

Annual Requirements

- Each contractor will review this training outline and receive a copy of the Emergency Management Plan at initial orientation and each year afterwards. Contractors will sign the statement below indicating that they have received instruction and a copy of the plan.

I have received a copy Gracefully Meek Home Care LLC
Emergency Management Plan and reviewed the training
materials.

Contractor/Staff

Date _____

*After signing this page, please remove it from the packet and submit
this form only to the staffing department. You are to keep the packet
for future reference.*

Comprehensive Emergency Management Plan



In Compliance with: s.400.492, Florida Statutes
59A-8.027 Florida Administrative Code

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I. Introduction

1. Basic Information about the Agency

Gracefully Meek Home Care LLC

319 S Main St, Chiefland, FL 32626

Phone:352-215-3179 Fax:352-389-2690

Servicing :

Levy County, Alachua County, Bradford County, Citrus County, Columbia County, Dixie County, Gilchrist County, Hamilton County, Hernando County, Lafayette County, Lake County, Marion County, Putnam County, Sumter County, Suwannee County and Union County

Should local telephone service be inoperable call 352-215-3179.

2. Person in Charge During Emergency (Key Staff)

Shameka Mobley/Owner

Work Phone Number: 352-215-3179

Cell Phone Number: 352-215-3268

Alternate Person in Charge: Jeffrey Mells/AlternateAdm.

Home Phone Number: 352-871-0840

Work Phone Number: 352-215-3179

Cell Phone Number: 352-871-0840

Alternate Person/Brandy Williams, R.N.

Home Phone Number: 941-932-1324

Work Phone Number: 352-215-3179

Cell Phone Number: 941-932-1324

3. Agency Owner

Shameka Mobley/Owner

Home Phone Number: 352-215-3268

Work Phone Number: 352-215-3179

Cell Phone Number: 352-215-3268

4. Person who developed this plan:

Shameka Mobley (Administrator)

Home phone: 352-215-3268

Work phone: 352-215-3179

II. Concept of Operations

A. Direction and Control

1. The chain of command for ensuring continuous leadership and authority in key positions:

Owner -Shameka Mobley, 352-215-3179(W) 352-215-3268(C)

Administrator–Shameka Mobley, 352-215-3179(W) 352-215-3268(C)

Alternate Administrator – Jeffrey Mells 352-871-0840(c)352-871-0840

Registered Nurse – Brandy Williams 352-215-3179(W)941-932-1324(C)

Home Care Supervisor -352-215-3179(W) 352-215-3268(C)

Service Supervisor – Shameka Mobley, 352-215-3179(W) 352-215-3268(C)

2. The procedures for ensuring timely activation of the Nurse Registry's emergency management plan and staffing of the Nurse Registry during an emergency are as follows:
 - What constitutes an emergency: Any natural disaster including hurricanes, tornadoes, floods, fires, oil spills, etc. that would jeopardize the lives or well-being of our clients.
 - Administrator, Alternate Administrator and Registered Nurse will monitor pending disaster or emergency situations and will enact the plan when the announcement is made by the local emergency management office that they will be preparing to be in full operation or local officials announce that there is a voluntary non mandatory evacuation for mobile homes and beach side residents. The Administrator,Alternate Administrator or Registered Nurse may enact the plan sooner if they feel it is necessary.
 - In the event that an emergency/disaster occurs without warning, the Administrator will enact the plan immediately. The Administrator will take the disaster plan notebook home with her daily. This plan includes all client and staff information and their individualized plan.
 - Either individual may enact the plan without consultation with the other if necessary.
3. The operational and support roles of all those nurse Registry staff that are designated to be involved in emergency measures:
 - Gracefully Meek Home Care LLC field contractors are expected to fulfill their routine duties during times of emergency unless their personal safety is at risk.
 - The Administrator, Alternate Administrator or Registered nurse may elect to dismiss or reassign individuals whose routine role is not critical to ensuring client/client health and safety.

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- The following will be assigned by the Administrator, Alternate Administrator or Registered nurse: The office staff - **Administrative Staff** will contact clients, the administrator and alternate administrator will assist with contacting clients as needed. **Administrative Staff** will call field staff, the **Administrative Staff** will man the phones for incoming client calls and **Administrative Staff** will man the phones for incoming field staff calls. **Contractors** will remain on their scheduled shifts and perform their routine duties unless directed otherwise.
 - The Gracefully Meek Home Care LLC location will serve as a base of operation and communication (Command Center) for the Administrator, Alternate Administrator and Registered Nurse, or Ranking Individual so long as that location is deemed safe.
4. Management of clients in private homes, assisted living facilities (ALF) and adult family home care (AFHC) who continue to receive services by the Nurse Registry during an emergency:
- The Administrator, Alternate Administrator and Registered Nurse will coordinate disaster preparations and act as liaison with local disaster preparedness officials.
 - Either individual may enact the plan without consultation with the other if necessary.
 - A list of priority clients having the greatest service needs is prepared at time of admission and maintained on an on-going basis. Clients are classified as High Risk (1), Average Risk (2), Low Risk (3), by the Nurse or Home Care Supervisor. These codes are on the client census list in the "ON-CALL" Book and listed on client profile. (See Attachment B for classification procedures).
 - A "phone tree" manned by client service staff and supervisors will be in place to notify clients, staff, and significant others of the emergency situation and advise them of appropriate/required actions. (See Attachment C)
 - A list of available emergency shelters (available once shelters open) will be obtained from local emergency officials and maintained in the office.
 - All clients residing at home will be contacted by in-office or Contractors regarding their need for transportation to shelters, or to make and document other arrangements. Locations of shelters and lists of items to take are provided. A list of each client's location will be prepared and maintained in the office by the Administrator. Client location plans will be documented in their activity log in ClearCare.

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- For clients residing in ALF's or AFHC's, the facility will be contacted to confirm their evacuation location that was obtained at admission and to see if our staff is needed for our clients. Staff will be provided if safe to do so.
 - For Agency Nurse Registry clients needing on-going care, prioritization for visits will be made by the Nurse Registry based on the following:
 - Clients receiving on-going home health services on a 24/7 basis.
 - For clients without need for immediate care and ongoing service is requested, we will continue service if it safe to do so. If it is not safe, the client/family will be advised and alternatives discussed such as contacting a shelter, emergency mgt services, or other alternatives.
 - Contractors are trained upon hire and instructed in our EM communications to do the following::
 - Contractors will remain with High risk clients until appropriate arrangements can be made.
 - Contractors will accompany clients to Special Needs Shelters and assure continuity of care unless arrangements have been made for another caregiver to accompany client and assure continuity of care.
 - Contractors will notify the office when client has been moved to another location.
 - Contractors are not to cancel scheduled visits or shifts without notifying the office.
 - Contractors is to notify office if they are evacuated or moved to another location.
 - Routine services provided by the Nurse registry will resume at the earliest time possible as safety permits. Phone contact will be maintained or re-established as soon as feasible.

B. Education of Clients Prior to an Emergency

1. The procedures for educating patients or patient's caregivers at the onset of care and as needed about the Nurse Registry's emergency management plan:
 - Each new client will be oriented about the Nurse Registry's plan during the admission process.
 - Admission package will include, list of items to take if evacuated, written instructions for use in an emergency.
 - Each new caregiver will be oriented about the Nurse Registry's plan during the orientation process, including their roles and responsibilities during a disaster.

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- Orientation package will include, list of items to take if evacuated, written instructions for use in an emergency.
 - All clients and caregivers will receive any updates or changes to this plan as needed. They will be notified of available shelters once the county officials open and post them.
2. The procedures for discussing with those patients in private homes, ALF's and AHCH's who need continued services, who are not registered with the special needs registry, the patients' plan during, and immediately following an emergency and contacting the ALF and/or AFCH for clients served by the Nurse Registry regarding the plan for the patient during, and immediately following an emergency:
- Availability of the special needs registry is discussed with each client/family representative during admission. Each client has a client disaster/Evacuation Plan completed upon admission. Clients registered at special needs shelters will be notified of the location by the Administrator once the shelters open.
 - Each patient in private homes, are contacted to obtain their plan during the disaster, If they are not registered at a special needs shelter and are planning on remaining at home, at this time they will receive instructions regarding the use and importance of their medications, supplies and any medical equipment and purchase of a generator and have gas on hand if necessary. They are asked to notify the agency after the disaster for any follow up need they might have and to reestablish services.
 - For clients who reside in an ALF or AFCH, the location of where the facility plans on going during the emergency according to their CEMP is obtained at the initial admission. The ALF or AFCH will be contacted to confirm their evacuation plans.
3. The procedures for discussing the special needs registry with those patients who will require evacuation to a special needs shelter during an emergency:
- The admission package contains the special needs shelter application and a link to complete the application on line: <https://snr/flhealthresponse.com> This admission package is reviewed with every client at admission and given a copy of the special needs information.

Levy County - (352) 486-5213
Alachua County- (352) 264-6500
Bradford County- (904) 966-6300
Citrus County- (352) 249-2703
Columbia County- (386) 758-1125
Dixie County- (352) 498-1240
Gilchrist County- (386) 935-5400
Hamilton County- (386) 792-6647

Hernando County- (352) 754-4083
Lafayette County- (386) 294-1222
Lake County - (352) 343-9420
Marion County- (352) 732-8181
Putnam County- (386) 326-2793
Sumter County- (352)-689-4400
Suwannee County- (386) 364-3405
Union County- (386) 496-4300

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4. The Nurse Registry's procedures for collecting and submitting patient registration information for the special needs registry, (pursuant to 59-A8.027(13), F.A.C.), which must be done prior to an emergency, not when an emergency is approaching or occurring:
 - Each client who requests to be evacuated to a special needs shelter will have a special needs registration form completed by the Nurse Registryster this will be noted on the individual client emergency plan that is completed at time of admission and they will need to supply the Nurse Registry with an alternate shelter arrangement location. All contact attempts to the client, caregivers, facilities etc will be documented in the client activity log.
 5. The education of patients regarding their responsibility for their medication, supplies and equipment list or other emergency preparedness information as needed (in accordance with Appendix B, Section 2). In addition, the following information is to be provided:
 - The admission package will contain an Appendix B from AHCA form 3110-1022.
 - A list of medications, supplies, and equipment needed for continuing care will be developed for each client at admission and updated every 90 days at re-certification or as the client's needs change. This may be updated by the Home Health Aide if necessary.
 - This list will also include contact information for the client's physician and pharmacy as well as documentation of any known allergies.
 - A copy of the list will be maintained in the client's home as well as the Agency office.
 6. The education of patients registered with the special needs registry on the information contained in Appendix B as well as the limitation of services and conditions in a shelter; that the level of services will not equal what they receive at home; that conditions in the shelter may be stressful and may even be inadequate for their needs; and that the special needs shelters are an option of last resort:
 - During the initial admission process if they choose to register for a special needs shelter, we review the limitation of services and conditions in a shelter; the level of services will not equal what they receive at home; conditions in the shelter may be stressful and may even be inadequate for their needs; and the Special Needs Shelters should be an option of last resort. We make every effort to describe what those conditions may be like and to help find another alternative. Appendix B and attachment "H" is given at the time they request to register for the special needs shelter.

C. Notification

1. The procedures on how the Nurse Registry staff in charge of emergency plan implementation will receive warnings of emergency situations, including off hours, weekends and holidays:
 - Management staff will monitor local broadcast and print media for potential emergency situations. A weather alert radio is available.
 - Gracefully Meek Home Care LLC also receives information regarding pending emergencies directly from local Emergency Management officials.
 2. For Nurse Registry's that provide skilled care, list the Nurse Registry's 24-hour contact number, if different than the number listed in the introduction:
 - **This Nurse Registry does not provide skilled care, non-medical care only, we assist with activities of daily living.**
 3. The procedures for alerting key staff:
 - When management is not available in the office, or when an unexpected emergency arises, "on-call" staff will notify management via their personal cell phone. Owner -Shameka Mobley 352-215-3268, Administrator–Shameka Mobley 352-215-3268 ALT Administrator – Jeffrey Mells - 352-871-0840
 4. At least one member of the management team will be available via cell phone on a 24-hour basis.
 5. The Nurse Registry may be contacted on a 24-hour basis by calling the office telephone number or the oncall cell phone directly. 352-215-3179
 6. The telephone is monitored by on call staff at all times when staff members are not in the office.
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4. The policies and procedures for reporting to work for key workers, when the Nurse Registry remains operational:
 - Contractors is notified of an emergency via the "phone tree". (attachment C.)
 - Gracefully Meek Home Care LLC Contractor's is expected to complete their immediate assignments once an emergency is declared, if they can be completed safely.
 - Each Contractor is to contact their immediate supervisor as soon as possible and supervisors will identify staff availability and locations.
 - Management and office staff will report to the office location and begin notifying staff and clients. If the office is destroyed or inaccessible the office staff will be given assignment via telephone or an alternate location will be chosen depending on conditions.

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- Office Staff members will report to the office location or nearest alternate location each morning for triage and assignment of those days' visits.
 - Contractors will remain with high and moderate risk clients and continue current duties (ADL's) until arrangements can be made for evacuation, transfer to an appropriate facility, or care responsibility is assumed by an alternate caregiver.
 - Contractors will accompany clients to Special Needs Shelters unless arrangements have been made for an alternate caregiver to accompany them.
 - Contractors will accompany clients of an ALF and AFCH to another location (may be in another county or sister facility) if requested by the client unless arrangements have been made for an alternate caregiver to accompany them.
 - Contractors will contact the office if a scheduled shift or visit needs to be cancelled during the emergency.
5. The procedures to confirm plans and alert patients in private homes, ALFs and/or AFCHs where patients are served and the precautionary measures that will be taken including but not limited to the Nurse Registry's inability to operate due to situations that are beyond their control. (Refer to s.400.492(3), F.S., for a description of how a Nurse Registry shall demonstrate a good faith effort to comply with their emergency management plan):
- Gracefully Meek Home Care LLC shall not be required to provide care to clients
Who reside at home, in an ALF or AFCH in emergency situations that are beyond their control and make it impossible to provide services, such as when roads are impassable. The ALF or AFCH will be contacted directly.
 - We may establish a link to the local emergency operations center to determine the best mechanism by which to approach specific areas in order to reach our clients.
 - We will demonstrate a good faith effort to comply with the requirements of this subsection by documenting attempts of staff to follow procedures outlined in this CEMP and by the clients record, which support a finding of the provision of continuing care has been attempted for those clients identified as needing care by this agency.
 - After the Emergency Plan is initiated, all clients who reside in their homes are contacted by office or field staff via phone and/or email regarding their plan, need for transportation to shelters or other arrangements.
 - After the Emergency Plan is initiated, the ALF or AFCH that our client resides in is contacted by office staff via phone and/or email to confirm their CEMP plans and the need for continued service from our field staff.

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- Availability of adequate amounts of medications, supplies and equipment is also reviewed and re-orders placed as necessary.
 - Locations of shelters, what to take, and Gracefully Meek Home Care LLC's operational status will be discussed. This would include notification of possible voluntary cessation of operations due to impassable roads or other unsafe conditions, and/or unavailability of care if clients do not go to locations specified in their client record.
6. The procedures for alternative means of key staff and communicating with the local health department and county emergency management should the primary system fail. (pursuant to s.400.492, F.F.)
- Should telephone service not be available when communicating with key staff, key staff will be contacted via their cell phone and/or email.
 - Should telephone service not be available when communicating with clients, key staff will prioritize clients based on the risk assessment and when safe to travel will use the Nurse Registry vehicles (2 SUV's and 1 pick up truck) and travel to the clients' locations in priority order to communicate in person.
 - The Nurse Registry administrator is signed up to receive emergency management alerts. If the Nurse Registry needs to be in contact with the local health department and/or county emergency management office they will either communicate via email or physically go to their location. **Levy County Health department at:**
Phone: 352-486-5300
Address: 7911 NE 90 St, Bronson, FL 32621
Website: <https://levy.floridahealth.gov/>
Levy County Emergency Management Services at:
Phone: (352) 486-5213
Address: 7911 NE 90 St, Bronson, FL 32621
Website: <https://levydisaster.com/>
American Red Cross Northeast Florida Chapter (Regional Headquarters) at:
Phone: :904-358-8091
Address: 751 Riverside Avenue
Jacksonville, FL 32204
Website: redcross.org/local/florida/north-florida
7. The procedures for maintaining a current prioritized list of patients who need continued services during an emergency in the home, ALFs and AFCHs. The list shall indicate how services shall be continued in the event of an emergency or disaster for each patient and if the patient is to be transported to a special needs shelter, and shall indicate if the patient is receiving skilled nursing services and the patient's medication and equipment needs. The list

shall be furnished to county health department and to local emergency management agencies, upon request (pursuant to s.400.492(2), F.S.):

- The Nurse Registry will maintain a current listing of each client in the home and their needs during an emergency, the Nurse Registry does not provide skilled nursing services.
- The Nurse Registry will maintain a current listing of clients in ALFs or AFCHs with the facility contact information. In the event of an evacuation the facility will be contacted to confirm their evacuation plans that were listed at the initial admission.
- All information, including, the clients risk status, plan for continuation of services, transportation plans, services being provided, medications and equipment needs are maintained within the Nurse Registry information system. In the event the computer system is down, this information is kept in notebooks that are taken home daily by the administrator. (our client system is all web based so can be accessed from any internet connection)
- A listing of all active clients is available, daily, to the on-call person. This listing will be made available to Emergency Management and County Health Departments upon request.

D. During an Emergency

1. When there is not a mandatory evacuation, some patients may decide to stay in their homes, ALF or AFCH. Describe the procedures the Nurse Registry will take to assure that all patients needing continuing care will receive it, either from the Nurse Registry or through arrangements made by the patient or the patient's caregiver; and how the Nurse Registry will ensure that nursing personnel continue essential services such as insulin and other injections to patients in ALFs and/or AFCHs:

Nurse Registry clients and continuous care clients needing on-going care, prioritization for visits will be made by the Nurse Registry based on the individual's emergency risk rating and the following:

- Clients who reside in their home and are receiving on-going home health services 24/7 will continue to receive the same care as they were receiving before the emergency.
- Clients who reside in an ALF and/or AFCH and are receiving on-going home health services 24/7 will continue to receive the same care as they were receiving before the emergency.
- For clients who reside in their home without need for immediate care, clients will continue to receive the same care as they

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- were receiving before the emergency.
- Clients who reside in an ALF and/or AFCH without need for immediate care, clients will continue to receive the same care as they were receiving before the emergency.
 - The Nurse Registry does not employ skilled nursing personnel to provide services such as insulin and other injections to clients in ALF's or AFCH's.
2. Identify the procedures for the Nurse Registry to assure that all patients in homes, ALFs and/or AFCHs needing continuing care will receive it, either from the Nurse Registry, through a special needs shelter, or through arrangements made by the patient or the patient's caregiver, ALF or AFCH: Include the means by which the Nurse Registry will continue to provide the same type and quantity of services to its patients who evacuate to special needs shelters that were being provided to those patients prior to evacuation per s.400.492, F.S.:
- All clients requiring continued care will receive the same type and quantity of services from the Nurse Registry, to be provided either at home, special needs shelter or other location as requested by the patient or the patient's family. When requested by the family/patient, transportation will be provided to either a local family member or a special needs shelter. The same type and quantity of service will be providing in the alternate locations as long as it is safe to do so.
 - All clients residing in ALF's or AFCH's needing continuing care will receive the same type and quantity of services from the Nurse Registry, this could be at the current location or another location, the location of the ALF's or AFCH's CEMP is noted at the initial admission and is kept in the client file and in a separate notebook. The facility is contacted at the time of the emergency to confirm location.
3. Identify the procedures for ceasing operation, (as defined in s.400.492,F.S), including notifying all patients or patient caregivers that the Nurse Registry is ceasing operations:
- The Administrator, Alternate Administrator or Registered Nurse, or ranking individual may make the decision to temporarily cease operation of the Nurse Registry when conditions make it impossible or unsafe for staff to complete their assignments.
 - Clients and staff will be notified via the "**Emergency Call Tree**" of this decision with instructions for their safety or alternate care arrangements.
 - In the event the Nurse Registry is temporarily ceasing operations each caregiver and client will be contacted via phone or email, appropriate

notices will be placed on the phone answering system, websites, and facebook pages.

E. Evacuation

1. The procedures for establishing, and keeping updated medication, supplies and equipment lists, (as defined in 59A-8.027, F.A.C.), to be kept in the homes of special needs clients and to accompany the client during evacuation to a special needs shelter:
 - Upon eminent threat of an emergency or disaster each client or client's family will be contacted to confirm that individual's plan during and immediately following the emergency.
 - During that contact the clients list of medications, supplies and equipment, as well as allergies, physician, and pharmacy contact information, required for continuing care will be reviewed and instructions given that the list should accompany the client to any other location where they might be transported.

The list of medications, supplies and equipment, as well as allergies, physician, and pharmacy contact information are obtained during the admission process and updated at least every 90 days or when changes occur. This may be updated by the Home Health Aide.

2. The procedures for educating the patient and caregiver concerning the medication, supplies and equipment list, (as defined in appendix B of this document, and the need for this list and other items to accompany the patient during evacuation:
 - Upon eminent threat of an emergency or disaster each client or client's family will be contacted to confirm that individual's plan during and immediately following the emergency.
 - During that contact the clients list of medications, supplies and equipment, as well as allergies, physician, and pharmacy contact information, required for continuing care will be reviewed and instructions given that the list should accompany the client to any other location where they might be transported.
3. The resources necessary to continue essential care or services or make referrals to other organizations subject to written agreement which include how the Nurse Registry will continue to provide care to ALF and/or AFCH patients who relocate in the same geographic service area or relocate outside the geographic service area:
 - The Nurse Registry will need the following resources to continue essential care or services: 3 key staff members, all field staff members, 20 to 100 medical paper masks, 10 PPE kits, 3 office phones (wifi capability).

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- The Nurse Registry will attempt to safely assure that each client's essential care needs are met. We will look at all options including using other caregivers, Administrator/Owner/Registered Nurse will coordinate with (or other home health agencies or Nurse Registry's in the area with whom we regularly refer to) to provide needed services. If we must provide a referral, we will do so with the client's written agreement.
 - If the home care client is relocated in the same geographic service area the Nurse Registry will continue to meet essential care needs, if the home care client is relocated outside the geographic service area the Nurse Registry will coordinate with other Nurse Registry providers in that region, The Administrator/Owner will ask these other Nurse Registry's or Home Health Agencies(if they are not able to assist) to provide referrals to neighboring home health agencies and we will coordinate care with them as well. If referrals are made, the Administrator/Owner will coordinate all paperwork as needed to ensure a quick and efficient referral process. If efforts described are not adequate to meet an individual's needs , the client will be transferred to the appropriate ALF or AFCH facility of their choice if that is the only option available.
 - If the client resides in an ALF or AFCH and is relocated in the same geographic service area theNurse Registry will continue to meet essential care needs, if the ALF or AFCH client is relocated outside the geographic service area the Nurse Registry will coordinate with the facility first per their CEMP, if other resources are needed we will coordinate with other Nurse Registry / home health providers in that region. The Administrator/Owner will ask these Nurse Registry / home health providers offices (if they are not able to assist) to provide referrals if necessary to neighboring home Nurse Registry / home health providers and we will coordinate care with them as well.
4. The procedures for contacting the emergency operation center after the disaster to report on the Nurse Registry's damage, if any, and their availability to continue services to their patients in the special needs shelters
- The Owner, Administrator, Alternate Administrator or Registered Nurse will contact the emergency operations center via telephone (352) 486-5213.
 - we will do this if we are forced to shut down office operations, we will leave all contact names and telephone numbers, and we will recontact them immediately after the disaster to report on the Nurse Registry's damage, if any, and our availability to continue services to our clients including those in special needs shelters. This will be done via phone, email or in person. We will use recordable messages on our phone systems to distribute the information. Our website will be updated with

special messaging, as well as our caregiver portal. If possible we will email a letter outlining the status of our Nurse Registry and services and ask shelters to distribute to our clients and caregivers who may be there.

F. The Patients Return Home

1. The procedures on how the agency will re-establish contact with patients in the patients' home, ALF and AFCH and resume patient care:
 - Clients are instructed at admission and during the emergency notification procedure to call the Nurse Registry office upon return to their home, ALF or AFCH following an evacuation or stay at an alternative location. In addition, office staff will contact clients by telephone at their home, ALF, AFCH or last known location after the emergency is over. In the event that contact cannot be re-established via telephone an agency staff member will make a visit to the client's home, ALF or AFCH location to verify their absence.
 - Office staff will determine how many clients will be able to return to their home, ALF or AFCH. Assist with transportation.
 - Staff Coordinators/Office Managers will contact all clients and resume care as needed. If client is unable to return to their home, ALF or AFCH, the agency will contact family, Red Cross or other appropriate agency to make alternate living arrangements.
 - Complete an inventory of each client's medications, supplies and equipment. Assist with obtaining any needed items.
 - Staff Coordinators/Office Managers will notify authorized individuals of the safety of the client.
 - Field employees will notify Agency office of any changes in the client's condition and/or any new instructions/orders.
2. The procedures on how the Nurse Registry will re-establish contact with employees and re-start patient care:
 - Contractors are contacted by phone or email to ascertain their ability to return safely to their scheduled shifts.
 - Contractors are instructed at orientation and during the emergency notification procedure to call the Agency office upon return home following an evacuation or stay at an alternate location.
 - After re-establishing contact, Contractors are instructed to resume their scheduled shifts, (this has been predetermined by contact with the client to ensure that it is safe to travel to their location. The

Administrator/Alternate Administrator and Registered Nurse will monitor the Emergency management website for road closures due to the disaster.

3. The procedures on how the Nurse Registry will provide or arrange for prioritizing care should the emergency result in less staff being available immediately following the disaster:
 - Should adequate staff not be available after an emergency to meet every client's care needs, the prioritization system used for providing care during the emergency will be used until normal staffing resumes. (Per attachment "B" Client Risk Classification) this classification is determined during the initial intake and updated as needed. ("1" being the highest need).
 - Additionally, assistance will be sought from other agencies that might have staff availability by contracting for their staff to provide needed care.

II. Information, Training and Exercise

1. The procedures on how key workers will be instructed, prior to an emergency, in their roles and responsibilities during an emergency:
 - Orientation: All workers are instructed regarding this **Comprehensive** Emergency Management Plan and their responsibilities during their initial orientation by a member of management **and annually thereafter**.
2. The procedures for developing a training schedule for all staff and Contractors and identification of who will provide the training. Training will include a definition of what constitutes an emergency, when the emergency management plan will go into effect, the roles and responsibilities of essential and non-essential staff, the procedures for educating patients about the emergency management plan and the special needs registry. The training will also include information for staff/contractors on how they can work, if they choose to do so, with the local state or county agency who will be managing and staffing the special needs shelter during an emergency (pursuant to s.456.38F.S. and s.381.0303,F.S.):
 - Administrator will conduct Emergency training for all Contractors. Administrator will conduct Emergency training for all office staff.
 - Ongoing training consist of:
 1. Definition of an emergency
 2. How the Contractors/Staff will be notified

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3. Contractor/Staff responsibilities during and after an emergency
 4. Special Needs Shelters, what they are like, what to bring, shelter requirements, etc.
 5. How Contractor/Staff can work with local, state or county agencies during an emergency
 6. Contractor/Staff annual training refresher requirements
- Required Annual Review: All workers are required to review the **Comprehensive** Emergency Management Plan training materials and complete a statement that the review is completed prior to their annual performance appraisal. The **Comprehensive** Emergency Management plan is located on our employee portal for access by any employee 24x7.
3. The Nurse Registry provisions for training new Contractors regarding their disaster related roles and responsibilities:
 - Orientation: All workers are instructed regarding this **Comprehensive** Emergency Management Plan and their responsibilities during their initial orientation by a member of management **and annually thereafter**.

4. **Appendices**

- The appendices that follow are provided in support of the agency's comprehensive emergency management plan.

Appendix A: **Agreements and Understandings**

List on this page and insert copies on following pages, and include annual update mutual agreements, memoranda of understanding, or any other understandings entered into between the Nurse Registry and any local, state, and county entities, or health care entities, and service providers that have responsibility during a disaster. This is to include current agreements needed to ensure the operational integrity of the plan.

There are no special agreements or understandings in place. However our responsibility includes providing referrals to other agencies, if we are unable to provide services.

Appendix B.

The following page is given to the clients upon admission: *Information for Home Health Patients*.

APPENDIX B: INFORMATION FOR HOME HEALTH AGENCY PATIENTS

The following information should be supplied by the home health agency to those patients registered with the special needs registry, so they will be prepared prior to an evacuation to a special needs shelter.

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 from staff in the home, and the conditions in a shelter might be stressful.

(1) If the patient has a caregiver¹, the caregiver must accompany the patient and must remain with the patient at the special needs shelter.

(2) The following is a list of what special needs patients need to bring with them to the special needs shelter during an evacuation:

- Bed sheets, blankets, pillow, folding lawn chair, air mattress
- The patient's medication, supplies and equipment list supplied by the home health agency, including the phone, beeper and emergency numbers for the patient's physician, pharmacy and, if applicable, oxygen supplier; supplies and medical equipment for the patient's care; Do Not Resuscitate (DNRO) form, if applicable;
- Name and phone number of the patient's Nurse Registry
- Prescription and non-prescription medication needed for at least 72 hours; oxygen for 72 hours, if needed.
- A copy of the patient's plan of care
- Identification and current address
- Special diet items, non-perishable food for 72 hours and 1 gallon of water per person per day
- Glasses, hearing aides and batteries, prosthetics and any other assistive devices
- Personal hygiene items for 72 hours
- Extra clothing for 72 hours
- Flashlight and batteries
- Self-entertainment and recreational items, like books, magazines, quiet games.

(3) Shelterees need to know the following:

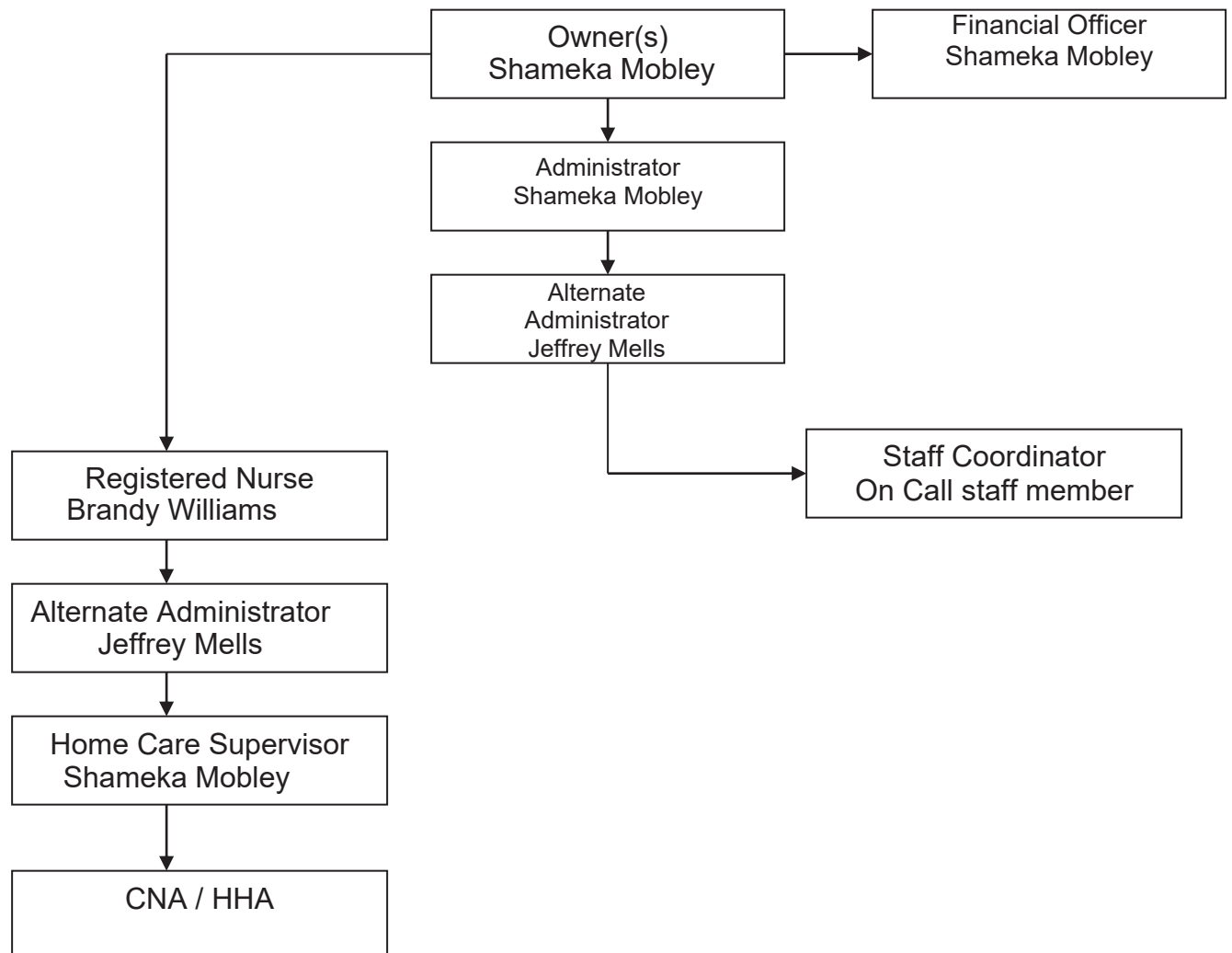
- If the patient has a caregiver, the caregiver(s) shall be allowed to shelter together in the special needs shelter. If the person with special needs is responsible for the care of individuals without special needs, those persons may also shelter together.
- The shelteree caregiver will have floor space provided. The caregiver must provide his or her own bedding.
- Service dogs are allowed in the shelter. However, check with your local Emergency Management office to see if other pets are permitted.
- Bring personal snacks, drinks, and any special dietary foods for 72 hours. It is possible only sparse meals will be provided.
- Caregivers who regularly assist the patient in the home are expected to continue to do the same care in the shelter.

¹ Caregivers can be relatives, household members, guardians, friends, neighbors and volunteers.

Appendix C. Support Material

Supporting Material Attachments. Pages 26-38

Attachment A -- Organization Chart



Attachment B -- Client Risk Classification

Clients are classified into three categories for prioritizing services during emergencies:

- High Risk (1)
- Average Risk (2)
- Low Risk (3)

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High Risk (1) Criteria

- Live alone with no significant other
- Over age 70
- Extremely ill, needing close observation by registered nurse
- Requiring continuous licensed home care, is bed bound
- Requires special diet
- Requires medication and or has limited supply available
- Terminally ill
- Located in area designated as high risk by local Emergency management
- Has acute or chronic illness requiring dependence upon electrical or other resources which may be endangered
- Has no transportation
- Is unable to ambulate by self
- Confused and dependent clients
- Uses high-tech equipment

Average Risk (2) Criteria

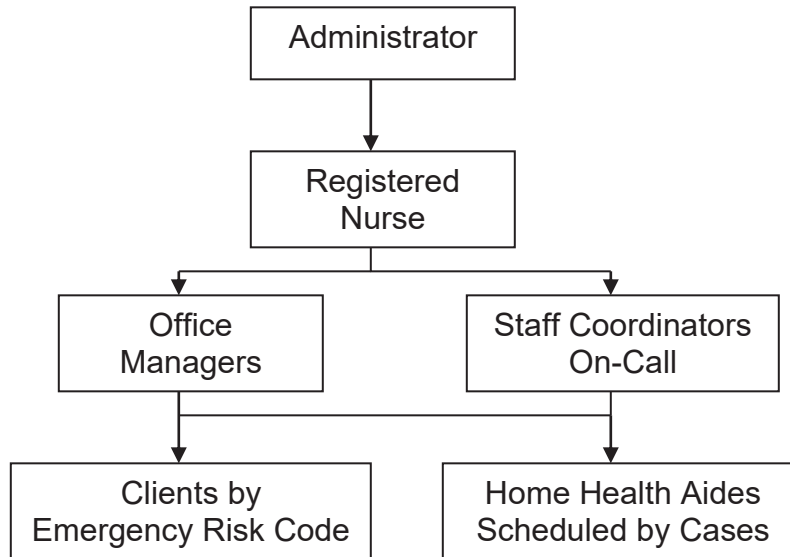
- Has significant other or family to assist in care
- Located in areas designated as medium risk by local Emergency management
- Not dependent upon electrical power for life support
- Has transportation available
- Has housing available in a no risk area
- Is able to ambulate
- Alert and independent with limited amount of help.

Low Risk (3) Criteria

- Has significant other or family who will arrange for emergencies
- Located in areas designated as low risk by local Emergency management
- Is able to ambulate
- Alert and independent with limited amount of help.

NOTE: Contractors assigned on continuous care for “high risk” clients must stay with client until appropriate arrangements for care can be made.

Attachment C-- Emergency Preparedness Phone Tree



1. Administrator will enact the Emergency Plan. Administrator will call or verbally inform DHCS.
2. DHCS will notify Staff Coordinators and/or Office Managers.
3. Staff Coordinators will notify clients and families of clients who are receiving care. Staff Coordinators will notify staff that is scheduled for cases or currently on assignment.
4. Office Managers and/or appropriate office staff and DHCS will notify their respective clients in risk code priority order, then will notify staff on assignment and scheduled for cases.
5. In the event of no telephone communications, Contractors should report to the Agency office or designated alternate site within two hours of notification or realization of emergency situation if personal safety permits.
6. DHCS or Administrator/Registered Nurse will assess/reassess and delegate assignments as Contractors/situations change.

Attachment D -- Outline of Emergency Plan Preparations

Pre-Emergency Preparations

Education for Staff and Clients.

1. All contractors will be aware of Emergency Plan and phone tree
2. At Admission all clients/families will be aware of Emergency Plan and their specific plan for evacuation
3. All clients will be risk coded at admission and recertification as needed
4. Current copies of Census are available to supervisors and On-Call staff.
5. On-Call book will include list of shelters and emergency numbers
6. On-Call book will include current list of employees and contact information

Emergency Supplies obtained and stored in Office.

1. Portable Radio and Batteries
2. Flashlight and batteries
3. Drinking Water
4. Bandage Supplies

Emergency Supplies in Auto.

1. Bandage Supplies
2. Drinking Water
3. Flashlight and batteries
4. Keep Gas tank filled

Emergency Plan up-to-date

1. Plan will include list of local shelters and emergency numbers

Emergency Plan distributed as appropriate

Monitor Local Media when Emergency pending.

Communications

1. Portable Radio and Batteries Available
2. Cellular Phones Available (Agency Phone and Personal Phones Available)
3. Dial 911 – Fire/ Police Dispatch only in life threatening emergency
4. Use messenger when other means fails.

Attachment E -- Command Center

- The Nurse Registry office will function as a command center at all times unless operations have ceased.
- If Local operations have ceased or the office is destroyed or inaccessible, the administrator will decide where the command center will be located. (This will be determined at the time depending on damage to certain areas of town)
- Contractors, staff, clients and referral sources will be notified by telephone or in person of the alternate location and contact information after ceasing operations at the current office.
- The command center will serve as a base of communication, coordination of care, and accumulation of supplies and other needed resources.
- It may be necessary for office and on call staff to operate temporarily out of their home. All telephone and software are on the web so information can be accessed from any location with proper credentials.

Attachment F -- Staff Functions and Responsibilities During Emergency

Emergency Impending: Office Staff

- Supplies checked and restocked as needed
- All currently active field and in-office employees are contacted regarding their involvement and assignments
- All active clients contacted regarding pending emergency and their needs. (by risk level 1 then 2 then 3)
- Local Media monitored for emergency instructions

Emergency Plan Activated: Office Staff

- Office equipment and files moved away from windows and into secure inner room
- Equipment and files subject to water damage stored off the floor and enclosed in plastic bags
- Drawers, files, and cabinets closed and locked as appropriate.
- Depending on severity of Emergency situation, remove employee, client and business records along with necessary operational/policy manuals and resources from the office location and transport out of area affected by emergency.
- Maintain list of client and staff locations if evacuated or relocated.
- Command Center staff will meet daily to review/report status of priority clients, formulate service plan for next 24 hours, assess resource needs and plan to secure needed resources. May be conducted by phone if necessary.

Emergency Plan Activated: Contractors

- Assist office staff with client notification as necessary
- Review emergency plans with assigned clients and discuss any additional needs. Verify and communicate plans with office.
- Remain with high risk clients until appropriate arrangements can be made.
- Accompany clients to Special Needs Shelters unless arrangements have been made for family or alternate caregiver to assume responsibility.
- Notify office if/when client is moved to alternate location.
- Staff are not to cancel scheduled visits or shifts with notifying the office and confirming that client needs are being met.
- Notify office if evacuating or relocating to another location.
- Report to office or command center daily.

Post Emergency Recovery: All Staff/Contractors

- Monitor local media for instructions.
- Determine what community services are functional or available.
- Office Staff will contact all clients to ascertain their status, plan for returning home and plan for resumption of care.
- Contractors should confirm their status and availability with supervisor.
- Schedule visits/shifts as soon as safe and local authorities authorize travel to client locations.
- Restock supplies as needed.
- Review documentation of client care during emergency and assess current client needs. Assure completeness of documentation.
- Resume office operations when building is safe.
- Return and account for all items removed from the office.

Attachment G -- Emergency Management Plan

Instructions for Clients/ Caregivers

Gracefully Meek Home Care LLC has prepared an Emergency Management Plan to ensure continuity of your care and safety when the area where you live is affected by an emergency or disaster.

- This plan is reviewed with you during your admission process and a specific plan for your continuing care and possible evacuation is developed.
- We will notify you when the special needs shelters are open with their locations.
- We will notify you in advance of any known threat of emergency. Should a sudden emergency occur, we will attempt to contact you to assess your situation/needs and plan for your ongoing care if necessary.
- During an emergency we will attempt to assure that your needs, within our scope of home care services, are met and that you are prepared if evacuation is necessary.
- It may be necessary for our agency to temporarily cease operation to assure our staff's safety. We will notify you and attempt to assure that your non-medical needs are met if this occurs.
- Please contact our office to report your status and any needs.
- If telephone service is not available please understand that our staff will make a visit as soon as possible.
- Prioritization of clients to be seen by Agency, if necessary, will be made in the following manner:
 1. Clients receiving on-going home health services. 24/7
 2. For clients without need for immediate care, client/family/caregivers will continue prescribed care as instructed by nursing and/or therapist in their absence as safety permits.
- Please read information found in your telephone directory and in ACHA form 3110-1022 (included in your admission package) prior to an emergency.

REMEMBER: AN EMERGENCY SHELTER IS A “*LIFEBOAT NOT A CRUISE SHIP*” AND LIKE A LIFEBOAT, SHOULD ONLY BE USED AS A LAST RESORT.

Services in a shelter are limited and conditions may be uncomfortable. Services will not be equal to what you could receive in the home or healthcare institution. You may find conditions to be stressful and/or inadequate for your needs.

Don't Leave Home Without Them

- 1. ALL REQUIRED MEDICATION AND MEDICAL SUPPORT EQUIPMENT:**
 - Specific medications and instructions, wheelchair, walker, oxygen, dressings, feeding equipment, ostomy, etc.
- 2. SPECIAL DIETARY NEEDS**
 - Shelters may only provide regular meals
- 3. SLEEPING GEAR:**
 - Pillows, blankets, portable cot or air mattress, folding chairs.
- 4. IMPORTANT PAPERS:**
 - Insurance cards
 - Doctors Orders
 - Emergency contacts
- 5. IDENTIFICATION:**
 - Photo ID and current address
- 6. CASH:**
 - Check cashing/credit card/ATM services may not be available for several days
 - Limit cash to cover basic needs. There may not be a place to secure money.
- 7. COMFORT ITEMS:**
 - Personal hygiene
 - Snacks
 - Small games, cards, etc.
- 8. EXTRA CLOTHING:**
 - Extra set of comfortable clothing
 - Few sets of underwear and socks

Attachment H -- Alternate Contact information for Gracefully Meek Home Care LLC

Back-up Phone Numbers:

Owner -Shameka Mobley, 352-215-3179(W)
352-215-3268(C)
Administrator–Shameka Mobley,
352-215-3179(W) 352-215-3268(C) Alternate
Administrator – Jeffrey Mells
352-871-0840(c)352-871-0840 Registered
Nurse – Brandy Williams
352-215-3179(W)941-932-1324(C)

Attachment I – Outline of Contractor/Staff Training

Emergency Management Plan

How will I be notified of an emergency?

- Administrator, Alternate Administrator and Registered Nurse will decide when to implement the Emergency Management Plan.
- Each contractor will be notified via telephone according to the Emergency Phone Tree.
- If telephone systems are not functioning, staff should attempt to report to the Agency office if conditions permit.

What Are My Responsibilities during the Emergency?

- Continue to fulfill your normal duties unless your personal safety is at risk.
- If you are “on-assignment” when Emergency Plan implemented, remain with high risk clients until alternate arrangements for client care/safety are made. Accompany high risk clients to Special Needs Shelters if necessary. For all clients, immediately communicate with office regarding the client’s needs and plans. Assist client with emergency preparations. Discontinue service when instructed by supervisor.
- Communicate with or report to the office location or alternate location each day to report your status and assist with care.
- Notify office when clients are evacuated or moved to alternate locations.
- Notify office of need to cancel visits or shifts.
- Office staff will report to Agency office and “man” the Command Center until released by Registered Nurse, Administrator or ranking individual.

What Are My Responsibilities after the Emergency?

- Call the Agency office upon return home following an evacuation or stay at an alternate location.
- Communicate with or report to the office location or alternate location each day to report your status and assist with care.
- Should the Agency office be destroyed or inaccessible, the agency will notify staff of the alternate location.
- After re-establishing contact, staff is to report to the agency office or alternate location each morning until normal operation and communication returns.

Attachment J – Volunteer Opportunities

After a disaster, essential government services may be overwhelmed. Citizen Corps is a grassroots effort that trains volunteers to help make communities safer, stronger and better prepared.

Citizen Corps opportunities include participation in Community Emergency Response Teams (CERT), Citizens on Patrol, Volunteer Fire-Police, Volunteers in Police Service and a host of other opportunities.

Please commit to serving your neighbor, your community and your country. Become a volunteer.

Everyone can do something to be safer from natural disasters, terrorism, crime, public health issues and other medical emergencies. It's easy to volunteer in your community.

For information on opportunities, please call local volunteer organizations or visit the following sites:

Your respective County -Council on Aging
Red Cross
United Way
Second harvest Food Bank

For more information, please contact Your respective county County Citizen Corps

A Community Emergency Response Team (CERT) is a group of volunteers trained to protect their families and neighborhoods immediately following an emergency.

For information, please contact your County Emergency management

Office: Levy County - (352) 486-5213, Alachua County- (352) 264-6500, Bradford County- (904) 966-6300, Citrus County- (352) 249-2703, Columbia County- (386) 758-1125, Dixie County- (352) 498-1240, Gilchrist County- (386) 935-5400, Hamilton County- (386) 792-6647, Hernando County- (352) 754-4083, Lafayette County- (386) 294-1222, Lake County - (352) 343-9420, Marion County- (352) 732-8181, Putnam County- (386) 326-2793, Sumter County- (352)-689-4400, Suwannee County- (386) 364-3405 and Union County- (386) 496-4300

IMPORTANT PHONE NUMBERS

Local Emergency Management Offices:

Levy County - (352) 486-5213, Alachua County- (352) 264-6500, Bradford County- (904) 966-6300, Citrus County- (352) 249-2703, Columbia County- (386) 758-1125, Dixie County- (352) 498-1240, Gilchrist County- (386) 935-5400, Hamilton County- (386) 792-6647, Hernando County- (352) 754-4083, Lafayette County- (386) 294-1222, Lake County - (352) 343-9420, Marion County- (352) 732-8181, Putnam County- (386) 326-2793, Sumter County- (352)-689-4400, Suwannee County- (386) 364-3405, Union County- (386) 496-4300

Federal Emergency Management Office

(FEMA) 800-621-3362

American Red Cross	904-358-8091
Citizens information hotline	352-486-5213
Telecommunications for the deaf	800-955-8771

Website information

Special Needs Shelter on-line Registration

<https://snr.flhealthresponse.com>