



FIRST THINGS FIRST

CAHF LONG-TERM CARE SURVIVAL SELF-ASSESSMENT CHECKLIST

‘IF THE DISASTER HITS TOMORROW, WILL WE BE ABLE TO SURVIVE?’

The “First Things First” checklist is a quick assessment tool intended to help long-term care providers identify key actions they can take to become minimally prepared to survive a widespread disaster. It is NOT a substitute for a comprehensive emergency operations plan that describes all the required systems, procedures and processes, but it can be a helpful tool for providers to target priority actions to take while completing their comprehensive disaster planning.

When beginning the disaster planning process, providers will want to do a Hazard Vulnerability Analysis (HVA) to identify the greatest hazards and risks associated with their geographical area. This will help to focus their limited resources on the types of hazards they are most likely to face.

Hazard Vulnerability Analysis and essential planning tools for developing a comprehensive LTC emergency plan are available on the CAHF-Disaster Preparedness Program (DPP) website at:

www.cahfdisasterprep.com/PreparednessTopics/AllHazardResourcesGuides.aspx

I. STAFF PROTECTION

DO YOUR STAFF ON ALL SHIFTS...?

- Know how to survive** by behaving safely during high risk events for this facility (*Earthquake*: duck, cover, hold. *Flood*: don’t drive through flooded intersections. *Fire*: touch the door to see if it is hot before opening. <http://cahfdisasterprep.com/PreparednessTopics/AllHazardResourcesGuides/ReadySetGoFactsheets.aspx>)
- Know the facility plan** for high risk events and their duties during the first few hours (through drills, cue cards or job action sheets that tell them at glance what their duties are. Individualized job action sheets are available on the CAHF-DPP website at: www.cahfdisasterprep.com/NHICS.aspx)
- Know when to stay**, when to evacuate, and when to return to the facility (preplanned for high risk events so staff know what to do if phones are not operational. Additional resources can be obtained from the CAHF-DPP site at: <http://cahfdisasterprep.com/PreparednessTopics/EvacuationPlanning.aspx>)
- Know their families are safe** so staff can stay and/or return to work when needed (encourage personal disaster plans and consider a facility policy on staff dependent care at the facility during an emergency)

Personal Disaster Planning Resources are available at: www.ready.gov, www.redcross.org and <http://72hours.org>



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II. COMMAND CONTROL

DOES YOUR FACILITY HAVE...?

- A person designated as "in charge" or the "Incident Commander" every day, on every shift** who is trained in the plan for high risk events and has the authority to make decisions (e.g., evacuate or shelter in place, call back staff, authorize overtime)
- Ready access to critical information** and contacts so anyone can assume command
- Persons identified on every shift** for the key assignments of:
 - Operations:** "the doers" (search & rescue, resident care, dietary prep & physical plant cleanup or repairs, security)
 - Logistics:** "the getters" (communications, supplies, staffing resources, outside services and equipment)
 - Planning:** "the thinkers" (gathering updates and information needed for decision making, situation reports)
 - Finance:** "the payers" (timekeeper, tracking costs, procurement, purchasing)

III. CRITICAL SUPPLIES

HAS YOUR FACILITY PUT ASIDE FOR EMERGENCIES...?

- First aid kits/trauma supplies** easily accessible in every area of the building
- Water** (1 gal/person per 24-hours x 72-hours, can include ice machine, water heater, and toilet tanks with proper purification and transport procedures)
- Food** (minimum of 1600 Kcal/person per 24-hours with consideration for special diets x 72-hours)
- Supplies and methods** for preparation and distribution of food and water (plastic utensils, cups, paper plates, water containers)
- Radio with cell phone charger** with extra working batteries, solar or crank power
- Generator** with 24-hours of fuel for "red plugs"
- Extension cords** - Heavy duty
- Battery backup** for critical equipment (ventilators, IV pumps, cell phones)
- Flashlights** and battery-operated exit signs
- Heat and cooling alternatives** for residents in severe weather (extra blankets, squirt bottles and fans)



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III. CRITICAL SUPPLIES (CONTINUED)

- Heat source for cooking** (Barbecue, camping stove)
- Sanitary supplies:**
 - Bleach, unscented for surface sanitizing and water purification
 - Hand sanitizers and wipes (both environmental and body)
 - Extra briefs, pads and gowns
 - Trash bags to line toilets and store soiled wastes
- O2 tanks and tubing**
- Duct tape**
- Heavy duty plastic** (cover broken windows, wrap remains of deceased)
- Cash** on hand (\$1,500 small bills)
- Rescue and repair tools** (crowbar, shovel, gloves, wrench for shutting off gas/water)
- Resident transfer information** system for critical information (wrist bands, flash drive, fanny pack with face sheet; something that can be assured to go with them with basic ID and care instructions)
- Transport method for survival supplies** (water, snacks, critical medications)

IV. COLLABORATION

DOES YOUR FACILITY HAVE READILY ACCESSIBLE FOR ANY STAFF, ANY SHIFT, THE FOLLOWING?

- Contact information of key response partners** during a widespread event (fire, law, emergency medical services/ambulance, Office of Emergency Services, Licensing and Certification, CERT, other volunteer agencies like Red Cross)
- Contact information and a plan with critical supply and equipment vendors**, including people outside the affected area (food, water, pharmacy, medical supplies, fuel, laundry)
- Transportation plan for residents in an evacuation** (Note: local authorities may be controlling transportation in an event. You need to work within the local emergency system to request these resources)
- Regional Center** - Contact information for developmentally disabled (DD) facilities
- Local hospitals** - Contact information and arrangements to care for injured
- Relocation sites** - Agreements with facilities and agencies both local and outside the affected area (arrangements with "like" facilities where you can evacuate residents to)



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V. COMMUNICATION

HAS YOUR FACILITY IDENTIFIED BACKUP SYSTEMS FOR...?

- Getting timely notification of impending danger** (CAHAN, reverse 911 or other local alert systems, police scanners, Email alerts)
- Communication in the building** and on the grounds (cell phones if working especially text/Email, walky-talky radios, runners)
- Reaching off-duty staff** (personal numbers, out of area phone number where all agree to call in, Email/texting, shared website for messages, land line with plug-in phone)
- Notifying authorities** and key partners of your status and needs (cell phones, text/Email, two-way radios, ham radio at local school or hospital, runners)
- Getting status info to families** (phone number with recorded message, out of area phone number, Ombudsman)
- Media management** (one spokesperson prepared with script, facility “fact sheet” to hand to reporters, and a media staging area)