Submit the completed plan electronically to [EOPReview@richmondgov.com](mailto:EOPReview@richmondgov.com) and a hard copy to the Office of Emergency Management, 201 East Franklin Street Richmond VA 23219. Submit plan changes and revisions to the Office of Emergency Management (OEM) annually for regular updates or as they are made for significant changes (emergency contacts).
3. OEM may send a copy of the emergency operations plan to the appropriate responding agencies (Police, Fire, etc.). The Local Fire Marshal's Office may review specifics of the plan as it relates to the Life Safety Code and other fire laws.
4. The plan should be written with the following guidelines: No Hand Written Information, Times New Roman 12pt Font for the main text, headings can bolded or underlined, also include page numbers.
5. If the plan is to be submitted, e-mail with 'read receipt requested' or certified mail with return-receipt requested is recommended in order to document proof of submission.

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

[22VAC40-72-930](#). Emergency preparedness and response plan.

- A. The facility shall develop a written emergency preparedness and response plan that shall address:
1. Documentation of contact with the local emergency coordinator to determine local disaster risks and communitywide plans to address different disasters and emergency situations.
  2. Analysis of the facility's potential hazards, including severe weather, fire, loss of utilities, flooding, work place violence or terrorism, severe injuries, or other emergencies that would disrupt the normal course of service delivery.
  3. Written emergency management policies outlining specific responsibilities for provision of:
    - a. Administrative direction and management of response activities;
    - b. Coordination of logistics during the emergency;
    - c. Communications;
    - d. Life safety of residents, staff, volunteers, and visitors;
    - e. Property protection;
    - f. Continued provision of services to residents;
    - g. Community resource accessibility; and
    - h. Recovery and restoration.
  4. Written emergency response procedures for assessing the situation; protecting residents, staff, volunteers, visitors, equipment, medications, and vital records; and restoring services. Emergency procedures shall address:
    - a. Alerting emergency personnel and facility staff;
    - b. Warning and notification of residents, including sounding of alarms when appropriate;
    - c. Providing emergency access to secure areas and opening locked doors;
    - d. Conducting evacuations or sheltering in place, as appropriate, and accounting for all residents;
    - e. Locating and shutting off utilities when necessary;
    - f. Operating the emergency generator, and if available on-site, testing it periodically;
    - g. Communicating with staff and community emergency responders during the emergency; and
    - h. Conducting relocations to emergency shelters or alternative sites when necessary and accounting for all residents.
  5. Supporting documents that would be needed in an emergency, including emergency call lists, building and site maps necessary to shut off utilities, memoranda of understanding with relocation sites, and list of major resources such as suppliers of emergency equipment.
- B. Staff and volunteers shall be knowledgeable in and prepared to implement the emergency preparedness plan in the event of an emergency.
- C. The facility shall develop and implement an orientation and quarterly review on the emergency preparedness and response plan for all staff, residents, and volunteers. The orientation and review shall cover responsibilities for:
1. Alerting emergency personnel and sounding alarms;
  2. Implementing evacuation, shelter in place, and relocation procedures;
  3. Using, maintaining, and operating emergency equipment;
  4. Accessing emergency medical information, equipment, and medications for residents;

5. Locating and shutting off utilities; and
  6. Utilizing community support services.
- D. The facility shall review the emergency preparedness plan annually or more often as needed and make necessary revisions. Such revisions shall be communicated to staff, residents, and volunteers and incorporated into the orientation and quarterly review for staff, residents, and volunteers.
- E. In the event of a disaster, fire, emergency or any other condition that may jeopardize the health, safety and welfare of residents, the facility shall take appropriate action to protect the health, safety and welfare of the residents and take appropriate actions to remedy the conditions as soon as possible.
- F. After the disaster/emergency is stabilized, the facility shall:
1. Notify family members and legal representatives; and
  2. Report the disaster/emergency to the licensing office by the next working day as specified in 22VAC40-72-100.

Statutory Authority §§[63.2-217](#) and [63.2-1732](#) of the Code of Virginia.

Historical Notes Derived from Virginia Register Volume 23, Issue 6, eff. December 28, 2006.

### **Emergency Preparedness Licensure Requirements, as per the Virginia Administrative Code (VAC):**

- Nursing Homes: 12 VAC 5-371-190  
<http://www.vdh.state.va.us/OLC/Laws/documents/nursingHomes/nursing%20facility%20regs.pdf> (Page 19)
- Assisted Living Facilities: 22 VAC 40-71-570 through 22 VAC 40-71-590  
<http://leg1.state.va.us/000/reg/TOC22040.HTM#C0071> (Chapter 71)
- Residential Care Facilities: 12 VAC 35-105-530  
<http://www.dmhmrzas.virginia.gov/documents/OL-RulesandRegulations.pdf>  
(Page 20)

### **EMERGENCY MANAGEMENT PLANNING GUIDANCE FOR FACILITIES**

The following minimum criteria are to be used for creating your Emergency Operations Plan (EOP) for all Residential Health Care Facilities, including, but

not limited to Child Day Care (CDC), Adult Day Care (ADC), Assisted Living Facilities (ALFs), Nursing Homes, Group Homes, Hospitals, Colleges/Universities and other Residential Providers. The criteria will serve as the recommended plan format for the EOP. The City of Richmond Office of Emergency Management is available to review the documents submitted in this template; however, OEM does not serve as a ratifying or approval agency for the plans. The purpose of the template is to assist providers in the development of their plans to be in compliance with regulations stated in 22VAC40-72-930. These minimum criteria satisfy the basic emergency management plan requirements of 22VAC40-72-930.

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

If the plan is to be submitted, e-mail with 'read receipt requested' or certified mail with return-receipt requested is recommended in order to document proof of submission.

**Disclaimer**

All facilities and individuals involved in emergency operations should understand that events may take place which would make it improper and inadvisable to proceed in a manner that would jeopardize lives and property simply to implement this plan or a specific emergency operations guide. Facilities and individuals having responsibilities established in this plan must have the freedom to augment its provisions in order to deal with an emergency or disaster event using resources that are available and actions that are possible within the limits dictated by the situation. The City of Richmond assumes no liability as to the execution of reviewed emergency operations plans.

**EMERGENCY MANAGEMENT PLANNING CRITERIA FOR FACILITIES**

Use this form as a cross-reference to your plan, by listing the page number and paragraph where the criteria are located in the plan on the line to the left of each

item. This will ensure accurate review of your facility's plan when you submit it for review by City of Richmond Office of Emergency Management personnel.

## **I. INTRODUCTION**

\_\_\_\_\_A. Provide basic information concerning the facility to include:

- \_\_\_\_\_1. Name of facility, address, telephone number, emergency contact telephone number and pager number if available, and fax number, type of facility and license.
- \_\_\_\_\_2. Owner of facility, address, telephone.
- \_\_\_\_\_3. Year facility was built, type of construction and date of any subsequent construction. (If you are unsure of the specific date you can list an approximate, Example Built in the 1950's)
- \_\_\_\_\_4. Name of Administrator, address, work/home telephone number of his/her alternate.
- \_\_\_\_\_5. Name, address, work and home telephone number of person implementing the provisions of this plan, if different from the Administrator.
- \_\_\_\_\_6. Name and work and home telephone number of person(s) who develop this plan.
- \_\_\_\_\_7. Provide an organizational chart, including phone numbers, with key management positions identified.

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

## **II. AUTHORITIES AND REFERENCES**

- \_\_\_\_\_A. Identify the legal basis for plan development and implementation to include statutes, rules and local ordinances, etc. (Located on this template)
- \_\_\_\_\_B. Identify reference material used in the development the Plan.
- \_\_\_\_\_C. Identify the hierarchy of authority in place during emergencies. Provide an organizational chart.

## **III. HAZARD ANALYSIS**

- \_\_\_\_\_A. Describe the potential hazards that the facility is vulnerable to such as tornadoes, flooding, fires, hazardous materials from fixed facilities or transportation accidents, proximity to a nuclear

power plant, power outages during severe cold or hot weather, etc. Indicate past history and lessons learned.

\_\_\_\_\_B. Provide site-specific information concerning the facility to include:

- \_\_\_\_\_1. Number of facility beds, maximum number of clients on site, average number of clients on site.
- \_\_\_\_\_2. Type of clients served by the facility to include but not limited to:
  - \_\_\_\_\_a. Clients with special needs.
  - \_\_\_\_\_b. Clients requiring special equipment or other special care, such as oxygen or dialysis.
  - \_\_\_\_\_c. Number of clients who are children (under age 18).
- \_\_\_\_\_3. Identification of which flood zone facility is in as identified on a Flood Insurance Rate Map.
- \_\_\_\_\_4. Proximity of facility to a railroad or major transportation artery (per hazardous materials incidents).
- \_\_\_\_\_5. Identify if facility is located within 10 mile or 50 mile of emergency planning zone of a nuclear power plant.

#### **IV. CONCEPT OF OPERATION**

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

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

- \_\_\_\_\_1. Identify, by title who is in charge during an emergency, and one alternate, should that person be unable to service in that capacity.
- \_\_\_\_\_2. Identify the chain of command to ensure continuous leadership and authority in key positions.
- \_\_\_\_\_3. State the procedures to ensure timely activation and staffing of the facility in emergency functions.
- \_\_\_\_\_4. State the operational and support roles for all facility staff. (This will be accomplished through the development of Standard Operating Procedures, which should be attached to this Plan).

\_\_\_\_\_5. State the procedures to ensure the following needs are supplied:

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

\_\_\_\_\_b. Transportation (may be covered in the evacuation section).

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

\_\_\_\_\_1. Define how the facility will receive warnings.

\_\_\_\_\_2. Define how key staff will be alerted.

\_\_\_\_\_3. Define the procedures and policy for reporting to work for key workers.

\_\_\_\_\_4. Define how clients will be alerted and the precautionary measures that will be taken.

\_\_\_\_\_5. Identify alternative means of notification should the primary system fail.

\_\_\_\_\_6. Identify procedures for notifying those facilities to which facility clients will be evacuated.

\_\_\_\_\_7. Identify procedures for notifying families of clients that facility is being evacuated or closed.

\_\_\_\_\_C. **Evacuation** - Describe polices, roles, responsibilities, and procedures for the evacuation of clients from the facility.

\_\_\_\_\_1. Identify the individual responsible for implementing facility evacuation procedures.

\_\_\_\_\_2. Identify transportation arrangements made through mutual aid agreements or understandings that will be used to evacuate clients (copies of the agreements should be attached). (A mutual aid agreement is a document that demonstrates that you have made arrangements with another organization such as another facility or transportation company to assist you in your evacuation plan)



- \_\_\_\_\_3. Describe transportation arrangements for logistical support to include moving records, medications, food, water and other necessities.
  - \_\_\_\_\_4. Identify the pre-determined locations where clients will evacuate.
  - \_\_\_\_\_5. Provide a copy of the mutual aid agreement that has been entered into with a facility to receive clients (copies should be current, signed each year).
  - \_\_\_\_\_6. Identify evacuation routes that will be used and secondary routes that would be used should the primary route be impassable.
  - \_\_\_\_\_7. Specify the amount of time it will take to successfully evacuate all clients to the receiving facility.
  - \_\_\_\_\_8. What are the procedures to ensure facility staff will accompany evacuating clients.
  - \_\_\_\_\_9. Identify procedures that will be used to keep track of clients once they have been evacuated (to include a log system).
  - \_\_\_\_\_10. Determine what belongings and how much should each client take.
  - \_\_\_\_\_11. Establish procedures for responding to family inquiries about clients who have been evacuated.
  - \_\_\_\_\_12. Establish procedures for ensuring all clients are accounted for and are out of the facility.
  - \_\_\_\_\_13. Determine at what point to begin the pre-positioning of necessary medical supplies and provisions.
  - \_\_\_\_\_14. Specify at what point the mutual aid agreements for transportation and the notification of alternate facilities will begin.
- \_\_\_\_\_D. **Re-Entry** - Once a facility has been evacuated, procedures need to be in place for allowing clients to re-enter the facility once authorized to do so by the appropriate emergency services agency.
- \_\_\_\_\_1. Identify who is the responsible person(s) for authorizing re-entry to occur. (Director, Owner, staff, etc.)
  - \_\_\_\_\_2. Identify procedures for inspection of the facility to ensure it is structurally sound.

## V. INFORMATION, TRAINING AND EXERCISES

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

- \_\_\_\_\_A. Identify how key workers will be instructed in their emergency roles during non-emergency times.
- \_\_\_\_\_B. Identify a training schedule for all employees and identify the provider of the training.
- \_\_\_\_\_C. Identify the provision for training new employees regarding their disaster related role(s).
- \_\_\_\_\_D. Identify a schedule for exercising all or portions of the disaster plan on at least an annual basis.
- \_\_\_\_\_E. Establish procedures for correcting deficiencies noted during training exercises.

## **VI. ANNEXES**

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

- \_\_\_\_\_A. Roster of employee and companies with key disaster related roles.
  - \_\_\_\_\_1. List the names, addresses, and telephone numbers of all staff with disaster related roles.
  - \_\_\_\_\_2. List the name of the company, contact person, telephone number and address of emergency service providers such as transportation, emergency power, fuel, water, police, fire, emergency medical services, etc.
- \_\_\_\_\_B. Agreements and Understandings
  - \_\_\_\_\_1. Provide copies of any mutual aid agreement entered into pursuant to the fulfillment of this plan. This is to include reciprocal host facility agreements, transportation agreements, current vendor agreements or any other agreement needed to ensure the operational integrity of this plan.
- \_\_\_\_\_C. Evacuation Route Map
  - \_\_\_\_\_1. A map of the evacuation routes and description of how to get to a receiving facility for drivers.
- \_\_\_\_\_D. Support Material
  - \_\_\_\_\_1. Any additional material needed to support the information provided in the plan.

- \_\_\_\_\_2. Copy of the facility's fire safety plan that is approved by the City of Richmond, Fire & Emergency Services, Fire Marshal.

**AUTHENTICATION**

This Emergency Operations Plan provides the operational procedures that this facility will follow during emergency events. This plan supersedes any previous emergency operations plans promulgated for this purpose.

\_\_\_\_\_  
Facility Name

\_\_\_\_\_  
Effective Date

\_\_\_\_\_  
Facility Owner/Administrator's Signature

**APPENDIX A-Distribution List**

<b>DISTRIBUTION LIST</b>
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*Please note: The special needs shelter should be used as a place of last refuge. The evacuee may not receive the same level of care received in the home and the conditions in a shelter may be stressful.*

- (1) It is the expectation of the special needs shelter that a caregiver<sup>1</sup> accompany and remain with the consumer throughout the stay.
  
- (2) The following is a suggested list of what consumers need to bring to the special needs shelter during an evacuation; the consumer should check with the assigned shelter to confirm the necessary items and/or those items which may not be accommodated:
  - Identification and current address
  - A copy of the consumer's plan of care, if applicable
  - Medication listing including directions for the dose, frequency, route, time of day and any special considerations for administration; equipment and supplies list including the phone, beeper and emergency numbers for the consumer's physician, pharmacy and, if applicable, oxygen supplier; necessary medical equipment and supplies; Do Not Resuscitate Order (DNRO), if applicable
  - Bed sheets, blankets, pillow, folding lawn chair, air mattress
  - Prescription and non-prescription medications needed for at least 5 to 7 days; oxygen for 5 to 7 days, if needed and shelter space allows
  - Special diet items, non-perishable food for 5 to 7 days and 1 gallon of water per person per day
  - Glasses, hearing aids and batteries, prosthetics and any other assistive devices
  - Personal hygiene items for 5 to 7 days (including adult diapers, colostomy supplies, etc.)
  - Extra clothing for 5 to 7 days
  - Flashlight and batteries
  - Self-entertainment and recreation items such as books, magazines, quiet games
  - Labeled shoe box or other small closed container to hold the majority of the smaller items listed above to facilitate storage and ease of use

## **Web-based resources:**

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<sup>1</sup> Caregivers may be relatives, household members, guardians, friends, neighbors, employees or volunteers.

## **Virginia Department of Health (VDH):**

- General Website: <http://www.vdh.state.va.us/>
- Pandemic Flu information: <http://www.vdh.state.va.us/PandemicFlu/>
- Emergency Preparedness and Response information  
<http://www.vdh.state.va.us/EPR/>

## **Virginia Department of Emergency Management:**

- General Website: <http://www.vaemergency.com/index.cfm>

## **Centers for Disease Control and Prevention (CDC):**

- General Website: [www.cdc.gov](http://www.cdc.gov)
- Pandemic Influenza Information <http://www.pandemicflu.gov/>
- Long Term Care Facility pandemic flu planning checklist:  
<http://www.pandemicflu.gov/plan/healthcare/longtermcarechecklist.html>
- Emergency Preparedness and Response: <http://www.bt.cdc.gov/>

## **World Health Organization:**

- General Website: <http://www.who.int/>
- Avian Influenza: [http://www.who.int/csr/disease/avian\\_influenza/en/index.html](http://www.who.int/csr/disease/avian_influenza/en/index.html)