

Emergency Planning Policy

1. It is out policy to do what we can to protect our residents, staff and others who may be at our sites from harm during emergency events. To accomplish this, we have developed procedures for specific hazards which build on the cross-cutting strategies in our continuity of operations plan. We have infection prevention policies and procedures that direct our response to the threat of infectious disease outbreaks. If the community is impacted by a threat of an epidemic, we will activate our EOP and be guided by the following policies and procedures in addition to our infection prevention/outbreak management procedures:

INITIAL RESPONSE: See Procedures: Pandemic.

2. Depending on the situation, which will be monitored through coordination with local public health authorities, the IC may initiate the Shelter in Place policy. We may then implement the Emergency Staffing Strategy. Additional actions to our Infection Prevention/Outbreak Management policies and procedures will be taken, as advised by the local and state public health departments as well as CDPH, CCL, DDS and TCRC.

Actions may include but are not limited to:

- Closing to new admissions.
- Urgent prophylaxis and vaccination of all staff and residents.
- Limited visitation.
- Screening of staff, contracted entities, volunteers and visitors for signs of illness.
- Personal protective equipment for staff.
- Activation of the Subsistence P&P if disruptions to supply chain occur.

3. See policy 200.2.3 Blood-Borne Pathogens/Universal Precautions

4. See policy 200.2.16 Communicable Disease: Aerosol Transmissible

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