

***(Name of Facility)***

---

**Personal Care  
Emergency  
Plan**

**Part II  
Checklists**

Date: \_\_\_\_\_

## **CHECKLIST A: DIRECTION AND CONTROL OPERATIONS**

*The direction and control activities outlined in this annex apply to all emergency situations*

Completed or N/A	Item
	<b>Facility manager in Charge</b> <i>This designates the person</i>
	___(insert name of primary person in charge)___ is in charge of the facility
	___(insert name of secondary person in charge)___ is in charge of the facility
	___(insert name of third person in charge)___ is in charge of the facility
	<b>Building Intruder/Suspicious Activity</b>
	Alarm given to lock all doors & shelter personnel at facility.
	9-1-1 notified.
	Building searched by police to find intruder.
	Family members notified.
	<b>Considerations for Protective Action Decision</b> <i>Evacuation may not be the best decision. Sudden occurrences (explosions, tornadoes, etc.), violent storms/weather conditions, hazardous materials events and an armed intruder or suspicious person outside may make sheltering the best choice.</i>
	Information gathered from sources in the facility about the emergency.
	Information gathered from County/Local EMA & Emergency Services about the emergency.
	Re-verify phone call with (local EMA, County 911, etc.)
	Consider: Is there time to evacuate?
	Consider: Is it safe outside?
	Consider: Can the personnel & staff be safe inside the building?
	Consider: How long will this event last?
	Personnel whose homes are not in safe areas identified.
	Family members notified.
	<b>Modified Activities</b>
	Cancel all out-of building activities.
	Determine the extent of cancellations and schedule modifications.
	Make provisions to keep those personnel whose homes are not in a safe area.

## CHECKLIST B: PROTECTIVE ACTIONS

*Procedures to accomplish one of four pre-planned protective actions;  
immediate shelter, immediate evacuation, shelter in place or evacuation to  
relocation facility*

Completed or N/A	Item
	<b>Immediate Shelter</b>
	Alarm sounded.
	Doors to closets and utility spaces designated as shelters unlocked.
	Staff moved their personnel to the closest shelter areas.
	Outside air intakes for HVAC closed.
	Utilities turned off to avoid fire/explosion (if situation warrants).
	Closed windows, blinds, drapes & doors to block debris from becoming missiles.
	9-1-1 notified.
	Staff take attendance as soon as the immediate hazard passes.
	Staff maintains control of the personnel in his/her group until instructed to move to another location.
	Emergency services arrive on-site and briefed.
	Search of building revealed no hazards.
	"All-Safe" signal ( <u>      What will the signal be?      </u> ) sounded.
	<b>Immediate Evacuation</b>
	Alarm Sounded.
	Ensure that the pre-designated assembly area ( <u>      location      </u> ) is safe.
	Evacuation monitors posted in hallways and at doors.  Name: <u>      (list name of staff member)      </u> Location: ( <u>      list location      </u> )  Name: <u>      (list name of staff member)      </u> Location: ( <u>      list location      </u> )
	Staff lead personnel in an orderly fashion out of the building to the designated assembly area.
	Staff take attendance as soon as the personnel arrive in the assembly area.
	9-1-1 notified.
	Staff maintain control of their group until instructed to return to facility, or to another location..
	Building searched to ensure that everyone is out  Search Team Members: <u>      (list name of staff member)      </u>  <u>      (list name of staff member)      </u> _ _
	Emergency services arrived on-site and were briefed.
	Search of building revealed no hazards.
	"All-Safe" signal ( <u>      What will the signal be?      </u> ) sounded.
	Emergency services briefed regarding final status.

Completed or N/A	Shelter in Place
	Ensure that designated shelter areas are ready to receive and shelter personnel and staff.
	Take attendance to establish accountability for all personnel and staff.
	Remain in place and await further instructions from designated staff person.
	Notify 9-1-1.
	Staff move their group to the pre-designated shelter areas.
	Staff maintain control of their group until instructed to move to another location.
	Close windows, blinds, drapes & doors to impede debris from becoming missiles.
	Close air intakes for HVAC.
	Reduce all other sources of external air.
	Staff take attendance as soon as they arrive in the shelter area.
	Time permitting, place food and beverages in closed containers.
	Emergency services arrive on-site and briefed.
	Provide meals to sheltered personnel and staff if the duration of the emergency warrants.
	Search of building revealed no hazards.
	"All-Safe" signal ( <u>      </u> <i>What will the signal be?</i> ) sounded.
	Evacuation to a Relocation Facility
	Relocation Facility ( <u>  name  </u> , <u>  phone #  </u> ) notified.
	Take attendance for accountability and to determine exact number of transport seats needed.
	Transportation arrives at the facility .
	County EMA (ph # _____) notified of shortage in transportation resources.
	Each driver given a map to Relocation Facility in case vehicles get separated. Attach appropriate maps to this checklist.
	9-1-1 notified.
	Transportation departs for Relocation Facility.
	Post "Notice of Relocation".
	Personnel arrive at Relocation Facility & move to areas designated for their use.
	Staff retain supervision and accountability for all personnel.
	Attendance taken and numbers reported to designated staff person.
	Family members notified of the relocation of family member.

## CHECKLIST C: EMERGENCY SUPPORT FUNCTIONS

*Procedures to accomplish functions required to support emergency action*

Completed or N/A	Item
	<b>Building Security</b>
	Facilities locked with only one entry/exit point.
	Checkpoints staffed to ensure there are no intruders (see diagram).
	<b>Communications</b>
	Use commercial telephone (primary means of communication)..
	Make backup communication system available (cell phones).
	Sound appropriate alarm for Protective Action decided (evacuate immediately, shelter or evacuate to host).
	Establish contact with shelter facility as soon as evacuation is considered.
	<b>Medical Emergencies</b>
	Render first aid as needed/feasible..
	Brief Ambulance/EMS personnel when they arrive.
	<b>Medical Procedures</b>
	Review list of special needs personnel.
	Ensure individual staff are with special needs personnel.
	Take all medication to be moved if personnel relocate.
	Take first aid supplies to accompany the personnel.
	Examine all personnel/staff for injuries after emergency has passed.
	Establish and maintain log of any medication administered.
	<b>Public Utilities</b>
	Shut off Electricity manually.
	Shut off Water manually.
	Shut off Gas manually.
	<b>Important Records</b>
	Take emergency contact information and family member permissions, etc to relocation site.
	Take business records (license, employee training, lease, etc.) to relocation site.
	<b>Recovery</b>
	Develop a plan based on damage survey to clean up the center and make it safe for reoccupation.
	Begin clean-up and repair; document costs.