

Appendix I: Evacuation Checklists

Evacuation Checklists

Helping Residents in the Relocation: The following are potential concepts to consider when relocating residents.

- Encourage the resident to talk about expectations, anger, and/or disappointment
- Work to develop a level of trust
- Present an optimistic, favorable attitude about the relocation
- · Anticipate that anxiety will occur
- Do not argue with the resident/client
- Do not give orders
- Do not take the residents/clients behavior personally
- Use praise liberally
- Include the resident/client in assessing problems
- Encourage staff to introduce themselves to residents/client
- Encourage family participation

Resident Identification: Determine how residents will be identified in an evacuation; and ensure the following identifying information will be transferred with each resident:

- Name
- Updated Photograph if available
- Medicaid or other health insurer number
- Date of birth, diagnosis
- Current drug/prescription and diet regimens
- Name and contact information for next of kin/responsible person/Power of Attorney)

Determine how this information will be secured (e.g., laminated documents, waterproof pouch around resident's neck, waterproof wrist tag, etc.) and how medical records and medications will be transported so they can be matched with the resident to whom they belong.

Response:

Quick Response Checklist

☐ Activate facility's Emergency Operations Plan (EOP) and incident command system (ICS),
assign Facility Incident Commander (IC), and activate additional ICS positions if warranted.
\square Activate the emergency transportation section of the EOP.
\square Notify appropriate state agency, and other local officials to report activation of the facility's EOP and need to evacuate.
☐ Assess which residents might be able to go to families

^{*}See Annex F Licensed Facility/Agency Evacuation Policy & Procedure*

□ Facilities should consider their triaging system when coordinating the tracking and potential evacuation of patient/residents/clients.

- a triaging system for evacuation may consider the most critical patients first followed by those less critical and dependent on life-saving equipment.
- Considerations for prioritization may be based on, among other things, acuity, mobility status (stretch-bound/wheelchair/ambulatory), and location of the unit, availability of a known transfer destination or some combination thereof.
- Included within this system should be who (specifically) will be tasked with making triage decisions.

□Assess:

- Number and types of beds needed
- Available staff to support transferred residents (call in additional staff if needed)
- Potential transportation requirements based on the number of residents, medical needs, and mobility status

□If residents need to be transferred to another facility, identify available beds by the following procedures:

- Coordinate with other facilities in the healthcare system or "like" facilities with whom you have a pre-existing relationship
- If the above resources are unavailable or inadequate, request assistance from the appropriate state agency and/or utilize computer-based software.

□Obtain transportation resources by contacting the contracted ambulance providers or companies you have transportation MOUs with.

• If the above resources are unavailable or inadequate, request assistance from the appropriate state agency

\square Prepare for evacuation:

- Collect and package residents' equipment, medications, and belongings (including glasses, dentures, hearing aids, etc.). Gather in zip lock individualized bags or equivalent.
- Prepare water and snacks to accompany residents during transport period
- Prepare copy of medical chart to accompany resident- store in secure container.

□ If surrounding roads may be damaged, verify planned evacuation routes with the public safety agency.

☐ Track residents to destinations and notify family members (or guardian) of evacuation and planned destination.

Logistics needed for evacuation

Logistics	Location & Staff Responsible
Appropriate ramp to load residents on buses or other vehicles	
Battery operated weather radio and extra batteries, to include hearing aid batteries and diabetic pump batteries	
Cash, including quarters for vending machines, laundry machines, etc.	
Communications devices: cell phones, walkie-talkies (to communicate among vehicles), 2-way radios, pager, satellite phone, laptop computer for instant messaging, CB radio (bring all you have)	
Copies of important papers: insurance policies, titles to land and vehicles, etc.	
Facility checkbook, credit cards, pre-paid phone cards	
Laptop computer with charger; Flash drives or CDs with medical records	
List of important phone numbers	
Maps – County and State	
Medical record of some type for residents	
Office supplies, such as markers, pens, pencils, tape, scissors, stapler, note pads, etc.	
Special legal forms, such as signed treatment authorization forms, do not resuscitate orders, and advance directives	

Supplies needed for evacuation

Supplies	Quantity	Location
Batteries		
Air mattresses or other bedding (blankets, sheets, pillows)		
Clothing with each resident's name on their bag		
Denture holders/cleansers		
Diet cards		
Disposable plates, spoons, forks, cups, straws.		
Matches or lighters		
Nonperishable food items- staff and residents		
Rain ponchos/blankets		

Supplies	Quantity	Location
Towels		
Water supply for trip- staff and residents (one gallon/resident/day)		

Medical Supplies – if applicable

Supplies	Quantity	Location
Needles		
Syringes		
O2 cannulas		
O2 Tanks		

First Aid Items

Supplies	Quantity	Location
Bleach sterilizing cleaner		
Hand sanitizer		
Incontinence products		
Insect Repellant		
Latex Gloves		
Non-prescription medications		
Personal wipes		
Plastic Bags		
Prescription medications and dosages labeled), to include physician order		
Toilet Paper		
Toiletry items (comb, brush, shampoo, soap, toothpaste, toothbrush, lotion, mouthwash, deodorant, shaving cream, razors, tissues)		

Kits

Description	Quantity	Location
Emergency prep box: trash bags, baggies, yarn, batteries, flashlights, duct tape, string, wire, knife, hammer and nails, pliers, screwdrivers, fix-a-flat, jumper cables, portable tire inflator, tarps, batteries, etc.		
Vehicle Emergency Kit: (Safety Triangles, road flares, engine oil,		

Description	Quantity	Location
transmission fluid, funnels, jumper cables, tow rope or chain, tool kit,		
etc.)		

Prior to Evacuation

Item	Staff Responsible
Planning considerations given to needs of residents, such as dialysis patients.	
Planning considerations given to residents on oxygen.	
Planning considerations given to residents using durable medical equipment such as masks, nasal cannulas, colostomy equipment, gtube, etc.	
Contact made with facility's medical director	
County Emergency Management Agency contacted and informed of the status of the evacuation.	
Determination made of number of residents that must be transported by ambulance, van, car, bus, or other method	
Necessary staff contacted for assistance in transporting residents and caring for residents at the receiving facility.	
Receiving facilities contacted and arrangements made for receipt of residents.	
Roster made of where each resident will be transferred and notify next of kin when possible.	
Transport services contacted and necessary transportation arranged.	
Residents readied for transfer, with the most critical residents to be transferred first. Include: 1. Change of clothes 2. 3-day supply of medications 3. 3-day supply of medical supplies 4. Residents medical chart to include next of kin 5. Residents' identification, such as a picture, wrist band, identification tag, or other identifying document to ensure residents are not mis identified	