

EMERGENCY PREPAREDNESS AND MANAGEMENT PLAN**POLICY:**

Emergency situations shall be dealt with in a responsible manner by all ADEC personnel involved. The following procedures are guidelines for actions that may be taken in the event of an emergency in a timely, collaborative, organized and effective manner.

In all emergency situations, the ADEC personnel on duty must first act to assure the health, well-being and safety of individuals served and other employees, utilizing appropriate emergency services, then at the first opportunity, notify supervisory ADEC personnel. However, in a time of emergency, the ADEC personnel on duty may have to use their best judgment in determining the most appropriate actions to be taken in the given situation. It is recognized that altered standard of care during an emergency may occur.

All emergency situations should be documented for individuals served with appropriate record keeping and reporting. This documentation should include completion of Incident Report forms as outlined in *Policy 5.5.1 Incident Reporting and Management Policy* and any other supporting documentation for individuals served files as appropriate. In the event of an emergency, documentation may be completed at a later and reasonable time and not at the time or during the of the emergency.

The Emergency Preparedness and Management Plan (EP&MP) makes direct references to other ADEC policies and manuals. ADEC policies are made available on the L: Drive Policy Manual or directly from the ADEC Employee Portal.

For applicable individuals served, such as residential individuals in HCBS or ICF settings, a person-centered service plan (PCISP) must reflect the services and supports that are important for the individual to meet the needs identified through an assessment of functional needs, as well as a reflection of what is important to the individuals with regards to preferences during an emergency.

Persons served as well as responsible parties may be offered a hard copy of this plan at the time of their annual person-center support planning and team sessions, or upon request.

Policies specific to the pandemics, such as the Coronavirus 2019 (COVID-19) that subsequently spread into a global pandemic, are uniquely identified in a separate policy. Specific to COVID -19, the policies are identified in Section 12 – 0 Coronavirus Pandemic.

Responsible: President / CEO

Latest Revision: 12/21/2023

Approved:

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PURPOSE:

The purpose of this policy is to provide procedures that ensure ADEC is prepared to act in the event of a natural or man-made emergency so that critical operations of the agency continue, and the individuals receive needed supports and services. In the event of an emergency, ADEC’s priority is to assure the health, well-being and safety of all individuals served and all employees. It is recognized addressing all relevant types of emergencies that could impact service delivery and business operations is not feasible. ADEC has identified general emergency responses for ‘All Hazard events. A response to a natural disaster would be different than the response to a pandemic or staffing crisis. In the event of a pandemic, extensive man-made or natural disaster or emergency, which is beyond a small singular event, longer term plans are identified. Singular events, such as an inclement weather event, which are short term will have a different emergency management plan response.

Nearly all individuals served by ADEC are under federal and state funded programs that provide Medicaid reimbursed services under the definition of Centers for Medicare and Medicaid Services (CMS).

- On September 8, 2016, the Federal Register posted the final rule *Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers*. The regulation went into effect on November 16, 2016. Health care providers and suppliers affected by this rule must comply and implement all regulations one year after the effective date, on November 15, 2017. ADEC’s Supervised Group Living Program qualifies as an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IDD) provider that is required to meet these guidelines.

- On December 1, 2021, the Indiana Bureau of Developmental Disabilities Services (BDDS), Bureau of Quality Improvement Services (BQIS), in response to the Coronavirus Pandemic, required provider networks to strengthen their agency's emergency crisis plans. In the update, BQIS identified suggested criteria to be included as well as ensuring individual crisis emergency plans are in place.

This policy is intended to meet the Indiana State Department of Health, Code of Federal Regulations (CFR) Citation 483.475, as made available November 2016, to support of Residential Program Sites – Supervised Group Living. In addition, this policy is in accordance with [42 Code of Federal Regulations \(CFR\) 441.725](#) which provide guidance for provider owned and controlled settings, for purposes of this requirement, Indiana BDDA defines provider owned or controlled settings in include:

- Residential settings that are owned by a provider; or
- Residential settings in which individuals, who are no living in their family or guardian home, utilize:
 - Residential Habilitation and Support – Level Two (RH20);
 - Residential Habilitation and Support – Daily (RHQ Daily – RD); or
 - Structured Family Caregiving.

The contents of this policy or direct reference to material in other policies, procedures and manuals located at the residential locations and on the L: Drive, which is a secured information technology virtual storage, are intended to meet this defined requirement. They are also available on the secured ADEC Employee Portal.

It is ADEC's intent to apply any or all the procedures, as applicable, aligned with 460 IAC 6-29-5, which requires BDDS providers to adopt procedures for an emergency or crisis; and 460 IAC 6-29-7, which requires BDDS providers to have a plan to support an individual during an emergency or crisis.

By using an ongoing process of training, practice, and evaluation, ADEC strives to have a greater assurance that the ADEC personnel may know what is expected of them in an emergency and act accordingly.

Some of the key items taken into consideration in the development of the ADEC emergency preparedness training and exercise program for the designated facilities, specifically focusing on residential sites to be compliant with 483.475 and 441.725:

- Make "disaster preparedness" a part of new employee orientation and ensure that all employees receive the training – in new ADEC personnel orientation and annually - with content such as inclement weather, tornado, earthquakes, bomb threat, and active shooter.
- Provide refresher training on disaster preparedness for all ADEC personnel on a routine annual basis, recognizing that some will require more frequent training because of their specific roles and responsibilities.
- Exercise all portions of ADEC's Emergency Preparedness and Management Plan, in accordance with the training and exercise schedule described in the plan.
- Use a variety of training and exercise approaches, including discussion-based tabletop exercises and facility-based drills.
- Conduct exercises that may include representatives from the fire department, local law enforcement, the local health department, the emergency management office, the Red Cross, and any utility provider.
- Exercise all vendor and mutual aid agreements identified in the Emergency Preparedness and Management Plan to be sure of their continued viability, particularly evacuation transportation agreements, receiving facility agreements, and energy/generator agreements.
- Evaluate all training and exercise activities and use the information to make improvements to the Emergency Preparedness and Management Plan and training and exercise schedule – completed annually.

- Develop relationships with local emergency management office and health departments and participate in training and exercise opportunities they might sponsor.

SCOPE:

ADEC is committed to try all reasonable efforts to furnish services in a manner that protects the health, well-being, and safety of individuals served and employees. Actions will be taken in the best interest of individuals served as soon as possible during an emergency – whether a short-term or long-last pandemic event.

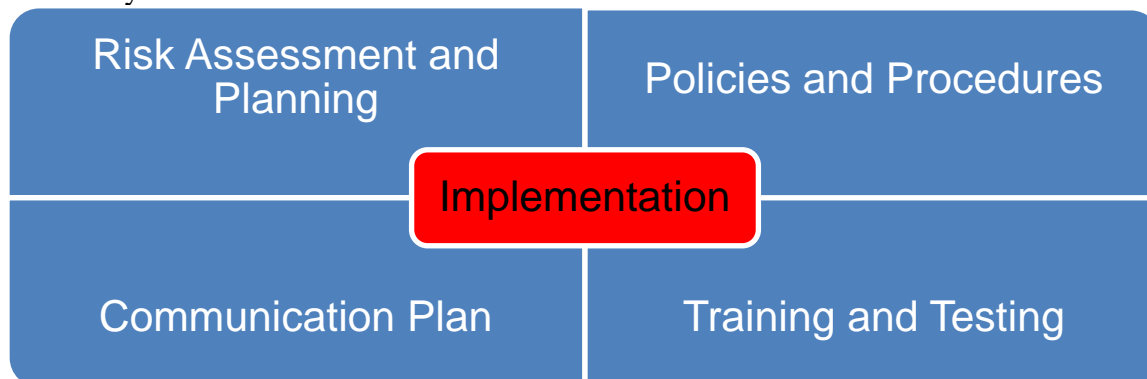
This scope of this procedure is to provide guidance, information, and tools, by utilizing an “ALL-HAZARDS” approach for relevant types of emergencies and disruptive events such as, but not limited to:

- Event of a natural disaster:
 - Tornados
 - Fires
 - Flooding
 - Winter - Ice / Snowstorm Inclement Weather
- Event of a Man-Made Disaster:
 - Power Outages
 - Chemical spills
 - Nuclear or biological terrorist attack
 - Septic and trash disposal
- Event of a Pandemic or Air-borne Virus:
 - Flu
 - Coronavirus – Reference Policies 12.0
- Disruptive Events that impact / result in:
 - Shelter in place
 - Staffing Crisis

In the event of a declared emergency areas(s), the appropriate executive vice president and/or directors of program areas, should contact their state survey agency and/or case management agency regarding their status and future. There are times when a public health emergency may result in consequences beyond ADEC’s control.

EMERGENCY PLAN – CORE ELEMENTS

There are **FIVE CORE** elements of the Emergency Preparedness Program. These elements are to be reviewed and updated annually or as needed.



The Emergency Preparedness and Management Plan, EPMP, identifies overall agency-wide procedures that cross programs where individuals served have facility based and/or residential services, especially 24x7 ADEC owned and/or support sites.

Throughout the document, procedures may be referred to specific ICF/IDD Supervised Group Living procedures that are established to specifically address Residential Site needs and are found in the supervised group living residential locations.

1. Risk Assessment and Planning

ADEC developed an Emergency Preparedness and Management Plan using all-hazards comprehensive approach, including planning, and identifying in advance essential functions and who is responsible in the event of a crisis. It is based on a risk assessment, with intentional focus on residential owned sites and 24x7 individual(s) rented sites in the Supervised Group Living and Supportive Living Programs. The risk assessment identifies capacities and capabilities, including staffing requirements and individual crisis emergency plans. Procedures are identified to address disruptive events, plans for evacuating or sheltering in place, or providing continuity of services in other ADEC locations. Other elements of this include succession planning, administrative and operational coverage, location identification and capabilities, vehicles, and personnel re-assignment. The emergency plan is reviewed, at a minimum, annually and as needed.

2. Policies and Procedures

ADEC policies and procedures include activities such as medical documentation, evacuation, or shelter in place. There are developed and implemented policies and procedures based on the emergency plan and risk assessment using the Enterprise Risk Management approach (*Policy 1.1.12 Risk Management Assessment Plan*) and defined Safety Manual(s) (*Policy 11.0 Safety Manual Procedures*). These policies and procedures include addressing subsistence needs, evacuation plans, procedures for sheltering in place, tracking individuals served and employees during an emergency.

3. Communication Plan

ADEC identified alternate means of communication, provide information to local authorities sharing medical information, and provide occupancy information and the ability to aid other facilities in the community. ADEC communication plan includes key names and contact information for ADEC personnel, other hospitals, emergency shelters, and appropriate state officials. In addition, ADEC is addressing primary and alternate means of communicating with ADEC personnel identified as well as how to contact local emergency plan officials and agencies, and methods to share medical records and patient information including general condition and location. Communication plans are to include staff, individuals, families, and teams.

Each specific emergency may vary in who and how communication is completed. However, the principal guidelines and timeline for communication is to include:

- ADEC Program Director, Manager, Program Manager, QIDP, Protective Services and if required, Beeper, - immediately with consideration of handling 911 is a priority as needed. This could include email, phone, or text on any ADEC authorized device. This should also address who will be notifying family and/or guardian.
- Individual Family and/or Guardian immediate or as reasonably possible given the event.
- With 24 hours, any required BDDS reporting or Case Management needs.
- If impacting a day service location during service hours, managers and leads should contact family/guardians, appropriate ADEC residential leads, and send home to all clients, written documentation, and notice, by end of day.

- In addition, ADEC communications may post on social media and website if relevant as timely as possible within 24 hours.

All communication should strive to use multiple tools – verbal, phone, website, social media, emails with goal to have awareness and confirmation within 24 hours so as to minimize impact on clients and employee impacted.

4. Training and Testing Program

ADEC has a requirement and utilizes Relias, a training learning software system, to assign, monitor, and track training requirements across all employees and programs. ADEC personnel is trained and tested through the use of drills, hands-on, and competency-based approaches. It is recognized that given the community based inclusive residential settings as well as day service facilities, a community-based full-scale exercise may not be feasible. Therefore, at ADEC facilities, there are regularly scheduled and documented emergency drills including evacuation of facilities to meet the individual, facility-based exercise.

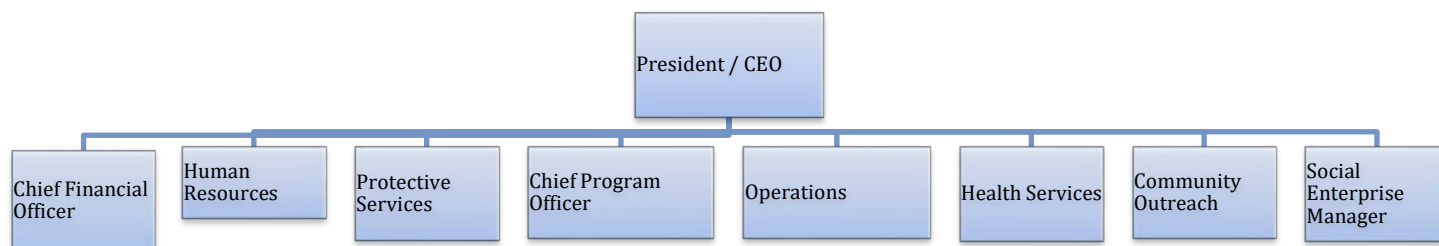
- *Table-Top exercises may be performed lead by a facilitator from either Red Cross or County Emergency Management. Table-top Exercise (TTX): A table-top exercise is a group discussion led by a facilitator, using narrated, clinically relevant emergency scenario, and a set of problem statements, directed messages, or prepared questions designed to challenge an emergency plan. It involves key personnel discussing simulated scenarios, including computer-simulated exercises, in an informal setting. TTXs can be used to assess plans, policies, and procedures.*

5. Emergency Management Implementation Steps

The determination to evoke the EP&MP is by the decision and direction of the President / CEO. An event of such severity, or extreme consequences, such as the disruptive events identified, and /or local and state officials declare a state of emergency may lead to having the EP&MP evoke.

If warranted, through calls and contact with the executive leadership team, primarily the appropriate executive vice president of operations, services, programming and the President and CEO may:

1. Immediately call an emergency meeting with members of the Executive Leadership Team meeting, if possible, at the Bristol Campus, to include:



2. Crisis management actions including the EP&MP as well as crisis management statements will be implemented,
3. The EP&MP steps may be implemented in their entirety or only those as needed, and
4. President/CEO will notify the Executive Committee, Board of Directors, via email or phone.

ADMINISTRATIVE

Leadership

Policy 1.2.9 Succession Plan Policy is the policy of the ADEC Board of Directors to be prepared for an unplanned emergency change in the President / Chief Executive Officer leadership of the organization. It is also the policy of

the board of directors to assess the current and future leadership needs of the organization to help insure the selection of a qualified and capable leader.

Operational coverage for executive leadership and program / service leadership is defined in *Policy 1.3.3 Administrative and Operational Responsibility* and addressed under Continuity of Operations in this policy. It is the policy of ADEC, with the leadership and direction of the President / Chief Executive Officer to assess the current and future leadership needs of the organization to help insure the selection of a qualified and capable leadership for programs.

The President/CEO of ADEC shall ensure that plans are in place for the overall administrative coverage and operational performance of the organization in the event of his/her absence, short or long term, for any reasons, as well as a defined leadership for the organization. Each direct report to the President / CEO, the executive leadership Team, is responsible for the overall execution of service deliveries, compliance with all regulatory requirements, adherence to ADEC policies, implementation of all human resource requirements and at a minimum, the essential functions identified in policy.

Continuity of Operations

Continuity of Operations is a process of identifying, creating, testing, implementing systems of prevention and recovery to deal with potential threats to ADEC's ability to provide services and maintain the health, well-being, and safety of individuals served and employees.

ADEC acknowledges when the President of the United States declares a disaster or emergency under the Stafford Act or National Emergencies Act and the HHS Secretary declares a public health emergency under Section 319 of the Public Health Service Act, and under 42 CFR 483.475 (b)(7) and when/if CMS approves Medicaid Section 1135 Waivers – there is a likelihood that relocation at the time of a disaster may alter standards of care.

The agency may form a deliberate partnership with like agencies as meeting the need of those within our care is top priority. In order to request the waiver, the appropriate Executive Vice President will contact the Indiana State Department of Health by phone at 1-800-433-0746.

Enterprise Risk Management

ADEC has established several plans to identify, measure and manage risk that may affect the agency. These plans cross over different functional areas in the agency because different types of risks are present to the entire enterprise. A key element of this is the Enterprise Risk Management, *Policy 1.1.12 Risk Management Assessment Plan*, which now recognizes the situation of pandemics. Management will annually review agency insurance policies to evaluate the adequacy and cost effectiveness of risk coverage.

Enterprise Risk Management (ERM)

ERM Provides a Framework to:

- Identify Risks
- Measure Their Likelihood of Occurrence
- Manage the Impact of Potential Risks

The Scope of ERM is Broad, Addressing Risks from Across the Enterprise

- Board of Directors
- Financial Controls
- Systems Security
- Human Capital
- Operations
- Compliance

Agency Wide Emergency Preparedness Plan

- Assures the Health, Safety and Well-Being of Individuals
- Utilizes Appropriate Emergency Services
- All-Hazard Emergency Situations Identified
- Pandemics by W.H.O.

This policy is designed to help identify areas of risk and minimize risk exposure by having policies, procedures, and practices in place to ensure that our individuals served, employees, assets, functions, objectives, operations, or members of the public are not adversely impacted by risks that threaten ADEC.

Risk Management Assessment Plan is considered part of strategic, operational, compliance, financial and reputational responsibilities and is integrated into the strategic and business planning process.

Enterprise Risk Management (ERM) provides a framework to:

- Identify Risks,
- Measure Their Likelihood of Occurrence, and
- Manage the Impact of Potential Risks.

The scope of ERM is broad and brings together risks from across the agency enterprise ranging from Board of Directors, financial controls, systems security, human capital, operations, and compliance.

Enterprise Risk Management - Pillars of Governance

Insurance	Financial	Fiduciary Responsibility	Technological	Human Capital	Strategic/ Operational/ Reputational	External Compliance	Board of Directors
Commercial	Reporting (M)	Health Care Mgmt (M)	Data Privacy (A)	Skill Alignment (O)	EPA at AI (O)	Admin & Governance	By-Laws
Property, Casualty, D&O, and Cyber-Security (A)	Budgeting Including Capital Needs and Funding Plans (A)	Benefit Plans (A)	Security (O)	Pre-Employment & Annual Screening (O)	OSHA (O)	Policy Including HIPAA (A)	Code of Conduct
		ACA Compliance (O)	Disaster Recovery (A)	Turnover (M)	Ability to Execute	Accreditation/CARF (3)	Conflicts of Interest
	Audits (A)	Retirement Plan	Redundancy (A)	Employee/Client	Key Strategies (A)	Valid through 1/31/2023	Overall Governance
	Asset Protection (O)	Investment/Fee Review	Systems Plan (A)	Safety (A)	Reliance on Outside Providers (A)	Group Home Licensures (A)	Committee Participation
	Internal Controls (O)	Compliance Testing	Response to Pandemic	Policies (A)	Public Perception (M)	State Board of Health (A)	Pandemic Response
Workers Compensation	Pandemic Response	403B and 5500 (A)		Conflict of Interest (A)	Donor Management (M)	Indiana Disability Rights for 14C (as requested)	
Statutory and Employer Liability Coverage (A)				TB Screen (A)	Training (O)	CMS/FSSA policy (O)	
				Check Driver's Record Upon Hire (A)	Emergency Preparedness Plan - Policy 10.1	Title VI - Federal Transit (O)	
				EEOC Compliance (O)	Safety Man. Policy 11.0	DOL Audits (as requested)	
				Pandemic Response	Pandemic Response	Waiver Provider Enrollment	
						Validation (3)	
						Valid through 1/31/2023	
						Pandemic Response	

Review Frequency: O - Ongoing M - Monthly A - Annually 3 - Completed Every Three Years

ADEC Locations

Policy 1.3.1 Identification of Service Locations lists the physical location of the service locations in Elkhart County and St. Joseph County with notation of source of utilities and alternative power.

The following is the list of ADEC facilities, leased or owned; are in the state of Indiana; and are in either Elkhart County or St. Joseph County:

Non-Residential and/or Administrative Facilities

Owned:

- Bristol Campus Administration Building (Building 1) - 19670 State Road 120, Bristol, IN – Elkhart County
 - City water and sewer. Backup generator.
 - Facility does have public access associated with Gaining Grounds Conference Center and Coffee Shop during regular ADEC hours.
- Bristol Campus Day Services (Building 2) - 19670 State Road 120, Bristol, IN – Elkhart County
 - City water and sewer. Shares generator with Building 1.
- ADEC Industries - 2700 Industrial Parkway, Elkhart, IN – Elkhart County

- City water and sewer. No generator.
- St. Joseph Day Services – 2010 E Farnworth Drive, South Bend, IN – St. Joseph County – City water and sewer. No generator *(New May 10, 2022)*

Leased:

- Elkhart Day Services and Family Services (The Plaza) - 319 South Main Street, Elkhart, IN – Elkhart County
 - City water and sewer. No generator.
- Goshen Day Services (The Shoots Building) - 114 East Lincoln, Goshen, IN – Elkhart County
 - City water and sewer. No generator.
 - Facility does have public access associated with Gaining Grounds Coffee Shop during regular ADEC hours.
- Middlebury Day Services - 801 Wayne Street, Middlebury, IN – Elkhart County
 - City water and sewer. No generator.
- Goshen City Church of the Brethren - 203 N 5th Street, Goshen, IN – Elkhart County
 - City water and sewer. No generator.

Residential Facilities – Owned

These are considered private residential ‘homes’ and are not open to the public.

Supervised Group Living - ICF Settings:

- Ashley Court Group Home - 1823 Ashley Court, Goshen, IN – Elkhart County
 - City water and sewer. No generator.
- Village Women’s Group Home - 807 Mottville Road, Bristol, IN – Elkhart County
 - City sewer, private well. Has generator.
- Foster Group Home - 226 E. Foster, Elkhart, IN – Elkhart County
 - City water and sewer. Has generator.
- Goshen Men's Group Home - 1717 Longwood Court, Goshen IN – Elkhart County
 - City water and sewer. Has generator.
- Hawthorne Group Home - 403 Hawthorne, Goshen, IN – Elkhart County
 - City water and sewer. Has generator.
- Middlebury Group Home - 603 Highland Drive, Middlebury, IN – Elkhart County
 - City water and sewer. No generator.
- Parkside Group Home - 59796 Parkside Drive, Elkhart, IN – Elkhart County
 - Private well and septic. Has generator (Planned installation in Fiscal Year 2022).
- Terrace Park Group Home - 62836 Planeville Avenue, Goshen, IN – Elkhart County
 - Private well and septic. No generator.
- Village Men's Group Home - 19816-3 S.R. 120, Bristol, IN – Elkhart County
 - City water and sewer. No generator.
- Bridlewood Group Home - 58808 St. Mary’s Lane, Goshen, IN – Elkhart County
 - Private well and septic. Has generator.
- Heather Lake Group Home - 10125 Heather Lake, Osceola, IN 46561 – St. Joseph County
 - Private well and septic. Has generator.
- Lutz Group Home - 6803 Lutz Drive, South Bend, IN 46614 – St. Joseph County
 - City water and sewer. Has generator.
- Mackey Group Home - 6712 Mackey Court, South Bend, IN 46614 – St. Joseph County
 - City water and sewer. Has generator.

- Tara Group Home - 52035 Tara Drive, South Bend, IN 46628 – St. Joseph County
- Private well and septic. Has generator.

Supportive Living – HCBS Settings:

- Bristol Campus Supportive Living Rental Duplex (Building 3) - 19816 State Road 120, Bristol, IN – Elkhart County
- City water and sewer. No generator.
- Kauffman – 1510 College Ave., Goshen, IN. 46526 – Elkhart County
- Harmony – 1520 College Ave., Goshen, IN. 46526 – Elkhart County
- Hope – 1520 College Ave., Goshen, IN. 46526 – Elkhart County
- Faith – 1404 S. 14th Street, Goshen, IN. 46526 – Elkhart County
- Omega – 1610 College Ave., Goshen, IN. 46526 – Elkhart County
- Cornerstone East – 1518 College Ave., Goshen, IN. 46526 – Elkhart County
- Cornerstone West – 1518 College Ave., Goshen, IN. 46526 – Elkhart County
- 1514 College Ave – 1514 College Ave., Goshen, IN. 46526 – Elkhart County
- Vacant Lot #6 – College Manor – Elkhart County
- Vacant Lot #7 – College Manor – Elkhart County

Emergency Shelter list by county – IN.gov

The state of Indiana provides a list, by county, of all official emergency shelters, which are non-hospital based:

County	Shelter	Address	Shelter Type	Phone Number
Elkhart	Faith Mission of Elkhart	801 Benham Avenue Elkhart, Indiana	Emergency shelter & transitional housing for men, women, and families	574-293-3406; 574-522-65552
	Elkhart County Women's Shelter	PO Box #2684; Elkhart, Indiana	Domestic violence shelter	574-294-1811
	Goshen Interfaith Hospitality Network	105 South 3 rd Street; Goshen, Indiana	Emergency shelter for homeless families	574-534-2300
St. Joseph	AIDS Ministries/AIDS Assist of North Indiana, Inc.	PO Box #11582; South Bend, Indiana	Transitional housing for men, women, and families	574-234-2870
	Dismas of South Bend	521 S. St. Joseph St; South Bend	Transitional housing for prisoner reentry	574-233-8522
	Dolly's House	10679 Ireland Road; Osceola, Indiana	Emergency shelter for men, women, and families	574-674-9462
	Hope Ministries	532 S. Michigan St.; South Bend	Emergency shelter for men, women, and families	574-288-4842
	Life Treatment Centers, Inc.	1402 S. Michigan St.; South Bend	Emergency shelter and transitional house for men and women with substance abuse issues	574-233-5433

	The Center for the Homeless	813 S. Michigan St; South Bend	Emergency and transitional shelter for men, women, and families	574-282-8700
	Youth Service Bureau of St. Joseph County, Inc.	1322 Lincolnway East; South Bend	Youth Shelter	574-235-9231
	YWCA Women's Shelter	St. Joseph; South Bend	Domestic violence shelter	574-233-9491

Red Cross

Northern Indiana - Serving Elkhart, Fulton, Kosciusko, Marshall, Pulaski, St. Joseph, and Starke Counties
The mission of the American Red Cross Indiana Region Chapter is a non-profit humanitarian organization that provides disaster relief and helps people during disasters.

Address:

220 W. Colfax Ave., Suite 510
South Bend, Indiana 46601
Phone (574) 234-0191

Executive:

Kristin Marlow-Kellerman, Interim Executive Director
(574) 234-0191 (219) 384-0926 (mobile)

Chad Priest, CEO Indiana Region
317-684-4339 chad.priest@redcross.org

ADEC Vehicles

The VP of Operations for Maintenance and Transportation maintains a list of all agencies owned or leased vehicles. The fleet of vehicles is noted with:

- By location (Cost Center)
- Type of Vehicle, noting if it is a lift vehicle
- Description
- Vehicle Identification Number
- License/Vehicle Plate number
- Individuals served Capacity, noting if it has well chair capability

The purpose Policy 7.1.1 *Transportation Procedures* is to provide ADEC transportation personnel with ready access to transportation procedures and guidelines, resulting in a uniform, safe and effective service delivery system for individuals served receiving transportation services.

If emergency protocol is invoked, vehicles are readily identified to be deployed to other facilities. In addition, ADEC has on payroll Transportation Drivers, all who have CDL's, which will be used to transport individuals served if their normal transportation route is cancelled. Human Resources tracks CDL renewal dates.

All ADEC employees are required to have a valid driver's license and vehicle insurance. This is identified in the Personnel Manual available to all employees on the secured ADEC website, www.adecinc.com. In addition, all new hires are provided a copy of the manual.

“All applicants must have a valid driver's license, proof of auto insurance, high school diploma or GED, be at least eighteen and be able to lift 50-60 lbs. on a regular basis. ADEC is not permitted to employ anyone who is not a United States citizen unless that person has an appropriate VISA or other documentation that allows him or her to legally work in the United States. Three references, employment verification and applicants' driving record may be conducted by Human Resources. Applicants' names will also be checked on the State Nurse Registry, Sexual Assault Registry and Welfare Fraud Registry. Applicants are required to pass a pre-employment drug screen. “

Other policies that address transportation and associate risk include:

- *Policy 2.1.4 Employees Transporting Person served in Personal Vehicle*
- *Policy 2.1.11 Verification of Background and Credentials of Employees, Volunteers and Consultants*
- *Policy 2.1.16 Alcohol and Drug Testing Policy for Commercial Driver's License*
- *Policy 2.1.21 Screening Applicants for Drugs*
- *Policy 2.1.22 Substance Abuse Policy*

Billing - Notation

During an Emergency Management event, the appropriate financial recording and documentation of the events may be categorized as catastrophic/disaster related (CR) to ensure that a service provided and recorded on any Medicaid reimbursement is disaster related. If all the services on the claim, or billing, are disaster related, ADEC should use the disaster related (DR) condition code to indicate that the entire claim is disaster related.

Disaster Recovery

It is the policy of ADEC to comply with all rules and regulations of the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH). These Privacy Policies are intended to comply with the requirements of the federal Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), regulations under HIPAA, and any applicable State law that is more stringent than the HIPAA requirements. They are designed to comply with the standards, **implementation specifications, and other requirements of the HIPAA security, breach notification, and privacy** regulations at 45 CFR Part 160 and Part 164. The two ADEC policies are: *Policy 9.1 Policies for Protection of the Privacy and Security of Protected Health Information and Policy 9.2 Policies for the Security of Electronic Protected Health Information.*

These policies are designed to reasonably ensure the confidentiality, integrity, and availability of all electronic protected health information that ADEC creates, receives, maintains, or transmits; protect against any reasonably anticipated threats or hazards to the security or integrity of such information; protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required under the HIPAA Privacy Rule and ADEC's Privacy Policies; and to ensure compliance with the HIPAA Security regulation by ADEC's workforce.

In all instances, these Privacy Policies shall be interpreted and construed consistent with the requirements of HIPAA, its regulations, and any more stringent State law. In the event of any conflict between a provision of these Privacy Policies and a requirement of HIPAA, a regulation under HIPAA, or a more stringent State law that HIPAA, HIPAA regulation, or State law requirement shall control.

In addition to policies and procedures, ADEC maintains a comprehensive Disaster Recovery and Business Continuity Plan. This plan is reviewed annually and is maintained by the Manager of Information Technology Services. The document is secured on the L: Drive as well as in hardcopy form. Contents include:

- Objectives of ADEC Disaster Recovery Plan,
- Assumptions of the ADEC Disaster Recovery Plan,
- Roles, Responsibilities, and Authority,
- Operations Command Center,
- Business Function Impact,
- Non-Critical Systems,
- Critical Systems,
- Critical Systems Plan,
- Criteria for Invoking the Disaster Recovery Plan,
- Procedures for Recovering Lost or Damaged Data,
- Criteria for Returning to Normal Operations,
- Plan Maintenance,
- Maintenance Cycle and Triggers,
- Plan Distribution,
- Server Details, and
- DNS Host and MX Record.

Information Technology Emergency Contact Numbers

911	Fire, Police, Ambulance
574 848-7451	19670 State Road 120, Bristol, IN 46507
574 295-3161	ADEC Industries, 2700 Industrial Parkway, Elkhart IN 46516
574 536-0744	Lisa Snyder, IT Manager
574 536-4858	Evan Hoover, IT Specialist
574 238-3516	Tim Donlin, VP Finance
574-742-1417	Chris Kingsley, President/CEO
574 536-0744	IT Support Cell Phone

AGENCY RESOURCES

Functional List of Critical Resources

Each Function area of responsibility must have at a minimum:

- Identified back-up / coverage,
- List of critical agency level activities (e.g., payroll),
- Access to critical individual served records (e.g., medical, contacts),
- Phone numbers – office and cell phone,
- Action plan to invoke in “worst case scenario” or with a significant ADEC personnel staffing crisis.

The following are the identified leadership critical roles

President / CEO

- (1) VP Finance - or
- (2) VP Chief Program Officer – or
- (3) VP Human Resources

VP Finance

- Controller

VP Human Resources

- Director HR

VP Chief Program Officer

- (1) Director Group Homes - or
- (2) Director Supportive Living – or
- (3) Director Day Services

VP Operations

- Manager, Transportation

VP Protective Services

- Guardianship

Essential Business Functions

ADEC Inc. provides services to individuals that are vulnerable and require with varying degrees of support and coverage some level of daily support and daily personal care. There are functions or activities that must continue always, especially in the residential sites, even during and after an emergency.

These functions and activities are a subset of ADEC's normal operating functions. In determining what are the essential business functions, the Executive Leadership team discussed:

- Mission critical: Services necessary to achieving ADEC Inc's organization's mission,
- Business critical: Functions that the agency relies on to operate successfully, and
- Customer critical: Services that the individuals served depend on.

The identified essential functions may not operate at 100% during the emergency or the recovery time after. Many services may be performed at altered standards of care and delivery. For each of the essential function areas, the Executive Leader of the area is responsible to identify the resources required to maintain the critical functions:

- Payroll
 - Time and Attendance – may be manual if electricity or internet is unavailable
- Accounting Systems – with primary support on billing of services and access to financial banking accounts/systems
 - Supplier and vendor payments is a secondary function
- Communication – externally to notify individuals served, guardians, community, and employees
- Insurance Coverage – Agency level commercial and operational

- Transportation – access to all ADEC vehicles and on-call for transportation department ADEC personnel
- Disaster Recovery Plan for Information Technology
- Maintenance ADEC personnel on-call for residential site needs
- Guardianship – for notification in disruption or changes in services and/or locations
- Residential operations – inclusive of both Supervised Group Living and Supportive Living Programs
- Medication administration and disbursement and documentation
 - May be manual if electricity or internet is unavailable to record in the EMAR system

Additional detail is available in the safety manuals located in the Supervised Group Living and Supportive Living residential settings.

Personnel Reassignment

It is the goal of ADEC to identify and re-assign all necessary ADEC personnel in case of a wide-spread emergency, especially those resulting in the closure of non-residential facilities. ADEC personnel will be notified in person, by phone or text, or e-mail, for their need to assist in an emergency. In those events where facility-based, day service, locations are not going to be open, the trained support ADEC personnel, direct support professionals, at each of those locations may be given the opportunity to meet the person-centered needs at the residential locations.

- This will be set up at each of the day service locations, with ADEC personnel trained on person served specific requirements, with a roster (list) of employees opting-in for reassignment. All new ADEC personnel, and updated as needed, will be given an opportunity to be considered for this work.
- The Program / Service Leadership is responsible for maintaining the list of employees as well as a “call-tree” to ensure ability to contact employees.

Non-residential administrative ADEC personnel and other ADEC personnel in non-direct care roles may also be contacted to perform non-medical or care activities in the residential locations, such as house cleaning, cooking, entertain/engagement with individuals served.

Any volunteers used by ADEC must have completed a background check and training. Volunteers, if used, may be asked to complete non-medical or non-personal care activities.

In addition, the following actions are also to be implemented:

- ✓ The appropriate Executive Vice President is responsible to ensure a list of Day Services ADEC personnel are able and willing to re-assign to Supervised Group Living homes and identified Supportive Living locations;
- ✓ The appropriate Executive Vice President is responsible to ensure a list of Identify ADEC personnel needs at each of the residential sites, supervised group living and 24x7 supportive living locations;
- ✓ The Vice President Operations, Maintenance and Transportation, is responsible to ensure list of on-call and readily available transportation ADEC personnel and maintenance ADEC personnel; and
- ✓ The Vice President of Finance is responsible to ensure all critical financial (such as payroll, receivables, and payables) and I/T infrastructure are operational.

Staff Capacity and Monitoring

The Director of each program, with respective Executive Leadership, is responsible for deployment of staff and monitoring of staff capacity.

Staffing changes may be due to short-term temporary staff adjustment due to disruptive events, such as an ice-storm, or long-term staff adjustments. Long-term staff adjustments are set and approved by the Executive VP Roles and President / CEO and would include personnel reassignment.

ADEC personnel manual addresses tactical 'daily' staffing issues such as staff calling off due to illness. For residential programs, this is handled through on-call and addressed at weekly Beeper Meetings. ICF and HCBS field staffing personnel is monitored and reviewed weekly at a program level and discussed weekly. Overall at an agency level, VP HR provides an Open Hours / Hiring needs report to President/CEO and VP's, with a monthly report to the Executive Team and Board of Directors.

Daily and Weekly Monitoring

ADEC monitors residential staffing weekly, through Schedulers, that separately schedule, monitor and shift personnel to support either ICF settings or HCBS setting and services. Schedulers report directly to the Program Director. ADEC monitors staffing at day service facilities using My MITC, with the responsibility of the manager and the Program Director.

Staffing is also visible through time and attendance tool – My MITC, with direct access by Executive Leadership.

Direct Support Professionals, DSP's, are encouraged to cross-train at multiple locations to help facility ease of short term and longer-term personnel reassignment.

Capacity Monitoring

Human Resources calculates and reports 'open hours' weekly and monthly. The Open Hours Report, included in the Monthly Program / Service Leadership, with visibility up to Board of Directors, reports total full-time equivalent hiring needs by program area.

In addition, overtime is reported monthly and monitored weekly to program leadership.

Short-Term Personnel Shifts

In an event of a short-term need, personnel reassignment is implemented with trained personnel:

1. Day Services – shift DSPs between locations
2. Residential – ICF and/or HCBS – shift DSPs between locations and programs (Day Service DSP's will be assigned to work in a residential setting). This option is also available to any other ADEC staff that is trained on individual support plans (e.g., community employment, administrative staff can pick-up shifts).

In all cases, prior to scheduling, the Scheduler confirms staff is trained on client specific ICP's and related health or risk plans. The staff is required to clock into the new cost center for that shift(s).

Long-Term Personnel Shifts

In an event of a long-term need, personnel reassignment is implemented with trained personnel as outlined in the Emergency Preparedness and Management Plan.

1. If deemed a 'Pandemic' – procedures to follow the pandemic protocol. Such as Policies 12.0 – Coronavirus Pandemic.

2. Assessment of closure of Day Service facilities and shift day service facility personnel to work in residential settings or any open Day Service Facility
3. Assess temporary suspension of community-based programs such as therapies or community employment and shift to either Appendix K flexibilities or re-assignment to residential settings.
3. Residential – ICF and/or HCBS – shift DSPs between locations and programs (Day Service DSP's will be assigned to work in a residential setting). This option is also available to any other ADEC staff that is trained on individual support plans (e.g., community employment, administrative staff can pick-up shifts).

In all cases, prior to scheduling, the Scheduler confirms staff is trained on client specific ICP's and related health or risk plans. The staff is required to clock into the new cost center for that shift(s).

OPERATIONAL TIERS AND RESPONSE

ADEC'S actions and responses to an emergency will depend upon the severity and may factors – whether short-term natural or man-made event, or longer-term pandemic event, or specific staffing levels.

A natural or man-made disruptive event may have impacts on staffing and continuity of services. Pandemic actions and responses are detailed in specific Pandemic protocol and may include some of the operational responses identified below as guidance.

An important element to the ability to maintain continuity of operations and health, well-being and safety of individuals served, and employees is level of staff as measured by on-board full-time equivalents and full-time equivalent Open Hours, as calculated by Human Resources

Level	Characterized by:	ADEC Actions that may be considered
1 – 15% Open Hours	<ul style="list-style-type: none"> ▪ Staffing Levels and Open Hours Manageable and Acceptable ▪ Base line operations – no disruptive events, pandemic or staffing crisis ▪ All service deliverables functioning 	<ul style="list-style-type: none"> ▪ Business and Services have continuity of operations ▪ Ongoing management and oversight ▪ Regular weekly and monthly monitoring and reporting ▪ Maintain required levels of critical materials and safety equipment (e.g., PPE, food supplies)
2 – 25% Open Hours	<ul style="list-style-type: none"> ▪ Reduction in non-twenty-four services ▪ Higher than normal overtime ▪ Some single shift coverage 	<ul style="list-style-type: none"> ▪ HR policies on absenteeism are in effect ▪ Preparations for suspension of non-residential services ▪ Pick-up Shift prioritized for residential ▪ Monitoring excess 60 hours / week ▪ Review possible cancellation or no further approval of vacation or personal time ▪ Consider implementation of Appendix K or other state-approved flexibilities as needed. ▪ Limit visitations and community events ▪ Facilitate virtual meetings
3 – 40 % Open Hours	<ul style="list-style-type: none"> ▪ Staffing shortfalls have impacted residential services ▪ Impact to several service deliverables / sites 	<ul style="list-style-type: none"> ▪ Prioritization of 24-hour residential settings ▪ Retrain on agency, sites, and individual emergency plans ▪ Implement personnel reassignment ▪ Discontinue selected non-residential services

<ul style="list-style-type: none"> Local or state emergency response may be impacted 	<ul style="list-style-type: none"> Consolidate some day service locations Relocate individuals on a case-by-case basis
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For both Level 2 and Level 3, program leadership will consider the needs and preferences of the individuals being served. This may include a reduction in services and/or relocation information in a format that specifies when reduction in services/relocations may occur, how individuals and families will be communicated with during the temporary reduction in services and relocation, and when the individual can expect to return to their home or normal services.

For Level 3, where needed, enact individual-specific emergency plan for non-critical and non-24-hour services. In cases of long-term natural disasters or pandemic, follow state or local regulatory and mandatory requirements and specific detail pandemic protocols. In addition, there may be mandated restrictions and guidance by government officials which may be continually updated.

COMMUNICATION

ADEC Messaging to Employees, Individuals and Families

ADEC puts a high priority on principles of care for residential individuals served who may be impacted by a disruptive event, as well as the direct staff and support.

During an emergency, specific to residential locations in supervised group living and 24x7 supportive living, ADEC personnel will maintain an individual's "Red Binder" that includes all pertinent medical information about the individual. This binder is to stay with everyone during any relocation.

If a group home needs to relocate, the relocation procedure will be implemented, **immediately**. If the relocation is larger than a single group home, a system will be implemented where individuals served will remain with their group home ADEC personnel and peers, and the appropriate Executive Vice President, and the Director of Group Homes and Director of Supportive Living, will maintain a list of where each individual is staying, and who the ADEC personnel are assigned to them.

- Within 24 hours, the Executive Vice President and the Directors are responsible for making sure that ADEC personnel is in place and there is coordinated communication with internal and external sources. An ADEC personnel will be assigned to maintaining order with ADEC personnel and persons served in each location. A notebook, or similar form of documentation such as a tablet or computer, will document the name of each person relocated and the ADEC personnel assigned to them. Any time an individual move to another area, the notebook, or documentation, will be updated to reflect where they went and who is responsible for them.

If an ADEC facility-based program, including Day Services, Family Services and ADEC Industries, are forced to relocate, the first line of intervention will be calling the individual served residential provider, family member or guardian so that they may go home. All others may be given a wrist bracelet that has their name written on it, or some other distinguishing form of identification, and what program they attend.

- Within 24 hours, the Director of Day Services will insure that at each facility-based operation, an assigned ADEC personnel member is identified to make sure that the notebook, or equivalent documentation, in each area is properly maintained including if the individual left with a family/friend/guardian and are no longer in the direct care / responsibility of ADEC.

For any of the above, the President / CEO and the VP Protective Services are to be notified immediately, or as quickly reasonable possible following all 911 and Beeper / Nursing Protocol.

Timeline and Expectations on Communicating

Each specific emergency may vary in who and how communication is completed. However, the principal guidelines and timeline for communication is to include:

- ADEC Program Director, Manager, Program Manager, QIDP, Protective Services and if required, Beeper, - immediately with consideration of first handling 911 as needed. This could include email, phone, or text on any ADEC authorized device. This should also address who will be notifying family and/or guardian.
- Individual Family and/or Guardian immediate or as reasonably possible given the event.
- With 24 hours, any required BDDS reporting
- If impacting a day service location during service hours, managers and leads should contact family/guardians, appropriate ADEC residential leads, and send home to all clients, written documentation, and notice, by end of day.
- In addition, ADEC communications may post on social media and website if relevant as timely as possible within 24 hours.

All communication should strive to use multiple tools – verbal, phone, website, social media, emails with goal to have awareness and confirmation within 24 hours so as to minimize impact on clients and employee impacted.

In helping facility orderliness and reduce the uncertainty and fear, ADEC's principal approach includes:

- Encourage both ADEC personnel and the individuals served to talk about expectations, anger, and/or disappointment;
- Work to develop a level of trust;
- Present an optimistic, favorable attitude about the changes in normal activities, potential relocation, and temporary actions;
- Anticipate that anxiety will occur;
- Do not argue with the individual served;
- Do not give orders;
- Do not take the individual served behavior personally; use praise liberally;
- Be courteous and kind;
- Include the individual served in assessing problems;
- Encourage family and guardian participation; and
- Ensure ADEC personnel in that are unfamiliar to the individuals served introduce themselves.

In addition, all employees who have direct support care responsibilities and/or work primarily with individuals served are required to complete training annually on the Mandt system. The Mandt System is a training program that has three major components: Relational, Conceptual, and Technical:

- Relational Skills: focuses on teaching relationship, communication, and conflict resolution skills.
- Conceptual Skills: focuses on teaching positive behavior supports, liability and legal issues, and medical risks of restraint.
- Technical Skills: training in providing physical assistance, separation, evasion, and restraint techniques

The focus of the Mandt system is learning how to reduce or eliminate violence in the workplace by “supporting people, not just their behaviors.” The Mandt system revolves around building the positive relationships of people in an organization to create an overall healthy environment. The main goal is to teach ADEC personnel how to effectively manage a situation by regulating their emotions, response, and behaviors to positively interact with individuals served.

County / State Emergency Management

ADEC tries to work collaboratively with local officials to keep aware of emergency management in the county where residential group home, residential supportive living, facility-based day service, work facility and administrative offices are located. In the event of an emergency, the facility will directly notify 911. We will contact the Red Cross and notify the Emergency Management Department as required. The facility will notify the Indiana State Department of Health during emergencies that require full or partial evacuation at 317-460-7287 and will report such an evacuation on the Department of Health portal. The facility will also notify the Bureau of Developmental Disabilities Services: via e-mail and phone at the regional office. In case of emergency, the First Responder or Unit Commander will be provided with a list of specific needs of individuals in each location.

Bureau of Developmental Disabilities Services

401 East Colfax Ave., Suite 270 South Bend, Indiana 46617.

Phone: 574-232-1412

E-mail: BDDSincentreports@fssa.in.gov

Elkhart City Emergency Management Department

Travis Snider, Sergeant, Department Head, 611 South 5th Street, Elkhart Indiana, 46515. Phone: 574-970-7996
The mission of the Elkhart Emergency Management Department is to support the Police and Fire Department in non-enforcement services and to aid other City Departments and civic groups throughout the Elkhart community.

The Emergency Management Department provides the following services:

- Assistance in disaster response and during severe weather,
- Assistance in traffic control for the Police and Fire Departments,
- Assistance the Police Department in patrolling specific areas of the city,
- Assistance at City events such as the Air Show, the July fireworks, and events at the Lerner Theater,
- Work with Elkhart County Emergency Management, and

Work with various civic groups.

Elkhart County, Indiana Emergency Management

The mission is to reduce the loss of life and property and protect our environment from all hazards by leading and supporting the County in a comprehensive, risk-based emergency management program of mitigation, preparedness, response, and recovery.

Address: 26861 CR 26; Elkhart IN 46517

Director: Jennifer Tobey

Phone: 574-891-2238

Email: jtobey@elkhartcounty.com

Hours: Monday 8:00am – 5:00pm; Tuesday – Friday 8:00am – 4:00pm

St. Joseph County, Emergency Management

It is the mission of the St. Joseph County Emergency Management Agency to coordinate all emergency management activities and to protect the people, property, economy and environment of St. Joseph County and its political subdivisions.

Address: 1222 South Michigan Street
South Bend, Indiana 46601
Phone: 574-235-9378
Director: John Antonucci

Indiana Protection and Advocacy Services

Indiana Disability Rights (IDR) is the service arm of the Indiana Protection and Advocacy Services (IPAS) Commission. Our mission and vision guide our work every day.

Mission of IDR is "...To protect and promote the rights of individuals with disabilities through empowerment and advocacy."

The Vision of IDR is "...To live in a society where persons with disabilities are free from abuse and neglect, are free to be effective self-advocates, and are free of discrimination; allowing for full inclusion in society."

Address: 4701 North Keystone Avenue, Suite 22
Indianapolis, Indiana 46205
Phone: 317-722-5555

Policy 1.8.1 Media Contacts

The policy notes that all contacts with media - newspapers, radio, television, and social media - regarding ADEC and its programs/services must be coordinated and implemented by the Community Outreach. The primary media contacts are:

- WNDU 574-284-3011
- WSBT 574-247-7386
- WFRN 1-800-378-0468
- ABC57 email news57@abc57.com

In addition, ADEC will provide notifications and updates on

- ADEC website www.adecinc.com
- ADEC social media Facebook

Awareness of the ADEC Emergency Preparedness and Management Plan is made through posting on the ADEC website www.adecinc.com. The statement on the website is:

"ADEC is an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IDD) and complies with applicable Federal, State, and local emergency preparedness requirements to ensure the health, safety and well-being of individuals served and employees. ADEC maintains an emergency preparedness program that is reviewed annually. "

It is recognized that in the event of a massive loss of internet availability and/or access or cell phone availability, program leaders and other supervisory personnel may be required to drive to contact employees or use whatever other available means to communicate and reach employees and individuals served and guardians.

TESTING AND TRAINING

When the leadership team determines that an emergency is imminent, all staff will receive refresher training on topics needed to work in residential programs.

On—Going Training

All ADEC employees are required to have annual documented training – assigned, tracked, and monitored through Relias – on essential emergency drills such as those identified as All Hazards Approach – Disruptive Events.

The ADEC Safety Committee, is responsible to organize and/or coordinate safety education for ADEC personnel employed in the non-residential facilities. This education should include but is not limited to:

- New ADEC personnel orientation to the agency,
- First Aid and CPR certification for selected ADEC personnel, primarily direct support professionals,
- Training for back-up Building Administrator(s), identified for each of the non-residential facilities,
- Designated persons assigned specific responsibilities during evacuations and drills,
- Ensure annual safety training is conducted,
- Other safety education and awareness campaigns, and
- Persons served receive education designed to reduce identified physical risks.

This committee will work in cooperation with managers and ADEC personnel and is tracked via Relias. This committee also collaborate works with the residential site leaders – VP, Directors, QIDP's and managers, to ensure that agency wide required training is assigned, tracked, and completed through use of Relias. In addition, information is shared to be included in the appropriate residential on-site safety manuals.

Residential Specific

At the Residential locations, Supervised Group Living (ICF Settings) and Supportive Living (HCBS Settings)

1. All emergency procedures that apply to residential group home sites and supportive living sites will be reviewed with ADEC personnel upon beginning employment and thereafter on an annual basis. This training will be documented and retained in the Relias Training Software system.
2. Fire drills will be held monthly on all shifts at each residential site and tornado, severe weather, and other emergency drills will be held quarterly in all ADEC residential ICF sites with a drill on each shift at least once per quarter.
3. People receiving services will be trained according to the emergency procedures for each situation at each drill, as well as reviewed on a regular basis, both verbally and with individual house ADEC personnel, as needed. These emergency drills will be documented and retained in the Relias Training Software system. by the Program Director/QMRP, or other designee, and will be retained by the Program Director/QIDP at the residential location completing the emergency drill.

INDIVIDUAL CRISIS EMERGENCY PLANS

Person-Centered Service Plans

The person-centered service plan (PCISP) should reflect the services and supports that are important to the individual to meet the needs identified through an assessment of functional need, as well as a reflection of what is important to the individual with regard to preferences. The team, of which the individual served is a member and

ADEC proudly advocates for and serves people with intellectual and developmental disabilities so they live lives full of informed choice and possibility

representative, should include risk factors and measures in place to minimize them, including individualized backup plans and strategies when necessary.

In the event of an emergency, ADEC will coordinate with case managers for HCBS services and BDDS and/or DOH for ICF services to support individuals and families. Per 42 CRF 441.725, it is the intent that all individuals served in residential settings including supervised group living (ICF settings) and waiver services in residential habilitation – hourly, residential habilitation – daily and participant assistance and care, have individual specific plans.

All ADEC individuals served person-center support plans are stored electronically and are available 24X7 through secure system – Sandata (Solana) Client Care.

Appendix K Flexibility – Administrative and Service Specific

As authorized by FSSA BDDS DDRS, ADEC may choose to implement services and flexibility in service protocol and administrative activities that are aligned with Appendix K or other state-approved flexibilities.

Flexibility, as defined by FSSA: Guidance for BDDS Providers on Temporary Policy Changes Related to COVID-19 and Appendix K, As of September 1, 2020, and BDDS Temporary Policy Changes Related to COVID-19.

Flexibility criteria decision making, and re-evaluation criteria will be based on current COVID-19 virus impacts specifically in Service Specific Flexibilities – if client or clients have tested positive or pending test results; and if client or clients are required to be quarantined; as well as administrative functions.

Flexibility options selected, the assigned ADEC Program Director will communicate with individuals, families, and teams within 24 hours of decision making.

ADEC in good faith, subject to staffing needs and client needs, will be able to offer for Service Specific Flexibilities:

Appendix K Flexibility Non-24 Hour Individual - Residential

1. Identified Remote supports, such as video and phone communications, alarms and/or sensors (with approval of Human Rights Committee if needed, and guardian) within 24 hours
2. Allow telehealth as a service delivery option when warranted as authorized by BDDS – to include Therapies – Recreational, Music and Behavioral; Community Employment Consultants
3. Contact potential family members to help at site within 24 hours
4. Send temporarily home to live with family member or guardian
5. Potentially relocate to a 24-hour site or allow services in alternative sites within 24 hours – this may include another HCBS setting or a Day Service facility or alternatives that would include rented space
6. Individual has capability and access to cell phone

Appendix K Flexibility 24 Hour Individual – Residential

1. Identified Remote supports, such as video and phone communications, alarms and/or sensors (with approval of Human Rights Committee if needed), and guardian) within 24 hours
2. Allow telehealth as a service delivery option when warranted as authorized by BDDS – to include Therapies – Recreational, Music and Behavioral; Community Employment Consultants; Wellness as well as medical with PCP and Health care providers with attendance including ADEC Nursing staff

3. Contact potential family members to help at site within 24 hours
4. Send temporarily to live with family member or guardian within 24 hours
5. Potentially relocate to a 24-hour site or allow services in alternatives sites within 24 hours – this may include another ICF setting or a Day Service facility or alternatives such as hotel settings
6. Explore group home option for short-term placement within 24 hours

Appendix K Flexibility Non-Residential Therapies and Employment

1. Identified Remote supports
2. Contact potential family members to arrange time
3. Potentially offer loan technology such as i-pads

Appendix K Flexibility Administrative

ADEC believes in supporting the entire field teams and the administrative and infrastructure teams to enable harmony in delivering our mission and services. In spirit, ADEC acknowledges that in a pandemic situation (such as covid) or in some natural or unplanned events – all ADEC employees, #teamADEC, are needed – all hands-on deck. If the field is working in the settings, then ADEC infrastructure personnel such as I/T, HR, finance, are also required to work in their office settings. There is minimal or limited ‘working from home.’ All managers and leaders have been enabled with technology such as ADEC paid cell phones and laptops that help ensure accessibility and helps ensure ADEC is able to maintain services as well as keep the agency running.

Additional FSSA flexibilities, specific to COVID-19 pandemic, are found in the separate detailed COVID-19 Policies, under 12.0.X, 12.0 – 12.10.

Flexibility Re-evaluation and Termination

ADEC may be terminated, or phased-out flexibility activities once quarantined period ends at a residential setting, with notification and communication to family, case managers and the specific client team 24 hours after achieving the quarantined requirements.

Termination and phase-out decisions will also take into consideration guidance from state and local officials, local health organizations / capacity, and others. It is ADEC’s intent that once the official Indiana Guidance for temporary policies changes expire, that these actions will be rescinded, and normal operations will be in place.

All changes are to be communicated to individuals served, family and/or guardian, and the teams within a timely manner, targeting with 24 hours of decision. Communication will be in writing – with communications being sent home, in person, from day services; emails to family/guardians; letters sent to ‘home’ address of clients and family / guardians; posting on ADEC website and social media. Communication will also be internal to impacted employees – to employees and managers through ADEC email and employee portal.

Residential Services – Temporary Housing

In the event ADEC must find temporary housing for individuals residing in group homes, ADEC has a working relationship with local hotels, such as Comfort Suites, to help facilitate emergency relocation. Specific to Comfort Suites North at 404 North Pointe Blvd. Elkhart, Indiana 46514, and Comfort Suites at 60971 US 31 South, South Bend, Indiana 46614 to provide temporary housing when a group home must be evacuated due to fire damage, residential problems and environmental and structural damage as defined as a Reportable Incident to the Bureau of Developmental Disabilities.

The procedure for relocating to the Comfort Suites:

- Program Manager notifies the Director of residential operations or Vice President to inform them of the need for a temporary residence
- The Director or VP will notify the Comfort Suites North (Elkhart) 574-206-1555 (South Bend) 574-291-3100 to arrange accommodations.
- If possible, ICF individuals served will move to the Comfort Suites location
- Pharmacy will be notified if medications could not be removed from the home

Relocation procedure

ADEC personnel will ensure that the following items accompany each individual:

Red Binder

Medications (including any liquid nutrition

Printed Medication Administration Records

All medical equipment including oxygen, CPAP, nebulizer, etc.

Personal care items i.e., briefs, catheter bags, ostomy supplies

Change of clothing and small comfort item

See Individual Specific Emergency Information sheets located in the emergency procedure binder for Supervised Group Living. For HCBS Residential Habilitation and Support Sites, see the red binder for individual specific information which is located at the 24x7 residential client homes.

Director of residential operations will ensure that guardians and/or family members are informed of the relocation. The Director will also ensure that all assigned personnel are informed of the relocation.

Residential Services – Supplies

For residential ICF setting, in an event, ADEC follows the required emergency food, medical and supply requirements set forth by regulations. The needed daily and two-week supply of food, water, and medications. In addition, any required Personal Protective Equipment such as masks, gloves, thermometers will be made available by ADEC. Addition supplies are available through ADEC Health Services and the nursing team.

For residential HCBS settings, in an event, ADEC will first contact family, guardian and/or natural supports to help facilitate the procurement and deliver of needed supplies. The assigned Q-Tech, Manager, and Director are responsible to ensure the health, well-being, and safety of individuals. In addition, any required Personal Protective Equipment such as masks, gloves, thermometers may be made available by ADEC. Addition supplies are available through ADEC Health Services and the nursing team.

Inclement Weather Procedure

ADEC Policy 10.2 Inclement Weather Procedure is committed to the provision of its services during all regularly scheduled operating hours. Inclement weather may dictate the cancellation of transportation services, but agency doors will be open for business and programs will be available for individuals served able to get to their respective program sites. An exception may be a county-wide state-of-disaster/emergency as declared by the county sheriff or other state/local officials.

To protect the health, safety, welfare, and well-being of the person served and employees, ADEC may, during periods of severe inclement weather, cancel transportation services. ADEC has a responsibility to the individuals served, family and guardians to provide services as scheduled. The agency will be open for business and programs unless the county sheriff declares an emergency or the President / CEO determines closure is advisable.

GENERAL “ALL-HAZARDS” – DISRUPTIVE EVENTS

An all-hazards approach is an integrated approach to emergency preparedness planning that focuses on capacities and capabilities that are critical to preparedness for a spectrum of emergencies or disasters, including internal emergencies and a man-made emergency (or both) and natural disaster. ADEC has identified those disruptive events that are more-likely-than-not to occur in service area – Elkhart County and St. Joseph County – and may impact residential sites and non-residential sites.

All ADEC personnel are responsible for individuals served in the building. All drills may be or can be actual drills or assimilated drills, where the potential scenario is discussed.

Detail information can also be found in the ADEC Safety Manuals located on the L: Drive or the Residential Manuals on site.

Natural or Man-made Disaster / Event

A. Fire, Explosion, and/or Bomb Threat

1. A residential site, group home or a non-ADEC leased apartment/housing, and the non-residential facilities may be equipped with one or more of the following fire safety alert and protection equipment:
 - a. Interconnected smoke detectors,
 - b. Fire extinguishers,
 - c. Pull stations to sound the fire alarm,
 - d. Single station, battery-operated detectors,
 - e. Sprinkler system with sprinkler heads and shut off
2. If there is a fire or smoke, or you receive a bomb threat in writing, via telephone, or verbally, **KEEP CALM!!!**
3. If there is a fire or explosion, **RESCUE** and move people from immediate fire area.
4. If there is a small fire, (less than the size of a basketball) and if ADEC personnel are able, fight fire with the proper extinguisher. The fire extinguisher is readily available in a designated area in each residential site.
5. If there is smoke or fire, **CONFINE** the immediate area by closing doors.
6. **ALERT** the building by pulling the fire alarm or activating smoke detector (if not already activated).
7. **EVACUATE** everyone from the building.
 - a. ADEC personnel will immediately go to any hearing-impaired person(s), sign "FIRE" and point to the nearest exit.
 - b. ADEC personnel will proceed to assure everyone leaves the building.
 - i. ADEC personnel will check all rooms, beginning with floor/area presently on and assure the entire house has been covered.
 - ii. If time allows, ADEC personnel will close all doors and windows.
 - c. ADEC personnel will move individuals to a safe, common space, may be outside at the site vehicle or at a pre-determined area.
 - i. Group home residents – outside at the site vehicle that has been REMOVED from any interior or covered garage or pre-determined area.
 - ii. Supported Living individuals – outside in front in the building or at the designated building emergency gathering area.

Meeting at a predetermined area is best for supervision and easier evacuation, but only to the extent that it is safe for the individual and ADEC personnel person. ADEC personnel will then assemble at the site's designated safe area and assure that everyone is present.

8. Call 9-1-1 from a neighboring location or other location if the building has been evacuated. Give the address and inform them that people who have disabilities live or work there.
9. Do not re-enter the building until given the approval from police or fire department.
 - a. If unable to re-occupy the building, ADEC personnel will assure individuals served are transported to a designated safe area, such as another ADEC group home, community shelter, police, or fire station.
 - b. If unable to re-occupy the building, ADEC personnel will assure residents are transported to assigned locations.
10. In the case of a **bomb threat** (via phone):
 - a. ADEC personnel will not touch anything in the residence and will proceed to assure everyone leaves the building immediately.
 - b. ADEC personnel will check all rooms, beginning with floor/area presently on and assure the entire house has been evacuated.
 - c. ADEC personnel will move individuals to a safe, common space (meet outside) for better supervision and easier evacuation, but only to the extent that it is safe for the individual and ADEC personnel person. ADEC personnel will then assemble at the site's designated safe area and assure that everyone is present
 - d. **Call 9-1-1 from a neighboring location or other location** if the building has been evacuated due to a bomb threat. Give the address as the location of the site and inform them that people who have disabilities live or work there. ADEC personnel and individuals are to remain outside of the building and at least one hundred feet away until further instructions are received from the police or the fire department.
 - e. Do not re-enter the building until given the approval from police or fire department.
 - i. If unable to re-occupy the building, ADEC personnel will assure persons served are transported (in case of bomb threat, do not get into personal or facility vehicles) to a designated safe area, such as another ADEC group home, community shelter, police, or fire station. If necessary, transportation to the location(s).
11. ADEC personnel will notify supervisory personnel, as soon as possible.
12. ADEC personnel will complete an Incident Report Form and submit the report to their supervisor and Director, Protective Services, within 24 hours of the incident.
13. ADEC personnel should also complete, if applicable, a Bomb Threat Report, as identified in Safety Manual Program, Policy 11.1 and give to emergency personnel.

B. Carbon Monoxide Exposure

Where possible, ADEC will monitor carbon monoxide detectors only in those residential sites and non-residential facility and administrative sites that utilize natural gas as an energy source. If the carbon monoxide detector sounds a loud alarm signal, it has sensed carbon monoxide. Only in rare cases will the detector ever false alarm.

IMPORTANT: As carbon monoxide levels start to build, the detector may sound intermittent alarm signals. This means that the detector is sensing some carbon monoxide. After several minutes, if carbon monoxide level continues to rise, the detector will go into full alarm. If the carbon monoxide detector sounds a loud alarm signal and you HAVE NOT pressed the test button:

1. **EVACUATE** the residence immediately.
2. **Consult a physician** if you or any individual is experiencing any symptoms of carbon monoxide poisoning. Carbon monoxide exposure/poisoning can cause the following symptoms:

- a. **Mild Exposure:** slight headache, nausea, vomiting, fatigue (often described as “flulike” symptoms).
 - b. **Medium Exposure:** severe throbbing headache, drowsiness, confusion, fast heart rate, cherry red skin color, especially around the mucus membranes of lips and eyes.
 - c. **Extreme Exposure:** unconsciousness, convulsions, heart and lung failure, brain damage, and death. Discuss these symptoms with all household members. If symptoms are significant, immediately follow the procedure for Accident or Serious Illness, Policy 7.2.2 Health Emergencies – Individuals served.
 - d. Many cases of extreme exposure to carbon monoxide have shown that while victims are aware, they are not feeling well, they cannot function well enough to exit the building or get help.
3. **Call the local gas or oil company from outside the residence** and ask them to determine the source of carbon monoxide.
 4. Do not re-enter the residence until the local gas or oil company says that the air is clear, and the problem corrected. If necessary, assure transportation to the other ADEC location(s) pre-determined in case of an emergency.
 5. After the danger has passed and you have been given permission for the local authority, you may re-enter the premises.
 - a. If the detector is not in alarm, press the test button for 5-10 seconds. The alarm should sound. This means that the sensor has reset, and the detector is working properly.
 - b. If the detector is still in alarm, unplug the unit to silence the alarm. Open as many windows and outside doors as possible. Any remaining carbon monoxide will prevent the sensor from completely resetting.
 - c. Try plugging the unit in after one hour. If the detector still alarms, unplug the unit and repeat after 2, 24, and 48 hours. As the sensor uses material like what the body uses to detect carbon monoxide, it may take from 24 to 48 hours to recover.
 - d. If the detector stays in alarm, beeps about once a minute, does not alarm after pressing the test button, or does not reset within 24 to 48 hours, contact a supervisor or the Maintenance Department.
 6. ADEC personnel will notify supervisory personnel, any on-call if applicable, as soon as possible.
 7. ADEC personnel will complete an Accident / Incident Report, and submit the report to their supervisor and Director, Protective Services, within 24 hours of the incident.
 8. If the source of the carbon monoxide was checked by a gas company, the Incident Report should include date, time, level of carbon monoxide, locations and sources checked, equipment used, and method of testing.

C. Accident or Serious Illness

ADEC is committed to the protection of its individuals. In the event of an accident, injury, or sudden extreme illness, ADEC personnel will deal with the incident in a manner which is most appropriate to immediate needs. ADEC personnel will cooperate with each other in assuring that procedures are carried through in a calm and organized manner.

ADEC will not disclose the medical condition of any individual receiving services or employees, except to treat the person, or to protect others from transmission of a disease (see ADEC policies 9.1, 7.2.3 and 2.1.7).

Detail procedures are in **Policy 7.2.2. which also includes the Accident/Illness Form.**

1. Render needed emergency care, for example - first aid to stop bleeding, Heimlich, etc. If you are not trained, immediately contact a ADEC personnel who is. **If CPR is necessary, call 911 first before beginning CPR.**
 - a. Note, it is an ADEC policy that all support care ADEC personnel have annual CPR training and First Aid training.
2. If emergency transportation and/or treatment is needed, **ADEC personnel will call 911.** Be prepared to give details of the emergency.
3. If the situation is not urgent, and ADEC personnel are able to transport, ADEC personnel should call the hospital and inform the on-call physician that he is bringing the person to the hospital; then, a ADEC personnel member will transport to the nearest medical facility
4. If medical treatment is needed, ADEC personnel will send or take a completed Medical Referral form, for the injured or ill person served - the individual's Medical (red) book, and the individual's medications (depending on urgency) in the site's vehicle, or ADEC personnel vehicle, depending on the site.; any helpful items such as poisonous substances, labels, etc.
5. Inform the individuals served' physician.
6. ADEC personnel will notify supervisory personnel as per Policy 7.2.2 Accident / Illness Reporting.
7. Supervisory ADEC personnel will notify family, case manager, guardian and other significant persons involved in the individuals served' care.
8. ADEC personnel will complete an Accident / Incident Report form for all accidents and will report to their supervisor and Director, Protective Services. For illnesses, ADEC personnel will document all pertinent information in the individuals served medical record.

D. Dangerous Weather Conditions

ADEC is committed to the provision of its services during all regularly scheduled operating hours. Inclement weather may dictate the cancellation of transportation services, but agency doors will be open for business and programs will be available for individuals served able to get to their respective program sites. An exception may be a county-wide state-of-disaster/emergency as declared by the county sheriff.

To protect the health, safety, welfare, and well-being of the person served and employees, ADEC may, during periods of severe inclement weather, cancel transportation services. ADEC has a responsibility to the individuals served/parents/guardians to provide services as scheduled. The agency will be open for business and programs unless the county sheriff declares an emergency or the President / CEO determines closure is advisable. This is identified in **Policy 10.2 Inclement Weather Procedure Policy.**

1. Severe Weather and Natural Disasters - (Required Annual training / drills / new ADEC personnel orientation)
 - a. At first sign of dangerous weather conditions – such as extreme temperatures, high winds, heavy snow/rain - or a natural disaster – such as a flood) - confirm the location and safety of individuals. If in a vehicle when these conditions are detected, try to reach shelter as soon as possible. If on the highway, pull off the road or stop under an overpass.
 - b. Listen to local/NPR radio station and/or television for current weather information.
 - c. Judgment dictating, require all or specific individuals served to remain indoors and, if necessary, in a location easily monitored by ADEC personnel.
 - d. Assure all windows and doors are properly closed and fastened.
 - e. Should television, radio warning, civil defense siren sound and/or ADEC personnel judgment dictates, give directions to take shelter. In case of severe weather, avoid sheltering near windows

or chimneys. Take shelter under stairwells, in closets, or in hallways. Cover your head. ADEC personnel should move all individuals to a designated “Emergency Shelter Space / Room.”

- f. Take the emergency kit, which may include flashlight, transistor radio, from the residential site and/or site vehicle (location).
- g. Turn on radio to local radio/NPR station. Listen for further instructions and the “all clear.”
- h. If damage to the site or area renders the site unable to be occupied and/or a safety/health risk for the people who live there, the program director and program coordinator will assure relocation to other ADEC services or other temporary housing in a safe place notifying involved team members. If necessary, assure transportation to the other ADEC locations.

2. Tornado

- a. The warning is a steady tone on the civil defense sirens for three to five minutes or the sighting of a tornado funnel. If in a vehicle when a tornado is sighted in the immediate area, Pull over in safe area way from power lines. Remain in vehicle with seatbelts on. Get below windows and cover head/neck. If you are outside with no place to go for cover, then lay in lowest part of ground, covering head/neck area to protect from flying debris.
 - b. Follow Severe Weather and Natural Disasters: Steps e, f, g, and h.
3. If injury or damage occurs, ADEC personnel will complete an Accident / Incident Report form and will submit it to the supervisor and Director, Protective Services within 24 hours. Should injury or damage be serious, a supervisor will be contacted immediately.

E. Additional Emergency Problems

1. **Water Disruption:** If there is no water available, use water from your prepared supplies. Notify the Office or the On-Call Supervisor. ADEC personnel should contact the local water company to report the issue. If water service is not restored within 24 hours, the ADEC personnel should seek alternative housing for persons served, such as hotel accommodations, with supervisory approval. If necessary, assure transportation to the other identified ADEC location(s).

- a. **Sprinkler Systems:** If a water disruption occurs in an ICF-MR that uses an automatic sprinkler system, a “fire watch system” will be implemented. This applies to situations where there is no water available due to water disruption and any other situation that would lead to the sprinkler system being out of service for any reason, including but not limited to a leak in the system, system malfunction, or maintenance requiring more than four hours. Specifically, the fire watch system will mandate that a ADEC personnel on duty at the site will make rounds of the entire site every 15 minutes and record their rounds. The fire watch duties will be that assigned ADEC personnel members only duties when this system is implemented, and that ADEC personnel person should not be responsible for their normal duties during that time.

- i. Notification of the implementation of this system must be made to the Program Director as soon as this concern is identified. If the water service is not operable for more than **10** hours within a 24-hour period, the Program Director will implement the Fire Watch System. The Program Director will identify one ADEC personnel on every shift to perform the duties of the Fire Watch system. The ADEC personnel will document their rounds on the Fire Watch Log.
- ii. The Program Director will be responsible for notifying the Program Coordinator, insurance carrier, local fire department, and ISDH that this system has been implemented.
- iii. [ISDH Online Incident Reporting System](#) must be notified by web reporting at:

- b. The following steps are to be followed for failure of the sprinkler system and/or fire alarm system:
 - i. Notify the Program Director and Director of Maintenance and Transportation

- ii. After **10** hours of the system being disabled, the fire watch procedure will begin and take place every 15 minutes. The trained ADEC personnel designated to conduct this will be identified at that time by the Program Director.
 - iii. A checklist will be utilized noting that the quarter hour checks has been completed and all areas on the interior premises, including all floors and the garage has been inspected. The check will end with a walk around the outside of the building and property.
 - iv. These checks will continue every 15 minutes until the fire system is adequately working. ADEC personnel will be trained on the fire watch system every 3 months during the review of emergency procedures at each home.
- 2. **Internal Flood:** In the event that an interior pipe breaks, and causes a flooding event to occur, ADEC personnel will immediately implement the relocation plan. If the facility is inhabitable, a temporary facility or residential setting will be sought.
- 3. **Ventilation Problem:** If smoke odors come from the ventilation system, **immediately call 911**. Vacate the home. If necessary, assure transportation to other identified ADEC location(s).
- 4. **Electrical Failure:** In the event of a blackout, loss of electrical power, remain calm. ADEC personnel should contact the local electric company to report the power outage and contact On-Call Supervisor. Use flashlights. If necessary, use food and water from your prepared supplies. Use coats and blankets, if necessary, to keep warm. Use a battery-powered radio. Stay away from downed power lines. Each home must assess the need for an alternative power source in the event of a power outage. The assessment should be based on the individuals served medical requirements, e.g., suction, nebulizer treatment, pressure mattress, etc. If it is determined that a power outage would create a medical emergency for the individuals served, the home should either have a small generator or the home should be evacuated immediately.
 - a. If power is not restored within 24 hours, the ADEC personnel should seek alternative housing for persons served, such as hotel accommodations or other ADEC locations, with supervisory approval. If necessary, assure transportation to the location(s) listed in section A.9. Fire Alarm Systems:
 - b. If the electrical failure occurs in a supervised group living home, a “fire watch system” will be implemented. This applies to situations where the fire alarm system is out of service for more than 4 hours in a 24-hour period due to an electrical failure, or at any time that the alarm system is out of service for any other reason, including but not limited to a lightning strike, other system malfunction, or for maintenance requiring more than four hours.
 - i. Specifically, the fire watch system will mandate that a ADEC personnel on duty at the site will make rounds of the entire site every 15 minutes and record their rounds. It may be determined at the time of the emergency, that the fire watch duties will be that assigned ADEC personnel members only duties when this system is implemented, and that ADEC personnel person should not be responsible for their normal duties during that time. Notification of the implementation of this system must be made to the Program Director as soon as this concern is identified.
 - ii. If the electrical service is not operable for more than 4 hours within a 24-hour period, the Program Director will implement the Fire Watch System. The Program Director will identify one ADEC personnel on every shift to perform the duties of the Fire Watch system. The ADEC personnel will document their rounds. The Program Director will be responsible for notifying the Program Coordinator, insurance carrier, local fire department, and ISDH that this system has been implemented.
 - 1. ISDH Online Incident Reporting System must be notified by web reporting at: <http://www.in.gov/isdh/23638.htm>
 - c. Fire watch procedures: The following steps are to be followed for failure of the sprinkler system and/or fire alarm system:

- i. Notify the Program Director and Maintenance Director
 - ii. After 4 hours of the system being disabled, the fire watch procedure will begin and take place every 15 minutes. The trained ADEC personnel designated to conduct this will be identified at that time by the Program Director.
 - iii. A checklist will be utilized noting that the quarter hour checks has been completed and all areas on the interior premises, including all floors and the garage has been inspected. The check will end with a walk around the outside of the building and property. ADEC personnel will sign off that this has been completed, on the checklist.
 - iv. These checks will continue every 15 minutes until the fire system is adequately working. ADEC personnel will be trained on the fire watch system every 3 months during the review of emergency procedures at each home
5. **Telephone Failure:** Use a neighbor's phone or cell phone if available to call the On-Call Supervisor. If there is no phone in the area working nearby, stay in the home and keep everyone in the home calm.
6. **Public Transportation Failure or Temporary Gasoline Shortage** (for supervised group living homes only): Contact office or On-Call Supervisor. We recommend that Directors/Managers keep gas tanks ½ full or above. This can prevent gas line freeze in winter. It may also be helpful in evacuating people or in assisting ADEC personnel to get to work. ADEC personnel need to remain at work past the end of their work shift until another person can arrive.
7. **Hazardous Material Accident:** Any spillage of a hazardous chemical or radioactive material should be reported immediately to the police and fire department, **911**. Assist all people in exiting the affected area. Do not panic. Once outside, move to a clear area at least five hundred feet away from the affected area. Do not return unless told to do so by emergency personnel. If the hazardous material accident occurs outside, head inside immediately. Close all windows and doors. Shut off the ventilation system. Fashion a low-tech gas mask for yourself and all people you are supporting. Crumple a shirt or any other material at hand into a ball and hold it over your nose and mouth. Wetting it will get you more protection
8. **Wide-Spread Area, Internet Failure:** it is recognized that this would be a significant issue to address as nearly all elements of society are now dependent upon internet and cell phone ability to communicate, document and connect.
 - a. Plans are being implemented to ensure that in ADEC own residential facilities, such as supervised group living, that if a land line is installed, that non-battery phones are readily available to plug in and use.
9. **Trash Removal:** In the event trash removal systems are disrupted in excess of one week, maintenance ADEC personnel will be notified so that the trash may be removed and placed in facility owned dumpsters.
10. **Disposal of Sewage:** In the event there is a disruption in the sewage provided either by the city or septic system that cannot be resolved by general maintenance of a licensed plumber or septic company, the facility will follow the plan for relocation until the issue has been resolved.
11. **Shelter In-Place:** In the event we are told by emergency management that we are to shelter in-place, the "shelter-in-place" protocol will be followed in each designated area. For Supervised Group Living, see each residential setting's emergency procedure binder for site specific information.

F. Missing Persons

1. ADEC personnel on duty must determine the appropriate time to begin a search, based on the weather, time of day, and the individual's abilities, habits, needs, etc. A search for a missing person-served will begin immediately if not otherwise noted or specified in the individual's PCISP or BMP as an acceptable behavior management technique. An individual's PCISP or BMP may allow the individual to go for a "walk" from their site without ADEC personnel supervision to regain/diminish specific behaviors. A specified amount of time must be indicated on the individual's ISP, for ADEC personnel to allow the

individual to leave the site, if receiving 24-hour supports. If a person's whereabouts is not known and that person has not been seen in the building within the number of hours or minutes specified by the PCISP or BMP, the ADEC personnel on duty shall begin a search for him or her. ADEC personnel should begin by:

- a. Checking with other people he or she live with.
- b. Checking with last place the individual was known to be.
- c. Checking the individual's immediate neighborhood. If a ADEC personnel person on duty is supervising more than one individual, and there are no other ADEC personnel present who can remain with the other individuals while the ADEC personnel person searches for the missing individual, then ADEC personnel should stay with the remaining individuals served and move directly to **calling 911**.
2. ADEC personnel will contact supervisory personnel, as soon as possible.
3. ADEC personnel will notify missing persons by **calling 911**.
 - a. Explain individuals served level of disability, including diagnosis, physical and/or mental disabilities, circumstances and action taken thus far.
 - b. Provide physical descriptions and / or Photographs, as authorized, from the individual's personal file.
4. Supervisory ADEC personnel will notify family, guardian, or other responsible parties as needed.
5. All actions will be documented as they are taken in the individual's master files.
6. ADEC personnel will complete an Accident / Incident Report form and submit it to the supervisor and Director of Protective Services.

G. Death

Policy 6.2.2 Case Record Closure Upon the Death of an Individuals served is ADEC's policy for when an individual served master file is closed if an individual served dies and no new information is entered it from the time of death forward. The purpose of this policy is to ensure the veracity and accuracy of the case record contents especially those leading up to the death of the individuals served.

It is the responsibility of the above service organizations to ensure those policies are carried out for each of the individuals served they have primary program management for.

1. In the event of an individual served is suspected to have died in a residential setting, ADEC personnel on duty will:
 - a. Contact emergency help by **calling 911**. Be prepared to give a description of the person's condition.
 - b. Initiate CPR. You must always initiate CPR.
 - c. Do not touch or change anything in the area surrounding the individual, if possible.
 - d. Upon arrival of emergency service personnel: notification of coroner by EMS will be completed by EMS and removal of body will be completed according to state or county regulations.
 - e. Complete an Accident / Incident Report, documenting date, time, and specific circumstances. Note what actions were taken to revive the person and what people/agencies were called. Follow procedures described in Policy 7.2.2.
 - f. ADEC personnel will notify supervisory personnel and Director of Protective Services.
 - g. Supervisory personnel will:
 - i. Notify the individual's next of kin, guardian, physician, case manager, state reporting agencies, and other responsible parties immediately.

- ii. If a supervisory ADEC personnel cannot be reached immediately, the ADEC personnel on duty will do this.
- h. The Program Director/QMRP will complete incident reporting to state agencies noting what actions were taken to revive the person, what people/agencies were called, who determined the death and on what objective basis, and the actions taken once death was determined.
 - i. See that personal belongings are handled in a responsible and legal manner.
 - ii. Assist in making funeral and burial arrangements if requested and/or necessary.
 - iii. If an autopsy is performed, based on wishes of guardian and/or others, secure a copy for the record.
 - iv. Records of a deceased individual will be retained for a period of 7 years following death, according to Policy 6.2.2.

H. Medications

Policy 7.2.1 Medication Administration Policy is the policy of ADEC to ensure the safe administration of therapeutic medications to its person served in accordance with all legislative and regulatory requirements. ADEC does not prescribe medication but does dispense and administer medications for many of its person served. When required ADEC also maintains physical control of medication self-administered by persons served.

In the case of an emergency or disruptive event, every attempt will be made to maintain regularity in the disbursement of medications. A hardcopy of the medication requirement for individuals served in supervised group living or 24X7 residential supportive living will be maintained.

Air-Borne Virus / Flu

Transmission-based precautions

The spread of the flu or virus can shift to 'community transition. The best ways to protect yourself are to:

- I. Clean your hands often
 - o **Wash your hands** often with soap and water for at least 20 seconds especially before and after you have been in a public place, or after blowing your nose, coughing, or sneezing.
 - o If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol**. Cover all surfaces of your hands and rub them together until they feel dry.
 - o **Avoid touching your eyes, nose, and mouth** with unwashed hands.
- II. Cover coughs and sneezes
 - o **Cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow.
 - o **Throw used tissues** in the trash.
 - o Immediately **wash your hands** with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.
- III. Clean and disinfect
 - o **Clean AND disinfect frequently touched surfaces daily**. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
 - o **If surfaces are dirty, clean them**: Use detergent or soap and water prior to disinfection.
- IV. Contact with illness
 - o **Avoid** close contact with people who are sick,
 - o **Stay** home when you are sick – follow ADEC guidelines

In addition, ADEC may choose to limit visitation access, community-based activities, and volunteer engagements. ADEC may also have to alter programming services to minimize risks. This could possibly include temporarily suspending our facility-based services, transportation, and other services. ADEC will monitor the situations and revise procedures as appropriate.

If attending a public event, encourage the use of “method of greeting” for that group. It might be an elbow bump, Spock’s Vulcan “live long and prosper” greeting, or a “jazz festival jig.” In addition, ask about extra hand-wash stations. If possible, have the people spread out a little more in the space.

Influenza

The best way to prevent getting influenza is by getting the vaccine. The CDC recommends getting the flu vaccine by the end of October. It takes approximately two weeks for the antibodies that protect against the flu to develop. Getting it later may still be of benefit since the flu season lasts through May.

Careful and frequent handwashing along with covering your mouth when coughing or sneezing can cut down on the spread of influenza or

Many insurance companies cover the cost of the influenza vaccine. Walmart, Meijer, CVS, and Walgreens have walk-in hours for immunizations. Many doctors’ offices have nurse visits for vaccines. Consider getting the flu vaccine for your protection and the protection of your families and person served.

In the event of an outbreak of influenza:

1. Droplet precautions should be implemented for person served with suspected or confirmed influenza for seven days after illness onset or until 24 hours after the resolution of fever and respiratory symptoms, whichever is longer.
2. Symptomatic person served should stay in their own room as much as possible and have meals served separately from other person served. Place ill person served in a separate room if possible. If this is not possible, they may be placed in a room with another person served who has been diagnosed with influenza.
3. The PCP of the roommates should be contacted to advise of a positive influenza diagnosis and to request an antiviral for the roommates if possible.
4. Limit activities outside the person served’s room.
5. PPE such as surgical masks should be worn when entering the room of a person served with influenza. Remove face mask when leaving person served’s room and dispose of in a waste receptacle. If the person served needs to leave their room, a surgical mask should be worn. Wear gloves if hand contact with respiratory secretions is possible.
6. Frequent careful handwashing should be practiced by ADEC personnel and person served

Pandemic – Long-term Events

Policies specific to the pandemics, such as the Coronavirus 2019 (COVID-19) that subsequently spread across as a global pandemic, are uniquely identified in a separate supplemental policies.. Specific to COVID -19, the policies are identified in Section 12 – 0 Coronavirus Pandemic.

Coronavirus disease 2019 – COVID-19

Coronavirus is a type of respiratory illness. The typical or common coronaviruses circulate among humans and cause mild illness, like the common cold. Human coronaviruses most commonly spread from an infected person to others through:

- Respiratory droplets released into the air by coughing and sneezing;
- Close personal contact, such as touching or shaking hands;
- Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands; and
- Rarely, fecal contamination

Detail ADEC Agency supplemental policies and procedures for this pandemic are identified in Policy Manual, Policies 12.0.

EP & MP CHECKLIST

The following checklist is guidance that may be used to help ensure that elements of the EP&MP are complete and ready to be implemented if needed.

- Establishment of an Agency Level Emergency Management Plan
 - ADEC EMP annually reviewed and updated
- Robust Safety and Emergency Training across all programs
 - A developed training and testing plan
 - EMP training program
 - Emergency preparedness Testing
- Administrative / Operation Critical
 - Critical Task List for all functional areas
 - Critical Contact List of Executive Team, Program/Service Leadership Team
 - Contact Information for each facility services location
 - Contact for On-Call
- Personnel / ADEC
 - Re-assignment list
 - System to preserve, protect, secure medical documentation
 - Policies and procedures for use of volunteers
- Residential Operations
 - Facility specific policies and procedures for residential settings (group homes and 24X7 supportive living) and facility-based services (Day Services and ADEC Industries)
 - Subsistence needs for ADEC personnel and individuals served at residential group homes
- Facilities / Non-Residential Operations
 - Address what services facility would be available to provide 'quarantine' or emergency holding services
 - Established procedures for tracking of ADEC personnel and individuals served within the facility during an emergency and upon movement to another facility
 - Plan for safe evacuation
 - Identification for and providing for sheltering in place
- Person served / Individuals Served
 - Arrangements with other ADEC facilities or non-ADEC facilities to receive individuals served
 - Consideration for Section 1135 DHHS Waiver
 - Method to share medical documentation
 - Method to share occupancy needs

- Method for sharing appropriate EP&MP information with individuals served families and guardians
- County / Local Officials
 - Includes cooperation and collaboration with Government Officials
 - Integrated Health Care Systems
- Communication Strategy
 - Media Statements – External media (all forums)
 - Communication plan with individuals served families, guardians, physicians
 - Communication plan to employees and Board of Directors
 - Communication plan with official contacts
 - Primary and alternate means for communication

ADEC ESSENTIAL EMPLOYEE VERIFICATION LETTER

**ADEC****19670 STATE ROAD 120 | BRISTOL, IN 46507**
574.848.7451 | FAX 574.848.5917

January 1, 2022

To Whom It May Concern,

Please accept this letter as verification that the person holding this letter works in an essential position providing critical long-term supports and services to individuals with intellectual and developmental disabilities on behalf of ADEC. This employee is scheduled to travel to and from their work site outside of usual business hours as part of their job responsibilities.

ADEC is a community-based provider of essential long-term supports and services to people with intellectual and developmental disabilities. A large portion of the individuals ADEC supports live in residential settings that require a trained employee to be physically at the site to conduct their assigned job responsibilities 24 hours a day, seven days a week.

If you have further questions, you may contact the on-call service for ADEC's Residential programs at one of the following numbers:

- St Joseph Group Homes: 574-349-5081
- Elkhart Group Homes: 574-536-2922
- Supported Living: 574-536-6026

Thank you.

Sincerely,

Lisa Kendall

Lisa Kendall, SHRM-CP
Vice President of Human
Resources ADEC, Inc

www.adecinc.com

ADEC proudly advocates for and serves people with intellectual and developmental disabilities so they live lives full of choice and possibility.